

ANNUAL PROGRAM MONITORING REPORT
Portable Housing Benefit



Organization name: _____
Contact: _____
Community: _____
Phone: _____ Fax: _____
Report for Period: From _____ To _____
Month-Day-Year Month-Day-Year

Please provide program statistics below and describe the reasons behind outcomes achieved this year, based on staff support provided and context in which they were working.

PROGRAM OUTCOMES

1) How many individuals were accepted into the PHB program this year?

How many individuals are currently on your waitlist or were directed to another program?

How many total individuals were part of your PHB program this year?

What were the successes and challenges that led to these outcomes?

2) How many PHB clients were connected to new services?
(e.g. primary health, addictions treatment, food bank, employment, legal, counselling, etc.)

What were the successes and challenges that led to these outcomes?

3) How many PHB clients moved into new housing since enrolling in the program this year?

If already housed when entering the PHB program, how many new PHB clients decided to stay in the housing in which they were already living?

What were the successes and challenges that led to these outcomes?

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4) How many clients were re-housed throughout the year?
(This includes clients who joined PHB prior to this year.)

What were the successes and challenges that led to these outcomes?

5) How many PHB clients had evictions prevented this year?
(This includes clients who joined PHB prior to this year.)

What were the successes and challenges that led to these outcomes?

6) How many participants graduated out of the PHB program this year?
(i.e. They were able to continue living in private market rental housing without housing services and without the PHB rental subsidy.)

What were the successes and challenges that led to these outcomes?

7) How many clients have left the program this year for other reasons?
(e.g. moved into subsidized housing, moved out of the region, etc.)

How many clients were asked to leave the program?
(e.g. became disengaged with housing supports, incarceration, etc.)

How many clients transferred to another Housing program?

What were the successes or challenges that led to these outcomes?

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8) How many clients have been housed for less than 2 years?

How many clients have been housed for more than 2 years?

What were the successes and challenges around this?

9) Approximately how many direct services were provided to or on behalf of clients by the funded PHB Coordinator throughout the year?

10) Please describe any successful or challenging situations, stories or lessons learned that have occurred throughout the last year.

11) Please identify any trends and barriers low-income individuals with mental health challenges are facing within your local community and any possible suggestions your organization has for addressing these challenges.

12) Please mention any other topics of interest or issues of note that you would like to Manitoba Housing to be aware of.

Date Report Submitted

PHB Supervisor Signature