



# Making Zero Count

Working Towards  
Ending Homelessness



**TURNER** | STRATEGIES

# Acknowledgements



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Lived Experience Circle on Homelessness  
Youth Advocates for Housing  
Journey Home  
The City of Kelowna  
A Way Home Kelowna  
Lived Experience Council of British Columbia  
YMCA Regina

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End Homelessness Winnipeg  
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# Foreword:



What does it mean to end homelessness?  
How can we measure it? How can  
communities see progress in this area?  
What does it look like on the ground?

These questions have spurred three years of work, led by the Canadian Observatory on Homelessness (COH), and a number of national partners, including the Canadian Alliance to End Homelessness (CAEH), the Calgary School of Public Policy, and Alina Turner (Turner Strategies). Most recently, these questions became the core of the Making Zero Count project - an initiative aimed at asking communities across the country what it means to end homelessness.

The COH had the privilege of engaging with several communities to explore the creation of a definition and measurement of an end to homelessness in Canada. Despite using an individualized approach within each community, the themes that surfaced were surprisingly similar. Making Zero Count's aim began as a way to refine a working definition of ending homelessness. Instead, communities have taken the conversation to the next level. As a result, this handbook is meant as a community-directed resource so that you can begin laying the groundwork to creating a framework for ending homelessness.



## Overview:

**Communities reflected that a shift in how we think about homelessness is needed before a framework can be established.** They also made clear that ending homelessness is bigger than housing supply and demand. It is also more than ensuring people experiencing homelessness, or at-risk of experiencing homelessness, have the supports they need. It goes beyond getting good data. While these are all critical components to ending homelessness, these alone cannot achieve a true end to homelessness, either at an individual or macro level.

**Ending homelessness requires strong community involvement.** It requires spaces for people who have experienced marginalization to be integrated and connected with communities. We heard from communities that people having a sense of connection and belonging is as relevant to staying housed as a safe place to live. Stories have emerged again and again about how the desire for connection can lead people back to their street community, especially when they feel a sense of isolation from independent housing.

**As the homeless-serving community, we can and must do better.** We set out to refine a definition and measurement of an end to homelessness but have landed in a different place. Because communities spoke about ending homelessness as a goal that is both possible and critical, we have shifted from a definition of ending homelessness to instead laying the foundation for a framework that captures this new dynamic.

This paper, a living document, presents the groundwork that is needed to create a framework in the future. We have heard from communities that this framework can, and should, continue to evolve as we develop stronger and stronger responses to homelessness in Canada.

# Resource 1

## Background of Making Zero Count

The Canadian Observatory on Homelessness (COH) received funding from the Homelessness Partnering Strategy (now called Reaching Home) in 2017 for the Making Zero Count Project - an initiative aimed at refining a definition for ending homelessness, specifically the concept of Functional Zero. This project builds on the work completed by the COH, the Calgary School of Public Policy, and the CAEH in 2015. These groups conducted a comprehensive literature review of community plans to end homelessness and carried out widespread community consultations looking to deepen the understanding of what Functional Zero means.

This early work demonstrated that of 60 existing community plans to end homelessness, there was no consistent way of describing and understanding Functional Zero. Further, during community consultations, participants shared that the definition of ending homelessness must extend beyond re-housing rates alone. Rather, a comprehensive understanding of ending homelessness needs to incorporate other dimensions.

**Alina Turner (Turner Strategies) developed the following definition of Functional Zero based on these early consultations in 2015:**



### Lived Experience

Those who interact with various systems experience seamless and rapid access to necessary supports and housing to prevent/end their homelessness.

### Homeless Serving System

Homeless serving-system partners operationalize a high functioning optimized system to meet individual and family needs.

### Public Systems

Government and other public systems embrace the value of housing stability and ensure adequate supports are in place to prevent and end homelessness across departments and policy areas.



**More simply, Functional Zero can be defined as:**

“ A community where homelessness has become manageable in that the availability of services and resources match or exceed the demand for them from the target population. Further, such resources are optimized, performing as intended with maximum efficacy<sup>1</sup>. ”

It reflects the feedback from community consultations that ending homelessness requires the presence and integration of other Public Systems that intersect with homelessness in various ways. In particular, the Public Systems dimension captures the reality that often people are discharged directly from other public systems into homelessness, such as healthcare, correctional services, and child welfare. Further, the integration of a Lived Experience (LE) dimension, demonstrates the way in which LE feedback can be an ongoing form of performance management for the success of the homeless-serving system.

Using this early working definition, the Making Zero Count project began in the summer of 2017. We formed partnerships with the following five communities:

- ▶ Kelowna, BC
- ▶ Regina, Saskatchewan
- ▶ Winnipeg, Manitoba
- ▶ Waterloo, Ontario
- ▶ Saint John, New Brunswick

The project was also an opportunity to develop resources that would support communities in their work of ending homelessness. Based on community feedback, we developed the Making Zero Count Handbook to support communities to address specific barriers in their work to end homelessness.

1. Turner, A. Pakeman, K., & Albanese, T. (2017). Discerning 'Functional Zero': Considerations for Defining and Measuring an End to Homelessness in Canada. Retrieved from [https://homelesshub.ca/sites/default/files/Functional\\_Zero.pdf](https://homelesshub.ca/sites/default/files/Functional_Zero.pdf)

# Resource 2

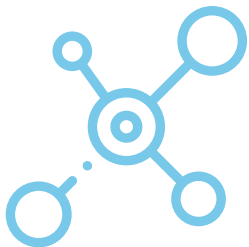
## Making Zero Count Handbook Resources

Three resources make up the Making Zero Count handbook. Each resource aligns with a dimension that may be used in a future framework and is based on feedback that we heard from communities.



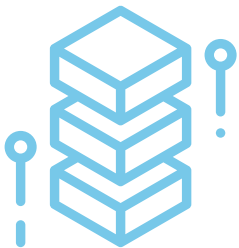
### 1) User Design Toolkit (Lived Experience Dimension)

This resource outlines each step in the process to develop the User Simulation Activity, which was used for the Making Zero Count Project. The value of using an exercise like this was repeatedly affirmed by community members. Community members shared that the simulation goes beyond “head knowledge” for how to end homelessness. It challenged the often subtle and subconscious beliefs and attitudes that reinforced stigmas for those experiencing homelessness. The experiential aspect of the simulation is a key part of building greater empathy for people experiencing homelessness.



### 2) Service Coordination Resources (Homeless-Serving System Dimension)

In alignment with the Homeless-Serving System dimension, this resource provides useful resources to facilitate greater coordination when multiple frontline workers from different agencies are working with a single person.



### 3) Memorandum of Understanding (MOU) Development Resources (Public Systems Dimension)


This resource provides strategies and tools for engaging public systems to develop stronger inter-system response. It outlines strategies to build a case for coordination and buy-in with various public systems, by drawing on data demonstrating the links between public systems and discharges into homelessness. This resource also provides an MOU template with a public system to formalize greater coordination.



# Resource 3

## Engaging with Indigenous Partners

We also partnered with Indigenous leaders to host a Roundtable in November 2017 in order to discuss defining an end to homelessness from an Indigenous lens. Developed in partnership with Ma Mawi Wi Chi Itata Centre (Ma Mawi) and the Social Planning Council of Winnipeg (SPCW), early discussions revealed that the working definition of Functional Zero did not capture the complexities and specific systemic challenges that may lead to Indigenous Peoples experiencing homelessness. A separate consultation process was necessary to further explore this connection.

 **A central concept discussed at the Indigenous Roundtable was that conceptualizing the “end” point to Indigenous homelessness reflected a linear way of thinking which was out of sync with a variety of Indigenous worldviews.**

Indigenous partners discussed the ways in which a person's homelessness is part of an ongoing journey and may not necessarily have an end point in the way Western societies view Functional Zero. In order to address this gap in cultural competency, we recommend that prior to engaging with Indigenous partners, communities must have a clear understanding of the [Definition of Indigenous Homelessness in Canada](#)<sup>2</sup>.

This also led to the conclusion that expanding the understanding of Functional Zero from an Indigenous perspective needed a separate, Indigenous-led process entirely. While this was beyond the scope of the Making Zero Count project, it informed the direction of future work with Indigenous partners and demonstrates an opportunity for reframing for further work related to Functional Zero.

2. Thistle, J. (2017.) *Indigenous Definition of Homelessness in Canada*. Toronto: Canadian Observatory on Homelessness Press.

# Resource 4

## Developing the Making Zero Count Process

Early on, we realized the need to work closely with communities and engage them **where they are at**. The work began with a focus on testing the working definition of Functional Zero with the proposed indicators. As the consultations rolled out, it became clear that this was too prescriptive. Communities were focused on providing critical services to people experiencing homelessness every day, and the Making Zero Count Project needed to be useful for service providers within that reality. Early feedback focused on the idea that the definition was a more abstract conversation, and it needed to be connected to the daily reality of service providers.



In order to ground the process, we focused our approach by speaking and engaging with people with lived experience first. The Making Zero Count project integrated and adapted principles central to Human-Centered Design thinking. While this form of thinking originated in the field of ergonomics and computer science artificial intelligence, it has since spilled over into a variety of different fields where complex problems require unique and innovative solutions<sup>3</sup>. As the name suggests, Human-Centered Design is a process of design development which focuses on the quality, usability, and knowledge of the end user<sup>4</sup>.

Human-Centered Design incorporates empathy building and understanding of the end user experience<sup>5</sup> as central to the process of developing solutions. As a result, we focused on working in partnership with people with lived experience from the very beginning of this project. Often in the homeless-serving sector, the experience of building an understanding of people who have experienced, or are experiencing, homelessness is listening to their stories.

When accessing services, individuals experiencing homelessness often have to tell and re-tell their personal stories. However, the challenge of this process often means that service users within the homeless-serving system are continuously re-traumatized. In order to build a deeper understanding of the blind spots and gaps within the system, there needs to be an opportunity to engage interactively with a person's story that does not simply mimic the experience of service provider and user, where the service user continuously gives and the service provider continuously takes. Further, the power dynamic between service provider and service user is reinforced through the one-sided telling of one's story. When a service user has to tell and re-tell their story, they are put in a position of receiving, instead of being an active agent in the process.

## Complicating Power Structures

Our focus with Making Zero Count was to find a way to complicate this power structure. We wanted to find a thoughtful way for people with lived experience to be at the forefront of the process and for service providers and systems leaders to engage differently with the experience of challenges and barriers of the system. As a result, we built the process in partnership with people with lived experience.

In three of the five communities, we turned the working definition into a series of interview questions. We wanted to understand how the current system was working towards the goals outlined in the dimensions. We started with the narratives of people with lived experience in small group conversations rather than putting people on the spot to tell their stories.

The key ideas that resonated in these conversations were around the ways that people experience obstacles in accessing supports and the subtler, intangible ways that people experience judgement, shame, and re-traumatization when accessing the system. In order to understand this on a deeper level, lived experience leaders stressed that the process of Making Zero Count had to reach beyond intellectual, “head” knowledge.

### User Simulation Activity

We wanted to create an interactive space to feel the reality of unseen barriers to services as a vehicle to build empathy for people with lived experience. How did we do this? Based on these conversations, we developed a series of scripts in each community where participants had to interact with the various systems at play in ending homelessness. These scripts revolved around various storylines, where participants were provided with a “profile” of a service user experiencing or at-risk of experiencing homelessness and asked to navigate complex systems in order to obtain basic resources, such as income support, housing access or healthcare.



These were set up in each community as a simulation activity in which each person participating received a profile, out of three major profiles, that were developed based on the series of storylines. There were volunteer “service providers” who also had scripts and were tasked with responding to people who came to access resources in the simulation.

## Process as Change Management - Experiential Learning is critical to tapping into these pieces:

After spending a morning walking through this process, we then held a facilitated session, where each group was led by a person with lived experience to debrief the process.

While the clear, concrete obstacles were outlined quickly in the debrief process, it was striking how many people commented on the subtle, second layer of stigma that they faced in the simulation exercise. This was further emphasized by having leaders with lived experience guide these discussions. The process created an opportunity for a deeper exchange of understanding between service providers and community leaders and people with lived experience. The simulation exercise moved beyond having people with lived experience share their stories, and instead, it asked others to interact with those stories.

The debrief became the basis of the remainder of the facilitated consultation, in which we focused our efforts on problem-solving based on the tangible obstacles that people engaged with during the simulation activity. We had created a context where a discussion of ending homelessness and the ways to get there became much more grounded in the day to day, and participants had a number of key ideas that resonated in each community.

3. Bazzano, A. N., Martin, J., Hicks, E., Faughnan, M., & Murphy, L. (2017). Human-centred design in global health: A scoping review of applications and contexts. *PloS one*, 12(11), e0186744. doi:10.1371/journal.pone.0186744

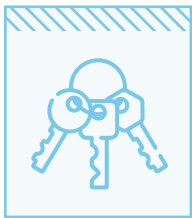
4. International Organization for Standardization. ISO 9241–210:2010—Ergonomics of human-system interaction—Part 210: Human-centred design for interactive systems. Geneva: International Organization for Standardization; 2010.

5. Kolko J. (2015). Design Thinking Comes of Age. *Harvard Business Review*.

# Resource 5

## What We Heard - Key Themes

In every community there were a variety of unique pieces that arose, but the dominant themes were consistent. These ideas not only formed the groundwork for a future framework, but it also created important opportunities for future innovation and research for communities. Ending homelessness is not about one single action. It is a number of mutually reinforcing activities that are aimed in the same direction. We believe that a framework created out of the Making Zero Count project could highlight three critical dimensions that must all be in place to see a lasting end to homelessness for an individual. Further, these three dimensions will all need to be impacted if change is to be made at the macro level as well.



The following are key dimensions that were present in every community:

### **1. Co-Leadership with People with Lived Experience is required to end homelessness.**

Participants in all of the consultations repeatedly spoke about the need for sustained, co-leadership of people with lived experience in systems planning for the homeless-serving sector. It was noted that this was critical to change the subtle ways in which power and stigma are reinforced throughout the system. As well, without true opportunities for people with lived experience to be leveraged for their expertise as leaders in the development of programs, policies, and system responses, it is difficult to ensure that communities are developing responses that are effective.

The process of developing clear leadership and facilitation roles with people with lived experience during the simulation activity was also an attempt to provide concrete strategies for how this can be done in communities. One community service provider commented that this approach of co-leading with people with lived experience “...is the best engagement of people with lived experience I’ve seen.” This was encouraging to hear, but also reflects the intentionality that went into the process.

As discussed above, too often engagement with people with lived experience looks more like representation, or at worst, tokenism. This was repeatedly named throughout the consultations. Not enough support and resources are put into ensuring that people have a meaningful voice at the table. This does not mean inviting everyone to the conversation. It does mean, however, creating and aligning roles with people’s skill sets in order to ensure that everyone can meaningfully and constructively contribute to ending homelessness.

## **2. Developing a sense of belonging is critical to sustaining an end to homelessness.**

Many participants discussed that a sense of belonging or connection to community beyond homelessness service providers was critical to maintaining housing. In many cases, the need for connection with others was powerful enough for certain individuals to want to go back to experiencing unsheltered homelessness, even after being safely housed.

A sense of belonging also impacted the resources service users were able to obtain. Resources, both tangible and intangible, were often tied to relationships and networks and extended to social capital<sup>6</sup>.

## **3. The system is very uncoordinated and often unable to respond quickly to crisis, because of limited resources, and lack of communication.**

People with lived experience have to navigate a very complex array of services. Further, the length of time referred to as “hours in line ups” by one person with lived experience was built into the way that the simulation activity was developed. It was important to make tangible the level of waiting and frustration that many people expressed was a normal part of experiencing homelessness and navigating services.

The reality that the simulation activity revealed right away is the sheer exhaustion and frustration of navigating a system that is uncoordinated and often contradicts itself. Participants who acted as service providers also spoke to how powerful it was to understand “the full journey that people were going through prior to coming to my agency”.

The recognition that when a person arrived at one agency, they were carrying the burden of a lengthy, complicated and often discouraging process prior to their arrival. Service providers spoke about how this made them better understand the level of frustration or anger that service users often expressed feeling. These multiple barriers that service users experienced resulted from the lack of communication between agencies. As a result, community planning processes and resources are needed that identify the barriers that get in the way of people getting housed, and support communities towards greater coordination both at the systems level and in frontline work. The interaction with other related public systems often led to homelessness due to a lack of proper transition planning.

6. Patterson, M.L., Moniruzzaman, A. & Somers, J.M. *Community Mental Health Journal* (2014) 50: 604. <https://doi.org/10.1007/s10597-013-9672-9>

# Resource 6

## Groundwork to Framing the End to Homelessness

After hearing a consistent set of themes in each community, we began to see how these ideas could be integrated into a refreshed understanding of ending homelessness. As a result, we wanted to move from a formal definition of ending homelessness (i.e., Functional Zero) to beginning the conversation around creating a framework. This framework will need the space to continue to evolve as communities become increasingly sophisticated in their responses to homelessness. We consider this a living document in that changes should be made according to each community's specific needs and goals. Ending homelessness as a concept will continue to change and grow, and this needs to be captured in how we think about it.

We can foresee this framework being an exciting way to think about how the broader community, specifically those with lived experience, is an important part of ending homelessness. It cannot be left to the homeless-serving sector and public systems alone. However, public will and commitment to engage people in authentic ways in the community is a critical part of ending homelessness. Look no further than the private Refugee Sponsorship program - unique to Canada - to see that members of the public want to and can be a part of welcoming people often on the margins of society. This is an exciting area of work to be further developed. We hope that by refining the definition in this way, we are opening up further opportunities for creative responses such as this for communities to take up.

Finally, after using the language of Functional Zero in each community, we have decided to move away from that term. By moving to a framework for ending homelessness in future conversations, we want to enrich the dialogue around ending homelessness, and in part, recognize that it is complex and multi-faceted. Our consultations demonstrated that trying to capture these ideas with a single measure may not make sense here, and the revisions to this handbook reflect this. As a result, we recommend that a future framework to ending homelessness encompasses three dimensions: lived experience, homeless-serving system and public systems.

### Lived Experience Leadership & Feedback



# Resource 7

## Co-Leadership Indicators

Co-leadership is the next logical step to creating a future framework. Engagement is the dominant form of lived experience participation at this stage. In contrast to the original definition of Functional Zero, a future framework could integrate lived experience expertise, leadership, and feedback throughout each of the three dimensions. As became clear throughout our consultations, this component of systems planning to end homelessness cannot be tokenized, rather, it must become a fundamental piece of how communities respond to homelessness.

As a result of these conversations, we have also proposed adding a third dimension to a future Functional Zero framework: Lived Experience. The need for authentic, sustained, community connection and engagement were raised repeatedly by communities as critical to seeing an end to homelessness. The need for engagement with non-service providers in order to cultivate both a sense of belonging and increased social capital were identified as key aspects of ending homelessness.

A follow-up discussion paper<sup>7</sup> captured the key element of the thinking that came out of the first series of consultations. Functional Zero should not be in opposition to Absolute Zero, but rather, on the spectrum of progress towards it. As we are moving towards creating a framework, rather than a definition, we want to return to the indicators as outlined in Absolute Zero with a recognition that it provides a set of targets for communities to move towards. As a result, Table 1 outlines the potential indicators that communities could set, in contrast to Absolute Zero indicators.

7. Turner, A., Redman, M., Gaetz, S. (2017). Defining and measuring an end to homelessness: Considerations for the National Housing Strategy. Toronto: Canadian Observatory on Homelessness Press.



# Dimension 1.0 – Lived Experience

## Progress Indicators

## Absolute Zero Indicators

**1.1** People with lived experience of homelessness feel supported in the community they live in.

People with lived experience of homelessness report a high satisfaction with their integration in the broader community.

**1.2** Broad public awareness for how to access resources and supports for housing insecurity exists.

Broad public awareness for how to access resources and supports for housing insecurity exists.

**1.3** People formerly having experienced homelessness report a high sense of belonging in their community.

Natural supports are the predominant supports available.

People formerly having experienced homelessness report a high sense of belonging in their community.



## Dimension 2.0 – Homeless-Serving System (1/2)

### Progress Indicators

Program and housing participants served by homelessness prevention system (including shelter, transitional housing, Housing First etc. programs) increasingly report being moderately or highly satisfied (**nearing 100%**) with:

- ▷ **a.** Shelter quality and safety;
- ▷ **b.** Housing security of tenure affordability and safety;
- ▷ **c.** Case management services;
- ▷ **d.** Being treated with dignity, respect, and having self-determination/choice in housing and supports;
- ▷ **e.** Access to supports to address diverse needs within homeless system & mainstream public systems (addiction, trauma, mental and physical health issues, employment, education, etc.);
- ▷ **f.** Process of referral and intake into programs, shelters, housing;
- ▷ **g.** Housing secured, stabilization and aftercare supports; and
- ▷ **h.** Perception of quality of life, including sense of belonging, participation in community activities, connection with friends and family.

### Absolute Zero Indicators

Program and housing participants served by homelessness prevention system (including shelter, transitional housing, Housing First etc. programs) increasingly report being highly satisfied (**at or above 90% satisfaction**) with:

- ▷ **a.** Shelter quality and safety;
- ▷ **b.** Housing security of tenure affordability and safety;
- ▷ **c.** Case management services **received**;
- ▷ **d.** Being treated with dignity, respect, and having self-determination/choice in housing and supports;
- ▷ **e.** Access to supports to address diverse needs within homeless system & mainstream public systems (addiction, trauma, mental and physical health issues, employment, education, etc.);
- ▷ **f.** Process of referral and intake into programs, shelters, housing;
- ▷ **g.** Housing secured, stabilization and aftercare supports; and
- ▷ **h.** Perception of quality of life, including sense of belonging, participation in community activities, connection with friends and family.

**2.2** Emerging and increasing evidence of systematic and effective inclusion of those with lived experience in community coordination efforts and decision-making to develop and deliver services in the homelessness prevention system.

Transparent and verified evidence of systematic and effective inclusion of those with lived experience in community coordination efforts and decision-making to develop and deliver services in the homelessness prevention system.

**2.3** Total number of unsheltered persons and emergency-sheltered persons is consistently decreasing towards Functional Zero. The community has reduced its initial baseline total of unsheltered and emergency-sheltered count by 90%.

The total number of unsheltered persons and emergency-sheltered persons will be zero at any point in time.

**2.4** Length of stay in emergency shelter and length of being unsheltered is consistently decreasing year over year towards zero. The community has reduced the initial baseline length of stay in homelessness (unsheltered and emergency sheltered) by 90%. This performance is improved/maintained year over year.

## Dimension 2.0 – Homeless-Serving System (2/2)

### Progress Indicators

**2.5** The number entering versus exiting the homelessness prevention system has a steady or decreasing rate. This performance is improved/maintained year-over-year.

**2.6** There is a high percent of positive homelessness prevention system exits (above 90%) including successful and stable natural supports placements.

**2.7** No more than 10% of those who exit homelessness return to homelessness within 12 months. This performance is improved/maintained year-over-year.

**2.8** People are diverted/prevented from experiencing homelessness wherever possible. As a result, there is a consistent reduction year-over-year in number of homeless persons in emergency shelter and transitional housing/outreach with no previous homelessness experience. This performance is improved/maintained year-over-year.

**2.9** Community planning and service delivery is highly coordinated using a systems approach that includes coordinated entry, assessment, formal standards of care, integration strategies with public systems, performance management and funding allocation processes. This performance is improved/maintained year-over-year.

### Absolute Zero Indicators

Prevention services are in place to divert all persons at risk of homelessness.

Homelessness does not occur because systems closely coordinate and the homelessness prevention system has the capacity and processes in place to ensure all people without adequate, safe housing are immediately (same day) provided access to a permanent housing unit or other acceptable non-homeless placement (e.g., residential treatment).



## Dimension 3.0 - Public Systems (1/2)

### Progress Indicators

**3.1** People at-risk of or experiencing homelessness engaged in related public systems (including child welfare, healthcare systems, corrections facilities, etc.) increasingly report being moderately or highly satisfied (**nearing 100%**) with:

- ▷ **a.** Discharge housing plans;
- ▷ **b.** Being treated with dignity, respect, and having self-determination/choice in process of accessing resources;
- ▷ **c.** Access to resources to address diverse needs within mainstream public systems (addiction, trauma, mental and physical health issues, employment, education, etc.);
- ▷ **d.** Process of referral and intake;
- ▷ **e.** Housing secured, stabilization and aftercare supports; and
- ▷ **f.** Perception of quality of life, including sense of belonging, participation in community activities, connection with friends and family.

**3.2** Emerging and increasing evidence of systematic and effective inclusion of those with lived experience in public system leadership, coordination efforts and decision-making to develop and deliver services in related public systems.

**3.3** Percent of those entering the homelessness prevention system from other public systems is consistently decreasing over time (e.g., child protection; corrections; social housing; health, addiction treatment etc.).

**3.4** All levels of government commit that no one should be forced to live on streets and provide sufficient resources to meet emergency shelter demand at minimum.

### Absolute Zero Indicators

People at-risk of or experiencing homelessness engaged in related public systems (including child welfare, healthcare systems, corrections facilities, etc.) increasingly report being highly satisfied (**at or above 90%**) with:

- ▷ **a.** Discharge housing plans;
- ▷ **b.** Being treated with dignity, respect, and having self-determination/choice in process of accessing resources;
- ▷ **c.** Access to resources to address diverse needs within mainstream public systems (addiction, trauma, mental and physical health issues, employment, education, etc.);
- ▷ **d.** Process of referral and intake;
- ▷ **e.** Housing secured, stabilization and aftercare supports; and
- ▷ **f.** Perception of quality of life, including sense of belonging, participation in community activities, connection with friends and family.

Transparent and verified evidence of systematic and effective inclusion of those with lived experience in public system leadership, coordination efforts and decision-making to develop and deliver services in related public systems.

The incidence of persons exiting public systems into homelessness is eliminated.

Adequate affordable housing supply is in place and accessible to meet demand from those at imminent risk of homelessness to ensure no one becomes homeless in the first place.

## Dimension 3.0 - Public Systems (2/2)

### Progress Indicators

### Absolute Zero Indicators

**3.5** Coordination efforts are emerging between homeless and public systems to ensure appropriate referrals, timely access to services/ supports to prevent and end homelessness. This includes public systems conducting standardized screening for housing status/assistance needs and having in place standardized protocols for addressing needs of people.

Formalized and effective coordination efforts are in place between homelessness prevention systems and public systems to ensure appropriate referrals, timely access to services/ supports to prevent homelessness.

**3.6** Funding is increasingly coordinated and aligned with community needs to ensure service delivery levels sustain a high functioning system.

**3.4** Diverse public and private funding sources are highly coordinated and secured to maintain service delivery levels to sustain high functioning system.

**3.7** There is increasing evidence of funding and policy coordination across governments to ensure ending homelessness objectives are supported. This includes removal of laws that criminalize homelessness.

**3.5** Funding and policy across governments are highly integrated to support ending homelessness objectives.



# Resource 8

## Limitations and Conclusion

While the Making Zero Count project is a broad and diverse consultation project across Canada, there are several limitations that must be addressed. Making Zero Count does not incorporate the level of rigour required to take the definition of Functional Zero to the next level - as a formally tested and refined definition. This project was focused on testing the working definition of Functional Zero, specifically the different indicators of ending homelessness within a community's planning process. However, through engagement with different communities, we realized that a strict definition of Functional Zero was not what communities needed or were asking for. What we heard was that communities wanted support in engaging in systems planning as the impetus to ending homelessness. Embedding community-specific indicators within the process of systems planning requires more engagement and support on the ground. It is exciting to see communities having conversations to take the Making Zero Count project to the next level and begin laying the groundwork to creating a framework for ending homelessness.

With this being said, there is more important work to be done. The proposed new indicators under the Community dimension are important ideas to explore further. These refined indicators echo the feedback from community and may be used to begin conversations around creating a framework that outlines the end to homelessness. The need to integrate community as a core element of how we conceptualize the end of homelessness has the potential to make significant shifts in how we deliver services. It also emphasizes a recognition that housing and supports alone cannot resolve the challenges that led to homelessness or put an end to one's experience of homelessness. The most efficient, empathetic social worker cannot replace the sense of feeling belonging or care in your own community. We must work together if we want to make large strides in ending homelessness in Canada.

## Media Exposure

▷ Kelowna News Clip for Making Zero Count - <https://www.youtube.com/watch?v=AMkrzEbbAE8>

▷ Kelowna Now news article for Making Zero Count - [https://www.kelownanow.com/watercooler/news/news/Video/Video\\_Making\\_Zero\\_Count\\_1/](https://www.kelownanow.com/watercooler/news/news/Video/Video_Making_Zero_Count_1/)

# Resource 2

## How To - Facilitating the Conversation & Increasing Collaboration:

When engaging in a commitment to collaborate, you may want to answer the following questions together:



What is our commitment to collaborate?



What could happen if we do not commit to collaborating together?



In what ways are we more alike than are we different?



What are our intersections?



What outcomes do we both want to achieve?

The data above is a key step in helping to demonstrate the importance of collaboration across different systems. The following resources are intended to support a homeless-serving organization who may wish to have a meeting with another public system in order to develop a shared MOU.

The following agenda is a series of questions to build clarity around the particular reason for the MOU and can also help to strengthen the beginning of the conversation. Use this opportunity to educate stakeholders about the way in which discharge into homelessness leads to re-entry into other systems, long-term impacts and the resulting costs.

# Template 2.0

## Agenda to Discuss Developing an MOU with Public Systems:

### Welcome & Introductions

- ▷ **Start with an introduction of everyone and a quick overview of each stakeholder's role at their organization/institution**
  - ▶ This helps to build trust and strengthen relationships between stakeholders

### Clarifying Roles & Responsibilities

- ▷ **What is the mandate & role of each institution and/or agency?**
  - ▶ What services are provided?
    - What resources and specialties does each agency bring?
- ▷ **What are the limits faced by each agency?**
- ▷ **Are there any services outside of the standard mandate that are being provided in response to community or service user needs?**
  - ▶ **E.g.** Libraries becoming de-facto drop-in centres for people who are experiencing homelessness, schools providing breakfast programs for students experiencing poverty, or police receiving training to respond to mental health crisis because more people calling the police require support in this way, etc.

### Identifying the Key Issue

- ▷ **What are the points of intersection between these two systems? Consider:**
  - ▶ Discharges to emergency shelter after interacting with the justice system.
  - ▶ Re-entry of person experiencing homelessness into public systems, leading to de-stabilization and/or stop the progress towards housing.
  - ▶ Frequent use of emergency services or public systems via re-entry of the same service users.

- ▷ **Identify what factors are driving this on both ends.**

#### Consider:

- ▶ Lack of Resources
- ▶ Legislation
- ▶ Operational Policy
- ▶ Lack of Communication
- ▶ Funding Stream
- ▶ Mandates
- ▶ Lack of timely intervention
- ▶ Capacity

- ▷ **Identify opportunities for flexibility that each system can take. Consider:**

- ▶ Education for staff at each institution or non-profit.
- ▶ Policy that prompts communication as soon as a person enters the institution (depending on the communication between services).
- ▶ Lengthening amount of time before discharge.
- ▶ Working with other community partners for more supports.
- ▶ Clarity around which service provider can take the lead.

### Establishing Common Ground

- ▷ **What is the central issue/goal identified that both stakeholders can play a role in resolving?**
- ▷ **Identify what each stakeholder can do to resolve this issue. Consider:**
  - ▶ Developing a consistent protocol across both systems & train staff on it.
  - ▶ Changing operational policy.
  - ▶ Providing more opportunities for ongoing information & resources sharing between stakeholders.
  - ▶ Commitment to integrate public systems coordination with the Coordination Access process within the homelessness-serving system.
  - ▶ Capturing more data about how these systems interact, as part of discharge and intake processes.
    - **E.g. 1** - Number of people discharged without a housing plan.
    - **E.g. 2** - Assessment of housing status at point of intake for both systems.
- ▷ **Who will take the lead on writing the draft MOU?**
- ▷ **Who needs to sign off on the MOU for confirmation?**

### Wrap Up & Conclusion

- ▶ Identify any key next steps
- ▶ Set a timeline for these next steps
- ▶ Thank everyone for coming



# Resource 2

## How To - Breaking Down the Agenda:

### Welcome & Introductions

- ▷ **Start with an introduction of everyone and a quick overview of each stakeholder's role at their organization/institution.**
  - ▶ This helps to build trust and strengthen relationships between stakeholders.

### The data collected is a key step

in helping to demonstrate the importance of collaboration across different systems. The following resources are intended to support a homelessness-serving organization who may wish to have a meeting with another public system in order to develop a shared MOU.

Systems are ultimately a series of relationships, some formal and some not. In order to take on a systems

integration approach, it requires significant time and effort to build trust and relationships with partners in intersecting systems. This work will move faster as trust is established. While it may seem simple, taking time to get to know the stakeholders in the room on a human level is critical to this work.

**Tip:** As well, this part of the conversation will help you assess if those in the room are actual decision-makers or simply reporting back. As much as possible, it is critical to get the decision-makers in the room. However, at an introductory meeting, that may not be feasible. So, work with who is in the room, and ensure that follow-up communications brings the decision-makers into the conversation.

### Clarifying Roles & Responsibilities

- ▷ **What is the mandate & role of each institution and/or agency?**
  - ▶ What services are provided?
    - What resources and specialties does each agency bring?
- ▷ **What are the limits faced by each agency?**
- ▷ **Are there any services outside of the standard mandate that are being provided in response to community or service user needs?**
  - ▶ **E.g.** Libraries becoming de-facto drop-in centres for people who experiencing homelessness, schools providing breakfast programs for students experiencing poverty, or police receiving training to respond to mental health crisis because more people calling the police require support in this way, etc.

### Developing a core

understanding of the intended function of each organization is helpful to lay the groundwork for where the limits of organizational capacity are. However, this part of the conversation is also intended to clarify how organizations may be taking on a role that is not within their mandate. In many cases, this role may be connected to homelessness and the related lack of flow in the system. Hospitals recognize the challenge of not discharging seniors due to the unavailability of long-term care beds in their local community. Similarly, emergency shelters should not be considered a 'housing' option for

18-year old individuals as they age out of care from child welfare. These are both examples of the way in which a lack of resources and flow within each system leads to resources being used differently than mandated.

Every organization wants to be focusing on their mandate without taking on the challenges of other sectors, while simultaneously lacking the resources and professional expertise to take on systems integration. This is an opportunity for organizations to navigate these difficult conversations.

## Identifying the Key Issue (1/2)

▷ **What are the points of intersection between these two systems? Consider:**

- ▶ Discharges to emergency shelter after interacting with the justice system.
- ▶ Re-entry of person experiencing homelessness into public systems, leading to de-stabilization and/or can stop the progress towards housing.
- ▶ Frequent use of emergency services or public systems via re-entry of the same service users.

▷ **Identify what factors are driving this on both ends. Consider:**

- |                         |                               |
|-------------------------|-------------------------------|
| ▶ Lack of Resources     | ▶ Funding Stream              |
| ▶ Legislation           | ▶ Mandates                    |
| ▶ Operational Policy    | ▶ Lack of timely intervention |
| ▶ Lack of Communication | ▶ Capacity                    |

This is the part of the discussion that likely spurred this whole meeting. All stakeholders likely know what the central points of intersection are. However, it is important that this section of the conversation not be entirely one-sided. It might seem easy to air frustration with the way that a public system is discharging people directly into homelessness. However, a key element of this part of the conversation is demonstrating that the challenge is felt by both sides. Perhaps people are being discharged into homelessness,

but it is also true that people are much more likely to re-enter or become frequent users of various public systems because of a lack of housing options or other resources. Systems integration cannot include placing blame on one system over another.

**Tip:** It is important to recognize the burden on public systems in this piece. The revolving door into various emergency services or the child welfare system is perhaps the common ground to focus on. Find out how these systems are also being squeezed due to a lack of housing resources and align yourself as facing a common challenge.

The question around identifying what the limits are, helps to narrow what the solutions are. Keep this work possible. While legislative changes and funding re-structuring are probably needed, these are long-term goals. The purpose of this meeting is to discuss the shorter-term possibilities that will result in better service experience for people experiencing or at risk of experiencing homelessness.

## Identifying the Key Issue (2/2)

▷ **Identify opportunities for flexibility that each system can take. Consider:**

- ▶ Lengthening amount of time before discharge
- ▶ Working with other community partners for more supports
- ▶ Policy that prompts communication as soon as a person enters the institution (depending on the communication between services)
- ▶ Clarity around which service provider can take the lead
- ▶ Education for staff at each institution or non-profit agency

**This is where** investigating what can change is important. Some changes to process and protocol could make a significant difference to outcomes for people experiencing or at risk of experiencing homelessness. Examples of hospital/ homelessness shelter partnerships tend to center on developing a clear protocol for when people are unstably housed or at risk of homelessness and then training staff for this. These coordination interventions result in real differences to housing outcomes, and cost savings<sup>6</sup>. Much of the time, there are gaps in process, simply because two systems are not engaged with each other.

## Questions to consider:



Is housing status identified upon entry into another system?



What can be done well in advance of discharge when you already have the understanding that a service user does not currently have stable housing?

- ▷ **Is this data captured by the public systems?**
- ▷ **Are public institutions asking about a person's housing status upon intake?**



Is there space or flexibility for change in a stakeholder's process or protocol?

- ▷ **Where within a process can change or testing using a different strategy take place?**

<sup>6</sup> Region of Waterloo. Hospital Discharge Report. Retrieved on March 20, 2019 from [https://homelesshub.ca/sites/default/files/Hospital\\_Discharge\\_Report\\_Final.pdf](https://homelesshub.ca/sites/default/files/Hospital_Discharge_Report_Final.pdf)

## Establishing Common Ground

- ▷ **What is the central issue/goal identified that both stakeholders can play a role in resolving?**
- ▷ **Identify what each stakeholder can do to resolve this issue. Consider:**
  - ▶ Developing a consistent protocol across both systems & train staff on it.
  - ▶ Changing operational policy.
  - ▶ Providing more opportunities for ongoing information & resources sharing between stakeholders.
  - ▶ Commitment to integrate public systems coordination with the Coordination Access process within the homeless-serving system.
  - ▶ Capturing more data about how these systems interact, as part of discharge and intake processes.
    - **E.g. 1** - Number of people discharged without a housing plan.
    - **E.g. 2** - Assessment of housing status at point of intake for both systems.
- ▷ **Who will take the lead on writing the draft MOU?**
- ▷ **Who needs to sign off on the MOU for confirmation?**

**After the common goal** has been developed, and a clear understanding of where both stakeholders have room to make changes, you are reaching the stage of setting the terms of an MOU. Ultimately, an MOU is an opportunity to formalize this discussion and clarify who can do what moving forward. It sets the stage for the work that needs to be done. It also becomes an organizational commitment to turn back to, when people do not experience a coordinated response between two systems. It becomes a framework to use to push for continuous improvement in this area.

The other part of this conversation will likely address logistics. It takes work to develop a coordinated response. Identify the backbone person moving forward the results of this meeting, in both drafting an MOU and calling a follow-up meeting or maintaining the communication. Below is an example of a possible MOU between a hospital and the Community Housing Services branch of a municipality. Note this is not an actual MOU, but rather based on challenges often raised in consultations with communities about discharge into homelessness from a hospital.

# Template 3.0 Example of MOU Template Between Homelessness Service Provider & Hospital

## Memorandum of Understanding between Hospital and Community Housing Services

### 1.1 Purpose

The purpose of this collaboration is:

- ▶ to support people who do not have a permanent home and are currently admitted to the Hospital to connect to community supports to find and maintain permanent housing.
- ▶ to encourage the Hospital and Community Housing Services to foster and build positive relationships.

### 1.2 Signatories

Signatories to the Collaboration include:

	Name: _____
	Address: _____ _____
	Phone Number: _____
	Name: _____
	Address: _____ _____
	Phone Number: _____

### 1.3 Collaboration Commitment

The Collaboration identifies a commitment between the Hospital and Community Housing Services to work together to:

- ▶ Support people experiencing homelessness or risk of homelessness that interact with our various services.

### 1.4 Principles

The following are the principles under which this Collaboration was developed:

- ▶ First consideration will be for the safety and well-being of the person we are supporting.
- ▶ Programs will assist this person in identifying the choices and resources available to them.
- ▶ Programs will respect this person's right to make their own choices.

## 1.5 Roles and Responsibilities of Each Stakeholder

- ▷ **The role of the Hospital includes but is not limited to:**
  - ▶ Provide high quality care to all patients who access our services, including those without stable housing.
  - ▶ Partner with community resources to ensure this care is carried on after a patient is discharged.
- ▷ **The role of Community Housing Services includes but is not limited to:**
  - ▶ Coordinate resources and develop and implement clear processes for people who are homeless or at risk of homelessness to access safe, affordable housing.
  - ▶ Partner with community agencies and resources for effective service delivery of housing and related supports for people who are without stable housing.

## 2.1 How we will collaborate:

### Our collective actions for each intersection point.

These specific intersection points have been identified for the purposes of collaboration. We are committed to collaborating to support people experiencing or at risk of experiencing homelessness in our community.



**Intersection Point #1-** A person who is homeless or at risk of homelessness is admitted to the hospital.

**Outcomes to be Achieved:** Intake will include an assessment of housing needs and connect to the community's Coordinated Access process for appropriate resources.

### Collaborative Actions We Agree to Take:

We agree to the following collaborative actions to work towards the above-noted process outcomes for this point where our work intersects:

- ▷ **The Hospital will agree to assess housing needs as part of the intake process.**
- ▷ **All involved parties will ensure that consent forms are obtained and signed at the start of any joint intervention. This will help to facilitate smoother communication during the application process and ongoing service provision.**
- ▷ **Once housing needs are assessed, stakeholders from the hospital agree to refer the person, through the Coordinated Access process, to community resources for housing related supports.**

**Intersection Point #2** \_\_\_\_\_

\_\_\_\_\_

**Outcomes to be achieved:** \_\_\_\_\_

\_\_\_\_\_

**Collaborative Actions We Agree to Take:** \_\_\_\_\_

\_\_\_\_\_

## 2.2 Changes to the Collaboration

Changes to this Collaboration may be made by mutual consent of both signatory organizations:

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

## 2.3 Commitment to Collaborate

The signatories express a willingness to work collaboratively, in an ongoing manner, to build relationships and understanding across both sectors. The signatories also agree to articulate clear practices where service intersections exist with a view to strengthening coordination of service delivery and benefits to people experiencing or at-risk of experiencing homelessness that access our services.

**We have participated in the development of this local collaboration and are committed to its ongoing implementation.**

**This local collaboration will take effect on \_\_\_\_\_  
and may be reviewed and/or updated upon the request of any of the parties to  
this collaboration.**

**Name of Signatory:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name of Signatory:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Template 4.0 MOU Template

## Memorandum of Understanding between

And \_\_\_\_\_


### 1.1 Purpose


The purpose of this collaboration is:

- ▷ \_\_\_\_\_
- ▷ \_\_\_\_\_

### 1.2 Signatories

Signatories to the Collaboration include:

 Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_

 Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_

### 1.3 Collaboration Commitment

The Collaboration identifies a commitment between the \_\_\_\_\_ and  
the \_\_\_\_\_ to work together to \_\_\_\_\_

\_\_\_\_\_



## 1.4 Principles

The following are the principles under which this Collaboration was developed:

- ▷ \_\_\_\_\_
- ▷ \_\_\_\_\_
- ▷ \_\_\_\_\_
- ▷ \_\_\_\_\_
- ▷ \_\_\_\_\_

## 1.5 Roles and Responsibilities of Each Stakeholder (optional category)

- ▷ The role of \_\_\_\_\_ includes but is not limited to:
  - ▶ .....
  - ▶ .....
  - ▶ .....
- ▷ The role of \_\_\_\_\_ includes but is not limited to:
  - ▶ .....
  - ▶ .....
  - ▶ .....

## 2.1 How we will collaborate:

**Our collective actions for each intersection point.**

These specific intersection points have been identified for the purposes of collaboration. We are committed to collaborating to support people experiencing or at-risk of experiencing homelessness in our community.



**Intersection Point #1** \_\_\_\_\_

\_\_\_\_\_

**Outcomes to be Achieved:** \_\_\_\_\_

\_\_\_\_\_

**Collaborative Actions We Agree to Take:**

We agree to the following collaborative actions to work towards the above-noted process:

\_\_\_\_\_

outcomes for this point where our work intersects: \_\_\_\_\_

\_\_\_\_\_

▷ .....

▷ .....

▷ .....



**Intersection Point #2** \_\_\_\_\_

\_\_\_\_\_

**Outcomes to be Achieved:** \_\_\_\_\_

\_\_\_\_\_

**Collaborative Actions We Agree to Take:** \_\_\_\_\_

\_\_\_\_\_

**2.2 Changes to the Collaboration**

Changes to this Collaboration may be made by mutual consent of both signatory organizations:

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_



**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Contact Person:** \_\_\_\_\_

### 2.3 Commitment to Collaborate

The signatories express a willingness to work collaboratively, in an ongoing manner, to build relationships and understanding across both sectors. The signatories also agree to articulate clear practices where service intersections exist with a view to strengthening coordination of service delivery and benefits to people experiencing or at-risk of experiencing homelessness that access our services.

**We have participated in the development of this local collaboration and are committed to its ongoing implementation.**

**This local collaboration will take effect on \_\_\_\_\_ and may be reviewed and/or updated upon the request of any of the parties to this collaboration.**

**Name of Signatory:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name of Signatory:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

# Additional Resources

Gaetz, S. & O, Grady, B. (2006). The Missing Link: Discharge planning, incarceration & homelessness. The John Howard Society of Ontario. Retrieved from <https://johnhoward.on.ca/wp-content/uploads/2014/09/the-missing-link-aug-2007.pdf>

Region of Waterloo - Hospital Discharge Report Retrieved on March 20, 2019 from [https://homelesshub.ca/sites/default/files/Hospital\\_Discharge\\_Report\\_Final.pdf](https://homelesshub.ca/sites/default/files/Hospital_Discharge_Report_Final.pdf)

Guide to Memorandum of Understanding Development & Negotiations: <https://aspe.hhs.gov/basic-report/guide-memorandum-understanding-negotiation-and-development#chapIII>