

**Requiring Central Intake for shelter assessment and placement
TSSS Directive 2026-02**

1. What changes are being implemented through TSSS Directive 2026-02?

- Walk-in clients seeking access to bedded emergency shelter services, including at 24-Hour respites and 24-Hour Women's Drop-Ins will be required to contact Central Intake (CI) to gain admission.
- Shelter staff will direct walk-in clients to contact Central Intake, where a caseworker will complete an intake assessment and coordinate an appropriate shelter placement for the client. When appropriate, CI may place the clients at the program where they physically arrived at.
- Shelter staff are expected to support any walk-in clients with accessing CI.

2. Why is this change being introduced?

- Centralizing walk-in referrals supports a consistent and system-level approach to intake and client placement across Toronto's shelter system.
- This process will improve accuracy of shelter capacity and referral activity, support appropriate client matching, and strengthen operational coordination between providers and Central Intake.
- This process will help ensure that clients are matched to the most appropriate available shelter space based on their needs and system-wide capacity.
- A centralized process will also provide Central Intake with a more complete understanding of system-wide demand for shelter services.

3. Will the Toronto Shelter Standards be updated to reflect this change?

- Yes. Related standards in the Toronto Shelter Standards/24-Hour Respite Sites Standards (TSS/TRS) have been revised to reflect the roles and responsibilities of shelter providers and CI under the streamlined shelter access process.
- The updates to the TSS/TRS are included in Directive 2026-02.

4. Are any programs or services excluded from Directive 2026-02?

- Yes. The following programs/processes are excluded:
 - Shelter-to-shelter transfers/referrals
 - Transitional programs
 - Indigenous-led programs, and
 - Inclement weather programs (e.g., Warming Centres and winter respites)

5. What expectations are there of staff when a client arrives at their site requesting a bed/resting space?

- Staff should advise the client that walk-in referrals are coordinated through Central Intake.

- **Shelter staff should provide the client with access to a telephone and support the client in contacting Central Intake, where appropriate.**
 - Central Intake will complete the intake assessment and coordinate an appropriate placement for the client
 - If the client is admitted into the program they've arrived at as a walk-in, shelter staff will proceed in completing an admission for the client.
 - If the client is referred into another program, shelter staff will assist with the facilitation of the referral to another bedded program.
 - If CI is unable to refer the client into a bedded program, shelter staff are to follow internal protocols for when a bed/resting space is unavailable.

6. Can shelter sites still admit walk-in clients directly?

- No. With TSSS Directive 2026-02, all walk-in requests are to be coordinated through Central Intake.

7. What should shelter staff do if a client does not have access to a phone?

- Shelter providers should provide the client with access to a telephone and support the client in contacting Central Intake, where appropriate.
- Staff should continue to support the client throughout the referral process in accordance with local operational practices.

8. What if a client is unable to contact Central Intake independently?

- Where appropriate, shelter staff may assist the client in contacting Central Intake or communicate with Central Intake on the client's behalf with their consent.
- The client's needs and circumstances will continue to be considered throughout the intake and placement process, in alignment with current practices.

9. Can shelter staff recommend to Central Intake that a client be admitted into their program?

- Shelter staff are encouraged to share any relevant client information or operational considerations with Central Intake.
 - Central Intake will consider this information when coordinating an appropriate placement.
 - Final placement decisions will be made by Central Intake.

10. How will Central Intake determine where a client is referred?

- When determining where to place a client, Central Intake will consider:
 - The client's needs and any required supports
 - Program eligibility criteria, including specialized program requirements
 - Accessibility or accommodation needs
 - Available shelter capacity
 - Operational considerations (e.g., upcoming site closure)

11. What if my site has (an) available bed(s)?

- Vacant beds should continue to be reported through established occupancy reporting processes.
- Central Intake will complete an intake assessment to determine the client's needs and match them to an available space that best suits their needs, rather than any space that is simply available.
 - This will help ensure that specialized spaces, such as accessibility rooms, are reserved for clients who require them, rather than these being assigned to clients who do not require the supports provided by these spaces.

12. What if Central Intake experiences longer wait times due to increased call volumes?

- Central Intake has assessed the anticipated operational impact of centralizing walk-in referrals, including on call volumes and staffing requirements.
- Staffing, workload, and service delivery will continue to be monitored as implementation progresses, and adjustments will be made as needed to support timely response times.

13. What happens if no shelter space is immediately available?

- The client will be advised to call Central Intake back after a short period (e.g., a couple of hours) to check whether space has become available.
- Central Intake will continuously monitor shelter availability across the system.
- Shelter providers may continue to offer site-level supports while the client awaits placement. These could include a token for transportation or information on nearby drop-in programs.

14. How will this change impact workload for shelter providers?

- The centralized referral process is intended to reduce the administrative work associated with assessing and coordinating walk-in placements.
- Shelter staff will be able to focus on supporting clients already in their care and delivering on-site shelter services.

15. Who should providers contact if they have questions about the new process?

- Shelter staff can contact their Agency Review Officer with for any follow-up required.