A STEP-BY-STEP GUIDE TO

Developing Temporary Emergency Mat Programs

JUNE 2021

RDN

The Rural Development Network (RDN) sincerely acknowledges that **our physical office is located on the Traditional Territories of Treaty 6 and home to Métis Nation Region 4.**

From coast to coast to coast, **we acknowledge the ancestral and unceded territory of all the Inuit, Métis, and First Nations people** that call this land home and who have gathered on these lands for centuries.

We do this to reaffirm our commitment and responsibility in improving relationships between nations and to improve our own understanding of local Indigenous peoples and their cultures.

We are all Treaty People.

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INTRODUCTION AND PURPOSE OF THIS GUIDE

The purpose of this Guide is to provide communities with direction, insights, and best practices for starting and maintaining temporary emergency shelters – commonly known as "mat programs" – for the purpose of assisting local community members who are experiencing homelessness, with a specific focus on rural, remote, and Indigenous communities.

Often, rural and remote communities do not have emergency shelters or supportive/ transitional housing for people experiencing homelessness. In addition, communities may be limited in the resources, staff capacity, trained volunteers, as well as the time needed to implement longer-term responses to homelessness, such as housing or shelter solutions, particularly prior to the onset of inclement weather conditions. Therefore, mat programs may be the only immediate response to homelessness possible for these communities, and can be especially necessary during the coldest months of the year.

Over the past decade through its work on rural and remote homelessness and affordable housing in Alberta and across Canada, the Rural Development Network (RDN) has received multiple inquiries from communities requiring assistance with developing temporary emergency shelters or mat programs, including common questions such as:

- How does our community start a mat program?
- Where can we get funding?
- What is the process?
- How do we maintain and grow the program, once we've started?
- Can RDN help us?

In response, RDN facilitated a Pan-Canadian research project, with the intent of developing a framework for communities based on best practices and reconciliation. Through this consultation, we heard that not only is there a need for the creation of an online resource to help groups establish mat programs in any rural or remote community, but a desire to spread the conversation across Canada and collaborate between communities in the development of a coordinated response to homelessness.

The intent of this Guide is to provide communities with clear and concise steps– based on research, best practices, reconciliation, and lessons learned – to go from conception to implementation of a mat program. Steps will include, but are not limited to, addressing issues and concerns that commonly arise during the creation of mat programs; community engagement processes that align with the diversity across the country; addressing the limited capacity of communities; how to facilitate complex and difficult community conversations, and how to gain community and municipality support.

Public health emergencies such as COVID-19, floods and extreme heat amplify the need for resources that can facilitate rapid program set-up and delivery, particularly when time may be of the essence in helping community members. As well, though intended as a short-term, stop-gap solution, the creation of emergency mat programs frequently help galvanize local community discussion and organization to create longer-term programs and solutions for their housing and shelter needs.

RDN recognizes and acknowledges that temporary emergency shelters or mat programs are not a long-term solution to the homelessness and housing crisis affecting communities across the country. These programs only represent one response – frequently, immediate and minimal – to homelessness. However, due to the lack of resources available to rural and remote and Indigenous communities in the prevention and reduction of homelessness, these programs are often all that there is – and therefore, they frequently save lives.

WHO IS THIS GUIDE FOR?

This Guide is for any community or organization that would like to understand how to develop and maintain a temporary emergency shelter mat program in their community. Commonly, this tends to be undertaken by local non-profit organizations or municipalities, but could also include advocates, the business community, and any level of government interested in how to make mat programs more accessible.

While this Guide can be used by any community, the primary intended audience will be rural and remote communities in Canada, as well as First Nations, Métis, and Inuit communities – the reason being that, in our experience, these communities tend to have fewer available resources for addressing homelessness than urban shelters, therefore increasing the likelihood of needing a mat program as a stopgap measure. Though urban shelters often face their own issues with emergency shelters in areas such as funding,

safety, staff capacity, and barriers to entry, most urban communities do still have shelters available, whereas many smaller communities may have nowhere for anyone experiencing homelessness to go at all. However, urban centres in Canada, as well as communities beyond Canada's borders, could potentially benefit from the research, insights, and information in this Guide as well.

Although this guide is presented in a linear format that follows the general process of conception, planning, implementation, and maintenance/growth of your mat program, the steps may not follow entirely linearly and many can and likely will be undertaken simultaneously – for example, finding a location may coincide with determining your project feasibility, as well as engaging in the community consultations process.

When I look at the world,
I am pessimistic, but
**when I look at people,
I am optimistic.**

CARL ROGERS, 1961

Background/ Context

DEVELOPING TEMPORARY EMERGENCY MAT PROGRAMS

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WHAT IS HOMELESSNESS?

Often, when people think of homelessness, the most common perception is of people living on the streets in downtown areas of large urban centers. However, this is only a fraction of people who are experiencing homelessness or housing insecurity.

This Guide primarily utilizes the Canadian Definition of Homelessness as established by the Canadian Observatory on Homelessness (Gaetz et al., 2012), as well as separate definitions that account for the unique experiences of youth and Indigenous (First Nations, Métis, and Inuit) peoples (BC housing, n.d.; COH, 2016; COH, 2017)). Taken together, they form a comprehensive definition of how people in Canada are affected by homelessness or housing instability in a variety of social and cultural contexts.

HOMELESSNESS

HOMELESSNESS, ACCORDING TO THE COH DEFINITION, IS:

> "The situation of an individual, family or community without stable, safe, permanent, appropriate housing, or the immediate prospect, means and ability of acquiring it. It is the result of systemic or societal barriers, domestic violence, a lack of affordable and appropriate housing, the individual/household's financial, mental, cognitive, behavioural or physical challenges, and/or racism and discrimination.

Most people do not choose to be homeless, and the experience is generally negative, unpleasant, stressful and distressing. Individuals who become homeless experience a range of physical living situations. These various living situations include:

UNSHELTERED: Absolutely homeless, living on the streets or in places not intended for human habitation. (e.g. living on sidewalks, squares, parks; in vehicles, or garages, etc.).

EMERGENCY SHELTERED: People who are staying in overnight shelters due to homelessness as well as those staying in shelters due to family violence.

PROVISIONALLY ACCOMMODATED: People with accommodation that is temporary or that lacks security for tenure (e.g. couch-surfing, living in transitional housing, living in abandoned buildings, living in places unfit for human habitation, people in domestic violence situations, etc.).

AT RISK OF HOMELESSNESS: People who are not yet homeless but their current economic and/or housing situation is precarious or does not meet public health and safety standards.

> "...for many people, homelessness is not a static state but rather a fluid experience, where one's shelter circumstances and options may shift and change quite dramatically and with frequency," including on a daily or even hourly basis. For the complete definition and extensive explanation of all four categories, please refer to the full Canadian Definition of Homelessness (Gaetz et al., 2012).

Another term that you may occasionally hear in relation to homelessness is *chronic homelessness.* This is becoming less commonly used now in official definitions, but is still often used colloquially. A key difference from the above definitions is that while they refer to *states* of homelessness, this refers to *duration* of homelessness.

The lengths used often vary slightly between official bodies, but "chronic" homelessness typically describes a condition when someone has been homeless for a period of greater than 6 months, or multiple extended, intermittent periods of homelessness over a period of several years (sometimes also referred to as **episodic** homelessness) (Canadian Observatory on Homelessness [COH], n.d.-b; Government of Canada [GoC], 2020c). Although commonly used to describe more severe unsheltered homelessness in lay terms, any of the states of homelessness described above can be referred to as chronic or episodic.

YOUTH HOMELESSNESS

Youth homelessness refers to the situation and experience of young people between the ages of 13 and 24 who are living independently of parents and/or caregivers, but do not have the means or ability to acquire a stable, safe, or consistent residence (COH 2016).

INDIGENOUS HOMELESSNESS

Indigenous homelessness not only looks different, but is categorically different from how non-Indigenous people experience homelessness in Canada. Jesse Thistle describes Indigenous peoples' homelessness as more than a lack of structure of habitation that includes a disconnection from healthy relationships through historic displacement, loss, spiritual and disconnection, and loss of the land (Thistle, 2017).

According to the Aboriginal Standing Committee on Housing and Homelessness (2012), Indigenous homelessness is:

> "a human condition that describes First Nations, Métis and Inuit individuals, families or communities lacking stable, permanent, appropriate housing, or the immediate prospect, means or ability to acquire such housing. Unlike the common colonialist definition of homelessness, Indigenous homelessness is not defined as lacking a structure of habitation; rather, it is more fully described and understood through a composite lens of Indigenous worldviews, that includes a breakdown of relationships."

For more information on Indingenous Homelessness, please see the following link. homelesshub.ca/sites/default/files/COHIndigenousHomelessnessDefinition.pdf

ABOUT HOMELESSNESS IN RURAL AND REMOTE AREAS

All of the types of homelessness thus far mentioned – from people living absolutely unsheltered, to people who may be low-income and at risk of homelessness – occur in rural and remote areas and Indigenous communities, in addition to urban centers. The key difference in rural and remote and Indigenous homelessness is the hidden nature of homelessness – therefore many people often do not realize that homelessness still occurs frequently.

While rural, remote and Indigenous communities may have people living absolutely unsheltered – particularly in encampments, living in vehicles, in wooded areas, as well as on the street – much of the homelessness often falls into the provisionally accommodated category (ie. couch-surfing, severe overcrowding, living in abandoned or inadequate buildings, etc.). Although people in these situations do not have permanent, stable housing, they are not identified or recognized as experiencing homelessness because they are not visible, contrary to homelessness in the cities. People may also be more likely to try to conceal their lack of stable housing due to shame around their situation, since there can be a greater likelihood of being known and identifiable in a small community as compared to the downtown core of a city.

This hiddenness can create the perception that homelessness is an urban issue limited primarily to the downtown cores of larger cities, rather than a systemic issue that can affect any individual, family, or community. As a result, many municipalities and smaller

communities can develop the impression that homelessness does not exist in their community. Although limited research exists on homelessness in rural and remote areas, the studies that have been conducted have never found a rural community that has no one experiencing homelessness, based on the official definitions (Waegemakers-Schiff, 2014). However, due to that widespread perception combined with the lack of hard evidence, this frequently results in fewer, if any, resources for those struggling, including emergency shelters, even though the service providers that do exist are often well aware of the extent of the problem.

As a result, many smaller communities may not have emergency shelters for people to go if they need shelter (or even in many cases, domestic violence shelters, though these tend to be more common). Even when they do exist, shelter services may be limited by eligibility requirements or capacity limits, such that some people do not have anywhere for adequate shelter. This means that planning and implementing temporary emergency shelters or mat programs, while long-term solutions are being developed, can be critical for saving lives.

In 2017, the RDN developed the Step-by-Step Guide to Estimating Rural Homelessness to create a free resource to allow rural communities to conduct data collection on their housing and service needs including what services people who are homeless or at risk of homeless are accessing. (Alberta Rural Development Network, 2019). Since then, the RDN has conducted province-wide counts in Alberta in both 2018 and 2020, and the Guide has been utilized elsewhere across Canada, similarly finding people in every community surveyed thus far that have met the official definitions of homelessness. Recognition of homelessness in rural and remote areas is growing, but it is still the exception, rather than the rule.

"The program **helped** me get a **place to live**."

PARTICIPANT OF AN
EMERGENCY MAT PROGRAM

WHAT IS A MAT PROGRAM OR TEMPORARY EMERGENCY SHELTER?

Temporary emergency shelters that exist primarily to protect people from the elements – usually during (but not limited to) the winter months when temperatures drop to the point of being extremely dangerous to human survival – are often called mat programs. This is because the most minimal form of this type of program consists of a room in a building with mats on a floor where people can sleep for the night and stay warm, supervised by local social agency staff or community volunteers. The key aspect that distinguishes mat programs from more established emergency shelters is their temporary nature, as they generally exist to fill a gap in community services and shelter options.

"I like having a warm place to sleep and receive food and help"

RESPONDENT WITH LIVED EXPERIENCE

Depending on resources, need, and local capacity, such programs can provide a variety of services and may include paid staff members; more extensive bedding options (ie. air mattresses, cots, bunk beds, etc.); enhanced basic needs support (ie. food, laundry, showers); security guards; storage spaces or lockers; connections and referrals to other programs; and even case management, as some examples illustrated by a pan-Canadian survey RDN conducted about mat programs.

It is important to recognize that, while the people staying in a mat program would fall under the "emergency sheltered" category of the Canadian Definition of Homelessness as well as the Housing Continuum utilized by the Canada Mortgage and Housing Corporation (CMHC, 2018), people who fall into any of the categories of homelessness and any portion of the housing continuum could require a mat program at some point.

Sleeping Rough

Couch-surfing

Spending over 30% of income on housing

Emergency Sheltered

Housing needs major repairs

Severe over-crowding

HOMELESSNESS

HOUSING INSECURITY

RENTING AND OWNERSHIP

CORE HOUSING NEED
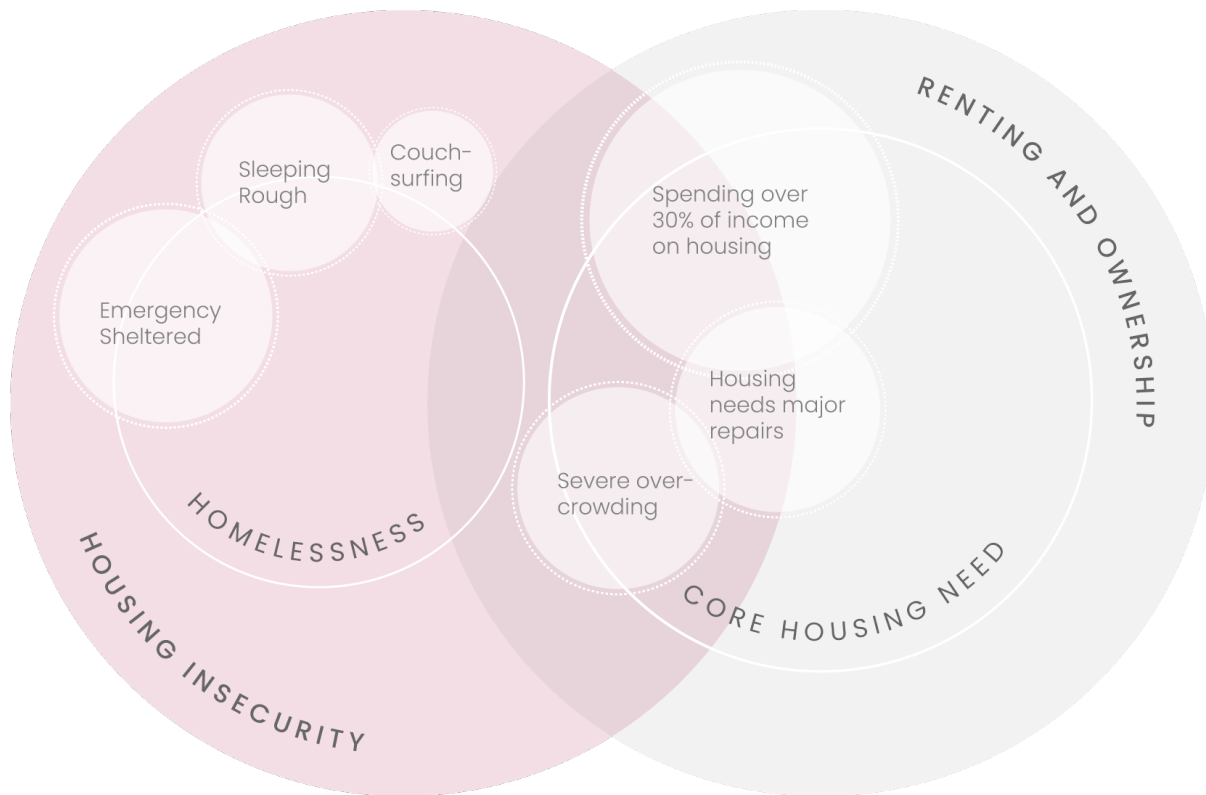
This graphic is based off of the Housing Continuum as pictured by the Canadian Mortgage and Housing Corporation (2018).

For example, someone living absolutely unsheltered on the streets may need a shelter during extremely cold weather; someone who was couch-surfing with a friend (considered provisional accommodation) could be told that they can't stay with them any longer; and someone who has a low-income and is at-risk of homelessness could be evicted due to inability to pay their rent or mortgage due to an emergency medical bill. Given that, based on recent statistics, more than 50% of the population in Canada could be considered at-risk of homelessness (Simpson, 2021), a significant portion of the population could require temporary emergency shelter for survival at some point in their lives – therefore making mat programs a vital part of the housing spectrum, especially in places where resources and shelter are lacking.

Creating a Mat Program

DEVELOPING TEMPORARY EMERGENCY MAT PROGRAMS

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CREATING A MAT PROGRAM

It may be tempting to get going on your mat program idea as quickly as possible (and sometimes, necessary, if cold weather is approaching), but, it is important to consider that the decisions that you make early on will set the tone for the entire program and may be difficult or impossible to change or reverse down the road.

Strong policies, adequate training, and shared approaches to client care and community support will allow for a strong framework that will: prioritize increased capacity; ensure staff and volunteers are well-trained and receive ongoing training; provide trauma informed care; and ensure safety for clients, staff, volunteers, and the community.

Therefore, taking as much time as you can to plan your approach and consider all the different factors at play before getting to work, even if you need to move quickly, can save you unexpected challenges and provide your program the outcomes you are looking for.

DESIRED OUTCOMES

Along with thinking about the purpose of your program and how it will operate, it can be useful to also think about your overall desired outcomes. Is the purpose of this project solely to provide shelter for people during the winter months (with no longer-term or larger goals than that), or do you plan this to be the first step of a much broader conversation about homelessness and housing in your community? When the program is up and running, think about what it looks like on a daily or nightly basis. How will you measure success, and how will you know what needs to improve? Even at this early stage of the process, having this initial concept in mind can guide you, even as it may need to be refined as you go through the process of practical implementation, once you start to look more closely at the budget and resources available to you, the location of the shelter, and the programs or services you want to offer.

DETERMINING ORGANIZATIONAL CAPACITY

This section is adapted from the Sustainable Housing Initiative document, A Step-by-Step Guide to Developing Affordable Housing (SHI, 2019).

If your organization is thinking about developing a temporary winter emergency mat program evaluating your organizational capacity/readiness and identifying the community need are vital steps to ensure a strong foundation for a strategic framework.

The first step in assessing your organization's capacity and readiness is to review your organization's structure, leadership, financial position and front line staff and administrative capacity.

"We often get mixed messaging from our local elected officials. **They have very different viewpoints** about how to solve these issues **especially who should take responsibility in developing a response.**"

EMERGENCY MAT PROGRAM SERVICE PROVIDER

REVIEWING ORGANIZATIONAL STRUCTURE

It is important to consider your organization's mission, objectives, and strategic priorities to ensure they are in line with your decision to develop, implement and operate a temporary winter emergency shelter/mat program. When reviewing your organization's structure ensure you gain a clear understanding of its capacity to undertake such a project.

- Do you have a strategic plan or mission that identifies homelessness as a key activity?
- Does management have the ability to manage additional activities that will arise from such a project?
- Does the organization have adequate liability insurance for this project?
- Do you have a process for making timely decisions?
- Do you have positive relations with your local government, and can you count on them for support, approvals and funding?
- How strong is the internal support of the board, members, and staff for the project?

For more information on organizational assessment please see the Organizational Assessment Worksheet. Appendix : Worksheets to work through

EVALUATING ORGANIZATIONAL LEADERSHIP AND ADMINISTRATIVE CAPACITY

Understanding your organizational structure and individual roles and responsibilities is important at this stage of the project. This will help you understand what support you might have available for a potential project and who might make up the project team. Support from senior leadership will be essential for a successful project.

- Does your staff have adequate skills and training to manage such a project?
- If staff require training, what are the steps to ensure training is completed in a timely manner?
- Do you have connections with, or access to, external experts who can assist you?

For more information on organizations assessment, please See Section 2 of the Organizational Assessment Worksheet.

REVIEWING FINANCIAL POSITION AND CAPACITY

Reviewing your organization's financial position and capacity to take on such an initiative is essential. Consider whether your organization has a diversified and stable funding base for operations.

- Do you have adequate and consistent cash flow?
- Do you have the capacity to apply for grants and or fundraise?
- Do you have the capacity to complete funder reporting requirements
- Have you identified funding sources?

> "I define **connection** as the **energy** that **exists between people when they feel seen, heard, and valued;** when they can give and receive without judgment; and when they **derive sustenance and strength from the relationship.**"
>
> BRENÉ BROWN

DEVELOPING A LOCAL COALITION

Creating a functioning mat program or a temporary emergency shelter touches on many different areas beyond social supports, building code regulations, town planning, safety, and so on. Developing a coordinated community response based on the philosophy of collective impact will allow for collective action to emerge fluidly over time. One way you can develop such broad-based support and create a united vision for this community project is *through the creation of a homelessness coalition/task force, a poverty reduction committee or a housing insecurity community response team.*

If your community doesn't currently have a homelessness coalition, committee, or task force, the need for a mat program or temporary emergency shelter can be a good incentive to start one. The intent of such a coalition is to create a body of representatives from relevant organizations within the community with a stake in reducing homelessness, who can all advocate together for a common cause.

Local homelessness coalitions can often be a first step to creating longer-term solutions for communities, in terms of support programs and services, as well as further developing areas of the housing continuum in your region where there are gaps. It can be common that service providers may not be connected to each other or even aware of what programs and services other providers in the community offer, which can lead to service duplication or clients not being connected to the best services for their needs.

RDN has heard from several communities across Canada that when service providers are working in silos, it is often so simply due to a lack of resources and time needed

to coordinate and streamline efforts. This lack of communication and coordination can prevent individuals from getting connected to the best services for their needs. Therefore, another benefit of creating a coalition is that it can help facilitate this process of breaking down barriers and beginning the process of coordinated service delivery within your community, which we will address further in the section on Coordinated Access.

Developing a local Coalition that is based on collective action will assist in many areas of mat program development, including: deciding on who will lead the project; identifying funding sources; exploring what processes and best practices will be most aligned with your project; managing expectations; identifying what your municipality will and won't be involved in; changing the conversation about how all levels of government share responsibility; and developing service delivery guiding principles and strategies to create a strategic coordinated community response to homelessness.

Membership on coalitions can be wide-ranging and include various representatives from different sectors, such as frontline service providers; Indigenous organizations; members of municipal, provincial or federal governments; those with lived experience; healthcare workers; members of advocacy organizations; RCMP, and or local Police and Enforcement departments, academics and researchers in the field, amongst others.

There are several different types of coalitions and committees that form in communities to address issues around homelessness and housing. Some of them may be run directly by registered non-profits or municipalities, while others may form independently and not register as a non-profit themselves at least initially (though many that go this route and partner with a non-profit as a fiscal agent in order to deal with any funds).

Here are some of the more common types of committees, though there is often considerable overlap between them. The title of your coalition – though usually reflective of the desired issues your group will be focusing on – does not necessarily matter as much as the goals and aims you wish to achieve together, which you typically outline in a document called a **TERMS OF REFERENCE** that outlines the purpose and goals of your coalition.

HOMELESSNESS COALITION: these types of committees tend to focus primarily on homelessness intervention, prevention and reduction, though they can also address other connected issues as well, such as supportive/transitional housing development. Often the goal is to identify root causes of homelessness while simultaneously developing coordinated responses.

POVERTY REDUCTION COALITION: typically broader in scope than homelessness coalitions, poverty reduction coalitions may focus on a variety of issues linked to homelessness, such as housing, food security, racism, transportation, living wage research, etc.

HOUSING COMMITTEE: these committees tend to focus most on the continuum of housing, but may also work on related issues such as homelessness, health, etc. As municipalities usually play a large role in developing housing, these types of committees tend to have significant municipality representation.

We have included links in the appendices section to several example Terms of Reference for various types of coalitions from across Canada that you can use as a guideline for developing your own organization's terms of reference.

SERVICE DELIVERY GUIDING PRINCIPLES AND STRATEGIES

Identifying your organizational values will guide the conversation and development of the service delivery guiding principles that will determine the type of mat program/shelter your organization will implement. Common values such as empathy and treating people with dignity and respect are often the building blocks that organizations start with to identify their guiding service delivery principles and philosophies.

Service Delivery principles and strategies are often directed by staff, board of directors, community need and council direction. Aligning the needs, the response required and the service delivery principles can be challenging and is often informed based on the variety of knowledge and experience developing such projects.

The following is a list of examples of service delivery principles to guide you in these conversations. This is not an exhaustive list and is provided here as a reference as you determine your own values, principles and philosophies.

The 2009 Manitoba Emergency Homeless Shelter Manual speaks to the importance of shared principles that promotes a philosophy for service provision. It is further noted in the 2011 London Emergency Shelter Guidelines that: "While the principles recognize that everyone should be entitled to shelter services there may be service restrictions imposed based on individual actions that seriously compromise the health, safety and security of the resident, other residents, staff, volunteers and/or the facility."

THE FOLLOWING ARE EXAMPLES FROM THE PROVINCE OF MANITOBA AND ONTARIO GOVERNMENTS, BUT THESE CORE SHARED PRINCIPLES CAN BE ADAPTED FOR INDIVIDUAL SHELTERS.

1. Persons experiencing homelessness are entitled to emergency homeless shelter service regardless of political or religious beliefs, ethno-cultural background, (dis)ability, gender identify, communicable disease (eg. HIV/AIDS, tuberculosis) and or sexual orientations. All emergency homeless shelter staff and volunteers must respect and be sensitive to the diversity of residents. All emergency homeless shelter staff and volunteers will promote a culture of tolerance and respect within the emergency homeless shelter. Discriminatory and racist incidents or behaviours will not be tolerated. (Manitoba)

2. Emergency homeless shelters have a mandate and responsibility to assist and encourage residents toward increasing levels of self-reliance and self determination. Emergency homeless shelter boards must take an active role in developing policies that support residents to achieve their goals. (Manitoba)

3. The health and safety of residents, volunteers and shelter operator staff is of the highest importance in each shelter. Training, policies, procedures and regular maintenance are intended to encourage, improve and maintain the health and safety of all people residing, volunteering and working in the shelter (London)

4. All people staying in shelters are entitled to safe and nutritious food. Shelter operators will work to accommodate special dietary needs (London)

THE SASKATOON HOUSING INITIATIVES PARTNERSHIP IS GUIDED BY THE FOLLOWING PRINCIPLES:

While individual service providers make their own policies, they also collectively agreed to be flexible with their policies during extreme cold weather to ensure people are safe. 2020 brings an added complexity with the COVID-19 Pandemic. Agencies that provide warm-up locations, or additional indoor services will need to collaborate this year to maintain physical distancing regulations while providing methods of reprieve from the cold. Partners and stakeholders will have to communicate on available services to clients in need and provide clear direction on how to access support in the cold. This strategy is guided by the following principles:

1. No one should sleep outside on a cold night;

2. Individual dignity must be respected even in emergency situations: each person should have a space to safely social distance and be should be provided appropriate PPE if required.

3. Shelters will do their best to ensure everyone is allowed access to emergency shelter including intoxicated persons or those previously placed on a Service Review List; If an individual is not admitted, shelters are responsible for making a referral;

4. Health and safety of staff and other residents is a priority and admission to a shelter must take into account both the health and safety of staff and residents;

5. Everyone will work to ensure that individuals and families experiencing or at-risk of homeless are aware of safe, available sleeping options.

Operating Principles for The Salvation Army Emergency Shelters, Canada & Bermuda Territory (2015) are intended to: Align emergency shelter services with evidence-informed, outcomes- focused best practices; Record and honour the ideas and best practices shared by Salvation Army staff and clients; Balance consistency and clarity across Canada with flexibility and responsiveness at the local level; Provide emergency shelters with information, evidence, and language they can use to inform their contributions to planning tables and negotiations with funders; Support the Salvation Army leadership as it contributes to national, provincial and local discussions on strategies to end homelessness.

THE SALVATION ARMY EMERGENCY SHELTERS, CANADA & BERMUDA TERRITOR OPERATING PRINCIPLES ARE:

1. We take a person-centred, holistic approach and ensure that people with particular vulnerabilities are supported.

2. We help people experiencing chronic and episodic homelessness to access stable, positive housing and appropriate supports.

3. We use harm reduction principles to guide services to clients and behaviour-based criteria for restricting access to shelter.

4. We ensure people who have high needs receive accompaniment and follow-up services.

5. We aim to make every discharge from shelter an organized departure.

6. We coordinate services and participate in planning with community partners.

7. We track and analyze outcomes to inform planning and policy decisions and continuously improve services

We have included additional service delivery principles for you to review and reflect below.

PERSON/CLIENT-CENTERED APPROACHES

A person/client-centred approach philosophy is when the client is seen as a 'person' and not their journey/challenges. When the client is respected in this way, the client/worker relationship evolves and the client is empowered to focus on their individual assets in making their own choices. This philosophy is based on each client being unique and there is no 'cookie cutter' approach to individual client needs.

HARM REDUCTION PHILOSOPHY

Harm reduction is an approach or strategy aimed at reducing the risks and harmful effects associated with substance use and addictive behaviours for the individual, the community and society as a whole. Harm reduction can be used in a variety of contexts, but focus on what action will be least harmful to the client and what is best for the client. This evidence based approach is different for each client as it follows the person/client centered approach and is a "meet the client where they are" lens. Consumption Sites, a pregnant woman smoking instead of drinking and the homeless having inside shelter in the coldest months are examples of harm reduction.

REDUCING BARRIERS TO SERVICE

This refers to any ways that services are made easier and more accessible for clients in a variety of different life situations and can include many different factors (accessibility, anti-racism or anti-discrimination policies, harm reduction approaches to substance use, language translation, etc.)

PROMOTION OF COMMUNITY KNOWLEDGE AND REDUCTION OF STIGMA OR DISCRIMINATION

Operating educational or outreach programs along with your mat program can help to dispel myths, misconceptions and misrepresentations about homelessness and associated issues like substance use and addiction amongst the broader community, while also increasing openness and quelling fear amongst people who may be struggling but are apprehensive about accessing services.

TRACKING OUTCOMES AND DATA COLLECTION

Having data collection standards for your program will help determine how effectively your program is assisting clients in need in the community, justifying your ongoing efforts as well as providing a case for ongoing or expanded funding.

STRENGTH-BASED

This philosophy focuses on an individual's strengths and abilities. The worker will need to understand the assets and resources available to them, in order to empower the client to set their own goals and walk alongside them on their journey.

> ## "Trauma is not what happens to you.
> Trauma is what happens inside you, as a result of what happens to you."
>
> ### DR. GABOR MATÉ

TRAUMA-INFORMED CARE LENS

A trauma-informed lens considers that everyone has experienced some type of trauma in their life and that this shapes their perception of the world, their actions, behaviour, choices and responses. It is vital to be mindful that anything may trigger a client, whether or not the worker thinks it's significant or not. Integrating a trauma - informed lens will allow for a more empathetic, individual response that results in more positive outcomes.

Remember, "everyone has experienced some type of trauma in their life" which includes the front line workers, management, administration, and volunteers. With that being said, being trauma informed means recognizing that staff need to feel 'safe' to debrief and deal with the issues they face every day through a trauma informed lens.

SUPPORTIVE REFERRALS

Also sometimes referred to as "warm transfers", this is where you help a client connect with another service provider and actually ensure that they connect with that service (as opposed to just giving a client an address or number for a service, which they may or may not reach out to).

DISCHARGE PLANNING PROCESS

Also sometimes referred to as "transition planning" or "journey planning", this is part of case management work and ensures that when a client is ready to leave a service, there is a plan in place for them to ensure that they know what to do next or how to get connected to additional services more appropriate for the situation or state they're now in.

CASE MANAGEMENT

Case management is an approach and type of service that can be very complex and looks different between service providers —especially those in rural communities. Case Management can be often adapted to reflect clients' individual needs. As Morse (1999) states, landing on one definition that fits all contexts is very difficult.

 The Canadian National Case Management Network (NCMN, 2009) has defined case management as a "collaborative, client-driven process for the provision of quality health and support services through the effective and efficient use of resources. Case management supports the client's achievement of safe, realistic, and reasonable goals within a complex health, social, and fiscal environment" (p.7).

Often, in the rural communities, one worker is 'wearing many hats' along the service delivery journey. Ensuring the client receives the support they need along the way is the basis of case management. Traditional case management includes steps such as: intake; assessment, case planning; advocacy; coordination of services; follow up, discharge planning, etc, however the level of case management varies depending on the capacity of service providers.

COORDINATION OF SERVICES

Service coordination occurs when a variety of services in a community or region collaborate and organize their efforts to ensure that people are being connected to the best and appropriate agencies and programs for their specific needs. Service coordination can be relatively simple or it can be more complex in the case of coordinated access.

COORDINATED ACCESS

In larger urban settings, coordinated access systems assist and promote increased coordination among service providers and shelters, with the aim of connecting clients to

the best supports and resources for their unique needs. In addition, coordinated access helps prevent people from being sent from provider to provider, having to tell their story over and over before they are able to access and receive necessary services. These systems can get complex and often include elements such as common assessment tools, single points of entry to the system, and 'by-name lists' – a single list shared between providers of everyone currently being assisted by the system.

Coordinated access is relatively new in rural areas, and often smaller communities do not have the capacity to implement such a system. Case conferencing between agencies that see mutual clients is an example of coordinated access in rural communities.

The creation of a local coalition or interagency meetings often starts the conversation to expand the coordination of local services.

CULTURALLY APPROPRIATE SERVICES

This refers to services that take into consideration the diverse cultural backgrounds of clients when providing services. Clients who are racialized, newcomers to Canada, Indigenous, or from religious or ethnic backgrounds may not connect with that way of providing services, which can result in barriers to getting assistance. As well, staff or volunteers at a service may not understand different cultural values, which can result in both overt and subtle forms of discrimination. Approaches appropriate for one community may not be appropriate for others. Culturally appropriate service provision ensures that people from other cultures and backgrounds have access to services that fit their understanding of the world. (Canadian Labour Congress, 2017).

"The way that Canadians understood **homelessness** by the Canadian definition was about **not having a house to live.** I realize that it was more about a **dispossession from something called 'all my relations'** which is an Indigenous worldview where **everything is interrelated, interconnected.**"

JESSE THISTLE

HIGH BARRIER VS. LOW BARRIER

These terms refer to how many rules, restrictions, and/or standards a service may require a client to meet before they will be served or allowed to stay in a shelter. Typically, no one sets out to develop a "high barrier" shelter intentionally. However, the policies and procedures a shelter or mat program chooses to enact can create a high barrier to entry, posing challenges to accessibility for people in certain situations and ultimately preventing people from accessing the service. Most commonly, this refers to alcohol and drug use - either by clients who are staying in the shelter (ie. being intoxicated or under the influence of substances while at the shelter), or using substances in the shelter itself.

A **WET SHELTER,** at very minimum, allows clients who are still using drugs and alcohol in some capacity to stay at the shelter. They differ, however, in terms of degree of leniency, depending on the rules put in place by the operator. These programs tend to follow a harm reduction philosophy, which emphasizes meeting a client "where they are" and prioritizes getting them help despite being under the influence, with the intent to ensure they stay safe and that by keeping them safe and healthy, their prospect for longer-term recovery increases.

In contrast, **DRY SHELTERS** often require clients to maintain sobriety within the shelter and or for a period of time prior to entering the shelter.

Both types of shelter have pros and cons that your organization or coalition must consider, based on a variety of factors. Wet shelters tend to be more easily accessible for clients due to lower barriers; however, the use of drugs and alcohol can also pose health and safety concerns for shelter users or result in more damage in need of repairs.

Conversely, dry shelters may be inaccessible to people struggling with substance use or addiction issues or may feel the need to lie about their use in order to gain access.

Therefore, this will need to be a discussion both within your coalition or organization, as well as with your broader community through the community consultation process, where the benefits and challenges are weighed before you decide what will work in your situation.

"It's hard to find treatment and detox, but they **let me stay here until a bed opens up**"

CHILDREN OR YOUTH

Every province and territory has varying rules and regulations for the protection of children and minors, therefore, the best approach to take here is to contact your local children services department in order to understand what your responsibilities in this area are as a shelter operator. This is encouraged regardless of whether you allow children into the shelter or not; for example, it could be useful to know if there may be any legal issues surrounding turning away parents who have children with them.

If you are interested in obtaining more information regarding youth shelters, please reach out to youth shelters in your province and territory, as the operators of those shelters would be well-aware of what regulations need to be maintained.

Project Feasibility

DEVELOPING TEMPORARY EMERGENCY MAT PROGRAMS

PROJECT FEASIBILITY

Project feasibility is one of the most important parts of the project development and must be constantly evaluated throughout the project's timeline. For the project to be feasible means that the project – in regards to whatever metric is being considered – could theoretically be viable and successful. Different community stakeholders including service providers, funders, government departments and those with lived experiences will not support or access the program if outcomes are not feasible, realistic, and practical, so it's important to be able to show how your project will have a positive impact on those with lived experiences and the community on an ongoing basis.

IN ORDER TO DO SO, THERE ARE VARIOUS TYPES OF FEASIBILITY THAT NEED TO BE CONSIDERED:

- Financial Feasibility
- Location Feasibility
- Community Feasibility

Usually, these feasibility assessments are conducted concurrently as they are interdependent with each other.

BUDGET AND FUNDING

A financial model/budget is used to assess the financial viability of the project (i.e. whether the project can be developed and operated on budget). It helps the organization or group responsible for developing the temporary winter emergency mat program by delivering detailed financial information about the proposed project and testing its feasibility. The financial document should be prepared with board/council approval that supports the feasibility of the project.

One important aspect of financial feasibility is ensuring the accuracy of estimations. It is important to cross-check your financial model's results and ensure that it is producing an accurate estimation for your project. It is important that the Financial Model includes all the key metrics listed below and is also presented in a clear and concise way.

BUDGET ITEMS YOU MAY NEED TO CONSIDER:

- Rent and/or damage deposit for the space you're using
- Utility costs (water, heat, electricity)

- Equipment costs / rentals (ie. Mats, linen, desks, lockers, etc.)
- Operational costs
    - Staff costs
    - Administrative costs (office supplies, payroll, cleaning/janitorial services, etc.)
    - Food (if you are planning to provide food)
    - Internet/phone
    - Laundry (if that is a service you'll be offering)
    - Maintenance costs (damages and repairs, renovations, etc.)
    - Security
    - Insurance
- Staff training
- Volunteer management, including recruitment, training, retention, appreciation, etc
- Cultural items (ie. Tobacco for elder offerings, elder honorariums)
- Ongoing community engagement (ie. Marketing, posters, room rentals for community engagement sessions, etc.)

A template sample budget is provided In Appendix that can be used as a starting point.

FINDING FUNDING FOR YOUR MAT PROGRAM

Long- and short-term funding will be a major determining factor on how and when your project will proceed. There is often confusion on what level of government is responsible for homeleness, if they are 'required' to provide funding, where projects can access capital funding vs operational funding and what the requirements are. The following is not an exhaustive list, but are recommended places to start.

1. Federal Reaching Home funding: Reaching Home has Community Entities that administer Reaching Home funding for your region. For example in Alberta, RDN is the community entity for Rural, Remote and Indigenous funding in Alberta. For more information on Reaching Home funding, please visit: https://www.canada.ca/en/employment-social-development/services/funding/homeless.html

2. Provincial or Territorial Government: Each province and territory set their own parameters on which departments will be responsible for this type of funding, the processes and eligibility. Building relationships with your Provincial or Territorial Government is recommended even if they do not have any immediate funds or grants to support your project.

3. Local municipality: Every community is unique and therefore there is no consistency in whether your local municipality has the capacity and or is willing to financially support such projects. Sometimes, when a municipality does not have the budget or capacity, they may be able to support the project in other ways.

4. Other Grants: Depending on your location and organizational status (charity vs municipality vs society, etc), there may be the opportunity to apply for grants from service groups, community foundations, corporate community sponsorship grants, and various other grants that support this type of work.

DETERMINING YOUR LOCATION

LOCATION WITHIN THE COMMUNITY

The location of your program in the community can be as important as the building itself, as this can directly impact the community support, the perception of the program, and a general understanding of the challenges people who are homeless face.

In some situations, choosing your structure or where it is located in your community may not be feasible or even possible due to limited options that will fit the need and/or change of zoning is denied and/or community decision-makers will only approve a specific location

It is important to consider other aspects of the location within the community besides the neighborhood or district. Though many smaller communities do not have public transportation, if your community does have a bus service (or has a bus stop for a regional or provincial bus service), it may be useful to have that close to your site. Additionally, considering its location relative to other community services can be helpful. This can include other social support organizations such as food banks, emergency services, and hospitals, as well as other areas such as grocery stores, employment opportunities, park space, etc. that impact quality of life. Though many small communities are walkable, having all your services in close quarters with each other can improve logistics and efficiency when working between organizations, particularly with clients who may not have vehicles or have mobility challenges. If the final location is not walkable friendly to other services, consider offering a shuttle service for residents to access day time services.

THE BUILDING ITSELF

Most mat programs are typically created in buildings that already exist – buildings, rooms, or spaces that are either currently unused, under-utilized, or donated specifically for the mat program to use. As these programs are intended to be temporary and created quickly in order to fill a service gap, building a new structure for the program itself is not feasible – the length of the development process often precludes this option. As well, if a building was going to be constructed, it would likely be intended for a more permanent, established shelter.

If you don't already have a building or space in mind for your program, the first step to finding a building is to ask around. Other service and community agencies in the community, as well as municipalities, may have leads on buildings or spaces that could be available for use, or may even have spaces that are available currently to use.

One area to explore is the prospect of getting a location donated – either by your local municipality, a business, another local organization such as a church, or a local philanthropist, all of whom may be able to offer a space rent-free or at extremely low cost. This can be a significant boost to your program, especially if they are willing to waive or cover such costs as rent or utilities, and take a large portion of the funding burden off your shoulders, as rent and utilities will often be amongst your largest budget items.

While it may be exciting to receive an offer of a room or building, it is still important to consider a wide variety of other factors before signing on, to ensure it matches the vision you have for your program. While it may seem that anything is better than nothing when you're trying to get your program up and running as quickly and efficiently as possible, taking that extra step can be the difference later on between enacting your program the way you wanted it, and having to cut out planned features or services because they don't fit with the space you have.

When taking into account a suitable location for such an initiative, it is recommended to consider the following initial factors:

- Size/number of spaces you need.
  - For example, if you have an estimate of how many people typically require shelter or are living unsheltered in the community at the moment; private spaces/rooms for men vs women, etc
- Relationship to adjacent properties;

- Rental and utility costs;
- Consideration of public impact and community consultation (with local council, people with lived experience of homelessness, and the general public);
- Availability of servicing (ie. roads, water mains, electricity, sewer lines);
- If the proposal is in line with the community's municipal plans and/or land-use bylaws (and if not, if the area will require re-zoning, which we will address separately below);
- Constraints (ie. sidewalk access, general accessibility, etc.);

"This is a good place – it's very helpful."

OTHER CONSIDERATIONS FOR YOUR LOCATION AND BUILDING

HOURS OF OPERATION

Besides the building, one of the other major decisions you will have to make about the operations of your mat program is what hours of the day your program is open. Your operating hours will dictate a significant amount about your program's operation, the equipment you will need, staffing requirements, and even some building code factors.

OVERNIGHT

The most common type of mat program is one that operates only during overnight hours, usually for 12-hour periods – typically, either 7 pm to 7 am, or 8 pm to 8 am. This means that clients can sleep there during the night, but they must be awake by a certain time and leave the building to be somewhere else during the day, but can come back for the next night.

As a result, these programs require a place for clients to sleep - frequently, a large single room with mats on the floor, organized in a way for maximum coverage, based on the capacity of your building or the room itself.

DAYTIME

These types of shelters are only open during daytime hours, and are sometimes referred to as "warming shelters", particularly in the winter, as they allow clients to come in from the cold to get refreshed and prevent frostbite or other health issues. Given that they are not open overnight, space isn't required for clients to sleep, you will still need to consider space for clients to sit or stand, such as tables, chairs or benches.

24/7

Finally, some shelters may choose to operate on a 24/7 basis, including aspects of both daytime and overnight shelters. While this provides the most flexibility and support for clients, this option is usually also the most resource-intensive. Organizations will require staff or volunteers to provide supervision for clients all day and night, and make other considerations, such as greater costs for supplies and utility bills to stay open all the time.

PERIOD OF OPERATION

This refers to the time of year when you plan for your mat program to be operating – for example, October 1 to March 31. The two most common types of mat program are **winter-only** programs and **year-round** programs.

Winter-only programs are open during the winter months, especially in Canada where temperatures can drop far into the sub-zero range and having no place to stay both overnight or during the day could result in injury (ie. frostbite, hypothermia) or death. When exactly that is will likely depend significantly on local factors that you and your coalition will be most familiar with; for example, a winter mat program in the northern territories would likely need to open earlier and end later in the season than a program much further south.

In comparison, **year-round programs** are open the entire year. Much like mat programs that are open 24/7, keeping a program open all year will require more resources, but they also may benefit from being able to maintain more momentum than programs that have definitive start and end dates (as any start or stop to the program will likely have associated costs, as well as other

When you decide to open and close will likely depend on many factors: when weather starts to become potentially hazardous in your community, your organizing committee, your lease or rental agreement for your building or room, the funding and staff resources available, etc.

However, some communities may also benefit from a mat program during warmer parts of the year as well. Sleeping outdoors, or in precarious circumstances without stable shelter, can always cause stress and safety concerns for people, even if the climate at the time isn't actively hostile.

STORAGE FOR CLIENTS

Many people utilizing your mat program may have a personal bag that they carry their belongings around in; therefore having somewhere safe to store their belongings on site while they stay can be the difference between someone keeping all their possessions intact, and someone having all their items damaged or stolen – requiring further help and assistance. This can make having lockers an indispensable feature of your mat program.

Additionally, some programs have also featured ID storage for clients as a specific service, as lost ID is a common occurrence for people experiencing homelessness; not having ID can make connecting to other services challenging if not impossible; and many rural communities don't have registries, making it difficult and costly to help clients acquire new IDs.

Beyond just personal bags, many clients may be in possession of larger items as well, such as bikes, shopping carts, etc. that they're using to carry their belongings around. Depending on your building, entrances, fire code regulations, etc., these may not fit within your building, therefore potentially requiring areas where people can secure these items (ie. places to lock up bikes, larger external storage units). Policies may need to be developed around this, particularly in terms of what liability and responsibility your organization has as operator for any items that get misplaced, stolen or damaged.

"I wish they had more locker space– I have to leave some of my stuff outside"

RESPONDENT WITH LIVED EXPERIENCE

PETS

A common barrier cited by people who are homeless but don't access emergency shelters is that many of them may not allow pets inside. However, animals can be vitally important companion animals to people experiencing homelessness, particularly if

they are isolated or on their own most of the time. As a result, some will opt to sleep outside or forgo staying in a shelter if their pets can't stay with them. However, allowing pets into the shelter can pose challenges, particularly around safety and hygiene – for example, pets may make messes, cause damage to your building, or cause injuries to other clients. Since there are liability considerations around allowing pets into your shelter, work with your local municipality and your homeless coalition to determine what regulations around this exist locally, and what will work best in your situation.

ACCESSIBILITY

Another key consideration when assessing a potential building for your mat program is how accessible it is for clients who may have mobility issues or who live with physical or mental disabilities or limitations. For example, a room for your mat program that is accessible only by stairs will be unusable by someone in a wheelchair, whereas, if your building has a ramp or a lift, this will allow clients with certain mobility restrictions to be able to access your facilities with fewer challenges.

Given the resources that you have at your disposal while creating a mat program or time you have to act, it realistically may not be possible to ensure that a building is fully accessible for all who need additional supports, in the way that may be expected or required for a permanent shelter. The most important part is that you do your research – and then do your best based on the resources at your disposal, ensuring that you have put thought into a number of different factors and that you have plans in place for clients who may not have access to the necessary accommodations they require.

A FEW MORE COMMON ACCESSIBILITY CONSIDERATIONS:

- a ramp or an automatic lift, for clients who are unable to use stairs;
- handrails, to prevent falls and improve stability for clients with
- accessible washroom stalls with rails to grip
- signage with large lettering, for people with visual impairments

The full extent of accessibility standards and regulations for buildings is beyond the scope of this guide to go into more significant detail. However, there are many helpful provincial and national resources out there by organizations that work on accessibility standards and disability advocacy that can provide you with more thorough guidelines and direction in this area, such as **Accessibility Standards Canada** (GoC 2021b). Consult with your province or territory's health authorities, legal standards, as well as accessibility advocacy groups that specialize in this area, to see what you can find in terms of assistance and guidance.

WASHROOMS AND/OR SHOWER FACILITIES

The washroom facilities your clients have access to at your mat program will often be dictated substantially by the facility you have access to itself, as this may be determined both by the building arrangements (ie. your lease) as well as building capacity. You may not have much choice about the facilities you have at your disposal, but you may still have a choice about how you utilize them. Having facilities that are well-lit, regularly restocked, and cleaned will improve the overall quality and safety of your facility.

One relevant consideration in regards to washrooms can be whether your program offered showers. Whether you offer showers or not will likely be determined not only by whether you have a budget for showers, but whether you have shower facilities available in your building at all. Even if you do have such facilities, this is another area where pros and cons must be weighed and your individual program's situation must be considered. For example, having showers can come with additional health, safety, and hygiene concerns that could require additional cleaning services (ie. laundry services) or policies and procedures. At the same time, it's important to remember that people who are homeless and using your program may have no other opportunities to shower, bathe, or otherwise clean themselves.

As is still common, most facilities will have both a men's and women's washroom; however, you may want to consider making your washrooms gender neutral, which allows anyone to use any washroom, regardless of their gender orientation. This can make clients who identify as LGBTQ2S+ more comfortable with your facility, as well as your program (simply due to the fact that their needs have been considered). There are a few more extensive guides on gender-neutral washrooms linked in the Appendices.

OTHER CONSIDERATIONS FOR YOUR WASHROOMS COULD INCLUDE:

- Personal hygiene items: many women experiencing homelessness, as well as people who identify as LGBTQ2, may not have access to tampons or pads, which can result in what has been called "period poverty" (D'Sa, 2019).
- sharps container: whether it is within your shelter's policies or not, some clients may use injectable drugs in your facilities. Having a sharps container can give them somewhere that clients or staff can put used needles that will protect the health and safety of other clients. Consult with your provincial or territorial health authority to ensure that you are following their best practice standards with regards to sharps disposal.

ZONING AND BUILDING REGULATIONS

Understanding zoning is important because it has legal implications for how your building can be utilized – and if these aren't followed, your operation can be shut down by municipal authorities. For example, in some zoned areas, people may not be allowed to sleep overnight in buildings.

Zoning is a planning control tool for regulating the location, design, and uses for land in a municipality or region. It does so by dividing land up into different 'zones', which can be applied to specific areas throughout a municipality. Each 'zone' provides instructions regarding: the permitted uses of buildings (ie. restaurant, single family home, apartment, park, institutions, etc.); the general urban design of buildings (distance a building must be from the street, building height requirements, etc.); the density (number of units); and other regulations, which are applied to all land that is under the same type of zone (Sustainable Housing Initiative, 2019).

Zoning does not typically regulate the aesthetic, architecture, or materials a building can have. A variety of different zones are applied to different areas around a municipality, based on the context of each area. Zoning determines what your 'development rights' are. If a specific piece of land you own is not zoned appropriately to build what you hope to build, you have to either apply for a 'rezoning' (to change the zoning of the land using one of the other zones used throughout the municipality), or a site-specific zone that is specific and unique to your particular parcel of land.

Once you've identified prospective buildings for your program, consult with your local municipal planning department in order to identify what the zoning requirements are for your overall operation. Zoning and plans can be amended, but it is a process that requires the input of local policymakers, and often has to go to municipal councils for approval and community input. If you have the resources, getting in touch with a local Land Use Planner or Registered Professional Planner who has rezoning experience can also be invaluable, as they can provide additional expertise that can be vital in your discussions.

BUILDING REGULATIONS

There may be other regulations around your prospective building or space that you need to familiarize yourself with before you start operating – for example, the fire code, which is the number of people that can safely be in a building or room at one time before it becomes a danger if there happens to be a fire. As such, the fire code for a particular space will likely directly limit the capacity for your mat program.

Similarly with zoning, work with your local municipal planning department, the landlord for your desired building or space, and/or the local fire department to ensure you understand all building regulations and codes you must abide by to be in compliance with local requirements.

PERMITS

There are a variety of permits you may have to apply for depending on the type of project you are working on. Permit requirements vary depending on municipality, so it is important to consult with local municipal staff regarding the specific permitting process for your project. For example, you may require a renovation permit if you are renovating a building, or a development and construction permit if you are creating a new building. The permitting process can add time to your project schedule, so make sure to consult early with municipal staff to ensure you understand the requirements for the type of project you are doing early on, to avoid costly surprises later on in the process.

"It has been challenging to get the building permit"

EMERGENCY MAT PROGRAM SERVICE PROVIDER

INSURANCE

The prospect of requiring insurance for your mat program came up at some point during the process of determining the location of the program, as you may need to have insurance for the building itself. However, besides building insurance that would cover issues like fires, floods, or other damage, your program also may be required (or may be strongly encouraged) to have other forms of insurance as well, such as liability insurance. This would be utilized for any other liabilities that could arise through the operation of your program, such as clients, staff or volunteers being injured (whether by someone else or by accident), or a client passing away while staying at your program – all of which could lead to costly medical bills or lawsuits.

If there are insurance brokers who you have been working with for your building insurance, they may be able to walk you through other types of insurance that may benefit your program to cover your bases. If not, connecting with a local insurance broker would be encouraged to discuss your options as well as the risks and benefits of different insurance policies.

INSPECTIONS

Much like when you're buying a house, it can save a lot of headaches in the long term if you get your building or space inspected by a professional before you start running your program – and in some cases, may be legally required. Safety inspections of your space could help you better understand what parts of your building or space may not be up to certain standards, as well as point out areas that could cause health concerns (ie. insulation with asbestos) or be in need of renovations or repairs, which could save you time and money down the road.

Community Engagement and the Consultation Process

DEVELOPING TEMPORARY EMERGENCY MAT PROGRAMS

RDN

COMMUNITY ENGAGEMENT AND THE CONSULTATION PROCESS

When going through the process of creating a mat program, community engagement and consultation is not only important: it can be the difference between success and failure of your program.

You will want to ensure that community engagement happens as soon as possible in the process, to address any concerns or potential barriers to getting your mat program up and running. However, you also want to ensure that your organization, community, or coalition has a clear purpose and vision for your program, so that you have clear answers for why it's necessary.

In some communities, the community may rally behind your project and may be in overall support of your efforts to help your local population of people experiencing homelessness. In other communities – and unfortunately, what may be more common – is that you face opposition to your proposed mat program, both from community members, and potentially other service providers and local government officials and policymakers as well.

Often, community resistance, commonly referred to as "Not In My BackYard" or NIMBY, is due to both myths and misconceptions of homelessness and the people struggling with homelessness, as well as fear of the unknown – which can result from a lack of community consultation and understanding. This is why it is imperative to create a solid mission and vision for your mat program from the beginning, to help keep you focused when you face such barriers and obstacles. It is important to validate legitimate concerns, as well as dispel myths about homelessness, as concerns can be both legitimate, as well as discriminatory or based on false ideas about homelessness – as well as a mix of both.

While NIMBYism can often be conceived of people who don't want to help people experiencing homelessness at all (and this sometimes can be the case), often a key difference with NIMBYism is that community members with such attitudes are actually in favour of helping the local population of people in need of assistance – provided that those services aren't close to their neighborhoods or areas they frequent (hence – not in my backyard).

SYLVIA CHEUY IN HER BLOG " COMMUNITY ENGAGEMENT | A FOUNDATIONAL PRACTICE OF COMMUNITY CHANGE" STATES THE FOLLOWING:

> " Achieving a shared commitment to an aspirational vision and engaging in conversations that enable people with diverse perspectives to learn from one another is necessary to generate new solutions. Paradoxically, when groups are able to "slow down" and think together, their collective work is able to move more quickly."

It is also important to remember that you do not need to convince everyone. If you do face opposition in the community, it is highly unlikely that you will ever get everyone fully on board and completely supportive of the project. Everyone has different views, opinions, and biases, and you're unlikely to change those entirely over the course of your consultation (though it can definitely be possible that opposition turns into allies through the process). What matters is that you convince the decision-makers whom you need in order to move the project forward to implementation, then alleviate the concerns of as many community members as possible so that there is as little ongoing resistance to your project as possible.

Public consultation on your project will involve a detailed process and plan for each target group.   Your presentation to Council will not be the same presentation you provide to the community and will even then be different when speaking to those with lived experience. It is vital that the community engagement approach identifies who your target market/key audience is and aligns the engagement around that specific group.

Your project team is seeking the public's input on matters affecting them and their community. This allows for detailed feedback to be captured that can inform many aspects and stages of the process. It also mitigates risk in regards to project delays. If the community feels they have not been sufficiently consulted before and during the project's development, the approving authority (Council , Administration, board of directors) may delay, defer, or even reject your application.

Some engagement plans will include collaborative brainstorming and decision-making – for example, through facilitated roundtable sessions or workshops. There are communications with the public that may be legally required by your municipality, and there are engagement sessions that may be offered as gestures to build goodwill, support and understanding in the community.

It is important that your team determines what you are hoping to gather as feedback and how that information will be used. This needs to be communicated to participants so they understand what level of influence their comments have, how information will be used, and how any follow-up information will be shared. Involving the community tends to build acceptance by the community and create meaningful relationships with your project. Take time to reflect and consider how your project may serve the broader community and what role the community can play in the success of the program.

The format of the session needs to be carefully considered and planned out based on the expected size of the group or number of interested individuals and parties and the type of engagement you have planned. This includes the time of day of the meeting, the location, whether refreshments are provided, the facilitation process, and how room set-up and materials utilized (i.e. sign-in sheets, forms, presentations, display boards) will support the type of feedback or discussion you are seeking.

There should be multiple consultations at various stages of the project to ensure that relevant information is gathered at key points in time. This is also to ensure that the relationship with the community is nurtured and maintained throughout the project's life.   It is recommended that you meet with your local municipality planning department. Most municipal planning departments will be able to provide you with their public consultation requirements. There are different regulatory processes involved in rezoning a site, amending a neighbourhood plan, applying for a development permit, or seeking a variance. Discussions with municipal planning staff will help to refine your public consultation plans and schedule, as well as understand what kind of resources you may need. This is an important part of the project to plan and manage.

The number and type of consultation or engagement events will depend not only on the type and scale of the project but the community readiness to support such a project. The Community Tool Box, developed by the University of Kansas Centre for Community Health and Development (2021), provides tools to develop effective community change and how to build compassion in your community.

Stages of Community Readiness

- Professionalization
- Confirmation/Expansion
- Stabilization
- Initiation
- Preparation
- Preplanning
- Vague Awareness
- Denial/Resistance
- No Awareness

(KU Centre for Community Health and Development, 2021)

Once your project team has identified your community readiness, and where on the continuum stakeholders are, the next stage would be to develop a draft strategic response plan.

THE FOLLOWING LIST IS DIRECTLY FROM THE COMMUNITY TOOL BOX and provides you with a direct link to each section for more detailed information and guidance (KU Centre for Community Health and Development, 2021).

COMMUNITY READINESS CAN BE DESCRIBED BY NINE DIFFERENT LEVELS:

1. NO AWARENESS. THE ISSUE IS NOT GENERALLY RECOGNIZED BY THE COMMUNITY OR LEADERS AS A PROBLEM (OR IT MAY TRULY NOT BE AN ISSUE).

- Assessing Community Needs and Resources
- Assessing Community Needs & Resources
- Developing a Plan for Identifying Local Needs and Resources
- Understanding and Describing the Community
- Collecting Information About the Problem
- Analyzing Community Problems

2. DENIAL/RESISTANCE. AT LEAST SOME COMMUNITY MEMBERS RECOGNIZE THAT IT IS A CONCERN, BUT THERE IS LITTLE RECOGNITION THAT IT MIGHT BE OCCURRING LOCALLY

- Analyzing Problems and Goals
- Analyzing Community Problems and Solutions
- Defining and Analyzing the Problem
- Analyzing Root Causes of Problems: The "But Why?" Technique
- Responding to Counterattacks
- How to Respond to Opposition Tactics
- Getting Issues on Public Agenda
- Communicating Information about Community Health and Development Issues

3. VAGUE AWARENESS. MOST FEEL THAT THERE IS A LOCAL CONCERN, BUT THERE IS NO IMMEDIATE MOTIVATION TO DO ANYTHING ABOUT IT.

- Increasing Participation and Membership
- Encouraging Involvement in Community Work
- Developing a Plan for Increasing Participation in Community Action
- Promoting Participation Among Diverse Groups
- Involving Key Influentials in the Initiative
- Involving People Most Affected by the Problem
- Recruiting and Training Volunteers
- Developing a Plan for Involving Volunteers
- Core Functions in Leadership
- Building and Sustaining Commitment
- Deciding Where to Start
- Identifying Targets and Agents of Change: who Can Benefit and Who Can Help

4. PREPLANNING. THERE IS CLEAR RECOGNITION THAT SOMETHING MUST BE DONE, AND THERE MAY EVEN BE A GROUP ADDRESSING IT. HOWEVER, EFFORTS ARE NOT FOCUSED OR DETAILED

- Developing a Framework or Model of Change
- Developing a Strategic Plan
- Proclaiming Your Dream: Developing Vision and Mission Statements
- Creating Objectives
- Developing Successful Strategies: Planning to Win
- Analyzing Community Problems and Solutions
- Generating and Choosing Solutions
- Choosing and Adapting Community Interventions

- Understanding Risk and Protective Factors: Their Use in Selecting Potential Targets and Promising Strategies for Interventions
- Introduction to Evaluation
- A Framework for Program Evaluation: A Gateway for Tools
- Choosing Evaluators
- Developing an Evaluation Plan
- Some Methods for Evaluating Comprehensive Community Initiatives
- Behavioral Surveys
- Gathering and Using Community-Level Indicators

5. PREPARATION. ACTIVE LEADERS BEGIN PLANNING IN EARNEST. THE COMMUNITY OFFERS MODEST SUPPORT OF THEIR EFFORTS.

- Developing Strategic and Action Plans
- Analyzing Problems and Goals
- Developing a Framework or Model of Change
- Developing an Intervention
- Our Model for Community Change and Improvement
- Our Model of Practice: Building Capacity for Community and System Change
- Getting Issues on Public Agenda
- Gaining Public Support for Addressing Community Health and Development Issues
- Choosing Strategies to Promote Community Health and Development
- Strategies for Community Change and Improvement: An Overview
- Encouraging Involvement in Community Work
- Involving Key Influentials in the Initiative
- Developing a Strategic Plan

- Creating Objectives
- Developing Successful Strategies: Planning to Win
- Developing an Action Plan
- Identifying Action Steps in Bringing About Community and System Change
- Deciding Where to Start
- Designing Community Interventions

6. INITIATION. ENOUGH INFORMATION IS AVAILABLE TO JUSTIFY EFFORTS. ACTIVITIES ARE UNDERWAY.

- Increasing Participation and Membership
- Enhancing Cultural Competence
- Advocating for Change
- Influencing Policy Development Toolkit: Implementing a Social Marketing Effort
- Our Model for Community Change and Improvement
- Some Lessons Learned on Community Organization and Change
- Choosing Strategies to Promote Community Health and Development
- Systems Advocacy and Community Organizing
- Coalition Building I: Starting a Coalition
- Developing a Strategic Plan
- Developing an Action Plan
- Developing an Organizational Structure for the Initiative
- Creating and Gathering a Group to Guide Your Initiative
- Hiring & Training Key Staff of Community Organizations
- Developing a Plan for Staff Hiring and Training
- Developing Training Programs for Staff
- Recruiting & Training Volunteers
- Developing a Plan for Involving Volunteers

- Recruiting Volunteers
- Developing Training Programs for Volunteers
- Providing Training and Technical Assistance
- Designing a Training Session
- Orienting Ideas in Leadership
- Developing a Plan for Building Leadership
- Core Functions in Leadership
- Learning How to be a Community Leader
- Discovering and Creating Possibilities
- Understanding People's Needs
- Building and Sustaining Commitment
- Influencing People
- Building and Sustaining Relationships
- Becoming an Effective Manager
- Developing a Management Plan
- Analyzing Community Problems and Solutions
- Putting Your Solution into Practice
- Working Together for Racial Justice and Inclusion
- Building Relationships with People from Different Cultures
- Principles of Advocacy
- Recognizing Allies
- Encouraging Involvement of Potential Opponents as well as Allies
- Getting Grants and Financial Resources
- Developing a Plan for Financial Sustainability
- Social Marketing of Successful Components of the Initiative
- Conducting a Social Marketing Campaign
- Promoting Awareness and Interest Through Communication

7. STABILIZATION. ACTIVITIES ARE SUPPORTED BY ADMINISTRATORS OR COMMUNITY DECISION-MAKERS. STAFF ARE TRAINED AND EXPERIENCED.

- Increasing Participation and Membership Toolkit: Enhancing Cultural Competence
- Influencing Policy Development Toolkit: Evaluating the InitiativeChapter12
- Providing Training and Technical Assistance
- Delivering a Training Session
- Conducting a Workshop
- Providing Information and Enhancing Skills
- Training for Conflict Resolution
- Establishing Youth Organizations
- Developing a Speaker's Bureau
- Enhancing Support, Incentives, and Resources
- Creating and Facilitating Peer Support Groups
- Improving Services
- Promoting Coordination, Cooperative Agreements, and Collaborative Agreements Among Agencies
- Developing Multisector Collaborations
- Developing and Increasing Access to Health and Community Services
- Changing Policies
- Changing Policies: An Overview
- Using Tax Incentives to Support Community Health and Development
- Changing Policies to Increase Funding for Community Health and Development Initiatives
- Changing the Physical and Social Environment
- Promoting Neighborhood Action

- Working Together for Racial Justice and Inclusion
- Learning to be an Ally for People from Diverse Groups and Backgrounds
- Creating Opportunities for Members of Groups to Identify Their Similarities, Differences, and Assets
- Building Culturally Competent Organizations
- Transforming Conflicts in Diverse Communities
- Working with the Media
- Creating News Stories the Media Wants
- Changing the Media's Perspective on Community Issues
- Responding to Counterattacks
- Overview of Opposition Tactics: Recognizing the Ten D's
- How to Respond to Opposition Tactics

8. CONFIRMATION/EXPANSION. EFFORTS ARE IN PLACE. COMMUNITY MEMBERS FEEL COMFORTABLE USING SERVICES, AND THEY SUPPORT EXPANSIONS. LOCAL DATA ARE REGULARLY OBTAINED.

- Evaluating the Initiative
- Applying for Grants
- Improving Organizational Management and Development
- Sustaining the Work or Initiative
- Getting Issues on Public Agenda
- Talking About Risk and Protective Factors Related to Community Issues
- Introduction to Evaluation
- A Framework for Program Evaluation: A Gateway for Tools
- Choosing Evaluators
- Developing an Evaluation Plan
- Some Methods for Evaluating Comprehensive Community Initiatives

- Measuring Success: Evaluating Comprehensive Community Health Initiatives
- Rating Member Satisfaction
- Constituent Survey of Outcomes: Ratings of Importance
- Reaching Your Goals: The Goal Attainment Report
- Conducting Interviews with Key Participants to Analyze Critical Events
- Gathering and Using Community-Level Indicators
- Using Evaluation to Understand and Improve the Initiative
- Providing Feedback to Improve the Initiative
- Communicating Information to Funders for Support and Accountability

9. HIGH LEVEL OF COMMUNITY OWNERSHIP

DETAILED AND SOPHISTICATED KNOWLEDGE EXISTS ABOUT PREVALENCE, CAUSES, AND CONSEQUENCES. EFFECTIVE EVALUATION GUIDES NEW DIRECTIONS. THE MODEL IS APPLIED TO OTHER ISSUES.

- Sustaining the Work or Initiative
- Improving Organizational Management and Development
- Applying for Grants
- Developing a Strategic Plan
- Developing Successful Strategies: Planning to Win
- Maintaining Quality Performance
- Achieving and Maintaining Quality Performance
- Obtaining and Using Feedback from Participants
- Rewarding Accomplishments
- Arranging Celebrations
- Providing Incentives for Staff and Volunteers
- Getting Grants and Financial Resources

- Developing a Plan for Financial Sustainability
- Creating a Business Plan
- Applying for a Grant: The General Approach
- Writing a Grant
- Managing Finances
- Planning and Writing an Annual Budget
- Investing in Community Resources
- Establishing Micro-grant Programs
- Planning for Long-Term Institutionalization
- Planning for the Institutionalization of an Initiative
- Strategies for Sustaining the Initiative

IN ADDITION THEY HAVE IDENTIFIED THE DIMENSIONS OF COMMUNITY READINESS AS:

- **COMMUNITY EFFORTS -** To what extent are there existing efforts, programs, and policies that address the issue?
- **COMMUNITY KNOWLEDGE OF THE EFFORTS -** To what extent do community members know about existing local efforts and their effectiveness? Are the efforts accessible to all segments of the community?
- **LEADERSHIP -** To what extent are appointed leaders and influential community members supportive of the issue?
- **COMMUNITY CLIMATE -** What is the prevailing attitude of the community toward the issue? Is it one of helplessness or one of responsibility and empowerment?
- **COMMUNITY KNOWLEDGE ABOUT THE ISSUE -** To what extent do community members know about the causes of the problem, consequences, and how it impacts your community?
- **RESOURCES RELATED TO THE ISSUE -** To what extent are local resources – people, time, money, space, etc. – available to support efforts?

The Community Engagement continuum that Tamarack has adapted reflects a spectrum of inform- consult-Involve- collaborate-empower (Tamarack Institute, n.d.). This tool involves identifying where stakeholders are in the engagement process to what is the goal and how will the engagement be achieved. This is a powerful tool to use before and with stakeholders as it is commonly found that each service provider is at a different level of engagement. It's important to align with where the stakeholders are to ensure clear communication and mutual expectations align.

COMMUNITY ENGAGEMENT CONTINUUM

	INFORM	CONSULT	INVOLVE	COLLABORATE	EMPOWER
GOAL	To provide stakeholders with balanced and objective information to assist them in understanding the problem, alternatives and solutions.	To obtain stakeholder feedback on analysis, alternatives and/or decisions.	To work directly with stakeholders throughout the process to ensure that their concerns and aspirations are consistently understood.	To partner with stakeholders in each aspect of the decision from development to solution.	Shared leadership of community-led projects with final decision-making at the community level.
STYLE	"Here's what's happening."	"Here are some options, what do you think?"	"Here's a problem, what ideas do you have?"	"Let's work together to solve this problem."	"You care about this issue and are leading an initiative, how can we support you?"

Adapted from the IAP2 Public Participation Spectrum

(Tamarack Institute, n.d.)

Does Your Organization Face Inward or Outward? How are you sharing public knowledge to reframe what matters to people and enlist allies? What impact do we want to create? These are just a few questions that the Hardwood Institute for Public Innovation challenges you to ask in their TURNING OUTWARD Strategy Chart (2021).

Remember to allow for several different conversations at each consultation stage and that there are varying times and days to allow for increased participation. It is imperative to keep the community and those with lived experience informed on each stage of the project and the outcomes.

Authentic community engagement does not happen without vulnerability and vulnerability takes trust. How has/how will your organization gain trust in the community?

THE FOLLOWING CONSULTATION EXAMPLES ARE ADAPTED FROM THE SUSTAINABLE HOUSING INITIATIVE DOCUMENT, A STEP-BY-STEP GUIDE TO DEVELOPING AFFORDABLE HOUSING (2019).

CONSULTATION #1 – INTRODUCTION AND DISCUSSION ABOUT HOMELESSNESS: The purpose of this first engagement is to familiarize the community with homelssness, the myths, the facts about people who are homeless and the need for a mat program.   This consultation will allow your team to share objective information about homelessenss, address common concerns and misconceptions, and ensure that the concerns of engaged community members are heard and recorded. As decisions are being made throughout the development of the project, seek to understand how you may address the feedback you have gathered. This exercise may help avoid opposition and pushback that could delay or halt the project later on (sometimes referred to as "NIMBYism" or "Not In My Back Yard").

This consultation is a prime opportunity to share any data that has been collected over the course of the last year. Identifying the need with data allows for more understanding of support.

CONSULTATION #2 – FEEDBACK ON POTENTIAL PROJECT SITES: If your team is evaluating a number of potential sites, this consultation discusses the merits of the sites that have been identified. This gives the community and those with lived experience a chance to provide their feedback and identify the pros and cons of each site. The results are two-fold: first, it ensures community members feel their concerns are being heard and taken into consideration; second, it gives the project team the opportunity to identify any potential issues they may not have been aware of.

CONSULTATION #3 – PROPOSED PROGRAM SERVICES AND SITE PLAN: This engagement session is to discuss the proposed project details, such as the overall site plan, the service delivery guiding principles,hours, programming, emergency response,

etc. This consultation allows the community and those with lived experience to provide their initial feedback on the selected site and the proposed services.

CONSULTATION #4 – REVIEW OF RECOMMENDED CONCEPT: The goal of this consultation is to gather feedback from the community on the entire project concept that the project team has developed. Having gone through consultations at each step of the process, these sessions are designed to update the community on the decisions and revisions that have been made throughout the process and the near-final design of the project.

Ongoing community engagement is very important to maintain throughout the entire process and even more so once the building is occupied with residents.It is imperative that to not only continue to have community conversations, but to provide the community with a "report card" on a regular basis.

Creating partnerships with other surrounding communities, community-based organizations, religious centres, and settlement programs will create different areas of access to the program. Working alongside schools will not only create awareness of your program, but it will also create awareness for families who are struggling with finding housing. By spreading awareness through various channels in your community, you will not only gain better access to morepartnerhips and support, but you will also increase your capacity as a program to provide support to people of all backgrounds, circumstances and from all walks of life.

The following is a list of recommended conversations/questions that should be explored during the community engagement process. This is not necessarily an exhaustive list, but will create a solid foundation from which to move forward with:

- What is rural homelessness?
- Share the issues your community is facing with homelessness
- What has been done to date to address this issue?
- Why does your community need a mat program? Why is it important to develop one at this point in time (ie. 'why now?')
- Who will your mat program serve (ie. demographics)? Are there any demographics that your program won't serve; if so, why, and will there be any existing shelter options in your community for those people?
- What type of services do you want to provide, and why? What are your organization's values when working with people experiencing homelessness and what values do you want your program to reflect? How were these principles developed?

- What type of services do you have the capacity to provide, and why?

- What are possible funding sources? Do you have funding secured, and if not, what duration of time do you think you'll require to secure funding?

- Who will develop and manage the mat program, and who will operate it (as this is not always the same person or organization)?

- What partners or allies do you have currently working with you, and are there any other vital allies you need on board?

- What other organizations or stakeholders do you need to work with to ensure your program is successful (regardless of whether they may be supporters or allies?)

- What boundaries will you enforce – both with the "big picture" planning process and with your mat program's day-to-day operations and client services?

- Do you have any 'non-negotiables' – areas where, if you can't get agreement, you would not move the project forward at all? (eg. you are dedicated to creating a wet shelter but your community and local council will only agree to a dry shelter, or vice-versa.)

- What areas would you be willing to compromise on?

- What are the major barriers or obstacles you foresee, from where you are now to having your program open and running?

- What if we did nothing?

There is no greater power than a community discovering what it cares about.

Ask "What is possible?" not "What's wrong?" Keep asking.

Notice what you care about.
Assume that many others share your dreams.

Be brave enough to start a conversation that matters.
Talk to people you know.
Talk to people you don't know.
Talk to people you never talk to.

Be intrigued by the differences you hear.
Expect to be surprised.
Treasure curiosity more than certainty.

Invite in everybody who cares to work on what's possible.
Acknowledge that everyone is an expert about something.
Know that creative solutions come from new connections.

Remember, you don't fear people whose story you know.
Real listening always brings people closer together.

Trust that meaningful conversations can change your world.

Rely on human goodness. Stay together.

MARGARET J. WHEATLEY

Cultural Considerations

DEVELOPING TEMPORARY EMERGENCY MAT PROGRAMS

RDN

CULTURAL CONSIDERATIONS

RELIGION AND SPIRITUALITY

To create a successful and welcoming mat program, it is also critical to be mindful of the cultural, religious and spiritual backgrounds of program users. Best practices reflect an intake/assessment to include cultural background, and religious or spiritual preferences upon intake to the program. A simple way of asking this so as not to embarrass or isolate the participant can be to ask: Do you have specific preferences that we should be aware of that can help? Participants in your program should feel safe to practice and express themselves as they want, provided it does not affect other shelter users.

Considering various religious practices is also essential for offering an inclusive and accessible mat program. Service providers could consider collaborating or forming partnerships with other religious centres, churches or mosques to spread awareness of the service and gain insight on some of the religious considerations required in order to provide a safe environment for people of all faiths.

For example, organizers can consider providing a designated sacred space for individuals who wish to pray, meditate or express religious freedoms free of judgment. This could look like an adjacent room, or a separate private space where only one individual or family can access at a time.

The acknowledgement of a sacred area also pertains to spaces that allow women, children and men who wear head coverings and other religious garb the privacy to remove them and feel safe in their environment. The purpose of these sacred spaces is not to segregate religious individuals, but to offer an inclusive environment that recognizes and appreciates all beliefs and practices.

If your mat program location does not have the capacity to accommodate a separate area, it is recommended collaborating with local churches, religious, spiritual or faith groups to seek guidance, arrange transportation to and from a separate facility, or gain resources in order to provide a safe and welcoming environment for all.

Culture, religion and spirituality can play a significant role in someone accessing your program and should be a consideration when implementing your program.

RACISM AND DISCRIMINATION

Racism and discrimination is a vital consideration for mat program providers. Whether for newcomers, racialized populations, equity-seeking groups, or majority populations, anti-racism standards and zero tolerance should be a mandatory practice within your initiative. Racism and discrimination can add to feelings of helplessness and can worsen vulnerabilities experienced by homeless populations.

In implementing an anti-discrimination framework, it should be mandatory for staff to have training and knowledge to ensure compliance. Utilizing free resources, such as the Anti-Discrimination Toolkit from the Alberta Association of Immigrant Serving Agencies (AAISA) can provide basic information for service providers in understanding anti-discrimination practices and implementation. By increasing your program's capacity to support users of all groups, you will be contributing to an inclusive and more accessible environment.

Further, anti-racism and discrimination standards should be enforced for all users of the program. While newcomers and equity-seeking groups experience discrimination at a disproportionate rate, a successful mat program would work towards being completely inclusive and recognize that discrimination can happen to individuals from any particular group. This can be done by implementing policies regarding the safety of all program users, as well as providing information about participants' rights and responsibilities during the intake process.

INTERSECTIONALITY

Providing an intersectional approach to the implementation of your mat program will create a more accessible and welcoming initiative. An intersectional approach considers the various forms of identity that can present barriers and discrimination for an individual. For example, it is important to consider a participant's race, culture, sexual and gender orientation, and social status, as these factors all play key roles in establishing people's access, awareness, and opportunity to utilize your programming.

Intersectionality should be considered in your mat program for two main reasons. The first reason is that in order to provide an inclusive service for diverse populations, providers need to consider the different barriers and disadvantages participants experience that have contributed to their homelessness. Understanding the varied vulnerabilities that participants may have experienced can help strengthen the service

capacity and potentially provide additional resource channels to help conquer some of the unique barriers that participants experience.

The second reason that intersectionality should be considered is when spreading awareness to attract diverse homeless populations. Through the consideration of the different barriers that intersect to create homelessness, providing multiple avenues of awareness will reach a greater number of people. This can be done by approaching non-traditional community resources, such as hospitals, banks, libraries and schools.

INDIGENOUS PEOPLES (FIRST NATIONS, MÉTIS, INUIT)

Indigenous peoples disproportionately experience homelessness across Canada in comparison to non-Indigenous populations, and this is clear from available data. Based on the most recent National Point-in-TIme count data in 2018 (GoC, 2021a), approximately one-third (~30%) of people experiencing homelessness in Canada identify as Indigenous, a statistic echoed by the 2018 (Alberta Rural Development Network, 2020) and 2020 Rural Homelessness Estimation Counts (Rural Development Network, 2021) organized by RDN. This is despite the fact that based on the most recent census data, approximately 5% of the population of Canada is Indigenous.

The Assembly of First Nations states that First Nation communities are experiencing a housing crisis. It is estimated that 25% of First Nation adults live in overcrowded housing and that youth are living in households of six in a one- or two-bedroom home. Mould and mildew contaminate half of all First Nation households.

Housing instability and homelessness must be understood through that of the Indingenous lens and there must be greater understanding of the unique challenges Indigenous communities face that often stem from the Indian Act, history, colonization and intergenerational trauma.

"It is often said before there can be Reconciliation, there must be truth. I would challenge that, even before Truth, there will be Trust. Trust built within the allied relationship to hear, respond and honour the Truth '' (Building Trust Before Truth: How non-Indigenous Canadians Become Allies).

The Truth and Reconciliation Commission of Canada (TRC) often speaks to the United Nations Declaration on the Rights of Indigenous Peoples (2007) and this is reflective in the following Calls to Action by the TRC (2012):

ARTICLE 11 1. Indigenous peoples have the right to practise and revitalize their cultural traditions and customs. This includes the right to maintain, protect and develop the past, present and future manifestations of their cultures, such as archaeological and historical sites, artefacts, designs, ceremonies, technologies and visual and performing arts and literature.

ARTICLE 18 Indigenous peoples have the right to participate in decision-making in matters which would affect 16 their rights, through representatives chosen by themselves in accordance with their own procedures, as well as to maintain and develop their own indigenous decision-making institutions.

ARTICLE 21 1. Indigenous peoples have the right, without discrimination, to the improvement of their economic and social conditions, including, inter alia, in the areas of education, employment, vocational training and retraining, housing, sanitation, health and social security.

43. We call upon federal, provincial, territorial, and municipal governments to fully adopt and implement the United Nations Declaration on the Rights of Indigenous Peoples as the framework for reconciliation.

44. We call upon the Government of Canada to develop a national action plan, strategies, and other concrete measures to achieve the goals of the United Nations Declaration on the Rights of Indigenous Peoples. Professional Development and Training for Public Servants

> **57.** We call upon federal, provincial, territorial, and municipal governments to provide education to public servants on the history of

Aboriginal peoples, including the history and legacy of residential schools, the United Nations Declaration on the Rights of Indigenous Peoples, Treaties and Aboriginal rights, Indigenous law, and Aboriginal–Crown relations. This will require skills based training in intercultural competency, conflict resolution, human rights, and anti-racism.

For Indingenous by Indingenous. In the spirit of reconciliation, it is vital to be mindful of not only what type of services your program is providing to Indingenous people, but who is leading your project in response to these services.

NEWCOMERS TO CANADA

The term "newcomer" refers to anyone who is new to Canada, regardless of their citizenship status. This can include economic immigrants, refugees, temporary foreign workers, permanent residents, and new Canadian citizens, as well as people who may be without status or documentation in Canada. Newcomer populations will be among several diverse groups that could utilize your mat program, as immigrant and refugee families are disproportionately affected by homelessness, among other factors contributing to poverty. A successful mat program should consider various cultural factors such as race, religion, ethnicity, gender, sexual orientation, and the immigration status of newcomers.

In addition to finding appropriate housing, newcomers need to overcome several barriers when integrating into Canadian society. Finding suitable employment or educational opportunities, addressing migration trauma, adjusting to a new culture, overcoming language barriers, and learning the ropes of Canadian society are all factors that newcomers can experience when arriving in Canada. These factors can all impact the accessibility and usage of mat programs for immigrants and refugees.

Moreover, when considering race and ethnicity factors, it is important to note that these terms are not interchangeable. Race refers to someone's physical characteristics,

such as their skin colour and physical features. Race also has deeply historical roots, which affiliate individuals with their ancestry and historical backgrounds. In comparison, ethnicity refers to a social group that shares similar cultures, religions and languages. Racialized groups are often subject to more violence and discrimination, in comparison to other equity-seeking groups. This is important to consider when trying to create an equitable and safe environment for your program.

Notably, racialized populations are especially vulnerable towards homelessness, as 1 in 5 racialized groups experience symptoms of poverty at a much greater rate than non-racialized Canadians (COH n.d.-a). This makes it likely that you will likely interact with racialized immigrants or refugees who are seeking housing or services support at some point while running your mat program.

LANGUAGE BARRIERS

An important cultural consideration to acknowledge when establishing your program is the language barriers experienced by newcomer populations. Services and resources offered solely in English or French can create inequitable access to the program for those who do not speak the official languages. Language barriers may also affect newcomers' understanding and awareness of the mat program, which can cause systemic discrimination against those who are unable to access the resource.

Given the resources at your disposal, it may not be possible to translate signage or documentation into both official languages (much less a variety of other international languages). Thankfully, there are still ways to decrease the barriers facing newcomers who are only fluent in other languages.

A helpful tool to consider is to use plain language when advertising or welcoming individuals to the program. Plain, easy-to-understand language is easier to translate and may resonate further with newcomers trying to learn a new language. If available, service providers can also potentially use other community resources or volunteers to assist with language translation, such as people or leaders at other community organizations or religious/cultural associations. Even if only used for your first interaction, interpreters can break intimidation barriers for newcomers and help facilitate a more comfortable transition into the program. Reading written materials aloud for foreign language speakers can also be useful in conquering some of the language uncertainties they may experience while they get integrated into the program.

Many settlement services in communities also offer translation and interpretation support. To increase the language capacity of your program, it is recommended to create a language list of partner agencies in the community who have staff that speak

additional languages. This will not only help build partnerships, but it will allow for the program to communicate with diverse populations.

For emergency translation support, mat providers can use Cantalk or Language Bank resources. These phone-in translation services are available to assist with quick and effective translations. Although not free, they can assist in emergency or crisis situations when translation is necessary.

IMMIGRATION STATUS

Immigration status can be an important factor for the utilization of your program for newcomers. Depending on your program requirements, some newcomers may not have any legal papers or a legal immigration status in the country; this can include identification, permanent residency status, refugee status or asylum seekers. This can deter newcomers from accessing your mat program. It could be beneficial to consider this barrier when spreading awareness of your program. You will want to make sure that newcomers feel safe to use the program, and that they do not need to fear compromising their status or residency in Canada by using your services.

Policy and Procedure Development

DEVELOPING TEMPORARY EMERGENCY MAT PROGRAMS

RDN

POLICY AND PROCEDURE DEVELOPMENT

Strong policies will ensure staff, volunteers, those accessing services and the community are supported and safe. RDN reached out to over 100 rural and remote mat and or emergency shelters to gain a better understanding of the diversity of policy and procedures that projects are implementing. RDN learned that there are very limited 'formal' policies that are being implemented across Canada and there is a need for support and consistency in this area. It is important to recognize that a lack of strong policies, adequate training and shared approaches to client care negatively impact staff, volunteers and clients, creating stress, problems and potentially leading to dangerous situations. In general, the costs of not having adequate policies or not following them can be steep (PowerDMS, 2020).

Canada recognizes the importance of employing a trauma and violence-informed approach to policy development, which requires fundamental changes in how systems are designed, organizations function and practitioners engage with people (GoC, 2018). A requirement for promoting emotional safety for clients is to develop and communicate policies clearly and safely (Wilson et al, 2015). Implementation of a comprehensive, trauma-informed approach requires a significant investment of time and resources, buy-in from all levels of leadership, and extensive staff training (Huntington et al, 2005).

There is no 'check list' of what policies and procedures should be, the following list of policies and procedures will guide you in a direction from where you can build from:

- Basic Health & Safety Standards/Communicable Disease Control
- Substance Use
- Scabies
- Violent Behavior
- Food Safety
- Administering First Aid
- Community Complaints
- Blood/Bodily Fluid Exposure
- Dealing With Difficult Clients
- Working Alone

- Staff Health And Wellness
- Basic Information About Employer/Employee Roles In Prevention And Protections

HEALTH AND SAFETY

Health and Safety regulations are based on your Provincial and Territorial standards and additional standards your organization may implement. In addition, your local health authority and local municipality may have additional regulations that you will be required to follow and therefore will need to be included in your policy development. In addition, practical measures to identify and limit risk factors need to be reviewed and implemented.

COVID-19/PANDEMIC CONSIDERATIONS

The COVID-19 pandemic changed circumstances to significantly format programs and emergency shelters across Canada. Immediately, the prospect of having many people close together in a single building or in dormitory settings became a public health risk. Capacity limitations due to spacing, mask requirements, and new cleaning and hygiene standards impacted shelters everywhere, increasing barriers for clients experiencing homelessness.

Although at the time of publication of this guide, many jurisdictions are beginning to open back up, you should be prepared to maintain certain health regulations specific to COVID regardless. As with more general health policies, and because local and regional COVID-19 restrictions and regulations have changed frequently and suddenly, the best approach here is to work with municipal, provincial, or federal health bodies in order to determine what rules, precautions, and restrictions you need to have in place, including isolation requirements for any clients who may show symptoms or test positive (and how to isolate, given the potential constraints of your building); and where and how to get clients tested.

SUBSTANCE USE

Your service delivery principles will determine what your policy will look like in this area. Does your staff and volunteers have the level of expertise that is required to admit residents who are currently using and or under the influence?   As with broader health regulations, this is an area where it's best to work with your health authority, as well as potentially local advocacy or educational groups with expertise in this area, to develop a clear set of policies for your program.

SAFETY

Practical measures to identify and limit risk factors need to be reviewed and implemented. From fire safety, working alone, food safety to weapons, dealing with violence and safety planning for yourself and clients, many more policies and processes will need to be approved and supported as you move your project forward.

INVOLVEMENT OF EMERGENCY SERVICES AND PREPARING FOR EMERGENCIES

As part of both your health and safety policies, you should prepare for the possibility of having to involve first responders with incidents at your organization, such as law enforcement, your local fire department, or emergency medical services. Incidents with violence, injuries, overdoses or medical emergencies, or fires will require you to involve emergency services.

ADMISSION/DISCHARGE PROCESS

Admission and discharge policy and procedures will provide staff, volunteers and residents accessing the program smoother transition during intake and discharge. Your service delivery standards will guide you through what this should look like.

RESIDENTS' RIGHTS AND RESPONSIBILITIES

Insert Homlessnss Charter of Rights some place here- see link below

- www.homelesshub.ca/sites/default/files/attachments/Homeless%20Charter%20of%20Rights.pdf

As a direct connection to the values and service delivery standards you determined when you were initially planning your mat program, one document you can get clients to read and sign when they complete their intake is a Residents' RIghts and Responsibilities document. This can provide them with information both about the responsibilities of the mat program itself in providing service and care to them and the rights they have, as well as their responsibilities in being a client at your services.

It is always harder to change expectations and responsibilities later on, as opposed to making them clear from the start. A Residents' Rights and Responsibilities code can ensure that all clients to your program agree to abide by certain standardized rules, regulations, boundaries and values while they're staying at your facility (even if it is only

one night) that reflect the program you're trying to deliver. This document can also lay out what consequences clients may face if they do not follow the rules and regulations.

One resource you can utilize to build your Residents' Rights and Responsibilities code is the Homeless Charter of Rights (Calgary Homeless Foundation, 2015).

STAFF TRAINING

Once you've developed those policies above, it's vital that anyone working on the program understands them, as well as their relation to them and responsibility to uphold them. Staff training will support the challenging work that lays ahead. There is no 'go to guide' for staff training, however your service delivery values and your policies will be the beginning of successful staff training modules.

VOLUNTEER TRAINING

The level of training for volunteers will be dependent on their role. Additional tools such as very specific roles and responsibilities vs staff roles and responsibilities will be important to identify.

STAFF AND VOLUNTEER CODE OF CONDUCT AND CONFIDENTIALITY

One measure you can take during your training sessions is getting all staff and volunteers working on the mat program to sign a code of conduct. This may only be a few pages in length, but links back to the values you want your program to reflect, and indicates clearly what staff and/or volunteer roles, expectations, and responsibilities will be.

Confidentiality agreements for staff and volunteers will help ensure that any information with regards to clients stays within the program, to preserve client privacy.

NARCAN (NALOXONE) TRAINING

Naloxone is a drug that can be administered to anyone who is suffering from an opioid overdose that immediately reverses the overdose. As there may be many clients experiencing homelessness or substance abuse issues who may use opioids (such as heroin and fentanyl), having naloxone kits available on site, as well as staff and volunteers who are trained to identify the signs of an opioid overdose and administer

the drug, can literally save lives. This is even more vital in rural settings, where hospitals or ambulances can be hours away.

Naloxone kits are now commonly available for free in many pharmacies across the country. Additionally, naloxone trainings that can teach staff and volunteers how to administer the drug and spot the signs of an overdose are often offered for free, either by provincial or territorial health services or by local advocacy groups involved in harm reduction or drug safety. Your local health department or other service providers that focus specifically on addiction treatment or harm reduction may know what is available or who to contact in your area.

> **"There have been lots of people interested in contributing,** some just learning about the issue in their community and others stepping forward to volunteer. **Lots of donations that we are so thankful for."**
>
> EMERGENCY MAT PROGRAM SERVICE PROVIDER

Program Evaluation and Data Collection

DEVELOPING TEMPORARY EMERGENCY MAT PROGRAMS

RDN

PROGRAM EVALUATION AND DATA COLLECTION

Once your mat program is up and running, it is integral that you start collecting data on shelter use – but you should begin planning your data collection as early as possible in the process, once you determine the format and demographics your program will target.

While it can be common to question whether you need to do data collection for a relatively small, makeshift program, we would strongly recommend all mat programs conduct some kind of data collection to indicate the number of people utilizing the program. Even if your program only collects the absolute minimum statistics – for example, the number of people staying per night, whether unique clients or simply number of stays – this is better than collecting no statistics at all. Data provides evidence when talking to your local council, government, and other service provider to indicate that the services your program is using are both necessary, valuable, and being utilized in an ongoing way, which justifies the need for ongoing funding (or increased funding). Without such data, government and decision-makers often only have anecdotal evidence from community advocates or service providers - and this is rarely good enough when taxpayer dollars are concerned.

Therefore, collecting data will not only strengthen the justification for the ongoing continuation and funding of your mat program, but can be instrumental for making a case to your local council (as well as higher levels of government) for the need for additional funding, services, or housing for your community. Without data, you are essentially asking decision-making bodies to "take your word for it" that there's a problem – and this usually will not suffice, especially when tax dollars are involved.

Based on the type of shelter you're creating, the data categories that would be most useful for you to collect will likely begin to formulate in your head

HERE ARE SOME EXAMPLES OF DATA TO CONSIDER COLLECTING:
- Number of total nights of shelter provided (ie. 1 Individual staying for 10 nights equals 10 total night stays)
- Number of unique clients who stayed at the shelter (ie. 1 Individual staying for 10 nights equals 1 unique client)
- Demographics of clients (age, gender, ethnicity, etc.)

- Number of clients assisted with other services by your program, if you provide other services (ie. Food, laundry, showers, basic needs, transportation etc.)
- Number of clients connected to other organizations or services, if you refer clients to other services (ie. Food, basic needs, employment or job training, education, connection to income support, transportation, etc.)
- Number of clients connected to housing (transitional, permanent, landlord/tenant mediation help, etc.)
- Number of incidents where emergency services (police, ems, fire) were called, and for what reason

As well, while quantitative data (ie. numbers and statistics) is vital to showcase the overall value of your program, qualitative success stories from clients can also be very powerful to showcase the personal, emotional, and human side of your project. If you have any clients who do have significant personal successes through their involvement in your mat program, writing down their story with their consent – and ensuring you have consent to share it in a way confirmed with the client, such as by only sharing first names or initials – can help significantly to prove the worth and impact of your program. Additionally, some clients may be comfortable telling their own story through a video or audio recording.

When you conduct your staff and volunteer training, a section on data is crucial, as you must ensure they're aware of any responsibilities they have in terms of collecting, storing and managing the data – in which case, you should ideally decide what data you plan to collect with your homelessness coalition prior to conducting any volunteer or staff training. Once that has been decided, you should work out a process for determining when and how to appropriately collect data for clients – whether that is through an intake form, a survey, oral interview, etc. Beyond just the data that you're collecting, staff and volunteers should also be aware of the "big picture" of data collection and why it is so important – as this can motivate them to conduct , as compared to a situation where they're unsure as to why you're collecting this information.

DATA PRIVACY AND STORAGE CONSIDERATIONS

 It is vital that you take some time to understand best practices on data storage to maintain client confidentiality and privacy – as confidentiality is one area that can have significant ramifications if breached, both personally for clients, as well as legally for your organization.

Digital client data should be maintained in password-protected files (for example, Excel spreadsheets) that are only accessible by staff and volunteers for the program (all of whom should sign a basic confidentiality agreement indicating that anything they learn about clients is not shared publicly or outside the program). In digital files, clients should only be referred to by a client ID (for example, a specific number). A separate password-protected file, stored in a different location on your hard drive (or even on a different hard drive), can then link client IDs with full client names. This provides an extra layer of security, in case any data breach ever occurs. Ensure that backups of these files are maintained regularly, to prevent data and information loss in the event of a computer crash.

Any data on clients kept in physical form should be kept in locked filing cabinets with any personally identifying information about clients (for example, full names, addresses, etc.)   In general, while you should be collecting as much data as possible, a good standard of practice is to collect as little personal information about clients as possible.

Data collection also does not require any expensive equipment or databases; it can be as simple as an Excel spreadsheet or even handwritten notes and files, if you have no access to technology – though this should only be used as a last resort, as it becomes much more difficult to compile and present to decision-makers down the road. There are also some useful free resources available. The federal government offers a database program called the Homeless Individual and Families Information System (HIFIS) (GoC, 2020a) that is freely downloadable and specifically designed for homelessness data collection. The only consideration here is that if you utilize this program, you must agree to share your data with Employment and Social Development Canada. However, this remains a solid option if you want a more extensive and specific program. There are also other paid software options out there, such as the Efforts to Outcomes Database (Ruff Institute of Global Homelessness, n.d.), if you have the available resources.

It's important to be aware when dealing with and presenting data from your program that, given the size of rural communities, multiple connected data points about a client that are anonymized can still be identified if they are specific enough. For example, if you had a client who was an Indigenous Elder who was also a veteran and had a disability, knowing all that information together may be enough to identify someone in a small town, even if you don't mention the person's name or any other specific information about them. Therefore, proceed with caution and utilize good judgment when using any client information in reports that will be made public, even when the information has been anonymized, in order to protect client confidentiality and privacy.

POST-IMPLEMENTATION DEVELOPMENT

ONGOING COMMUNITY ENGAGEMENT

Once your mat program is up and running, your community engagement should continue in an ongoing fashion; it should not stop simply because you've made it through to the implementation of your program. The reason for this is because issues can (and will) arise after your shelter has opened within the community that you'll need to respond to effectively, or else it can affect your program's ability to continue. Ongoing community consultations will also help to continue foster and deepen relationships in the community, potentially turning initial foes and skeptics into allies, communicating newly arising needs or challenges, and also setting the stage for longer-term, more systemic changes to how your community addresses homelessness and housing challenges.

Ongoing community engagement will likely look a lot like your initial community engagement – community meetings (with council and the general public), articles in a local newspaper, posts on online message boards and social media, posters or other events around town, etc. One key difference is that after your program begins (provided they are comfortable), you can also have people who've utilized the program speak about the impact the shelter has had on their lives. This type of personal storytelling can be very powerful and, combined with the overall data your program is collecting, will emphasize the impact that your mat program is having for individuals or families.

DEALING WITH CAPACITY CHALLENGES

If your shelter reaches its capacity – where you either are at the maximum for the number of spaces you have, or you reach the building's code regulations – you may face the prospect that you may need to turn clients away. This can be incredibly difficult, not just professionally, but personally. Particularly in some situations, if the weather is sub-zero, not allowing a client in could mean the difference between life or death. But it is important to prepare for this reality.

Sometimes - depending on your building's regulations and even your risk tolerance - you may be able to go over capacity, which could involve allowing people to sleep in hallways, doorways, or anywhere else accessible that is inside your building. Work with local law enforcement and policymakers to see what may be possible if you reach capacity of your building, while emphasizing the fact that any overages in your capacity are temporary in order to protect people's lives.

SELF-CARE AND AVOIDING BURNOUT

Through the entire process of creating a mat program, you (as well as the members of your organization or coalition) will undoubtedly put a significant amount of time, effort, work, and heart into your endeavour. No mat program would ever get off the ground without the passion and commitment of local people who want to make a difference and help people who are struggling with homelessness, mental health and addiction issues, and other challenges in their lives.

However, that level of passion and commitment can also come at a significant personal cost. With any type of social work or 'helping' professions, there will always be people suffering – therefore, there will always be the feeling that you need to do more, that you're not doing enough. Especially when people's lives are on the line, it can be very tempting to be "always on" or always available – and incredibly difficult to shut yourself off. This is particularly compounded in rural and remote communities, where there may be few, if any, other services or community connections available to help people who may be in life-or-death shelter circumstances.

 Although your mat program is important to your community, it should not come at the expense of yourself (or your colleagues). Below are a few considerations to keep in mind as you're going through the process of developing and operating your mat program, to protect the physical and mental wellbeing of yourself and your team.

BE AWARE OF THE SIGNS OF BURNOUT

Burnout is a term first developed in the 1970s by American psychologist Herbert Freudenberger to describe a condition characterized by emotional exhaustion, physical symptoms, decreased job-related satisfaction, and increased cynicism. Burnout is common in professions where people have high levels of job-related stress and responsibilities, but low rewards. This particularly impacts helping professions such as teachers, doctors and nurses, caretakers, and social work, where there is a constant feeling that you can "always do more" – since there will always be people who are suffering or in need of assistance.

Combined with the lack of social rewards (and in some cases, social opposition to your good intentions), all of this combined can result in burnout, which can not only result in mental exhaustion, but physical health issues, strained relationships, and a variety of other personal and social consequences for yourself.

Burnout also impacts how you work with your staff, volunteers, and clients. Due to the increased feelings of apathy and hopelessness brought on by emotional exhaustion, burned-out staff can start treating both clients and each other with increased anger and callousness.

While earlier stages of burnout may be able to be managed and recovered from with a break, vacation, or a reorientation of your life's focuses, it is important to recognize in the later stages of burnout, it may not be enough to just "take a vacation" – it might require an extended leave of absence, you may need to leave the project altogether, or with severe burnout you can even end up in the hospital.

The challenging part about burnout is that in the earlier stages, it is usually not recognized as burnout but can even be felt as increased motivation, with people "pushing through" their tiredness in order to achieve their goals. This can't last forever though, and often by the time people recognize what is happening to them, they are in a position where they need an extended break in order to recharge.

If you don't take breaks and recharge, your body will eventually do it for you (though perhaps not in the way you wanted). This is why it is important to recognize the signs of burnout before they threaten not only yourself, but your project. This is a good resource to recognize the signs of burnout, along with some tips on how to prevent it: https://www.healthline.com/health/tips-for-identifying-and-preventing-burnout#stages

SETTING PERSONAL BOUNDARIES

Relatedly to preventing burnout, setting personal boundaries with yourself is key. Again, this can be very challenging – for example, if you have people calling you in the middle of the night saying they have nowhere to stay and you're the only community contact, it can be difficult to tell them no.

However, it is the big-picture, long-term aspect that you must keep your eye on here. if you are routinely breaking your own personal boundaries, then you are discounting your own needs – and while this may not cause problems immediately or even in the short-term, it will inevitably lead to issues in the long-term.

Not working after certain hours of the day, taking days off completely, ensuring that you are still taking part in other activities and relationships that you enjoy, and having other values you are building besides the program – these are just a few examples of boundaries you can set. Boundaries are highly individual, though, so this Guide will not tell you what boundaries to set – only that some must be set in order to preserve your

own health, and it is important to put some thought into these before you find yourself in trouble.

ESTABLISHING CO-LEADS

One way that you can significantly reduce the stress of feeling like you need to make all the decisions for a program (and therefore, always need to be available to make all the decisions) is through the establishment of co-leads on the project, who have the same amount of decision-making authority. This can be done through building trust in relationships, in your organization or coalition. As well, this will ensure

DO YOUR BEST

It is important to remember to be gentle with yourself in this process. Seeing clients suffering and being unable to help them due to a lack of resources, both within your own program or in your local community, can be extremely frustrating and demoralizing. However, if you don't take care of yourself and the impact that this has on you by rejuvenating and recharging, you will eventually get to the point where you can't take care of anyone else either. You won't be perfect, and your program won't be either.

HAVE FUN

Lastly, it's also vital to remember that, even though what you're doing is important and serious, you can also have a lot of fun throughout the process. Aside from the stresses involved, the process of building a mat program can also be one of profound meaning, creativity, exploration, learning, problem-solving, and excitement. You will not only be directly impacting people's lives, but getting to know them personally. The connections, friendships, and memories that you make through the process of developing your mat program – with staff, with volunteers, and with clients – can last a lifetime. Don't forget to enjoy the process while you are speeding towards the result.

Resources for Self Care: Please refer to page 17 to 21 from the TARRANT COUNTY HOMELESS COALITION - BEST PRACTICES IN HOMELESS SERVICES https://ahomewithhope.org/wp-content/uploads/2018/04/FINAL-Tarrant-Co-Best-Practices-.pdf - add as an appendix

CONCLUSION

Congratulations – if you've made it this far in this guide, you've acquired a foundation of knowledge to assist you in starting your own community mat program or temporary shelter. Additional tools and information remain in the Appendices at the end of this guide, including worksheets and checklists to provide you with further guidance as you go about the process. You may still have many questions, or question marks, in your head about aspects of your program – and thankfully, there are others in our network across the country who have been in your shoes and who may be able to provide assistance or advice.

We hope that this Guide has provided some useful information to allow you to navigate the obstacles, find your own solutions to the barriers in your path, and avoid common pitfalls, as you seek to help people in your community who are struggling. If there's any other way that the RDN can assist you in the development of your program, please don't hesitate to reach out.

> "Never doubt that a small group of thoughtful committed citizens can change the world.
>
> Indeed, it is the only thing that ever has."
>
> MARGARET MEAD

Appendices

**DEVELOPING TEMPORARY
EMERGENCY MAT PROGRAMS**

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APPENDIX A: DEFINITIONS AND COMMON LANGUAGE

This guide relies primarily on the Canadian Observatory on Homelessness' definitions of homelessness, although other sources (such as the Government of Canada or other advocacy groups) have been utilized where appropriate.

It should be noted that definitions in the areas of homelessness and housing between federal, provincial, municipal, and non-governmental sources often do not align with each other and can sometimes be directly contradictory, which can be a source of confusion. Therefore, it is important to ensure, whenever possible when working on these issues, that as much clarity is developed between all groups and stakeholders as to the standard definitions and common language utilized by your organizations.

HOMELESSNESS DEFINITIONS

UNSHELTERED / ABSOLUTELY UNSHELTERED HOMELESSNESS: Absolutely homeless, living on the streets or in places not intended for human habitation (e.g. living on sidewalks, squares, parks; in vehicles, or garages, etc) (Gaetz et al, 2012). May also be referred to as "living rough" or "sleeping rough" (HeretoHelp, n.d.).

EMERGENCY SHELTERED: People who are staying in overnight shelters due to homelessness as well as those staying in shelters due to family violence (Gaetz et al, 2012).

PROVISIONALLY ACCOMMODATED: People with accommodation that is temporary or that lack security for tenure (e.g. couch-surfing, living in transitional housing, living in abandoned buildings, living in places unfit for human habitation, people in domestic violence situations, etc.).

AT-RISK OF HOMELESSNESS: People who are not homeless, but whose current economic and/or housing situation is precarious or does not meet public health and safety standards.

Note: for the above four definitions, please refer to the full Canadian Definition of Homelessness document for the extended versions of the above abridged definitions.

CHRONIC HOMELESSNESS: A Government of Canada definition (GoC, 2020c) that refers to individuals who are currently experiencing homelessness and who meet at least 1 of the following criteria:

- they have a total of at least 6 months (180 days) of homelessness over the past year
- they have recurrent experiences of homelessness over the past 3 years, with a cumulative duration of at least 18 months (546 days)

Previously, this also referred specifically individuals "often with disabling conditions (e.g. chronic physical or mental illness, substance abuse problems)" (COH, n.d.-b); however, the current definition now focuses more on the duration of homelessness, rather than the complexity of the individual's situation.

EPISODIC HOMELESSNESS: individuals, often with disabling conditions, who are currently homeless and have experienced three or more episodes of homelessness in the past year (of note, episodes are defined as periods when a person would be in a shelter or place not fit for human habitation, and after at least 30 days, would be back in the shelter or inhabitable location) (COH, n.d.-b). An older definition not as commonly utilized anymore.

HIDDEN HOMELESSNESS: People who are living in a situation that "is not a sustainable long-term living arrangement but they do not have the ability to secure their own permanent housing immediately or in the near future." (Gaetz et al, 2012). People considered as experiencing 'hidden homelessness' typically fall under the [Provisionally Accommodated' category and are considered "hidden" because – as they are not on the streets or visibly unsheltered – they are often not identified as being homeless and therefore are frequently not included or counted in statistics about homelessness or the housing-insecure. They may or may not be paying rent to who they are staying with, and they also may or may not access local services and supports.

HOMELESS DUE TO CRISIS: Individuals and families who are homeless because their previous residence became uninhabitable due to a human cause or natural disaster (Fricot, 2014). Under the COH definition, people who have become homeless due to a crisis or disaster can also fall in the Emergency Sheltered category, if they are being temporarily sheltered due to that reason (Gaetz et al, 2012).

YOUTH HOMELESSNESS: Refers to the situation and experience of young people between the ages of 13 and 24 who are living independently of parents and/or caregivers, but do not have the means or ability to acquire a stable, safe, or consistent

residence. Youth homelessness is a complex social issue because some aspects of our society have failed to provide young people and their families with the necessary and adequate supports that will enable them to move forward with their lives in a safe and planned way. In addition to experiencing economic deprivation and a lack of secure housing, many young people who are homeless lack the personal experience of living independently and at the same time may be undergoing significant developmental (social, physical, emotional and cognitive) changes.

For the full definition, please refer to the COH's Canadian Definition of Youth Homelessness (COH, 2016).

SHELTER DEFINITIONS

EMERGENCY SHELTER: These facilities are designed to meet the immediate needs of people who are homeless. Such short-term emergency shelters may target specific sub-populations, including women, families, youth or Aboriginal persons, for instance. These shelters typically have minimal eligibility criteria, offer shared sleeping facilities and amenities, and often expect clients to leave in the morning. They may or may not offer food, clothing or other services. Some emergency shelters allow people to stay on an ongoing basis while others are short term and are set up to respond to special circumstances, such as extreme weather (Gaetz et al, 2012).

HIGH BARRIER SHELTER: an emergency shelter with a number of requirements for entry into the shelter. High barrier shelters generally require clients to be sober (and some require sobriety for a minimum period of time) to gain entry into the shelter (BC Housing, n.d.).

MINIMAL OR LOW BARRIER SHELTER: an emergency shelter with few or minimal requirements for entry. Commonly refers to client use of drugs and/or alcohol (ie. clients do not necessarily need to be sober to be in the shelter or may be able to use in the shelter), but can also refer to such areas as curfews, background checks, employment, chores, or mandatory program attendance (Vann-Turnbull, 2019).

WET SHELTER: an emergency shelter in which sobriety and/or attendance in mandatory treatment programs is not an expectation for being in the shelter, and(in some cases, where clients are allowed to consume alcohol or other drugs inside the shelter. Wet shelters tend to follow a harm reduction philosophy (HeretoHelp, n.d.).

DRY SHELTER: an emergency shelter where clients must be sober from drugs or alcohol to be admitted into the shelter, as well as remain sober during their time in the shelter. Dry shelters may sometimes also require clients to attend mandatory treatment programs as a condition of remaining in the shelter (HeretoHelp, n.d.).

HARM REDUCTION: an approach or strategy aimed at reducing the risks and harmful effects associated with substance use and addictive behaviours for the individual, the community and society as a whole. It is deemed a realistic, pragmatic, humane and successful approach to addressing issues of substance use. Recognizing that abstinence may be neither a realistic or a desirable goal for some users (especially in the short term), the use of substances is accepted as a fact and the main focus is placed on reducing harm while use continues (COH, n.d.-e).

MANAGED ALCOHOL PROGRAM: A program that provides regulated doses of alcohol to residents in supportive accommodation to address seemingly intractable health and social problems experienced by people with alcohol dependence, use of non-beverage alcohol and unstable housing (Woolley, 2016).

WARMING SHELTER (OR WARMING CENTER): a short-term emergency shelter that operates when temperatures or a combination of precipitation, wind chill, wind and temperature become dangerously inclement. Their paramount purpose is the prevention of death and injury from exposure to the elements (Warming center, 2021). These shelters may be daytime only, overnight only, seasonal, and/or 24/7.

HOUSING OR SERVICE DEFINITIONS

HOUSING CONTINUUM: A spectrum indicating all possible housing situations for people, from homelessness to market home ownership (Canadian Mortgage and Housing Corporation [CMHC], 2018). While this has traditionally been viewed linearly (with people moving from left to right across the spectrum during their lives), it has more recently been re-envisioned with the Wheelhouse model (CMHC, 2019).

TRANSITIONAL HOUSING: Housing intended to offer a supportive living environment for its residents, including offering them the experience, tools, knowledge and opportunities for social and skill development to become more independent. It is considered an intermediate step between emergency shelter and supportive housing, and has limits on how long an individual or family can stay. Stays are typically between 3 months and 3 years (GoC, 2020c).

PERMANENT SUPPORTIVE HOUSING: Housing that is permanent (ie. clients have tenant rights and no limit to duration of stay) that combines rental or housing assistance with individualized and flexible support services for people with high needs related to physical or mental health, developmental disabilities or substance use, which may be available 24/7 (GoC, 2020c).

COORDINATED ACCESS (ALSO: COORDINATED INTAKE; COORDINATED ASSESSMENT; CASE COORDINATION; CIRCLE OF CARE): a collaborative standardized process where programs and service providers in a community or region work collectively to assess, plan, implement, co-ordinate, monitor and evaluate the options and services required to meet a person's health, human service and housing needs. Coordinated Access systems may also utilize a 'by-name list', which is a single list shared between service providers for all individuals seeking housing or services to ensure consistency and prevent service duplication.

HOUSING FIRST: A recovery-oriented approach to ending homelessness that centers on quickly moving people experiencing homelessness into independent and permanent housing and then providing additional support and services as needed (COH, n.d.-c).

HOUSING NAVIGATOR (ALSO: COMMUNITY NAVIGATOR): People who are trained and knowledgeable in housing and related supports and services available within a community, and can personally work with each person experiencing homelessness to help them access these supports in culturally reflective ways.

ADDITIONAL DEFINITIONS

'SYSTEM OF CARE' APPROACH: Also known as 'circle of care', this approach is based on individualized, strength-based practices, cultural competence, community-based services, full participation of families at all levels of the system and shared responsibility for successful results.

BEST PRACTICE: a procedure that has been shown by research and experience to produce optimal results and that is established or proposed as a standard suitable for widespread adoption (Best practice, n.d.).

HOMELESS INDIVIDUALS AND FAMILIES INFORMATION SYSTEM (HIFIS): HIFIS is a national data collection and case management system that helps service providers with their day-to-day operations and planning activities, offered for free by Employment and Social Development Canada. HIFIS includes features to track and support the

management of Housing First activities, and collects data on shelter use to help develop a national portrait of homelessness (GoC, 2020a).

POINT IN TIME (PIT) COUNT: a method of quantifying homelessness that intends to provide a "snapshot" of the number of people experiencing homelessness in a community or region, typically within a 24-48 hour period and often performed either annually or every two years. PIT Counts may include counts of people in both Unsheltered situations ('street counts'), as well as people staying in emergency shelters in a community.

HOMELESSNESS ESTIMATION COUNT (ALSO: PERIOD PREVALENCE COUNT): a method of quantifying homelessness where clients are surveyed at service locations or service centers, in contrast to surveying clients who are primarily Unsheltered and on the street, though they can also include counts of people in Unsheltered and Emergency Sheltered situations. Typically, these are conducted over a longer period of time than PIT counts (ie. 30 days) and may be better at identifying clients who are considered Provisionally Accommodated who are still accessing services within a community.

SOCIAL DETERMINANTS OF HEALTH: The social determinants of health influence the health of populations. They include income and social status; social support networks; education; employment/working conditions; social environments; physical environments; personal health practices and coping skills; healthy child development; gender; and culture (GoC, 2020b; Raphael et al, 2020).

WRAP-AROUND SUPPORTS (SERVICES): Refers to comprehensive, often team-based service delivery that help address the underlying causes of homelessness for a person experiencing homelessness. These support services could include medical and psychiatric case management, life skills training, landlord liaison assistance and addictions counseling, and may be available 24/7 in certain situations, such as if a person is staying in permanent supportive housing (COH, n.d.-d).

APPENDIX B: ADDITIONAL RESOURCES

EXTERNAL RESOURCES

- Tamarack Community Engagement Techniques https://www.tamarackcommunity.ca/library/index-of-community-engagement-techniques
- Homeless Rights and Resources by Student Legal Services of Edmonton: https://www.homelesshub.ca/resource/homeless-charter-rights

COILITIONS TERMS OF REFERENCE EXAMPLES

- St. Albert Community Coalition to Prevent Homelessness: http://www.stalberthomeless.ca/
- Comox Valley Coalition to End Homelessness: http://www.cvhousing.ca/wp-content/uploads/2017/06/General-Coalition-Terms-of-Reference-Updated-May-2017.pdf
- Elgin St. Thomas Coalition to End Poverty: https://povertycoalition.ca/terms-of-reference/
- Nanaimo Task Force on Health and Housing: https://www.nanaimo.ca/docs/your-government/boards-and-committees/tor_healthandhousingtaskforce_current.pdf
- Pincher Creek Community Housing Committee: http://www.pinchercreek.ca/public_files/Community%20Housing%20Committee/TERMS%20OF%20REFERENCE%20HOUSING.pdf

YOUTH SHELTERS EXAMPLES ACROSS CANADA

- Camrose Open Door: https://www.camroseopendoor.com/
- Cyrus Centre (Abbotsford and Chiliwack): https://cyruscentre.com/services/
- White Buffalo Youth Lodge (Saskatchewan): https://www.sktc.sk.ca/programs-services/family-community-services/community-supports/white-buffalo-youth-lodge/

GUIDES TO GENDER-NEUTRAL WASHROOMS

- Public Service Alliance of Canada: http://psacunion.ca/sites/psac/files/attachments/pdfs/gender-inclusive-washroom-en-4page_0.pdf
- Alberta government: https://www.alberta.ca/assets/documents/tr/tr-guide-universal-washroom.pdf

RESOURCES ON INCLUSIVITY AND ANTI-DISCRIMINATION

- Anti- Discrimination Framework: https://www.homelesshub.ca/solutions/providing-supports/anti-discrimination-framework
- Anti-Discrimination Toolkit: https://aaisa.ca/toolkit/tag/anti-discrimination/
- Cantalk: https://cantalk.com/
- Centre for Civic Religious Literacy: https://ccrl-clrc.ca/
- Intersectional Approach
    - http://www.ohrc.on.ca/en/intersectional-approach-discrimination-addressing-multiple-grounds-hum
    - https://www.google.com/url?q=https://www.homelesshub.ca/about-homelessness/population-specific/racialized-communities&sa=D&source=editors&ust=1626129325530000&usg=AOvVaw3bEEk2Rtg4Gi9NeQI2a2ni
    - https://www.ccisab.ca/community/language-link.html
- Trauma Informed Care
    - http://med-fom-learningcircle.sites.olt.ubc.ca/files/2013/10/Trauma-informed_Toolkit.pdf
    - Trauma and violence-informed approaches to policy and practice: https://www.canada.ca/en/public-health/services/publications/health-risks-safety/trauma-violence-informed-approaches-policy-practice.html
- Emergency shelter sample policy and procedures - link to list of resources where the document can be downloaded: https://www.bchousing.org/projects-partners/non-profit-resources/resources-a-z

APPENDIX C: WORKSHEETS

Starting on the next page are a series of questions broken down into sections (each section relating to a different part of organizational readiness) that will help you gauge if your organization is prepared to take on an Emergency Mat Program.

These questions have been adapted from the Sustainable Housing Initiative's *"A Step-by-Step Guide to Developing Affordable Housing"* (2019).

Organizational Readiness Assessment

What is your organization's mission, objectives, and strategic priorities?

Organizational Structure	Yes	No	Need to Address
Is the organization incorporated & nonprofit status intact (if applicable)?			
Are you in good standing with relevant government bodies?			
Have you made all required tax filings?			
Do you have a strategic plan or mission that identifies homelessness as a key activity?			
Does management have the ability to manage additional activities?			
Are policies & procedures in place governing homelessness activities?			
Does the organization have adequate liability insurance?			

Board, Staff, & Development Team Capacity	Yes	No	Need to Address
Do board members have professional skills directly relevant to homelessness and/or emergency shelters? What efforts have been made to recruit such board members?			
Has there been stability/continuity of board members over the last several years?			
Is there a good relationship between board and staff? Do they have shared goals for the organization?			
Has the board demonstrated the ability to make timely decisions?			
Background in social work			
Proficient Fundraising/grantsmanship abilities?			
Operations management skills?			
Training: do you provide adequate opportunities and encouragement for staff to receive training and expand their development skills?			
Do you have access to experts beyond your staff in housing development?			
How strong is the internal support of board, members, and staff for the project? Is there internal disagreement? What is the potential impact of the disagreement?			

Financial Management and Capacity	Yes	No	Need to Address
Do you have an annual budget?			
Do you have a process for regularly tracking and monitoring expenditures against budget?			
Do you have adequate procedures in place to monitor cash flow (receipts and disbursements)?			
Do you have adequate cash to pay bills most of the time?			
If you have found a site for the emergency mat program, can you afford the rent for this site? Have you considered how many months' rent you can afford?			
Can you afford the necessary maintenance and operating costs of this project?			
Does the organization have a diversified and stable funding base for operations?			
Are the revenues predictable year-to-year?			
Are any programs or projects currently at risk of being discontinued due to a lack of capacity and/or sustainable funding?			
Do you make regular reports to the board updating financial positions? (If applicable).			

Program Planning and Management	Yes	No	Need to Address
Has the organization done any analyses of the homelessness in the community and the need for an emergency mat program?			
Does the organization have a process for regularly monitoring the progress or reviewing the state of programs and projects? For example: board updates, status reports, quarterly reviews etc.			
Does your team have a process for making timely decisions?			
Do you have positive relationships with your community/neighborhood? Are they likely to support the implementation of an Emergency Mat Program?			
Do you have positive relations with your local government, and can you count on them for support, approvals and funding?			

Project Feasibility and Organizational Impacts	Yes	No	Need to Address
Do we have evidence of a sufficient demand for an Emergency Mat Program in the community?			
Is there a financial plan or analysis demonstrating feasibility and long-term viability?			
Is there a designated site, available long-term, to implement the Mat Program?			
Have you thought about opportunity costs of the program? And mitigated ways in which it will cause other programs or individuals to suffer?			
Are there other benefits to the community from the Emergency Mat Program you plan to implement?			
Long term strategic planning for homelessness response and transitional housing in the community? Strategic planning for regional response			

CONCLUSIONS OF THE ORGANIZATIONAL ASSESSMENT

IF YOU ANSWERED YES TO ALL OF THESE QUESTIONS, it is likely that your organization is ready to move forward with an Emergency Mat program and to embark on the next steps.
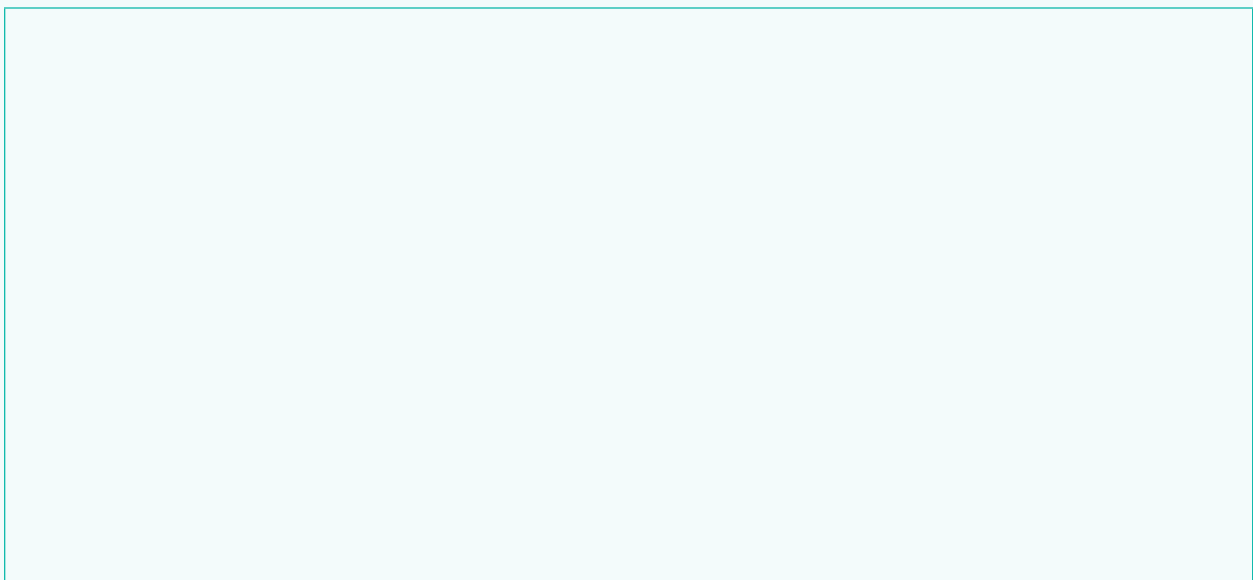
IF YOU ANSWERED YES TO HALF OF THESE QUESTIONS along with a few No's that you have a mitigation strategy for, you are in the right position to move forward with an Emergency Mat Program. We recommend you address the issues with your mitigation strategies as soon as possible for a smoother implementation process.

IF YOU ANSWERED NO TO THE MAJORITY OF THESE QUESTIONS, your organization might need to address a few or more of the issues before moving ahead with the implementation. If you are in a position where time is a key factor, we recommend bringing in external partners to help you dissolve the issues.

Our organization is strongest in the following areas:

The following areas are where improvement is needed if the organization is to succeed at implementing an emergency mat program:

APPENDIX D: BUDGET

An editable Excel Worksheet of the budget is available on RDN's website:

Total Approved Funds	$	-
Total Cost Planned - Current	$	-
Total Cost Planned - Baseline	$	-
Total Committed	$	-
Pressure/Surplus	$	-

Funding Sources	Requested		Approved	
	$	-	$	-
	$	-	$	-
Total	$	-	$	-

Budget	Planned - Baseline	Allocated	Committed	Planned Remaining	Surplus/Deficit
Staff Costs					
Program Staff Salaries	$ -	$ -	$ -	$ -	$ -
Manager / Supervisor Salaries	$ -	$ -	$ -	$ -	$ -
Security Staff Salaries	$ -	$ -	$ -	$ -	$ -
Cleaning Staff Salaries	$ -	$ -	$ -	$ -	$ -
MERCs and Benefits	$ -	$ -	$ -	$ -	$ -
Building/Operational					
Rent / Mortgage	$ -	$ -	$ -	$ -	$ -
Damage Deposit	$ -	$ -	$ -	$ -	$ -
Utilities	$ -	$ -	$ -	$ -	$ -
Insurance	$ -	$ -	$ -	$ -	$ -
Equipment costs (mats, blankets, linens, etc.)	$ -	$ -	$ -	$ -	$ -
Security Costs (ie. cameras, locks, lockers, etc.)	$ -	$ -	$ -	$ -	$ -
Appliances / Kitchen Supplies	$ -	$ -	$ -	$ -	$ -
Maintenance (plumbing, electrical, damage repairs, etc.)	$ -	$ -	$ -	$ -	$ -
Renovations	$ -	$ -	$ -	$ -	$ -
Laundry	$ -	$ -	$ -	$ -	$ -
Cleaning Supplies	$ -	$ -	$ -	$ -	$ -
Administration					
Payroll Costs	$ -	$ -	$ -	$ -	$ -
Office Supplies	$ -	$ -	$ -	$ -	$ -
Computers/Technology	$ -	$ -	$ -	$ -	$ -
Printing	$ -	$ -	$ -	$ -	$ -
Internet/phone	$ -	$ -	$ -	$ -	$ -
Staff Transportation (ie. gas/mileage for staff or program vehicle)	$ -	$ -	$ -	$ -	$ -
Client Transportation (ie. bus tickets for clients)	$ -	$ -	$ -	$ -	$ -
Marketing / Community Engagement					
Advertising /Marketing costs (ie. posters, social media, etc.)	$ -	$ -	$ -	$ -	$ -
Community Engagement (room rentals, posters, food and drink, etc.)	$ -	$ -	$ -	$ -	$ -
Food and Beverages (for clients, staff, volunteers, etc.)	$ -	$ -	$ -	$ -	$ -
Training Costs					
Staff training costs (room rental, supplies, food and drink, etc.)	$ -	$ -	$ -	$ -	$ -
Volunteer costs (recruitment, retention, training, appreciation, etc.)	$ -	$ -	$ -	$ -	$ -
Program Costs					
Cultural Items (Elder honorariums, tobacco for offerings, etc.)	$ -	$ -	$ -	$ -	$ -
Programming Costs	$ -	$ -	$ -	$ -	$ -
Total	$ -	$ -	$ -	$ -	$ -

Potential Opportunity Funding	$ -
Total	$ -

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