



## STAFF REPORT ACTION REQUIRED

### Update on Shelter Occupancy and the Quality Assurance Review of Shelter Access

<b>Date:</b>	November 20, 2013
<b>To:</b>	Community Development and Recreation Committee
<b>From:</b>	General Manager, Shelter, Support and Housing Administration
<b>Wards:</b>	All
<b>Reference Number:</b>	

#### SUMMARY

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This report provides information on shelter system occupancy and use. It also provides the findings of a quality assurance review of shelter access and client satisfaction. The report provides an overview of the Shelter, Support and Housing Administration (SSHA) division's short and longer term actions and strategies to improve access to the shelter system.

#### RECOMMENDATIONS

The General Manager Shelter, Support and Housing Administration recommends that:

1. The Community Development and Recreation Committee receive this report for information.

#### Financial Impact

There is no financial impact associated with this report. Funding for emergency shelter services is provided in the 2013 Operating Budget for Shelter, Support and Housing Administration.

The Deputy City Manager and Chief Financial Officer has reviewed this report and agrees with the financial impact information.

## **Equity Impact**

The Emergency Shelter System in Toronto serves equity-seeking groups such as seniors, people with disabilities, individuals with mental health issues, the working poor, and other vulnerable groups. Effective operation of the shelter system is important in ensuring that temporary accommodation is available to a variety of equity seeking-groups.

## **DECISION HISTORY**

At the meeting on April 3-4, 2013 City Council adopted Community Development and Recreation Committee report CD19.1, which provided information about the current capacity and use of the emergency shelter system, including how clients access shelter services administered by the City.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.CD19.1>

At the meeting on October 8-11, 2013 City Council adopted CD23.10 which recommended that occupancy of shelters should not exceed 90 percent of capacity.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.CD23.10>

On October 28, 2013 Community Development and Recreation Committee heard deputations on Shelter Occupancy Rates and adopted CD24.7 including a request for information on anti-oppression, anti-racism and trauma informed training in the shelter system.

<http://app.toronto.ca/tmmis/viewAgendaItemHistory.do?item=2013.CD24.7>

## **ISSUE BACKGROUND**

In April 2013, City Council directed staff to undertake the following actions to better understand and begin to address capacity and occupancy issues in the City's shelter system:

- On an interim and emergency basis, consider activating all of the 172 flex beds available throughout the shelter system, and open additional sites and beds as necessary, with the aim of achieving an occupancy rate no higher than 90 percent in the short term;
- Track appropriate data on clients who come to any City-funded shelter and are redirected to another shelter;
- Use the Street Outreach Steering Committee as a regular reference group on the design of a quality assurance review and client services survey and interpretation of the results, and review the membership of the committee to ensure that it includes community and not-for-profit organizations and can function as an ongoing advisory body to work with staff on shelter, support and transitional housing issues;

- As part of the client services survey, investigate:
  - i. Client experiences in accessing the emergency shelter system;
  - ii. Client experiences with the physical conditions in the emergency shelter system; and
  - iii. Client satisfaction with the supports provided in the emergency shelter system, including supports provided to access permanent housing;
- As part of the quality assurance review and client services survey, consult with the Ombudsman on customer service and equitable access to services provided by the City; and
- Review the current shelter occupancy rate of 96 percent and make recommendations for an occupancy rate policy that ensures that all homeless persons seeking a bed can be accommodated.

In October 2013, City Council resolved that actual bednights as a percentage of capacity in shelter services should never fall below the Council approved rate of 90 percent.

In October 2013, Community Development and Recreation Committee requested staff to report back to Committee on current standards for anti-oppression/anti-racism and trauma-informed curriculum for management and front line staff running programs or facilities related to homelessness reduction.

This report updates Community Development and Recreation Committee on the responses to these Council and Committee decisions.

## **COMMENTS**

### **Overview of Shelter System**

#### *(a) Current Capacity*

The shelter system in Toronto is made up of two types of shelters:

- Emergency shelters, which are intended to provide shorter-term, temporary accommodation for anyone seeking emergency assistance. These shelters can be accessed from multiple points (e.g., self referral by walking into or calling any shelter site, referral by an agency or other organization); and
- Transitional shelters, which are intended to either assist clients in developing higher degrees of stability prior to moving into the community or to provide enhanced supports, similar to supportive housing. Transitional shelter programs are typically designed with a longer period of stay in mind and can only be accessed through referral after a client assessment has been made.

Toronto's shelter system currently has a base capacity of 3,800 permanent beds at 57 shelter locations as follows:

	Shelter Sector					
	Total	Adult Men	Adult Women	Mixed Adult	Family	Youth
Total Capacity	3,800	1,662	537	298	806	497
Emergency Shelter Capacity	2,776	1,056	477	206	650	387
Transitional Shelter Capacity	1,024	606	60	92	156	110

Another 727 beds supplement this base capacity as follows:

- 172 flex beds intended for use in response to extreme weather events or exceptional circumstances;
- 75 beds available on weekends at University Settlement Recreation Centre;
- 350 motel beds that are available when family shelters are at or near capacity;
- 90 beds available at various Out of the Cold sites from November 15 - April 15; and
- 40 beds exclusively for Streets to Homes clients at the Streets to Homes Assessment and Referral Centre (SHARC).

*(b) Use of Beds*

Over the past two years, the number of unique individuals seeking emergency shelter services has declined. However, during the same period the average length of stay in shelters has increased. This has pushed nightly occupancy rates up and increased pressure on shelter capacity. The number of unique clients accessing the shelter system in 2011 was 18,246, down to 17,548 clients in 2012, and further reduced to a projected 17,075 clients in 2013. On the other hand, average lengths of stay have steadily increased by about 10 days per year between 2011 (average of 53 days) to 2013 (average of 72 days).

In 2012, nearly 1 in 10 shelter clients had a length of stay of one year or longer. This client group occupied 36 percent of total shelter system capacity, which translates to 1,381 shelter beds that were consequently unavailable for emergency admissions. This usage pattern is more pronounced in the men's and women's sectors where on average 42 percent of beds in the men's sector and 51 percent of beds in the women's sector are occupied by clients who have been in shelter for over a year. Factors such as chronic mental illness, chronic physical health issues, substance use and advanced age are among the reasons why shelter clients remain for longer lengths of stay in the system.

The shelter system in the City of Toronto is required to deal with clients with numerous complexities and needs, the demands of which have increased substantially over the past

number of years. In their reporting to SSHA, service providers consistently point to an increase in the number of clients with severe mental health and addictions challenges, as well as a multitude of complex health needs.

In recent years, the City's shelter system has also seen an increase in demand for service by client groups that are either coming from or should be accommodated within federal or provincially mandated programs. Corrections, child welfare and health care systems often discharge clients directly to emergency shelters. In 2012, approximately 4 percent, or 2,060 of the requests for emergency shelter were as a result of discharges from institutions. It is likely that that this number is higher due to the fact this information is self disclosed at shelter intake.

Additionally in 2012, Toronto's emergency shelter system admitted over 840 unique clients self-reporting they were fleeing violence. A large number of these were women and children. This translates to 5 percent of all admissions to the emergency system. It is likely that these women and children were turned away from provincially funded Violence Against Women's (VAW) shelters because those shelters were full.

Not only do all of these clients require enhanced support services that emergency shelters are not well equipped to provide, this situation places additional pressures on demand for shelter beds within the shelter system.

### **Quality Assurance in the Shelter System**

#### *(a) Shelter Standards*

The shelter system has a number of systematic controls in place to ensure that the system is as barrier free as possible to clients attempting to access it. In 2002, City Council adopted a comprehensive set of Shelter Standards that clearly defined service provision expectations for all shelters funded by the City of Toronto. The Standards outline a number of key guiding principles that entrench an anti-oppression and harm reduction approach to service delivery.

The following guiding principles relate to anti oppression:

- All homeless people have the right to shelter regardless of political and religious beliefs, gender identity and sexual orientation. Shelter staff are required to be sensitive to the diversity of clients.
- Shelters will provide an atmosphere of dignity and respect and will provide services in a non-judgemental manner.
- Shelters will be sensitive to the ethno-specific and linguistic needs of clients.
- Gender identity is self identified. Service providers need to accept gender identity as defined by the individual seeking service.

It should also be noted that shelter providers are required to sign off on the City's Non-Discrimination Declaration as a condition to receive or renew funding.

The following guiding principles relate to harm reduction and shelter access:

- People who are homeless may use substances to varying degrees. Everyone is entitled to shelter service whether or not they use substances. As a result, admission, discharge and service restriction policies must not be based on substance use alone.
- People who are homeless have few resources and the shelter system is often the final option to receive the basic necessities of life. Service restrictions should be used as a last resort and only in the most serious cases.

The intent behind these principles is to ensure that decisions relating to admission, discharge and service restrictions for clients using substances are based on behaviour, and not solely based on substance use. Clients who request service at a shelter location are not to be refused service if they are under the influence of a substance, unless the shelter is designated as an abstinence based facility.

In order to ensure the City's commitment to providing safe and appropriate shelter services that meet the needs of the diverse client group it serves, SSHA in consultation with community agencies and the City's Ombudsman's office, will be updating the current version of the Toronto Shelter Standards in 2014. This will include a further review of shelter access guidelines and training requirements.

#### *(b) Training*

All shelter staff are required to attend training on the Shelter Standards within the first three months of employment and attend anti racism/ anti oppression training within the first year of employment. These mandatory courses are provided by the Toronto Hostels Training Centre, which is funded by the City of Toronto to provide training for shelter providers and other agencies serving the homeless community. In 2012, the Training Centre provided mandatory shelter standards training to 216 individuals, and anti oppression training to 159 individuals. Shelter providers are required to submit their training records as part of their annual funding submission to SSHA and any training deficiencies must be addressed. In some cases, agencies have been provided with in house training sessions to ensure all new staff are appropriately trained.

The 2013 Streets Needs Assessment identified an over representation of Lesbian/Gay/ Bisexual/ Transgendered/Queer youth, Aboriginals, and aging clients in the homeless population. Currently, the Toronto Hostels Training Centre, in partnership with a number of community agencies, offers training for shelter workers in providing service to these client groups. The Training Centre is working to create an older Homelessness Certificate Program to provide additional training for those working with older adults in

the shelter system. The Training Centre, in partnership with 519 Church St. Community Centre, also offers Trans-Access training for shelter staff.

*(c) Monitoring Compliance*

On an on-going basis, SSHA monitors compliance with these principles in a number of ways. As part of a broader quality assurance process, SSHA conducts regular site visits and performs reviews of agencies' policies and procedures to ensure that they are in compliance with Shelter Standards, such as those described above. Client complaints are a valuable source of information from shelter clients. Complaints received by SSHA are monitored on an on-going basis using a Divisional tracking tool in order to monitor trends and address service issues with shelter providers. In 2012, there were 302 complaints received regarding shelter services. Of these, 11 complaints (or just under 4 percent) related to access to a shelter bed.

**2013 Quality Assurance Review**

*(a) Review of Shelter Access Systems*

Since April 2013, SSHA has conducted a number of research activities to better understand the needs of shelter clients and has sought stakeholder input into how they would like to see housing related services delivered.

The combined findings of the following three key initiatives have influenced the implementation of the process and customer service improvements and efficiencies within the shelter system identified later in this report. These initiatives are:

- The 2013 Street Needs Assessment;
- The Toronto Housing Services Consultation; and
- The Quality Assurance Review.

**Street Needs Assessment**

On the night of April 17 the third Street Needs Assessment was conducted with more than 1,900 surveys being completed by individuals experiencing homelessness who were encountered outdoors, in emergency shelters (including those serving victims of domestic abuse), hospitals and correctional facilities. The findings of the Street Needs Assessment were presented to Council in September and will serve to inform future service planning throughout the division.

Some key findings of the Street Needs Assessment highlight the need to focus on addressing the needs of homeless seniors, LGBTQ youth, and continued homelessness within Toronto's Aboriginal population.

## Toronto Housing Services Consultation

SSHA launched the Toronto Housing Services Consultations in June and utilized various means to gather input and feedback from a wide range of stakeholders that informed the development of the Housing Stability Service Planning Framework. The consultation process was broad and inclusive, and involved the participation of key informants, service users, city staff, service providers and the general public. The results of the consultations reaffirmed the value placed on homeless and housing services, having a balanced approach to Housing First, the importance of supports to client success and the need for more affordable housing.

## Quality Assurance Review

SSHA contracted an external consultant, Ipsos Public Affairs, to conduct two surveys in support of the Quality Assurance Review of shelter access systems.

The Shelter Provider Access Survey was intended to assess and evaluate how well City-funded homeless shelter providers, Central Intake (CI), SHARC and 311 performed shelter access and intake services, by having a consultant make "mystery shopper" calls to each of these agencies. The research, conducted between July 18 and August 9, 2013 had three main objectives:

- to determine the incidence of calls to these providers that resulted in a bed being offered, a referral offered or a bed denied without a referral;
- to provide feedback on the level of customer service provided to those attempting to find a shelter bed;
- to determine if the incidence of calls and level of service varies significantly between specific sub-groups, by sector, client profile or shelter type.

The summary of survey findings has been appended to this report as Attachment 1. Key findings are presented below.

The external consultant found that 75 percent of calls were answered by intake or shelter staff and of these:

- 12 percent of answered calls resulted in the caller being offered a bed at that shelter;
- 33 percent of answered calls were referred elsewhere (e.g., another shelter, CI, SHARC); and
- 13 percent of answered calls resulted in denial of a bed without explanation.

In terms of customer service levels received by those seeking shelter services, the external consultant report service provider staff as being:



- Polite (50 percent of the time);
- Attentive (41 percent of the time); and
- Empathetic (28 percent of the time).

A Client Satisfaction Survey of 502 current residents across 23 shelters was conducted between July 21 and August 1, 2013. This survey aimed to gather feedback from shelter clients to investigate client experiences in accessing the shelter system, client experiences with the physical condition in shelters and client satisfaction with the supports provided in shelters. The detailed results of this survey are appended to this report as Attachment 2. Key findings included the following:

- A majority (80 percent) of shelter clients surveyed are satisfied with their experience in the shelter overall.
- The strongest drivers of satisfaction are whether or not clients feel comfortable talking to staff about problems they experience (79 percent) and feel confident their problems will be addressed (74 percent).
- A majority of clients surveyed feel respected during their shelter stay (86 percent).
- A majority of shelter clients surveyed indicate that they received the basic necessities upon arrival. 90 percent feel they have enough sleeping space.
- Majorities were satisfied with all aspects of the shelter building or facility (86 percent feel that the shelter is cleaned regularly, 86 percent generally feel safe and 80 percent feel that there is enough shared/communal space ; 73 percent feel the shelter is well maintained and that they have enough personal space and 67 percent feel that repairs are made in a timely fashion).
- A sizeable number had concerns about pests (44 percent), air quality (36 percent) and mould (27 percent), think there are unsafe areas because of poor lighting or hidden spaces (23 percent) and think the shelter is overcrowded to the point of being unsafe (23 percent).
- Clients were asked about their satisfaction with shelter and housing supports. Over half (56 percent) of clients surveyed say they have met with staff to discuss a housing plan to help them find housing or more suitable accommodation.
- Roughly half of clients surveyed indicate that someone explained what housing options are available to them, the outside community housing support services that are available and the type of help available (44 percent say they received an explanation about how to get help filling out housing applications).

The Housing Stability Services Reference Group (formerly referred to as the Street Outreach Steering Committee) is made up of representatives from community and not-for-profit organizations and various city divisions, and functions as an ongoing advisory body to work with staff on shelter, support and transitional housing issues. The Housing Stability Services Reference Group was consulted on the content and design of the two Quality Assurance Review surveys and preliminary results from the surveys have been shared with the reference group. Staff are also reviewing the findings with shelter services providers.

In addition, SSHA met with the City Ombudsman to provide a briefing on SSHA's planned and ongoing initiatives regarding shelter access, occupancy rates and client choice in seeking shelter services. Staff discussed the Quality Assurance Review findings with the Ombudsman and solicited her comments. SSHA has received the Ombudsman's written response dated October 2, 2013. She sets out a number of principles, observations and suggestions for consideration in reviewing the Shelter Standards, training, organizational and individual practices to "ensure accessible and equitable treatment" of people encountering shelter services. Staff agree with all of the Ombudsman's comments and will follow her advice. A copy of the Ombudsman's letter is appended to this report as Attachment 3.

### **Update on Short-term Actions and Impact on Shelter Occupancy**

#### *(a) Flex Beds*

At its meeting of April 3 and 4, 2013, Council directed SSHA to open all flex beds in an effort to temporarily increase the capacity of the shelter system and alleviate demand pressures. In April 2013, SSHA opened up all 172 flex beds for regular emergency shelter use and has monitored the use of these beds since then. As a result of the addition of these beds to the regular emergency shelter beds, the occupancy rate of permanent shelter beds has fallen.

The highest impact on occupancy occurred in the men's and youth shelter sectors, while the increased bed capacity in the women's and co-ed sectors had limited impact on the average occupancy rate. There was no impact on the family sector, since this sector has no flex beds, relying on the use of motel beds instead.

During November 2013 the occupancy rate across the system stood at 91 to 92 percent. However, the women's sector and the co-ed sector continue to experience occupancy rates well over 95 percent.

#### *(b) Additional Bed Spaces in Existing Shelters*

In June 2013, SSHA contacted all current purchase-of-service shelter providers to request their assistance in providing additional capacity both within current shelter locations and to identify any potential alternative locations that could be utilized as a shelter. No new locations were identified as a result of this outreach. However, approximately 30

additional shelter beds in existing shelter locations have been added to the system. These spaces are within existing locations with eight beds in the women's sector, 14 in the men's sector, and 8 additional beds for single refugees. These beds were made available over a number of weeks and all were due to be activated by December 1, 2013.

*(c) Additional Shelter Sites*

SSHA has secured the use of a vacant building close to downtown for use as a 30 bed, temporary shelter for women. This temporary location was due to begin operating by the beginning of December and will be available through April 2014. SSHA is currently developing a plan to ensure the women using this temporary location will continue to receive service until a permanent shelter location is found.

SSHA issued a Request for Expressions of Interest (REOI) in November 2013 to secure a permanent site for a shelter of 30 to 50 beds for women. The REOI seeks not for profit proponents to come forward with an appropriate service plan and suitable shelter property.

*(d) Expanded use of Motels*

SSHA currently uses three motels to house families that cannot be accommodated within the family sector of the shelter system. In 2012, there were on average 350 beds available in this motel program. Beginning in December 2013, the program will be expanded to include the use of these beds for some singles, couples and other family configurations. It is expected that this action will ease occupancy pressures and allow for improved access for these client groups.

*(e) Administrative Improvements*

According to the Toronto Shelter Standards, single adult and youth beds must not be held after curfew unless a client has made prior arrangements and received permission to be late. SSHA issued a communication to shelter providers in July 2013 reminding them of this requirement and has required that providers take specific administrative actions in order to ensure that all available beds are freed up for those requesting service. SSHA has seen some improvement and continues to monitor discharge times and work with providers to ensure the timely release of beds.

**Longer-term System Improvements to Reduce Demand for Shelter Beds**

The strategies described thus far focus on increasing the number of available shelter beds and improving associated administrative practices in the short term. While these are important steps in improving access to the shelter system and lowering the occupancy rate, it is also critical that additional strategies are implemented that focus on reducing the demand for shelter beds.

The following provides a high level description of the Division's strategies to further improve access to the shelter system and reduce demand for shelter services.

*(a) Prevent Homelessness*

Providing early intervention and assistance to individuals and families to achieve housing stability may prevent them from entering the shelter system. As part of its 5 year Housing Stability Service Planning Framework, SSHA will explore ways in which to support prevention services such as:

- Developing a comprehensive eviction prevention strategy that builds on relationships with TCH, non-profit housing providers, private-sector landlords, and community partner service agencies.
- Enhancing services currently offered by Central Intake by providing direct links to coordinated housing and support services for those at risk of eviction.
- Developing partnerships with the health care, child welfare and corrections systems to coordinate transition planning strategies that prevent people from being discharged into homelessness.
- Further identifying and developing service integration and coordination with other City Divisions to provide seamless services to vulnerable citizens with a desired goal of housing stability.

*(b) Housing Allowances*

In October 2013 City Council approved the transfer of CHPI funds to initiate a Housing Allowance Program. The program will help up to 260 households requiring assistance to achieve housing stability. A payment of \$400/month will be provided to recipient households that fall in three target groups, for a period of 1 to 3 years. The target groups are :

- At-Risk Seniors Transitioning from Ontario Works
- Aging Population in the Shelter System
- Individuals Experiencing Chronic Outdoor Homelessness

It is anticipated that up to \$3.7 million in funding will be available for the housing allowance program. These funds will be committed to a reserve fund in 2013 and be expensed over a period of no more than 3 years, from 2014 to 2017. The intent of this program is to provide a transitional benefit that bridges recipient households to self-sufficiency or long-term support programs, depending on their service needs.

The program is still in its infancy but once implemented it will help bring some relief to the shelter system.

*(c) Targeted Case Management*

SSHA is working to develop a service delivery model that ensures every person entering the emergency shelter system has a targeted service plan and supports to move out of the shelter and into housing within a defined timeframe.

*(d) Centralized Intake*

SSHA currently operates a centralized intake service which is used mainly by the family sector. For others, shelter services can be accessed through a variety of means such as directly from a shelter, or through a referral agency or through a case worker referral from another agency. The recent Quality Assurance review indicates that multiple access points to shelter services is not an effective way to provide services. A centralized model would provide greater efficiency, enhanced customer service and improved accountability. SSHA would like to develop a centralized access system in collaboration with community partners.

*(e) Occupancy Rate Policy*

In April, 2013, Council directed SSHA to make recommendations for an occupancy rate policy that ensures that all homeless persons seeking a bed can be accommodated. An environmental scan of nine Ontario municipalities and two other out of province municipalities conducted by staff shows that none of the jurisdictions had current or past occupancy policies for emergency homeless shelters but had strategies to deal with occupancy pressures including: use of flex beds with individual shelters; limited use of motels or hotels (often limited to family shelters); and referrals to neighbouring regions. The City of Toronto, with the exception of referring shelter clients to neighbouring regions, currently uses all of the other strategies.

Also as previously noted, occupancy pressures are experienced differently between the various shelter sectors. Thus, while progress has been made in bringing the overall occupancy rate closer to Council's target of 90 percent, pressures remain in specific parts of the system. SSHA will continue to make process and customer service improvements with the objective of improving the shelter system's ability to provide clients with choice, so that all homeless persons seeking a bed can be accommodated. In order for the shelter system to improve customer service and meet this goal, service standards have to be developed in consultation with community stakeholders, service users and shelter providers to address access, availability and resource allocation issues.

## **CONCLUSION**

This report responds to a number of recent decisions by City Council and Community Development and Recreation Committee regarding the current capacity and use of the emergency shelter system. It also provides information on the findings of the quality assurance review and provides an overview of the Division's strategies to improve access within the shelter system.

The strategies focus on increasing the number of available shelter beds through administrative efficiencies, introducing additional shelter beds in existing shelter sites, introducing shelter beds at new shelter sites, and through the expanded use of motels.

The strategies also focus on reducing demand for shelter services by preventing homelessness, implementing housing allowances, providing targeted case management for hard to serve client groups, making improvements to the way the shelter system is managed, including shifting the way clients access shelter services to a centralized intake process.

## **CONTACT**

Karen Smith, Acting Director, Hostel Services  
Shelter, Support and Housing Administration  
Tel.: 416-392-5417; E-mail: ksmith@toronto.ca

## **SIGNATURE**

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Phillip Abrahams  
General Manager  
Shelter, Support and Housing Administration

## **ATTACHMENTS**

1. Hostel Services Quality Assurance Review: Shelter Provider Access Survey Final Report, September 30, 2013
2. Hostel Services Quality Assurance Review: Client Service Survey Final Report
3. Memorandum from City of Toronto Ombudsman, October 2, 2013