

Expression of Interest for a Black Mandated Shelter Operator

Opening Application Page

Background

In November 2023, Toronto City Council (“City Council”) adopted the [Homelessness Services Capital Infrastructure Strategy](#) (HSCIS) to proactively inform capital spending decisions to promote recovery and stability in the City of Toronto’s (the “City”) shelter system. The HSCIS aims to ensure new spaces are proactively acquired, thoughtfully designed to enhance safety and dignity, meet the needs of diverse homeless populations, and are well integrated into the surrounding community. More specifically, the HSCIS provides a plan to increase the total number of new long-term and permanent spaces in the base shelter system by up to 1,600 spaces across up to 20 sites between 2024 and 2033 while adding culturally appropriate programs to support Black and Indigenous clients.

Black Mandated Shelter Development

In December 2017, City Council approved the [Toronto Action Plan to Confront Anti-Black Racism](#) to help address the systemic barriers faced by Black people in Toronto and ensure more equitable policies, programs and services. Specifically, recommendation 10 of the Action Plan relates to improving shelter conditions to better support Black Torontonians. The Five-Year Action Plan was the result of a collaborative effort between the City of Toronto and Torontonians of Black and of African descent.

Toronto Shelter and Support Services (TSSS) has committed to ensuring that its homelessness services are accessible and responsive to the needs of all Black individuals experiencing homelessness. The creation of a distinct Expression of Interest (EOI) for a Black mandated operator takes into consideration the distinct needs and experiences of Black clients experiencing homelessness. For the development of the Black mandated EOI, TSSS held engagement sessions with Black serving agencies, Black-led community and grassroots organizations interested in operating a municipal shelter. The feedback from these consultations resulted in key recommendation areas which have informed the design of the operator selection process, including the application form, evaluation framework and other aspects of the EOI.

Through the HSCIS, TSSS is developing at least one Black mandated shelter over the 10-year period of the HSCIS (2024-2033). Once a site is secured, the shelter development process may range from three to five years before the shelter site opens.

TSSS continues to work through its service agency partners within the Knowledge Exchange Table to respond to the unique needs of Black populations experiencing homelessness.

Qualified List

A Qualified List will be developed as part of this HSCIS Black Mandated EOI. This list may be used for future HSCIS sites or for other TSSS’ shelter projects, where applicable. If you receive a passing score for the Application, you will be added to the Qualified List.

Black Mandated Organization Criteria

The City's Toronto Shelter and Support Services (TSSS) division developed this Expression of Interest (EOI) to provide opportunities for **Black Mandated non-profit organizations and groups (also referred to as B3)** across the City to act as a Black Mandated operator.

A Black mandated (B3) organization or group is defined as being Black-led, Black-serving and Black-population focused, and will be assessed based on four key criteria which include:

1. **Black-led:** An organization that is led by a majority (50 percent and over) of paid staff and board members who self-identify as Black or are of African descent.
2. **Black-focused:** An organization that has a mandate that explicitly states that it serves Black communities and is grounded in Black/African-centered approaches across services and programs.
3. **Black-serving:** An organization that primarily serves Toronto's diverse Black communities, including but not limited to African-descendant populations, such as Black Francophones, Afro-Indigenous, Continental African, Caribbean descendant, 2SLGBTQ+, queer and trans, refugee and newcomer populations, and Black youth, seniors, children and families.
4. **Community Accountability and Trust:** Responds to the pervasive and emergent needs of Black populations and continually develops and maintains positive relationships within Black communities being served, and with other Black-mandated organizations and groups.

This definition was developed by Social Development, Finance and Administration (SDFA), in close consultation with community organizations as part of the [Black Mandated Funding Framework](#), and expanded to ensure effective partnership to deliver a Black-focused Toronto shelter site.

To be considered for this EOI stream, applicants must meet the definition of a Black-mandated (B3) organization as described above. Note: If selected to participate in the Due Diligence phase, a Prospective Proponent will be required to upload supporting documentation to verify self-assessment.

Expression of Interest (EOI)

The City's of Toronto Shelter and Support Services (TSSS) division welcomes applications for this EOI from organizations who meet the definition of a Black-mandated organization as described above. Proponents for the current EOI – Black mandated Stream must commit to intaking new/returning clients who self-identify as Black through the City's defined referral processes (e.g., Central Intake, Street to Homes, the Encampment Office). **For more information on a full list of eligibility requirements, please see Section 4.0 - Eligibility Requirements in the EOI Guidelines.**

Black refers to people of African descent who self-identify as Black. Other terms that are used interchangeably with Black are: Black Canadians, African Canadians, and People of African Descent (e.g. Afro-Latinx, Afro-Indigenous, Afro-Caribbean, East African, West African, Southern and Central African, etc.). **For the purposes of this EOI, TSSS uses Black to encompass all the terms above.**

Expression of Interest Timelines

To be considered for this EOI, please complete your Application before the deadline on **11:59 PM on Friday May 30th, 2025**. Applications submitted after this time and date **will not be considered** as part of this EOI. The corresponding EOI Guidelines (“Guidelines”) are designed to ensure that Applications are received through an open process and that applying organizations (“Proponents”) receive fair treatment in the solicitation, receipt, and evaluation of their Applications.

Applications must address the EOI content requirements as outlined and should be detailed, and comprehensive. Clarity of language, adherence to suggested structuring, and adequate levels of detail in your responses are essential to the Evaluation Committee's ability to conduct a thorough evaluation. Only completed and eligible applications will be assessed by the Evaluation Committee.

The Proponent who (1) receives the **highest score** on their application (“Prospective Proponent”) and (2) is deemed the **best match** for this HSCIS Black Mandated site is required to participate in the second stage of the EOI which is a due diligence exercise. This includes but is not limited to a review of financial and organizational health, B3 self-assessment verification, compatibility with Toronto Shelter Standards, among other indicators, prior to being deemed the Successful Proponent for the site.

For more information on this EOI, please visit TSSS's [EOI website](#).

Additional Details

As stated in the Municipal Freedom of Information and Protection of Privacy Act, section 2(2.1) and 2(2.2), information collected on this form/collection/application is considered business identity information. Business identity information could be publicly available and/or disclosed upon if requested unless an exception applies. Please do not include any personal information.

If you have questions about this form or would like accessibility supports, accommodation and/or a different format, please contact TSSS at 416-392-8741 or ShelterEOI@Toronto.ca using your business email. Thank you for your response to this Application.

Application Questions

A) Statements of Understanding Related to Medallia Platform:

Please indicate that you have read and understand the following information regarding the Medallia platform used for the EOI submission.

1. This Application is hosted on the Medallia platform. TSSS strongly encourages that all Proponents store a copy of their responses in a separate document, in the event that there is a technical issue with the Medallia platform and/or your Application. TSSS maintains no responsibility or liability for resources required to re-enter lost information.
 - I understand

2. TSSS recommends that you review the attached PDF copy of the Application before you begin, to ensure that you have all necessary information. Note that you cannot submit your Application via PDF and you must submit via Medallia to be considered eligible.
 - I understand
3. You **will not be able to change your responses** once you have completed your application. If, after completing the Application, you need to make changes to your responses, you will need to create a new Application.
 - I understand
4. If your organization submits multiple Applications, TSSS **will only consider the most recent Application** by default, unless you inform TSSS in writing via email to ShelterEOI@Toronto.ca to consider one of the other Applications instead of the most recent Application.
 - I understand
5. If you **want to leave this Medallia survey and continue later**, you must click the **"pause" button** located at the bottom of each page in this Application (for more information, visit [here](#)). If you click the **"pause"** button, you will be directed to a page that provides you with a custom URL link that will allow you to continue the survey. **Ensure to copy this URL link** and save it in a separate document **BEFORE** closing your browser.
 - I understand
6. If you close your browser or the tab without copying this URL link **you will lose your progress in the survey and all information contained therein. There is no way to recover this information in this case.**
 - I understand
7. If you **use the "back" button** in this application, you will be redirected to the previous screen BUT you will **lose all information that you entered on the current page and subsequent pages.**
 - I understand

B) Questions About Your Organization

Please provide the following information regarding your organization.

If you are applying as a **sole applicant**, you are considered the **lead organization**. A lead organization is defined as an incorporated or unincorporated (**would require trusteeship**) non-profit organization, responsible for leading the operations of the shelter and delivering shelter

services and programs. This organization would be responsible for signing and executing all agreements with the City.

If you are applying as a **collaborative**, this means there is a designated **lead organization** and a **collaborative organization** working in partnership to operate a shelter. A collaborative is defined as a **group of two organizations** where the **lead organization** is responsible for leading the operations of the shelter and delivering shelter services and programs. For more information on the definition of a collaborative, see Section 8.1 in the EOI Guidelines.

As stated in the Municipal Freedom of Information and Protection of Privacy Act, section 2(2.1) and 2(2.2), information collected on this form/collection/application is considered business identity information. Business identity information could be publicly available and/or disclosed upon request unless an exception applies. Please do not include any personal information in your responses.

8. Please enter the information for the **representative/staff** submitting this Application on behalf of the **lead organization**.

Name (First, Last):	
Position Title:	
Business Telephone Number:	
Business Email:	

9. Please enter the following information for the **lead organization**.

Organization Name:	
Legal (Incorporated) Name:	
Street Number and Name:	
Suite/Unit Number:	
City/Town:	
Postal Code:	

10. Please enter the information for the lead organization's **Executive Director**, or equivalent.

Name (First, Last):	
Position Title:	
Business Telephone Number:	
Business Email:	

11. Confirmation that the lead organization's **Board of Directors or equivalent** has **approved the submission** of this Application.

A. Yes, they have approved submission of this Application.

12. The authorized signing authority is the party or parties who will represent the Proponent in all contractual matters requiring a signature. Please enter the information for the **lead**

organization's authorized signing authority/authorities.

Signing Authority 1	
Name (First, Last):	
Position Title:	
Business Telephone Number:	
Business Email:	

Signing Authority 2	
Name (First, Last):	
Position Title:	
Business Telephone Number:	
Business Email:	

13. Confirmation that the **lead organization's authorize signing authority/authorities has approved the submission** of this Application.

- ☐ Yes, they have approved submission of this Application.

14. Confirmation that the **lead organization's Board of Directors or equivalent has approved the submission** of this Application.

- ☐ Yes, they have approved submission of this Application.

15. Please **describe the lead organization's status:**

- ☐ Incorporated non-profit organization with a financial statement that was audited within the last 23 months.
- ☐ Unincorporated association or incorporated non-profit organization applying with a trustee.
- ☐ For-profit organization (Note: If you select this option, you are not eligible for this EOI)

16. Please **attach two years (most recent and consecutive years) of audited financial statements**. Please do not include any personal information in your response.

- Upload File #1
- Upload File #2

Unincorporated associations and/or incorporated non-profit organizations WITHOUT a financial statement that was audited within the last 23 months **MUST apply with a trustee to be considered eligible for this Expression of Interest.**

The following questions (18 – 23) will require the **lead organization** to provide information specifically about the **trustee organization**. Please note a trustee **cannot be a for-profit organization, unincorporated association, municipal organization, or government organization**. A Prospective Proponent should be prepared to provide a commitment letter and/or agreement between the trustee and lead organization at the Due Diligence phase of the EOI.

17. Is your organization **applying with a trustee**?

- ☐ Yes
- ☐ No

18. Please **provide the details of the trustee**. Note that the trustee **MUST** be an incorporated non-profit organization. For profit organizations, unincorporated associations, municipal organizations, or government organizations **cannot** serve as a trustee. Please do not include any personal information in your responses.

Trustee Organization Name:	
Trustee Legal (Incorporated) Name:	
Trustee Street Number and Name:	
Trustee Suite/Unit Number:	
Trustee City/Town:	
Trustee Postal Code:	

19. Please enter the information for the **Trustee's Executive Director or equivalent**.

Name (First, Last):	
Position Title:	
Business Telephone Number:	
Business Email:	

20. Have the following items of your partnership been discussed? **Please note if you select “No” to all the six topics below, you will be deemed ineligible to move forward with your application.**

Conflict resolution process	Yes / No
Clearly defined goals and objectives of the trustee and the lead organization	Yes / No
Clarity around financial responsibilities	Yes / No
Flexibility to adapt to changing circumstances	Yes / No
Open communication	Yes / No
Evaluating the partnership at the end of the fund term	Yes / No

21. Please confirm that your Trustee has agreed to the following responsibilities. **Please note if you select “No to all the four statements below, you will be deemed ineligible to move forward with your application:**

- ☐ Perform administrative functions on behalf of the sponsored organization. (Yes/No)

- Completes progress reports and reconciliations reports by the due dates. (Yes/No)
- Sign contract and comply with all terms and conditions set out in funding agreement. (Yes/No)
- Manage disbursement of funds to lead organization (not-for-profit organization). (Yes/No)

22. Please confirm that the **Trustee's Board of Directors or equivalent has approved the submission** of this Application.

- Yes, they have approved the submission of this Application

23. The authorized signing authority or authorities is the party or parties who will represent the Trustee in all contractual matters requiring a signature. Please enter the **information for the Trustee's authorized signing authority or authorities**.

Signing Authority 1	
Name (First, Last):	
Position Title:	
Business Telephone Number:	
Business Email:	

Signing Authority 2	
Name (First, Last):	
Position Title:	
Business Telephone Number:	
Business Email:	

C) Questions on B3 Eligibility

The questions on this page will further clarify whether you are eligible for this Expression of Interest. To be considered a **Black Mandated organization or group**, you must meet **all four criteria** below. Organizations who respond “**No**” to any of the following questions **will not** be considered eligible for this Expression of Interest. A Black-mandated organization or group (also referred to as a B3) is assessed based on four key criteria outlined in the introduction of the Application. Please note that TSSS will validate your responses to **Questions 24 – 28** if you move to the Due Diligence phase of the EOI.

This definition was developed by Social Development, Finance and Administration (SDFA), in close consultation with community organizations as part of the [Black Mandated Funding Framework](#), and expanded to ensure effective partnership to deliver a Black-focused Toronto shelter site. For more information on eligibility, please see Section 4.0 (Eligibility Requirements) in the EOI Guidelines.

24. Is your organization interested in operating a Black Mandated Shelter?
- Yes, my organization is interested in operating a Black Mandated Shelter
 - No, my organization is not interested in operating a Black Mandated Shelter

Black serving: An organization that primarily serves Toronto's diverse Black communities, including but not limited to African-descendant populations, such as Black Francophones, Afro-Indigenous, Continental African, Caribbean descendant, 2SLGBTQ+, queer and trans, refugee and newcomer populations, and Black youth, seniors, children and families. To be considered Black serving, your organization must select **Yes** to the following statement.

25. More than **51% of services and programs** engage the Black/African diaspora community.
- ☐ Yes
 - ☐ No

Black-led: An organization that is led by a majority (50 percent and over) of paid staff and board members who self-identify as Black or are of African descent. To be considered Black-led, your organization must select **Yes** to the following statement.

26. At least **50% of your organization's leadership** self-identify as Black or of African Diaspora?
- ☐ Yes
 - ☐ No

Black-focused: An organization that has a mandate that explicitly states that it serves Black communities and is grounded in Black/African-centered approaches across services and programs. To be considered Black-mandated, your organization must select **Yes** to the following statement.

27. Does your organization have a mandate that explicitly states that you **serve Black communities and are grounded in Black/African centred approaches** across services and programs?
- ☐ Yes
 - ☐ No

Community Accountability and Trust: Responds to the pervasive and emergent needs of Black populations and continually develops and maintains positive relationships within Black communities being served, and with other Black-mandated organizations and groups.

28. Does your group/organization **respond to the needs of individuals** who self-identify as Black or of African descent and continually **develop and maintain relationships** within the communities and other Black-mandated organizations being served?
- ☐ Yes
 - ☐ No

D) General Questions on Eligibility

The questions on this page will further clarify whether you are eligible for this Expression of Interest. Please note that TSSS will validate your responses to **Questions 29 – 41** if you move to the Due Diligence phase of the EOI. Organizations who respond "No" to any of the following questions (Questions 29 - 38) will not be considered eligible for this EOI.

29. Is your **organization located in the Greater Toronto Area** (Toronto, York Region, Peel Region, Durham Region) and whose **primary activities** take place within boundaries of the Greater Toronto Area?
- ☐ Yes
 - ☐ No

30. Have you reviewed the **TSSS Expression of Interest Guidelines for Black Mandated Operator Selection** in its entirety **AND** do you confirm that your organization can commit to and abide by the service and building delivery expectations outlined therein, where applicable?
- ☐ Yes
 - ☐ No
31. Have you read the “[Toronto Shelter Standards](#)” in its entirety, **AND** do you confirm that your organization can commit to and abide by the service and building delivery expectations outlined therein?
- ☐ Yes
 - ☐ No
32. Have you read the **CABR Directive** in its entirety, **AND** do you confirm that your organization can commit to and abide by the service and building delivery expectations outline therein?
- ☐ Yes
 - ☐ No
33. Have you read the [City of Toronto Human Rights and Anti-Harassment Policy](#) in its entirety, **AND** do you confirm that your organization can commit to and abide by the expectation stated in the document?
- ☐ Yes
 - ☐ No
34. Does your organization **commit to operate a municipal emergency shelter program for at least ten (10) years**, following the execution of an Operating Agreement with the City on an annual basis, if you are selected as the Successful Proponent?
- ☐ Yes
 - ☐ No
35. Does your organization commit to a **referral process for the intaking of clients that includes City-defined referral pathways**, which can include but not limited to the City’s Central Intake, Streets to Homes, and/or Encampment Office?
- ☐ Yes
 - ☐ No
36. Does your organization commit to take all **reasonable measures to accommodate clients accompanied by their pet(s)**, per [section 8.3 \(m\)](#) in the Toronto Shelter Standards, including providing services to people accompanied by a guide dog or service animals as required under the Accessibility for Ontarians with Disabilities Act, 2005?
- ☐ Yes
 - ☐ No

37. If you are the Successful Proponent, do you commit to **paying a minimum of \$53,000 annual or higher to all front-line staff** employed by the municipal emergency shelter program, based on 2024 figures?

Note: TSSS provides the necessary operational funding to ensure staff working at City-funded shelters are paid at this rate, at a minimum. Details will be clarified for the Successful Proponent in the Operating Agreement.

- ☐ Yes
- ☐ No

38. If you are selected as the Successful Proponent, do you commit to the terms that **overhead costs** will be **capped at 10%** of project expenses, not including staffing?

- ☐ Yes
- ☐ No

39. Please confirm the dollar value of your organization's **current annual operational spending**.

40. Please confirm the dollar value of your organization's **current unrestricted reserve fund**.

41. Please attach **a board motion supporting your Application**, where applicable. Please do not include any personal information in the attachment.

- Upload File

E) Collaboratives

TSSS recognizes and supports collaborative arrangements to deliver shelter and homelessness services and programs. A **collaborative** is defined as a **group of two organizations** where the **lead organization** is responsible for leading the operations of the shelter and delivering shelter services and programs. Each organization has specific roles and responsibilities as part of this collaborative. A Prospective Proponent should be prepared to provide a partnership agreement at the Due Diligence phase of the EOI. A collaborative member organization may come from diverse sectors and backgrounds, where relevant. **Note: A collaborative member cannot be a for-profit organization, unincorporated associations, municipal organizations, or government organizations.**

If your service will be delivered in a collaborative model with another organization, please complete **Questions 43 to 46**. Otherwise, click the "Next" button to proceed. **Note: Question 43 to 46 do not factor into scoring for the first stage of the Application.**

42. Is your organization **applying as a collaborative**?

- ☐ Yes
- ☐ No

43. Collaborative organization name

44. Include a brief explanation of why the collaborative was formed and the role of the collaborative organization. Please include details on roles, responsibilities, and contributions.

45. Is the Collaborative Partnership Agreement confirmed or pending?

- ☐ Confirmed
- ☐ Pending

46. **Optional:** Attach Agreement. Please note that if you are the Prospective Proponent, you will be required to provide a collaborative partnership agreement in the Due Diligence phase of the EOI.

- Upload File

E) Service Delivery Interests

The Questions 47 to 48 will be used as part of matching, where applicable and on the condition that your application receives a passing score for the Qualified List. For more information, please see section 7.0 (Evaluation Criteria and Selection Process) in the Expression of Interest Guidelines, available on TSSS's [EOI webpage](#).

47. Please indicate **the location(s) within the Greater Toronto Area that your agency has experience delivering services** (e.g., entire GTA, Downtown Toronto only, Scarborough only, Westhill only, Etobicoke only).

Note: Your response to this question will be used for the purposes of matching your organization and will not factor into scoring.

48. Please indicate the **location(s) within the City of Toronto boundaries in which your organization is willing to provide services** (e.g., entire City, North York only, Scarborough only, Westhill only, Etobicoke only).

Note: Your organization will only be considered for an HSCIS site located in the areas that you have indicated.

F) Questions on Financial and Organizational Health Verification

Your responses to the questions on this page should reflect the lead organization's experience. These questions will be used to score your Application to determine your organization's placement. For more information, please see Section 6.0 (Financial Review) in the Expression of Interest Guidelines, available on TSSS's [EOI website](#).

49. What was your organization's **first year of operation/service**?

50. What is your organization's current **full-time equivalent staffing level** (inclusive of part-time and full-time staff)?

- ☐ 1 – 9 staff
- ☐ 10 – 49 staff
- ☐ 50+ staff
- ☐ Volunteer run (no paid staff)

51. How many **unplanned change(s)/turnover(s) of Senior Leadership** (e.g., executive director, directors, board of directors, general manager) has your organization experienced within the last five (5) years? Please enter "0" if your organization has experienced no unplanned change(s) or turnover(s) within the last five (5) years.

Important note: Both this question and the following question are scored together, where one cumulative score is assigned both questions. Please ensure to provide as much valid information in both questions, as possible, to ensure that your responses are scored appropriately.

52. If applicable, please describe the **reason(s) for the unplanned change(s)/turnover(s)**. Please **do not** include any personal information in your response.

Enter N/A if your organization has not experienced any change(s)/turnover(s) of Senior Leadership within the last five (5) years.

Important Note: Both this question and the previous question are scored together, where one cumulative score is assigned to both questions. Please ensure to provide as much valid information in both questions, as possible to ensure that your responses are scored appropriately.

G) Questions on Current Experience

Your responses to the questions on this page should reflect the **lead organization's experience**, unless otherwise data. Your responses will be used to score your Application to determine your organization's placement on the Qualified List.

Please note that unless specified in the question, links to external supporting documents will not be reviewed by the evaluation committee. The committee will only review content uploaded (if required) or included in the textbook below each question. We do not accept "see above" as an appropriate response for any question in this section.

53. Please describe your **organization's Mission, Vision, and Values**. Please include a link to your most recent Annual Report, if applicable.

54. Please indicate the **total number of years** the **organization** has based on the following statement.

	Less than 1 year of experience	1– 2 years of experience	3-4 years of experience	5+ years of experience
Delivered targeted programs and services for Black individuals experiencing homelessness				

55. As indicated in Question 54, please describe your **organization's experience** in providing **targeted program/services for Black individuals experiencing homelessness**. This should include details on program type, methodology, specialized programming, program model, response to population needs, and outcomes.

56. Please indicate the **total years of experience** the **organization** has in applying an **Anti-Black racism lens** to program and services for Black individuals experiencing homelessness based on the following statement.

	Less than 1 year of experience	1– 2 years of experience	3-4 years of experience	5+ years of experience
Applied an Anti-Black racism lens to programs and services for Black individuals experiencing homelessness				

57. As indicated in Question 56, please identify **policies and/or standards** that address **Anti-Black racism** that the **organization** has implemented.

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58. Please indicate the **total years of experience** the **organization** has in incorporating a **Black/African centered approach** to program and services for Black individuals experiencing homelessness based on the following statement.

	Less than 1 year of experience	1– 2 years of experience	3-4 years of experience	5+ years of experience
Applied a Black/African centered approach to program and services for Black individuals experiencing homelessness				

59. As indicated in Question 58, please describe any **Black/African-centred approaches** such as **practices, frameworks, principles, values and ways of working** that respond to the distinct needs and unique experiences of Black individuals experiencing homelessness.

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60. Please indicate the **total years of experience** the **organization** has been supporting external community initiatives led by other organizations that positively impact Black individuals, extending beyond the homelessness sector.

	Less than 1 year of experience	1– 2 years of experience	3-4 years of experience	5+ years of experience
Supported external community initiatives led by organizations in areas such as but not limited to community development, employment and mental health that positively impact Black individuals. Note: This is not limited to the homelessness sector.				

61. Please describe how your organization **addresses interpersonal and structural Anti-Black racism** experienced by individuals who self identifies as Black or of African descent.

This should include **specific strategies or initiatives the organization** currently has in place to challenge these forms of racism within your policies, practices, and interactions with service users.

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Note: While a lack of experience delivering the following programs/services listed below may not disqualify organizations from the Expression of Interest, this question will be considered in the scoring process. Applicants will be required to provide details on their **plans for capacity development** in any necessary area(s) in **Questions 70 to 74**.

Please note: If you are applying as a **collaborative**, the response to the total number of years operating a municipal and/or provincial shelter by the **lead and collaborative organization** is weighted proportionally, where **one cumulative score** is assigned to both questions.

Please note: If you are applying as a **collaborative**, the response to the description of the **lead and organization's experience** operating a municipal and/or provincial shelter is weighted proportionally, where **one cumulative score** is assigned to both questions.

- 62a. Please indicate the **total years of experience** that the organization has in operating a municipally and/or provincially funded shelter, respite, drop-in and/or mobile crisis supports.

	Less than 1 year of experience	1– 2 years of experience	3-4 years of experience	5+ years of experience
The lead organization has in operating a municipally and/or provincially funded shelter, respite, drop-in and/or mobile crisis supports				

- 62b. Please describe your **collaborative organization** has in operating a municipally and/or provincially funded shelter, respite, drop-in and/or mobile crisis supports. **Please complete this question only if you are applying as a collaborative.**

	Less than 1 year of experience	1– 2 years of experience	3-4 years of experience	5+ years of experience
The collaborative organization has in operating a municipally and/or provincially funded shelter, respite, drop-in and/or mobile crisis supports				

- 63a. Please describe the **lead organization's** experience in operating a municipally and/or provincially funded shelter, respite, drop in, and/or mobile crisis supports. This should include details on program type, methodology, specialized programming, program model, response to population needs, outcomes. Please be as specific and detailed as possible when describing your experiences, but do not include any personal information.

- 63b. Please describe your **collaborative organization's** experience in operating a municipally and/or provincially funded shelter, respite, drop in, and/or mobile crisis supports. This should include details on program type, methodology, specialized programming, program model, response to population needs, outcomes. Please be as specific and detailed as possible when describing your experiences, but do not include any personal information. **Please complete this question only if you are applying as a collaborative.**

64. **Please list the inter-organization planning tables and/or partnership networks (sector- or issue-based) that your organization leads/participates in.** Your response should not include any planning tables/networks that are internal to your organization.

You can skip rows if not applicable. If your organization participates in more than four tables/networks, please only include the four in which you are most heavily involved.

	Name of Planning Table/Partnership Network	Number of Years Participating	Lead Organization for Table/Network
Planning Table/Partnership Network #1			
Planning Table/Partnership Network #2			
Planning Table/Partnership Network #3			

G) Questions on Proposed Shelter Program

Your responses to the questions on this page should reflect the **lead organization's experience**, unless otherwise data. These responses will be used to score your Application to determine your organization's placement on the Qualified List.

Please note that unless specified in the question, links to external supporting documents will not be reviewed by the evaluation committee. The committee will only review content included in the textbook for each question. We do not accept "see above" as an appropriate response for any question in this section.

- 65. Please provide a brief description of your organization's vision for your proposed shelter program for Black individuals and how it addresses the needs for Black individuals experiencing homelessness from an Anti-Black Racism lens.**

Your response should include a proposed population group, any specialized programming and/or services, approaches to service delivery and care, program vision and how you define program success. Ensure that your response includes how the proposed shelter program **improves outcomes** for Black individuals experiencing homelessness. **Note: You must commit to accepting clients being referred through the City's defined referral pathways, including Central Intake, Street to Homes or the Encampment Office.**

- 66. Please provide a detailed overview of the lead organization's proposed program model**, including program priorities, methodology, principles, implementation, and deliverables from an Anti-Black racism lens.

Your response should include a proposed program model, program priorities, methodology, principles, implementation, and deliverables.

- 67. Shelter operators funded through the City of Toronto are required to work closely with the community in which the shelter site is located to maintain positive community**

relationships. This includes proactively engaging with community members especially community members within the Black or African diaspora to foster positive relationships and developing a community engagement policy to respond to community complaints.

Please describe how the **lead organization** will **foster and maintain positive relationships with the surrounding community** (e.g., neighbours, local businesses, community partners, police, hospitals, schools). Your response should include details on why and how you use this approach(es) (e.g., your methodology, principles, implementation, continuous improvement, deliverables) and how you perceive that this approach(es) impacts both clients and the surrounding community. For further reference, please refer to the [Toronto Shelter Standards](#) (TSS).

68. Please describe the **lead organization's approach to the congregation of service users outside your proposed shelter** (e.g., loitering, smoking). Your response should include details on why and how you use this approach(es) and how you perceive that this approach(es) impacts both shelter clients and the surrounding community.

H) Questions on Capacity Development

Applicants with **less than one (1) year of experience operating a shelter program** will not be disqualified from consideration to operate an HSCIS Black Mandated shelter. You are expected to identify **at a minimum one** organizational shelter.

To support your application, you are required to identify at least one organizational mentor to support capacity building in the areas of: (1) shelter operations (2) asset management and/or (3) other areas, as identified. **Organizational mentors are existing shelter operator(s) who can support the lead organization with capacity building.** Organizational mentor(s) can be existing shelter(s), respite(s), 24-hour drop-ins, and/or 24-hour violence against women/intimate partner violence shelter(s) and/or crisis care facilities.

69. Does your organization have **less than one (1) year of experience operating a shelter** and require **an organization mentor/s**? **Note:** An organizational mentor should be an existing shelter operator who can support the lead organization with capacity building.
- ☐ Yes
 - ☐ No

70. Has your organization **identified organizational mentor(s)** to support capacity building? **Note:** You are strongly encouraged to identify organizational mentor(s) as part of your submission to this EOI.

- ☐ Yes
- ☐ No

71. Please enter the following information for the proposed **organizational mentor(s)**.

Organizational Mentor #1	
Organization Name:	
Legal (Incorporated) Name:	
Street Number and Name:	
Suite/Unit Number (enter N/A if not applicable):	
City/Town:	
Postal Code:	

Organizational Mentor #2	
Organization Name:	
Legal (Incorporated) Name:	
Street Number and Name:	
Suite/Unit Number (enter N/A if not applicable):	
City/Town:	
Postal Code:	

72. Please enter the following information for the proposed **organizational mentor(s) Executive Director(s) or equivalent**.

Organizational Mentor #1	
Name (First, Last):	
Position Title:	
Business Telephone Number:	
Business Email:	

Organizational Mentor #2	
Name (First, Last):	
Position Title:	
Business Telephone Number:	
Business Email:	

73. **Confirmation that the proposed organizational mentor(s) organization's Executive Director(s) and Board of Directors, or equivalent has approved the submission of this Application.**

- ☐ Yes, they have approved the submission of this Application.

74. **Please identify a plan for capacity development in the following areas: (1) shelter operations (2) asset management and/or (3) other, please specify. Please see Section 8.1 in the EOI Guidelines for definitions.**

Please attach letter(s) of support from each organizational mentor(s) Board of Directors.

The letter(s) of support should include:

- Confirmation of the capacity to mentor and support the lead organization,
 - Written statement in agreement for the proposed partnership(s),
 - Brief description on the nature of the proposed partnership(s),
 - Overview of how the organizational mentor(s) will support capacity development in the areas of shelter operations and/or asset management, and other areas (please specify),
 - Identified timeline for the proposed partnership(s) between lead organization and organizational mentor(s)
- Upload File (1)
 - Upload File (2)

I) Community Letters of Support (optional section)

75. **Please attach any additional letter(s) of support from community organizations of support for the proposed shelter program.**

- Upload File (1)
- Upload File (2)
- Upload File (3)
- Upload File (4)
- Upload File (5)
- Upload File (6)
- Upload File (7)
- Upload File (8)
- Upload File (9)
- Upload File (10)

Your responses have been registered!

Thank you for your participation in this Expression of Interest for Black Mandated HSCIS Shelter Site. As next steps:

- Please regularly monitor TSSS' [EOI webpage](#) to find updates/addenda regarding this EOI that may be published up until the deadline.
- If you would like a PDF copy of your responses, please contact ShelterEOI@Toronto.ca.
- Once the Evaluation Committee has completed their evaluation of all eligible and complete Applications, they will inform all Proponents with complete and eligible Applications of their outcome, regardless of whether they are the Prospective Proponent or not. Proponents with

incomplete and/or ineligible Applications will not be evaluated and therefore not informed of their outcome.

- If you have any questions, please contact TSSS via email at ShelterEOI@Toronto.ca.