Good Shepherd Performance Measures and Targets
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2024-2025 CARF Performance Indicator Grid Analysis
Program: Barrett Centre   **Date: July 15, 2025**

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Service Delivery Measures - Behavioural Health Programs	Overall High Level Objective	Frequency of Measure	Data Source	Obtained by	Performance Goal	Actual Results - 2024-2025 FISCAL YEAR											
						Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
examples of layout based on frequency of measures						Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
						Fiscal Year Total											
1.M.8 Accessible (how persons served move into and through the service delivery process)																	
BC Bed occupancy (10 beds)		monthly		Barrett	80%	62%	75%	66%	74%	72%	90%	74%	66%	64%	68%	66%	81%
BC # bed denials		monthly		Barrett	52	59	57	37	42	58	92	66	39	33	38	33	50
BC safe bed program bed occupancy (6 beds)		monthly		Barrett	60%	47%	83%	59%	35%	43%	39%	not avail	46%	23%	55%	31%	28%
BC # crisis calls		monthly		Barrett		537	584	479	568	482	520	528	522	447	477	503	566
BC - # New referrals - Harm Reduction Program		monthly		Barrett		6	6	4	6	0	5	6	8	2	8	3	2
BC - # New Patients Seen - Early Intervention Program		monthly		Barrett		44	36	14	8	2	38	43	35	24	15	8	34
1.M.7 Efficient (making best use of resources to deliver quality service and reduce unneccesary costs/waste)																	
BC - # individual served through crisis calls		monthly		Barrett		220	236	206	234	195	204	214	242	185	202	187	566
BC - # individuals served through face-to-face contacts		monthly		Barrett		41	27	32	33	24	23	20	38	32	23	19	22
BC - # unique Harm Reduction clients served		monthly		Barrett		42	48	43	44	32	36	39	35	31	38	40	44
BC - # Harm Reduction client interactions (face-to-face plus non face-to-face)		monthly		Barrett		53	83	47	54	47	73	74	65	50	68	69	93
BC - # Unique Peer Support clients served		monthly		Barrett		36	36	44	48	38	47	30	23	25	42	32	39
BC - # Peer support client interactions		monthly		Barrett		95	88	90	79	83	90	51	33	38	74	57	70
BC - # **Rapid Access Addiction Medicine** Program Clients		monthly		Barrett		41	55	52	52	53	46	61	43	41	49	50	45
BC - # Rapid Access Addiction Medicine client interactions		monthly		Barrett		146	178	143	134	156	150	193	170	132	201	150	191
BC - # **Health on Wheels** clients served (all - Medical, Mental Health, Peer Support, Harm Red)		monthly		Barrett		112	105	79	182	123	126	104	112	83	69	59	94
BC - # **Health on Wheels** client interactions (all - Medical, Mental Health, Peer Support, Harm Red)		monthly		Barrett		147	136	106	127	96	172	129	126	90	71	74	110
BC - # HOW Referrals made		monthly		Barrett			131	101	26	88	21	74	77	12	8	25	14
BC - # **Early Intervention Program** clients served		monthly		Barrett		165	160	102	23	5	132	145	139	101	90	35	103
BC - # Early Intervention client interactions		monthly		Barrett		275	258	151	29	7	202	227	211	166	129	39	161
BC - # Early Intervention program referrals made to other services (all)		monthly		Barrett		15	36	10	1	0	12	18	9	13	8	1	5
BC - # **Shelter Health Network** Clinic client interactions (all sites)		monthly		Barrett		1435	1528	1338	1306	1278	1343	1274	1316	1082	1525	1304	1501
BC - # **Foot Care** Clients Seen		monthly		Barrett		43	48	44	0	45	44	54	33	33	35		
BC - # **Community Connector** Unique individuals served		monthly		Barrett		34	46	33	20	21	28	33	35	25	27	25	7
BC - # Community Connector client interactions		monthly		Barrett		96	112	125	62	59	85	122	95	65	67	43	9
* BC - ER diversion		monthly		Barrett		407	389	379	420	403	426	448	395	378	408	373	389
BC - successful transitions (% discharges with referral)		monthly		Barrett		52%	47%	59%	50%	30%	44%	49%	46%	47%	50%	50%	46%
BC - clients with status improved at discharge from program (staff impression)		monthly	dir rept	Barrett			59%	67%	60%	54%	54%	67%	61%	65%	63%	64%	59%
1.M.5 Satisfaction (satisfaction and other feedback from persons served and other stakeholders)																	
* overall I am satisfied with the services I received Barrett		monthly		Barrett	85%	100%	96%	96%	100%	100%	96%	100%	92%	94%	100%	100%	100%
* I would recommend this program to others Barrett		monthly		Barrett	85%	100%	92%	96%	100%	100%	100%	100%	92%	100%	100%	100%	93%

Extenuating and Influencing Factors or Considerations
Demographic Characteristics of the Persons Served: anyone aged 16+ in Hamilton and surrounding area experiencing Mental Health or Addictions crisis
Impact of Extenuating or Influencing Factors: We continue to see a more acute population, often related to high levels of drug use, a lack of housing, and combined with significant, untreated mental health. There were no significant changes to staffing, management, or programming through the 24/25 year which would have heavy impact on the outcomes.
Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

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We had a decrease in occupancy by an average 7% but also saw a significant decrease (by an average of 23 a month) in bed denials, meaning that the referrals that are sent are more often being completed.
We continued to see a low occupancy in our Safe Beds program and have been working with the ministry around areas for improvement, including widening the net for referrals to include the Hamilton Wentworth Detention centre- this was approved in May 2025, and as such we hope it will reflect on the 25/26 annual stats comparatively.
Actions Developed Last Year – Did they accomplish intended results?
We saw a relatively same result for the "Improved at discharge", despite training which I believe therefore reflects the true status at discharge.
Findings – Trends/Causes/Issues Identified
With the new grid, it will be interesting to see 24/25 compared to 25/26 as more info might be gleaned from the various targets for trends.
Overall, numbers are within 2-7% variance between the 23/24 and 24/25 plans displaying consistency in the work that is being completed by the team at Barrett Centre.
Recommendations – Areas Needing Performance Improvement and Action Plans to Address
Ongoing analysis of bed denials as they occur to ensure that all possible intakes are being offered and to therefore improve occupancy rates.
Definitions, terms, acronyms

2024-2025 CARF Performance Indicator Grid Analysis
Program: Brennan House   Date: July 17, 2025

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Service Delivery Measures - Behavioural Health Programs	Overall High Level Objective	Frequency of Measure	Data Source	Obtained by	Performance Goal	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
examples of layout based on frequency of measures						Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
						Fiscal Year Total											
1.M.8 Accessible (how persons served move into and through the service delivery process)																	
BH # Referrals recevied from lead agency		monthly		Brennan													
BH Number of youth accessing mental health clinician		quarterly		Brennan	100%		100%			100.00%			100.00%			100.00%	
BH Youth with Complex Suicide Needs (YCSN) Protocol		quarterly		Brennan	25%		0			0			0			25	
BH % youth with length of stay longer than 6 months		quarterly		Brennan	30%		56%			43%			38%			44%	
BH Number of youth accessing consulting psychiatrist		quarterly		Brennan	100%		0%			0.00%			0.00%			0.00%	
1.M.7 Efficient (making best use of resources to deliver quality service and reduce unneccesary costs/waste)																	
Number of client satisfaction surveys being completed		quarterly		Brennan	85%		100%			100%			100%			100%	
Intakes with initial assessment completed within first month of stay		quarterly		Brennan	100%		100%			100%			100%			100%	
* Youth who indicate daily activities are easier for them		quarterly		Brennan	70%		100%			100%			n/a			71%	
1.M.5 Satisfaction (satisfaction and other feedback from persons served and other stakeholders)																	
* overall I am satisfied with the services I received (Brennan House)		quarterly		Brennan	85%		100%			100%			80%			86%	
* I would recommend this program to others (Brennan House)		quarterly		Brennan	85%		100%			100%			80%			71%	

Extenuating and Influencing Factors or Considerations

Demographic Characteristics of the Persons Served: Youth between the ages of 15-17 years old with mental health in need of out of home treatment.

Impact of Extenuating or Influencing Factors: Not receiving referrals or receiving inappropriate referrals. Youth looking for housing options vs mental health treatment, housing options are limited to transition.

Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

Brennan House received 4 referrals from Lynwood Charlton Centre ASN in the last fiscal year.

Brennan House serviced 15 youth in the fiscal year. All transitions avoided homelessness.

Actions Developed Last Year – Did they accomplish intended results?

Increase the occupancy. We continue to engage with community partners to increase referrals. Aware of the youth accessing Notre Dame Shelter to engage in potential referrals. Communication with child welfare for potential referrals

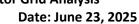**Findings – Trends/Causes/Issues Identified**

More community engagement needed

More family engagement needed to avoid shelter

More options for supportive housing in the community

Recommendations – Areas Needing Performance Improvement and Action Plans to Address
Continue to engage with Lynwood Charlton Centre ASN to increase referrals
Find a way to engage the community to explain the supports offered at Brennan House – plans to reach out to community partners to educate them with what Brennan House has to offer to increase occupancy and to avoid inappropriate referrals

Definitions, terms, acronyms					

2024-2025 CARF Performance Indicator Grid Analysis
Program: Communications   Date: June 23, 2025

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Business Process Measures			Frequency of Measure	Data Source	Obtained by	Perf. Goal	Actual Results - 2024-2025 FISCAL YEAR											
							Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
		examples of layout based on frequency of measures				.	Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
						.				Twice Yearly					Twice Yearly			
						.				Fiscal Year Total								
1.D	**Input from Persons Served and Other Stakeholders**					.												
	% website users that were "new users" (first visit)		monthly	Google analytics	Comms		83%	83.50%	85.10%	83%	83.50%	85.10%	83%	83.50%	85.10%	92%	92.80%	92.40%
	Facebook fans/followers		quarterly	Buffer	Comms		4090	4091	4135	4090	4091	4135	4090	4091	4135	4138	4146	4153
	Instagram fans/followers		quarterly	Buffer	Comms		2858	2916	3080	2858	2916	3080	2858	2916	3080	3101	3198	3299
	LinkedIn fans/followers		quarterly	Buffer	Comms		2332	2455	2614	2332	2455	2614	2332	2455	2614	2631	2698	2751
	Facebook posts		quarterly	Buffer	Comms		70	59	111	70	59	111	70	59	111	25	26	46
	Instagram posts		quarterly	Buffer	Comms		31	34	69	31	34	69	31	34	69	17	12	28
	LinkedIn posts		quarterly	Buffer	Comms		46	21	27	46	21	27	46	21	27	8	7	13
	Facebook engagement		quarterly	Buffer	Comms		3.70%	4.30%	8.08%	3.70%	4.30%	8.08%	3.70%	4.30%	8.08%	16.70%	4.28%	5.93%
	Instagram engagement		quarterly	Buffer	Comms		6.30%	3.98%	4.38%	6.30%	3.98%	4.38%	6.30%	3.98%	4.38%	3.87%	3.32%	3.72%
	LinkedIn engagement		quarterly	Buffer	Comms		6.29%	5.66%	6.39%	6.29%	5.66%	6.39%	6.29%	5.66%	6.39%	8.62%	8.13%	6.73%

Extenuating and Influencing Factors or Considerations

Impact of Extenuating or Influencing Factors: In the last year we decided to stop using X (formerly Twitter) as much due to its controversies and the absence of accurate information dissemination.

Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

Some follower growth has been influenced by fundraising campaigns (managed by Blakely) as we have increased the amount of social media activity involved in those campaigns and increased the frequency of those campaigns throughout the year. Our Instagram follower count exceeds that of most similar organizations by 20-25%. Our Facebook follower count is on par with that of other agencies.

Actions Developed Last Year – Did they accomplish intended results?

In an effort to substitute X (Twitter), we initiated a BlueSky account; however, the platform has been growing at a slow pace. At present, we have 27 followers.

To reduce expenses, we transitioned from Hootsuite to Buffer for our social media management, and it has proven effective in scheduling posts and analyzing data, while saving the organization money.

Findings – Trends/Causes/Issues Identified

Content Format Trends: Reels and carousels are top-performing formats across the industry.

Posts concerning community events, fundraising initiatives, and campaigns aimed at raising awareness of social issues tend to achieve the highest levels of engagement.

Posting Cadence: Posting frequency positively correlates with growth, but quality still beats quantity.

Recommendations – Areas Needing Performance Improvement and Action Plans to Address

Expand use of reels/videos; repurpose across platforms.

Increase the frequency of posts regarding community events and awareness initiatives.

Definitions, terms, acronyms

- **Fans/Followers** the number of people who "like" or follow our accounts.
- **Posts** are the number of posts (pictures/videos) we made on our accounts.
- **Engagement** means the number of reactions, comments, and shares received by our posts and by other posts where people mentioned us.
- **Reels** are short, vertical videos users can create, edit, and post to their profiles within Instagram and Facebook. Unlike Stories, Reels won't disappear after 24 hours, and they're easy to save or share.
- **Carousel** is a post containing more than one photo or video, which social media users can view by swiping left on the post.

2024-2025 CARF Performance Indicator Grid Analysis
Program: Good Shepherd Non-Profit Homes Toronto Housing   **Date: July 3/2025**

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Business Process Measures	Frequency of Measure	Data Source	Obtained by	Perf. Goal	Actual Results - 2024-2025 FISCAL YEAR											
					Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
examples of layout based on frequency of measures			.		Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
			.		Twice Yearly						Twice Yearly					
			.		Fiscal Year Total											
1.D Input from Persons Served and Other Stakeholders			.													
LEAC Toronto Confidence Members contributions, decisions, actions will be implemented	monthly	LEAG monthly report	LEAG Coord							33%	88%	87%	88%	88%	88%	75%	100%	40%
LEAC Toronto Overall effectivness of meetings	monthly	LEAG monthly report	LEAG Coord							67%	75%	87%	100%	100%	100%	75%	100%	80%
1.M Other			.													
Occupancy Rate (NPH-TO)	monthly	Directors report	NPH-TO	95%	89.70%	89.40%	90.90%	92.5%	92.20%	94.50%	95.50%	96.70%	96.70%	96.10%		96.70%
Arrears (NPH-TO)	monthly	Directors report	NPH-TO	<10%	9%	7.90%	3.90%	5.20%	5.20%	7.24%	8.50%	6.70%	6.20%	6.80%		5.21%
Work Orders Completed within 14 Days (NPH-TO)	monthly	Directors report	NPH-TO	>80%	99%	88%	91%	89%	91%		91%	99%	99%	99%		99%
Trustee cash on hand (reduce) NPH-TO	monthly	Directors report	NPH-TO	<6.6	6.40	6.90	6.20	7.80	6.30	7.90	7.30	7.30	7.40	6.80		6.40
# People housed (NPH-TO)	monthly	Directors report	NPH-TO	baseline	277	276	281	286	285		292	298	322	321		326

Extenuating and Influencing Factors or Considerations

Demographic Characteristics of the Persons Served:

Adults aged 18+, all genders, people living with mental health hand/or substance use related needs, and often have histories of homelessness

Impact of Extenuating or Influencing Factors:

Arrears amounts tended to trend higher during times of staffing transitions, attributed to lack of ability to attend to this in a timely proactive fashion.

Occupancy rate: dipped during period of transition of leadership as well as the acquisition of units for the VHP program which lagged in admission. The occupancy rate target was increased to offset the losses associated with the lower vacancy rate.

Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

Arrears amounts below target though did contribute to pressure on the fiscal health of NPH Toronto

Work orders continue to be completed in a timely fashion by Good Shepherd staff, though work orders that are the responsibility of the landlord does (not reflected in this stat) do continue to fledge.

Trustee continues to trend above target as the norm with no substantial reduction below previous years.

Occupancy rate will be maintained at a higher level to offset losses associated with the lower rate in the earlier part of the fiscal year.

Trend of missing data twice per year, all red herrings with no correlation – associated with absences or increased pressures

Actions Developed Last Year – Did they accomplish intended results?

Outstanding Work Orders began being tracked on the property managers monthly report, allowing for 'Director' awareness for work orders being carried over, the timelines associated with any carried over work orders. This also allows the property manager to have greater eyes on once monthly to attempt to resolve.

Increased scrutiny to the occupancy rate and # of people housed in the HOST and ASH program on a monthly basis
Findings – Trends/Causes/Issues Identified
As above
The LEAC confidence and effectiveness was largely attributed to the mental health or wellbeing of attendees. There were incidents associated with member wellbeing during each of the meetings with lower scores. Must continue to problem solve around the correct measures that will allow effective monitoring of this initiative.
Recommendations – Areas Needing Performance Improvement and Action Plans to Address
Arrears/Occupancy: as detailed above
Trustee: performance management and/or control mechanisms that flag high months
LEAC: reassess metrics in consultation with the LEAC themselves, review of literature of advisory groups as to recommended measures
Definitions, terms, acronyms
LEAC: Lived Experience Advisory Committee

2024-2025 CARF Performance Indicator Grid Analysis
Program: Good Shepherd Non-Profit Homes Toronto   Date: July 3, 2025

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Service	Delivery Measures - Behavioural Health Programs	Overall High Level Objective	Frequency of Measure	Data Source	Obtained by	Performance Goal	Actual Results - 2024-2025 FISCAL YEAR											
2.B.2	HOST Average # days waiting for service initiation		monthly		NPH-TO		23.5	64	27	12.5	21.25	44.25	84.5	0	0	0	-	0
	ASH Average # days waiting for service initiation		monthly		NPH-TO		19.25	0	34	13	28.3	7	37	0	17	25	-	0
	ICM Average # days waiting for service initiation		monthly		NPH-TO		0	19.6	24.8	23	26.5	26.5	20.2	0	19	44.6	-	0
	CWS Average # days waiting for service initiation		monthly		NPH-TO		no data	29	46.7	40.6	13.5	56.5	15.6	8.25	15	6.75	-	0
	# HOST individuals served		monthly		NPH-TO		200	203	203	202	202	205	205	205	203	203	-	201
	# ASH individuals served		monthly		NPH-TO		38	39	38	38	38	40	42	47	47	49	-	48
	# DTC individuals served		monthly		NPH-TO	10	6	7	6	6	7	7	8	8	9	9	-	9
	# Holmes individuals served		monthly		NPH-TO	10	8	8	8	8	8	8	8	8	8	8	-	8
	# Manse individuals served		monthly		NPH-TO	10	10	10	9	8	8	8	10	9	10	10	-	10
	# ICM individuals served		monthly		NPH-TO	>65	54	57	56	56	55	57	58	53	55	55	-	55
	# CWS individuals served		monthly		NPH-TO	>80	76	86	75	67	73	74	83	79	82	81	-	64
**	# Evictions (NPH-TO)		monthly		NPH-TO	0-1%	0	0	0	0	0	0	0	0	0	0	-	0
	# HOST hospital admissions (NPH-TO)		monthly		NPH-TO		2	5	7	4	4	4	7	6	0	3	-	2
	# ASH hospital admissions (NPH-TO)		monthly		NPH-TO		3	3	6	2	4	1	0	0	0	1	-	1
	# DTC hospital admissions (NPH-TO)		monthly		NPH-TO		0	1	0	0	1	0	0	0	3	0	-	1
**	# Holmes return to hospital due to mental health (NPH-TO)		monthly		NPH-TO	<2	1	1	0	0	0	0	0	0	0	0	-	0
**	# Manse return to hospital due to mental health (NPH-TO)		monthly		NPH-TO	<2	0	1	0	1	0	0	0	1	1	0	-	0
	# ICM hospital admissions (NPH-TO)		monthly		NPH-TO		0	0	0	0	1	0	0	0	0	0	-	0
	CWS average # interactions per active unique clients		monthly		NPH-TO		-	3.2	2.6	2.6	2.6	2.2	2.66	2.84	1.58	2.57	-	3.2
	# Social skills group programming interactions		monthly		NPH-TO		4	82	104	162	86	150	168	133	157	218	-	172
	# Grocery supports provided (baseline data point)		monthly		NPH-TO		-	9.65	6.25	9.05	4.87	4.6	6.05	5.8	6.57	5.92	-	7.5
	# NPH-TO individuals Housed		monthly		NPH-TO		277	276	286	286	285	290	292	298	322	321	-	326
	# NPH-TO individuals served in Community Programs		monthly		NPH-TO		230	244	225	225	230	233	236	232	234	233	-	214
*	overall I am satisfied with the services I received NPH-Toronto		annually		NPH-TO	85%	TBA											
*	I would recommend this program to others NPH Toronto		annually		NPH-TO	85%	TBA											

Extenuating and Influencing Factors or Considerations

Demographic Characteristics of the Persons Served:

Clients ranged in age from 19 to 86 years, with approximately 47% aged 55 and older, indicating a substantial portion of older adults within the service population.

In terms of gender identity, the majority of clients identified as male (approximately 58%) or female (approximately 36%). Smaller proportions identified as transgender (3%), non-binary (less than 1%), Two-Spirit (less than 1%), or other (less than 1%), while less than 1% preferred not to disclose. Gender identity was unknown for approximately 2% of clients.

Roughly 3% of clients identified as Indigenous, including individuals who identified as First Nations, Métis, Non-Status, or Indigenous (unspecified).

Impact of Extenuating or Influencing Factors:

It was noted that there was a leadership change in the early part of 2024. This transition is reflected in the admission and occupancy numbers to the supportive housing programs though improved vastly

New metrics established for monitoring, average days waiting, developing, and understanding to the influencing factors for average days waiting.

Increase during summer months indicate a trend upwards in social skills group programming interactions.

It is noted that the grocery supports provided tend to bobble up and down, though with increased focus and monitoring, and tracking more carefully we begin to see the number become more consistent.
A trend upwards in the total number of persons housed through NPH Toronto is increased in the latter part due to the acquisition of a new apartment building
Improved understanding of the ratio between HOST and ASH and the census numbers between programs.
Recommendations provided by the LEAC for CWS
Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations
Improvement to occupancy numbers and closing the gap on days waiting for service initiation as the year progressed, with greater monitoring and attention.   A further understanding as to the ratio of clients between the supportive housing programs allowed us to create more balance between the programs reflecting the funding pockets this led to an increase of ASH clients.   Greater scrutiny to the performance of the DTC program saw improvements to the number of clients within these programs as well as targeting the number of off-line or unavailable units overall to support housing programs.   Notable upticks occasionally with hospital admissions that is somewhat proportional across programs something to monitor for the future to understand trends or if sentinel.   Great improvement to the number of days waiting for service initiation overall.
Actions Developed Last Year – Did they accomplish intended results?
Set clear expectations for Creative Works Studio individual served, which allowed for better tracking of understanding to the impact of the Creative Work Studio clarified overall understanding of minimum individuals served across all programs continued challenge with referrals to ICM due to issues with external referring agent.
Tracking of hospitalizations across programs is somewhat ineffective and no clear information gleaned
However, an understanding of the hospitalizations in the residential programs, Holmes and Manse, illuminated a picture whereby individuals or more likely to be hospitalized on a frequent basis in the early part of their early admission to the program. It was found that it tapers off after individual develops skills living in community.
An emphasis on external resources for grocery supports and food boxes allowed the grocery card usage to taper down.
Better tracking overall
Stengthed programming offerings overall and the advertisement of said programming opportunities increased overall interactions and group-based interactions, along with the increase in tracking metrics = increased engagement
CWS increased external activities through community partnerships, as well as were responsive to feedback provided by the LEAC on creating a more welcoming environment.
Findings – Trends/Causes/Issues Identified
As above
Recommendations – Areas Needing Performance Improvement and Action Plans to Address
Reduce the number of vacancies to target, modify the measurements for next year to make meaningful to the program, LEAC review of the CWS and implementation of strategies for closing the gap on program start times across the board.
Definitions, terms, acronyms

HOST: Mental Health Supportive Housing

ASH: Addiction Supportive Housing

DTC: Drug Treatment Court Partnership

ICM: Intensive Case Management

CWS: Creative Works Studio

2024-2025 CARF Performance Indicator Grid Analysis
Program: HOMES   Date: July 8, 2025

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Delivery Measures - Behavioural Health Programs	Overall High Level Objective	Frequency of Measure	Data Source	Obtained by	Performance Goal	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
Actual Results - 2024-2025 FISCAL YEAR																	
examples of layout based on frequency of measures					.	Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
					.	Fiscal Year Total											
Accessible (how persons served move into and through the service delivery process)					.												
time between first contact and screening (HOMES: referral to intake)		quarterly	MC table	HOMES		122			439			23			55		
time between screening and intake assessment or referral (HOMES: intake to entry)		quarterly	MC table	HOMES		4			28			8			4		
# new clients added to wait list		monthly	Kmurphy	HOMES		8	11	11	31	10	10	8	6	11	16	11	7
# clients removed from wait list (separate out not intake related, due to intake)		monthly	Kmurphy	HOMES		9	10	10	15	11	4	5	15	10	15	4	11
number of clients on wait list		monthly	Kmurphy	HOMES		305	306	307	323	322	328	331	322	323	324	331	327
number of clients on wait list contacted within past 90 days		monthly	Kmurphy	HOMES		72			78			65			101		
Efficient (making best use of resources to deliver quality service and reduce unneccesary costs/waste)					.												
# HOMES individuals served		monthly	MIS 455	HOMES		537	538	539	541	535	533	531	527	533	530	536	538
# tenant interactions (individual SPIs)		monthly	MIS 265	HOMES		9207	9792	8783	9555	7994	7152	7831	7352	7156	7849	6867	7717
# tenant groups		monthly	MIS 266	HOMES		264	211	253	267	317	266	241	221	320	245	219	274
# STH/STOP members		monthly	MIS 455	HOMES		110	113	119	118	117	97	100	100	97	91	90	92
#STH interations (individual SPIs)		monthly		HOMES		19	17	51	26	29	21	30	23	24	34	41	36
#STH interactions (Groups SPIs)		monthly	activity tabl	HOMES		130	160	169	204	172	158	231	222	229	324	219	246
# STH groups		monthly	MIS 266	HOMES		31	45	37	45	43	38	58	51	47	61	45	44
# hospital episodes (HOMES) *issue to consider: 15 individ with >30 days - quarterly?		monthly	CDS 21	HOMES		7			18			15			11		
# unique tenants seen by NP		monthly		HOMES		60	119	121	111	110	121	118	114	109	109	173	165
# NP visits/consults (contacts)		monthly		HOMES		98	130	115	119	114	101	80	160	95	123	113	126
# medical emergencies requiring EMS		monthly	KMurphy	HOMES		4	9	5	9	9	8	4	3	8	6	3	8
Satisfaction (satisfaction and other feedback from persons served and other stakeholders)					.												
overall I am satisfied with the services I received HOMES		annual	OPOC 35	HOMES	95%	85%											
I would recommend this program to others HOMES		annual	OPOC 36	HOMES	95%	85%											

Extenuating and Influencing Factors or Considerations

Demographic Characteristics of the Persons Served: Individuals with complex medical, addictions and psychiatric wellness inclusive of a history of chronic homelessness. Priority populations include: Women, LGBTQ2, Indigenous, Youth and Francophone Communities.

Impact of Extenuating or Influencing Factors: volatile housing market, limited financial resources, strained availability of experienced human resources. Stigma, oppression, increase in the marginalization and blaming of individual living with mental illness and addictions.

Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

We have seen a increase in time between referral to intake over the last two years. We believe there are a number of influencing factors impacting these metrics. To aid in bringing these numbers into an acceptable range we have created a new role within the HOMES program that will assist in transitions.

Actions Developed Last Year – Did they accomplish intended results?

We assumed operation of an existing supportive housing site in Niagara Falls. As we implemented existing policies, training and procedures at that site we saw a significant decrease in reportable incidents, which included police and EMS involvement

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Findings – Trends/Causes/Issues Identified
Give the national crisis of homelessness more people are being identified as requiring supportive housing. Assessment tools are often influenced by the individual administrating them. The need for housing and the need for supportive housing needs to be better defined.
Recommendations – Areas Needing Performance Improvement and Action Plans to Address
HOMES will be working on improving are referral to intake into the program. When a unit becomes available we should be able to house someone in it within 14 business days. The only exception to this may be the TRHP program

Definitions, terms, acronyms	
HOMES – Housing, Onsite / Outreach, Mobile, Engagement Services	TRHP – Transitional Rehabilitative Housing Program (Forensic partnership with St. Joe's)

2024-2025 CARF Performance Indicator Grid Analysis
Program: Good Shepherd Non-Profit Homes Housing (Hamilton)   **Date: June 24, 2025**

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Business Process Measures	Frequency of Measure	Data Source	Obtained by	Perf. Goal	Actual Results - 2024-2025 FISCAL YEAR											
					Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
examples of layout based on frequency of measures				.	Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
				.	Twice Yearly						Twice Yearly					
				.	Fiscal Year Total											
1.M **Other**				.												
Occupancy Rate - Hamilton (Hamilton)	monthly	Directors report	Housing	95%	95.7%	94.8%	94.8%	93.8%	93.2%	92.6%	93.2%	93.4%	93.4%	93.2%	93.6%	93.8%
Arrears by Amount (Hamilton)	monthly	Directors report	Housing	<20%	6%	9%	9%	8%	6%	2%	4%	5%	6%	6%	6%	6%
Work Orders Completed within 14 Days (Hamilton)	monthly	Directors report	Housing	>80%	87%	84%	76%	75%	83%	87%	87%	86%	79%	90%	85%	86%
# People housed (Hamilton)	monthly	Directors report	Housing	baseline	835	836	846	842	844	849	843	845	851	855	862	854

Extenuating and Influencing Factors or Considerations

Demographic Characteristics of the Persons Served: Mental health issues, chronic homelessness, addictions issues, seniors, low-income singles and families, youth.

Impact of Extenuating or Influencing Factors: Legislation (RTA, HSA) – Long wait times at the LTB to navigate terminating tenancies / mediating behaviour issues and arrears. The delay's and restrictions imposed by the LTB can cause difficulties when attempting to support residents who reside in supportive housing and when immediate action is imperative to the safety of staff and other residents.

Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

Behaviour Issues: There has been a significant increase in behaviour concerns resulting in an increase in Tribunal paperwork being issued to residents compared to previous years.

Vacancies: Vacancies rate is higher than target but have been stable. Tenant selection process impacts the days vacant, this is to ensure appropriate fit for the building / community and to avoid potential lengthy eviction process.

Arrears: Decrease in arrears from Q1 to Q3. Q4 trends higher, we see an increase in arrears after the holidays. Due to low-income residents, re-payment agreements often span over a year.

Work Orders: Continue to achieve work order completion goal (December being an exception – could be due to holiday) – work order turn around goal still being achieved despite portfolio growth. 14 day goal exceeds industry standard.

Actions Developed Last Year – Did they accomplish intended results?

 Arrears: Continuing with eviction prevention plan through arrears agreements; Issuing letters and N4's within week 2 – residents can use N4's to apply for rent relief through the housing help centre. Ensuring timely communication with tenants and support teams have stabilized arrears.

Findings – Trends/Causes/Issues Identified

Pest Control: Tenants experience challenges with pest control preparation – this impedes the landlords ability to efficiently and effectively eliminate pests in the building.

Arrears: Tenants struggle with filing taxes and providing Notice of Assessment – this will impact their subsidy and potentially put them in arrears as the rent increases.

Recommendations – Areas Needing Performance Improvement and Action Plans to Address

Pest Control: Early intervention with units that have issues with preparation, no access, lack of reporting. Housing has been taking a firmer approach with residents who deny access / are not prepared for treatment – this includes warning letters, N5's and communicating their housing will be put at risk if they do not comply. Chargebacks are also being issued when appropriate. Connecting with support teams, engaging contractors for prep service will also assist in reducing active cases.

Arrears: Early intervention is key when managing arrears – issuing N4's in a timely manner

Definitions, terms, acronyms			
LTB – Landlord & Tenant Board	HSA – Housing Services Act	RTA – Residential Tenancies Act	N4 – Notice to Terminate Tenancy for Arrears

2024-2025 CARF Performance Indicator Grid Analysis
Program: Human Resources   **Date: July 29, 2025**

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Business Process Measures			Frequency of Measure	Data Source	Obtained by	Perf. Goal	Actual Results - 2024-2025 FISCAL YEAR												
						.	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
		examples of layout based on frequency of measures				.	Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
						.	Twice Yearly						Twice Yearly					
						.	Fiscal Year Total												
1.I	**Workforce Planning**					.												
	% performance appraisal completion (% files with PA dated in last calendar year)		annually	ADP	HR	80%							33%					
	Turnover rate by time		annually	ADP	HR								24%					
	# positions posted		quarterly	ADP	HR								316					
	# positions filled		monthly	Applicant Pro	HR								479					
	Time to fill positions (weeks)		monthly	Applicant Pro	HR								5.49					
	# Employee relations issues		monthly		HR								101					

Extenuating and Influencing Factors or Considerations

Impact of Extenuating or Influencing Factors: Growth, competitiveness, and compensation have continue to contribute to recruitment challenges.

Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

Turnover analysis is for full time and part time – Fiscal 24/25 turnover is 30%; Fiscal 23/24 turnover is 34% and fiscal 22/23 turnover is 53%. We have seen a decline in turnover over the last fiscal year most likely due to the implementation of the ATS which provided for a pool of more qualified applicants, changes in compensation and benefit. Goal is to continue to improve turnover.

Applicant Tracking – fulsome review will be next fiscal as the system is new and numbers where not previously tracked.   This includes # posted, # filled and time to fill. Previous fiscal it was estimated time to fill was over 6 months; however the number is soft as the tracking was not solid

Performance Appraisals – HR will be creating a follow up process, including working with managers in a advance of completing the forms, via email, teams, and other methods of support and coaching.

 # Employee Relations – This number is most likely under represented, as we are just starting to track

Actions Developed Last Year – Did they accomplish intended results?

Implemented and ATS, revamp compensation and added more benefits – this will have contributed to the reduced turnover

Findings – Trends/Causes/Issues Identified

Turnover remains high, and need to continue to develop strategies – improved recruitment and onboarding are key strategies

Recommendations – Areas Needing Performance Improvement and Action Plans to Address

Continue to work on strategies on recruitment, onboarding and employee relations (need to track to better understand issue/develop training)

Definitions, terms, acronyms

Actual Results - 2024-2025 FISCAL YEAR

Service Delivery Measures - Employment/Community Services Programs	Overall High Level Objectiv	Frequency of Measu	Data Source	Obtained by	Performance Goal	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
examples of layout based on frequency of measures					.	Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
					.	Fiscal Year Total											
1.M.8 Accessible (how persons served move into and through the service delivery process)					.												
# Clients in shelter (Men's Centre)			DR: # clients current year	MC		101	115	116	112	113	109	108	99	109	128	100	129
Occupancy Rate (MC)				MC		98%	98%	98%	98%	99%	97%	99%	99%	99%	99%	99%	98%
Number of diversions (MC)				MC		0	0	1	2	0	5	1	0	2	2	0	0
1.M.7 Efficient (making best use of resources to deliver quality service and reduce unneccesary costs/waste)					.												
time between entry into program to obtaining permanent housing (Men's Centre)			DR: av LOS for individ housed	MC		44	49	33	22	8	44	15	44	40	14	25.5	55
1.M.4 Effective (results or benefits that persons served or other stakeholders expect from the services delivered, outcomes/impact, aligning services with bes					.												
* #/% of unique clients served achieving permanent housing (Men's Centre)			DR: # men assisted in relocating in community	MC		11	11	8	14	8		6	9	4	5	5	7
1.M.5 Satisfaction (satisfaction and other feedback from persons served and other stakeholders)					.												
* overall I am satisfied with the services I received (MC)			Client Satisfaction Survey	MC	85%	74%						86%					
* I would recommend this program to others (MC)		monthly	Client Satisfaction Survey	MC	85%	80%						85%					

Extenuating and Influencing Factors or Considerations

Demographic Characteristics of the Persons Served: Men 18+ that are experiencing homelessness. A large percentage of our service users struggle with mental health, mental illness, poor medical health, and addictions. Some of our service users are chronically homeless due to the lack of resources for those with significant co-occurring disorders. Others service users may be precariously housed due to loss of income, refugees and family breakdown.

Impact of Extenuating or Influencing Factors: The housing crisis is the biggest factor which has had a massive impact on homelessness. Clients on ODSP, CPP/OAS or OW do not have enough money for rent and basic needs, which often puts them in peril to make a choice – pay rent or buy food. Add on the following influencing factors: opioid crisis in the city of Hamilton, the lack of resources and support for those with addictions and mental illness, and the influx of immigrants claiming refugee status, has all led to a greater demand on emergency shelter beds. Limited capacities of clients in handling their personal finances and poor physical health are other prevalent factors that have ongoing impacts for client success.

Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

In the last year, the City of Hamilton has experienced the men's homelessness population grow and there are more encampments throughout the city. As part of the City's Winter Response Strategy and the growing demand, 50 more shelter beds have been running since Jan 2025, The opioid crisis and the increasing use of fentanyl laced narcotics, overdoses continues to be a concern however we have seen a . In 2022-2023 there were 65 overdoses, and in 2023-2024 there were 85. In 2024-25 there were a total of 42 overdoses. That is a decrease of 50%. The number of seniors accessing shelter in 2023-2024 there were 112 and in 2024-2025 there were only 54.

Actions Developed Last Year – Did they accomplish intended results?

The Early intervention program is to address and support clients in conducting a housing search including accompaniment into the community, filling out rental applications, and offering advocacy where required, while also liaise with community landlords to develop partnerships and build an inventory of rental units. In 2023-2024, the Early Intervention Worker helped 128 men find housing. In 2024-2025 we assisted 92 men in obtaining housing. We believe the decrease is due to the availability of affordable housing as it continues to worsen. The Early Intervention builds relationships with community resources and landlords to increase the number of housing opportunities for our clients.

An Embedded Harm Reduction Worker started in October 2024. Their role is to reduce overdoses, increase awareness and education to clients and colleagues, improve community health and ensure people are using safely and offer recovery programs if requested. Harm Reduction strategies and integral part of Service we provide. We have seen a significant decrease in drug poisonings and more people willing to begin the recovery process. Our hope is to extend the Harm reduction worker contract.

Findings – Trends/Causes/Issues Identified

Decrease in overdoses-can be related to drug supply, tolerance and Harm Reduction Worker supports

Decrease in seniors accessing shelter.

Recommendations – Areas Needing Performance Improvement and Action Plans to Address

Decrease average length of stay in shelter through the capacity development of Early Intervention Program and Diversion Program and Harm Reduction Program

Increase the number of men assisted in relocating into suitable housing in the community. With the introduction of the Early Intervention Program, seeking specialized training to support EIW via conferences, workshops etc. Establish committee with other like-minded service providers to share best practices and resources.

Increase staff training and support in the areas of compassion fatigue, building resiliency, addictions, mental health/illness, and preventing & de-escalating aggressive behaviours. Continually seek professional training opportunities to build and increase professional competencies and capacities. This will assist in recruitment and retainment of employees, develop greater consistency & continuity within the program, which ultimately enhances service delivery and more positive client outcomes.

Definitions, terms, acronyms

Service Delivery Measures - Employment/Community Services Programs	Overall High Level Objective	Frequency of Measure	Data Source	Obtained by	Performance Goal	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
examples of layout based on frequency of measures					.	Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
					.	Fiscal Year Total											
1.M.8 Accessible (how persons served move into and through the service delivery process)					.												
1.M.7 Efficient (making best use of resources to deliver quality service and reduce unneccesary costs/waste)					.												
4.T time between entry into program to obtaining permanent housing (NDH Shelter)			DR: NDH average days to youth entering shelter	NDH		57	45	20	163	188	na	113	76	37	136	99	56
4.T time between entry into program to obtaining permanent housing (Youth Diversion)			DR: YD: avg day of service between intake & hsg	NDH		0	30	15	21	21	na	na		27	0		na
1.M.4 Effective (results or benefits that persons served or other stakeholders expect from the services delivered, outcomes/impact, aligning services with bes				.													
4.T #/% of unique clients served achieving permanent housing (Youth Diversion)			DR: YD youth housed	NDH		0	1	2	2	2	0	0	0	2	0	1	0
* # youth maintain housing status 6 months post move-in (Youth Diversion)		monthly	DR: YD housed at 6 mos f/up	NDH		0	0	2	0	0	1	0	0	2	3	0	0
# youth diverted from the homeless-serving system (Youth Diversion)		monthly	DR: YD # diversions	NDH		2	0	0	0	0	2	2	1	0	2	0	1
youth successfully housed from shelter		monthly	DR: NDH # moved to independent housing	NDH	3	2	5	4	3	3	0	1	5	2	1	4	1
youth successfully diverted from shelter		monthly	DR:NDH diversion succcessful	NDH	5	4	6	6	6	1	5	1	2	2	1	4	0
1.M.5 Satisfaction (satisfaction and other feedback from persons served and other stakeholders)				.													
* overall I am satisfied with the services I received (NDH)				NDH	85%	85%			85%			71%					
* I would recommend this program to others (NDH)				NDH	85%	76%			90%			73%					

Extenuating and Influencing Factors or Considerations

Demographic Characteristics of the Persons Served: Clients aged 16-21 years experiencing homelessness, as well as experiencing issues with mental health and/or substance misuse; who lack natural and family supports; who may not be engaged in education or employment and may be engaging in criminal behavior; youth who are victims of human trafficking; racialized and indigenous youth; and youth who are part of the LGBTQ2S+ community.

Impact of Extenuating or Influencing Factors: Market rent prices continue to increase. Ontario Works (OW) does not provide enough for clients to pay rent and meet basic needs, as the cost of rent alone often takes more than 90% of a client's monthly income from OW. OW rates have not increased with the increased cost of living. High rental prices result in clients staying in shelter longer, with a greater risk of street involvement and greater risk for developing complex mental health and addiction issues which create further barriers to obtaining permanent housing.

Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

Increased occupancy rate end of Q3 and through Q4.

While the average number of days from intake to housing for NDH increased for most months, there was only one month (September 2024) where no youth were housed. Compared to the previous fiscal year, where there were 7 months of the year with no clients being housed.

Actions Developed Last Year – Did they accomplish intended results?

Completing Satisfaction Surveys will be added to Calendars for all staff: this area continues to need improvement as surveys for Q4 were not completed in time, however there was still improvement when compared to the previous year.

To combat the increasing length of stays, a youth savings plan will be implemented as part of the Plan of Support for all Residents: Savings plan was not implemented as plans to edit/re-create the Plan of Support document were put on hold. This area will continue to be a recommended area of focus for the year to come.

Findings – Trends/Causes/Issues Identified
We continue to see an increased length of stay for clients.
Despite longer stays, we continue to see youth move out of shelter nearly every month.
Increased occupancy appears to correspond with slightly lower satisfaction rates, though client satisfaction data is missing for Q4, where occupancy rates were highest.
Recommendations – Areas Needing Performance Improvement and Action Plans to Address
Will continue to focus on completion of client satisfaction surveys in every quarter.
Will continue to work towards updating Plan of Support Document to include standardized savings plan for all clients.
Definitions, terms, acronyms

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Service Delivery Measures - Employment/Community Services Programs	Overall High Level Objective	Frequency of Measure	Data Source	Obtained by	Performance Goal	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
examples of layout based on frequency of measures						\<Quarter 1 - Apr-Jun\>			\<Quarter 2 - Jul-Aug\>			\<Quarter 3 - Oct-Dec\>			\<Quarter 4 - Jan-Mar\>		
1.M.8 Accessible (how persons served move into and through the service delivery process)					.												
# intakes (Homelessness Prevention)		monthly	DR: HP # individuals served (intakes) HH	RH	20.83/mo	20	18	13	8	6	8	10	11	10	10	8	22
# intakes (RRH - Women)		monthly	DR: RRH# women served (Intakes HH)	RH	7.25/mo	1	0	0	1	1	5	2	5	2	0	2	4
# intakes (RRH - Families - HOUSEHOLDS)		monthly	DR:RRH# families served/Intakes HH	RH	7.17/mo	5	2	4	1	0		2	4	2	3	3	6
# intakes (ICM-Youth)		monthly	DR: ICM Y # youth served/intakes (HH)	RH	2.83/mo	1	0	1	2	6	2	4	4	6	3	0	0
# intakes (ICM-Women)		monthly	DR: ICM W # women served (unique) HH	RH	6.42/mo	4	3	3	0	2	4	3	3	4	4	3	1
# intakes (ICM-Families - HOUSEHOLDS)		monthly	DR: ICM F # families served (unique) HH	RH	2.92/mo	6	4	5	2	0	4	4	5	5	5	2	0
1.M.7 Efficient (making best use of resources to deliver quality service and reduce unneccesary costs/waste)																	
time between entry into program to obtaining permanent housing (RRH-Women)		monthly	DR: RRH-W avg days of service between intake &	RH	30 days	120	139	58	0	170.5	94.5	12	94	55	0	94	82.5
time between entry into program to obtaining permanent housing (RRH-Families)		monthly	DR: RRH-F avg days of service between intake &	RH	30 days	76.7	172	94.8	0	270	165	142	116	123	59.3	48	63
time between entry into program to obtaining permanent housing (ICM-Youth)		monthly	DR: ICM-Y avg days of service between intake &	RH	30 days	0	0	38	113	192	50	58.6	98	0	0	62	95.5
time between entry into program to obtaining permanent housing (ICM-Women)		monthly	DR: ICM-W avg days of service between intake &	RH	30 days	301.7	99	205	55.5	137.5	90	240	281	466	178.7	66	133
time between entry into program to obtaining permanent housing (ICM-Families)		monthly	DR: ICM-F avg days of service between intake &	RH	30 days	178.5	54.7	97.5	37	0	170	100	155	205	35	32	47.7
1.M.4 Effective (results or benefits that persons served or other stakeholders expect from the services delivered, outcomes/impact, aligning services with best pra .)																	
* # households stabilized into permanent positive housing situation on exit (Homelessne		monthly	DR: HP # households stabilized on exit	RH	250 (21/mo)	11	20	10	10	18	39	9	21	8	11	8	1
* #/% households contacted remain housed at 3 months (Homelessness Prevention)		monthly	DR: HP: # HH housed/#HH contacted	RH	baseline	11	18	6	12	9	3	15	4	2	10	2	5
* # Women housed (RRH-Women)		monthly	DR: RRH-W # women housed	RH	87 (3/mo)	1	2	1	0	2	2	1	3	2	0	1	2
* # Families Housed (RRH-Families)		monthly	DR:RRH-F # families housed (HH)	RH	86 (7/mo)	3	2	4	0	2	1	2	2	3	4	2	2
* # Youth Housed (ICM - Youth)		monthly	DR: ICM-Y # youth housed	RH	34 (3/mo)	0	0	1	1	1	1	5	5	0	1	1	4
* # Women Housed (ICM -Women)		monthly	DR:ICM-W # women housed	RH	77 (7/mo)	3	4	3	2	2	2	1	3	2	6	1	2
* # Famiies Housed (ICM-Families)		monthly	DR: ICM-F # famiies housed	RH	35 (3/mo)	2	3	2	1	0	5	4	1	1	1	1	3
1.M.5 Satisfaction (satisfaction and other feedback from persons served and other stakeholders)					.												
* overall I am satisfied with the services I received (RR)		monthly	Client Satisfaction Survey	RH	95%			95%	80%				80%		75%	80%	
* overall I am satisfied with the services I received (Homelessness Prevention)		monthly	Client Satisfaction Survey	RH	95%	100%			100%								
* overall I am satisfied with the services I received (ICM)		monthly	Client Satisfaction Survey	RH	95%		90%	100%	100%		100%				80%	90%	100%
* I would recommend this program to others (RR)		monthly	Client Satisfaction Survey	RH	95%			95%	100%				90%		80%	90%	
* I would recommend this program to others (Homelessness Prevention)		monthly	Client Satisfaction Survey	RH	95%	100%			80%								
* I would recommend this program to others (ICM)		monthly	Client Satisfaction Survey	RH	95%			100%	100%		100%				80%	90%	100%

Extenuating and Influencing Factors or Considerations

Demographic Characteristics of the Persons Served:

Families, youth, non-binary adults and women at risk of or experiencing homelessness due to poverty, mental health, substance use and/or involvement with the child welfare and justice systems. The individuals that our programs serve experience many barriers that impact their ability to have stable housing including: eviction history, poor credit, lack of housing references, low income, stagnant OW and ODSP shelter rates as well as increasing cost of rental units and availability.

Impact of Extenuating or Influencing Factors:

The homelessness serving sector continue to experience staffing shortages and the low pay for staff in this sector impacts the abilities to continue achieving outcomes in our programs. Staff within our programs are often newer to the field and require time and training in order to feel confident in their roles and the work required to support individuals. With our client service supervisors, we have been able to further coach, shadow and mentor teams to allow them to feel more confident in their roles. Assigning balanced caseloads of both housed and unhoused clients as well as blended caseloads of populations

have been somewhat successful in allowing there to be a more dynamic balance in the work being done. Allowing teams to feel comfortable with caseloads, and become familiar with new processes and case management requirements has been successful but also delays the referral flow throughout the programs from coordinated access.

The complexities of the clients served throughout programs has also steadily increased and the services available to clients is limited until they become housed or are often time limited which impacts clients' ability to have consistent support and resource connections. The lack of affordable and supportive housing options for those we serve also impacts the sustainability of housing and the success of our clients in maintaining their housing as they are often met with complex situations.

Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

- In the Homelessness Prevention program targets were met and exceeded. ICM program had increased success with housing youth and both RRH and ICM had increased ability to maintain successful housing placements for clients. The pattern of housing that is becoming more difficult to meet is the landlord requirement of income being 3x the rent amount which is unrealistic to those we serve without significant housing allowances being made available to our clients.

- This year, we have been informed of Rent Secure which is a municipal housing benefit aimed to support and transition clients from this municipal to a provincial benefit. These being assigned to programs with ICM and RRH should see a significant increase in supporting clients with the transition to housing and between benefits while increasing their income.

Actions Developed Last Year – Did they accomplish intended results?

1. 2 staff changes for any ICM clients scoring above 13 on SPDAT has supported with staff confidence and division of work.

2. Client Service Supervisors meeting with team to provide quarterly file review, HIFIS support and lead training has allowed team to feel more confident in supports provided with regards to client relations.

Findings – Trends/Causes/Issues Identified

- Lack of affordable, supportive and/or low barrier housing continues to pose many challenges to all populations we serve. Social assistance rates have not increased to match the housing and living wage markets making it difficult for clients to acquire housing that is safe and comfortable while meeting all of their basic needs. Within the housing market, there continues to be discrimination and oppression due to rental history, income sources as well as family size as well as gender and racial identity. The largest issue with affordability is met with limited housing allowances and rental supplements which could be an asset increasing income for many clients.

- Through the Homelessness Prevention program, the most evident trend is the number of clients unfamiliar with the Residential Tenancy Act and its processes for evictions and therefore many clients are accessing services for Landlord and Tenant Board supports primarily due to rental arrears or behaviours impacting their tenancy.

- Food insecurity is also a highly sought out support for clients as the cost of living and food access has been difficult for clients. We are often supporting with gift cards to various grocery stores and increasing the number of food bank appointment supports we offer to clients accessing the programs.

- Throughout all ICM, HPP & RRH programs, the acuity and complexities of clients has increased significantly and has often required extended housing search timelines to support with basic documentation and income needs prior to beginning the housing work. The caseload ratio changes to ICM 1:15 and RRH remaining at 1:25 may also allow for further supports and engagement with clients as length of program stays have been set to 18-24 months from intake for ICM and 6-9 months from intake for RRH. This change may have impacts on sustainability work with housing and should be continuously revised.

- RRH program previously only served women, non-binary adults and has now expanded to support youth – this was a significant gap in the system with youth presenting with lower acuity within youth serving spaces and will hopefully allow for less re-integration into homelessness serving sector service.

Recommendations – Areas Needing Performance Improvement and Action Plans to Address

1. Landlord and Tenant Workers engaging in more proactive landlord engagement and being point of contact for landlords with concerns

2. Bi-weekly caseload reviews with all staff due to blended caseload models and case conferences to ensure supports and consistency of documentation are captured. This will allow a more consistent flow of work and ensure timelines of work and case management are met and monitored as needed.

3. Continued training opportunities regarding client complexities, case management and housing first principles.

4. Moving to monthly staff meetings to allow for more training and development and gathering as a larger team to discuss any program challenges and opportunities of improvement.

5. EDI committee (established by front line staff) to create more opportunities for client and staff programming for various occasions and important engagement opportunities.

6. Added drop ins with staff at partnership agencies to facilitate client engagement and support with locating any referred clients

7. Continue assessment of Client Service Supervisor roles to assess if there is direct improvement of client service outcomes

8. Assessment of hiring criteria regarding candidate experience and education to ensure staff are equipped to support clients served and meet their needs

Definitions, terms, acronyms					
RRH – Rapid Rehousing	HPP – Homelessness Prevention	ICM – Intensive Case Management			

2024-2025 CARF Performance Indicator Grid Analysis
Program: Regina's Place/Jeanne Scott Centre   Date: June 16, 2025

Good Shepherd — Faith in people.

Actual Results - 2024-2025 FISCAL YEAR

Service Delivery Measures - Employment/Community Services Programs	Overall High Level Objective	Frequency of Measure	Data Source	Obtained by	Performance Goal	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
examples of layout based on frequency of measures						Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
						Fiscal Year Total											
1.M.8 Accessible (how persons served move into and through the service delivery process)																	
Occupancy Rate (Reginas Place)				RP/JSC	100%	86%	86%	86%	79%	86%	86%	86%	86%	86%	86%	80%	86%
# Days from referral to intake for Regina's Place program		quarterly		RP/JSC	200 days/50%	0	0	0	0	58.5	150	0	303	0	0	113	50
Number of days on waitlist for childcare spots		quarterly		RP/JSC	6 weeks	0	0	0		42	0	0	0	0	0	0	0
% young parent referrals meeting program criteria		quarterly		RP/JSC	90%		33%			50%	25.00%	20%	50%	25%			100
Ujima Project: # days from referral to intake		quarterly		RP/JSC	7 days/75%	11%			9%			0%			198%		
1.M.7 Efficient (making best use of resources to deliver quality service and reduce unneccesary costs/waste)																	
Length of stay at Regina's Place		quarterly		RP/JSC	24 months	100 days			539.33%			718 days			705%		
Number of client satisfaction surveys being completed		quarterly		RP/JSC	85%	56%			50%			60%			71.42%		
Ujima Project: Number of Pre/post surveys being completed		quarterly		RP/JSC	75%	0	1	0	4	4	8	0	1	0	0%	0	0
1.M.4 Effective (results or benefits that persons served or other stakeholders expect from the services delivered, outcomes/impact, aligning services with best pra .																	
Number of students that graduate during the school year		quarterly		RP/JSC	85%			9 (100%)									
Number of young parents with child protection agency involvement		quarterly		RP/JSC	50%	50%			27.00%			25%			17%		8%
* Number of young parents parenting skills have been strengthening		quarterly		RP/JSC	75%	95%	91%	91%	100%	80%	80%	87%	100%	100%		100%	81%
* Number of young parents ability to live independently has been increasing		quarterly		RP/JSC	75%	95%	88%	94%	100%	80%	80%	87%	100%	100%		100%	70%
Number of young parents that secure permanent housing at end of program stay		quarterly		RP/JSC	75%	100%			33.30%			100%			0%		
1.M.5 Satisfaction (satisfaction and other feedback from persons served and other stakeholders)																	
* overall I am satisfied with the services I received (Regina's Place/JSC)		quarterly		RP/JSC	85%	86%			87%			83%			87%		
* I would recommend this program to others (Regina's Place/JSC)		quarterly		RP/JSC	85%	91%			87%			84%			92%		

Extenuating and Influencing Factors or Considerations
Demographic Characteristics of the Persons Served:
Impact of Extenuating or Influencing Factors: Market rent costs continue to have the biggest impact on our Young Parents finding permanent housing in community and some need to move back in with family or friends. Poverty, lack of family support, family/partner relationship breakdown, knowledge of parenting and/or independent living skills, developmental delays present, mental health diagnosis
Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations
Only transitional housing program for young parents in Hamilton therefore, higher number of referrals continue
Number of referrals for prenatal youth
3 Young Dads in school program for the first time
11 hopeful graduates for this school year compared to last year's 9
Actions Developed Last Year – Did they accomplish intended results?
Program Agreement change became in full effect in Feb-everyone same consequences show in more positive behaviours from young parents. Not hearing-"she doesn't have to do…" comments from yps. Staff are more confident to do follow through/ups conversations with yps.

Just starting the process of looking into changing programs to include prenatal yps.					
Findings – Trends/Causes/Issues Identified					
Prenatal program needs to be looked at in detail as numbers continue to rise					
Still only transitional housing program in Hamilton					
Recommendations – Areas Needing Performance Improvement and Action Plans to Address					
To get prenatal program up and running					
Definitions, terms, acronyms					
RP – Regina's Place	JSC – Jeanne Scott Parent & Child Resource Centre	YPS-Young Parents			

2024-2025 CARF Performance Indicator Grid Analysis
Program: Women's Services   Date: July 23, 2025

Good Shepherd — Faith in people.

Service Delivery Measures - Employment/Community Services Programs	Overall High Level Objective	Frequency of Measure	Data Source	Obtained by	Performance Goal	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
examples of layout based on frequency of measures						Quarter 1 - Apr-Jun			Quarter 2 - Jul-Aug			Quarter 3 - Oct-Dec			Quarter 4 - Jan-Mar		
						Fiscal Year Total											
1.M.8 Accessible (how persons served move into and through the service delivery process)																	
Turnaway - Full (Martha House)		Monthly (d	DR: MH TAF/TO Unique	MH		83	91	84	69	65	81	85	85	54	48	52	70
Turnaway - Other (Martha House)		Monthly (d	DR: MH TAF/TO Unique	MH		2	4	8	4	21	0	11	11	7	7	11	17
Occupancy Rate (MH)				MH		111	131	128	117	115	107	109	106	107	103	110	104
Turnaway - Full (Mary's Place)			DR: MP TAF/TO Unique	MP		159	200	228	81	109	144	121	166	95	97	67	81
Turnaway - Other (Mary's Place)			DR: MP TAF/TO Unique	MP		65		70		75	96	83	93	26	72		
Occupancy Rate (MP)				MP		105	109	105	107	107	99	109	102	100	101	100	101
Number of diversions (MP)				MP		1	0	1	0	0	0	0	0	1	0	0	0
1.M.7 Efficient (making best use of resources to deliver quality service and reduce unneccesary costs/waste)																	
time between entry into program to obtaining permanent housing (Martha House)			DR: MH avg los	MH		66.25	0	175	207	104	105.5	171.8	176	214.3	18.5	7	143.9
time between entry into program to obtaining permanent housing (Mary's Place)			DR: MP Avg LOS	MP		50.71	86.5	104	39	65	121.18	40.71	96	103	98.42	48	81.67
time between entry into program to obtaining permanent housing (West Ave)			DR: West Ave Avg LOS	WEST		65.33	73.5	73	49.2	50.4	52.5	62	62.24	66.89	70.9	58.7	57
1.M.4 Effective (results or benefits that persons served or other stakeholders expect from the services delivered, outcomes/impact, aligning services with best pra																	
#/% of unique clients served achieving permanent housing (Martha House)			DR: MH housed	MH		2	0	1	1	2	2	4	1	5	0	1	2
#/% of unique clients served achieving permanent housing (Mary's Place)			DR: MP Shelter to permanent	MP		3	3	4	4	4	5	3	2	1	0	1	5
#/% of unique clients served achieving permanent housing (West Ave)			DR: West Ave Shelter to permanent	WEST		0	3	8	10	2	6	6	0	2	0	3	0
1.M.5 Satisfaction (satisfaction and other feedback from persons served and other stakeholders)																	
overall I am satisfied with the services I received (MP)			Client Satisfaction Survey	MP							100%						
overall I am satisfied with the services I received (MH)			Client Satisfaction Survey	MH	85%												
overall I am satisfied with the services I received (WS-CSS)			Client Satisfaction Survey	WSCSS								100%					
I would recommend this program to others (MP)		monthly	Client Satisfaction Survey	MP							100%						
I would recommend this program to others (MH)		monthly	Client Satisfaction Survey	MH	85%												
I would recommend this program to others (WS-CSS)		monthly	Client Satisfaction Survey	WSCSS								100%					

Extenuating and Influencing Factors or Considerations

Demographic Characteristics of the Persons Served: Cis women, trans and non-binary individuals and families seeking emergency services due to violence, abuse, homelessness, poverty, mental health and substance use.

Impact of Extenuating or Influencing Factors: Increase in individuals accessing with high-risk safety concerns, complex needs of children, encampments

Comparative Analysis (trends/patterns over time – last year vs. this year, last 4 quarters), Comparative analysis within industry/benchmarks/similar organizations

Length of Stay – Martha House continues to report above-average length of stays for families in shelter. The length of stay can be attributed to challenges with the private market including: unit size, affordability, and poor credit. Further, many of the families accessing Martha House are navigating status/immigration which can create significant delays in acquiring the resources to secure housing. On the flip side, we can see that there has been a short length of stay at West avenue due to the opening of Bakhita house which allowed for individuals to rapidly transfer to a short-term transitional option.

Demographics – We continue to see a large number of women seeking services who are pregnant or post-partum. This increase has been challenging as Mary's Place is often seeking shelter switches to accommodate a woman who is nearing delivery. As we have identified pregnancy as a criterion for prioritization, we have observed a steady increase in the use of over capacity spaces at Mary's Place due to limited options in the GBV/Family shelter. Increased access to overflow has impacted turn a way's, as well as occupancy rates.

Actions Developed Last Year – Did they accomplish intended results?
Bakhita House – While Women's Services is was not responsible for the opening of this program, the program is intended to support flow in emergency shelters by providing transitional housing for refugees. As West Avenue was serving a significant number of newcomers and refugees, we saw a high number of transitions from West avenue into transitional. The opening of this program also supported outflow from Mary's Place.
Data Collection Tool – We have altered the way in which Martha House collects and reports on calls for space as we anticipated the numbers being reported were lower than the number of calls for space shelter staff are supporting. Since that time, we have seen a steady increase in the data being reported by Martha House for turn away and referrals to other emergency shelter programs.
Employee Compensation – Increased employee compensation has been helpful in our pursuit to hire qualified employees, as well as support employee recruitment. While we still have vacancies and have higher vacancy rate in residential programs, we have observed a decreased amount of time to fill vacancies comparative to the previous year.
Findings – Trends/Causes/Issues Identified
Transitional and Supportive Housing Options – We continue to see the need for additional supportive and transitional housing options for single individuals and families. Many of the people we serve across our emergency shelters have expressed an interest in transitional or supportive housing however, the demand is much greater than availability. Dorothy Day Place was full within the first few months of opening and the YWCA program has minimal turnover. Increased opportunities to expand supportive and transitional housing in Hamilton is required to address the needs of individuals accessing emergency shelter space.
Emergency Shelter Capacity – We continues to see a high prevalence of single individuals accessing Mary's Place who are fleeing violence and who have high-risk safety concerns. Existing GBV shelters are not equipped to support single individuals and often will prioritize families for admittance. Despite advocacy to expand GBV shelter beds in Hamilton, we continue to operate with the same number of beds and high rate of turn away's for service due to capacity. In addition, we continue to recognize the lack of accessible spaces across the emergency shelter system in Hamilton resulting in individuals leveraging unconventional spaces for urgent emergency shelter accommodations.
Children with Complex needs – Martha House has seen an increase in complex needs of children accessing the shelter system which has served as a barrier for acquiring and sustaining housing. Complex needs of children have resulted in behaviors that are challenging to manage in communal environments, and has served as a contributing factor to family homelessness. Wait times for clinical services to support children, youth and the family unit and are astronomical, with community support agencies trying to fill gaps where possible.
Feedback Report – We continue to see a low response rate for feedback surveys. We have made the surveys more readily available to residents, placing feedback surveys in communal areas and prompting residents to complete upon discharge.
Diversion – Diversion rates continue to remain low as many individuals presenting for space have experienced chronic homelessness or are experiencing high-risk safety concerns that limit available diversion options. Further, lack of funding for a dedicated diversion worker has been challenging as employees are stretched due to responding to high volume of requests for space, crisis de-escalation, and drug poisoning response.
Recommendations – Areas Needing Performance Improvement and Action Plans to Address
Incentives Program – We will be implementing an incentive program to support the increase of residents completing feedback surveys. Residents who have completed a survey will be entered into a draw and monthly 2-3 winners will be selected for a prize.
Expansion of GBV beds – We will continue to seek options to expand GBV shelter beds in the system. While we would like to expand Martha House, we recognize this would require a relocation of Mary's Place. As such, we will continue to advocate with funders to support an expansion/relocation of services and/or support other GBV providers requesting financial aid to expand GBV shelter beds.

Renovations to expand bed space at Mary's Place – We are exploring renovations that would allow Mary's Place to turn the program room into two additional units; one that will be accessible. In doing so, we will limit the amount of rooms that are double occupancy, as well as increase accessible units from 3 to 4 units.	
Explore increased funding for the Diversion program to have a dedicated employee carry out diversion initiatives with new shelter residents.	

Definitions, terms, acronyms					
GBV – Gender-based Violence	MP – Mary's Place, MH – Martha House				