Presentation to the Audit Committee on June 6, 2022 Agenda Item AU12.1

Part 1 of the Audit of Emergency Shelters: A Focus on Case Management

Improving Outcomes – A Roadmap for Shelter, Support and Housing Administration to More Effectively Guide Each Client on Their Journey Towards Stable Housing

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Presentation Overview

- 1. Background and Audit Objectives
- 2. Key Audit Findings
- 3. In Summary

Why This Audit is Important

"An emphasis on permanent housing solutions to homelessness recognizes that housing is inherent to the dignity and well-being of a person, that housing is a determinant of health, and that housing is an efficient and cost-effective use of resources."

~SSHA 2020 Annual Report



Housing First Approach

People are more successful in moving forward with their lives if they first have housing





Audit Objectives

- 1. Is it cost-effective to move people along the housing continuum toward permanent housing?
- 2. Is case management performed effectively and consistently to support a housing first approach?
- 3. Are the systems and data used effectively to monitor program outcomes and identify areas for continuous improvement?

Key Audit Findings

- 1. Shelter beds are more expensive to operate than permanent housing
- 2. Case management activities can be more consistent and better coordinated to address SSHA's Service Plan implementation priorities
- 3. Existing information system does not easily tell a client's "story"

1. Focusing on Housing is an Efficient and Cost-Effective Use of Resources

City's Average Annual Cost by Housing Type



2. Increasing the Focus on Case Management





By the Numbers

Between January 1, 2019 and February 28, 2022:

- > 46,300 people stayed in a shelter for at least one night
- 40% (18,100) discharged to permanent housing



By the Numbers

As of February 28, 2022:

- 10,000+ active shelter clients
- Around 15% (1,310 of 8,876 client households) are on the Centralized Social Housing Waiting List
- 45% are experiencing chronic homelessness*



* \geq 180 days of homelessness over the past year or \geq 546 days of recurrent experiences of homelessness in the past three years

The Toronto Shelter Standards

- Case management expectations are set out in the Standards for all City-funded shelters
 - To help people achieve housing stability and other goals





City Council adopted the current version of the Toronto Shelter Standards on September 30, 2015 <u>Agenda Item History - 2015.CD6.5 (toronto.ca)</u>

Shelters vs. Respite Sites

Emergency Shelters	24-hr Respite Sites
Follow Toronto Shelter Standards	Follow 24-hr Respite Site Standards
 Provide temporary accommodation and related support services 	Have lower barriers to service
Assist people to move into housing	 Provide essential services
 Clients will work collaboratively with shelter staff to develop a service plan and to work toward achieving goals set out in the service plan (Shelter Standards 6(c)(iv)) Shelter providers will not disclose a client's personal or health information without first receiving the client's signed consent (Shelter Standards 12.6.4(a)) 	 Provide access to safe indoor space Offer some degree of service planning to their clients and provide such services to interested clients. Client participation is neither mandatory nor a condition of service (Respite Standards 8.2(a)) 24-HOUR RESPITE SITE STANDARDS

Audit focuses on clients accessing shelters



Information Needed to Support Clients

- Clients receive support from shelter staff to achieve their housing and related goals
- The Standards state the client's responsibility to "work collaboratively with shelter staff to develop a service plan and to work toward achieving goals set out in the service plan"
- Certain information helps to support clients move towards housing. For example:

Applying for housing (e.g. Rent- Geared-to-Income) requires:	Applying for income supports (e.g. Ontario Works) requires:	
legal status	 health card number 	
tax Notice of Assessment	Social Insurance Number	
other income	income	
• etc	• etc	

Information also helps determine eligibility for other housing options or financial support

Effectiveness of Case Management Varies from Client to Client

Level of detail or completeness of service plans in SMIS varied

For some clients:

- we did not observe a clearly documented housing plan and/or financial plan
- files often did not indicate whether a client was on the City's Centralized Social Housing Waiting List
- case notes were not detailed enough to demonstrate progress / did not consistently address, document or identify action steps

45% of active shelter clients are experiencing chronic homelessness*:

- 2,880 people slept in shelters for >365 bed nights
 - 770+ people spent >1,095 bed nights (3 years)
 - 80 people lived >10 years in an emergency shelter
- > 200+ **families**, including
 - 280 children under 16 years old
 - 80+ families have cumulative stays of >1 year
- > 450+ are **seniors** (\geq 65 years old)
- Some may have significant physical and mental health support requirements and/or long-term care needs

* \geq 180 days of homelessness over the past year or \geq 546 days of recurrent experiences of homelessness in the past three years

Chronic Shelter Clients

Cumulative Number of Bed Nights as of	# of Clients	%
February 28, 2022		
Less than 180 bed nights (<6 months)	114	2%
181 – 365 bed nights (6 months to 1 year)	1,502	33%
366 – 1,095 bed nights (1 to 3 years)	2,108	47%
1,096 – 1,825 bed nights (3 to 5 years)	440	10%
1,826 – 3,650 bed nights (5 to 10 years)	252	6%
Greater than 3,650 bed nights (>10 years)	80	2%
Total	4,496	100%

Seniors

> 450+ chronic shelter clients are seniors (>65 years old)

Age of Client	# of Clients	%
< 25 years old	671	15%
25-44 years old	1,607	36%
45-54 years old	893	20%
55-64 years old	873	19%
65-69 years old	211	5%
70-79 years old	210	4%
>=80 years old	31	1%
Total	4,496	100%

> 290 available, or soon to be available, units in TCHC seniors housing

Families

> 200+ families are chronic shelter clients, including

- 280 children under 16 years old
- 80+ families have cumulative stays of more than one year
- 39 families are on the Centralized Social Housing Waiting List

Cumulative Number of Bed Nights	# of Families	%
Less than 180 bed nights (<6 months)	5	2%
181 – 365 bed nights (6 months to 1 year)	118	57%
366 – 730 bed nights (1 to 2 years)	65	32%
731 – 1,095 bed nights (2 to 3 years)	16	8%
Greater than 1,095 bed nights (i.e. >3 years)	2	1%
Total	206	100%

Reducing Chronic Homelessness is a Strategic Priority Area in SSHA's Service Plan

Moving forward, targeted approaches are needed to help chronic clients advance towards stable housing

This requires:

- 1. quality data and information to form insights on what to prioritize
- 2. consistency and structure in case management to be able to develop strategies for client engagement
- 3. a better understanding of the supports and services needed to address and improve outcomes

Post-Discharge Supports are Important

> 40% of shelter users discharged to permanent housing

- about 7,075 individuals
- and over 3,200 families (of about 11,050 people)
- approximately 1,200 people (15% of individuals and a few families) have since returned to the shelter system



Post-discharge Supports and Actions are Not Captured in SMIS

- Post-discharge supports are essential for Housing First
- Providers indicate more post-housing follow-up support is needed
- Information on post-housing follow-up supports is seldomly recorded in SMIS

Strengthen SSHA Support for Shelter Providers

- Consistently adopting good practices for case management
- Establishing common screening and assessment criteria
- Collecting data for benchmarking
- Setting expectations for staff to client service ratio
- Improving program monitoring and accountability

Increase SSHA Oversight of Case Management Performance and Outcomes

- Clarifying Standards to:
 - define "best possible outcomes for each client"
 - develop outcome-focused targets for specific client groups
- Addressing system capability to collect system- and program-level data to assess outcomes

3. Improving the Homelessness and Housing Information System

- 1. Identify the kind of information the client needs to provide to be supported in finding shelter.
 - Find ways to appropriately handle and share information (with client consent) to positively impact client outcomes
- Recognize the Shelter Management Information System (SMIS) was not designed to support effective case management
- 3. Quality and reliability of data recorded in SMIS needs improving

Information Sharing: Current Issue



Information Sharing: Ideal



In Summary

- Over 18,100 shelter users discharged to permanent housing between January 1, 2019 and February 28, 2022
- Three main areas for continuous improvement:
 - Keep growing housing options it is an efficient and costeffective use of resources
 - 2. Focus on case management to support clients on their housing journey
 - 3. Modernize the homelessness and housing information system
- Management has agreed with all 12 recommendations

AUDITOR General

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