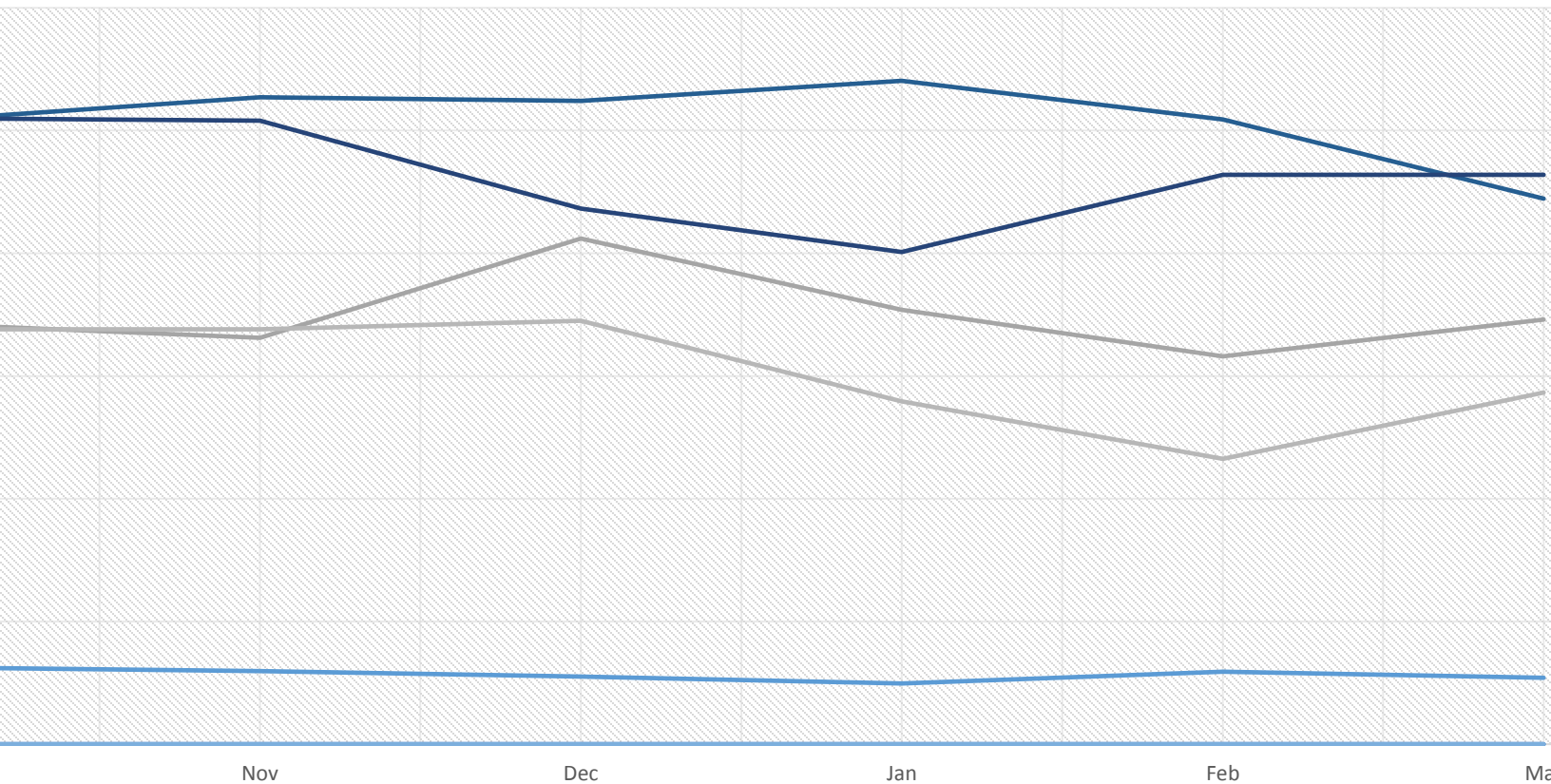


Winter Emergency Response Evaluation Report



Grande Prairie, Alberta
2015-2016

2015-2016 Winter Emergency Response Evaluation Report
City of Grande Prairie, Department of Community Social Development, Homeless Initiatives
Program Period: October 1, 2015 to March 31, 2016

Acknowledgements:

Grande Prairie Friendship Centre
HIV North
Rotary House
Saint Lawrence Centre
Program participants

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Executive Summary

Located in northern Alberta, the City of Grande Prairie is a regional hub for people living and working in communities across Northwestern Alberta and Northeastern British Columbia. Grande Prairie's northern location also means that winter temperatures can drop below 40 degrees Celsius for a number of days at a time, along with high winds and snow fall. Annually, service providers in the City meet to plan a Winter Emergency Response (Winter Response) to ensure there are places for people experiencing homelessness to go during the day prior to shelter beds opening. There is often a cost associated with a Winter Response, and the funding is budgeted through the City of Grande Prairie as a result of provincial Outreach Support Services (OSSS) funding. Grande Prairie's 2015-16 Winter Response included a warming centre attached to the Intox/Mat program at Rotary House, a weekend drop-in program with lunch at the Grande Prairie Friendship Centre, a weekday drop-in program at the Saint Lawrence Centre and as-needed financial and Street Outreach Team support for short-term stays at the Parkside Inn.

An evaluation of Grande Prairie's 2015-16 Winter Response was conducted with two goals in mind: 1) to support program operations throughout the winter by gathering feedback from staff and participants that would be of use to service providers and, 2) to support community decision-making regarding future development and funding of Winter Response programming in Grande Prairie. The following information was collected as part of this evaluation:

- Administrative data from funded programs and Housing First programs
- Financial data from funded programs
- Semi-structured interviews with staff and participants
- Surveys with participants in Rotary House Intox/Mat program
- Document and literature review
- Site visits

Core Evaluation Questions

1. Does the Winter Response contribute towards the longer-term goal of stable housing?
2. To what extent does the Winter Response align with our 5 Year Plan to End Homelessness?
3. How effective is the Winter Response in providing safety from winter weather for the target population?
4. Is there a demonstrated need for a Winter Response, or can resources be redirected to more permanent initiatives?
5. How does Grande Prairie's (the cost of the) Winter Response compare to (the cost of) other winter projects that achieve similar goals?

Data Overview:

7375 visits were made to drop-in programs at **\$15.63 per visit**.

The majority (71%) of visitors to Rotary's warming centre were **males, averaging 41 years old**. However, Rotary staff and visitors reported an increased presence of female visitors.

12 individuals stayed at the Parkside Inn for a total of 99 nights.

Approximately 40% of drop-in visitors identified as Aboriginal; 34% of those housed through Housing First during the winter identified as Aboriginal.

42% of survey respondents reported that Grande Prairie was their home community or that they had been in Grande Prairie for more than 11 years.

12% of visits to Rotary's warming centre were **made by youth** aged 18-24, and less than 1% were made by seniors; 2% of those housed through Housing First during the winter were seniors.

Survey respondents reported being **homeless for a median of 1 year**, with a minimum of 9 days and a maximum of 10 years. 21% of those housed through Housing First were chronically homeless prior to housing.

102 individuals were housed through Housing First during the winter.

Key Themes

Stable Housing

Winter Response programs increased the amount of contact that individuals experiencing homelessness had with trained staff who, in turn, could support them in learning about and accessing community supports, including Housing First. While a formal connection between winter programs and Housing First was not established, the following examples of connection were found during the evaluation:

- 44 referrals were made to Housing First
- connections between Housing First and drop-in programs were observed and mentioned during interviews

Alignment with 5 year Plan

Goal Area 1: Increased Infrastructure

Grande Prairie's Winter Response did not achieve progress toward or infuse funds into increased infrastructure, specifically 24-hour Permanent Supportive Housing. Evaluation findings echoed an identified need in the *Five Year Plan* to address gaps in affordable housing and supports. However, lessons were learned that can inform future plans for increased infrastructure and more effective use of existing infrastructure.

Goal Area 2: Strong, Cohesive, Integrated Community Partnerships

Grande Prairie's Winter Response achieved progress toward goal area 2 by revealing a need for increased communication, working agreements, program guidelines and even grievance procedures between agencies working together on a single initiative. Moving forward, community partnerships can be strengthened, based on lessons from winter 2015-16.

Goal Area 3: Strengthened Community Resources

Grande Prairie's Winter Response achieved progress toward goal area 3 by providing services to participants of the Intox/Mat program, drop-in programs and those who were sleeping rough and connecting with the Street Outreach Team. Specifically, increased connection between Intox/Mat participants and Housing First is a priority need identified in the *Five Year Plan*.

Goal Area 4: Education & Awareness

Grande Prairie's Winter Response helped achieve some progress in goal area 4 by providing new opportunities for individuals experiencing homelessness to have a say in community planning (via evaluation activities). The evaluation revealed a need for increased visibility and education about Housing First, including Prevention & Diversion, for the general public, agency staff, and even program participants.

Comparison with Other Programs: Costs

Through the Winter Response evaluation, it was determined that:

- A warming centre could be operated for significantly less than \$75,000. Conversations with Rotary are needed to determine program structure and funding for the upcoming winter.

- The Saint Lawrence Centre drop-in program cost the least per visit and offered very hands-on staff support for participants. Factors that helped to reduce costs were a team champion, volunteers, shared programming space with the Salvation Army and no security.
- The Friendship Centre drop-in program filled an important gap in hours and meals. Being a first-year winter program, the community was not fully aware of Centre hours until March. Food and hygiene bags were also distributed as part of the funded Winter Response. These bags were outside the scope of programming typically funded as a Winter Response, and even though they were utilized, hygiene products and food are available through other local organizations as well.

In addition to the program-specific findings above, literature suggests that it is more cost effective to house people or prevent them from becoming homeless, than to respond to homelessness with support services (Gaetz, 2012; OrgCode Consulting Inc, 2015; Shapcott, 2007). In Grande Prairie, this supports a continued focus on Housing First and other housing programs over emergency support services. At minimum, winter services going forward should include a stronger link with housing programs.

Effectiveness and Demonstrated Need

7474 visits were made to Grande Prairie's winter programs during 2015-16, with over 340 different people using the Intox/Mat program and over 200 different people accessing the Saint Lawrence Centre. While some individuals remained unsheltered during the night, the reported number was low. Others who might have been unsheltered were placed at the Parkside Inn with support from the Street Outreach Team. In addition to the full coverage of daytime hours in 2015-16 and supplementary night-time shelter at the Parkside Inn, a factor that influenced the community was successful housing. During winter 2015-16, 102 people were housed through Housing First alone, and another 8 individuals with complex needs were housed in short-term supportive suites at Rotary House.

Key Recommendations:

See pages 25-32 for key recommendations for community issues.

Glossary of Terms

Outreach Support Services Initiative (OSSI): Alberta's seven largest cities receive funding from the Province of Alberta's OSSI grant funding to address homelessness through housing and support services. Approximately \$82.6 million will be provided through this initiative. The end goals of this initiative are outlined in *A Plan for Alberta – Ending Homelessness in 10 years*.

Homelessness Partnering Strategy (HPS): Launched in 2007, the Federal government's HPS is a community-based program aimed at preventing and reducing homelessness. 61 communities across Canada receive support through this strategy. Nearly \$600 million has been allocated to this strategy until 2019.

Community Based Organization (CBO) and Community Entity (CE): A Community Based Organization manages funds from the Province of Alberta's Outreach Support Services Initiative and acts as a backbone organization at a local level. A Community Entity manages funds from the Government of Canada's Homelessness Partnering Strategy and acts as a backbone organization at a local level.

Homeless Initiatives: The City of Grande Prairie, Department of Community Social Development houses the Homeless Initiatives team. This team acts as the local Community Based Organization, which is contracted by the Province of Alberta to manage funding from the Outreach Support Services Initiative. Homeless Initiatives also acts as the local Community Entity, which is contracted by the Federal Government to manage funding from the Homelessness Partnering Strategy.

Community Advisory Board on Homelessness (CABH): CABH provides oversight and advisory for Grande Prairie's Homeless Initiatives. CABH meets regularly and is made up of 6-12 community members including business owners, city councillors and community advocates.

Homelessness Action Team (HAT): HAT meets quarterly to share information and identify gaps in the community needing attention. HAT also forms subcommittees that take on projects such as the Annual Memorial Event, and winter and summer response planning.

Housing First: Housing First is a recovery-oriented approach to ending homelessness that centres on quickly moving people experiencing homelessness into housing with supports.

Centralized Triage & Assessment: A centralized point of entry (phone or walk-in) for individuals and families who are seeking supports to find or maintain safe, appropriate housing. The triage and assessment team uses standardized tools (SPDAT) to assess individuals and families and help make appropriate referrals to local services, including Housing First. The local Centralized Triage & Assessment contract is currently held by the YMCA of Northwestern Alberta.

Service Prioritization Assessment Tool (SPDAT): A standardized assessment tool used by Centralized Triage & Assessment and other Housing First service providers to generate an acuity rating which helps to determine the level of support needed by an individual. The acuity rating generated by the SPDAT can range from zero - 60 for individuals or zero - 80 for families. A SPDAT is also used to assess the degree of change in an individual's acuity over time.

Prevention & Diversion: Individuals and families at risk of homelessness in Grande Prairie can access Prevention & Diversion supports in order to prevent housing loss and/or facilitate a swift return to appropriate and independent housing. Prevention & Diversion supports can include assistance with utility and rental arrears, moving costs and cultural supports. Prevention & Diversion supports are available

through the HPS. The local Prevention & Diversion contract is currently held by Accredited Supportive Living Services.

Rapid Rehousing: Rapid Rehousing teams generally work with individuals who are episodically homeless and score 20-34 (individuals) or 27-53 (families) on the SPDAT acuity scale. In the City of Grande Prairie, many families are housed by the Rapid Rehousing team. Individuals and families with the Rapid Rehousing team generally receive up to 6 months of support before graduating from the Housing First program. The local Rapid Rehousing contract is currently held by Centerpoint Facilitation Inc.

Intensive Case Management (ICM): ICM teams work with individuals who are chronically homeless and score 35+ (individuals) or 53+ (families) on the SPDAT acuity scale. Individuals and families with ICM teams generally receive 9-12 months or more of support before graduating from the Housing First program. The local ICM contract is currently held by the Canadian Mental Health Association.

Permanent Supportive Housing (PSH): PSH teams work with individuals who score 35+ (individuals) or 53+ (families) on the SPDAT acuity scale and have met additional criteria that indicate a need for long-term supports to maintain housing after being supported by a Rapid Rehousing or ICM team for a minimum of 8-12 months. Individuals and families with PSH teams often receive multi-year support from the PSH team to maintain stable housing. Local PSH contracts are currently held by Accredited Supportive Living Services and the YMCA of Northwestern Alberta.

Street Outreach: The Street Outreach team supports individuals experiencing absolute or emergency-sheltered homelessness. The Outreach team also provides auxiliary support to Housing First teams when needed, to help Housing First participants maintain stable housing. Auxiliary supports can include transportation to and from appointments, after-hours check-ins and continuity of service for individuals who have recently been housed after a period of engagement with the Outreach team. The local contract for Street Outreach is currently held by HIV North Society.

Dismissed: A term used to describe the process whereby a participant graduates (successfully finishes) or is dismissed (does not successfully finish) from the case management portion of the Housing First program (HIMD).

2015-16 Winter Emergency Response Overview

Winter Response services in Grande Prairie ensure that those experiencing homelessness have a safe, warm place to go for all hours of the week during the winter months. In preparation for a Winter Response in 2015-16, staff from several agencies convened as members of the Homelessness Action Team (HAT) to discuss ideas for Winter Response programming. After this discussion, three agencies were invited to submit a proposal to the City of Grande Prairie Homeless Initiatives, outlining service enhancements that could be offered during the winter. The following programs were funded for winter 2015-16 by Homeless Initiatives using \$118,156 of provincial Outreach Support Services Initiative (OSSI) dollars:

Rotary House Emergency Shelter

\$75,000 OSSI Funding

Year round: Rotary House provides drop-in space, cots, an Intox/Mat program, transitional and affordable housing. The Intox/Mat program offers individuals who are actively using substances sleeping space, storage space, laundry service and washrooms from 10:00p.m. – 6:00a.m, seven days per week. The Intox/Mat program is funded by the Province of Alberta and by Rotary House.

Winter Enhancements: OSSI funding supported a Warming Centre to operate in conjunction with the Intox/Mat program. Hours of operation were 7:00p.m. – 10:00p.m. and 7:00p.m. – 9:00a.m., Monday to Friday, and 9:00a.m. – 7:00p.m., Saturday and Sunday. The Warming Centre provided the following service enhancements:

- Continued respite from cold after other city drop-ins were closed at 7pm
- Access to free laundry service
- Access to showers and bathrooms
- Opportunities to connect with Rotary House staff
- Snacks, coffee and juice in the evening and morning
- Movies; self-directed activities
- Increased hours of access to the adjoining Intox/Mat program

St. Lawrence Centre: Drop-in Program

\$17,000 OSSI Funding

Year round: The Saint Lawrence Center provides daytime drop-in and respite for Grande Prairie's homeless and street involved, as well as assistance and support for navigating through health and social systems. The Centre has shared space with local organizations including the Salvation Army and Rotary House, and operates with a harm reduction approach. Hours and location vary seasonally. The Saint Lawrence Centre opened in fall of 2016 and received funding for one staff member during winter 2015-16.

Grande Prairie Friendship Centre

\$17,000 OSSI Funding

Year round: The Grande Prairie Friendship Centre offers many programs including Healthy Start for Mom and Me, Pitone Youth, the One Window Resource Centre (drop-in space) and free evening meals.

Winter Enhancements: The Grande Prairie Friendship Centre provided food and hygiene bags twice per month to individuals accessing Friendship Centre programs. The Centre also provided hot lunch and access to the One Window Resource Centre from 10:00a.m. to 4:00p.m, Saturday and Sunday. Food and hygiene bags were intended to support those individuals couch surfing during the winter in low-income homes.

Parkside Inn

\$9,156 OSSI Funding

Homeless Initiatives began funding a Street Outreach Team in September 2015 to provide evening support to individuals on the street as well as those housed through Housing First programs. During the winter it became apparent that some individuals would not be able to access Rotary House cots or Intox/Mats at night, often due to behaviours that endangered self or others. In January, the Street Outreach Team negotiated a reduced rate at the Parkside Inn as a way to mitigate street homelessness due to ineligibility for Rotary House cots or mats. The Outreach Team then made case-by-case decisions with individuals about whether they would be able to access the Parkside Inn for a short-term stay. Rooms contained beds and bathrooms. Individuals staying at the Parkside Inn were assisted by the Outreach Team to maintain their short-term housing. OSSI funding for motel stays was provided by Homeless Initiatives on an as-needed basis.

Related Programs

Rotary House Short-term Supported Suites

Beginning in February 2016 Rotary House, HIV North (Street Outreach Team) and Alberta Health Services collaborated to provide short-term supported housing on the second floor of Rotary House. Four rooms with two beds in each room were set aside for this program and eight people were housed without interruption during the winter. At the end of March 2016 the initiative continued and at the time of this report, the initiative continues to operate and develop. Rotary House and Alberta Health Services are the current project partners.

Similar to the Parkside Inn, the short-term housing program at Rotary House was developed quickly in response to a small group of individuals with significant support and shelter needs that Rotary House was unable to meet with existing programming. This program was not funded or monitored during the winter by Homeless Initiatives, but is mentioned in this report because it comprised an important part of the 2015-16 winter landscape in Grande Prairie.

Transportation

During the winter, the Street Outreach Team began to provide transportation for individuals with disabilities between Rotary House and the Saint Lawrence Centre. Individuals would be picked up from Rotary House at 9:00a.m., when the Warming Centre closed and transported in the HIV North van to the Saint Lawrence Centre. At 7:00p.m., when the Saint Lawrence Centre closed, individuals would be transported back to Rotary House to the Warming Centre. The Street Outreach Team did not provide transportation to or from the Friendship Centre.

During the previous winter, in January 2015, the City of Grande Prairie began to offer a monthly Low Income Transit Access Pass (LITA). A LITA pass provides access to all transit routes and is available at no cost. Anyone in the City can access a LITA pass if they qualify by showing evidence of low income.

Why Evaluate?

Homeless Initiatives funds Housing First teams year-round in Grande Prairie, including Centralized Triage & Assessment, Intensive Case Management and Permanent Supportive Housing. Homeless Initiatives also supports year-round Prevention & Diversion, Rapid Re-housing and Street Outreach Teams. As Grande Prairie works toward ending homelessness using Housing First as the primary method of intervention, the problem of where Winter Response programming fits has arisen. In response to this problem, Homeless Initiatives has produced this evaluation report to aid in answering the difficult question of where to invest funding in future years. This evaluation is also intended to contribute to improvement in community collaboration and in program operations.

Design

Grande Prairie's Winter Response evaluation was collaborative, increasing the value for community stakeholders. Funded agencies were consulted during evaluation design and participated in development of monthly reporting templates. Staff from funded agencies also attended check-in meetings to discuss mid-winter findings and answer questions. At the end of the data-gathering phase, agency staff were invited to discuss their winter program and to provide final feedback on statistics and findings prior to the report being developed. Agencies were welcome to include program participants in this process.

Methodology

Information for this evaluation came from the following:

- Literature review and environmental scan
- Current and historic administrative data from winter programs, provided to Homeless Initiatives in monthly reports from each funded agency
- Eight semi-structured interviews with Team Leads and/or Executive staff from each agency funded to offer winter programs (two with each staff member, n=8)
- Four semi-structured interviews with participants at the Saint Lawrence Centre (n=4)
- Participant surveys at the Rotary House Warming Centre (n=23, 23% response rate)
- Site visits to Rotary House, Saint Lawrence Centre and Grande Prairie Friendship Centre
- Attendance at Outreach (Crime Prevention Collaboration meeting) and Homelessness Action Team meetings during the winter

Refer to Appendix B for further information about methods.

Core Questions

The following questions were approved by Homeless Initiatives, Saint Lawrence Centre, Rotary House and Grande Prairie Friendship Centre:

1. Does Grande Prairie's Winter Response initiative contribute towards the longer-term goal of stable housing?
2. To what extent does Grande Prairie's Winter Response align with our 5 Year Plan to End Homelessness?
3. How effective is the Winter Response in providing safety from winter weather for the target population?
4. Is there a demonstrated need for a Winter Emergency Response, or can resources be redirected to more permanent initiatives?
5. How does Grande Prairie's (the cost of the) Winter Response compare to (the cost of) other winter projects that achieve similar goals?

Limitations

Interviews and surveys were not conducted during October, November or December.

The demographic information provided in administrative data was self-reported in some cases, staff-reported in other cases and not otherwise verified. Some records were incomplete, leading to limited comparisons and conclusions that could be made within/between programs and over time.

Due to the method of recruitment used for interviews it was difficult to ensure that representatives from all relevant demographic groups were included. For example, youth and seniors were not included in interviews. Recruitment was also purposive, rather than random, resulting in possible bias.

Ensuring confidentiality for surveys was difficult given the method of distribution. This could have led to positive bias or to reduced responses.

Individuals are eligible to use the Rotary House Intox/Mat program because they are actively using substances. As a result, the ability of respondents to fully understand the questions and response options on the survey distributed at the Intox/Mat program may have been limited.

The Winter Response dealt with many complex, emerging issues. It was unfeasible, given time and budgetary constraints, to include all of these issues in this evaluation.

Evaluation Findings

Historic Data

Grande Prairie's Winter Response programs have been funded through the Province of Alberta, Department of Human Services Outreach and Support Services Initiative (OSSI) since 2008. Between 2008 and 2016, winter services have varied, including warming centres (drop-in programs), a mobile outreach van, clothing and meal programs and other services. Participating agencies have included the Salvation Army, Rotary House, Oasis, the Grande Prairie Friendship Centre, HIV North/Parkside Inn and the Saint Lawrence Centre.

A summary of Winter Response programming is provided in Table 1 below. Information for 2008-2010 was incomplete and therefore not included.

Table 1: Winter Response Funding 2010-2016

Year	Funded Agency	Funding	Dates of Operation	Total visits	Cost
2010-2011	Salvation Army	\$56,037	Dec 24 - Mar 31	4833	\$11.59/visit
2011-2012	Salvation Army	\$98,504	Nov 15 - Mar 31	5199	\$18.95/visit
2012-2013	Rotary House	\$67,091	Nov 1 - Apr 31	4145	\$16.18/visit
2013-2014	Rotary House	\$50,000	Oct 1 - Mar 31	5404	\$9.25/visit
2014-2015	Rotary House	\$64,200	Oct 1 - Mar 31	6151	\$10.44/visit
2015-2016	4 Programs, including the Parkside Inn	\$117,782	Oct/Jan 1 – Mar 31	7474	\$34.86/visit (including the Parkside Inn) \$15.65/visit (excluding the Parkside Inn)

Looking at 2015-16

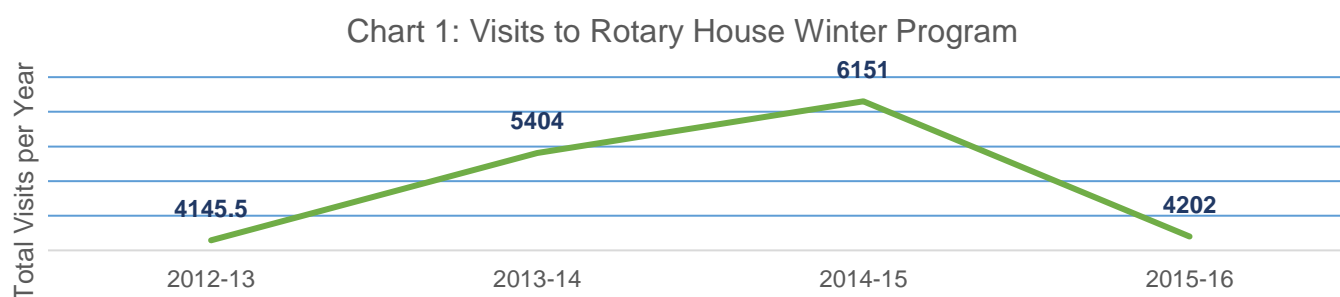
Funding Increase: During 2015-16, Homeless Initiatives funded three locations, covering nearly every day-time hour, seven days of the week, in addition to as-needed stays at the Parkside Inn. During the pre-winter consultation, community agencies had identified a desire for drop-in spaces to be available every day. Community capacity and additional OSSI funds were both factors in the expansion of Homeless Initiative-funded winter services in 2015-16. Between 2008 and 2015, OSSI-funded winter programming was limited to a warming centre and meal services at a single location.

Staff and participant interviewees referenced a difference in the community in comparison to previous years and linked it to the increase in available services:

*"I notice the **mat people aren't as frustrated**. Because we're not outside stuck in the cold. I was so bad last year I could hardly move."* [participant]

*"Years previous ... there was nothing we could ever really do for people. So this year was **really nice to be able to have some options** ..."* [staff]

Rotary House: Chart 1 provides an overview of Rotary House visits between 2011 and 2016. Of note, between 2014-15 and 2015-16 Rotary House saw a 46% drop in Warming Centre visits. The reduction in visits could be linked to a variety of factors including provincial out-migration during 2015-16 (Treasury Board & Finance, 2016), new short-term supportive suites at Rotary or a warm winter.



Housing First: 102 individuals were newly housed through Housing First during winter 2015-16. This is compared to only 49 individuals being housed during winter 2014-15. The difference between the two years is due to an increase in number of individuals/families housed by the Rapid Rehousing team in 15-16. During interviews, agency staff commented on the impact that Housing First had on the community:

*“The year before last on the mats...there were a lot of really cold people all the time. This year it was really nice to see that **a lot of those people were already in homes**, which was really great...” [staff]*

Usage and Costs

In total, 7,474 visits were made to winter programs in 2015-16. A summary of visits, the number of individuals supported and the costs associated with each winter program is available in Table 2. Table 2 also includes numbers from Grande Prairie’s Housing First programs.

Table 2: 2015-16 Winter Visits		Oct	Nov	Dec	Jan	Feb	Mar	Total	Cost
Housing First	Housed	21	12	18	11	17	23	102	n/a
	Exited	1	9	8	9	8	7	42	n/a
Between October 1, 2015 and March 31, 2016, 68 people went from streets, shelters or couch surfing into housing (67% of those housed); 6 people went from housing to the streets, shelters, transitional housing or couch-surfing (14% of those dismissed from the Housing First program).									
Friendship Centre Drop-in/Meals	Individuals				n/a	n/a	n/a	n/a	n/a
	Visits				125	177	248	550	\$22.35
Friendship Centre Food Bag	Individuals				n/a	n/a	n/a	52*	\$68.01
	Food Bags				20	20	25	65	\$54.41
Friendship Centre Hygiene Bag	Individuals				n/a	n/a	n/a	n/a	n/a
	Hygiene Bags				3	22	30	55	\$21.25
Saint Lawrence Centre	Individuals				114	166	176	203	\$83.67
	Visits				725	932	846	2503	\$6.79
Rotary House	Individuals	125	119	110	99	118	108	343	\$217.61
	Visits	684	662	824	708	632	692	4202	\$17.76
Parkside Inn	Individuals							12	\$763.03
	Nights							99	\$92.49
Total (Drop-in programs only)	Visits	684	662	824	1581	1783	1841	7375	\$15.63

*including those in household, staff estimated that 297 individuals were reached.

Rotary House Visits

Factors contributing to the number of visits to Rotary House include:

- Rotary House provides an essential service for individuals experiencing homelessness and is the only shelter in Grande Prairie that serves the general homeless community. As a result of Rotary's status as the only night-time emergency shelter for the general population, program participants do not always have a choice whether or not to access Rotary House supports.
- The Intox/Mat program is the only space available in Grande Prairie for individuals actively using substances to sleep at night at no cost.
- The Warming Centre and Intox/Mat program were open seven days per week.
- The Street Outreach Team provided transportation for individuals with disabilities between Rotary House and the Saint Lawrence Centre.

*"... I wouldn't want to recommend [staying at Rotary House]. But obviously **they would have to go there.**" [participant]*

Friendship Centre Visits

The following factors contributed to the number of visits to the Friendship Centre:

- While the Centre was open for six days of the week, only visits on Saturdays and Sundays were reported (funded hours).
- Visits were recorded using a sign-in sheet, possibly resulting in under-reporting.
- The walk between Rotary House and the Friendship Centre takes 30 minutes to complete, and traverses all of downtown, a hill, a bridge and a busy crosswalk.
- Community members were not aware of the Friendship Centre's weekend hours until later in the winter, evidenced by the jump in numbers for March and by staff and participant feedback during interviews.
- Staff and participants reported that visits to the Friendship Centre largely coincided with meals; Outreach at the Friendship Centre is low-key and hands-off.
- The Street Outreach Team did not provide transportation between the Friendship Centre and other winter programs.

*"... that's a **long walk over there** to the Friendship Center." [participant]*

*"Like you walk in there and **it's a big place**, but they only have one person behind the desk. There's nothing really to do there. They've got a couple of computers. There's **nobody there that is someone to talk to.**" [participant]*

*"I tell them about the Friendship Center. Sundays they are open too now. **I didn't know.**" [participant]*

Saint Lawrence Centre Visits

The following factors contributed to the number of visits at the Saint Lawrence Centre:

- Hours of operation aligned with opening and closing hours at Rotary House.
- The Centre was open five days per week.
- The Saint Lawrence Centre was located inside the Salvation Army, which provides breakfast and lunch five days per week (weekdays) year-round. A food bank and food shelf is also available in the Salvation Army.
- The Saint Lawrence Centre is located downtown, a 15 minute walk from Rotary House and a 1 minute walk from HIV North.

- The Street Outreach Team provided transportation for individuals with mobility issues between Rotary House and the Saint Lawrence Centre.
- Staff and volunteers provided intensive hands-on support to visitors.
- Visitors were able to sleep inside the Centre and access the Centre when they were under the influence of substances.

*“Plus there’s **the Sally Ann just right here** you know what I mean. So you are getting more than just the Saint Lawrence. More than any other place you’re going to go...So **you’re getting double the bonus** I guess.” [participant]*

*“This is **not only a warming centre**, it is a place that if you need help, they will help you any which way they can.” [participant]*

*“The Saint Lawrence is **for the people**. I’ve seen...I’ve noticed a lot of new faces. It’s a good place and they help. That’s one thing I like.” [participant]*

Facilities

Bathrooms

At Rotary House, a single male/female bathroom was available to Warming Centre and Intox/Mat program participants. Long waits for the bathroom were reported, along with frustration for participants and staff. Rotary House has reported looking into funding and development plans and hopes to improve the facility in the near future.

*“Rotary is a **very professional place but I feel like they need to pay more attention** to how long people are in the bathroom. Especially at night, some people are in there for hours and I feel like that is unfair to other people...” [participant]*

At the Saint Lawrence Centre a single male/female bathroom was available to visitors. Participants reported a broken sink that required repair.

At the Friendship Centre, staff reported wanting to expand and improve the bathrooms. There were no issues reported by participants about the current bathrooms.

At Outreach and Homelessness Action Team meetings near the end of the winter, staff discussed the lack of public bathrooms available to individuals experiencing homelessness. According to staff at the meeting, bathrooms are available at Alberta Works in the Towne Centre Mall and the Pavilion at Muskoseepi Park. Other locations that previously offered public bathrooms have locked their doors during the past year, citing cleanliness or safety issues as reasons. Because there are very few bathrooms available for individuals experiencing homelessness in Grande Prairie, the bathrooms available at community agencies become very important for health, hygiene, privacy and self-concept. The City of Grande Prairie is currently working on a downtown development plan – it is possible that advocacy could lead to inclusion of public bathrooms in the downtown development plan.

Accessibility

At the Saint Lawrence Centre, tables and chairs were often set up in long mess-hall style rows in the program room in preparation for, or following, Salvation Army meals. Walking between the tables from one part of the room to another was reportedly difficult for individuals using walkers or wheelchairs. Because the Saint Lawrence Centre shared its program space with the Salvation Army meal program, an alternate set-up was difficult to maintain until meal hours were over.

The Friendship Centre building was not associated with any major accessibility issues. However, the building location meant that it was less accessible to individuals with walkers, wheelchairs or other mobility

issues. Had the winter weather been more severe, the location may have been less accessible even to individuals without mobility issues.

In order to walk to or from Rotary House, individuals must cross 98th Street/Resources Road. There is a new, marked pedestrian crossing in the area of 98th Street directly in front of Rotary House to facilitate safe crossing, but this crosswalk was not yet in place during the winter. The addition of a new crosswalk directly in front of Rotary House on 98th Street/Resources Road is a timely safety improvement. Observing the new crosswalk may be useful, to determine whether increased signage is needed to further enhance safety.

Transportation

The Street Outreach Team provided transportation between Rotary House and the Saint Lawrence Centre, as well as to or from appointments in the City. The Team provided this service primarily for individuals who had mobility issues. The Street Outreach Team did not provide transportation to or from the Friendship Centre, a service which may have been beneficial for some individuals. The Street Outreach Team developed the transportation service informally and it served as a safe space for conversation in addition to a mode of transport. The van was donated to the Team's home organization, HIV North, several years ago and requires frequent maintenance. The van serves many purposes for the organization and was not available consistently throughout the winter, although participants were made aware of upcoming gaps in the service. If transportation is considered an important component of a Winter Response, it would be worth discussing how the community could enhance transportation options in future years. For example, supporting HIV North to perform vehicle upgrades or maintenance or City transit to enhance certain routes.

In addition to transportation provided by the Street Outreach Team, individuals had access to a LITA pass/city transit pass. During winter 2015-16, 17% of LITA passes provided were picked up by individuals who reported residing in shelters (Odyssey House, Rotary House or Aurora House). However, according to the Google Transit Trip Planner on the City's website, city transit routes are not necessarily frequent or extensive. To illustrate the issue, transit options between Rotary House and the Friendship Centre have been included in Table 3 below.

The primary mode of transportation reported by interview participants during the winter was walking.

Table 3. Transit Options Between Rotary House and the Grande Prairie Friendship Centre

Available Routes	Frequency	Total Duration of Trip	Walking Involved (between bus stops and starting point/ destination)
Route 3 & 4	Every 30 min	25 min	9 minutes
Route 4	Every 30 min	18 min	12 minutes
Walking	-	24 min	24 minutes

Designed Space

Staff and participants noted that the layout, space and flow of people in program rooms could diffuse or lead to conflicts. For example, conflict between visitors occurred more frequently at the Saint Lawrence Centre near meal times, when the space began to fill to capacity with people. At Rotary House, conflict between participants and staff was reported as a result of minor theft, which led to lockers and locks being made available to Intox/Mat and Warming Centre participants. On another theme, the Friendship Centre drop-in space is very spacious, yet participants noted that it felt empty and not as welcoming as some of the other spaces in the City.

It was also noted that, although it was helpful to be able to sleep at the Saint Lawrence Centre, the lack of segregated or semi-private sleeping space, especially for women and girls, made some visitors feel unsafe

and uncomfortable. At Rotary House, sleeping space for women using the Intox/Mat program is segregated using half-height portable walls.

Demographics

Demographic information is primarily drawn from the Rotary House Warming Centre and from Housing First programs (for the winter period). Information from Saint Lawrence Centre and Grande Prairie Friendship Centre is included where possible. Some information from the 2014 Point-in-Time Count (PIT Count) is included for context.

Gender

The gender ratio of visitors to Rotary House and Saint Lawrence Centre was 29%/26% female and 71%/74% male visitors. The predominance of male to female visitors is typical for homeless-serving programs. For example, provincial data from the 2014 point-in-Time Count showed a 25.8% female: 73.0% male ratio (Turner, 2015).

Although admin data did not show any unexpected gender trends, Rotary House staff reported seeing higher numbers of women using their cot and Intox/Mat programs than in previous years. This was echoed in participant interviews:

*“Last night **there was a full house for women**. Sometimes, one time there were 20 ... and three more still coming after they, after they open the, you know the warming center? ... all 20 ... were sleeping in there. And there were still three more coming in after” [participant]*

Aboriginal Identity

42% of visits at Rotary House and 38% at Saint Lawrence Centre were by individuals who either self-identified or were identified by staff as aboriginal. 34% of individuals housed in Housing First programs during the winter self-identified as aboriginal. A breakdown of visitors who self-identify as Aboriginal was not available from the Friendship Centre.

10% of the general population in Grande Prairie self-identify as aboriginal (Statistics Canada, 2013) and 42% of individuals surveyed during Grande Prairie’s 2014 PIT Count self-identified as aboriginal (Turner, 2015).

Youth

12% of visits to Rotary House were by individuals from 18-24 years old. Rotary House does not provide services for youth under the age of 18, instead referring them to Sunrise House or Odyssey House for shelter. Rotary House staff reported that no youth under 18 had attempted to access the Warming Centre during the winter.

10% of those newly housed through Housing First during the winter were 18-24 years old and 44 dependents were housed along with their guardian/parent (primarily in single-parent families participating in Rapid Rehousing).

Seniors

0.12% of visits were made to Rotary House by individuals 65 years or older and 13% were made by individuals aged 55-65. Older adults, aged 55-65 years were singled out during analysis for the 2014 Point-in-Time Count and represented 6.6% of those surveyed in Grande Prairie (Turner, 2015, p. 38). Interview participants pointed towards older adults, often aging early, who are living with chronic conditions or disabilities as elders and who they considered especially vulnerable:

*“There’s a lot of elder people that come here right? We don’t kick them out, we take everybody right? ... **Some might have died this year.**” [participant]*

Length of Time Homeless

Length of time homeless was difficult to assess in the absence of in-depth conversation with survey respondents and interview participants about their definition of homelessness. Survey respondents and interview participants reported a wide variety of time homeless:

*“**I am new to all of this - a year basically.**” [participant]*

*“I ran away ... when I was [a youth] and I’ve been living on the streets since and **the streets is my home.**” [participant]*

Information drawn from Housing First program data, collected during an in-depth interview between a Case Manager and Housing First participant, provides additional insight. Of those newly housed during the winter, 21% were chronically homeless and 79% were episodically homeless prior to being housed¹. During 2014-15, 41% of individuals housed during the winter were chronically homeless and 59% were episodically homeless prior to being housed. The difference between 2014-15 and 2015-16 is due to the increased case capacity of the Rapid Rehousing program during 2015-16, which typically houses episodically homeless individuals and families.

21-Day Stays

Rotary House has a 21-day stay policy and uses it as a tool to encourage participants using the cot program to access community supports such as income or Housing First. Despite the 21-day stay policy, Rotary House staff report that the length of stay in the cot program is not regularly tracked or followed up on, unless a client presents as someone who would “respond well to a push” toward other supports. As a result, many individuals access Rotary House cots for more than 21 continuous days. In contrast to the cot program, individuals accessing Intox/Mats are not required to complete survey interviews that allow staff to track length of stay or identify needs. In fact, if Intox/Mat participants wish to maintain their privacy, they are not required to offer Rotary House any personal information at all. It is possible that many individuals using the Intox/Mat program also stay for more than 21 continuous days:

*“...**five years...that’s how long I’ve stayed at the Rotary.**” [participant]*

One interview participant reported having discussions with Rotary House staff about the 21-day stay:

*“...**21 days they allow you to stay there. They give extensions but you have to have a reason. You have to be working, you have to be on the income, and government supports. It’s not - it’s only temporary.**” [participant]*

¹ Province of Alberta, Human Services (OSSI) definitions for Chronic and Episodic homelessness are used locally in Grande Prairie for Housing First and Winter Programs receiving OSSI funding:

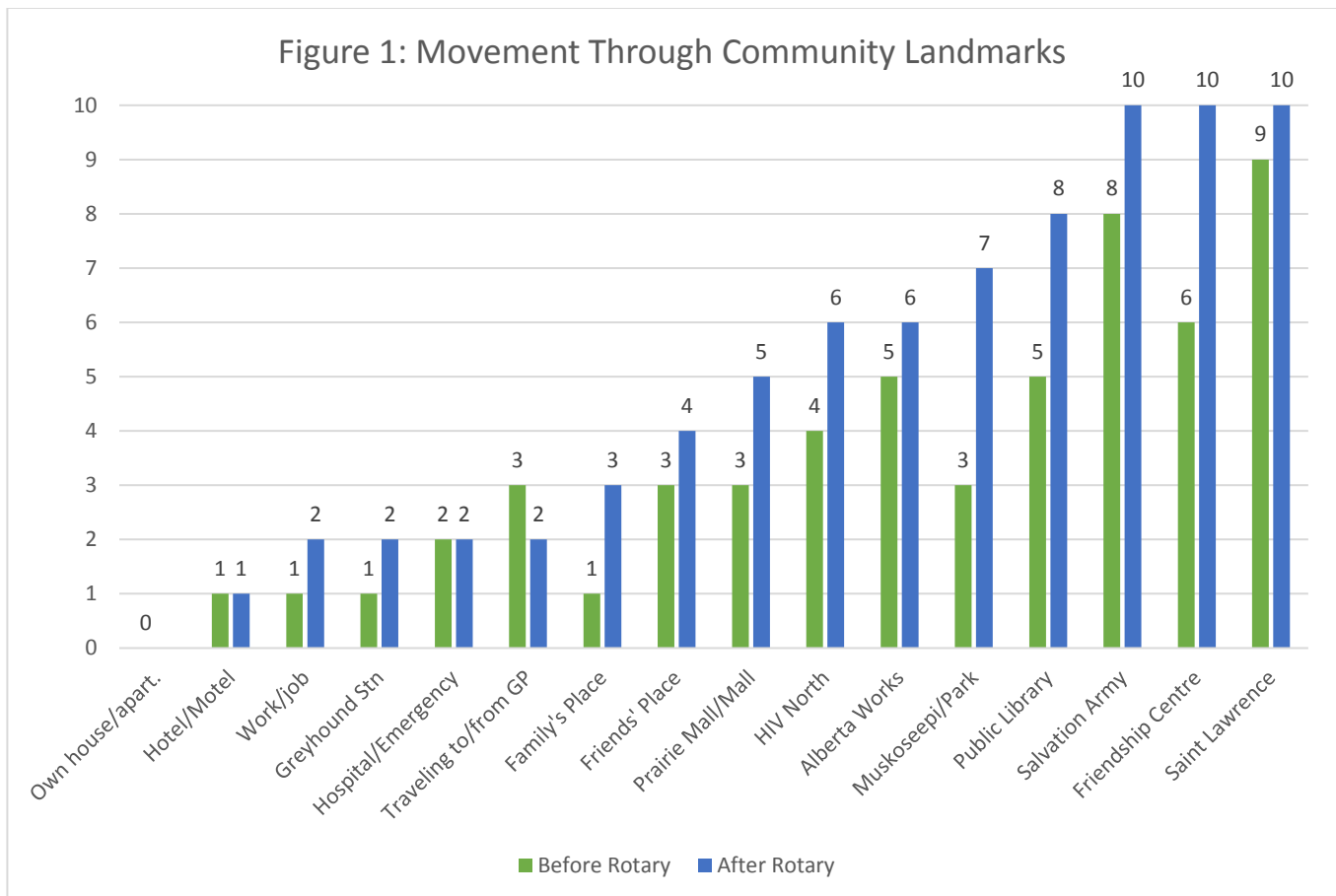
Chronic: continuously homeless for a year or more, or have had at least four episodes of homelessness in the past three years. Client must have been sleeping in a place not meant for human habitation (for example, living on the street) and/or in an emergency homeless shelter.

Episodic: homeless for less than a year and has had fewer than four episodes of homelessness in the past three years.

Migration and Movement

42% of survey respondents reported that Grande Prairie was their home community, or that they had been in the community for more than 11 years. During the 2014 Point-in-Time Count, 44% of those surveyed provincially reported that they had been in the community for 10 years or more (Turner, 2015, p. 61).

Figure 1: Movement Through Community Landmarks illustrates the answers provided by survey respondents when asked where they had been prior to visiting Rotary House and where they were planning to go after visiting Rotary House. The top three destinations were Salvation Army, Saint Lawrence Centre and the Friendship Centre. This harmonizes with the increase in winter hours and services at these locations. Upon review of survey data, Rotary House staff felt that the wider network (After Rotary) could have been evidence of Rotary House staff providing information to participants about community resources. Program participants also provided examples of how they network and share information about community services with each other. Community movement information can help to inform target locations for outreach and intervention programs.



Core Questions: Observations and Recommendations

At the outset of the winter, five core questions were identified and agreed upon by the community as relevant and important for future programming and decision-making. Recommendations are made throughout this section. Key recommendations for community review are summarized in the following section (Recommendations).

One: Stable Housing

To what extent did winter programs contribute toward stable housing for participants?

44 referrals to Housing First were documented by winter drop-in programs, although the nature of these referrals was not recorded. The Saint Lawrence Centre reported strong connections with Housing First staff, including one Housing First agency donating two meals, cooked by Housing First participants as part of a community kitchen program, to the Centre. Housing First staff were also observed at the Saint Lawrence Centre during site visits.

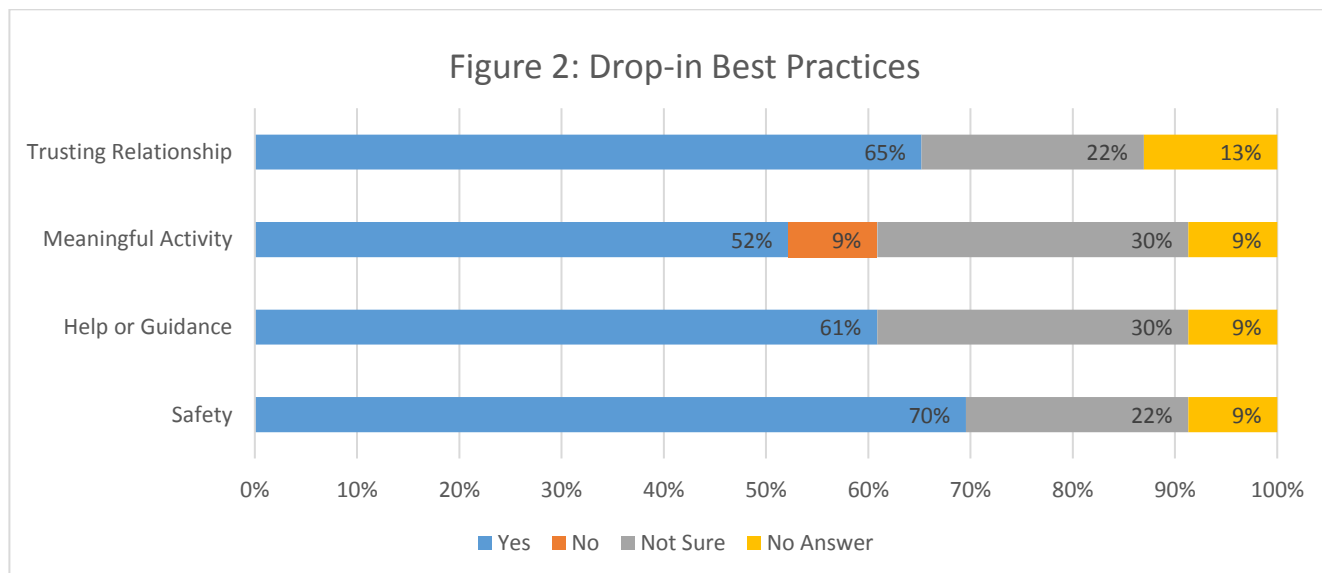
*“They [housing first agency] **saw value in having some of their case management team come over ... they were there tracking down their clients or just telling people about the program**” [staff]*

Interviews with staff and participants suggested that Housing First had become a definite presence in the community. All participant interviewees had been or were currently connected to Housing First, and it was reported that the level of knowledge in the community about Housing First had increased in the past year. A need for after-hours and supplementary day-time support for Housing First participants was also being met for the first time by the Street Outreach Team. However, weaknesses in the Housing First program were still reported. For example, Housing First agencies should **review mechanisms for communicating with participants** and ensure that information shared about the program is understandable from a participant perspective.

In comparison to the previous winter, the number of individuals newly housed through Housing First increased by 108% in 2015-16. This change can be linked to the increased caseload capacity of the Housing First network; specifically the Rapid Rehousing team. The majority of Rapid Rehousing participants are members of families and/or episodically homeless. In order to further work on ending homelessness in Grande Prairie, participant and staff feedback should be regularly gathered, assessed and used to guide changes and improvements to all areas of the Housing First program. Having made improvements in 2015-16 that targeted episodically homeless individuals and families, or those with lower SPDAT acuity scores, **a focus on chronically homeless individuals or those with higher SPDAT acuity scores** is the logical next phase. **Insights from participants and staff** from Intensive Case Management and Permanent Supportive Housing teams may help specifically to improve outcomes for, and numbers of, participants who are chronically homeless.

Despite the connections between drop-ins and Housing First outlined above, the impact that drop-in programs had in terms of facilitating access to or supporting Housing First during the winter is difficult to assess. What can be said is that **consistent contact with drop-in staff provided opportunities for participants to learn about Housing First**. Drop-in programs were also **meeting places for Housing First staff and individuals in the process of connecting** or re-connecting with Housing First. Finally, drop-in spaces that include a degree of staff-participant communication and relationship-building can **help individuals build or rediscover core capacities**, development of which could lead to improved housing outcomes (Meagher, 2008). In order to assess whether individuals accessing winter programs were supported to develop or maintain core capacities in 2015-16, reporting on monthly outputs was paired with core capacity measures through a survey at Rotary House.

Figure 2: Drop-in Best Practices illustrates survey feedback (participant) on drop-in best practices related to personal safety, ability to find guidance when needed, options for meaningful activity and building trusting relationships with staff. The majority of responses were positive for all core capacities, with highest achievement being noted for personal safety and lowest achievement for meaningful activity.



Interview participants noted that meaningful activity was not always available, and suggested that **programming by multiple agencies focusing on learning** would be very useful. In addition to survey feedback from Rotary House, interview participants discussed core capacity building opportunities at the Saint Lawrence Centre, and the Saint Lawrence Centre recorded 109.5 hours of participant volunteer hours in monthly reports. In a follow-up discussion at the end of the winter, Rotary House reported being in the early phase of implementing a new client volunteerism policy.

Two: Alignment with the Five Year Plan to End Homelessness

To what extent did winter programming align with Grande Prairie's Five Year Plan to End Homelessness?

As part of a national and provincial push toward ending homelessness using a housing first philosophy, Grande Prairie has moved away from emergency services toward supports that help individuals gain and maintain stable housing. In order to guide work towards ending homelessness, Grande Prairie's *5 Year Plan to End Homelessness* was created with the housing first philosophy, *A Plan for Alberta: Ending Homelessness in 10 Years* and the Federal Government's *Community Plan for the Homelessness Partnering Strategy* in mind. Currently, the majority of Homeless Initiatives funding is directed toward housing and supports via Intensive Case Management, Permanent Supportive Housing, Rapid Re-housing, Prevention & Diversion and Street Outreach teams. Winter programs have been funded in response to identified community need and are a continuation of an 'emergency services' approach to homelessness. Now, in the second year of Grande Prairie's *5 Year Plan*, the relationship between Winter Response and permanent housing must be assessed and strengthened. Findings from this evaluation relevant to the *5 Year Plan* are included below, organized into the five main goal areas outlined in the *Plan*.

Goal Area 1: Increased Infrastructure

Grande Prairie's lack of housing and emergency shelter options for chronically homeless individuals with complex needs was felt acutely during the winter. Creation of congregate, 24-hour Permanent Supportive Housing is part of the accountability framework for the Five Year Plan to End Homelessness but progress toward this goal was not achieved as part of the Winter Response. However, **lessons were learned that**

can help inform future plans for **congregate 24-hour Permanent Supportive Housing** and other infrastructure intended to support individuals with complex needs:

1. The Short-term Supported Suites initiative at Rotary House could inform or be a step toward congregate, 24-hour Permanent Supportive Housing in Grande Prairie. However, conflict between partner agencies and the emergent nature of the program have presented considerable challenge. **Agreements or Memorandums of Understanding between partners about program components, eligibility and monitoring** are recommended in order to sustain this program and produce benefits. A **sustainable source of funding** or income would also be of benefit.
2. Grande Prairie agencies looked at creative ways to address and even re-assess individual needs during the winter. Agency staff shared a story about an agency that had been unable to support individuals with complex needs, including a need for medical support, without 24-hour specialized support. While investigating ways to provide this kind of support, the agency bathrooms available to the individuals were assessed by Home Care. Minimal remodeling was recommended that enabled the individuals to care for their own hygiene in the interim with only part-time support from staff. This story illustrates how **the community can work with the resources currently available to assess needs and create alternatives to support individuals with complex needs without major changes to current systems**. Further, the story is an example of how, **once Grande Prairie has infrastructure in all key areas, it must still be utilized effectively by prioritizing those who need it most**. **Training for front-line staff** who work directly with individuals experiencing homelessness could contribute toward effective use of resources as well as increased quality of support for program participants. **Small innovations in building design** can also contribute toward effective use of resources.

It is also recommended that Homeless Initiatives **consider emergency response funding decisions from the perspective of the Five Year Plan**. Projects can help to ensure safety from seasonal elements while also contributing to community infrastructure and thus supporting the end goal of ending homelessness. This may be indirect, for example including funding for staff training, facilities upgrades and community consultations.

Goal Area 2: Strong, Cohesive, Integrated Community Partnerships

Grande Prairie agencies collectively provided winter services nearly every hour of the day, seven days per week for individuals experiencing homelessness in Grande Prairie for 2015-16. **Adequate communication and working agreements** between all agencies providing winter programming, specifically around policy, practice, and scope at the outset of the Winter Response **could have alleviated conflict between staff and agencies**. **Grievance procedures** being available and followed, could also have contributed to the alleviation of conflict. Continued communication throughout the duration of the Winter Response would have been advisable. All Winter Response agencies experienced some level of inter-agency conflict during the winter. In some cases there was either no significant relationship, positive or negative, between agencies, which may have **resulted in missed opportunities for participants**. It is recommended that all Winter Response service providers **meet monthly during the winter** to discuss working relationships, successes and challenges.

Goal Area 3: Strengthened Community Resources

Connecting individuals using the Intox/Mat program to Housing First was identified as a priority in Grande Prairie's Five Year Plan. Individuals using the Intox/Mat program at Rotary House during the winter had some opportunity to connect with Housing First via staff referrals and Housing First staff visits at the Saint Lawrence Centre and the Grande Prairie Friendship Centre.

During 2014-15, Housing First staff attended the Intox/Mat program in the mornings to conduct intake assessments with program participants. This initiative was not continued in 2015-16, partly because it was

deemed unsuccessful by staff. Lessons learned from the evaluation survey at Rotary House suggest that the Intox/Mat program, evening or morning, is not necessarily the best place to intervene with participants due to substance abuse issues, time and space constraints. Many Intox/Mat and cot program participants also participate in day-time drop-in programs during the winter, making it possible that Housing First intake workers could reach Intox/Mat participants even if conducted at other venues. **Daytime drop-in programs** where participants spend large amounts of time and where space is more readily available are likely **a good choice for Housing First outreach**.

Goal Area 4: Education & Awareness

The Winter Response evaluation was an opportunity for individuals experiencing homelessness to provide feedback to Homeless Initiatives about their experience. Engagement for individuals with lived experience that includes homelessness is one of the goals of Grande Prairie's Five Year Plan.

Increased visibility and education about Housing First, including Prevention & Diversion, for the general public is needed. No specific awareness or education activities were undertaken as part of the Winter Response. Increased public awareness about the network of supports available in the community could be helpful for individuals who are at-risk or episodically homeless and therefore not familiar with the available services. General public awareness about Prevention & Diversion supports could decrease the flow into homelessness.

Three: Comparison to Other Projects: Costs

How does the cost of Grande Prairie's Winter Response programs compare to programs that achieve similar goals?

Due to time and resource constraints in the evaluation, the cost of Grande Prairie's winter programs was not compared to winter programs in other cities. Rather, a basic review of literature was done to compare the cost of responding to homelessness with supports or with housing programs. In general, literature suggests that it is more cost effective to house people or prevent them from becoming homeless, than to respond to homelessness with support services (Gaetz, 2012; OrgCode Consulting Inc, 2015; Shapcott, 2007). For example, a study comparing costs of homelessness in four Canadian cities found that the average annual cost per person at emergency shelters was \$13,000 - \$42,000, while the average annual cost per person in supportive and transitional housing was \$13,000 - \$18,000. Institutional costs (health; corrections) were found to be significantly higher than any other response to homelessness at \$66,000 - \$120,000 annually (Pomeroy, 2005). Within the Province of Alberta, a 2015 evaluation of winter services in Red Deer suggested that the cost of housing individuals through Housing First programs was less than the cost to shelter individuals in emergency programs (Social Planning Department, 2015).

Looking internally at each of Grande Prairie's 2015-16 winter service providers, it is possible to identify some areas where funds made a significant difference and where changes could be made:

- Rotary House was the only organization to report surplus funds from winter programming (~\$15,000). Permission was granted to direct these funds toward Short-term Supported Suites for the period between April and June, 2016. Conversations with staff, and statistics from previous years, indicate that the **funding provided to Rotary House for the warming centre could be decreased** to \$60,000 without negatively impacting program participants. Further conversation leading up to winter 2016-17 could determine whether the dollar amount could be further reduced.
- Saint Lawrence Centre funding supported the Team Lead for one month and allowed the Team Lead to hire a staff member for three months. It was noted that an additional staff member freed the Team Lead up to provide in-depth support to participants who were in crisis, while ensuring that other participants still had the attention of a staff member. The Saint Lawrence Centre program cost the least in terms of cost per visit and per individual – made possible partly by the absence of security staff and operational costs, and the help of participant and community volunteers.

- The Friendship Centre had some difficulty meeting its goals for number of bags provided and meals served. Community awareness of the food bag, hygiene bag and weekend drop-in hours was relatively low compared to awareness of the other two winter programs. In March, awareness increased and the Friendship Centre saw an increase in numbers. The weekend drop-in filled a gap where individuals might otherwise have been without daytime shelter or a meal, but the food and hygiene bags fell outside of the scope of the rest of the programming. **Funds could be used to provide meaningful activities or additional staff** support to individuals accessing the weekend drop-in.

Four and Five: Effectiveness and Demonstrated Need

How effective is the Winter Response in providing safety from winter weather for the target population?

Is there a demonstrated need for a Winter Response, or can resources be redirected to permanent initiatives?

Staff and participants reported that a Winter Response was essential for Grande Prairie, an opinion supported by 7474 visits to winter programs (including 99 nights at Parkside Inn), over 340 different people accessing the Intox/Mat program and over 200 different people accessing the Saint Lawrence Centre.

The effect that winter programming had on community members was demonstrated by the absence of reported injuries or deaths as a result of winter weather, and by a reportedly positive community atmosphere. While some individuals remained unsheltered during the night, the reported number was low. Others who might have been unsheltered were placed at the Parkside Inn or encouraged by the Outreach team to access personal supports (couch-surfing). Outreach staff reported that **it was helpful to have options during the day and, for those who could not or chose not to access Rotary House, at night.**

In addition to the success of the Winter Response in meeting demonstrated needs, **another important factor that influenced the community was successful housing** through Housing First or other housing initiatives (like Rotary House Short-term Supported Suites). During interviews, staff pointed toward the increase in the number of housed individuals and considered this to have had a significant impact on their work within the community.

Rotary House cot and Intox/Mat programs provide essential services in Grande Prairie, and since 2014, have been available year-round. Staff and program participants also value daytime drop-in programs, although the level of daytime coverage seen during the winter was not considered necessary during the spring, summer and fall months. **Short-term housing developed during the winter proved to be an important element of the Winter Response.** Review of best practices for this model and how this model relates to permanent housing will be helpful for further development.

Key Recommendations

The Winter Emergency Response evaluation identified challenges that can be mitigated going forward, through a review of the recommendations and commitment to implement recommended changes. The goal is to provide seamless, cost-effective Winter Response programming in the City of Grande Prairie.

General recommendations have been included throughout this report and have been summarized in Appendix A.

Key community-level recommendations that will apply regardless of the structure of the 2017-18 Winter Response are included in this section (pages 26-33). These recommendations will require discussion and action prior to implementation of the 2016-17 Winter Response.

Program-level recommendations were made during face-to-face conversations with each agency in June 2016, and the likelihood of action was discussed. For further information about the type of program-level recommendations made, see agency feedback templates in Appendix D.

Recommendations and ideas from other cities to assist in discussion are included in Appendix E.

COMMUNITY ISSUE ONE: Training for Service Provider Staff

- Goal 1:** Health, addiction, mental health, trauma and FASD related issues are recognized.
- Goal 2:** Conflict between staff and participants; participants is prevented or de-escalated.
- Goal 3:** Client loss of access to service (bans; inability of agency to meet needs) is prevented; reduced.
- Goal 4:** Individuals requiring specialized supports to address health, mental health and other needs are supported in a timely and appropriate manner.

- Recommendation 1:** Agree upon a set of core competency training modules as a community. Housing First core competencies and supplements are suggested as a starting point for conversation.
- Recommendation 2:** Ensure all front-line staff who have direct contact with individuals experiencing homelessness receive training in core competencies.
- Recommendation 3:** Ensure that communication between front-line and professional team members allows for information and support to flow easily back and forth.
- Recommendation 4:** Ensure that individuals experiencing homelessness have at least periodic access to professional and experienced staff.
- Recommendation 5:** Funding for training will need to be discussed by the community.
- Scope:** Agencies/programs funded through or working with Homeless Initiatives; Homeless Initiatives.
- Timeline:** All staff to have received or be slated to receive training by November 1, 2016. Going forward, all staff to receive training within three months of hire date.

Note: *It is not suggested that front-line staff should receive training in order to assess, diagnose or treat individuals with complex needs. Rather, front-line staff with training in core competency areas will be better able to recognize the basic needs of individuals with complex needs, and alert the professional members of their teams to a possible need for further assessment and support.*

COMMUNITY ISSUE TWO: Individuals with Complex Needs; Banning

- Goal 1:** Policies and procedures ensure safety for staff and participants; maximize inclusion.
- Goal 2:** Clients understand conditions for bans and ban processes.
- Goal 3:** Incidence of bans is reduced.
- Goal 4:** Clear and suitable options are available for individuals who have been banned, particularly for those banned from night-time shelter.

- Recommendation 1:** Review internal policies and procedures for banning individuals from agency services, facilities or grounds. This includes conditions for bans, ban types, notification and rescinding procedures.
- Recommendation 2:** Hold community meetings to discuss best practices, issues and harmonize (where possible) banning practices across agencies.
- Recommendation 3:** Hold community meetings to discuss and address the unmet needs of individuals who are subject to shelter bans and subsequently without shelter.
- Scope:** Agencies/programs funded through or working with Homeless Initiatives; Homeless Initiatives.
- Timeline:** All agencies to have reviewed and discussed banning by November 1, 2016.

COMMUNITY ISSUE THREE: Connection to Housing First; Stable Housing

- Goal 1:** Emergency programming, drop-ins and shelters contributes toward stable housing for individuals experiencing homelessness while also addressing immediate needs.
- Recommendation 1:** Integrate/continue to integrate drop-in program components that build participant social skills and provide opportunities for meaningful daily activity.
- Recommendation 2:** Accommodate and promote interaction between Housing First staff and drop-in participants at drop-in spaces.
- Recommendation 3:** Explore options for Housing First Centralized Intake & Assessment to be present at drop-in spaces in order to provide assessment opportunities for chronically homeless individuals with complex needs.
- Recommendation 4:** Provide staff and participants with access to information workshops about Housing First. Information workshops should require minimal resource and time commitments.
- Recommendation 5:** Drop-in programs commit to making active referrals to Housing First programs. Outline what it means to make an active referral to Housing First and ensure that a process is in place to facilitate these referrals.
- Scope:** All drop-ins and other programs funded through or working with Homeless Initiatives; Homeless Initiatives.
- Timeline:** In time to make changes to Requests for Proposals for winter programming. In time to be included as contract stipulations.

COMMUNITY ISSUE FOUR: Awareness of Housing and Supports

- Goal 1:** Public understanding of available services is increased; individuals who find themselves homeless can easily find support.
- Goal 2:** Flow of individuals and families into homelessness is reduced.
- Goal 3:** Length of time homeless is reduced.

- Recommendation 1:** Provide education to agency staff and the general public about Prevention & Diversion and Housing First support; other services in the community.
- Recommendation 2:** Partner with poverty reduction education initiatives to share Prevention & Diversion; Housing First and homelessness resource information.
- Recommendation 3:** Partner with agencies from various community sectors to educate or create education resources (posters that show program process, brochures) for the public. Integrate/continue to integrate program components that contribute to participant core capacities

Scope: Agencies/programs funded through or working with Homeless Initiatives; Homeless Initiatives.

Timeline: By November 1, 2016.

COMMUNITY ISSUE FIVE: Feedback from Program Participants

|| Goal 1: Community programming, including Housing First, is responsive to community need.

Recommendation 1: Obtain frequent and meaningful feedback from program participants to guide program changes and improvements.

Scope: All drop-ins and other programs working with of funded through Homeless Initiatives.

Timeline: By November 1, 2016.

COMMUNITY ISSUE SIX:

Communication with Program Participants

Goal 1: Individuals engaging with Housing First fully understand the program process and where they are in that process at all times.

Recommendation 1: Create and provide resources to community members and agencies that clearly outline the Housing First process.

Recommendation 2: Ensure that Housing First staff are accessible to existing Housing First participants and to past/prospective Housing First participants.

Recommendation 3: Ensure that participants can easily access information about their progress through the program. This may include increasing location of service to include drop-in programs.

Recommendation 4: Ensure that procedures to ensure staff changes do not have a negative impact on program participants are followed.

Scope: Housing First Agencies; Homeless Initiatives.

Timeline: By November 1, 2016.

COMMUNITY ISSUE SEVEN:

Communication between Winter Service Providers

Goal 1: Winter services are connected, complimentary and effective while providing increased access to appropriate community supports.

Recommendation 1: Facilitate information sharing, conflict resolution and capacity building across agencies by holding monthly check-in meetings.

Recommendation 2: Rotate meeting host responsibilities; integrate presentation by host agency staff about an initiative within the agency or an issue for discussion.

Recommendation 3: Include front-line staff and volunteers at monthly meetings.

Scope: Homeless Initiatives.

Timeline: Between October 1, 2016 and April 31, 2017.

COMMUNITY ISSUE EIGHT: Funding for Winter Response Programs

Goal 1: Community needs are met, while making funding decisions that prioritize stable housing.

- Recommendation 1:** Maintain daytime coverage with drop-in programs during winter months.
- Recommendation 2:** Reduce Rotary House warming centre funding. Discuss use of funds for Intox/Mat program and other internal programs at the outset of funding agreement.
- Recommendation 3:** Ensure that funding application forms elicit funding proposals that align with priorities identified in the Five Year Plan.
- Recommendation 4:** Develop a logic model to help make funding decisions that align with the Five Year Plan. This may lead to eliminating funding for auxiliary programs like food and hygiene bags and increased funding for permanent housing initiatives.
- Recommendation 5:** Ensure that agencies have adequate time between funding approval and program start to hire and training staff; implement data procedures and attend community discussions.
- Recommendation 6:** A significant gap in winter programming exists for individuals who do not have housing and cannot or will not access Rotary House. Consider options for night-time shelter when making funding decisions at the outset of the winter.

Scope: Homeless initiatives
Timeline: By November 1, 2016.

Appendix A: Summary of General Recommendations

Recommendations from the evaluation report sections “Evaluation Findings” and “Core Evaluation Questions: Observations and Recommendations” are organized by heading and section below. Refer back to the main report for detail and context.

Facilities

- PAGE 15. Rotary House has reported looking into funding and development plans to improve bathroom facilities available to Intox/Mat participants.
- PAGE 15. The bathrooms available at community agencies become very important for health, hygiene, privacy and self-concept. The City of Grande Prairie is currently working on a downtown development plan – it is possible that advocacy could lead to inclusion of public bathrooms in the downtown development plan.

Accessibility

- PAGE 15. Organize table and chairs with wheel chairs and walkers in mind to increase accessibility of program spaces.
- PAGE 15. Consider the location of funded programs from the perspective of those who may be walking or taking public transit and who may need access to winter-time community meals.
- PAGE 16. Discuss how the community could make transportation available to those with mobility issues during the winter; include all winter program and meal locations in transportation networks.

Designed Space

- PAGE 16. Use program spaces as behaviour management tools – the layout and amenities of a space can influence the degree of conflict and cooperation between staff, staff and participants, and participants.
- PAGE 16. Consider how to ensure that staff are available to interact with drop-in program participants at all winter program locations.
- PAGE 16. Consider making informal sleeping spaces more formal, with semi-private sleeping spaces.

Stable Housing

- PAGE 17. Use drop-in programs to connect drop-in participants with the Housing First program and to increase participant opportunities for learning and capacity building
 - Offer information sessions
 - Complete intake assessments, conduct outreach or connect/re-connect with participants
 - Create unique ways to interact with and support drop-in programs
- PAGE 17. Review mechanisms for communicating with participants to ensure that information shared about the program (process, timelines, banning procedures, etcetera) is understandable from the participant perspective.
- PAGE 18. Focus on chronically homeless individuals in the next phase of improvements to the Housing First program and the next Winter Response. Use insights from staff and participants to guide changes.
- PAGE 18. Support drop-ins to provide programming focused on learning and meaningful daily activity. Sharing the responsibility for programming would strengthen the network of local agencies and provide opportunities for participants to be involved in program operations.

Alignment with the Five Year Plan

Goal Area 1. Increased Infrastructure

- PAGE 18. Use lessons learned from the Rotary House Short-Term Supportive Housing project to inform future plans for congregate 24-hour Permanent Supportive Housing and to improve upon the Rotary House Short-Term Supportive Housing program.
 - Define program scope, purpose, eligibility and monitoring approach using a logic model or theory of change template
 - PAGE 19. Create and abide by Agreements or Memorandums of Understanding to prevent and manage conflicts when multiple agencies are collaborating on a single program
- PAGE 19. Work with the resources currently available in the community to assess and create alternatives to support individuals with complex needs. This will enable the community to support individuals with complex needs without/in preparation for major changes to current systems.
 - PAGE 19. Once Grande Prairie has infrastructure in all key areas, it must still be utilized effectively by prioritizing those who need it most.
- PAGE 19. Training for front-line staff who work directly with individuals experiencing homelessness could contribute toward effective use of resources as well as increased quality of support for participants.
- PAGE 19. Consider emergency response funding decisions from the perspective of the Five Year Plan.
 - Projects that ensure safety from immediate risks, but also contribute to infrastructure and community capacity. For example, funding for staff training, facilities upgrades, community consultations

Goal Area 2. Strong, Cohesive, Integrated Community Partnerships

- PAGE 19. Adequate communication and working agreements between all agencies providing winter programming, specifically around policy, practice and scope at the outset of the Winter
 - Alleviate conflict between staff and agencies
 - Grievance procedures
 - Monthly meetings throughout the winter

Goal Area 3. Strengthened Community Resources

- PAGE 19. Daytime drop-in programs where participants spend large amounts of time and where space is more readily available are likely a good choice for Housing First outreach.
 - Opportunity to reach Intox/Mat participants, which is a strategy outlined in the Five Year Plan

Goal Area 4. Education & Awareness

- PAGE 20. Increased visibility and education about Housing First, including Prevention & Diversion, for the general public
- PAGE 20. Make available resources clearly outlining the Housing First process, targeted to individuals at-risk of or experiencing homelessness.

Comparison to Other Projects: Costs

- PAGE 20. Literature suggests that it costs less to house individuals experiencing homelessness, than to support them with other services.
- PAGE 20. The funding provided to Rotary House for the warming centre could be decreased to \$60,000 without negatively impacting program participants. Further conversation leading up to winter 2016-17 could determine whether the dollar amount could be further reduced.
- PAGE 21. Funds provided to the Friendship Centre for food and hygiene bags could instead be used to provide meaningful activities or additional staff support to individuals accessing the weekend or week-day drop-in.

Effectiveness and Demonstrated Need

- PAGE 21. Winter Response services are well-utilized
- PAGE 21. Outreach staff played an important role in supporting highly vulnerable individuals who were unable to access Rotary House to access alternative sleeping arrangements.
- PAGE 21. Options during the day and at night were welcomed
- PAGE 21. Initiatives that provided stable housing for individuals were important elements of the Winter Response, despite not officially being funded as Winter Response programs
 - Housing First
 - Rotary House Short-Term Supported Suites
 - Review of best practices for this model and how it relates to permanent housing will be helpful for further program development

Appendix B: Methods

Administrative Data:

Current and historic administrative data were compiled and analyzed using Excel. Agency staff were consulted where data was inconsistent or incomplete. In cases where information was not complete, or could not be completed reliably, the data was excluded.

Interviews:

Participant interviews were recorded and transcribed verbatim before being analyzed 1) according to scripted questions and 2) for emergent themes. Initial staff interviews were recorded and transcribed verbatim, following the same procedure as participant interviews. Follow-up staff interviews were recorded and reviewed.

Staff interviews ranged from 45 minutes to 1.5 hours in length and were a blend of evaluation design/process discussion and program discussion. Staff were also asked about their connection and work with other winter service providers. Staff interviews were conducted either at the agency or at the Homeless Initiatives office.

Participant interviews ranged from 40 minutes to 1 hour in length and were conducted in a private space at the Saint Lawrence Centre. Criteria for participating were 1) able to provide informed consent, 2) currently accessing the Saint Lawrence Centre and 3) currently experiencing homelessness. Saint Lawrence Centre staff discussed the evaluation with drop-in participants and referred those interested in participating to the evaluator during site visits. The evaluator walked participants through the project purpose and process of consent before the interview began. Participants were provided with a \$5 gift card at the end of the interview, but were not aware that this would be offered prior to participating.

Surveys:

Participant surveys were distributed on two separate weeks by Rotary House staff at the Warming Centre. Staff were instructed to give participants the option of completing a survey during Warming Centre hours. If participants were interested, they were given a paper survey/pen and the surveys were returned to staff in an opaque envelope. Participants could complete the survey more than once during the winter, but not more than once per day. Any repeat surveys were to be marked. No repeat surveys were completed. Staff were asked not to look at completed surveys, and kept them in a locked cabinet until they could be picked up by the evaluator for review. In cases where participants were interested in completing the survey, but could not read or write or needed assistance understanding a question, staff were able to provide assistance. Any survey that was completed with staff assistance was marked. 23 surveys were completed, comprising 22% of Warming Centre participants on the weeks that the survey was available. None of the surveys were marked as being completed with assistance from staff.

Site Visits:

Visits to each agency were made by the evaluator between January and March. Agencies provided an informal facility tour and introduced any staff or volunteers who were present. Visits were an opportunity to observe movement through space, operations and participants. Notes were made after each visit and used to augment and contextualize administrative, interview and survey data.

Appendix C: Participant Survey

2016 Winter Services Survey

The City of Grande Prairie Homeless Initiatives would like to learn about your experience in Grande Prairie during the winter months. You are not obligated to answer this survey and you can skip any questions that you do not want to answer. Choosing not to participate in this survey will NOT affect your eligibility for services. You can answer this survey more than once during the winter, but not more than once per day. By completing the survey, you consent to participate. This survey is anonymous – do not include your name or contact information.

Have you answered this survey before? ☐Yes ☐No ☐Not Sure

If you are homeless right now, how long has it been since you lived in permanent, stable housing?

About _____ day(s) **OR**

About _____ month(s) **OR**

About _____ year(s)

In the last three years, how many times have you been homeless? _____

Did you go to/spend time at any of these places today or yesterday before coming to Rotary House? Check any that apply.

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> HIV North | <input type="checkbox"/> Hotel/motel | <input type="checkbox"/> Work/job | <input type="checkbox"/> Greyhound Stn |
| <input type="checkbox"/> Salvation Army | <input type="checkbox"/> Own house/apartment | <input type="checkbox"/> Alberta Works | <input type="checkbox"/> Muskoseepi or another city park |
| <input type="checkbox"/> Friendship Centre | <input type="checkbox"/> Friend's place/apartment | <input type="checkbox"/> Prairie Mall or Town centre Mall | <input type="checkbox"/> Hospital or emergency room |
| <input type="checkbox"/> Saint Lawrence Centre | <input type="checkbox"/> Family's place/apartment | <input type="checkbox"/> Public Library | <input type="checkbox"/> Traveling to Grande Prairie from out of town |

Might you go to or spend time at any of these places after leaving Rotary House today or tomorrow? Check any that apply.

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> HIV North | <input type="checkbox"/> Hotel/motel | <input type="checkbox"/> Work/job | <input type="checkbox"/> Greyhound Stn |
| <input type="checkbox"/> Salvation Army | <input type="checkbox"/> Own house/apartment | <input type="checkbox"/> Alberta Works | <input type="checkbox"/> Muskoseepi or another city park |
| <input type="checkbox"/> Friendship Centre | <input type="checkbox"/> Friend's place/apartment | <input type="checkbox"/> Prairie Mall or Town centre Mall | <input type="checkbox"/> Hospital or emergency room |
| <input type="checkbox"/> Saint Lawrence Centre | <input type="checkbox"/> Family's place/apartment | <input type="checkbox"/> Public Library | <input type="checkbox"/> Traveling out of Grande Prairie |

Select True, False or Not Sure for the following:

- | | | | |
|----------------------------|----------------------------|-----------------------------------|---|
| <input type="checkbox"/> T | <input type="checkbox"/> F | <input type="checkbox"/> Not Sure | Rotary House is a safe place for me to go |
| <input type="checkbox"/> T | <input type="checkbox"/> F | <input type="checkbox"/> Not Sure | I can get help or guidance when I need it at Rotary House |
| <input type="checkbox"/> T | <input type="checkbox"/> F | <input type="checkbox"/> Not Sure | I can participate in activities that mean something to me when I am at Rotary House (for example volunteer, help out, talk with people, read, etcetera) |
| <input type="checkbox"/> T | <input type="checkbox"/> F | <input type="checkbox"/> Not Sure | I am able to build a trusting relationship with staff at Rotary House |

How old are you? Age: _____ ☐Don't know ☐Don't want to answer

About how long have you lived in Grande Prairie? Select one of the options below.

- | | |
|--|--|
| <input type="checkbox"/> I don't live in Grande Prairie, I'm just passing through, visiting or working temporarily in the area | <input type="checkbox"/> 1 to 5 years |
| <input type="checkbox"/> Less than <u>1 month</u> | <input type="checkbox"/> 6 to 10 years |
| <input type="checkbox"/> More than 1 month, but <u>less than 1 year</u> | <input type="checkbox"/> 11 or more years, but not my whole life |
| | <input type="checkbox"/> My whole life |

Do you identify as being Aboriginal, First Nations (Status or Non-Status), Metis or Inuit?

- ☐Yes ☐No ☐Don't know ☐Don't want to answer

What gender do you identify with?

- ☐Female ☐Male
- ☐Transgender/Transsexual
- ☐Other
- ☐Don't know ☐Don't want to answer

Additional Comments:-

Thank you for completing this survey! If you have any questions about the information gathered in this survey, call the City of Grande Prairie, Department of Community Social Development at (780) 538-0380

Appendix D: Program Level Feedback

During the evaluation, additional insight was gained through meetings with agency staff. Each meeting lasted between 1 and 2 hours. Data and observations were shared and questions were asked for clarity. Staff provided their thoughts on what the data revealed about their program. Samples of the topics of conversation during meetings are included below.

Rotary House Winter Warming Centre | 2015-2016 Overview

Cost per visit: \$17.76	Cost per individual: \$217.61 (per month average \$112.31)
Female visits: 28%	Male visits: 71%
Substance Abuse: 99%	Aboriginal visits: 42%
Average Age: 41 years	(Oldest was 72; Youngest was 18.)
Total Visits: 4202	Youth visits: 12%
Total Individuals: 343	

Table of Historic Statistics: (not reproduced here)

Questions for Discussion:

What cost per visit is most feasible for Rotary House to offer a warming centre service through the winter?

What is the difference between the program in 2013-14 (lowest cost/highest volume) and 2015-16?

Survey:

22% of visitors on survey days answered the survey (23 surveys).

Majority of respondents were **men** (74%). Women account for 22% (remainder did not to specify gender).

43% of respondents reported that Grande Prairie was their home community or that they had been in the community more than 11 years.

Respondents reported a **median of 365 days homeless**, with a minimum of 9 days and a maximum of 10 years. The average length of time homeless was 2 years.

Understanding Figure 1 (not reproduced here):

- **Top three destinations reported by respondents:** Salvation Army, Saint Lawrence Centre and GP Friendship Centre. This harmonizes with the increase in winter hours and services.
- How might Rotary House staff interpret the different between the pre and post Rotary House net?

Understanding Figure 2: (not reproduced here)

70% of respondents agreed that Rotary House was “a safe place for me to go”. **22% of respondents were not sure and 9% chose not to answer** whether Rotary House was a safe place to go.

In a space provided for comments, visitors reported (discuss these points):

- A desire for more services, increased involvement and opportunities to connect with staff
- Bathroom issues: managing length of time people can be in the bathroom, activities in the bathroom, availability of the bathroom

- A need for staff to have an increased understanding of mental and physical health issues so that symptoms of these issues are not mistaken for misbehaviour, or substance use

Interviews:

Four interviews were conducted with WER program participants during the winter. All interviewees were sleeping at Rotary House at some point during the winter, either in cots or Intox/Mat program:

Quick Points (discussed, supported by examples):

- **Confusion about rules** leads to frustration and setbacks
- **When policies work as intended**, they can produce positive results
- **Difficulty engaging with staff**, though some staff are known for being easy to connect with
- Preference for **not using Rotary House** is routinely trumped by necessity, situation
- **Facilities are adequate** but could be improved
- Rotary House can be a site for **positive connections**
- Rotary staff support a **wide range of clients with complex needs**

Saint Lawrence Centre Overview | Winter 2015-16

Cost per visit: \$6.79	Cost per individual: \$83.67 (per month average \$38.39)
Female visits: 26%	Male visits: 74%
Aboriginal visits: 38%	Total Visits: 2503
Total Individuals: 203	Volunteer hours: 109.5 (Visitors); 285 (Community)

Table of Overall Statistics: (not reproduced here)

Notes:

SLC's cost per visit was low compared to other programs.

Questions:

What was the real cost per visit for the SLC through the winter? Is a cost of just over \$6 per visit feasible for future seasons?

What were the deciding factors in partnering with the SA during the winter rather than another location (for example church, Rotary, Friendship Centre)?

Participant Interviews

Preliminary Notes (discussed, with examples):

- **A policy of flexibility and acceptance** creates a sense of personal safety and community for visitors even in the presence of negative interactions or behaviour
- **Visitors support and accept** the practices of SLC **as a result of participating** in SLC's structure
- SLC Team Lead is accessible to visitors, providing in-context rationale behind decisions. This process is **understandable** and leads to visitors who can see **where they fit within the SLC**, not only as users of the service, but as part of the service
- SLC Team Lead is considered an **experienced, reliable source of guidance and information**, valued by visitors
- Visitors value their time and **consider volunteering a donation** to the SLC
- Some visitors rely on staff for **personal support**, whereas others rely on SLC for **space and resources**
- Art, socializing and self-directed community learning are the primary activities at the centre. While these are appreciated, visitors would value **programming by external agencies** that included educational components
- SLC facilities were **adequate but could be improved**, specifically with increased or re-configured space to allow for:
 - Segregated day-rest spaces for men and women; couples and singles
 - Adequate space for walkers and wheelchairs between tables and other furniture items
 - Secure storage for SLC materials and for visitor belongings
 - Alcoves for different activities including computers, art, games, eating, etcetera
 - Permanent set-up rather than intermittent take-down and set-up
 - Adequate space to reduce conflicts during peak periods
 - A station at which to safely charge cellphones and electronics
- Despite problems associated with facilities, **facilities issues were an opportunity** for visitors to contribute to the operation of the centre
- SLC's shared space was convenient because SA meals and food bank were available at the same location. SLC hours were convenient because they aligned with Rotary House hours

- **SLC depends on a champion and community fundraising** for operation. This structure is a risk for the organization's longevity
- Visitors are **connected with other city services**, including Rotary House (Mats and Cots), the Friendship Centre, the SA, HIV North and Housing First
- Visitors have been negatively impacted by **professional and personal problems** in Housing First programs but are willing re-engage with the service. However, visitors do not always have a clear understanding of the process of engagement in Housing First

Further Observations:

Contextual bans for a consistent period of time (the rest of the day) reduced confusion and frustration for visitors and staff.

A plan should be in place to ensure that visitors who are asked to leave for the remainder of the day have a safe place to go and are not forced to wait outdoors in the cold.

Staff and volunteers would benefit from learning about local services and from training that would enhance personal and participant safety (mental and physical).

Strained relationships between agencies/agency staff may have resulted in lost opportunities for mutual learning; harmonization of conflicting policies; services and learning opportunities for visitors. Increased communication that focuses on collective action and conflict resolution is a must for agencies working with a shared population.

The sign on the front door of SLC was small and difficult to see from a distance.

As a mobile organization, SLC has re-established their space as the seasons change. Sharing space has been an opportunity for staff to work closely/internally with staff from agencies with differing operational practices. By working together with the same people in the same building, agency staff can align practices and provide a more consistent, less confusing service to visitors. However, close proximity was a source of challenges during the winter: where staff were unable to align viewpoints, make concessions and manage conflict, visitors faced consequences including reduced access to services and personal frustration. Visitor frustration, in turn, lead to increased stress for staff. The Saint Lawrence Centre, HIV North, Rotary House and Grande Prairie Friendship Centre all felt the impact of relationship issues, positive and negative, during the winter.

Appendix E: Community Discussion Resources

The following list of questions is based on recommendations resulting from evaluation of Winter Response programming in Edmonton, Red Deer, Waterloo and Toronto. Comments from OrgCode Consulting are also included for discussion.

- What policy changes, procedures and resources are needed to ensure that all have a place to sleep during the night?
- Are there discriminatory practices in the shelter system? What do we need to do in order to ensure a low-barrier approach is taken to reduce the incidence of banning and removal?
- How can we ensure a harm reduction approach is utilized, while also ensuring that spaces are safe for those needing separation from substance use/alternate spaces are available for those who need separation from environments where substances are being used.
- How can points of access in the community, such as central intake and staff who make referrals be more accessible and streamlined?
- Is the right to housing respected in our community? How can we ensure that resources are put in to new and existing affordable and social housing projects?

(Ontario Coalition Against Poverty, 2016)

- How will we ensure strong communication between shelters, drop-ins and other homeless-serving agencies for effectively providing services and implementing referrals?
 - Midpoint check-ins
 - Self-evaluation check-ins
 - Knowing who is working with whom to help reduce overlap/duplication
 - Improved awareness of agency offerings
 - Hold orientation meetings for all WER staff featuring critical service providers to build connections and awareness of how different service providers can work together to support WER participants (Homeward Trust, 2013).
 - Facilitate sharing and capacity building across agencies – hold monthly meetings rotating between agencies with the host agency providing a short presentation on an initiative of interest or problem for discussion. Meetings could show community support for front-line staff and volunteers at each agency and create a stronger sense of community (Homeward Trust, 2013).
- How can we ensure that a focus on housing exists in drop-ins, when drop-in staff spend majority of their time working with participants on behaviour issues?
- Is complete coverage necessary for winter programs? Are any hours underutilized?
 - Targeted flexible outreach tailored to meeting people where they are at and facilitating access to housing does not necessarily require round-the-clock hours.
- How can we increase the level of collaboration and engagement of Outreach Team staff to provide coordinated support?
 - Mobile outreach staff can connect with staff at shelters to capitalize on conversations or progress made during the day
 - The most effective elements of after-hours outreach were connection between day and night supports; integration of support into shelter services.
 - It is useful to have housing staff within daytime programs who can support people through conversation and practical help.
- Who should be prioritized for winter programming and housing supports? What would a prioritization process look like?

- What resources do we need to develop in order to address FAQs and misconceptions about services and supports available in the city? Who is responsible for creating these resources? How will these resources be shared and distributed?
- How can we prioritize housing initiatives while also ensuring safety from winter elements?
 - Unconventional shelter options for a small number of people facing challenges accessing regular shelter systems.
 - Utilizing the Outreach team effectively to engage and support people in housing
- How much time is needed between funding approval and program implementation?
 - Staff hire
 - Program development
 - Staff training
 - Community collaboration meetings

(Municipal Region of Waterloo, 2015)

- If you are concerned about health and welfare, why not invest more in preventative and routine health care, as well as home health care for people that move from homelessness into housing?
- Are you actually designing a response for the population you think is served by your response?
- Is your winter shelter part of the professional shelter response in your community? Is the quality of service of your Winter Response at least equal to the quality of service provided in other shelters?
- If your Winter Response was to assist those that you perceive as the most vulnerable, could the same money and staffing been used to house and support these individuals rather than providing them temporary housing?
- How does a Band-Aid measure of a Winter Response fit into your pursuit of ending homelessness?

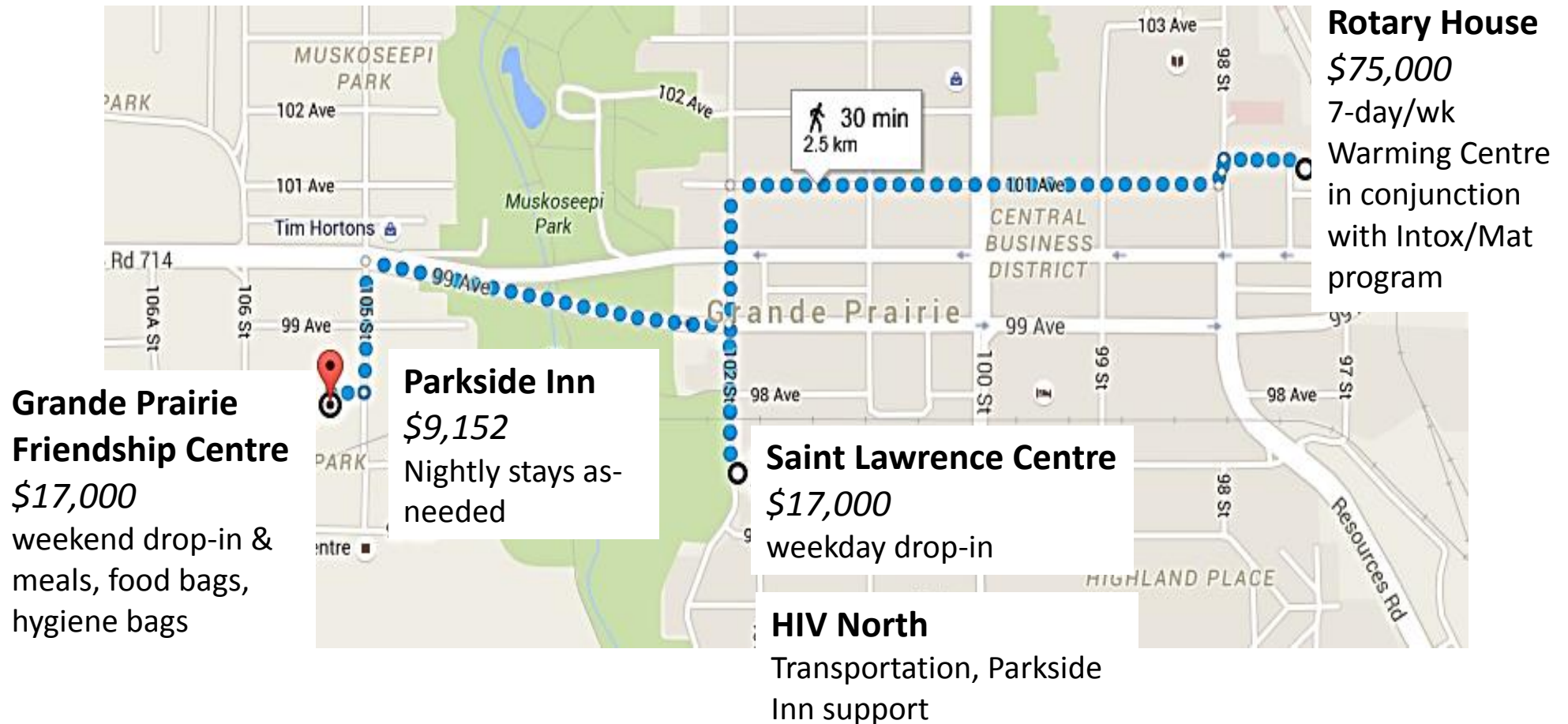
(OrgCode Consulting Inc, 2015)

Appendix F: Winter Timetable.

Monday is broken out to illustrate how the schedule works. Tuesday-Sunday are condensed.

Table 1: Winter Timetable 2015-16 (including community meals)											
	Monday			Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday		
7am	Rotary House Warming Centre	Salvation Army Breakfast; Lunch; Dinner		Warming Centre opens.	Warming Centre opens.	Warming Centre opens.	Warming Centre opens.	Warming Centre opens.	Warming Centre opens.		
8:30am				SA breakfast begins	SA breakfast begins	SA breakfast begins	SA breakfast begins				
9am				Warming Centre closes.	Warming Centre closes.	Warming Centre closes.	Warming Centre closes.	Warming Centre closes.	Warming Centre closes.		
9am	Saint Lawrence Centre			SLC opens.	SLC opens.	SLC opens.	SLC opens.				
10am				SA breakfast ends.	SA breakfast ends.	SA breakfast ends.	SA breakfast ends.				
10am	Grande Prairie Friendship Centre				GPFC opens		GPFC opens	GPFC opens			
11:30			SA lunch begins	SA lunch begins	SA lunch begins	SA lunch begins					
12pm			GPFC opens			GPFC opens					
12:30			SA lunch ends	SA lunch ends	SA lunch ends	SA lunch ends					
1pm				GPFC opens							
2pm											
3pm							GPFC closes	GPFC closes			
4pm					GPFC closes						
5pm			GPFC supper begins; GPFC closes	GPFC supper begins; GPFC closes		GPFC supper begins; GPFC closes	Church of Christ Supper begins				
5:30pm					SA dinner begins			SA dinner begins			
6:30pm					SA dinner ends			SA dinner ends			
7pm	Rotary Warming Centre			SLC closes	SLC closes	SLC closes	SLC closes				
7pm				Warming Centre opens	Warming Centre opens	Warming Centre opens	Warming Centre opens	Warming Centre opens	Warming Centre opens		

Appendix G: Winter Community Map



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