

TORONTO SHELTER and SUPPORT SERVICES

DIRECTIVE

Directive No.: 2025-03

Date Issued: December 16, 2025

Authority

This Directive is issued under the authority of the General Manager of Toronto Shelter and Support Services (TSSS).

Subject

Amendments to the Toronto Shelter Standards.

Purpose of Directive

To strengthen client-centered service delivery, enhance privacy and dignity, and improve culturally responsive supports for Indigenous clients across the shelter system. The updated standards introduce new requirements and clarify existing expectations in discharge planning and follow-up supports, hygiene and privacy, and Indigenous cultural practices.

Directive or Required Action

Effective immediately, this Directive amends the Toronto Shelter Standards (TSS) (amendments are in **bold text**).

- 6 (b) (iii), (d)(iv)
- 7 (a)(i) – (iii), (d), (h), (i)
- 8.1 (f) (i), 8.3 (k) (i), 12.6.2 (b) (i)
- 8.6.1 (a), (b) (i), (b) (iii), (b) (iv),
- 9.1.2 (f),
- 9.3 (h),
- 9.3.1 (g),
- 9.3.2 (b) (ii),
- 10.1 (d) (iii)
- 10.1 (l) and (l)(i)
- 10.1. (r) (i), (r) (iii), (r) (v),
- 10.2 (a) (ii), (a) (vii), (a) (viii),
- 10.3.4 (a), (a)(i), (b), (c), (c)(i), (e)(i),

Please note that the numbering of standards outlined throughout Directive 2025-03 reflects all updates to the TSS following the *2022 TSS Administrative Update*.

TORONTO SHELTER and SUPPORT SERVICES

DIRECTIVE

Directive No.: 2025-03

Date Issued: December 16, 2025

Section 6 Client Rights & Responsibilities

- (b) At a minimum, clients have the right to
 - (iii) an environment free from anti-Black racism (e.g., discrimination, prejudice, and harassment) **and/or anti-Indigenous racism**
- (d) Clients will not
 - (iv) engage in racist and/or anti-Black racist behaviour, including using racist and/or anti-Black language (e.g., racial slurs) **and/or anti-Indigenous racism**

Section 7 Compliments, Complaints and Appeals

- (a) Shelter providers will
 - (i) Have a policy and procedures regarding compliments, complaints and appeals, including how compliments and complaints can be made at the shelter level, **how they will be kept confidential and documented**, how complaints **made at the shelter level** will be investigated and resolved

***new standards**

- (a) Shelter providers will
 - (ii) Outline that any client dissatisfied with the resolution of their complaint can escalate their complaint to TSSS for a process review when all other options have been exhausted
 - (iii) Make clear that clients have the right to a fair and clear complaint resolution and appeal process without fear of reprisal, and include a process for anonymous complaints
- (d) Shelter providers must inform clients of this process, post their complaint and appeals process in a conspicuous area of the shelter, inform clients of who the complaint lead is for their location, keep a written record of formal complaints, **including the investigation process** and a written record of the resolution of formal complaints.

TORONTO SHELTER and SUPPORT SERVICES

DIRECTIVE

Directive No.: 2025-03

Date Issued: December 16, 2025

- (h) Shelter providers will provide the contact information for TSSS to any client who
 - (i) Has exhausted a shelter's complaints ~~and appeals~~ process, remains dissatisfied with **how their complaint was addressed**, and who wishes to escalate their complaint **for process review**
 - (i) **Shelter providers will explain the role of the Ombudsman Toronto as the final step in the complaints process once the TSSS process has been exhausted.**
 - (i) Shelter providers will provide the contact information for Ombudsman Toronto to individuals who **have already gone through the shelter provider and TSSS' complaints process and wish to pursue their complaint with Ombudsman Toronto, or as requested by the complainant.**
 - (ii) Providers will provide the contact information for Ombudsman Toronto to individuals who wish to submit a compliment about a TSSS funded respite program, service or responsibility.

Section 8.1 Intake/Assessment (f)(i), Section 8.3 Admission (k)(i) AND Section 12.6.2 Collection of Client Information (b)(i)

Shelter providers will not use immigration status as a basis to deny clients access to shelter services. Immigration status information will not be requested or collected in order to determine service eligibility at intake/assessment or admission process, unless approved by SSHA.

- (i) **Immigration** status will be collected to facilitate suitable shelter placement and supports.

Section 8.6.1 Planned Discharges

- (a) Shelter providers will ensure that discharged clients have a discharge plan in place (e.g., to housing, to treatment, to hospital **and access to follow-up supports**), whenever possible.

TORONTO SHELTER and SUPPORT SERVICES

DIRECTIVE

Directive No.: 2025-03

Date Issued: December 16, 2025

Section 8.6.1 Planned Discharges (b) AND Section 10.1 Case Management and Service Planning (r)

(b) / (r) As part of a client's planned discharge and transition out of a shelter, shelter staff will

- (i) Provide information in writing and assistance to the client regarding resources relevant to the next stage of their service plan, **including follow-up supports and support period**, community services and key personal supports
- (iii) For up to twelve (12) months following discharge from the shelter, and at the request of the client, provide follow-up services or referrals to help support the client's transition to housing, provide crisis support and/or provide eviction prevention activities. These may include:
 - a) **Responding to phone calls**
 - b) **Community resource information**
 - c) **Referrals to community supports**
 - d) **Eviction prevention/ landlord engagement**
 - e) **Crisis support activities**

***new standard**

(b) (iv) / (r)(v) Where possible, staff will record in SMIS (Follow-Up Support Service Program):

- a) Client's discharge plan, including Follow-Up Supports
- b) Updates on provision of or referral to direct follow-up supports for a period of 12 months following discharge
- c) Updated housing outcome twelve (12) months after planned discharge from shelter program.

TORONTO SHELTER and SUPPORT SERVICES

DIRECTIVE

Directive No.: 2025-03

Date Issued: December 16, 2025

Section 9.1.2 Toiletries and Hygiene

***new standard**

- (f) Shelter providers will ensure that safer sex products are always accessible and available to clients, without administrative barriers or having to request them

Section 9.3. Client Privacy and Personal Space

***new standard**

- (h) Shelter providers will accommodate requests by Indigenous clients to use traditional medicines, including when they are practicing ceremony, such as smudging, praying, and/or other traditional practices, in quiet and safe spaces, indoors and outdoors.

Section 9.3.1 Sleeping areas and beds

***new standard**

- (g) If clients are assigned to single or multiple-occupancy rooms, Shelter providers will have procedures outlining how room checks will be completed, including how clients will inform staff of their preferred gender of the staff conducting (a) room check(s). Procedures should outline how shelter providers will ensure that room checks are done by a staff of the requested gender, so long as there are staff on-shift available of the gender requested, and that when completing (a) room check(s), staff will announce themselves, and give time for clients to acknowledge staff before entering, when possible and unless a safety concern is present

Section 9.3.2 Washrooms

- (b) Shelter providers will take all reasonable measures to ensure that clients have privacy while showering.
 - (ii) In locations where privacy is limited, shelter providers **will adopt** reserved shower times for clients who request it or other methods that support client privacy.
 - (iii)

TORONTO SHELTER and SUPPORT SERVICES

DIRECTIVE

Directive No.: 2025-03

Date Issued: December 16, 2025

Section 10.1 Case Management and Service Planning

- (d) An initial assessment of a client may include, but is not limited to identifying, documenting, or updating the following items
 - (iv) Specialized supports for 2SLGBTQ+, Indigenous, senior, **refugee/newcomer** and youth clients
- (l) Shelter providers will ensure that clients are aware of **2SLGBTQ+, Indigenous, Black, senior, refugee/newcomer** and youth specialized supports and services.
 - (i) **Providers who are not able to provide specialized services to 2SLGBTQ+, Indigenous, Black, senior, refugee/newcomer and youth clients will provide appropriate referrals to specialized services and programs if desired by the client.**

Section 10.2 Health and Mental Health Services

- (a) Shelter providers will support clients who seek to address their health and mental health care needs. At a minimum, shelter providers will
 - (ii) Ensure that **2SLGBTQ+, Indigenous, Black, senior, refugee/newcomer and youth clients** are aware of specialized health and mental health supports and services
 - (vii) **Ensure that the proper technological equipment and supports are available to clients for virtual health and mental health care appointments**
 - (viii) **Provide clients with a private space to attend virtual health and mental health care appointments**

TORONTO SHELTER and SUPPORT SERVICES

DIRECTIVE

Directive No.: 2025-03

Date Issued: December 16, 2025

Section 10.3.4 Indigenous Clients

(a) Shelter providers **will have a policy affirming their commitment to and support of reconciliation efforts that** recognizes the unique needs and histories of Indigenous Peoples **and includes clear actions towards truth and reconciliation to best support Indigenous people experiencing homelessness.**

(i) **Clients will be made aware of this policy during orientation and as needed throughout their stay**

(b) Shelter providers will support staff access to awareness and **safety** training around Indigenous cultures and histories **and will seek training from Indigenous organizations to deliver trainings on Indigenous cultural competencies.**

***new standard**

(c) Shelter providers will support Indigenous clients in accessing sacred medicines.

(i) Shelter providers will not confiscate sacred medicines belonging to Indigenous clients.

(e) Shelter providers will ensure that Indigenous clients are aware of Indigenous-specific supports and services.

(i) Shelter providers that are not able to provide services to Indigenous clients will provide appropriate referrals to Indigenous service providers, **which include supporting access to (an)/(a) Elder(s)/Knowledge keeper(s),** if desired by the client.

Resources

- [Toronto Shelter Standards](#)
- [24-Hour Respite Site Standards](#)
- [Homelessness Solutions Service Plan](#)

Contact Information

For more information about this Directive, please contact your Agency Review Officer (ARO) or Manager.