



Shelter, Support and Housing Administration

Drop-in Services

Performance Measures Guidebook

Revised May 2011

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Introduction

Performance Measurement Initiative

The Shelter, Support and Housing Administration Division of the City of Toronto currently administers multiple funding programs supporting the delivery of homeless programs and services. Two of these programs are:

- City of Toronto Homeless Initiatives Fund (CT-HIF), and
- Consolidated Homelessness Prevention Program (CHPP)

CHPP has a unique set of reporting requirements to the Province. In addition, there are pieces of data necessary for reporting to City Council and to assist the City in its role as a service manager.

Shelter, Support and Housing Administration's Performance Measurement Initiative (PMI) was initiated in October 2002. The PMI co-ordinates reporting for the various funding programs, collects only the data needed, clearly defines what is needed, and provides supports to help collect data. This ensures reporting required of your agency is minimized, common questions are asked across funding programs, and data is collected in a reliable, consistent and valid manner.

Reporting to Shelter, Support and Housing Administration is structured by type of service provided. Data is captured for the following sectors of service:

- Housing Help – projects that provide assistance with finding affordable housing, support and assistance once housed, and prevention activities to households at risk of eviction.
- Drop-ins – projects that provide daytime services and support, help to reduce social isolation, and act as an access point to other service systems.
- Street Outreach – projects that are delivered as part of the City's Streets to Homes Program to connect people who are homeless and living on the street with housing and supports.
- Supports to Daily Living (SDL) – projects provide support services such as budgeting, assistance with homemaking, conflict mediation, crisis intervention, referrals, and personal care, to enable people with complex issues, residing in alternative housing, to live independently and to prevent evictions.
- Investment Projects – time-limited projects to manage innovation and change within the homeless service system.

Capturing data by these sectors enables the City to better explain -- at a high level -- what is being done to address homelessness in Toronto, and the impact these activities

are having. This information will allow for simple and straightforward communication to help the public to understand the important work you and your colleagues are doing and its benefit. Also, it will allow us to capture the data necessary for the Province and City Council.

Content of Guidebook

This guidebook has been developed to help your agency understand the intent of the questions asked. This will ensure that every service provider interprets the questions in the same way.

There are three types of reporting forms, and each are discussed in the guidebook. They are:

- Quarterly Reporting Form
- Interim Reporting Form
- Final Reporting Form

For each question in each type of form, the guidebook defines key terms, provides examples of situations you may encounter and indicates how to record the data. The format for each question is as follows:

- Question is asked;
- Area to answer the question is shown; and
- Helpful Hints, with definitions and examples to help answer question, are shown.

Quarterly Reporting Forms

Quarterly reporting forms are intended to be completed to reflect three consecutive months of activity. They contain questions about the activities that your project/program undertakes. Over the next year, four quarterly reports are expected to be completed and submitted. Please see the reporting schedule for time periods for data collection and report due dates.

The questions in these forms will capture high-level information on the number of people who use your drop-in, their use of programs and services your agency offers and their referrals to other services. Please answer the questions asked to the best of your ability.

While your drop-in program or project carries out a range of activities for persons who are homeless or at risk, the questions posed here are not intended to capture data on all of this work. For example, these questions will not capture the amount of time your

program or project staff spends with each person in the drop-in. Rather than trying to directly measure all the activities that take place in drop-ins, the approach taken here is to start with the basics. You will have an opportunity to describe in detail some information not collected here in your interim or final report. The approach taken in quarterly reporting ensures that the essential quantitative information is captured and the data collection requirements of your agency are minimized.

Interim Reporting Form

The Interim report is intended as a mid-year update on your project/program. It asks questions about the status of your project/program, and whether elements of it and your organization, has changed since it started. As well, it asks you to report on changes in the people with whom you work, as well as the types or intensity of the service you are providing and changes in the overall service system.

Final Reporting Form

Upon completion of your project/program, you are expected to complete and submit the Final reporting form. The Final form asks you to summarize specific elements of your work over the year. As well, it asks you to review your progress meeting expected outcomes of your project/program. Questions on human resources focused on the project/program, and your final project/program expenditures, are also included. Based on your knowledge of your clients over the year, questions are posed about your observations of the demographic characteristics of the clients served by the project/program. Finally, the form asks you questions on emerging issues that you may have identified in your work.

Glossary of Terms

A glossary of terms is provided at the end of this guidebook. It is a summary of terms used in various questions in the reporting forms.

Submitting Reports

Your Final Report must have a copy submitted on paper because it contains financial information that must be endorsed with the signature of an authorized person at your organization. We also request that you submit an electronic version of your Final Report. All other reports can be sent electronically.

When submitting electronically, please email completed reports to the centralized email: chpp@toronto.ca and cc your City of Toronto lead staff.

The lead City staff member for your project has been identified to you in previous correspondence and is available to answer any questions about the forms you may have. If you do not have this information, please contact chpp@toronto.ca.

**QUARTERLY
REPORTING FORM**

Quarterly Reporting Form

PROJECT/PROGRAM INFORMATION

Agency Name	
Project/Program Name	
Address	
Funding Source	
Funding Amount (annual)	
Staff Contact	
Phone	
Email	
Date Submitted	

HELPFUL HINTS (PROJECT/PROGRAM INFORMATION)
This question asks for basic information on your project/program, including contact information, funding information and the date the report is submitted. This information helps the City identify the project/program being reported on.

QUESTION #1: DROP-IN USERS

1.1 On average, how many different people use your drop-in each day of the week, and over the whole week? Report all people served regardless of how much the drop-in is supported by this funding.

	# Of Different People
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	
Total Week	
Statutory Holidays	

HELPFUL HINTS (QUESTION #1.1)

The number of **different people** counted should include **all individuals that used the drop-in within a 24-hour period** on each day of the week (i.e. the cumulative number of persons who used the drop-in on a typical day). The answer to the question may be larger than the capacity of the drop-in at one point in the day. For example, the drop-in may hold 200 people at one time, but 250 different people flow through the facility on an average day. The people counted on one day may be the same people counted on the next. For example, if a certain client used the drop-in seven days a week, they should be reflected in data for each day.

Total Week refers to the number of different people who used the drop-in over the average week. For example, if the same 200 people use the drop-in every day of the week, the answer here would be 200.

Use of the drop-in includes access to safe space, meals or snacks, washroom and shower facilities and laundry facilities. People also use drop-in centres for recreation, socializing and other programs and services.

The same person using different services at the drop-in should only be counted once. For example, if a person comes to the drop-in to have a meal, and takes a shower while they are there, this person should only be recorded once.

1.2 Among the people described in Question 1.1, how many are new people that began using your drop-in during the quarter? Collect or estimate this number for the average week, month and the full quarter.

	New People
Week	
Month	
Quarter (3 months)	

HELPFUL HINTS (QUESTION #1.2)

This question asks about new people in the group described in Question 1.1. New people are drop-in users that are new to the drop-in during the reporting quarter, or they have not used the drop-in in the last year.

The question asks for the number of new people for the average week, month, and for the full quarter. Remember that these are different people, and not daily volumes of people. For example, if you saw 10 new people in your drop-in during most weeks it was open, report 10 in the first box.

Collecting this information is preferred, but an estimate will be satisfactory for the answer.

QUESTION #2: MEALS PROVIDED

2.1 How many meals were provided through your project this quarter?

HELPFUL HINTS (QUESTION #2.1)

This question asks for the **number** of meals this quarter.

This includes all meals provided by a meal program, and food programs (e.g. community kitchens, community gardens, nutrition classes, etc.).

2.2 On average, what type and how many meals were provided each day of the week?

	Breakfasts	Lunches	Dinners	Snacks
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				
Total Week				
Statutory Holidays				

HELPFUL HINTS (QUESTION #2.2)

This question asks for the **number** meals on each day of an average week, and the type of meal (breakfast, lunch, dinner and snacks) that was provided.

This includes all meals provided by a meal program, and food programs (e.g. community kitchens, community gardens, nutrition classes, etc.).

QUESTION #3: STRUCTURED PROGRAMS

How many participants (new and ongoing) were in the structured programs offered by your drop-in?

	# Of Different Participants		
	New	Ongoing	Total
Counselling (one-on-one or group)			
Food program (nutrition or cooking, etc.)			
Other life skills (budgeting, health, hygiene)			
CED/skills development			
Social/recreation			
Other (specify):			

HELPFUL HINTS (QUESTION #3)

Structured programs are those organized by staff, and do not include those planned or spontaneously undertaken by participants. For example, a life skills workshop organized by staff is a structured program, but two drop-in clients playing cards is not considered a structured program.

A **new participant** is someone who is **involved in a program in this quarter, but has not been involved in the previous three (3) quarters**. A “new participant” remains new for the entire quarter, no matter how many times or when during the quarter they participated in a program. For example, if a participant that you have never seen before was involved in a program in both the first and last month of the quarter, they are counted under the “new” category in your report.

An **ongoing participant** has been **involved in structured programs in the previous three (3) quarters and was involved in the current quarter**. For example, if they participated in a program in the last month of the previous quarter, and the first month of the current quarter, they are considered an “ongoing” participant in your report. If you know they participated in programs BEFORE the previous three quarters, but have not until the current quarter, please consider them “new” participants.

Report participants in each program separately, even if they are the same people participating in different programs.

One-on-one counselling session should be counted as participation in a counselling program.

QUESTION #4: REFERRALS

How many of the following types of referrals have you provided this quarter? These referrals are for services not provided by your drop-in.

	# Of Referrals
Shelter/hostels	
Housing	
Detoxification facilities	
Addiction treatment	
Mental health services	
Medical services	
Income support (includes PNA, OW, ODSP, etc.)	
CED/skills development/employment supports	
Legal services	
Settlement services	
Food programs (outside drop-in)	
Other (please specify):	

HELPFUL HINTS (QUESTION #4)

Referrals are instances where you attempt to **connect a person who has expressed interest** in a service with the appropriate service provider. This includes providing specific information when a person expresses interest in a service. Referrals also include taking a more active role in connecting the person to service providers, such as notifying the service provider of the person's intent to visit, or making an appointment with a service provider on the person's behalf.

Examples where referrals occur include the following situations:

- a person asks where they can see a doctor, and the drop-in worker provides the addresses of local community health centres and instructions to get to each;
- while discussing available services, a person expresses an interest in one of them, and you provide them with relevant phone numbers and locations where they can access the service.

The question tracks the number of referrals that were provided, **not the number of persons to whom referrals were provided**. For example, if you refer one person to shelter/hostels AND a community health centre, record each of these referrals in the appropriate categories.

Referrals do not include giving information on services in which the person is not

interested. For example, you tell them about employment services in the area, and they expressed no interest in knowing about them.

INTERIM

REPORTING FORM

Interim Reporting Form

PROJECT/PROGRAM INFORMATION

Agency Name	
Project/Program Name	
Address	
Funding Source	
Funding Amount (annual)	
Staff Contact	
Phone	
Email	
Date Submitted	

HELPFUL HINTS (PROJECT/PROGRAM INFORMATION)

This question asks for basic information on your project/program, including contact information, funding information and the date the report is submitted. This information helps the City identify the project/program being reported on.

QUESTION #1: PROJECT/PROGRAM CHANGES

1.1 Since the beginning of the funding cycle, have any of the following project/program elements changed?

	Yes/No?
Basic Services	
Enhanced Services	
Hours of Service	
Staffing	
Partnership	
Other (e.g. location change)	

HELPFUL HINTS (QUESTION #1.1)

This question tracks changes to your project/program that have been made since the beginning of the funding cycle. Please refer to your **Letter of Understanding or Application for Funding**, established at the start of the funding cycle, for your original project/program description.

These changes may have occurred for a variety of reasons, including:

- shifts in the overall direction or approach of the project/program
- meeting new needs of the client group,
- responding to emerging service trends,
- responding to operational pressures,
- changes in the service delivery context,
- changes in staff and staff skill sets,
- changes in organization management,
- moves in program location, and
- changes in other complimentary funding amounts.

You are asked to answer “Yes” or “No” for each project/program element.

Please be aware that you should have City approval prior to implementing any major changes in these areas.

1.2 If Yes for any in Question 1.1, please comment on the following:

- **What has changed?**
- **Why were these changes made?**
- **What is the impact of these changes on the project/program?**
- **Please provide a revised version, if appropriate.**

HELPFUL HINTS (QUESTION #1.2)

If there are major changes to the project/program, this question asks you to describe them, the rationale for them, and the impact they may have on the project/program. Be specific about the changes that have been made. Please refer to your **Letter of Understanding** or **Application for Funding**, established at the start of the funding cycle, for the original description of your project/program. Also, please attach a revised project description based on the changes that have been made.

Please be aware that you should have City approval prior to implementing any major changes in this area.

1.3 Since the beginning of the funding cycle, has the project/program budget changed? If yes, please complete the following (it is NOT necessary to complete this form if no budget changes have occurred).

		Original budget in Part B Application	6 month actual expenditures	Revised Annual budget
1000	DIRECT SERVICE STAFFING			
1001	Project staff salaries			
1002	Project staff benefits			
1003	Management staff salary & benefits			
1004	Support staff salary & benefits			
1005	Staff training & development			
1006	Staff travel			
1007	Other (specify)			
2000	PROJECT EXPENSES			
2001	Project Supplies			
2002	Food			
2003	T.T.C.			
2004	Vehicle leasing costs			
2005	Vehicle operating costs			
2006	Other client travel			
2007	Honoraria			
2008	Other (specify)			
3000	PROJECT ADMINISTRATION (proportion of org. admin costs attributed to the project)			
3001	Management staff salary & benefits			
3002	Support staff salary & benefits			
3003	Office supplies & equipment			
3004	Purchased services			
3005	Other (specify)			
4000	PROJECT BUILDING OCCUPANCY (proportion of costs attributed to the project)			
4001	Rent			
4002	Mortgage			
4003	Utilities			
4004	Maintenance staff & purchased service			
4005	Maintenance & cleaning supplies & equipment			
4006	Other (specify)			
5000	GRAND TOTAL			

	Budget Item	Budget Notes
1000	DIRECT SERVICE STAFFING	
1001	Project staff salaries	
1002	Project staff benefits	
1003	Management staff salary & benefits	
1004	Support staff salary & benefits	
1005	Staff training & development	
1006	Staff travel	
1007	Other (specify)	
2000	PROJECT EXPENSES	
2001	Project Supplies	
2002	Food	
2003	T.T.C.	
2004	Vehicle leasing costs	
2005	Vehicle operating costs	
2006	Other client travel	
2007	Honoraria	
2008	Other (specify)	
3000	PROJECT ADMINISTRATION (proportion of org. admin costs attributed to the project)	
3001	Management staff salary & benefits	
3002	Support staff salary & benefits	
3003	Office supplies & equipment	
3004	Purchased services	
3005	Other (specify)	
4000	PROJECT BUILDING OCCUPANCY (proportion of costs attributed to the project)	
4001	Rent	
4002	Mortgage	
4003	Utilities	
4004	Maintenance staff & purchased service	
4005	Maintenance & cleaning supplies & equipment	
4006	Other (specify)	
5000	GRAND TOTAL	
	Project deficit/surplus	

HELPFUL HINTS (QUESTION #1.3)

This question tracks major changes to your project/program budget that may have been made since the beginning of the funding cycle. Please refer to your project/program budget established at the start of the funding cycle to answer this question. Please see budget definitions in Helpful Hints for Question 3 of the Final Report.

These changes are closely related to Questions 1.1 and 1.2. Budget changes may have occurred for a variety of reasons, including a shift in objectives, activities, staffing, hours of operation, and/or unforeseen project/program costs, changes in overhead or roughly estimated costs.

If changes have been made, please fill out this question. Also, include a description of specific changes in budget, and comment on new and removed line items. Also, please describe why these changes were made and the impact they have had on the project/program. **Please be aware that you should have City approval prior to implementing any major changes in this area.**

In 2009, changes were made in the Letter of Understanding for projects/programs funded by the Consolidated Homelessness Prevention Program (CHPP) and/or the Homeless Initiatives Fund (HIF) to allow greater flexibility for projects/programs to transfer funds between budget lines and between programs. Please refer to your Letter of Understanding, Schedule B: Terms and Conditions of Funding for CHPP/HIF, Sections 1.5 and 1.6.

- Section 1.5 states that “the Recipient may transfer up to 20% of the approved funding between projects/programs funded by the Consolidated Homelessness Prevention Programs (CHPP) and/or the Homeless Initiatives Fund (HIF), or from one approved budget line to another budget line, once within the period of the Term. The Recipient shall notify the City, in writing, of any such changes prior to making any such transfer.”
- Section 1.6 states that “the Recipient shall notify the City of any proposed material changes to the project/program, or a transfer of funds above 20% of the approved funding amount as described in 1.5. In these circumstances, the Recipient shall use the funding only with the prior written consent of the City.”

QUESTION #2: OUTCOMES

Please give a brief case study example of successful outcomes being achieved with at least one of your clients (½ page maximum).

HELPFUL HINTS (QUESTION #2.)

This question is asking for descriptive and qualitative information on at least one client that you work with. Please be brief in your answer, using **no more than half a page**. Please give us a case study that is typical of the outcomes you see in your work. We are NOT looking for quantitative data or numbers in response to this question.

QUESTION #3: EMERGING ISSUES

3.1 Have there been changes in the past six months in the profile of your new clients? For example, their age, gender, family status, health status, mental health status, citizenship status, or reasons for homelessness.

HELPFUL HINTS (QUESTION #3.1)

This question is open-ended. It allows you to report on emerging characteristics and issues regarding the new clients you are serving.

3.2 Has there been a change in the past six months in the types or intensity of services you are providing? If there has been a change, what might be the reasons? For example, increase in landlord negotiations, need for more TTC tickets, or increase in mental health referrals.

HELPFUL HINTS (QUESTION #3.2)

This question is open-ended. You may notice some changes to the services your project/program is providing to respond to client needs or for other reasons. If so, please describe those changes and give reasons you think are driving the change.

3.3 Have there been changes in the service system in the past six months? What might be the reasons for these changes? What do you think could improve the system's effectiveness? For example, more or less collaboration with community partners or more difficulty accessing other services.

HELPFUL HINTS (QUESTION #3.3)

This question is open-ended. You may notice changes in the environment in which you are providing services that you can comment on here. Changes may be among the agencies your project/program is interacting with, policies or programs implemented by funders, or other government activity/inactivity. Please comment on the changes here, give some possible reasons for the changes, and make suggestions on improving the service system's effectiveness.

2011 FINAL

REPORTING FORM

Final Reporting Form

PROJECT/PROGRAM INFORMATION

Agency Name	
Project/Program Name	
Project/Program Address	
Funding Amount (annual)	
Staff Contact	
- Phone	
- Email	
Date Submitted	
Authorized Signature	

HELPFUL HINTS (PROJECT/PROGRAM INFORMATION)

This question asks for basic information on your project/program, including contact information, funding information and the date the report is submitted. This information helps the City identify the project/program being reported on.

Please note that an organization representative authorized to verify the financial information contained in the report should sign the Final Report.

QUESTION #1: SERVICES AND SUPPORTS

1.1 The basic services provided at drop-in centres are listed below. In 2011, did your drop-in centre make changes in the way that these basic supports are provided?

Basic Services	Changes in 2011
Meals and/or refreshments	
Washrooms	
Telephones	
Information and referral	
Informal counselling/individualized support	
Showers	
Laundry facilities	
Internet / email access	
A mailing address	
Storage	

HELPFUL HINTS (QUESTION #1.1)

Please refer to your funding application to answer this question. This question asks you to list any changes in the way that your agency provides basic services at your drop-in centre. You may have

- changed the way the service is provided (e.g. the role of program participants in providing the service might have changed)
- added a service or
- discontinued a service.

1.2 A list of enhanced services provided at drop-in centres are listed below. If your drop-in offers any of these enhanced supports, describe any changes in the way that they were offered.

Enhanced Services	Changes in 2011
Housing access supports	
Housing follow-up supports	
Obtaining basic identification	
Assistance with income support programs	
Health services	
Employment	
Recreation	
Case management	
Legal services	
Trusteeships	
Connecting with family members	
Other:	
Other:	

HELPFUL HINTS (QUESTION #1.2)

Please refer to your funding application to answer this question. This question asks you to list any changes in the way that your agency provides enhanced services at your drop-in centre. You may have

- changed the way the service is provided (e.g. the role of program participants in

providing the service might have changed)

- added a service (by providing it directly or through a formal or informal service agreement) or
- discontinued a service which you or an outside agency may have been providing on site.

1.3 If you have evaluated this program during 2011, please describe the process used.

Methodology (survey, focus group, feedback, other)	Stakeholders (clients, staff, community partners, other)	Review & Implementation (annual review, improved business practice, staff training, other)

HELPFUL HINTS (QUESTION #1.3)
This question asks you to identify if you have evaluated this program during the past year, and if so, to explain the process used.

QUESTION #2: HUMAN RESOURCES

2.1 Staff Paid Through Project/Program

- What is the name of paid staff who were involved in the delivery of this project/program?
- What is their job title?
- How many full-time equivalents (FTE's) were involved in the delivery of this project/program? Please identify sources of funding for each FTE.

Staff Name	Job Title	FTE's		
		Drop-in Funding	Other Funding	Total
Total				

HELPFUL HINTS (QUESTION #2.1)

This question asks you to list the names of all staff currently working on the project, their job title and their total full-time equivalent (FTE). If you received additional funding for enhanced staffing, please include these positions. FTE's are based on a 35 hour week, where staff that work 35 hours per week equal 1.0 FTE. Please indicate how much of each staff's FTE is funded through drop-in funding from the City and through other funding sources. For example, a staff working 1.0 FTE may be funded 0.5 FTE by this funding stream and 0.5 FTE by another funding source.

Please do not include information on staff that assist with the delivery of the program, but are NOT paid through it.

2.2 Other Contributors to the Project/Program

- Besides staff paid through the program, who else was involved in the delivery of this project/program (i.e. other staff not paid through the program, volunteers, client peers, and other agencies)?
- What were their roles?
- How many people in each role?
- How many hours in total did they contribute to the project/program in a typical week?

Type of contributor (other staff, volunteers, client peers, other agencies)	Role in project/program	Number of people	Combined hours contributed per week
Total			

HELPFUL HINTS (QUESTION #2.2)

This question asks you to identify other contributors to the project/program that are not paid through it. Include a brief description of their role in the project/program, the number of people involved, and their total hours contributed (for all persons) to the project/program in a typical week.

Staff not paid through the project/program refers to staff that work at the agency delivering the project/program, but have salaries that are funded through other sources.

Volunteers refer to people working without pay involved in the project at all levels, except the Board of Directors working in their prescribed management capacity. Volunteers that receive an honorarium can be counted here.

Client peers are persons who may receive services from your project/program, but also contribute to the project/program by volunteering to carry out certain activities. Include any client peers who receive an honorarium to carry out their activities.

Other agencies refer to agencies that assist in the delivery of your project/program for no fee. For example, another agency may come to your site and provide a service for clients you work with that is part of your programming with them.

Please note that it is NOT an expectation of the City that other contributors help with the delivery of the project/program. However, if they do, we would like to know the extent of their in-kind support in order to recognize it.

QUESTION #3: HOURS OF SERVICE

3.1 Indicate the opening and closing hours each day that your drop-in was open:

Day	Open	Close
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Day	Open	Close
January 1, 2011		
February 21, 2011		
April 22, 2011		
April 25, 2011		
May 23, 2011		
July 1, 2011		
August 1, 2011		
September 5, 2011		
October 10, 2011		
November 11, 2011		
December 25, 2011		
December 26, 2011		

HELPFUL HINTS (QUESTION #3)

This question asks you to identify opening and closing hours at your drop-in centre. If your centre operates seasonal hours (e.g. open different hours during the summer months and the winter months) please include this information as well.

QUESTION #4: FINAL PROJECT/PROGRAM EXPENDITURES & NOTES

		Original budget in Part B Application	Actual grant expenditure	Variance (surplus/deficit)
1000	DIRECT SERVICE STAFFING			
1001	Project staff salaries			
1002	Project staff benefits			
1003	Management staff salary & benefits			
1004	Support staff salary & benefits			
1005	Staff training & development			
1006	Staff travel			
1007	Other (specify)			
2000	PROJECT EXPENSES			
2001	Project Supplies			
2002	Food			
2003	T.T.C.			
2004	Vehicle leasing costs			
2005	Vehicle operating costs			
2006	Other client travel			
2007	Honoraria			
2008	Other (specify)			
3000	PROJECT ADMINISTRATION (proportion of org. admin costs attributed to the project)			
3001	Management staff salary & benefits			
3002	Support staff salary & benefits			
3003	Office supplies & equipment			
3004	Purchased services			
3005	Other (specify)			
4000	PROJECT BUILDING OCCUPANCY (proportion of costs attributed to the project)			
4001	Rent			
4002	Mortgage			
4003	Utilities			
4004	Maintenance staff & purchased service			
4005	Maintenance & cleaning supplies & equipment			
4006	Other (specify)			
5000	GRAND TOTAL			
	Project deficit/surplus			

	Budget Item	Budget Notes
1000	DIRECT SERVICE STAFFING	
1001	Project staff salaries	
1002	Project staff benefits	
1003	Management staff salary & benefits	
1004	Support staff salary & benefits	
1005	Staff training & development	
1006	Staff travel	
1007	Other (specify)	
2000	PROJECT EXPENSES	
2001	Project Supplies	
2002	Food	
2003	T.T.C.	
2004	Vehicle leasing costs	
2005	Vehicle operating costs	
2006	Other client travel	
2007	Honoraria	
2008	Other (specify)	
3000	PROJECT ADMINISTRATION (proportion of org. admin costs attributed to the project)	
3001	Management staff salary & benefits	
3002	Support staff salary & benefits	
3003	Office supplies & equipment	
3004	Purchased services	
3005	Other (specify)	
4000	PROJECT BUILDING OCCUPANCY (proportion of costs attributed to the project)	
4001	Rent	
4002	Mortgage	
4003	Utilities	
4004	Maintenance staff & purchased service	
4005	Maintenance & cleaning supplies & equipment	
4006	Other (specify)	
5000	GRAND TOTAL	
	Project deficit/surplus	

HELPFUL HINTS (QUESTION #4)

This question compares your funding received from the City with your actual project expenditures.

The expenditure form should only reflect the City of Toronto's drop-in funding contribution to the project. Please do not include income from other sources contributing to the project. For example, if your project receives funding from both the City of Toronto and the United Way of Greater Toronto, include only the expenditures of City of Toronto funds in this form.

Please ensure that you fill out only those expenditure lines relevant to and eligible for your project. If you have no projected expenditures in the line, leave it blank. Eligible costs are specified in the descriptions of expenditure lines in this guide. In all cases, only operating costs are eligible.

Please use the Budget Notes form to clarify budget line items, e.g. 1001 *Project staff salaries*—provide the number of FTE's and their rate of pay; 3004 *Purchased Services*—identify the actual service(s) purchased and the cost (of each).

In summary:

- Expenditures of City of Toronto contribution only
- Use one form for each funded project (including extended hours and/or additional staffing, if applicable)
- Complete forms for both budgeted and expenditure amounts and notes
- Expenditures should reflect only eligible costs

Descriptions of Expenditure Lines

1000 Direct Service Staffing: Reflects all staffing costs related to the provision of direct service to clients. Does not include staffing costs related to the administration or building occupancy of the project.

1001 Project Staff Salaries: Proportion of the project staff salaries attributed to the project. Project staff refers to those persons who primarily deliver direct services to clients or carry out the core activities of the project. Please provide notes on the total number of project staff, their salaries, and the proportion of their salaries attributed to the project. Does not include salaries of management and support staff involved in direct service and related activities for the project (should be reported under lines 1003 and 1004 respectively). Also, does not include payments

to persons employed on a fee-for-service basis (should be reported under 3004).

1002 Project Staff Benefits: Proportion of the benefits for project staff (as defined in 1001) attributed to the project.

1003 Management Staff Salaries & Benefits: Reflects the proportion of management staff time spent providing direct services to project clients, directly supervising project staff, and providing human resources functions in support of the project. Also includes any portion of management staff benefits attributed to the project for these activities. Please provide notes on the total number of management staff involved in these activities, their salaries and benefits, and the proportion of their salaries and benefits attributed to the project. Does not reflect management staff time spent on administrative duties related to project, such as accounting or reporting related activities (should be reported in line 3001).

1004 Support Staff Salaries & Benefits: Reflects the proportion of support staff time spent providing direct services to clients in support of the project. These activities may include, but are not restricted to, reception duties and providing information to clients. Please provide notes on the total number of support staff involved in these activities, their salaries and benefits, and the proportion of their salaries and benefits attributed to the project. Does not include support staff time spent on administrative activities in support of the project, such as bookkeeping or office management activities (should be reported in line 3002). Also, does not include human resources for maintenance and cleaning (should be reported in line 4004).

1005 Staff Training & Development: Proportion of training and professional development costs for staff paid through the project. These costs include Hostel Training Centre registration fees for staff training and similar costs.

1006 Staff Travel: Proportion of travel costs of any staff in support of the project, but not including costs related to the transport of clients (should be reported in line 2005). These costs may include TTC, taxi costs or mileage. Does not include costs related to staff training or professional development (line 1005) or a vehicle owned or leased by the organization (lines 2004 and 2005).

1007 Other Project Staffing Costs: Any other major staff-related costs that support the direct service provided by the project. Please provide notes that describe the items in this line.

2000 Project Expenses: Reflects all costs of project other than staff, administration and building occupancy.

2001 Project Supplies & Equipment: Costs of all supplies needed for the project, except supplies used for administration (should be reported in line 3003) and building occupancy purposes (should be reported in line 4005). Supplies may include, but are not restricted to: clothing, personal supplies for clients, health care supplies, kitchen utensils, small appliances, items for recreational activities, educational material for workshops, program furniture, project computer equipment and supplies, and any specialized equipment. Please provide a general description of the project supplies in your notes. A detailed list of items is not required, but may be requested at a later date. If supplies and equipment are also used for non-project activities, or for project administration or building occupancy purposes, please provide notes indicating the total costs of the supplies and equipment, and the proportion of these costs attributed to the project under this line.

2002 Food: Costs for food provided through the project.

2003 Toronto Transit Commission (T.T.C.): Costs for T.T.C. tickets or tokens for clients served by the project where transportation is part of the service provided.

2004 Vehicle Leasing Costs: Costs of leasing vehicles for project use. If leased vehicles are also used for non-project activities, project administration or building occupancy purposes, please provide notes on the total vehicle leasing costs and the proportion attributed to the project in this line. New vehicles for the project are considered capital items, and are not an eligible project expense.

2005 Vehicle Operating Costs: Costs of operating vehicles for project use, including but not restricted to insurance, gas and maintenance of vehicles. If vehicles are also used for non-project activities, project administration or building occupancy purposes, please provide notes on the total vehicle operating costs and the proportion attributed to the project in this line. If mileage allowances are paid for the use of staff vehicles to transport clients, please include these costs in this line. New vehicles for the project are considered capital items, and are not an eligible project expense.

2006 Other client travel: Costs for travel costs of clients served by the project other than TTC, project vehicles or staff vehicles where transportation is part of the service provided. Includes taxi and GO Transit costs.

2007 Honoraria: Reflects honoraria expenses for activities that directly support the project. Includes honoraria paid to clients, client peers, volunteers and students. Does not include staff salaries and wages (lines 1001, 1002, 1003, 1004, 3001, 3002) or purchased services (3004).

2008 Other Project Expenses: Any other project expenses with the exception of costs related to staffing, administration, or building occupancy. Please provide notes on the items in this line if over \$1,000.00.

3000 Project Administration: Reflects all costs related to administration of the project. Includes staffing costs, supplies and equipment, and purchased services related to project administration.

3001 Management Staff Salaries & Benefits: Reflects the proportion of management staff time spent on administrative duties related to the project, such as accounting or reporting activities. Also includes any portion of management staff benefits attributed to the project for these activities. Please provide notes on the total number of management staff involved in these activities, their salaries and benefits, and the proportion of their salaries and benefits attributed to the project. Does not reflect management staff time spent on providing direct services to project clients, directly supervising project staff, and providing human resources functions in support of the project (should be reported in line 1003).

3002 Support Staff Salaries & Benefits: Reflects the proportion of support staff time spent providing administrative support to the project, including administrative clerical duties such as bookkeeping or office management activities. Please provide notes on the total number of support staff involved in these activities, their salaries and benefits, and the proportion of their salaries and benefits attributed to the project. Does not reflect support staff time spent on direct service activities in support of the project (should be reported in line 1004). Also, does not reflect time spent on building maintenance and cleaning (should be reported in line 4004).

3003 Office Supplies and Equipment: Costs of all office supplies and equipment attributed to the administration of the project. Includes, but is not restricted to: postage and courier costs; paper and stationery; photocopier equipment, maintenance and supplies; computer equipment, maintenance, and supplies; printers and computer software; office furniture; communication expenses including telephones and pagers; and other office equipment or supplies used for the administration of the project. Please provide a general description of these items in your notes. An itemized list is not required, but may be requested at a later date. If supplies and equipment are also used for non-project activities, for direct service under the project or building occupancy purposes, please provide notes on the total costs of these items, and the proportion attributed to the project in this line.

3004 Purchased services: Proportion of purchased service costs for administrative

purposes in support of the project. Purchased services are usually charged on a fee-for-service basis, and are used when an organization does not employ regular staff to carry out the function. Includes, but is not restricted to legal fees, audit costs, and accounting or bookkeeping services. In-house staff costs for administrative services such as bookkeeping and office management should be reported in line 3001 or 3002.

3005 Other Administrative Costs: Any other administrative costs that support the project. Please provide notes on the items in this line if over \$1,000.00.

4000 Building Occupancy: Refers to all costs related to building occupancy. Includes costs directly related to occupying project space, and if applicable, some proportion of costs for shared space used by project staff and/or clients.

4001 Rent: Costs for rent or lease of project space, and if applicable, a proportion of costs for shared space such as office or common space that supports the project. For rent or lease costs of shared space, please describe the space, indicate its total rent or lease costs, and note the proportion attributed to the project. The proportion should be based on square footage of the space and amount of time it is used for project related activity or serving project clients. If the project pays a fee for the use of space that is owned by its sponsoring organization, report the amount as a contribution towards the organization's mortgage in line 4002.

4002 Mortgage: Mortgage costs assigned to the project for the project space, and if applicable, a proportion of mortgage costs for shared space such as office or common space that supports the project. For both project and shared spaces, please describe the spaces, indicate the total costs of the mortgage attributed to each, and note the proportion attributed to the project. The proportion should be based on square footage of the space and amount of time it is used for project related activity or serving project clients. This expenditure is ineligible for organizations that own their building and have no mortgage. Do not include this expenditure if you are renting (should be on line 4001).

4003 Utilities: Proportion of utility costs attributed to the project, including gas, hydro and water costs. Please provide notes on the total costs of utilities, and the proportion attributed to the project.

4004 Maintenance Staff and Purchased Service: Proportion of maintenance and cleaning staff salaries and benefits attributed to the project. Please provide notes on the total number of staff involved in these activities, their salaries and benefits, and the proportion of their salaries and benefits attributed to the project.

If these activities are purchased services (provided on a fee-for-service basis by people other than organization staff), this expenditure should reflect the proportion of these costs attributed to the project. Includes contracts for grounds keeping, plumbing services, electrical work, HVAC maintenance, elevator maintenance, and general building maintenance. Please provide notes on the total costs of these purchased services, and the proportion attributed to the project. Does not include costs for building renovations which are considered capital expenses.

4005 Maintenance & Cleaning Supplies & Equipment: Proportion of building maintenance and cleaning supplies and related equipment costs attributed to the project. Includes, but is not restricted to regular building maintenance hardware, repair materials, painting equipment and supplies, and cleaning equipment and supplies. Please provide notes containing a general description of these items, their total cost, and the proportion attributed to the project.

4006 Other Building Occupancy Costs: Any other costs related to building occupancy that directly support the project. Please provide notes on the items in this line.

5000 Grand total: The total amount of all expenditures. This amount must not exceed the 12-month funding allocated to the project.

QUESTION #5: DEMOGRAPHIC OBSERVATIONS

5.1 Gender

Approximately what percentage of the people served by your project/program were:

GENDER	%
Female	
Male	
Trans-gendered	
Total	100

HELPFUL HINTS (QUESTION #5.1) This question asks you to estimate the percentage of people served by your project/program that were female, male or transgendered.

Transgendered refers to people who identify themselves as a different gender than their physiological gender.

5.2 Age

Approximately what percentage of the people served by your project/program were:

Age	%
Children (0 -15)	
Youth (16 -24)	
Adults (25 - 64)	
Seniors (65+)	
Total	100

HELPFUL HINTS (QUESTION #5.2)

This question asks you to estimate the percentage of people served by your project/program by age. For the purposes of reporting, please use the following age categories: **children** (aged 0 to 15), **youth** (aged 16 to 24), **adults** (aged 24 to 64) and **seniors** (aged 65+).

5.3 Household Type

Approximately what percentage of the people served by your project/program were:

Household Type	%
Single	
Couples without children	
Lone parent	
Two parent	
Extended	
Other	
Total	100

HELPFUL HINTS (QUESTION #5.3)

This question asks you to estimate the percentage of people served by your project/program by household type.

The **type of the household** is defined by the combination of household members actually seeking services. For example, a single parent coming to the drop-in centre accompanied by at least one child under age 18 would be counted as a lone parent. Comparatively, a single person (even though s/he may be a parent) should be counted under **single**.

Two parent and **lone parent** refer to families with at least one child under the age of 18. For example, if two parents have one 8 year-old child and one 19 year-old child, the family would be counted under “two parent”. Youth under 18 seeking services alone should be counted under “single”.

For the purposes of reporting, guardians of children are considered their parents. Guardians of children include grandparents, older siblings or legal guardians in households without the parents of the children present. For example, a grandparent with a child under age 18 in their care would be counted under the “lone parent” category.

Couples without children refer to couples with no children of any age. **Extended** refers to families with children 18+, or adults residing with an elderly parent. **Other** households are those that do not fit in the above categories, e.g. unrelated roommates.

5.4 Language

Approximately what percentage of the clients accessing your project/program were served in English.

Language	%
English	

HELPFUL HINTS (QUESTION #5.4)

This question asks you to estimate the percentage of people served by your project/program in English. This question refers to the language used to serve the client. This question does NOT refer to the clients’ mother tongue.

5.5 French

Please advise if your project is able to provide services in French.

Yes No

If yes, approximately what percentage of clients received services in French? _____ %

HELPFUL HINTS (QUESTION #5.5)

This question is intended to identify which programs have resources to provide

services in French. It also will help funders (Province and City of Toronto) to evaluate the demand for bilingual services.

5.6 Aboriginal

Approximately what percentage of the people served by your project/program self identified as Aboriginal, First Nations, Métis or Inuit heritage:

Aboriginal	%
Aboriginal	

HELPFUL HINTS (QUESTION # 5.6)

This question asks you to estimate the percentage of people served by your project/program that self identified as Aboriginal. For the purposes of reporting, Aboriginal includes people who are of First Nations, Métis or Inuit heritage.

5.7 Mental Health and Addictions

Approximately what percentage of the people served by your project/program had:

Mental Health & Addictions	%
Mental health issues only	
Addiction issues only	
Both mental health and addiction issues	
Neither mental health or addiction issues	
Total	100

HELPFUL HINTS (QUESTION # 5.7)

This question asks you to estimate the percentage of people served by your project/program that have mental health issues only, addiction issues only, both mental health and addiction issues, or neither mental health or addiction issues. Identifying people with a mental health issue and/or addiction should be based on your observations and/or what you already know about them, and can include

people who:

- Are diagnosed with a mental illness and/or addiction;
- Freely declare that they have a mental health issue and/or addiction;
- Are seeking services for a mental health issue and/or addiction;
- Are receiving treatment for a mental health issue and/or addiction, including taking medication; and
- Exhibit behaviour that strongly suggests they have mental health and/or addiction issues.

Please remember that the question asks for an estimate based on all your clients, and does not ask for information on individual clients.

5.8 Housing Status

When you first helped them, approximately what percentage of the people served by your project/program were:

Housing Status	%
Living outside or on the street	
In shelters	
In temporary housing (e.g. motels, with family or friends)	
In housing (e.g. apartments, houses)	
Recently discharged from a health facility	
Recently discharged from corrections	
Unknown	
Total	100

HELPFUL HINTS (QUESTION #5.8)

This question asks you to estimate the percentage of people served by your project/program by housing status at the time you first helped them. Housing status refers to where they stayed the night before you became involved.

For the purposes of reporting, people who are **living outside or on the street** refer to people who were known to be sleeping rough or outside, or squatting. People **in shelters** refers to people who stayed at an emergency shelter or hostel the night before. People who were **in temporary housing** refers to people who were staying temporarily with friends or families (e.g. couch surfing) or in motels or hotels. People **in housing** have a room, apartment or house that can be considered more than temporary.

People who are **recently discharged from a health facility** came to your project/program directly after being released from a health facility to no fixed address. People who are **recently discharged from corrections** refers to people released from a correctional facility to no fixed address. **Unknown** refers to people whose housing status is not reported.

5.9 History of Homelessness

When you first helped them, approximately what percentage of the people served by your program were:

History of Homelessness	%
Homeless less than one year	–
Homeless more than one year	–
Not Homeless	–
Unknown	–
Total	100

HELPFUL HINTS (QUESTION #5.9)

This question asks you to identify the history of homelessness people served by your project/program at the time you first helped them. Please estimate using percentages. Homelessness refers to the condition of being without long term accommodation e.g. living on the street, discharged from a health facility or corrections to no fixed address, in shelters, or temporary housing.

- Homeless less than a year refers to people without long term housing for less than a year
- Homeless more than a year refers to people who without long term housing for more than one year,
- Not homeless refers to people who have a room, apartment or house that can be considered more than temporary, e.g. they have signed a lease or have a verbal agreement with a landlord.
- Unknown refers to people whose history of homelessness is not known at the time you first helped them.

5.10 Source of Income

When you first helped them, approximately what percentage of the people served by your project/program received primary or secondary income from:

Income	Primary %	Secondary %
Employment	–	–
Employment Insurance	–	–
Ontario Works	–	–
ODSP	–	–
CPP	–	–
OAS	–	–
Panhandling	–	–
None	–	–
– Total	100	100

HELPFUL HINTS (QUESTION 5.10)

This question asks you to identify the primary and secondary source of income of people served by your program at the time you first helped them. Please estimate using percentages. **Primary** refers to the largest source of income and **secondary** refers to any additional income.

- **Employment** refers to income from part time, full time, or seasonal employment
- **Employment insurance** refers to income from Employment Insurance benefits.
- **OW** refers to income from Ontario Works through Toronto Social Services.
- **ODSP** refers to income from the Ontario Disability Support Program through the Ministry of Community and Social Services.
- **CPP** refers to income from the Canada Pension Plan.
- **OAS** income from Old Age Security fund.
- **Panhandling** refers to income from soliciting cash donations in public places.
- **Other** refers to any source of income not listed above.
- **None** refers to having no reported income.

QUESTION # 6: TRAINING - ACCESSIBILITY FOR ONTARIANS WITH DISABILITIES ACT

Please confirm all of your staff and volunteers who have been required by the City to complete training on the “Accessible Customer Service Standard” under the Accessibility for Ontarians with Disabilities Act (including staff and volunteers who deal with the public) have received the required training.

Yes No

If No, please explain and confirm when staff will be trained. The MCSS online training is available on: http://www.mcass.gov.on.ca/mcass/serve-ability/HTML_Eng/screen01.html

HELPFUL HINTS (QUESTION #6)

This question is intended to identify if any staff or volunteers have not completed this training. A helpful link to the online training is provided. Since this training is mandatory, please explain if staff have not yet been trained, and confirm when they will be trained.

QUESTION #7: EMERGING ISSUES & OTHER COMMENTS

7.1 Have there been changes in the past six months in the profile of your new clients? For example; their age, gender, family status, health status, mental health status, citizenship status or reasons for homelessness.

HELPFUL HINTS (QUESTION #7.1)

This question is open-ended. It allows you to report on emerging characteristics and issues regarding the new clients you are serving.

7.2 Has there been a change in the past six months in the types or intensity of services you are providing? If there has been a change, what might be the reasons? For example, increase in landlord negotiations, need for more TTC tickets, or increase in mental health referrals.

HELPFUL HINTS (QUESTION #7.2)

This question is open-ended. You may notice some changes to the services your project/program is providing to respond to client needs or for other reasons. If so, please describe those changes and give reasons you think are driving the change.

7.3 Have there been changes in the service system in the past six months? What might be the reasons for these changes? What do you think could improve the system's effectiveness? For example, more or less collaboration with community partners, or more difficulty accessing other services.

HELPFUL HINTS (QUESTION #7.3)

This question is open-ended. You may notice changes in the environment in which you are providing services that you can comment on here. Changes may be among the agencies your project/program is interacting with, policies or programs implemented by funders, or other government activity/inactivity. Please comment on the changes here, give some possible reasons for the changes, and make suggestions on improving the service system's effectiveness.

7.4 Please include or provide comment on any other information you would like to share with the City about your project/program. (Optional, ½ page maximum).

HELPFUL HINTS (QUESTION #7.4)

This question is open-ended and optional. It allows you to report on results or issues not covered elsewhere in the reporting form and to provide any additional statistical information related to the project/program. Please let us know any information about your project/program of which we should be aware.

Glossary of Terms

Aboriginal Housing: housing programs specifically for Aboriginal people (includes people who are of First Nations, Métis, or Inuit heritage).

Addiction: identifying people with addiction issues should be based on your observations and/or what you already know about them, and can include people who:

- Freely declare that they have an addiction issue
- Are seeking services for an addiction issue
- Are receiving treatment for an addiction, including harm reduction programs, and,
- Exhibit behaviour that strongly suggests they have an addiction issue

Adults: refers to individuals aged 25 to 64.

Alternative Housing: refers to housing designated as Alternative Housing. Alternative Housing is rent-geared-to-income (RGI) housing coupled with support services to help tenants to keep their housing. Alternative Housing providers can select tenants from their own waiting list, and use the Housing Connections list.

Budget definitions: please see budget definitions in Helpful Hints for Question 3 of the Final Report.

Children: refers to individuals aged 0 to 15.

Client household: a family or single person you are working with or have worked with. In most cases, you have a file on them and/or have established a relationship with them, and have provided a service to them on more than one occasion.

Client peers: people who may receive services from your project/program, but also contribute to the project/program by volunteering to carry out certain activities. Client peers may receive an honorarium for the activities.

Couples without children: couples with no children of any age. Couples with children over the age of 18 should be considered extended families.

Direct service: includes working directly with client households and staff training, but excludes administration.

Discharge: when the service relationship with the household ends.

Eviction prevention: In cases where the threat of eviction is apparent, includes activities related to mediating landlord/tenant relationships, tribunal-related activities, legal aid, emergency income supports (rent bank, shelter fund), extreme cleaning, and other emergency activities.

Extended: A type of household whose extended family members or relatives live together on an ongoing basis.

Homes for the Aged: refers to housing for adults who require long-term care due to a chronic illness, frailty, or an inability to independently complete normal activities of daily living.

Housed: households that actually moved into housing, signed a lease, or have a verbal agreement with a landlord, as a direct result of your activities. People in housing have a room, apartment or house that can be considered more than temporary. Housed does NOT include situations where: housing was identified for the household, but they did not move into it; and referrals to another agency providing housing access services.

Household type or composition: the type of household is defined by the combination of household members actually seeking services. Families have at least one child < 18 years of age. For example, a single parent accompanied by at least one child under age 18 would be counted as a lone parent family. Comparatively, an adult on their own (even though s/he may be a parent) should be counted under singles.

Housing Access: the provision of services assisting households to obtain and move into housing.

Housing Applications: helping a client household to submit a new application for subsidized or special housing.

Housing Connections: the coordinated access system for those seeking subsidized rental housing (including municipal non-profit, private non-profit and cooperative).

Housing Stabilization/Follow-up Services: all supports provided to help someone stay in their housing. These supports can be short term (housing orientation) or long term (ongoing supports and monitoring).

Independent housing: housing with no or occasional supports to tenants.

Living outside or on the street: refers to sleeping rough or outside, or squatting.

Lone parent: households with one parent and at least one child under the age of 18. Guardians are counted as parents.

Mental Health: identifying people with mental health issues should be based on your observations and/or what you already know about them, and can include people who:

- Freely declare that they have a mental health issue
- Are seeking services for a mental health issue
- Are receiving treatment for a mental health issue including taking medication, and,
- Exhibit behaviour that strongly suggests they have a mental health issue

New: a household you started working with this quarter, and have not worked with in the previous three (3) quarters.

Non-profit and/or co-op housing: all social housing and co-operative housing owned by non-profit organizations or co-operatives.

Ongoing: a household you worked with in the previous three (3) quarters and are working with this quarter.

Other households: households that do not fit in other household categories. For example, unrelated roommates.

Personal Supports: services that assist households in a variety of ways, including providing emergency supplies, trusteeship services, individual advocacy, provision of information about mainstream services, and transportation to services. Services may also include the provision of life skills support, such as assistance with nutrition, clothing, personal hygiene, budgeting, bill paying, shopping, and household cleaning/maintenance.

Private housing: market housing, including rooming houses, apartments and second suites owned by private landlords. Rent for this type of housing can be at market rates or subsidised.

Seniors: refers to individuals aged 65 and over.

Shelters: refers to emergency shelters or hostels. They can refer to shelters that are part of the City shelter system, VAW shelters for victims of family violence, settlement houses, or other emergency accommodation. Families who were placed in motels by the City shelter system should be counted here.

Supportive Housing: refers to housing programs that provide rent-geared-to-income (RGI) housing and support to tenants such as information, counselling, direct rent payment, mental health services and/or addiction services.

Temporary accommodation: refers to situations where people stay temporarily with friends or families (e.g. couch surfing) or in motels or hotels.

Transgendered: people who identify themselves as a different gender than their physiological gender.

Two parent: households with two parents and at least one child under the age of 18. For example, if two parents have one 8 year-old child and one 19 year-old child, the family would be counted under “two parent families”. Guardians are counted as parents.

VAW (Violence Against Women): programs that assist women and their children who are victims of violence to find affordable and/or transitional housing.

Volunteers: people working without pay involved in the project at all levels, except the Board of Directors working in their prescribed management capacity. Volunteers who receive an honorarium should be included.

Youth: refers to individuals aged 16-24. Youth alone (on their own) are considered singles.