

Wood Buffalo Wellness Society

Centralized Intake Services

2019-20 Community Plan on Homelessness Grant Analysis

Rank: 2 - Coordinated Access

CIP Grant Summary:

April 1, 2016 - March 31, 2017	April 1, 2017 - March 31, 2018	April 1, 2018 - March 31, 2019	April 1, 2019 - March 31, 2020 Request	April 1, 2019 - March 31, 2020 Recommended by HISC	Difference of Recommended vs. Requested
302,409	266,524	315,195	429,950	295,796	(134,154)

Program Reporting Required:

- Monthly Efforts to Outcomes (ETO) data reporting
- Monthly Program Reporting
- 6 Month Report - outlining successes and challenges
- Annual Report - outlining successes and challenges

Financial Reporting Required:

- Monthly financial claims with financial receipts and back up documentation for the amount claimed
- Annual Financial Statements

Notes:

The Centralized Intake program aligns within the 10 Year Plan to End Homelessness with under Goal III: Prevention. This program is being restructured to make available more opportunities for referrals from other services which will alleviate some of the demand on the current system.

It falls within under the Federal Homelessness Partnering Strategy Directives under Chronically and episodically homeless populations.

Budget Line Description	2019-20 Grant Request	2019-20 HISC Recommended
Staff Costs	364,780	260,832
Operational Costs	20,684	8,073
Client Related Costs	5,400	
Subtotal	390,864	268,905
Administrative Costs	39,086	26,891
Total Costs	429,950	295,796

2019-2020 Community Plan on Homelessness Call for Applications

The grant program under which your organization is applying has specific eligibility requirements. The Application Form should clearly show how the proposed program meets these requirements. The Application Form, including all required attachments, must be received by the closing date. **Late or incomplete applications will not be processed (Community Investment Program Policy FIN-220, Section 3.1.5).**

In order to complete this application for funding, please consider the following:

- Read thoroughly 2019 Community Plan on Homelessness Grant Guidelines
- Schedule a meeting with the a CPH representative by emailing CPH@rmwb.ca **before application deadline**

If you have reviewed the 2019 Community Plan on Homelessness Grant Guidelines and have any questions regarding this application form or eligibility, please contact CIP@rmwb.ca.

Organization Name: Wood Buffalo Wellness Society

Declaration: In making this application, we, the undersigned, confirm:

*Board Member(s) and/or
Executive Director Initials:*

- that we have read the Community Plan on Homelessness Grant Guidelines;
- that we understand that this application form and all attachments shall be part of the **public** Council agenda and accessible through all methods that the Council agenda is available;
- that we understand that this application form and all required attachments must be completed in full and received before 4:30 p.m. MT on Friday, December 7, 2018;
- that we understand the term of the Community Plan on Homelessness Grant is April 1, 2019 to March 31, 2020 and that all expenditures must happen during this term; and
- that we are authorized by the applicant organization to complete the application and hereby represent to the Regional Municipality of Wood Buffalo's Community Investment Program and declare that to the best of our knowledge and belief, the information provided is truthful and accurate, and the application is made on behalf of the above-named organization and with the Board of Directors' full knowledge and consent.

[Signature] [Initials]

[Signature] [Initials]

[Signature] [Initials]

[Signature] [Initials]

[Signature] [Initials]

[Signature]

Signature of Board Member
(must have signing authority)

Christine Burton
Print Name

2018/11/23

Date: (YYYY-MM-DD)

[Signature]

Signature of Board Member or Executive Director
(must have signing authority)


Yvonne Ormson
Print Name

2018-11-20

Date: (YYYY-MM-DD)

2019-2020 Community Plan on Homelessness

Call for Applications

Organization Details	
Organization Name: Wood Buffalo Wellness Society	
Street Address: 214-9914 Morrison Street, Fort McMurray	
Province: AB	
Postal Code: T9H 4A4	
Phone Number: 587-537-8477	
Email Address: wbwsed@telus.net	
Website Address: www.woodbuffalowellnesssociety.com	
Main Contact	
Name: Yvonne Ormson	
Title: Executive Director	
Daytime Phone: 17(1)	
Email Address: wbwsed@telus.net	
Board Chair/President	
Name: Christine Burton	
Daytime Phone:	
Email Address:	
Executive Director	
Name: Yvonne Ormson	
Daytime Phone: 17(1)	
Email Address: wbwsed@telus.net	
Is your organization registered as a not-for-profit society or corporation? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Registration Number: 50132022378	Act Registered Under: <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> Societies Act (Alberta) <input type="checkbox"/> Companies Act (Alberta) <input type="checkbox"/> Canada Not-for-profit Corporations Act </div>
<div style="text-align: center;">  Signature of Board Member (must have signing authority) </div>	<div style="text-align: center;">  Signature of Board Member or Executive Director (must have signing authority) </div>
Christine Burton	Yvonne Ormson
Print Name	Print Name
<div style="text-align: center;">2018/11/23</div> Date: (Year-Month-Day)	<div style="text-align: center;">2018-11-20</div> Date: (Year-Month-Day)

Community Plan on Homelessness Board Questionnaire

1. Minimum number of board members according to bylaws:

2. Number of board members: Currently: 5 2018: 5 2017: 5

3. How often does the Board of Directors meet? 6-8 times per year

4. Please list your current Board of Directors:

Name	Board Position	Years on Board
Christine Burton	Chair	12
Dave Hill	Vice-Chair	10
Ryan Pruden	Treasurer	3
Amber Fort	Director	1
Curtis Hilman	Director	1

5. Are any Board members being paid, or receiving an honorarium for being on the Board or for other positions in the organization outside of their role on the Board?

☐ Yes

☒ No

6.

Board member name	Paid role in the board / organization	Amount received

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The personal information collected in this application is collected under the authority of section 33(c) of Alberta's Freedom of Information and Protection of Privacy (FOIP) Act. It will be used to process the application and contact you if needed, during the review of this application. If you have any questions about the collection and use of the personal information you may contact the Manager, Community Investment Program, at 9909 Franklin Avenue, Fort McMurray, AB T9H 2K4 or at (780) 743-7918.

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7. Which of the following classifications will your program address?

(Please check the one that applies)

- ☐ Prevention
- ☐ Outreach
- ☒ Coordinated Access
- ☐ Diversion

8.

Describe, in detail, how the program will meet and address the classification selected above. How does the program align with the RMWB 10 year plan? Please attach a current logic model.

The Wood Buffalo Wellness Society Centralized Intake program fits into all priority areas of the Ten Year Plan to End Homelessness.

Usage of this program results in homeless services becoming less fragmented, access to services is more seamless, and results in more effective and responsible use of scarce resources.

This project addresses the Education Priority by providing information to those interested in the Housing First programs as well as information to other community resources. We continue to source and utilize all professional development opportunities available and within our budget to align with the Change Management priority. In alignment with the Provision of Supports priority, CI staff refer individuals who do not meet Housing First placement criteria to other community resources.

Community Plan on Homelessness

Proposed Program Details

9. Program Name: CENTRALIZED INTAKE

Note: The term of the Community Plan on Homelessness Grant is April 1, 2019 - March 31, 2020. All program expenditures must occur during this term.

10. Briefly describe the program proposed.

The Centralized Intake Program would employ three (3) Centralized Intake Workers and one (1) Team Lead, with supervision provided by the Executive Director. Centralized Intake is the first point of contact or entry into the Housing First system.

Highly trained staff, under the supervision of a Team Lead provide Intake and Assessment to individuals requesting Housing First services, as well as providing information and education about the Housing First Programming to the community at large.

Triage services are provided five days per week, with more in-depth assessments completed 2 days of the week. Intake workers also attend local shelters and work closely with other community support agencies such as the Salvation Army, Marshall House and the Soup Kitchen to screen clients. Centralized Intake completes intake and assessments with all individuals and families that present as homeless. One eligibility and prioritization is determined, a warm transfer is set up and clients are transferred to Housing First or Rapid Re-Housing programs.

The Wood Buffalo Wellness Society provides Triage and Intake services under standardized guidelines through this Centralized Intake (single point of entry model) where a person's first contact or entry into the Housing First system is done through either an emergency shelter, a dedicated assessment facility, or where people come into contact with key workers in the community, hospital, justice or social service settings.

This program prioritizes the chronic homeless population, regardless of ethnicity. Chronicity is determined by a set criteria (Prioritization Chart)--Homeless Individuals and families and those at risk of homelessness, and Indigenous individuals and families who are homeless or at risk of homelessness.

Usage of the Centralized Intake system ensures consistency of assessment, a reduction in duplication of services, and an enhanced and effective evaluation of the appropriateness of services.

11. What is your organization's vision and mandate? (If your organization received funding for **this program** in 2018/19, skip to Question 13)

12. How does the program align with your organization's vision and mandate?

13. What will be the positive impacts to the community?

Increased consistency and quality of assessment services provided to homeless and at risk of homelessness individuals and families within the RMWB;
Increased responsible usage of funds;
Decreased number of homeless or at-risk-of-homelessness individuals and families within the RMWB;
Increased communication between social service agencies;
Increased strength of relationships between agencies and partners within the Housing First model;
Increased community strength and well-being.

14. List community partners and include letters of support.

WBWS internal-agency partnerships: Mark Amy Treatment Centre, WBWS Rapid Re-Housing & Outreach Programs;
Inter-agency partnerships: Waypoints; Centre of Hope (Drop in/Intake, HF, Outreach, PSH); Regional Municipality of Wood Buffalo (Landlord/Tenant Support); YMCA; CHOICES; STHT; Salvation Army (Mat & HF Programs); SOS; FNIHB; HIV North; Alberta Works; Mental Health Diversion Program; Canadian Mental Health Association; Northern Lights Regional Health Centre; Fort McMurray Recovery Centre; Athabasca Tribal Council; NEAFAN; Wood Buffalo Housing Development Corporation; Fort McMurray First Nation Band Office; Nistawoyou Friendship Centre; Soup Kitchen; Wood Buffalo Food Bank; Public Health; JSYF; St. Aiden's Society; Pastew Place Detox;

Outcomes:

15. What is the change you anticipate will happen as a result of the program?

Please see attached Logic Model.
Notable Outcomes:
Increased consistency and quality of assessment;
Decreased duplication of services; Increased coordination of CPH partnering agencies and ability of agencies to work together to actively prevent and reduce homelessness within the RMWB; Increased number of participants securing appropriate, stable housing;
Increased appropriateness of supports and services for Indigenous citizens;
Decreased number of homeless or at-risk-of-homelessness individuals and families within the RMWB;
Increased community strength and well-being.

Outcome Measures:

16. How will you know the program is working?

Achievement of CPH contract requirements;
Program operates within contract budget;
Current and accurate data collection as required by CPH;
Satisfactory participant enrollment numbers as per CPH contract;
Participant satisfaction to be measured by surveys and/or oral interviews;
Funder satisfaction to be measured by CPH to Agency reporting.

Outputs:

17. What are the direct results of the program activities? (percentages, numbers)

Each Centralized Intake (CI) Worker provides 40 hours/week of participant support and program delivery. Program supervision provided by full-time Team Lead, and Executive Director. Staff attendance at relevant and required trainings and meetings. CI workers accept clients from all coordinated access points and cross reference names on By-Name list to determine duplicity. Clients are ranked according to chronicity, VI-SPDAT score, current location, mental & physical health. CI workers determine appropriate CPH agency and transport client and client's file to selected agency and recommend a course of action. CI workers support and inform the RMWB CPH coordinators of program status, results and activities. CI workers meet reporting requirements, including use of ETO database. CI workers ensure the participation and representation of Indigenous homeless population. CI workers engage other local CPH partnering agencies, to actively work together to prevent and reduce homelessness.

18. How will you identify this program or project to the public as funded by the Municipality?

With required permissions, we will identify program funders via usage of approved statements on documentation, in social media (including website), and other agency promotions.

19. Operational Budget Review

Grant agreements cannot be issued until Council has approved the CPH allocation.
If approved, agreement term will be the 12 month period of April 1, 2019 to March 31, 2020.

Budget Item	Amount (12 months)	Notes
Salaries & Benefits (# of staff)	364,780.00	3 staff and 1 supervisor
Client Needs (# of clients)	5,400.00	
Operating Costs	20,684.00	
Rent Supplement		
Administrative Costs (10% of Total)	39,086.00	
Total Program Costs	\$ 429,950.00	

20. Provide any additional information that may assist in developing a better understanding of your organization or its programs/projects during the grant review.

The Wood Buffalo Wellness Society, operates both the Community Services (Homeless and Housing Programs) and the Mark Amy Treatment Centre (an in-community Life Skills and Addictions Program accredited with "Excellence in Service"). Within the last 5 years, we have seen marked growth in our programming and our ability to further our mandate of quality client care.

Through our Housing First service delivery we have positively impacted and assisted hundreds of clients to improve the quality of their lives through attaining housing, addressing mental health and addictions barriers, gaining employment/training and measurably improving their emotional well-being and physical safety. We have now been able to assist clients through much of their professional continuum of care in accessing service for addictions and mental health as well as securing safe, stable and appropriate long-term housing.

We pride ourselves on our skilled employees, our commitment to client-centered, strengths-based approach to client care and adherence to our core values of the 7 Traditional Aboriginal Teachings of wisdom, love, respect, courage, humility, honesty and truth.

There is genuine caring and dedication of our staff for the people we serve.

All staff continually utilize professional development opportunities within our budget, and Senior staff have attended Leadership Training with Org Code and the T3 institute to ensure program fidelity and compliance with Housing First best practices.

Completed and Signed Applications are to be submitted:

In Person or By Mail:

Community Investment Program
Corporate and Community Services
Regional Municipality of Wood Buffalo
9909 Franklin Avenue
Fort McMurray, AB T9H 2K4

OR

By Email: CIP@rmwb.ca

**LATE or INCOMPLETE applications will not be processed
(Community Investment Program Policy FIN-220, Section 3.1.5)**



WBWS Centralized Intake Program Logic Model

INPUTS	ACTIVITIES	OUTPUTS	SHORT-TERM OUTCOMES	INTERMEDIATE OUTCOMES	LONG-TERM OUTCOMES
<ul style="list-style-type: none"> -Three full-time Intake workers. -Supervisor/Team Lead. -Executive Director. -Social Profit Partners. -Funders/Stakeholders. -Program Participants (Clients). -Office space, equipment and supplies. -Computers & access to ETO. -Vehicle(s). 	<ul style="list-style-type: none"> -Accept referrals from all coordinated access points (community and social profit agencies, Government and NGOs, shelters), as well as self-referrals; -Determine chronicity via set criteria (Prioritization Chart), VI-SPDAT scores, current location, mental and physical health; -Delivery of Program (Triage and Intake Services) via In-Office visits, community interactions, staff attendance at 	<ul style="list-style-type: none"> -Each coordinator provides 40 hrs/week of participant support and program delivery. -Program supervision provided by Team Lead and Executive Director. -Staff attendance at relevant and/or required trainings and meetings. 	<ul style="list-style-type: none"> -Increase in supportive relationship for participants via referrals and transfers to social profit agencies and community supports. -Decreased duplication of services. -Creation and initial implementation of participants' self-directed goals towards housing. -Increase in number of participants connected to appropriate, stable housing. 	<ul style="list-style-type: none"> --Increased efficiency for participants and agency workers accessing the Housing First systems. -Increased responsible usage of Housing First program-wide funding. -Increase in participants' actual and perceived well-being. -Increase in participants' safety. -Increase in participants' social skills. -Increase in participants' autonomy—concurrent with resultant decrease in need for and usage 	<ul style="list-style-type: none"> -Long-term maintenance of appropriate, stable housing for participants. -Decrease in number of homeless or at-risk-of-homeless individuals and families within the RMWB. -Increased number of individuals and families having long-term stability and independence. -Increased community strength and well-being. -Culturally relevant responses given to

	<p>Marshal House, MATC, Salvation Army Mat program, COH, Soup Kitchen, etc.;</p> <p>-Determine appropriate CPH agency able to accept client;</p> <p>-Transport client and client's file to selected agency, and recommend a course of action for the client;</p> <p>-Provision of community services support to participants and community via education and advocacy;</p> <p>-Completion and maintenance of required documentation as per CPH guidelines, including utilizing the ETO database;</p>		<p>-Increase in identification and supports offered to Homeless citizens identifying as Aboriginal.</p>	<p>of other community supports.</p> <p>-Increase in participants' ability to obtain employment and/or a secure source of income support.</p> <p>-Increase in participants' sense of belonging to community.</p> <p>-Increase in number of participants connected to appropriate, stable housing.</p> <p>-Decrease in wait times for participants to receive housing.</p> <p>-Increase in participants' knowledge of RTA guidelines.</p> <p>-Increase in number and strength of positive landlord relationships.</p> <p>-Decrease in participants' usage and dependency on emergency and court services.</p>	Indigenous population.
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	<p>-Support and inform the RMWB Community Plan on Homelessness Coordinators about program status and other activities related to the prevention and reduction of homelessness within the RMWB;</p> <p>-Ensure the participation and representation of homeless and at-risk-of-homelessness individuals; identifying as Indigenous;</p> <p>-Staff attendance at relevant and/or required trainings and meetings;</p>				
<p>Outcome Indicators of Success:</p> <p>1: Achievement of CPH Contract requirements.</p> <p>2: Program operates within contract budget.</p> <p>3: Current and accurate data collection entered into ETO and all other documents as required by CPH.</p> <p>4: Satisfactory participant enrollment numbers as per CPH contract.</p> <p>5: Participant satisfaction to be measured by surveys and/or oral interviews.</p> <p>6. Funder satisfaction to be measured by CPH to Agency reporting.</p>					



Wood Buffalo Food Bank Association

I am pleased to write this letter in support of the Wood Buffalo Wellness Society in their application to provide the Centralized Intake and Outreach Programs.

The Wood Buffalo Wellness Society serves a demonstrated need in our community, especially to our Housing First, homeless, and at risk of homelessness populations.

The continuation of their Outreach and Centralized Intake Programs would be of great benefit to our community as we move forward in our 10 Year Plan to End Homelessness.

This agency has shown a high standard of professionalism and execution of best practices, and I would not only support but encourage the funder to approve their application in its entirety.

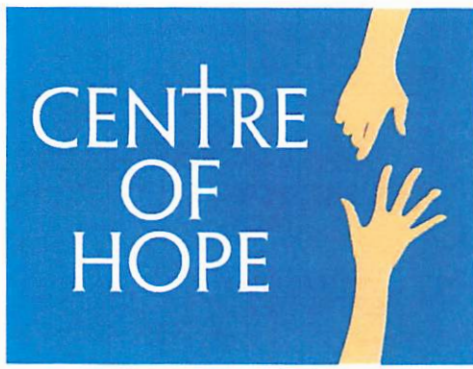
We at the Wood Buffalo Food Bank are very proud to be a supporting agency for the Wood Buffalo Wellness Society as they are to the Food Bank. We look forward to continuing our valued partnership.

If you would like to speak to me in person, please contact me at 780-743-1125.

Regards,

A handwritten signature in black ink that reads "Dan Edwards".

Dan Edwards
Executive Director
Wood Buffalo Food Bank Association
p.780.743.1125 ext229
f.780.743.9156



*Supporting individuals living in homelessness through
collaboration with the community and its support
systems*

To Whom it May Concern,

I am pleased to offer a letter of support for the Wood Buffalo Wellness Society, particularly their Centralized Intake and Outreach Program. The WBWS is a vital agency in our Community Plan On Homelessness. Having the WBWS Team as member of our service community allows for a more diverse community centered approach. Team Leads of all the CPH programs meet to form a collective approach towards clients case conferencing, community strategies, best practices, agency updates, and to share program successes. The WBWS Team provides insights and linkages to other programs being operated in their agency, which allows for easier client access and services.

The Centre of Hope's Housing Program, Permanent Supportive Housing Models, and Eviction Prevention programs receive and accept referrals from WBWS Centralized Intake program. The relationships between our agencies support staff is positive, and together they create a warm and safe environment for the client transfer. The Centralized Intake Program at WBWS also works closely with the Intake and Outreach services located at the Centre of Hope Drop in Program. The supporting staff maintains a positive and easy rapport with the Outreach Coordinators making communication and case conferencing productive.

The Outreach Program hosted through the WBWS is a key component of supporting individuals living in homelessness who do not meet the requirements for our currently Housing programs in community. It is imperative that these individuals receive the support to ensure that their needs are being met and that they are not moving further into chronic homelessness in this region.

I am happy to offer my support now and in the future for these very worthwhile initiatives. These programs are making a very real and positive impact in the lives of the clients served, and in our community.

Should you have any questions, or require additional information, please feel free to contact me at 780-743-3912 ext 222.

Amanda Holloway, BSW, RSW
Executive Director
Centre of Hope