

Getting Back to Housing

How Canadian communities are adapting Coordinated Access to accelerate connections to permanent housing and build momentum to end homelessness once and for all.

COVID-19 RESOURCE





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Housing is the answer.

Coordinated Access is the process to connect people in crisis to housing. Many Canadian communities are implementing Coordinated Access and designing high quality systems to accelerate the process by which people experiencing homelessness get and remain permanently housed. This acceleration to housing is rooted in the collective Canadian mission to do whatever it takes to end homelessness once and for all. Now more than ever, a sense of urgency, innovation, and adaptation is essential to achieving our goal.

“Housing has become the frontline defense against the coronavirus. Home has rarely been more of a life or death situation.”

– Leilani Farha, United Nations Special Rapporteur on the Right to Adequate Housing

During the COVID-19 pandemic, coordinating quick access to housing is more important than ever. This guide outlines realistic and practical approaches to help local communities adapt their homelessness response system to coordinate, activate, and accelerate housing opportunities during the pandemic.

Homelessness has always been a violation of the right to life. Experience with previous epidemics (including SARS and H1N1, as well as recurrent outbreaks of influenza, meningococcal disease, tuberculosis and Hepatitis A) shows that COVID-19 is a significant threat to the lives of people experiencing homelessness in Canada. The COVID-19 crisis will have devastating impacts on the 35,000 people who experience homelessness on any given night in Canada¹. An American study has found that people experiencing homelessness are 2 to 4 times more likely to require critical care and 2 to 3 times more likely to die from COVID-19.²

Most public health advice regarding social distancing, self-isolation, quarantine, and even respiratory and hand hygiene, are not feasible for people experiencing homelessness. The best defence against COVID-19 is staying home. This defence is not possible for those who do not have one.

For those on the frontlines of Canada’s homelessness crisis, we **cannot** operate business as usual. Our ability to protect people experiencing homelessness is dependent on us stepping up in our role to secure permanent, long-term housing.

Amidst the fear and uncertainty during the COVID-19 health crisis, there is incredible hope for the world that emerges. While the COVID-19 pandemic provides a tragic and costly reminder of the urgent need to end homelessness in Canada, it is an opportunity to change, transform, and prioritize our efforts to secure

¹ Stephen Gaetz, Erin Dej, Tim Richter, & Melanie Redman (2016): The State of Homelessness in Canada 2016. Toronto: Canadian Observatory on Homelessness Press.

² Emily Boerger, “New report examines impacts of COVID-19 outbreak on homeless Californians,” last modified March 31, 2020, <https://stateofreform.com/news/california/2020/03/new-report-examines-impacts-of-covid-19-outbreak-on-homeless-californians/>.

permanent housing. By securing housing, individuals and families who rely on the homelessness response system can thrive in a post-COVID-19 world.

If we were to fully engage in a housing-focused response to the COVID-19 pandemic, we could emerge from this health crisis with significant headway to end homelessness once and for all. This level of engagement must invest in long-term solutions for all people living in Canada to have safe, decent, and permanent housing.

The effects of the crisis have pushed political leadership at all levels of government to respond urgently through investment and policy reform to keep people safe. While this was an important first step, it cannot end there. To truly protect people experiencing homelessness and prevent a second wave of crisis, we need to go further and invest, innovate, and streamline access to permanent housing. We have seen the impact on the lives of people experiencing homelessness during this crisis, and there is a growing public awareness to the urgency to end homelessness. Now is the time to remove constraints as much as possible. We need to think and respond to the problem and its challenges differently. For example, discovering ways to remove or bypass steps in Coordinated Access systems and housing-based intervention processes, recruiting or re-deploying staff from non-essential services, re-allocating funding resources, and using technology more where applicable.

Your critical work in securing long-term solutions can protect the lives of people experiencing homelessness during this pandemic and for years to come. The time for action is now.

What are the key components of a housing-focused response?

Communities across Canada have been designing Coordinated Access and By-Name Lists to connect, streamline, and accelerate the process in which people in crisis obtain permanent housing and supports. Coordinated Access is the key to local COVID-19 responses as it is an essential step to smarter, faster, and more coordinated housing responses. Real-time By-Name List data captures each community’s local homelessness picture and allows them to tailor and adapt their COVID-19 responses, strategically allocate resources, and identify where additional support is needed.

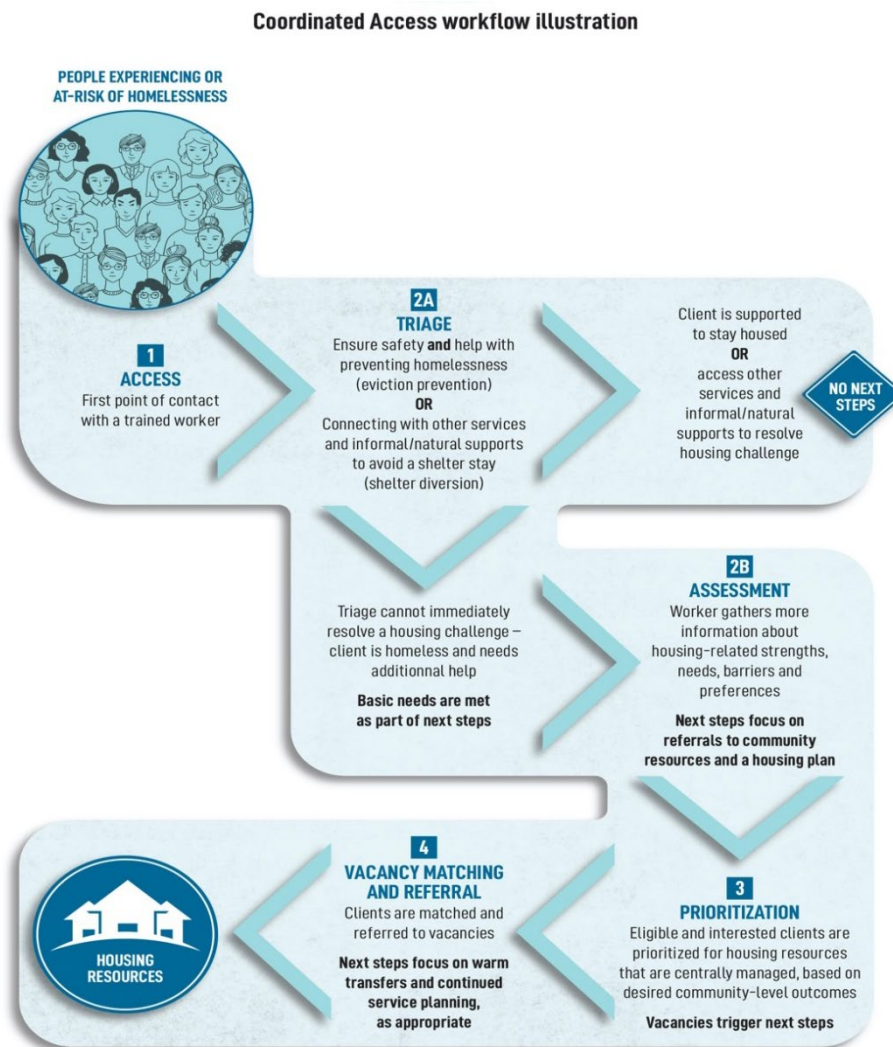


Figure 1: Coordinated Access Workflow Illustration³

³ Employment and Social Development Canada, “Reaching Home: Canada’s Homelessness Strategy Directive,” https://www.homelessnesslearninghub.ca/sites/default/files/resources/HPD_ReachingHomeCoordinatedAccessGuide_EN_20191030.pdf.

Coordinated Access has become a required part of homelessness response systems by The National Housing Strategy through Reaching Home. See the detailed pieces of Coordinated Access as pictured by Reaching Home in Figure 1. A high functioning Coordinated Access system relies on quality data and requires all parts of the housing and homelessness response system to be focussed and collaborating on ending homelessness through housing.

Whether your system has been operating for a while or it is just getting started, a successful housing-focused response during the COVID-19 pandemic focuses on ways to adapt your local Coordinated Access system. Each core component of an operating Coordinated Access system, outlined below, highlights key considerations and examples of adaptations that can be tested and applied to maintain a housing focused response during COVID-19. For additional ideas and information on adapting Coordinated Access to COVID-19 health protocols and practices, please refer to the [Coordinated Access in a Pandemic one-pager](#).



Figure 2: Key Components of Coordinated Access⁴

1. Access

Access points are the first point of contact for a person experiencing a housing crisis. They play a critical role in beginning to determine which intervention might be most appropriate to rapidly connect people to housing and the supports to maintain it.

Considerations for COVID-19 response:

- Consider what has changed with respect to access points in your system. Ask which remain open, which are closed, and what new ones have been created due to COVID-19. Access points may now include hospitals and COVID-19 assessment centres. Ensure all your access points have a process by which to refer people experiencing homelessness to your By-Name List. This will also ensure that your By-Name List is kept up to date and you are able to use the information to respond to both individual and community needs as they emerge.
- Streamline your referral process where possible to alleviate staffing pressures in emergency locations (e.g. shelters, isolation centres, hotel/motels). Centralized or streamlined referrals may include one agency, team, or staff responsible for all referrals to the By-Name List. You may also set up a telephone line or an online platform for referral submissions.

⁴ Employment and Social Development Canada, “Reaching Home: Canada’s Homelessness Strategy Directive,” <https://www.canada.ca/en/employment-social-development/programs/homelessness/directives.html>.

- Continue to practice [diversion](#) and include a flexible fund to help keep people where they stayed last night – if it is safe to do so.
- Prior to creating temporary spaces like physical distancing shelter or isolation sites, ensure that there are plans for housing the people who will be staying at those temporary spaces where possible. What do their exit plans look like? Be sure to include people in temporary shelter spaces on your By-Name List.
- Include clear language at all access points that indicate that shelter and isolation sites are temporary and that the priority is to link people to housing as quickly as possible.



Community Bright Spots:

As communities adjust to many organizations closing their doors to in-person programs, Access Points have changed. Some communities have adjust to phone or web based access points (Peterborough, ON) or boosting outreach services (Ottawa, ON) and using social media to help make connections for people.

2. Triage and Assessment

Triage and assessment is the process of gathering information to make appropriate referrals to housing interventions and support services. Local Coordinated Access systems agree on common assessment and intake tools so that there is a shared understanding of a person’s level of need, housing history, and what it would take to help the person get housed as quickly as possible. During this stage, people experiencing homelessness are actively engaged in housing planning, which enables them to be ready to accept a housing offer when a vacancy becomes available. For further information on assessment refer to the [Coordinated Access Scorecard Guide](#) pg. 25-30.

Considerations for COVID-19 response:

- The collection of data is more important than ever. Consider front line support for data entry: can it be assigned to another staff, can you recruit a non-essential worker to collect information from people about housing history, assessments updates and continued connections to housing opportunities.
- Collect information in phases—start with only the essential information to identify the person’s immediate needs and to connect that person to appropriate housing interventions. A suggested phased assessment approach may look like this:
 - *Phase 1:* COVID-19 screening tool, Diversion Protocol or Common Intake and Consent;
 - *Phase 2:* Common Assessment Tool⁵ and Housing Plan; and,

⁵ Visit the [Built for Zero Canada Coordinated Access Page](#) for an overview of common assessment tools and resources.

- *Phase 3*: Further assessment tools and offer readiness activities. The order will vary based on your local context. However, the intent remains the same – keep housing as the central focus and ultimate goal.
- Explore ways to bypass or defer steps. Decide what is essential for entry and connection to a housing intervention – everything else can wait.
- Ensure that all COVID-19 isolation centres, assessment centres, and temporary shelters are conducting the Coordinated Access standardized assessments and can update the information on the By-Name List as required. Streamline updates to the By-Name List as much as possible.
- Conduct assessments virtually or over the phone and document informed consent verbally with the intention of getting a signature later. Consider using non-essential staff (e.g. municipal workers, volunteers, staff from closed programs/services) to complete assessments.
- Reduce requirements for assessments for people who are living rough (e.g. encampments or couch surfing) and make sure they are at minimum connected to the By-Name List.
- Ensure outreach staff have a plan for progressive engagement. Work with Public Works and Police to ensure that people are well connected to opportunities for housing.



Community Bright Spot: Peterborough, ON

Peterborough has designed a consolidated intake process so that all persons experiencing homelessness and looking for shelter are screened by phone or in person at Social Services. The screen includes a COVID-19 screener and a robust diversion process intended to support people to remain housed. People are then connected to the appropriate shelter or isolation site. Intake workers complete VI-SPDATs, add information to the By-Name Priority List, and collect information from paramedics, Public Health and hospital to ensure people are supported to be tested, and referred to the appropriate space to address their current COVID-19 status and begin a plan to resolve their homelessness.

3. Prioritization

Prioritization is a community led set of criteria that helps to determine who is offered what resource whether housing stock, financial supports (e.g. housing subsidies) or case management supports. Prioritization relies on having a [By-Name List](#) - a **real-time** list of **all** people experiencing homelessness in your community. It includes a set of data points that support Coordinated Access and prioritization at a household level and movement in and out of homelessness at a system level.

Prioritization determines the order in which people are provided a housing resource for which they are eligible. The information gathered during triage and assessment is used to inform prioritization is included in the Priority List, a sub-list of your By-Name List. When a vacancy becomes available (case management, housing subsidy and/or unit), people that are eligible for the resource who meet more of the prioritization criteria are sorted closer to the top of the Priority List. They will get an offer before those that meet fewer

criteria, who are sorted closer to the bottom. This process is like an emergency room triage process, the goal is for everyone to receive care but the order by which that is provided is based on prioritization criteria. For further information on prioritization refer to the [Coordinated Access Scorecard Guide](#) pg. 31-33.

Considerations for a COVID-19 Response:

- Prioritization should be based on what makes most sense for the community in the new context of COVID-19. Will your prioritization model need to temporarily change due to COVID-19? Some examples include: health risks, age, available unit type, or whomever you can match most quickly to a housing vacancy. If priorities change, make sure to adjust and clearly communicate any changes to your prioritization criteria and set specific timelines for temporary changes.
- Consider risk of exposure to COVID-19. Include risk factors that would place individuals at a higher risk of complication should infection occur (e.g. people staying in congregated temporary shelter settings or sleeping rough, those with comorbidity, and/or older adults). In addition to health risks, age, and available supports, people who face additional structural barrier should be prioritized. This includes Indigenous peoples, women, members of racialized communities, persons with disabilities, trans and gender-diverse people, children and young people, migrants, refugees, asylum-seekers and stateless person.
- When changing your local prioritization criteria, engage service providers, people with lived/living experience, and other stakeholders whenever possible. Leverage existing advisory bodies for guidance and advice. Target meetings (virtual or by phone) to be focussed with a clear purpose. Remember to maintain a sense of urgency while remaining transparent in decision-making.
- The following is an example of how a community implemented changes to their prioritization policies due to COVID-19. [Chicago's COVID-19 Expedited Housing Initiative](#)



Community Bright Spot: Edmonton, AB

Edmonton Homeward Trust used their By-Name List to distill their list down to a list of 100 critically unwell people to house first. In addition, Homeward Trust prioritized all families for rapid re-housing and through strong partnerships with the private market have housed 199 people over March and April, since COVID-19 was declared an emergency.

4. Matching and Referral

Matching and referral is the process and action of formally connecting a person or family with an open spot on a housing intervention caseload, a housing subsidy, and/or a vacant unit. For further information on matching and referral refer to the [Coordinated Access Scorecard Guide](#) pg. 34-42.

COVID-19 considerations:

- Explore ways to streamline the matching process. Examples include:
 - Looking for ways to automate all or parts of the matching process;
 - Identify what can be decided or discussed in the absence or in advance of a virtual matching or case conferencing meeting; and
 - Narrow the focus or solidify clear and actionable goals of any matching-type meetings (e.g. we have X housing spots to fill in this meeting today). Focus on specific barriers and collectively problem solve. Be creative.
- **Housing Identification:** Some ideas to maximize your Coordinated Access inventory including identifying public, private, and supportive housing options as listed below. Additional ideas and community examples are provided in [CAEH's COVID-19 Resource](#) on finding and securing housing.

Public Housing

- Take stock of **ALL** public/co-op housing inventory in your community. Investigate what it would take to bring offline units (e.g. due to needed repairs) back online. Look at what could be available within 30, 60, 90 days, etc.
- Consider prioritizing people in temporary shelters or sleeping rough.
- Streamline processes, defer eligibility requirements, and remove red tape whenever possible. Remember this is not business as usual as we deal with an unprecedented global crisis.

Supportive Housing

- Take inventory of all available place-based and scattered site permanent supportive housing programs. This may include programs within the Coordinated Access inventory or within another sector (e.g. mental health, people with disabilities).
- Plan for any upcoming vacancies within caseloads and/or units.
- If there are any new builds scheduled for completion coming up, prioritize those units for people that require intensive supports and are in temporary shelters or sleeping rough.
- Examine eligibility requirements to streamline or defer steps to accelerate housing placements and supports.

Private Market

- Now is a great time to diversify the housing profile for Coordinated Access. Identify single room occupancy units (SRO), secondary units (in-law suites), new property management companies. The pending economic recession will require landlords to consider renting to new populations and housing people now can help boost rental income and to property management companies afloat, particularly when programs are able to guarantee monthly rent. Access [Resources to Recruit and Retain Landlords](#) including ESDC's [Landlord Engagement Toolkit](#) (pages 28-30) for sample materials to engage with landlords and strategies to pitch why landlords should work with local housing programs.

- Contact your local apartment association and ask to present at a virtual meeting. Present a compelling business case and have an open dialogue about concerns related to renting to people experiencing homelessness and/or renting during the pandemic. Anticipate and be prepared to address these types of concerns.
 - Ask local real estate agents to help find housing. This is a good public relation and marketing activity for them. This can be done working from home.
 - If landlords are afraid due to COVID-19, have an open dialogue to understand what their specific concerns are and determine if you can educate and problem-solve with them.
 - For more tips on Landlord Engagement check out [HUD Landlord Engagement One Pager](#)
- **Rent and Move in Assistance:** Now more than ever, flexible rent supports are critical. Local access to rent subsidies, first and last month's rent payment, and supports to acquire household basics should be evaluated for ease and speed of access. Some ideas include:
- Redirect housing subsidies or compel all levels of government to supply new housing subsidies specifically dedicated to people prioritized on your By-Name List.
 - The best line of defense is to get people into housing to minimize pressures on an already strained emergency response system. Conduct a cost analysis on how much you are spending in emergency response. Would it be more cost effective to redirect some of that funding toward longer-term solutions like housing subsidies? Plan now for a possible second wave.
 - Consider using additional federal or provincial funding toward housing subsidies. Use your By-Name List to build a business case to ask for what you need. Simply stating there is *not enough* affordable housing, or you require *more* housing subsidies prevents governments from responding. Quantify your request through your data and ask specifically for what you need.
 - Accelerate to rent supports by streamlining processes and deferring compliance requirements. Work from a 'this is not business as usual' mindset.
 - Set up a donation platform and ask for specific items or contact corporations who may be willing to help by donating or purchasing bulk items for housing units at a lower cost (e.g. mattress companies).
- **Case Management and Services:** Ongoing case management, both in the acquiring of housing, moving in, and housing stabilization continues to be vital during these times. Case management practices have adapted quickly to provide these supports with limited face-to-face interactions with participants. Some creative ideas to continue case management supports are listed below, with a fulsome list provided in [CAEH's COVID-19 Resource](#) on home visits:
- Take stock of all available housing intervention caseloads, which may include Rapid Rehousing programs, Intensive Case Management (ICM), Place-Based or housing with minimum case management. You may want to explore whether there are participants who have stabilized and are ready to exit the program so you can support someone else who is in crisis right now.
 - Look for ways to re-deploy and re-tool staff to provide housing stabilization supports via phone, web, written materials, peer supports, etc. Be creative.

- Provide, and engage if necessary, with your funders or technology companies about the increased importance of affordable access to technology such as internet access, smart phones, and computers with digital cameras and microphones.
- If conducting case management in person, demonstrate 2-metre of distancing with tape on the floor outside of a unit door, and intentionally layout how you can interact in person and when you can be expected at the unit. This also helps participants to ‘see’ social distancing practices in action for their other interactions.
- Pre-package housing stabilization supplies and set up home food deliveries. Connect with local food banks how may be able to provide mobile food services at this time.
- Think through tools like an honest monthly budget, guest policy, and crisis plan with COVID-19 in mind.
- Keep participants up to date on ongoing changes to your agency services and/or other support services in the community.



Community Bright Spot: Toronto, ON

The City of Toronto has announced it will be spending \$47.5 million to build 250 supportive modular housing units as part of a pilot project to help those who are homeless. Two three-storey buildings with 110 units each will be erected by Horizon North on a City-owned site by September. The second phase will see 140 units built at a second City-owned site by April 2021.

Other Helpful Tips:

- Consider creative ways to address staffing pressures. Examples include re-deploying non-essential staff or staff from closed programs; municipal staff; post-secondary students; volunteers. Consider anyone at home and not engaged in the effort as a possibility. Access [CAEH’s COVID-19 Resource](#) on staff recruitment and coverage for more ideas on redeployment and ways to address or mitigate staffing pressures.
- Consider ways to streamline processes to access housing. This might mean removing, deferring, or re-ordering steps.
- Re-purpose resources. Look for ways to use local housing benefits, donations, or other funding that can help with housing activities such as move-in, rental assistance, access to technology for people experiencing homelessness to stay connected.
- When making investments in short term responses, plan for how that will wind down or shift to a longer-term response. For example, communities purchasing hotels should consider the feasibility of the asset being transitioned into Permanent Supportive Housing (PSH).
- In some cases, case managers who are not typically engaged in the housing process will have a reduced workload due to the change of engagement practices with clients. Consider having them

supplement your housing team by assigning even a single participant to support through the housing and stabilization process.

- Focus on housing people with whatever housing resources are available and continue to source and secure housing on an ongoing basis. Housing plays a critical role in helping to address and alleviate gaps in the COVID19 crisis response system. If a person is prioritized for PSH but only RRH resources are available, consider having that person access Rapid Re-Housing as a bridge, without it negatively affecting their PSH eligibility.
- Develop a social media campaign to point to housing as an urgent need. Engage with the goodwill of your community during the COVID-19 crisis. Messaging about the opportunity to end homelessness once and for all as a response to housing being healthcare. Consider the power of your real-time data. Set a housing target and rally the community. Report out on progress and make specific asks to reach your goal.
- At all stages of your housing response, take active measures to include those experiencing homelessness in the design, implementation, and review of solutions. Create methods of collaboration and accountability for decision making that brings in service users as central stakeholders. Gather information on the most significant barriers to implementing housing responses in collaboration with those accessing services to share with other communities and all levels of government.

Final Considerations

At a national level, we are seeing governments, partners, and communities take action to end homelessness that were unprecedented just a few months ago. There is incredible momentum at the political and public levels to embrace housing-focused responses that will jumpstart our progress to end homelessness once and for all.

Your role in ensuring the most marginalized are housed has never been more critical than it is during the COVID-19 crisis. Your work right now can transform our response systems, reform policies, and protect lives. Now more than ever we can make homelessness a thing of the past.

The CAEH is here to help every step of the way. If you have questions or would like to discuss this framework further, please contact your community lead, or info@caeh.ca.