

Housing Focused Sheltering: Thoughts from OrgCode



Shelters are a critical part of the crisis response system, and when operated effectively have a strong housing orientation which have the shortest possible lengths of stay and the least number returns to shelter in the future possible.

It Starts with Figuring Out Who You Want to Shelter

There is need for shelter in a range of population groups: single adults (sometimes men specific, sometimes women specific, sometimes coed); youth; families; domestic violence. Those that are the greatest priority for shelter within each of those population groups should most clearly resemble the same priorities you have set in your community for access to housing programs like Permanent Supportive Housing. It is ridiculous for those individuals and families in shelter to be, say, high functioning, lower acuity folks and the priority for access to Permanent Supportive Housing to be high acuity people with multiple co-occurring, complex issues. If you are not sheltering the most vulnerable in your community – at least as a first priority – your shelter is merely a reflection of a deserving and undeserving poor.

What Do We Know About Shelter Stays?

Whether in the published literature (see Culhane) or grey literature (see Springer & Mars) or the literally dozens of local studies we have been part of, the results are always the same – the overwhelming majority of shelter users (usually around 80%) only use shelter once in their life, and use it for a short period of time (less than 30 days). Another way to look into length of stays is to examine the Annual Homeless Assessment Report (in the United States), which in recent years has shown about 30% of people stay a week or less, 25% stay 8-30 days, and about 35% stay 31 to 180 days.

So, what does this mean? It means that many shelter providers are focused on only 10-20% of all shelter users that are with them for a longer period of time, and tend to inform their opinions and perspectives about shelter users based upon that 10-20% rather than the 80-90% that get out quickly.

Of those that do stay longer in shelter, there is a natural tendency to think that they must be higher acuity with more pronounced needs and profound barriers to housing. While there are absolutely going to be some people in that position in shelter, it would be erroneous to think that everyone is, or that people with higher acuity cannot have short shelter stays. There is no way to actually predict who will stay in shelter longer and who will not. You can have two individuals or families with seemingly identical characteristics and one will be homeless a short period and the other a longer period. In fact, as MaryBeth Shinn's research has demonstrated the only predictive

variable we know to be true is that if a household has been homeless once they are more likely to be homeless again. Longer shelter stays – and we would argue this is especially true for victims of domestic violence and youth, though not exclusively so – may have more to do with the programs and services and policies within a shelter or community, and less to do with the characteristics or acuity of the household itself.

Should Everyone Get Access to Shelter?

In a word, no. This isn't because of unnecessary restrictions, sanctions or arbitrary rules on the part of the shelter provider. It is because people seeking shelter should be diverted to safe and appropriate options whenever possible. We have discussed this in other white papers and in online videos OrgCode has produced, but to rehash again, a shelter is only as good as its ability to shelter only those that have no safe and appropriate alternatives. Diversion is not about saying “no” to service. Diversion is about trying to say “yes” to helping a person with their service needs without requiring shelter entry to meet those needs.

There are nine steps to an effective diversion practice, with each step progressing more deeply into resolving the current housing crisis while concurrently determining if shelter access will be required. For obvious operational reasons, it may not be practical to work through all of the steps if your shelter accepts admissions in the middle of the night. But by and large this should be the approach applied to most households presenting for shelter in most instances.

STEP ONE: Explain the Process

Explanation of the diversion conversation.

“Our goal is to learn more about your specific housing situation right now and what you need so that together we can identify the best possible way to get you a place to stay tonight and to find safe, permanent housing as quickly as possible. That might mean staying in shelter tonight, but we want to avoid that if at all possible. We will work with you to find a more stable alternative if we can.”

What is being established in the opening script is a transparent explanation of what is about to happen for the person that is seeking shelter, understanding this may not be what they wanted to hear. First, we are interested in their housing situation *right now* – not the entire housing history. Second, it emphasizes that the work moving forward is something that will happen *together*. In other words, this is not a situation where a household can drop their housing crisis onto someone else's lap to fix. Third, it focuses on safe, permanent housing, while being clear that if it is possible to avoid a shelter stay to achieve that, then doing so would be most desirable.

STEP TWO: Today's Urgency and Untested Options

Why are you seeking emergency shelter today?

What are all the other things you tried before you sought shelter today?

What are all the other things you have thought about trying but have not attempted yet in order to avoid needing shelter today?

The key element of the first question is emphasis on *today*. Another way of looking at this, and even probing for more information, is why they were not seeking shelter yesterday, and why they are not here tomorrow. In most instances, the diversion worker will learn of a specific conflict or event that has occurred that has brought them to a place of seeking services today. If it is possible to resolve the conflict or address the event before progressing any further, that should be done.

The two other questions are exploratory in nature. In learning what they have already tried, there is an opportunity for the diversion worker to learn what worked and did not work. There is also an opportunity to not suggest things that have already been attempted. The more important of the questions by way of diverting people from shelter is that which they have thought about doing but have not tried yet. In most instances this results in concrete actions that can be attempted at that moment, though taking those actions may require assistance with accessing a phone, counselling/briefing on what they are thinking of attempting, accessing transportation, etc.

STEP THREE: Last Night's Safety

Where did you stay last night?

- a. If staying with someone else, what is the relationship between them and you?
- b. How long have you been staying there?
- c. Where did you stay before that?
- d. Would it be safe for you to stay there again for the next 3-7 days?
- e. (If a couple and/or household with children under 18) Would your whole household be able to return and stay there safely for the next 3-7 days?
- f. If indicate that the place where they stayed is unsafe, ask why it is unsafe.
- g. If cannot stay there safely, or if were staying in a place unfit for human habitation, move to Step Six.

You are trying to ascertain whether the place they are coming from is safe to return to while the household works on a more permanent housing solution. There are discernible differences in the diversion process when the person seeking shelter services has been in a safe, appropriate place for some time versus the person that is bouncing around from one location to another without safety and security.

STEP FOUR: Story Behind the Story (At Last Night's Safe Place)

What is the primary/main reason that you had to leave the place where you stayed last night?

Are there additional reasons why you can't stay there any longer?

Another way of looking at this step is “what is the story behind the story?”, which is intended to enrich the contextual understanding for the diversion worker to figure out a pathway forward.

STEP FIVE: What Would it Take to Stay (At Last Night's Safe Place)

Do you think that you/you and your family could stay there again temporarily if we provide you with some help or referrals to find permanent housing or connect with other services?

If no, why not? What would it take to be able to stay there temporarily?

This is an entry into progressive engagement with diversion. Instead of going “all in” with a solution or even a range of resources, the fundamental question is “What would it take to be able to stay there temporarily?” In other words, the diversion worker is asking the service-seeker what they feel the solution would be rather than, perhaps, providing more resources than are actually required or more intervention than what would be necessary. Importantly, the diversion worker has to be able to take action on the types of “asks” the service-seeker may have, in order to divert them from shelter. For example, if the person identifies that helping out with groceries would make it possible to go back temporarily, the diversion worker has to have the immediate ability to support that, as opposed to having many layers of approval or passage of time to reach accessing the resource.

STEP SIX: New Place to Stay Temporarily

If no, is there somewhere else where you/you and your family could stay temporarily if we provide you with some help or referrals to find permanent housing and access other supports? For example, what about other family members? Friends? Co-workers?

What would it take for you to be able to stay there temporarily?

Again step six is progressive engagement in action. It empowers the service-seeker to identify both other people and the resources that would be necessary to achieve the outcome rather than having finite resource options to suggest or trying to solve the problem for the service-seeker.

STEP SEVEN: Identifying Barriers and Assistance Required

What is making it hard for you to find permanent housing for you/you and your family - or connect to other resources that could help you do that? What do you feel are your barriers? What assistance do you feel you need?

The fact that this step comes later in the diversion process is also progressive engagement in action. Rather than leading with barriers or history in the diversion engagement, we are focused first on action. It is entirely likely that many of the people seeking shelter services can be diverted before ever reaching this step. Rather than trying to prescribe a program or service response, the ball is put into the court of the service-seeker to name the barriers and assistance required.

STEP EIGHT: Current Resources

What resources do you have right now that could help you and your family find a place to stay temporarily or find permanent housing?

The intention of this step is to focus on what the individual or family has rather than what they do not have, in order to progress further into finding a solution that does not rely on the service provider or system of care to solely be the solution to their housing instability. While additional questions can be added to probe for information, this step intentionally does not rely on a series of forms or a particular decision-making matrix in order to dictate how to proceed.

STEP NINE: Housing Planning

If admitted to shelter there is still an expectation that you will be attempting to secure permanent housing for you (and your family). What is your plan at this point for securing housing if you are admitted to shelter?

If the household has a plan in place, terrific. If not, there is an opportunity to engage in solution creation without provision of a one-size fits all solution. It is better that, from the front door of the shelter, there is a focus on having people plan their own exit prior to entry rather than having people come into service and then find the way out. This also is critical for setting up opportunities for self-resolution within shelter.

A Housing-Focused Shelter From Time of Entry: Not an Unpaid Hostel

More than semantics, a shelter is trying to resolve the person's homelessness while meeting their basic needs, not the other way around.

Diversion, as discussed above, ensures that no person or family enters a shelter without having a plan in place – even a rudimentary one – of how they are going to leave shelter, preferably for permanent housing. Related to this, no person should gain entry to shelter without knowing that

it is a housing-focused shelter where there is an expectation that people will be working on permanent housing while in the shelter. Anytime a person or family uses the shelter as an unpaid hostel rather than a shelter it is likely because the expectation of housing was not appropriately communicated at the front end, staff did not reinforce the housing orientation after people were admitted to shelter, or, when people were able to use the shelter as an unpaid hostel but were not asked to leave.

The intake conversation should stress the housing-focused importance, and these same messages should be reiterated repeatedly during the shelter stay. Examples of statements to be made and impressed upon the person or family:

- We appreciate that you are under stress right now. Nonetheless, the shelter is not the solution to your homelessness. It is a safe place to stay while you work on a solution to your homelessness.
- Shelter is short-term while working on housing options. We do not want anyone staying in shelter long-term regardless of circumstances.
- Working on housing options is an expectation of being granted shelter, and should you not actively engage in finding housing, the shelter stay may be revoked.
- Shelter access does not imply or guarantee access to rent-geared-to-income housing of any sort, regardless of length of stay or circumstances.
- You should cast the net of a housing search far and wide – from staying with family/friends to rooms for rent; finding a roommate to low-cost private market housing; from borrowing money from friends or family to afford rent to leveraging whatever savings or assets they may have for the purpose of getting into housing. There is no magic answer or one solution to how you will get out of the shelter and out of homelessness. You need to explore as many options as possible.
- Staff are present to assist with answering questions about housing and motivating you to look for housing, but staff are not responsible for finding you housing. They may provide tips and access to a telephone or computer or apartment listings.
- Staff will become more involved in your housing efforts if you prove incapable of resolving your shelter stay on your own.
- Shelters are not unpaid hostel or temporary housing.
- Shelters are not an appropriate place to wait for the housing subsidy you may want, regardless of whether that is through a Housing Authority.
- The shelter will not automatically kick you out once you reach a certain length of time so long as you are actively pursuing housing options.
- It is expected that when you are in shelter you will spend all or most of the daytime hours pursuing housing options.
- Staff will check in with you regularly to understand your progress in finding housing, as well as help you troubleshoot barriers you may be encountering.

Maintaining a housing-focus in shelter is extremely important for first time shelter users. Assuming you could not divert the person, early the first morning after the first night stay there must be a dedicated conversation between a shelter staff and the guest on what they are doing

that day to start operationalizing their housing plan that was put together in the 9th step of diversion. These intentional conversations should occur every day – sometimes twice per day – for approximately the first two weeks in shelter. With each day, the conversation should shift slightly or introduce additional passive resources into the conversation. This is not about having the same conversation over and over again and expecting different results. The conversation riffs on the theme of accessing permanent housing, but in different directions until a plan comes together that is being put into action and sticks. Examples of themes for conversations and passive resources that could be shared with the person are where to find apartments and rooms for rent, how to impress a landlord, things to be prepared for when filling out a housing application, reuniting with family, and finding a roommate.

There can be a tendency to stray from the housing focus when the person or family has other significant issues in their life. For example, a person may be unwell and seemingly in need to seeing a doctor. Like chewing gum and walking, it is possible to help address immediate needs while maintaining a housing focus. A shelter should never lose sight of housing at the expense of other needs like the health of the individual.

It often comes up, when we teach others about housing-focused shelter, that some people do not seem cognitively capable of engaging in the process of working on housing. There may be some legitimacy to this, but it is necessary that we tease this out a bit further. Because shelters are voluntary and require informed consent to be sheltered, it begs the question of whether there are any instances where shelters are serving people currently that could not legally agree to the service. Shelters are not dumping grounds or systems of last resort. They are the place of first choice for those that want a housing solution. Other systems do not get to pawn off people they have problems with, especially if there are cognitive issues. We are not suggesting that unwell people be automatically turned away from shelter if/when there are cognitive functioning concerns. Instead, we are suggesting they be returned to the systems of care that are *designed* to meet the needs of the population, or that those systems of care – like the mental health care system – be integrated with the shelter intake process when there are concerns about cognitive capacity.

Related to cognitive functioning issues, we also must face facts, as inconvenient as they may be. The truth is, almost everyone with a serious mental illness is housed, not homeless. Almost everyone with a substance use disorder is housed, not homeless. Almost everyone with a brain injury is housed, not homeless. Almost everyone with a developmental delay or with compromised intelligence is housed, not homeless. Perhaps what is necessary for shelter providers is to spend some time better understanding how others in their community with the exact same issues locate and stay housed and then replicate it rather than assuming it is not possible to serve someone with compromised cognitive functioning.

For all population groups, regardless of presenting issues and challenges, housing focused work is often seen as case management while in shelter. It is not. Accessing housing and moving on a pathway to housing is formulaic. It is task driven for the goal of reaching housing. Shelters run the risk of getting distracted into areas of substance use, employment, counselling, life skills

development, spiritual guidance, and the like if they open up the engagement process to all goals a person may have in their life. Avoid this. Keep all engagement, especially those first couple weeks a person or family is in shelter for the first time, focused exclusively on housing to the best of your ability.

Creating Opportunities for Self-Resolving in Shelter

Three things are true (perhaps inconveniently so). The first truth is that analysis of shelter data in community after community demonstrates that the majority of shelter users only use shelter once in their life and generally for shorter periods of time (two weeks or less). The second truth is that for a long part of the history of sheltering there were not programs like Rapid ReHousing, and people by and large were still assisted and able to get out of shelter and into housing. The final truth is that analysis of data in your own community would demonstrate the truths found in every other community: if you are economically poor (including on assistance), live with a mental illness or substance use disorder, or have barriers like being a registered sex offender, having poor credit, or less than ideal tenancy history – you are more likely to be housed than homeless. You are also more likely to be in the private market without any sort of subsidy. You are likely to live in housing that would pass inspection. You are not very likely to be in a situation of overcrowding.

While all of these are true, they are often unknown or discounted, which interferes with the application of progressive engagement and supporting people to self-resolve their homelessness. We need to learn more about how most people are self-resolving within a short period of time and frame that as normal operating procedure for all shelter users. We need to realize that programs like Rapid ReHousing are one tool in our toolbox, not the only tool in the toolbox. We need to stop pathologizing the experience of homelessness, or thinking that we can predict who can get out quickly, and who is going to need a longer period of time or greater assistance to get out of homelessness.

There will undoubtedly be some shelter users with a plethora of co-occurring complex needs, long histories of trauma, and both personal and institutional realities that interfere with quick passage into housing. It is easiest, in these instances, to focus on those with fewer issues or to resign oneself that people with such circumstances will have to be in shelter until a permanent supportive housing opportunity becomes available. That is demeaning and nonsense. Communities need to learn what non-homeless individuals and families with the same needs, histories and realities do to find and stay housed and replicate those strategies. That means boots on the ground intelligence. That means going to lower-income neighborhoods and speaking with tenants about how they figured out their housing needs without being homeless. That means seeing the strengths of the dozens, hundreds or even thousands of people in your community as local community experts that can teach you how to overcome the obstacles that you saw in the people you are sheltering.

Should a person or family remain in the shelter more than a couple weeks it is time to engage more emphatically with allocated staff resources, as possible, to ensure each person or family

has an Individualized Housing Plan. In these plans, there is more engagement with staff to create a series of sequential, strategic steps and check-ins relative to the housing plan. This is also the best time to complete an assessment like the VI-SPDAT after a person has not been able to self-resolve. Based upon the acuity of the person/family, the support focus should become more intentional and customized:

Acuity Level	Moderate & High	Low
Support Focus	<ul style="list-style-type: none"> • Expect longer interactions about once per week, with frequent shorter engagement in between • Be prepared to address clients who relapse in any areas of their search for housing, especially those that are disengaging in the process as a result of frustration • Present new ideas for housing frequently until you find a pathway that sticks • Be explicit on what they are expected to do on their own and what they will be provided assistance with while moving toward housing • Develop strategies to deal with conflict and adversity • Have client engage in their own research about options relative to the service plan • Begin to use visual tools more to show progress in changes • Use active listening & motivational interviewing, with some assertive engagement as necessary 	<ul style="list-style-type: none"> • Expect longer interactions once every two weeks if length of stay exceeds two weeks, with shorter engagement in between • Be explicit on what they are expected to do on their own and what they will be provided assistance with while moving toward housing • Motivational interviewing will be key to evoke change • Maintain/increase use of mainstream resources to resolve situation • Review challenging situations and barriers and ask client to develop strategies to overcome these • Expect client to engage in their own housing research, when motivated to do so

To make this work, staff need to all be housing-focused. Historically we may have thought of shelter staff as doing shelter work and housing staff doing housing work. In many ways, all shelter staff are now housing staff. There is still a role for more specialized housing staff, especially to serve those guests that reach two or more weeks of stay and have higher acuity, but other shelter staff need to be able to handle the housing focused conversations with people in the first two weeks and lower-acuity shelter guests thereafter. The housing-focused work needs to drive the engagement of the staff with the client, not an afterthought.

The 10 Critical Questions Every Shelter Operator and Community Needs to Answer

In our work helping to transform specific shelters throughout North America, we often lead with an exploration of these 10 Critical Questions to help stimulate reflection and improvement in shelter services.

IS SHELTER A PROCESS OR A DESTINATION?

When a shelter operates as a process, it sees its fundamental objective as being part of the process by which people get housed again. When a shelter operates as a destination, it fills up its space with programs that (inadvertently) prolong a shelter stay. You will have a housing focused shelter if you function more as a process and less as a destination.

ARE THOSE THAT ACCESS SHELTER (FOR EXAMPLE, LAST NIGHT) THOSE THAT NEED IT THE MOST OR THOSE THAT ARE LUCKY ENOUGH TO GET IN?

Homelessness has a longitudinal bias – the longer or more times you have been homeless, the better you are at navigating the services like shelter that are designed for people that are homeless. Of all the people that can access shelter, given every community has a finite number of shelter beds, it is incumbent upon the shelter system to ensure beds first go to those that need them the most. This may be determined by things like fragility, vulnerability, depth of need, risks to morbidity, and, risks factors like substance use.

DO YOU TRY TO HEAL OR FIX PEOPLE?

Shelters are shelters. They are not rehab centers. They are not health care facilities. They are not counselling centers. And yet, shelter after shelter, it seems, has gone to great lengths to add more and more programs into the shelter. Part of this may be an attempt to get people “housing ready” (whatever that means) but increasingly we see this as therapeutic incarceration – holding people in shelter longer through program involvement in the hopes of changing who they are so that they are rehabilitated as a person and in a position to accept the responsibilities of housing.

DO YOU PROVIDE A SOCIAL SERVICE OR ARE YOU EXERCISING SOCIAL CONTROL?

Ouch! One of the more difficult aspects of sheltering to honestly assess is whether the design of the shelter and its rules are intended to truly serve people on a pathway to housing or whether the shelter has created a litany of rules and practices that are ultimately designed to exercise social control. In controlling environments, the practices of the shelter in essence communicate, “Change who you are so that we can give you what you need.” Instead of staff being present and engaged with each person, regardless of their presenting issues or behaviour, on a pathway to housing, a social control shelter sees staff ultimately playing more of a policing role – coming up with reasons to not serve a person or bar them from services altogether.

DOES THE BUILT FORM PROMOTE DIGNITY AND REDUCE CONFLICT? IS THE PHYSICAL DESIGN TRAUMA-INFORMED?

Understandably, many shelters in operation were never designed to be shelters – they were a building used for a different purpose (motel, house, industrial space, etc.) that

were converted into a shelter. Pragmatically, this often had to do with price, dealing with NIMBY, expediency of opening, or related reasons. The unfortunate part is that the design of the shelter as a result is one that may be doing more harm to shelter users than you intended – and you may not even know that it was the built form that was doing it!

Within the built form of a shelter, the following are important considerations:

- Avoiding queueing of guests outside the front doors of the shelter, and avoiding large concentrations of people seeking shelter in a holding zone together;
- Avoiding having staff behind plexi-glass partitions or other physical barriers, especially at intake and when guests need to access staff;
- Ensuring lighting is adjustable, and maintaining a softness to the lighting throughout the facility;
- Using neutral colors on walls with matte finishes;
- Avoiding corners with 90 degrees, and instead focusing on rounded edges;
- Making the likes of hygiene supplies easily accessible without requiring staff control of such resources;
- Wide corridors and hallways;
- Providing suitable personal space per person in the sleeping areas;
- Allowing people to access safe storage of their belongings while in shelter with minimal staff intrusion.

DO YOU BELIEVE HOMELESSNESS SHOULD BE INFREQUENT AND SHORT IN DURATION – AND THAT SHELTERS HAVE A ROLE TO PLAY IN MAKING THAT HAPPEN?

This speaks to mission. Related to this are two necessary questions: 1. What problem does the shelter provider think a shelter solves? 2. Why does the provider deliver this service?

A shelter provider that thinks shelters are instrumental to ending homelessness through a housing focus will have one response to these questions. A shelter provider that is focused on, say, rehabilitation or evangelization through ministry is often in a position where they have a separate response to this question. Any shelter provider that does not think homelessness should be short in duration or fails to see their role in that process is unlikely to be effective in being housing focused or in contributing to ending homelessness.

DO YOU RESTRICT SERVICES ONLY IN LIMITED CIRCUMSTANCES? FOR WHAT PURPOSES?

If the intention is to ensure that very vulnerable people, perhaps with myriad behavioural issues, have access to shelter so that they can be housed, it begs the question, “Under which conditions would you restrict, bar, trespass or sanction someone?” Yes, shelters should be safe places where there is not considerable damage to property, theft or violence. But are there any other reasons why you would restrict someone from getting

shelter? And if they cannot stay at your shelter, are you sentencing them to life on the street where they are even more likely to be assaulted, victimized or die?

Then there is the question of purpose of service restriction. Every shelter provider needs to do some soul-searching on this one. Is the intention of removing someone from services punishment? Rehabilitation? Because it is easier for staff or volunteers? If we cannot honestly answer this question in the context of the service restriction, then there is likely to be a disconnect between the delivery of shelter services and housing focus.

IS THERE ANY GROUP OF PERSONS YOU AUTOMATICALLY DISQUALIFY FROM SERVICES?

We are not talking about eligibility criteria here (like a single adult showing up at a family shelter). No, we are talking about an entire subset of people that would be disqualified from even trying to access shelter. For example, some shelters because of their set-up, population groups served or geography cannot shelter someone who is a sex offender. If the sex offender cannot be sheltered within your shelter, where can they get access to shelter? If the answer is “nowhere” then your system of sheltering care has automatically disqualified an entire group of people and sentenced them to life on the street.

To be clear, sex offenders are not the only group routinely disqualified. In some communities, this includes groups like people with mobility issues where there are no accessible shelters, substance users where every shelter requires sobriety at entry, unaccompanied youth when there is no youth-specific shelter, and the like. Ask yourself whether there is any group of persons that have zero access to shelter in your community. Then ask yourself what you are going to do about it. You cannot offer housing-focused shelter services if there are some people that would never have a pathway to housing through shelter.

DO YOU PROVIDE PROFESSIONAL STAFFING WITH THE RIGHT TRAINING?

Even shelters that rely heavily on volunteers need a professional backbone to ensure a fidelity to professional standards, ethics, and housing-focus. The more a shelter practices an approach to being housing-focused, the more important it is that there are professional staff throughout the shelter operation to ensure fidelity to practice.

What are the training requirements required to deliver professional, housing-focused sheltering? While not exhaustive, some of the core competencies one would expect to see in the staff are:

- Housing-focused sheltering
- Tenant and landlord rights
- Documentation
- Harm reduction
- Trauma-informed care

- Strength-based engagement
- Objective-based interactions
- Housing-focused goal setting
- Conflict resolution
- Motivational Interviewing
- Assertive Engagement
- Cultural Competency and Sensitivity
- Mental Health Recovery
- Mental Health First Aid
- Privacy and Confidentiality
- Crisis intervention
- First aid
- Narcan administration and rescue engagement with those that are heavily intoxicated
- De-escalation

DO YOU MEASURE WHAT YOU DO, AND DO YOU MAKE REFINEMENTS BASED UPON AVAILABLE DATA?

Shelters are a business. They may be a not-for-profit business, but they are a business nonetheless. I can think of very few other businesses that do not have a set of key performance metrics that they review internally on a routine basis in order to improve productivity, reduce waste, enhance customer satisfaction, ensure efficiencies, and understand effectiveness. Shelters should be no different. And it should happen internally, not from waiting for a system administrator within the community to tell the shelter how it is performing. If you want to improve HMIS quality and completeness, this is also one of the sure-fire ways of doing it.

In a nutshell, three performance metrics matter the most to housing-focused sheltering:

1. How long are people staying in shelter prior to moving to a permanent solution outside of the shelter? (HINT: the shorter this length of time, the better)
2. How many people within the shelter are moving onto permanent housing solutions? (HINT: track those served through formal programs like Permanent Supportive Housing and Rapid ReHousing, as well as those that self-resolve)
3. How many of the people that found a “permanent” solution out of the shelter returned to shelter? (HINT: the more robust the services in follow-up supports, the less likely this is to occur)

Low Barrier

Low barrier shelter is critical if you want to assist the most acute, vulnerable people in your community access shelter as a pathway to housing. Low barrier sheltering, however, is often misunderstood as an “anything goes” approach to sheltering, filled with chaos in such a way that the delivery of services because unmanageable. Don’t think of low barrier shelter as an absence of rules or expectations. Flip the script and think of low barrier shelter as having just the right

rules and expectations so that those with the longest homeless histories and potentially most disruptive behaviour can be safely and well accommodated within your shelter. Are there any unnecessary barriers that have been introduced into the shelter environment that works against this possibility?

Low barrier shelter is about living radical acceptance. Many organizations make claims to being trauma-informed, non-judgmental, person-centered and strength-based. That is always easiest when a person or family is naturally in compliance with your expectations of what those things mean. A low barrier shelter puts to the test your ability to truly engage from a place of empathy, and to live the values of trauma-informed, non-judgmental, person-centered and strength-based care in practice. Whatsoever you do for the person or family most challenged to access shelter currently, the more you live these values and move closer to being as low barrier as possible.

To deliver a low barrier shelter with a housing-focus, you need to start by examining connectivity to the other parts of the service delivery system, especially street outreach and day services. If outreach or day center staff are working with a vulnerable person that would like access to shelter, ensure that doing so is possible in most instances. You also want to decrease the amount of duplicative data-collection efforts as possible. Better, with consent, to allow for exchange of information from the day service or outreach staff in the shelter intake process rather than the shelter asking for the same information that the outreach or day services staff already have in their possession. A more sophisticated low barrier shelter system would even allow the outreach or day services staff to enroll the person into shelter services without the shelter having to meet with or screen the person first.

Low barrier sheltering requires a careful examination of admission and intake requirements. Is it possible for the intake and admissions staff to go into the community to meet with people when necessary? (If you are not going to let outreach or day services staff to enroll in shelter directly.) If the intake and admission occurs at the shelter, can you give people the option between meeting in a private (usually closed-door space) or a more open-concept space (where you still may find a private corner, but they are not behind a closed door)? Can you reduce the information requirements needed at intake and admission to the bare minimum of what it would take for the person to get access to a bed, rather than using the intake and admission process as an interrogation of their entire homelessness and housing history? Finally, the intake and admission process should be as unobtrusive as possible regarding the person and their possessions. Rather than having staff go through the person's belongings, making them empty all of their pockets, and even go through the likes of security screening and metal detectors, low barrier shelters can try to forego these by offering amnesty totes for people to safely store anything in their possession (drugs, pornography, important documents, clothing, bottle, money, etc.) with an expectation that they do not bring weapons into the facility or engage in any commercial enterprise (including dealing) while in the facility. Amnesty totes are secure, and the person can only access their tote and entry and exit. Staff do not inspect the contents of the tote.

Low barrier shelter benefits from lower staff to client ratios, with highly qualified trained staff. In many communities and their shelters, the role of frontline staff is often entry level and/or low

paid in the homeless service system. To provide low barrier, housing-focused sheltering services this needs a re-think. We need to see some of the most seasoned, experienced experts in the field working the frontline within the shelter and complimented with other more junior staff that all share the passion to see very vulnerable people access both shelter and housing. It can be helpful to move from the “101” trainings on the likes of conflict resolution, harm reduction and mental health recovery, to more in-depth specialized training within a shelter setting.

It can be helpful to think of low barrier shelter as putting the Housing First philosophy into practice in sheltering. In the same way that we would not see someone as “Housing Ready” in Housing First, we need to avoid seeing someone as “Shelter Ready” for housing-focused, low barrier sheltering. At its most rudimentary level, low barrier shelter should provide access to shelter without: requiring people are in compliance with treatment or medication; mandating that people are sober; making people have an income or pay program fees; expecting that people will be nice or engage in arbitrary social norms.

While not required in all instances, a low barrier shelter can be enhanced by making improvements to the built form. One example, is having smaller dormitories with very intentional matching of who shares the room. Another example is providing the amnesty tote as previously discussed, as well as other locked storage. Bicycle racks and shopping cart parking can also be beneficial. Removing arbitrary barriers like plexi-glass windows and having a more open environment can also be advantageous.

In low barrier shelter, you want to ensure staff are visible and proximate. In low barrier shelter it is helpful to have staff journey throughout the space rather than waiting behind a desk and waiting for program participants to come to them. It is also helpful that staff are visible by way of their uniform or other accoutrement (vest, hat, etc.) so that shelter guests can easily identify who the staff are on shift at any point in time.

Surveys have shown that one of the main reason some people do not access shelter is because they cannot bring their pet into the shelter. To be clear, we are not talking about service animals here which would be legally allowed anyway. We are talking about animals that are not service animals. A low barrier shelter tries to resolve this issue by examining ways that pets can be permitted within the shelter environment. This exists along a continuum from bedside crates to designated kennelling areas; from on-site care to off-site boarding; from allowing all types of animals that are pets (lizards, pigs, snakes, ferrets, rats, spiders, etc.) to a more restrictive approach to only allows dogs and cats. A shelter looking to move in this direction does not have to be an expert in animal care. Many shelters have been able to become lower barrier in this regard with the help of animal rescue organizations and their local SPCA or Humane Society, often at little or no cost to the shelter.

A common misconception about low barrier shelters is that they are dirty flophouses – or deteriorate quickly into one if the shelter makes the shift to low barrier. Maintenance and cleanliness are paramount to a high-functioning, accessible, low barrier shelter. It is not uncommon to see increased investment in janitorial services and pest control to ensure that the

reason a person is not entering shelter is fear of bugs (especially bed bugs), poor functioning or dirty toilets, or worries about furnishings and bedding. Low barrier does not mean low standards of building care.

What Programs & Activities Other than Housing Do We Need in Shelter?

If the program is directly housing-focused it is likely a good program to have in the shelter. If it is not *directly* housing-focused, then you run the risk of committing the most heinous of all offences in shelter delivery – therapeutic incarceration. So, what does it mean to be **directly** housing-focused?

A directly housing-focused program, firstly, are one-off sessions instead of multi-session trainings that can take several days or weeks to finish. The one-off sessions make it possible for the person to leave the shelter immediately for shelter rather than feeling they need to go through certain modules or courses to become “housing ready”.

A directly housing-focused program never has a “graduation” to it. They are seminar based as opposed to classroom or curriculum based. For example, you may offer a one-hour seminar on something like, “How to Budget for Your Housing”. That would be quite different than a four-week, once-per-week course on budgeting.

There will be a temptation to deliver the likes of life skills training, thinking it will be a good preparatory training for when the household moves out of the shelter. Avoid this temptation. There is nothing really transferable. Yes, there will be some people that need assistance with life skills. This will be best delivered in the natural setting of where the person is living post-shelter.

There will also be a temptation to deliver employment readiness programs or immediate, menial day labour. Avoid these temptations as well. *If* you are going to deliver an employment related program, go the route of supported employment with immediate employment access. As you go about delivering the supported employment, ensure that the access to employment is not interfering with housing search and access activities. If it is, move this function later in the process to once the person or family gets housed.

Many shelters organize socio-recreational activities on a somewhat regular basis for shelter guests. This ranges from excursions like camping to day trips to the mall; bingo night to card tournaments; movie nights to grilling food in the parking lot. The question the organizers need to ask themselves is, “How does this activity move people closer to housing?” If it does, great. If it does not, then it requires a re-think. For example, bingo night on its own has little to no utility in moving people towards housing. However, if the bingo game started with a 10-minute spiel about housing search, that could be advantageous. (Or one bingo jackpot I heard of this year – free rent for a year – had people lining up to play.)

The shelter should avoid passive spaces and activities like television watching during the day or allowing people access to their bed during the day (unless they are ill or worked overnight). Congregate spaces should be oriented towards housing – bulletin boards with exclusively housing

information and tips on securing housing. Staff should seize daytime opportunities to engage with clients about their housing search and be encouraging them to get out of the shelter to focus on housing acquisition.

Roles of Shelter Staff

In a housing-focused shelter, no staff position is more impacted than overnight staff. Historically these may have been seen as custodians of the facility and maintaining safety through observation overnight. In a housing-focused shelter, overnight staff become critical to the housing mission. First, they should be curating all of the online listings on rental housing they can find within a certain radius every single night. This way, when shelter guests awake they do not need to get online themselves to look for housing – all of the available listings are printed and ready. Second, they should update housing bulletin boards throughout the facility. The only materials that should be posted throughout the facility, with the exception of fire safety and rules/expectations, should be related to the housing acquisition process. The more these are updated and kept visually appealing, the more engagement there will be with the materials in the process of moving towards housing. Third, the overnight staff are responsible for identifying guests that the daytime staff need to be engaged with in the intentional housing conversation when they come on shift.

Morning/daytime staff are instrumental in having the intentional housing conversation with those in the shelter for the first two weeks. They are critical to administering passive housing search materials to those that have been in the shelter two weeks or less. Equally important, it is daytime staff that create the Individualized Housing Plan with those that have exceeded two weeks in shelter and are receiving more staff attention to operationalize their housing plan. Daytime staff should also circulate throughout the facility and engage with any of those that have stayed in shelter, using motivational interviewing and opportunity, to engage in housing conversations.

It is during the daytime that it also makes the most sense to supplement shelter staff with more intensive housing support staff. These staff may or may not be part of a Rapid ReHousing or Permanent Supportive Housing program. These staff play a critical role in connecting longer-term shelter guests to Coordinated Entry. These staff also play a critical role in getting those shelter guests that are eligible for Rapid ReHousing or Permanent Supportive Housing document ready so that they are imminently house-able should a vacancy become available in a housing program in the community.

When the community is highly focused on diversion (as they should be) and the diversion is delivered at the shelter level rather than a coordinated shelter entry level, it is best that these staff be available from approximately noon until 8pm, seven days per week. With this dedicated position, daytime staff are not consumed with trying to do diversion while also trying to undertake all of the other tasks within the facility related to housing. These diversion staff may also be called upon to manage the new intake and admissions process for new shelter guests.

Afternoon/evening staff are best equipped to have brief conversations following up on the housing search process that occurred during the day, especially those that have been in shelter less than two weeks and those with tasks in an Individualized Housing Plan. Afternoon/evening staff are also well positioned to undertake the VI-SPDAT that have stayed for more than two weeks, and the full SPDAT as time allows. The evening staff can also start the creation of the Individualized Housing Plan for any guest that has stayed beyond the two-week threshold.

In some communities, security staff or police are brought on-site in efforts to improve safety. We believe this is a mistake, especially in a low-barrier, housing-focused shelter. Instead of “policing” shelter guests, we believe that being proximate with well-trained shelter staff improves safety more than dedicated staff roles that are supposed to be in charge of safety. We believe that all staff should be trained in de-escalation, crisis intervention, and conflict resolution. In very rare situations would a police response need to be mobilized to intervene in a particular circumstance.

When administrative, managerial and executive positions are located within the shelter, we believe it is a mistake to hive these off into a separate building, floor, or security controlled wing of the building. Daytime and evening staff will have the opportunity to be more engaged in housing related activities if there are more eyes on the general activities and goings on within the shelter. Furthermore, it increases perceptions of safety and security if guests know that there are more staff on-site. There is a further benefit, where these staff that do not have direct service responsibilities stay anchored in the day to day reality of the shelter operation and see first-hand what the frontline staff are working through each and every day.

Other positions within shelters may not seem to have an obvious connection to housing, but they can and they should. Take, for example, janitorial or custodial staff. They can, in passing, providing an encouraging word related to housing search. Or dietary staff, for example, can ask how the housing search is coming along while someone is accessing food. Unrelenting housing messaging from all staff within the shelter are key to success. Housing is not the responsibility of one shift or one department or one person. Maintaining a housing focus is the responsibility of all staff.

Messaging Matters

Maintaining a housing-focus is enhanced through messaging of such throughout every encounter and corner of the building. Like any other business, the shelter message of focusing on housing should be diverse but unrelenting in trying to reach its customer. It must also be consistent in delivery, unapologetically focused on housing.

The messaging starts with diversion, and where necessary, the admissions and intake process. In words and writing, it must be communicated that it is a housing-focused shelter with expectations that the person/family is working on housing while in the shelter. This messaging can be enhanced through posters or wall displays that exhibit data like the average length of time it takes for a person to exit the shelter for housing, how many people have accessed housing from the shelter year to date, how many people accessed housing from the shelter last year, etc.

When we do shelter evaluation or redesign to become a housing-focused shelter, one of the first things we do is a walk through the facility. We look to see what is posted on doorways, walls, bulletin boards and the like. What we are looking for is consistent messaging related to housing, offered in different ways. What we look to avoid is the “noise” that gets the messaging confused or detracts from the core business of having people move towards housing. For example, there is little to no utility to a housing-focused shelter advertising spaghetti dinners, flu shots, day labour, AA meetings, prayer groups, movie nights, etc. unless there is a **direct** tie in to a housing related activity.

If people hit milestones in their shelter stay, such as reaching the 15th day in shelter or 30th day in shelter or the three-month mark in shelter (to name a few), there must also be consistent messaging. The messaging, while focused on housing, changes as people’s stay increases. We need the messaging to be relentless as it relates to housing. If you avoid the messaging, complacency sets in and the housing-focus is lost.

Messaging also matters to external partners. If you do not define what your shelter is and what it does, others will define it for you. If you do not proclaim loud and proud that you are a professional service focused on helping people get out of homelessness as quickly as possible then look to the likes of hospitals and corrections and police to discharge or drop people off to you, when those individuals or families may not want to work on housing or be in a position health wise where they can work on housing currently. If you do not define yourself as housing-focused, look to some people that experience homelessness in your community to want to use your shelter as de facto housing. If you do not define what you do as housing focused, look to well-intentioned charitable groups, faith groups, service clubs, student groups, and such to want to host charitable events for your shelter guests like Thanksgiving Dinner or Toy Drives at Christmas. Turkeys and toys do not end homelessness.

Some messaging is also implicit, which is why a conscious look at some things that may be taken for granted are necessary. For example, your food services should resemble what a person who is living in poverty would be able to afford and create on their own once they leave the shelter. Food in the shelter should not be better than what a person will have when they are not in shelter. Furnishings should be sturdy and modest, not better than what people will have when they move out. The cable package on the TV, if there is one, should be the most basic of packages resembling the channels someone will get if they are lucky enough to have a TV and be able to afford cable when they get out. In family shelters, the toys, selection of books, gaming system, etc. should resemble what the family will have access to when they leave shelter, not be better than what they will have once they leave. Inadvertently, this implicit messaging can incentivize shelter stays to be longer unless you take a critical look at how these types of amenities may be working against your stated objectives of being housing-focused.

Rules and Expectations

The purpose of rules and expectations is supposed to promote safety and encourage housing acquisition in as short a period as possible. If you look at your existing rules or expectations

through that lens is there anything you would change? Do your rules or expectations help or hinder someone who is really vulnerable from entering your shelter or being able to stay in your shelter while they work on housing? Are your rules and expectations succinct and easily understood? Do your rules/expectations explicitly state your housing-focus?

Rules are enforced. Expectations are socialized. It is our contention that in a housing-focused shelter – especially if you are trying to reach very vulnerable people with multiple co-occurring issues and perhaps disruptive behaviours – that expectations are the better way to go in housing-focused shelters. We have yet to see a shelter that cannot distill what used to be pages of rules into 10 or fewer expectations. When someone does not meet the expectation, staff work with the person to help them meet the expectation rather than creating a power dynamic or conflict for violating a rule (from warnings through to dismissal from shelter).

The most important expectation of them all? That people are expected to be working on achieving a solution to their homelessness as quickly as possible. The entire operation of the shelter is geared towards helping as many people as possible realize that expectation.

The Service Orientation for Housing-Focused Sheltering

Lots can be written about service orientation in homeless services generally and housing-focused sheltering specifically. We are focusing on a handful of the critical elements that are non-negotiable if you want to be a high performing housing-focused shelter.

STRENGTH-BASED

On an individualized basis, you will need to find the personal strengths and resiliencies that each person comes with and empower them to exercise those to the fullest potential. For first time shelter users, people need to be empowered to solve their own homelessness using the skills, resources, and experiences they have at their disposal. For those that stay beyond two weeks in shelter, you will need to dig deeper through engagement with the person to find their motivation to change and leverage that motivation as a strength in the pursuit of housing.

The longer a person stays in shelter, or the more behavioural issues a person exhibits, the more inclined you will be – even subconsciously – to see deficits rather than strengths. If you live your empathy intentionally every single day...if you work diligently and deliberately to put yourself into the other person's shoes...if you see the work as a relationship between equals rather than a relationship between healer and wounded – you will be more inclined to find strengths that may not have seemed obvious at first blush. For example, stubbornness can become proof of discernment; avoidance of engagement can be positioned as resiliency in maintaining independence; being argumentative can be viewed as a commitment to personal integrity.

Every person you serve has strengths. Unleashing and harnessing those improves the likelihood of the person staying on a housing-focused pathway.

TRAUMA-INFORMED

Often touted, rarely practiced (well), a shelter that is housing-focused is by virtue more trauma-informed than a shelter that is not housing-focused. A trauma-informed, housing-focused shelter:

- Is transparent that they are housing-focused and builds trust with guests through this transparency;
- Engages in the housing resolution process with guests rather than doing things for them or to them as it relates to housing;
- Establishes clear expectations and consistently reinforces those expectations on a daily basis as they relate to housing;
- Transparently establishes an agenda for each housing-focused conversation, outlining the purpose for the engagement, what will be covered in the engagement, and why the housing process is so important to the person and the shelter;
- Appreciates and embraces that there are historical, cultural and gender impacts on housing search and acquisition;
- Creates a safe environment emotionally and physically through being engaged and proximate rather than stand-offish or passive when it comes to housing;
- Empowers people to make decisions related to their housing search and acquisition;
- Acknowledges that they are more likely to be working with ill people whose health is most likely to improve if they have rapid access to housing;
- Appreciates that problematic substance use is often a direct response to trauma, and as such, does not treat it as a moral failing or lack of willpower, simply part of who the person is, and that such a person can access housing without cessation or abstinence;
- Knows that guests will engage in self-harming behaviour, which can include doing or not doing things against their own self-interest such as missing appointments or viewings of apartments, and continues to work with people to achieve success rather than punishing people for this behaviour;
- Breaks the cycle of “normalcy” that comes with prolonged homelessness, and respects that people have built community amongst others with similar experiences;
- Understands that those with whom they are engaged may not have a positive assessment or value for the future, and therefore, uses a range of skills and tools to help people have a future orientation that includes housing.

HARM REDUCING

Housing-focused shelters need to orient themselves towards working with individuals and family members that may be engaged in higher-risk, exploitive, and/or harmful activities. In particular, the shelter must maintain a housing-focus while working with people that may use substances, engage in sex work, and/or, live with a serious mental illness but do not connect with the mental health system and/or take medications either by choice or

lack of access. The fundamental principle that underlines this engagement is that housing itself is harm reduction in action, and that people are more likely to reduce or cease their involvement in harmful activities if they have the safety and stability of housing.

As it relates to substance use, a housing-focused shelter:

- Reinforces strategies that other people that use substances that are housed employ to stay housed and use;
- Does not restrict access to services because someone is intoxicated;
- Provides safe storage for alcohol and other substances, as well as their rig or other paraphernalia, at time of shelter entry (accepting that people cannot access these while in the shelter);
- Provides direct access to harm reduction supplies and safe disposal for the likes of sharps;
- Engages in housing-focused conversations at different times of day depending on when the person is most lucid and focused;
- Explicitly indicates that the person is welcome at the shelter and does not need to alter their substance use as a condition of focusing on housing access;
- Is trained on how to monitor for overdose, and responds accordingly;
- Reconfigures sleeping spaces as necessary to accommodate safety needs of intoxicated guests.

As it relates to sex work, a housing-focused shelter:

- Avoids moralizing the participation in the activity;
- Is sensitive to co-occurring elements like substance use, which is possible;
- Reinforces strategies that other people that do sex work that are housed employ to stay housed and remain involved in sex work;
- Alters curfew requirements to see sex work through the same lens as any other shelter guest that may have a job that keeps them out past curfew;
- Provides direct access to harm reduction supplies and safe disposal for the likes of used condoms;
- Provides discrete safe storage for money, clothing, toys, condoms, lube, or other equipment that may be used in the delivery of sex work;
- Explicitly indicates that the person is welcome at the shelter and does not need to alter their sex work as a condition of focusing on housing access;
- Considers access to sleeping quarters later in the evening night and a later wake-up time;
- Engages in housing conversations at different times of the day than other shelter users, based upon when they rise and when they go to work.

As it relates to engaging people with serious mental illness not connected to mental health supports or medications, a housing-focused shelter:

- Ensures staff are trained in Mental Health First Aid and Mental Health Recovery;
- Builds connections with peers and community advocates;

- Explicitly acknowledges and supports a person’s decision to not engage with services, so long as they are not a harm to themselves or others;
- Is well educated in symptoms and engagement strategies for people living with schizophrenia, bipolar disorder, and major depression – three of the most commonly experienced mental illnesses in homeless populations;
- Engage in housing-focused conversations at times of the day or days of the month where the person may be more focused or lucid;
- Explicitly indicates that the person is welcome at the shelter and does not need to be engaged in mental health services and/or take medications as a condition of focusing on housing access;
- Considers alternate sleeping areas or times for sleeping if the person’s sleep cycle does not align to others or if their symptoms cause conflict with others in the shelter;
- Applies a person-centered approach to engagement and task completion as it relates to housing;
- As necessary, resources the person differently with staffing to be more involved in setting up appointments, going to viewings, navigating the application process, etc.

PROXIMATE

Staff should be highly visible and present throughout the shelter. Housing-focused conversations should happen in the most natural setting for the shelter guest. Engagement should be a combination of appointments and impromptu conversations based upon circumstance and opportunity. A housing-focused shelter does not want to have staff hidden away in offices or separated away from the people they have the privilege of serving.

CONFLICT REDUCING

All staff that work in a housing-focused shelter that is low barrier must know how to de-escalate potentially volatile situations, pre-emptively reduce the likelihood of conflict by being proximate, and know how to help guests work through conflict without violence or escalation that may result in being asked to vacate the shelter.

A housing-focused shelter that practices conflict reduction:

- Remains transparent about the housing expectations of sheltering;
- Appreciates that circumstance and stress, as well as the likes of existing trauma, can impact the emotional response and reactions of guests and does not punish guests for having those responses and reactions;
- Views housing as a pathway to conflict reduction, as a strategy of removing people from situations that would otherwise be conflict inducing.

Conclusion

Housing-focused sheltering does not happen by accident. Through a deliberate process of becoming lower-barrier, repositioning expectations, and looking at staff roles differently, you can increase the likelihood of people self-resolving their homelessness, and putting your time and efforts towards those individuals and families that will need you the most to resolve their homelessness. Along the way, you will need to examine the training for your staff, why and for what purpose you take shelter services away from someone, the rules or expectations you put into place, and whether or not your shelter is operating with the best possible service orientation. But if you do all of these things, expect lengths of stay to decrease and housing acquisition to increase – and in many instances this is achieved by using existing resources differently rather than adding a ton of new positions or requiring more funding.