

SCHEDULE 2

1. Proposed Plan

Briefly describe how you intend to use your CHPI allocation to address various housing and homelessness-related needs of your SM area.

For example, you can discuss the following matters:

- 1) Range of services you are planning to deliver (e.g. Emergency Shelter Solutions, Housing with Related Supports, Services and Supports, and Homelessness Prevention) - and why.
- 2) Client groups you are planning to assist - and why.

The proposed plan is intended to be a high-level summary and should be no longer than two pages.

Please write in a box below:

2. Projected Use of CHPI funding

Complete the following table to indicate how much of your 2013-14 CHPI allocation you plan to use under various service categories in each quarter.

Projected spending in each quarter may be specific to each service category:

1. Emergency Shelter Solutions
2. Housing with Related Supports
3. Services and Supports
4. Homelessness Prevention

Please refer to the Program Guidelines for examples of activities that may be provided under each service category.

Please also include the amount of funding to be used to administer the program. Service Managers may use up to 10% of their annual allocation on administration costs.

Please provide your best quarterly estimates when completing the table.

Please enter information in the YELLOW HIGHLIGHTED cells only.

PROJECTED USE OF CHPI FUNDING BY QUARTER

Service Categories	Quarter 1 Apr - Jun	Quarter 2 Jul - Sep	Quarter 3 Oct - Dec	Quarter 4 Jan - Mar	TOTAL 2013-14
	\$	\$	\$	\$	\$
Emergency Shelter Solutions					\$0
Housing with Related Supports					\$0
Services and Supports					\$0
Homelessness Prevention					\$0
Program Administration					\$0
Total	\$0	\$0	\$0	\$0	\$0

3. CHPI Investment Plan - SM Update Reports

FINANCIAL REPORT FOR 2012-13 QUARTER 4 FUNDS

Due: May 31, 2013.

Please identify the amount of funding you projected to spend in each category in the Allocation column.
Please enter the amount of funding used between January 1, 2013 and March 31, 2013 in the Actual column.

Please enter your information in the YELLOW HIGHLIGHTED cells only.

2012-13			
Service Categories	Q4 Jan - Mar Allocation	Q4 Jan - Mar Actual	Variance
	\$	\$	\$
Emergency Shelter Solutions			\$0
Housing with Related Supports			\$0
Services and Supports			\$0
Homelessness Prevention			\$0
Program Administration			\$0
Total	\$0	\$0	\$0

MID YEAR UPDATE

Due: #####

Please enter the full amount of the CHPI funding used in Quarter 1 and Quarter 2.
Also please enter how you plan to use the remaining funding in Quarter 3 and Quarter 4.

2013-14					
Service Categories	Q1 Apr-Jun Actual	Q2 Jul-Sep Actual	Q3 Oct-Dec Forecast	Q4 Jan-Mar Forecast	2013-14 Total
	\$	\$	\$	\$	\$
Emergency Shelter Solutions					\$0
Housing with Related Supports					\$0
Services and Supports					\$0
Homelessness Prevention					\$0
Program Administration					\$0
Total	\$0	\$0	\$0	\$0	\$0

QUARTER 3 UPDATE

Due: #####

Please enter the full amount of the CHPI funding used in Quarter 1, Quarter 2 and Quarter 3.
Also please enter how you plan to use the remaining funding in Quarter 4.

2013-14					
Service Categories	Q1 Apr-Jun Actual	Q2 Jul-Sep Actual	Q3 Oct-Dec Actual	Q4 Jan-Mar Forecast	2013-14 Total
	\$	\$	\$	\$	\$
Emergency Shelter Solutions					\$0
Housing with Related Supports					\$0
Services and Supports					\$0
Homelessness Prevention					\$0
Program Administration					\$0
Total	\$0	\$0	\$0	\$0	\$0

Please describe your strategy to reach the full use of your annual allocation by March 31, 2014.

4. Year-End Financial Reporting

Due: May 31, 2014.

Please enter your actual expenditures for each quarter of 2013-14.

Please enter your information in the YELLOW HIGHLIGHTED cells only.

ACTUAL YEAR-END FINANCIAL EXPENDITURES - 2013-14

Service Categories	Q1 Apr-Jun Actual	Q2 Jul-Sep Actual	Q3 Oct-Dec Actual	Q4 Jan-Mar Actual	TOTAL 2013-14 Expenditures	Annual Allocation 2013-14	Variance
	\$	\$	\$	\$	\$	\$	\$
Emergency Shelter Solutions					\$0	\$0	\$0
Housing with Related Supports					\$0	\$0	\$0
Services and Supports					\$0	\$0	\$0
Homelessness Prevention					\$0	\$0	\$0
Program Administration					\$0	\$0	\$0
Total	\$0	\$0	\$0	\$0	\$0	\$0	\$0

Comments

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TOTAL EXPENDITURES BY EACH SERVICE CATEGORY - 2013/14

Service Categories	CHPI Funding	Municipal Funding	2013-14 Total
	\$	\$	\$
Emergency Shelter Solutions			\$0
Housing with Related Supports			\$0
Services and Supports			\$0
Homelessness Prevention			\$0
Program Administration			\$0
Total	\$0	\$0	\$0

CMSM/DSSAB:	
Contact Email and Telephone Number:	
Date Submitted to MMAH:	

Service Manager Attestation

I certify that I have delegated authority to approve this Report.

I also certify that to the best of my knowledge, the reported information is true and correct.

X

(SM Signature)

Name:

Title:

5. Performance Indicators

Due: May 31, 2014

Please enter the number of households assisted in 2013 - 2014 for each of the following performance indicators. Please enter your information in the YELLOW HIGHLIGHTED cells only.

OUTCOME #1: PEOPLE EXPERIENCING HOMELESSNESS OBTAIN AND RETAIN HOUSING

Measure	Description	# of Households Assisted
Street to Emergency Shelters	Number of households that have moved from street to emergency shelters	
Street to Transitional Housing	Number of households that have moved from street to transitional housing	
Street to Long-Term Housing	Number of households that have moved from street to long-term housing	
Emergency Shelter to Transitional Housing	Number of households that have moved from emergency shelters to transitional housing	
Emergency Shelter to Long-Term Housing	Number of households that have moved from emergency shelters to long-term housing	
Transitional Housing to Long-Term Housing	Number of households that have moved from transitional housing into long-term housing	
Supports and Services (households experiencing homelessness)	Number of supports or services provided to households experiencing homelessness that contribute to a positive change in housing status	
TOTAL		0

OUTCOME #2: PEOPLE AT-RISK OF HOMELESSNESS REMAIN HOUSED

Measure	Description	# of Households Assisted
Housing Loss Prevention	Number of households at imminent risk of homelessness that are stabilized (includes assistance with rental and energy arrears)	
Housing Retention	Number of households that were successful in retaining their housing at three month follow-up	
Long-Term Housing to Long-Term Housing	Number of households living in long-term housing that are at-risk of homelessness who are supported in accessing alternative long-term housing.	
Supports and Services (at-risk households)	Number of supports or services provided to households at-risk of homelessness that allow them to maintain or retain their housing	
TOTAL		0