Expression of Interest for a Service User Advisory Group Shelter

Background

On February 11, 2025, Toronto City Council ("City Council") adopted the 2025 Operating and Capital Budget (<u>MPB27.1</u>). The 2025 operating budget for Toronto Shelter and Support Services (TSSS) include a new/enhanced request for \$0.125 million allocated for a Service User Advisory Group.

The Service User Advisory Group will be comprised of people with living/lived experience of homelessness, who will support TSSS with policy development and in improve service delivery. Establishing a Service User Advisory Group is in keeping with City Council directive (<u>CC28.2</u>) to "develop a strategy or continued and meaningful engagement with refugee claimants and refugee-claimant-serving organizations to help and deliver shelter services impacting refugee claimants" and with the <u>TSSS Homelessness</u> <u>Solutions Service Plan</u> and advances key divisional priorities around creating opportunities for meaningfully engaging .

Expression of Interest

This Expression of Interest (EOI) is an opportunity for Toronto based non-profit organizations to apply to support TSSS in establishing and operating a Service User Advisory Group ("the Group"). The Group will engage service users who have experienced homelessness in Toronto, including those living in shelters and/or outdoors, using respites, warming centres, and dropins. The funding allocated for this project is up to \$125,000 annualized. The funding term is until the end of 2025, with the possibility of extension at the City's discretion.

To be considered for this EOI, please submit your completed Application before the deadline on <u>11:59 PM on August 15, 2025</u>. Applications submitted after this time and date will not be considered as part of this EOI.

The corresponding EOI Guidelines are available on <u>TSSS' EOI website</u> and 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 and should be well ordered, 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. For more information on this EOI, please visit TSSS' EOI website.

Business Information Notice

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 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. 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 test to this Application.

Form Number : 23-0294 2025-05

Application Questions

A) Statements of Understanding Related to Medallia Platform:

Please indicate that you have read and understand the following important notes regarding this Application.

* 1. 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. 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: You cannot submit your Application via PDF and you must submit via Medallia to be considered eligible.

○ I understand

* 3. 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.

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 <u>tsssEOl@toronto.ca</u> to consider one of the other Applications instead of the most recent Application.

○ I understand

* 4. 4. 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.

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

* 5. 5. 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) Statement about TGRIP

* 6. 6. As part of your application, you are required to create an Organization Profile in City of Toronto's Toronto Grants, Rebates and Incentives Portal (TGRIP).

I understand

* 7. 7. TSSS will be evaluating the following components of your organization(s)' Organization Profile on TGRIP:

i. Organization Info ii. Service Locations iii. Core Work I understand

C) Questions About Your Organization

Please provide the following information regarding your organization.

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. 8. Please enter the information for the business contact regarding this Application.

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

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

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

* 10. 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. 11. Confirmation that the organization's Executive Director or equivalent has approved the submission of this Application.

• Yes, they have approved submission of this Application.

12. 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 organization's authorized signing authority. Please feel free to skip this section if they are the same individual as the Executive Director, as listed in the previous question.

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

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

• Yes, they have approved submission of this Application.

* 14. 14. Confirmation that the organization's Board of Directors or equivalent has approved the submission of this Application. Please do not include any personal information in the attachment.

Yes, they have approved submission of this Application.

D) Questions on Eligibility for EOI

The questions on this page will further clarify whether you are eligible for this Expression of Interest. **Organizations that respond** with "No" to any of the following questions will not be considered eligible for this Expression of Interest.

* 15. 15. Please confirm that your organization is an incorporated non-profit organization with a financial statement that was audited withing the last 23 months.

- * 16. 16. Do you have a trustee? If yes, please name the trustee. For-profit organizations are not eligible to apply or serve as a trustee.
 - Yes

No

- 17. 16.1. If yes, please specify
- * 18. 17. Have you completed an organizational profile in the City of Toronto's Toronto Grants and Rebates Incentive Portal (TGRIP)?

Yes

	the City of Toronto?					
	○ Yes	○ No				
* 20.	19. Is your organization currently receiving funding from and is	in good standing with the City of Toronto?				
	○ Yes	○ No				
* 21.	21. 20. Have you reviewed the TSSS Expression of Interest Guidelines for the Service User Advisory Group in its entirety AND do you confirm that your organization can commit to and abide by the service delivery expectatio outlined therein, where applicable?					
	○ Yes	○ No				
* 22.	[*] 22. 21. Does your organization have experience operating and supporting advisory groups comprised of people with lived/living experience of homelessness and/or operating peer-led programming?					
	○ Yes	○ No				
* 23.	22. Does your organization commit to taking all reasonable meanisabilities, including those accompanied by service animals a Disabilities Act, 2005?					
	○ Yes	○ No				
E) (Questions on Experience					
* 24.23. Please describe your organization's Mission, Vision, and Values statement. Please include a link to your most recent Annual Report, if applicable. Please do not include any personal information in your response - enter only information relevant to your organization/business/official capacity.						
The response for this question may not exceed 4,000 characters						
* 25.	24. How many total years of experience does your organization programs/services:	have in delivering any of the following				
		Less than 1 year of experience 1-2 years 3-4 years 5+ years or no of of of experience experience experience				
	Peer-led initiatives/programs for people with living and lived experie	ence of				

* 19. 18. Is your organization located in the Toronto and whose primary activities take place within official boundaries of

Peer-led initiatives/programs for people with living and lived experience of		
homelessness		

* 26. 25. Please describe your experience delivering culturally safe, peer led services/programming. Please include information on program objective(s), key outcomes/success, targeted populations (e.g., youth, 2SLGBTQ+, etc.,), where the program was run and community partners, funding, and if the program is still running. Please do not include any personal information in your response - enter only information relevant to your organization/business/official capacity.

The response for this question may not exceed 4,000 characters

* 27.26. The Successful Proponent is expected to onboard staff with skills, capacity and training to support with the successful implementation of the Service User Advisory Group. Please share in the text box below if you plan to hire or assign people with lived experience of homelessness to support the initiative. Organizations that hire or assign this role to a person with lived experience of homelessness will be given higher marks during assessment. Please do not include any personal information in your response - enter only information relevant to your organization/business/official capacity.

The response for this question may not exceed 4,000 characters

* 28.27. What, if any, specialized resources and/or trainings can your organization offer or coordinate for members of the advisory group (e.g., harm reduction training, anti-oppression training, skills building)? Please do not include any personal information in your response - enter only information relevant to your organization/business/official capacity.

The response for this question may not exceed 4,000 characters

F) Evaluation Criteria and Scoring

* 29. 28. The Service User Advisory Group will support in the development and implementation of policies, programs and service delivery improvements in the homelessness service system in Toronto. Please provide a brief description of your organization's vision for the Service User Advisory Group. Your response should include how you define program success. Please do not include any personal information in your response - enter only information relevant to your organization/business/official capacity.

The response for this question may not exceed 4,000 characters

* 30. 30. Please provide an overview of how you would support the Service User Advisory Group advance service user priorities at the policy level. Examples may include providing supports or guidance around developing peer ledresearch, initiatives, or support interventions, identifying key priorities for the group, report writing and presenting. Please do not include any personal information in your response - enter only information relevant to your organization/business/official capacity.

The response for this question may not exceed 4,000 characters

* 31.29. Toronto's homelessness services user population is diverse and comprised of people whose identities sit at multiple intersections (e.g., youth, Black, Indigenous and racialized, 2SLGTQ+, people with disabilities, survivors of gender based and intimate partner violence, newcomers, refugee claimants, etc.). Please describe what strategies your organization will employ to ensure that the Service User Advisory Group reflects this diversity and what supports will be provided to its members to help them succeed in meeting the group's mandate as well as achieve their individual goals. Please do not include any personal information in your response - enter only information relevant to your organization/business/official capacity.

The response for this question may not exceed 4,000 characters

G) Budget

There is up to \$125,000 annualized in funding available for the Service User Advisory Group project in 2025. Using the template provided, please provide us with a proposed budget. Please make sure to include the cost of staffing, equipment and space rental, onboarding and training, and costs to support members participate (i.e. honoraria, refreshments, transportation, childcare). Please do not include any personal information in your response - enter only information relevant to your organization/business/official capacity.

Service User Advisory Group EOI Budget Template.xlsx

* 32. 31. Please upload your budget.

Upload file...

Your responses have been registered!

Thank you for your participation in this Expression of Interest for Service User Advisory Group. 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 tsssEOI@toronto.ca, using your business email.
- The evaluation process will take up to 6 weeks, depending on the volume of Applications, following the Application Deadline. 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 tsssEOI@toronto.ca, using your business email.