**Community Homelessness Prevention Initiative Review:
Emergency Shelters and Domiciliary Hostels Programs**

A Summary of the Full Analysis Report

February, 2014

The Homelessness Policy and Programs Team
of the Housing Services Division

Background

As part of the implementation of Ontario's Long Term Affordable Housing Strategy (LTAHS) [1] the Province consolidated five programs into a single funding envelope. This new consolidated program is titled the Community Homelessness Prevention Initiative (CHPI) and is comprised of the following programs areas:

1. Emergency Shelters

   Dormitory style facilities that provide sleeping accommodations, meals and case management support. In the shelter, people are provided support to find housing options that meet their needs.

2. Domiciliary Hostels

   Housing with basic care (meals, medication provision and connections to health and mental health supports) to people who need supports to remain housed.

3. Rent Bank

   Emergency grants for tenants facing eviction for non-payment of rent. Households can apply to receive financial assistance.

4. Emergency Energy Fund

   A benefit for tenants who are facing energy related emergencies.

5. Consolidated Homelessness Prevention Program (CHPP)

   A series of programs that help prevent homelessness. These programs include supports to incarcerate men, connecting people experiencing homelessness with supports, transitional housing for youth, tenant education and housing help and hot meals.

6. The Housing Stability Benefit (HSB)

   Around the same time of the consolidation of homelessness programs, the Province announced the end of the Community Start Up and Maintenance Benefit (CSUMB). The City of Hamilton has allocated funding to continue with a similar program called the Housing Stability Benefit.

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[1] For more information on the LTAHS please visit: http://www.mah.gov.on.ca/Page9191.aspx

The new consolidated program (CHPI) is administered by the Ministry of Municipal Affairs and Housing (MMAH) and delivered through the City of Hamilton as the Service Manager.

The vision for CHPI is "a better coordinated and integrated service delivery system that is people-centered, outcome-focused and reflects a Housing First approach to prevent, reduce and address homelessness in communities across Ontario."

CHPI has two program outcomes:

1) People experiencing homelessness obtain and retain housing;
2) People at risk of homelessness remain housed.[2]

The City of Hamilton's CHPI Review

Over the last few years, local planning efforts for housing and homelessness have ushered in new ways of understanding the issues. There is an increased focus on collaboration, an increased commitment to understanding the complex experiences that cause homelessness, a focus on evidence based practice and a desire to see real impacts from programs and investments. These changes have been reflected in previous reports such as Everyone Has a Home, Keys to the Home and the Blueprint for Emergency Shelter Services. More recently, the City released its 10-year Housing and Homelessness Action Plan which will serve as the guide for planning and funding decisions in the future. The CHPI Review is an opportunity to align funding with the principles and strategies developed through the initiatives noted above.

The focus of the CHPI Review includes analysis and recommendations in two main service areas: Emergency Shelters and Domiciliary Hostels. The analysis and recommendations for Emergency Shelters builds on the work of the Blueprint for Emergency Shelter Services and the advice of the Hamilton Emergency Shelter Integration and Coordination Committee, the Women's Housing Planning Collaborative and the Street Youth Planning Collaborative. It also relies on analysis from the Housing and Homelessness Action Plan and environmental scans of comparative communities throughout the province. The analysis and recommendations for the Domiciliary Hostel system builds on the work of Room for Potential – Domiciliary Hostel Program Review (2011).

Through the review process, homelessness prevention has been identified as an area of policy and program development that requires further exploration.   All programs that would be considered homelessness prevention are to be reviewed in 2014.

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[2] For more information and to access the full Program Guidelines for Ontario's Community Homelessness Prevention Initiative (CHPI), please visit: http://www.mah.gov.on.ca/Page9183.aspx

The recommendations in this review were vetted through a set of seven criteria. The seven criteria that were used to make funding and service delivery decisions for the CHPI Review include:

- Use of evidence;
- Person-centredness;
- System stability;
- Homelessness prevention and housing first;
- Strategic alignments;
- Outcomes focused; and
- Fiscal responsibility.

This review seeks to use the experience gained through previous research and planning initiatives, the knowledge gathered through direct consultations and work completed through local planning tables and align the aforementioned principles with the right mix of programs to best meet the provincially mandated outcomes.

A Review of Emergency Shelters

There are currently 326 emergency shelter beds in Hamilton (this does not include the two facilities used for overflow). The following table illustrates the distribution of bed by population served:

Emergency Shelter	Number of Beds	Population Served
Good Shepherd – Men's Centre	54	
Mission Services – Men's Shelter	58	Men
Salvation Army - Booth Centre	82	
Good Shepherd - Mary's Place	26	Women
Good Shepherd - Notre Dame House	26	Youth
Good Shepherd - Family Centre	80	Families

Emergency Shelters in Hamilton have been primarily funded using a per diem model. The per diem model is based on compensating shelters on a per person, per night, per bed basis. The annual municipal budget is based on anticipated usage (using historical data). However, it is important to note that only the Family Centre is funded purely through per diems. The men's, women's and youth shelters operate primarily on the per diem model; however, supplemental block funding has also been provided.

The Homelessness Blueprint: Emergency Shelter Services (2008) specified three main limitations in the men's, women's, youth and family shelters: long shelter stays, insufficient staffing/limited capacity and the challenges that per diem funding model presented to the service providers.

Literature Review on Emergency Shelter Provision

There is consensus in the current literature that homelessness has not been significantly reduced despite much research and attention. According to Segaert, "between 2005 and 2009, at an average of 150,000 individuals [in shelter] a year, there is no evidence that our efforts to address homelessness in Canada have resulted in an overall reduction of the problem. While annual shelter use remained relatively stable over a five year period, the average length of stay has actually increased." [3]

Researchers are responding to this information with a proposed shift in the approach to homelessness beginning with more focus on preventative interventions.

The literature provides some recommendations for the most effective shelter practices in order to continue to improve internal operations and to align with a larger system shift as explained above. The four themes to emerge from the literature include:

- Case Management
- Physical Shelter Environment
- Staffing
- Consumer Choice and Client Participation.

Demographics

The Homeless Individuals and Families Information System (HIFIS) is a system used to collect and report information about shelter usage in Hamilton and is the source for the following demographics.

In 2012, the data indicated that men are disproportionately represented in the gender demographics related to shelter usage; however, the disproportionate number of men's to women's beds (8:1) may not fully reflect need. The literature shows, women tend to exhaust informal and ad-hoc supports before accessing emergency shelter. Also, not included in this ratio are data from local Violence Against Women (VAW) shelters.

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[3] Segaert, A. (2012). The National Shelter Study: Emergency Shelter Use in Canada 2005-2009. Ottawa: Homelessness Partnering Secretariat, Human Resources and Skills Development Canada. Page 12-20.

Adults are disproportionately represented in experiences of homelessness. While comprising approximately 40% [4] of the general population of Hamilton, working age adults make up more nearly 2/3 of people who access shelter. As these are prime income earning years for most people, a focus on housing stability and employment is crucial.

Nearly one quarter (24.5%) of shelter beds are available for non-singles. In 2012, 76.1% of the total number of people staying in shelter reported as single. For those individuals that self-report as single, 88% were male. This is much different than the demographic trends for Hamilton. In 2011, only 43.4% of the population was not married and not living with a common law partner[5]. Economic data is clear; single households report lower incomes than do families.

Data

In 2012 in Hamilton, a total of 3,287 unique individuals stayed at a shelter.

- The majority (70.5%) of individuals stayed in shelter less than 42 nights, with 21.9% staying between 42 to 99 nights, and 7.5% of individuals staying in shelter 100-365 nights of the year;
- The data indicated that 86% of the total number of individuals stayed less than 42 nights per stay at a shelter.

Consultation

Service Providers

Key findings from the consultation with service providers include:

- Participants felt that they were doing a good job of providing basic comforts to people experiencing homelessness;
- Lack of shelter capacity (primarily in terms of staff) was described as the most significant barrier to supporting people to move from shelter into sustainable housing quickly;
- The issue of comprehensive and seamless referrals to other organizations was seen as a challenge (lack of clear process, time and training) concern.

City staff presented service providers with three different types of funding models for emergency shelters.

The table below provides a brief overview of the three models under consideration and some description of potential strengths and weaknesses (from a funder's perspective).

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[4] Statistics Canada, Focus on Geography Series, Hamilton ON, 2011
[5] Statistics Canada, Focus on Geography Series, Hamilton ON, 2011

Funding Model	Per Diem	Block	Block Plus
Description	Payment for every night that a bed in the shelter is occupied by a person. Annual budget based on anticipated usage (using historical data)	Set amount of funding to provide a number of contracted shelter services (including accommodation, food and basic needs, safety and connections to housing and other services). Payments provided at regular intervals, outcomes/ contract compliance are monitored	Similar to Block (set amount) but achievement of outcomes is rewarded or lack of achievement is penalized through additional or removal of funding.
Strengths	Potential for cost savings (when occupancy is low)	Cost certainty	Very innovative funding model
Challenges	Cost uncertainty (Costs can significantly vary based on occupancy)	Determination of adequate block funding may be challenging	Significant initial administrative burden; is the most complex funding model

Persons with Lived Experience

Three focus groups were conducted with 21 individuals with current or previous experiences with homelessness (five youth, ten men and six women). The following describes some of the main themes from the focus groups.

Question 1: What would have helped you move out of shelter and into permanent housing more quickly?

- In all of the focus group participants (men, women and youth) talked primarily about the role of staff in supporting the move from shelter into housing in the form of more workers on site that have more knowledge about housing issues and the housing system.
- Young people talked in particular about the potential helpfulness of using incentives to motivate youth to participate in the beginning stages of housing readiness.
- Men in particular said that having compassionate staff would help them move out more quickly. They have experienced staff who failed to listen to their individualized housing experiences. They spoke of the importance of being treated with dignity and respect.

- The focus group participants in the women's group talked about needing more support from staff. In particular they acknowledged that a lot of stigma exists when looking for housing (coming from a shelter or being on social assistance). While the women understand that staff expect them to be 'independent' in their housing search, they think there is an opportunity for staff to be more supportive and use the 'legitimacy' of their role and agency to help women become housed (by making phone calls on their behalf, accompanying them to see apartments).
- While not necessarily linked to moving out of shelter quickly, the participants did explain that they feel it is important to have transparency and consistency in terms of the rules and how they are applied. The issue of banning and barring people came up as a particular concern given the consequences of having no place to go.

Question 2: What kinds of activities would you like to be involved in to contribute your ideas and feedback to planning in shelters?

- The youth and women both said that no matter what engagement strategies are used it is important that there is a response to their feedback (one idea was to have a bulletin board that provides responses to suggestion box entries) and that action is taken on suggestions.
- All of the focus groups confirmed that the concept of client engagement is important.
- Preferred ideas included: Ongoing Surveys, Exit Interviews, Advisory Councils and Online/Cross Organizational Hub (an online place to get information about supports for women from across the sector).

Recommendations

1. Implement a block funding framework using different costing models for the men's system and the other shelters (youth, women, family) be utilized starting January 1, 2014;

2. The Emergency Shelters will demonstrate client engagement activities and processes in their operations;

3. Emergency shelter providers will undertake an intake and assessment with every client within a specified period of time, followed by client-directed goal setting and case management;

4. The City of Hamilton will engage the Hamilton Emergency Shelter Integration and Coordination Committee, the Women's Housing Planning Collaborative and the Street Youth Planning Collaborative at the beginning of every funding cycle to determine shelter stay targets based on past year's outcomes;

5. The Housing Services Division staff to facilitate learning about early intervention and shelter diversion practices through networking and training events;

6. Each emergency shelter should have a documented and transparent review process for service restrictions should be accessible to clients;

7. The Housing Services Division will ensure the collection of demographic and outcome related fields in the Homeless Individuals and Families Information System collection for all shelters to support continued system planning. The Housing Services Division will support that data collection with training tools.

A Review of Domiciliary Hostels

The Housing Services Division administers Domiciliary Hostel Service Agreements with 57 facilities (as of August 2013). All but two operators identify as a "for-profit" entity. The full system contains 1,124 available beds; however, the City currently subsidizes 940 (or 84% of the total) of these available beds. The remaining occupied beds are paid for entirely by residents.

In 2010, the City of Hamilton hired SHS Consulting to review the City's Domiciliary Hostel Program and provided a series of recommendations. Some of these recommendations included:

- working together to provide clarity around roles and responsibilities;
- working towards common approaches to service delivery;
- increasing funding levels;
- making improvements to the provision of basic needs services;
- increasing access to specialized services;
- formalizing infrastructure;
- improving monitoring, communication and administrative barriers; and,
- opportunities for advocacy and next steps.

The Project Team identified three core challenges in the Domiciliary Hostel system from the Room for Potential Report. The three challenges were chosen because they may be supported through the CHPI Review recommendations. These include changing demographics and needs, lack of information based on infrastructure and inadequate funding.

Literature Review on Domiciliary Hostels

There is little academic research on Domiciliary Hostels themselves; however there is significant literature on housing with supports. Housing with supports is complex given the various models, the many providers and the many funding

agencies and arrangements.   In some ways the Domiciliary Hostel model fits well within the 'supportive housing' component of the definition, given that the supports on site, however; there are some elements to a supporting housing model that do not align with Domiciliary Hostels. For the purposes of this review, Domiciliary Hostels are considered to be part of the housing with supports definition.

Much of the review focused on literature pertaining to residents with mental health issues given that the greatest proportion of people who access Domiciliary Hostels experience mental health issues (at least 40%). A few key themes emerged from the literature review including: the critical perspective around 'recovery' and best practices for provision, Domiciliary Hostels as an option within a continuum, well-trained staff, meaningful quality of life programming, resident engagement in planning, evaluation and data management.

Demographics

This profile relies on data from January 2013 and provides a snapshot of people staying in Domiciliary Hostels at that time.

The majority (66%) of residents are male. This is a significant over-representation given that women make up 51% of the general population in Hamilton and tend to be overrepresented in experiences of physical and mental health disabilities. There is little research to help understand why this overrepresentation may exist. Edge and Wilton (2009) note this gender discrepancy and hypothesize that a perceived lack of safety is the reason[6].

The majority (60.8%) of residents are between the ages of 45-64 years old. This makes sense since younger individuals tend to have additional familial and social support networks and seniors may present with additional complex needs and thus need to access services available through Retirement Homes, Long Term Care Residences, and other types of care.

Domiciliary Hostels also vary by the type of care they provide. It is important to note the strong prevalence of mental health issues as a key factor in many residents' needs across the entire system for supported housing.[7]

Data

There were challenges in accessing and analyzing data from the Domiciliary Hostel system likely due to the absence of a standardized data collection and client tracking system. The data used in this profile was collected in 2011 from the Domiciliary Hostel Program at the City of Hamilton.

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[6] Edge, G., and Wilton, R. (2009). "Reengineering" Residential Care Facilities: A Case Study of Hamilton, Ontario. Canadian Journal of Community Mental Health, 28 (1), 2009

[7] For more information on the Domiciliary Hostel system, please visit: Room For Potential - CS11036(a)

The majority (82.4%) of residents receive their primary source of income from the Ontario Disability Support Program which is consistent with the demographic profile and the needs of people who access Domiciliary Hostels.

Program data shows, on average 774 beds were occupied between January 2010 and May 2013. There were only four incidences when the occupancy rate exceeded 782 beds.

It was also very important to have an understanding of the length of stay of residents. The data shows that the majority (61.9%) of residents have lived in the Domiciliary Hostel system for 5 years or less. A smaller but important group of people accessing Domiciliary Hostels are those who have resided longer than 10 years (21.1%). Overall, the average number of years residents have lived in a Domiciliary Hostel was 5.5 years.

Consultation Results

In May 2013, staff from the Housing Services Division hosted two half-day sessions. The participants included people who live and work in Domiciliary Hostels and representatives of organizations that partner to support residents. The focus of the consultation was to articulate a clear program model for the Domiciliary Hostel system in Hamilton.

The intent of these sessions was to develop a Domiciliary Hostel Program (DHP) Mission Statement, to review a series of objectives for the DHP, and provide advice on potential new activities within those domains. [8] Major themes arising from the consultation included:

1. The DHP is fundamentally a housing program; however, is linked to health;
2. Integrated community supports (both inside and outside the DHP) are the only way providers are going to adequately meet the varied needs of all of residents;
3. The providers and other stakeholders have many creative ideas to improve the DHP in Hamilton.

Recommendations

1. Domiciliary Hostels receive an increase in per diem funding from $47.75 to $48.25 beginning in January 2014 based on the recommendations within the 2011 Domiciliary Hostel Review and an analysis of what was an affordable increase;

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[8] For more information on the progress of implementing the Room for Potential recommendations, please visit: CS10036(c)

2. The Housing Services Division will change its internal budgeting process to more accurately forecast program costs;

3. By 2016, the Housing Services Division plans to implement an electronic standardized tracking system for Domiciliary Hostel reporting. This tracking system will track basic resident demographics and funding information.

Conclusions and Next Steps

The CHPI Review has resulted in research, analysis and recommendations primarily for the Emergency Shelter and Domiciliary Hostel systems.[9] The results set the foundation for additional work particularly on the emerging planning for homelessness prevention.

In late November 2013, these recommendations were presented to the Emergency and Community Services Committee and Council where they were approved. These recommendations are being implemented by the Housing Services Division through 2014.

A new phase of the CHPI review is taking place in 2014. Implementation of results from the next phase of the review is planned for 2015. The scope of the next phase of the review includes: the Housing Stability Benefit, Rent Bank, the Emergency Energy Fund, former Consolidated Homelessness Prevention Program, Food Banks and prevention programming/approaches currently not being funded that align with the goals of CHPI.

For more information on the CHPI review please contact Amanda DiFalco – Manager, Homelessness Policy and Programs with the City of Hamilton at Amanda.DiFalco@hamilton.ca.

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[9] For more information about CHPI and its recommendations, please visit: CS13017(a)