

Housing and Support Handbook

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Section 1: Key Concepts

Key Concepts

Intent

To create common definitions, understanding, and language for Service Providers and Case Managers to use. This will ensure a coordinated discussion with Service Providers, Agencies, Landlords, and other Community Members with a goal of reducing the likelihood of miscommunication and misunderstanding.

Key Understandings

An integrated systems approach is required for this work to succeed. This approach does not rely on any one Service Provider, but the delivery of initiatives in a purpose-built and strategic approach by a collective group of Service Providers in support of participant outcomes.

Transparency and consistency are important to build confidence in the system. Transparency implies openness, communication, and accountability in all areas of practice.

Participants are to be set up for success by Case Managers. As a result, participants are to be presented with a choice of housing opportunities so long as the options are suitable based on criteria of affordable and appropriate. If the housing option is higher than the participant's income, the participant will be at imminent risk of eviction, thus frustrating the participant and potentially burning a bridge with a landlord. Landlord relationships remain a high priority in the work on ending homelessness.

Participants are made aware of the full process of engaging in support and will be empowered to decide on the course of action that best suits their current needs.

System Navigation will be a key focus of Case Management services – it is expected that Case Managers will nurture and maintain relationships with agencies in the community – this work cannot be done alone. Case Managers will engage the participant in the navigation process to ensure participant-focused support.

Participants will be supported to their highest level of independence, which is expected to change over time. Case Managers will adjust service delivery and not expect participants to change or adjust.

Participants will be encouraged to actively engage in building life skills with their Case Manager who will directly teach and model these new skills whenever possible or refer the participant to a program that will help build life skills.

Access to support will be prioritized through assessments that measure acuity and through interviews with the participant and their authorized support network. Those with higher acuity and more pressing issues will be prioritized first, except in cases where prior consent was obtained from the CBO.

Case Managers will engage in trauma-informed, recovery-oriented practices that are person-centered, strength-based and ensure every participant's tomorrow is better than today.

Case Management participation is not linked to maintaining tenancy. Housing interventions will continue to occur until stability is achieved or the participant elects to discontinue services.

Case Managers will support participants throughout the entirety of the housing process. Participants will be accompanied to viewings, during lease signing, during the entire move in process, and Case Managers will ensure that a neighborhood and building orientation occur within the first week of housing. See Section 4: Case Management for more detail.

The housing process is outcome-driven (what was achieved and what difference was made) and will focus on helping participants remain stable in housing. When what people do aligns with what they think and feel, it is more likely that they will achieve the goals that are being set.

Service Providers will build a multi-disciplinary team of Case Managers. Please see Section 3: Program Administration for Core Competencies.

Case Managers are encouraged to learn and build on their practice. This includes Team Lead and peer support. Case Managers are expected to attend training surrounding Core Competencies and are encouraged to suggest training as it relates to effective service delivery and to staying relevant to the ever-changing landscape of work within a homelessness context.

Case Managers acknowledge that participants who are actively using substances remain eligible for services, and discussions will occur regularly about opportunities to pursue treatment and recovery programs. Part of building trusting relationships will include identifying and outlining concerns around safety and creating safety plans as appropriate.

Case Managers will provide service within the participant's home as well as natural settings. Participants are neither expected to nor required to attend appointments within the Service Provider's office. In circumstances where staff safety is a concern, office visits or Case Manager pairings may be necessary. Case Managers will interact with participants by phone, text, email, in person, or by any other means that the participant requires. All Significant Interactions will be documented.

Active engagement in Case Management is required for participants to remain active on a caseload. Case Managers will create a schedule of home visits that is based on the participant's acuity score and may change over time. See Section 4: Case Management for more details.

In all instances Case Managers are expected to practice techniques that support participants who may have issues with literacy and/or numeracy. This prevents participants from having to disclose this information to Case Managers and ensures that participants truly understand the information provided.

Case Managers will be available on various days and at various times and not limited to typical business hours. Case Management support is not required to be available 24/7 but is available outside of regular business hours for those whose schedule requires this.

In circumstances where other supports are involved with the participant, the Case Manager will take it upon themselves to arrange for regular communication with all other supports involved and will arrange case conferences with the entire team as required.

The goal of Case Management is to ensure participants are able to transition to regular support or independence within a reasonable time frame. Building strengths and life skills is a constant focus for participants and is to be based on self-determined goals that will help stabilize the participant's situation and lead to self-sufficiency. For example, working through an application with a participant to determine their level of ability with reading comprehension and writing skills, or supporting the participant to clean their home the first time to determine their level of life skill and ability with housekeeping.

Graduation planning is a discussion that occurs upon intake so that the participant is not surprised by the progression of services. There is no time limit to service, however it is estimated that most participants should remain on a caseload for 12-18 months. For participants who don't meet the graduation criteria at the 12–18-month mark, that does not mean they will be discharged, only that the participant requires more time, and this should be the exception not the rule.

It is expected that the Team Lead and Case Managers will build relationships with other agencies in order to support the work of Case Management, and that Case Managers are knowledgeable about the network of services and have up-to-date information regarding what services are available and how to access. Case Managers are encouraged to reach out to other service providers and build their own professional networks in order to help support participants in navigating their community.

It is the responsibility of all CBO funded service providers to ensure that results are achieved relating to experiences of homelessness in our community being brief and non-recurring. Each service provider is expected to commit to the aspirational work of ending homelessness in Lethbridge. The only way to achieve this result is to work collaboratively.

The CBO defines clear performance expectations, indicators and metrics, and will perform quality assurance and monitoring that systematically evaluates the effectiveness of the program that is in place. It will also determine whether the system's efforts are making an impact on the participants and effectively working towards a coordinated system of care in Lethbridge.

The CBO sets the operational expectations for service provision, based on requirements from the Government of Alberta and best practices. The CBO will consult with a range of experts in the field in this process.

The CBO selects Service Providers that are able to meet the service deliverables, objective, and outcomes as outlined by the Government of Alberta and updated from time to time.

The CBO has the right to mandate and require specific service and training expectations are met. Opportunities outside of these mandated trainings may be covered by the CBO through a request from the Service Provider, however approval is based on availability of funds and how relevant the training is to the scope of work.

The CBO is committed to building and maintaining strong and vibrant community partnerships, which includes sharing accurate information wherever possible, and collaboration on community issues.

This Handbook aims to hold participating Service Providers and programs accountable to funders, standardize Service Provider and Case Management expectations, align results with outcomes at all

levels, and inform the process for strategic investment of funding. This Handbook works alongside Service Provider Agreements – the Agreement is responsible for outlining the type of services delivered and the outcomes expected of each Service Provider. This Handbook will be referenced within the Agreement as the minimum standard for policy creation and act as a common reference point for assessing performance.

Section 2: Program Information

Adaptive Case Management (ACM)

Intent

Adaptive Case Management provides individualized support to help participants obtain, move into, and maintain permanent housing, and to connect participants to the community and to mainstream services and support, as required.

Outputs

1. 100% of participants have an Integrated Service Plan (ISP)
2. 100% of participants receiving housing-focused case management will receive in-home visits in accordance with the Objective Cased Visit Requirement (see Case Management in Section 4 below)
3. 95% of housed participants will be assessed and connected with appropriate community support in accordance with the individual's ISP.

Outcomes

1. Those housed through the program will remain stably housed.
2. Those persons housed through the program will show a reduction in inappropriate use of public systems.
3. Those persons housed through the program will demonstrate improved self-sufficiency.
4. Persons accepted into the program will demonstrate engagement in mainstream services.

Outcome Indicators/Measures (Seniors, Community and Social Services Mandated)

1. At any given reporting period, 85% of the people housed will still be permanently housed.
2. Those persons permanently housed will show reduced incarcerations, reduced emergency room visits, and reduced in-patient hospitalizations.
3. Persons housed in the program will have a stable income source (e.g., employment income, AISH, AB Works, pension, etc.).
4. Persons housed in the program will be engaged in mainstream services.

Reporting

This program reports into ETO based on the Data Collection & Data Entry standards set in Section 3 below.

Intensive Case Management (ICM) – High Acuity

Intent

The Intensive Case Management (ICM) program provides case management and housing support to high acuity participants and families who are experiencing homelessness or who are at imminent risk of homelessness, as defined in the Key Definitions below. The program provides support to tackle the issues that prevent the participant from accessing permanent housing and builds life skills and independence to the participant's highest level of ability.

Outputs

1. Participants are moved from homelessness into housing.
2. Participants who are housed remain housed at 12 months.
3. The program operates at or near capacity.
4. Intensive Case Managers successfully support Participants to secure and maintain housing.

Outcomes

1. Those housed through the program will remain stably housed.
2. Those persons housed through the program will show a reduction in inappropriate use of public systems.
3. Those persons housed through the program will demonstrate improved self-sufficiency.
4. Persons accepted into the program will demonstrate engagement in mainstream services.

Outcome Indicators/Measures (Seniors, Community and Social Services Mandated)

1. At any given reporting period, 85% of the people housed will still be permanently housed.
2. Those persons permanently housed will show reduced incarcerations, reduced emergency room visits, and reduced in-patient hospitalizations.
3. Persons housed in the program will have a stable income source (e.g., employment income, AISH, AB Works, pension, etc.).
4. Persons housed in the program will be engaged in mainstream services.

Reporting

This program reports into ETO based on the Data Collection & Data Entry standards set in Section 3 below.

Eviction Prevention

Intent

The goal of Eviction Prevention is to provide support to maintain the participant's tenancy and ensure that eviction and potentially homelessness is a last resort.

Outputs

1. Caseload of 25 active (contact within 14 days) participant
2. 85% of those provided with an intervention remain stable in housing.

Outcomes

1. Those housed through the program will remain stably housed.
2. Those persons housed through the program will show a reduction in inappropriate use of public systems.
3. Those persons housed through the program will demonstrate improved self-sufficiency.
4. Persons accepted into the program will demonstrate engagement in mainstream services.

Outcome Indicators/Measures (Seniors, Community and Social Services Mandated)

1. At any given reporting period, 85% of the people housed will still be permanently housed.
2. Those persons permanently housed will show reduced incarcerations, reduced emergency room visits, and reduced in-patient hospitalizations.
3. Persons housed in the program will have a stable income source (e.g., employment income, AISH, AB Works, pension, etc.).
4. Persons housed in the program will be engaged in mainstream services.

Reporting

This program reports into ETO based on the Data Collection & Data Entry standards set in Section 3 below.

Hoarding Outreach Management and Education (HOME)

Intent

The goal of the HOME program is to reduce the impact of hoarding on an individual's and/or family's housing, and to provide direction and support to the HOME Committee.

Outputs

1. Caseload of 25 active (monthly contact at minimum) participants
2. 90% of those provided with an intervention remain stable in housing.
3. 25% reduction in Clutter Image Rating scores by at least 1 point over 6 months.
4. Minimum of 6 education and information sessions are provided annually.

Outcomes

1. Those housed through the program will remain stably housed.
2. Those persons housed through the program will show a reduction in inappropriate use of public systems.
3. Those persons housed through the program will demonstrate improved self-sufficiency.
4. Persons accepted into the program will demonstrate engagement in mainstream services.

Outcome Indicators/Measures (Seniors, Community and Social Services Mandated)

1. At any given reporting period, 85% of the people housed will still be permanently housed.
2. Those persons permanently housed will show reduced incarcerations, reduced emergency room visits, and reduced in-patient hospitalizations.
3. Persons housed in the program will have a stable income source (e.g., employment income, AISH, AB Works, pension, etc.).
4. Persons housed in the program will be engaged in mainstream services.

Reporting

This program reports to the CBO as required.

Community Support Worker

Intent

The Community Support Worker will create housing conditions that build stability, shared responsibility, and strong positive systems of support within the LHA/L&RCHC residential community and within the community at large. The Community Support Worker works with LHA/L&RCHC residents and subsidy recipients to promote housing stability and connections to outside community support that will ultimately ensure housing tenure.

Outputs

1. Caseload of 50 active participants.

Outcomes

1. Those housed through the program will remain stably housed.
2. Those persons housed through the program will show a reduction in inappropriate use of public systems.
3. Those persons housed through the program will demonstrate improved self-sufficiency.
4. Persons accepted into the program will demonstrate engagement in mainstream services.

Outcome Indicators/Measures (Seniors, Community and Social Services Mandated)

1. At any given reporting period, 85% of the people housed will still be permanently housed.
2. Those persons permanently housed will show reduced incarcerations, reduced emergency room visits, and reduced in-patient hospitalizations.
3. Persons housed in the program will have a stable income source (e.g., employment income, AISH, AB Works, pension, etc.).
4. Persons housed in the program will be engaged in mainstream services.

Reporting

This program reports to the CBO as required.

Senior System Navigator (SSN)

Intent

The Senior System Navigator will work in collaboration with the Seniors Community Services Partnership (SCSP) and community partners as a population specialist for Seniors, providing referrals and service navigation, case management, or outreach support. The SSN will collaborate with various support agencies to engage in organized senior centered service planning, avoid agency duplication, and fill gaps.

Outputs

1. 95% of participants age 60+.
2. Caseload of 25 active participants.

Outcomes

1. Those housed through the program will remain stably housed.
2. Those persons housed through the program will show a reduction in inappropriate use of public systems.
3. Those persons housed through the program will demonstrate improved self-sufficiency.
4. Persons accepted into the program will demonstrate engagement in mainstream services.

Outcome Indicators/Measures (Seniors, Community and Social Services Mandated)

1. At any given reporting period, 85% of the people housed will still be permanently housed.
2. Those persons permanently housed will show reduced incarcerations, reduced emergency room visits, and reduced in-patient hospitalizations.
3. Persons housed in the program will have a stable income source (e.g., employment income, AISH, AB Works, pension, etc.).
4. Persons housed in the program will be engaged in mainstream services.

Reporting

This program reports to the CBO as required.

Supportive Housing (SH)

Intent

Supportive Housing is a 24-hour staffing model in a residential facility for those participants who have been designated to require more support than market housing can accommodate.

River House

River House is an SH facility that operates as part of the SH Consortium and is managed by Family Ties. River House provides housing for 10 individuals in a congregate living setting, housing males who have experienced chronic homelessness and are challenged with complex and co-occurring barriers to sustaining independent housing.

VERSA Program

VERSA Program is an SH facility that operates as part of the SH Consortium and is managed by SASHA. VERSA Program provides housing for 10 individuals in a congregate living setting, housing people of any gender who have experienced chronic homelessness and are challenged with complex and co-occurring barriers to sustaining independent housing.

Hestia Homes

Hestia Homes are SH facilities that operate as part of the SH Consortium and are managed by the YWCA Lethbridge & District. Hestia Homes provide housing for 9 individuals in 3 congregate living settings, housing mid-acuity youth (17 – 24 years) who have experienced chronic or episodic homelessness and are challenged with complex and co-occurring barriers to sustaining independent housing.

Outputs

River House

1. 100% of participants will be referred through SH Consortium referral process
2. 100% of participants received into River House will be determined by the Placement Committee priority setting process.
3. 100% of assessed participants suspected of being eligible will be referred for PDD and FASD assessments.

VERSA House

1. 100% of participants will be referred through SH Consortium referral process
2. 100% of participants received into VERSA Program will be determined by the Placement Committee priority setting process.
3. 100% of assessed participants suspected of being eligible will be referred for PDD and FASD assessments.

Hestia Homes

1. 100% of participants will be referred through SH Consortium referral process
2. 100% of participants received into Hestia Homes will be determined by the Placement Committee priority setting process.
3. 100% of assessed participants suspected of being eligible will be referred for PDD and FASD assessments.

Outcomes

1. Those housed through the program will remain stably housed.
2. Those persons housed through the program will show a reduction in inappropriate use of public systems.
3. Those persons housed through the program will demonstrate improved self-sufficiency.
4. Persons accepted into the program will demonstrate engagement in mainstream services.

Outcome Indicators/Measures (Seniors, Community and Social Services Mandated)

1. At any given reporting period, 85% of the people housed will still be permanently housed.
2. Those persons permanently housed will show reduced incarcerations, reduced emergency room visits, and reduced in-patient hospitalizations.
3. Persons housed in the program will have a stable income source (e.g., employment income, AISH, AB Works, pension, etc.).
4. Persons housed in the program will be engaged in mainstream services.

Reporting

This program reports into ETO based on the Data Collection & Data Entry standards set in Section 3 below.

Secure First

Intent

The Secure First Program provides a Security Deposit and/or First Month's Rent to participants who are identified to be in need. The Secure First program will provide eligible participants with up to \$2000 in funding over the course of their lifetime pending there are funds remaining in the program. Should a previous Security Deposit be returned, that will credit the participants lifetime amount. If the participant has accessed all lifetime amounts, but is moving into SH, overage may be considered on a case-by-case basis with consent from the CBO. Tier 3 System Navigators, ACM/ICM Staff and SH staff can apply to this fund.

Outputs

1. All applications are reviewed with results communicated within 3 business days.
2. 85% of those provided with a financial intervention remain stable in housing.

Outcomes

1. Those housed through the program will remain stably housed.
2. Those persons housed through the program will show a reduction in inappropriate use of public systems.
3. Those persons housed through the program will demonstrate improved self-sufficiency.
4. Persons accepted into the program will demonstrate engagement in mainstream services.

Outcome Indicators/Measures (Seniors, Community and Social Services Mandated)

1. At any given reporting period, 85% of the people housed will still be permanently housed.
2. Those persons permanently housed will show reduced incarcerations, reduced emergency room visits, and reduced in-patient hospitalizations.
3. Persons housed in the program will have a stable income source (e.g., employment income, AISH, AB Works, pension, etc.).
4. Persons housed in the program will be engaged in mainstream services.

Reporting

This program reports into ETO based on the Data Collection & Data Entry standards set in Section 3 below.

Diversion

Intent

The Diversion Program provides funding to participants who have an Eviction Notice or renters who have Utility Arrears who are identified to be in need. The Diversion program will provide eligible participants with up to \$1500 in funding over the course of their lifetime pending there are funds remaining in the program. If the participant has accessed all lifetime amounts, overage may be considered on a case-by-case basis with consent from the CBO. Tier 3 System Navigators, ACM/ICM and SH staff, can apply to this fund.

Outputs

1. All applications are reviewed with results communicated within 3 business days.
2. 85% of those provided with a financial intervention remain stable in housing.

Outcomes

1. Those housed through the program will remain stably housed.
2. Those persons housed through the program will show a reduction in inappropriate use of public systems.
3. Those persons housed through the program will demonstrate improved self-sufficiency.
4. Persons accepted into the program will demonstrate engagement in mainstream services.

Outcome Indicators/Measures (Seniors, Community and Social Services Mandated)

1. At any given reporting period, 85% of the people housed will still be permanently housed.
2. Those persons permanently housed will show reduced incarcerations, reduced emergency room visits, and reduced in-patient hospitalizations.
3. Persons housed in the program will have a stable income source (e.g., employment income, AISH, AB Works, pension, etc.).
4. Persons housed in the program will be engaged in mainstream services.

Reporting

This program reports into ETO based on the Data Collection & Data Entry standards set in Section 3 below.

Subsidy

Intent

The Subsidy Program provides a monthly subsidy on a 12-month term to participants who are identified to be in need. The Subsidy program will provide eligible participants with up to \$600 per month in funding each month, pending there are funds remaining in the program. The ACM/ICM and SH program staff can apply to this fund.

Outputs

1. Approximately 20 participants are helped with subsidy each month.
2. All applications are reviewed with results communicated within 3 business days.
3. 85% of those provided with a financial intervention remain stable in housing.

Outcomes

1. Those housed through the program will remain stably housed.
2. Those persons housed through the program will show a reduction in inappropriate use of public systems.
3. Those persons housed through the program will demonstrate improved self-sufficiency.
4. Persons accepted into the program will demonstrate engagement in mainstream services.

Outcome Indicators/Measures (Seniors, Community and Social Services Mandated)

1. At any given reporting period, 85% of the people housed will still be permanently housed.
2. Those persons permanently housed will show reduced incarcerations, reduced emergency room visits, and reduced in-patient hospitalizations.
3. Persons housed in the program will have a stable income source (e.g., employment income, AISH, AB Works, pension, etc.).
4. Persons housed in the program will be engaged in mainstream services.

Reporting

This program reports into ETO based on the Data Collection & Data Entry standards set in Section 3 below.

Section 3: Program Administration

Grant Accountability Review

Intent

To outline the requirements of the Grant Accountability Review (GAR) that will occur annually for Service Providers. The requirement is a minimum standard, and anything the Service Provider elects to do above and beyond is at the discretion of the Service Provider.

Requirement

The Grant Accountability Review (GAR) is a standardized process that occurs on an annual basis (though certain aspects of the review may occur more frequently). This document will set policy standards and includes a section of “Grant Accountability Review” items that will occur so that Service Providers know exactly what to prepare for each year. As the Housing and Support Handbook is updated, these documents may be updated as well, so it is up to the Service Provider to ensure they are using the most recent version of this document, which can be found on the Lethbridge Housing Authority website. As items are updated, the Version will be changed.

Additional Documents

This area may include any additional documents that could help. These documents are not required to be used (unless otherwise noted in the section) and are only suggestions provided to Service Providers in case this is not already in practice.

Accountability

This will outline which Programs are required to follow this guideline.

Grant Accountability Review

This will explain what the Service Provider is expected to prepare (if anything)

Contract Management

Intent

To set the expectation of contract management from the Service Provider perspective as well as the CBO perspective.

Requirement

The CBO will ensure that contracts are sent to Service Provider's on or before March 1st. The Service Provider will return the signed contract no later than March 31st to ensure continuity of service. Late agreements will not be accepted without written authorization from the CBO.

For any contracts that begin mid-year, up to 30 days will be given to the Service Provider to ensure that there is ample time to read and understand their contract. Late agreements will not be accepted without written authorization from the CBO.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

Contract reviewed and is signed prior to the April 1st start date (or within 30 days of issue).

Staffing

Intent

To outline the staffing responsibilities of each Service Provider receiving funding under contract from the CBO.

Requirement

Staffing is outlined in each Service Provider's contracts, and it is the responsibility of the Service Provider to ensure that staffing is being maintained as per the contract. The Service Provider is required to have written Position Descriptions for all CBO funded positions and will ensure hiring practices adhere to these position descriptions. The Service Provider will ensure that all staff are trained in FOIP and other confidentiality practices, as well as Incident Reporting.

Each Service Provider is required to report any changes that will impact service delivery or significantly impact funding from the CBO before the end of the funding period.

Funding will only be provided for actuals paid out to staff as confirmed annually by Profit and Loss statements.

The Service Provider will have a system they are using to track and manage information regarding staffing (training, reviews, documentation, forms, etc.).

Service Providers will build a multi-disciplinary team of Case Managers that suits the population the Service Provider is expected to support. Case Managers are professionals who are trained to provide housing support and will be knowledgeable in matters pertaining to the activities outlined in the contract. These skills include but are not limited to the following:

- Active Listening
- Assertive Engagement
- Assist participants working through the Stages of Change
- Broker and Advocate for services as appropriate
- Crisis De-escalation
- Help establish goals and build an ISP
- Motivational Interviewing
- Organize and chair case conferences
- Prepare documentation
- Risk Assessment
- Use Universal Precautions

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Profit and Loss Statement sent in and compared to the budget to confirm staffing annually.
- Sample Staff Files including Position Description.

Core Competencies and Capacity Building

Intent

To ensure that Service Provider staff are provided with the tools required to carry out their role within the program and to best support participants.

Requirement

Service Providers are expected to ensure that all Case Managers funded under contract by the CBO complete training in the core competencies outlined below. All training courses are renewed every three years at a minimum, unless otherwise required by the Trainer. The CBO acknowledges that ongoing training is important for capacity building, and as such additional training suggestions made to the CBO will be considered and may be offered to CBO funded Service Providers or to outside organizations. Service Provider training budgets may be used for training outside of this list, should capacity exist.

Within 14 days of hire:

- Review Housing and Support Handbook
- Review Service Provider specific policies and procedures
 - Includes Working Safely Alone and Incident Reporting
- Documentation Training
- FOIP Training
- Assessment Tool Training

Within 6 months of hire:

- Standard First Aid and CPR
- Disease Prevention and Universal Precautions
- Crisis Intervention/De-Escalation
- Suicide Intervention
- Motivational Interviewing
- Workplace Mental Health
- Trauma Informed Care

The CBO will organize opportunities for staff to receive population-specific training based on the populations they are working with. All staff are expected to attend Indigenous population training at a minimum, and any other trainings depending on what populations they are typically engaging. Staff are also encouraged to participate in cultural education that may not already be provided by local agencies, based on the population they work with regularly. Population specific training will be renewed annually.

Service Providers will build a multi-disciplinary team of Case Managers that suits the population the Service Provider is expected to support. Case Managers are professionals who are trained to provide housing support and will be knowledgeable in matters pertaining to the activities outlined in the contract. Examples of Core Subject Matter Service Providers may wish to include:

- AB Supports and AB Works
- Addictions
- Ageing and Life Changes
- Brain Injuries
- Domestic Violence
- Fetal Alcohol Spectrum Disorder
- Health Services
- Hoarding
- Housing and homelessness
- Human Trafficking
- Impacts of Abuse
- Justice
- Mental Health Services
- Poverty and Social Health Inequities
- Recovery Focus
- Residential Tenancies Act
- Trauma
- Treatment

Additional Documents

[Orientation Checklist.docx](#)

Accountability

All Service Providers are expected to adhere to this policy as a minimum standard. Any training not included on this list might not be provided by the CBO, however recommendations are encouraged in order to improve the quality of services offered to participants.

Grant Accountability Review

Sample Orientation Checklist submitted for CBO Funded staff (number to depend on staff detailed on Contract)

Risk Management

Intent

To ensure all Service Providers in receipt of CBO funding have policies in place to mitigate unnecessary risk and ensure safety of Case Managers, participants, and community members.

Requirement

Service Providers recognize that this work is not without risk and will balance the inherent risk of this work with ensuring appropriate support is available for participants.

Each Service Provider will have policies that satisfy the following minimum requirements:

- Safe Work Site Practices: this policy will minimally include assessing work sites and identifying potential hazards and taking measures to eliminate or control identified hazards.
- Working Safely Alone: this policy will ensure that provincial and federal working alone safely legislation is implemented, and that staff are oriented to working alone safely processes.
- Risk Assessments: this policy will speak to when a risk assessment is to be conducted, and at what frequency reassessments would occur. It is minimally expected that the first risk assessment will be completed within two weeks of the participant starting to receive services. It will also speak about interventions expected or anticipated, and when interventions are to occur, and when any service restrictions would occur.
 - Service Restrictions are to be used sparingly

Additional Documents

[Sample Risk Assessment.docx](#)

[AB Working Safely Alone.pdf](#)

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Provide a copy of the “Working Safely Alone” Policy
- Provide a copy of the “Safe Work Site Practices” Policy
- Provide a copy of the “Risk Assessment” Policy

Critical Incident Reporting

Intent

To offer Service Providers a clear and consistent protocol for reporting critical incidents as they occur.

Requirement

Each time a critical incident occurs it must be reported to the Grant Administrator within 24 hours of the incident occurring and the Government of Alberta (by way of the CBO). If an incident occurs on the weekend, it will be reported by the end of the following business day. Depending upon the severity of the incident, it may be expected that a brief “heads up” summary is sent to the CBO in advance of the completed incident report, based on the events that have occurred. This would occur in situations where there is already developing media attention, anticipated media attention, or anything that may impact ongoing service provision.

The Service Provider has a written policy defining what is considered a serious incident that satisfies the following minimum standard.

The Government of Alberta has declared the following to be reported, at a minimum:

- All fatalities of any individual receiving services through an SCSS-funded Service Provider or facility (if details of this are not available within the 24-hour reporting period, please report as much information as possible, with further details to follow upon confirmation)
 - Please include any relevant history (medical diagnoses, alcohol/substance use) as well as cause of death or suspected cause of death, when known. If the cause of death is unknown, please contact the Medical Examiner’s office.
- A serious incident or injury involving an individual receiving services through an SCSS-funded Service Provider or facility or staff person.
 - A serious incident includes the following, though additional incidents may be reported at the discretion of the Service Provider: a suicide attempt or attempt of self-harm, a medical emergency, serious illness or accident requiring further medical or justice intervention, threats of violence or weapons, significant risk to public safety, suspicions and/or allegations of abuse, or reports of missing persons from programs to Police.
- A crisis situation, serious incident, or developing situation with media or potential for media.
 - As we are unable to predict which situations have the potential for media, we ask Service Providers to use their discretion, and err on the side of caution if such an incident were to occur.
 - If a media request is received by a service provider and relates to a developing or occurring incident, prior to speaking to the media the Service Provider is expected to advise the CBO by way of an incident report that will be forwarded to SCSS staff. If an incident report has already been submitted, an update will be sent to the CBO based on media attention. **For greater detail on Media Incidents, please see the LHA Policy.**
- Closure or interruption of services delivered at an SCSS-funded facility due to unforeseen circumstances.

- If an incident occurs that requires the site to be evacuated or if there is a significant disruption of functioning capacity, please inform as urgently as operationally feasible.

Each Service Provider’s policy is expected to outline a process as per the following:

- Who is responsible for reporting the incident
- What documentation to include
 - A brief history of events or circumstances leading up to the incident
 - Behavior of the participant, if applicable
 - Timeline of the intervention used
 - Description of actions taken by staff and/or others involved
 - Follow up actions or recommendations
 - Funder has been informed as applicable
- Follow up after the incident, which will include incident de-briefing
- Which supervisor or senior staff is to sign off on said incident (and alternatives should responsible staff be unavailable)
- The appropriate authorities have been informed within 24 hours of the incident occurring (i.e., police, funder, legal guardian)
- That all incident reports are reviewed minimally on an annual basis to ensure that information included is complete and appropriate, identify any trends, address any corrective action required, and ensure reporting requirements are being met.

Additional Documents

[Incident Report Template - agencies.doc](#)

[Incident Report Log.xlsx](#)

[8.10 CBO Media and Public Relations.docx](#)

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Provide a copy of the Incident Report policy and/or procedure
- Incident Reporting Log

Record Management

Intent

To ensure each Service Provider has a policy on the safe handling of participant confidential information.

Requirement

All Service Providers receiving funding from the CBO are responsible for the safe keeping, storage, transfer, retention, and destruction of confidential participant information, as well as participant access to case files. The Service Provider policy will speak to the following:

- Safe keeping of hard copy files and will include:
 - Files are stored in a lockable filing cabinet, in a manner that is organized and easy for others to navigate.
 - How often file audits are to occur, with the minimum standard of annually.
- Storage of hard copy files and will include:
 - What documents will be stored in case files.
 - Safety precautions include the requirement of hard copies to be stored behind a double lock system.
 - When case files are allowed to leave their storage space.
 - How long hard copy files are stored within the Service Provider (minimum requirement is seven years after the file becomes inactive).
- Transfer of hard copy Case Files, and will include:
 - Specific descriptions of when case files are allowed to leave the Organization.
 - When to use the Consent for Client File Transfer forms.
 - Instructions for Agency-to-Agency referrals (if applicable).
 - Instructions for Change of Program Contract.
- Retention and Destruction of hard copy Case Files
 - Hard copy case files must be stored for a period of at least 7 years.
 - After 7 years have passed the Service Provider can request the documents be destroyed.
 - Steps to take prior to the destruction of hard copy files (it is a requirement to request approval from the CBO prior to destruction, and to include the fact that service providers do not have legal authority to keep any information from the participant's files, nor can they take photocopies of the files for their own archives.)
- Participant Access to Case Files
 - Service Provider policy will contain information on how participants access their own case files, and how to make changes to information that they disagree with noted in their files.

Additional Documents

[File Audit Checklist.xlsx](#)

[C2 Consent to Client File Transfer Form.docx](#)

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Prove a copy of the Record Management Policy
- Site visit
- Sample File Audit Checklist
- Sample Files to be Reviewed

Consent for Service

Intent

To ensure consistency in practice among CBO funded Service Providers, and to ensure that each Service Provider is practicing informed consent in a way that participants are able to comprehend.

Requirement

All Service Providers receiving funding from the CBO will ensure that they are practicing an informed consent for service process in a way that the participants they are supporting comprehend. Program Participants are, at a minimum, provided with clearly defined program expectations at the time of intake, which will include:

- What services the program delivers.
- The program's expectations are of the participant, including:
 - Engagement with supports
 - Regular communication with program staff
 - Expectations around home visits
 - Integration with community services
 - Respectful and non-threatening interactions with program staff
- Which portion (if any) of the program is optional.
- Discharge process, both planned and unplanned.

Expectations will be written in plain language that is easy to understand for the participant. In all instances Case Managers are expected to practice techniques that support participants who may have issues with literacy and/or numeracy. Case Managers are to review these expectations with the participant and a written copy will be offered to the participant.

Participant consent to service provision is provided voluntarily and can be revoked at any time; withdrawal of consent does not preclude the individual from participating in program services in the future.

Additional Documents

[Consent to the Disclosure of Personal Information May 2023.pdf](#)

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Provide a copy of the consent for Service Policy.
- Sample Case File for evidence copies are offered to participants.

Documentation

Intent

To ensure each Service Provider practices consistency in documentation standards.

Requirement

Service Providers are expected to have a policy or policies that meet the following minimum standards of expectation:

- All Individualized Service Plans (ISPs) are to be documented, either tracked in ETO for those programs that enter their data in ETO, or by paper copy.
- All significant Case Management participant interactions will be documented regardless of the type of interaction (in-person, via email, text, voicemail, letter, etc.). Participants may review their case files at their request. The Funder may review documentation by request.
- Any case conferences that occur will be documented, and the Case Manager will be responsible for collecting and distributing to all support staff involved.
- Case notes and other participant documentation are to be written using professional language and will strictly report facts and observations.
- Documentation that is requested by subpoena or other appropriate legal means will be provided in accordance with said legislation.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy. The Financial Programs (Secure First, Diversion, and Subsidy) do not require separate ISPs for the Financial Component.

Grant Accountability Review

Documentation Policy is provided.

Participant Engagement

Intent

To ensure each Service Provider is practicing effective participant engagement in building relationships that begins upon intake.

Requirement

A key focus of case management is participant engagement and relationship building, and this occurs both in the community and in the home. Case Managers will provide services within the participants' home as well as other natural settings. Engagement is neither expected to be nor required to be within the Service Provider office (unless this is the same location as an SH Facility). This process may also vary as the level of stability of the participant changes, or in relation to the relative safety of the participant's household. When participants become unhoused during the process, visit frequency will remain and "home visits" will occur within the community, based on locations that meet the needs of the participant and the safety of the ACM Case Manager.

Case Managers will interact with participants by phone, text, email, in person, or by any other means that the participant requires. Participants of ACM programs should be made aware that home visits are a part of case management and initially will occur at a regular interval based on the program they are enrolled into. Case Managers are expected to take reasonable steps in building trusting relationships with participants they are supporting, however building these relationships may take time. Case Managers are expected to take reasonable steps to engage participants and may work with other agencies within the community to utilize some relationship equity of these agencies, except in cases where doing so may jeopardize the existing relationship.

If the participant of an ACM or Eviction Prevention program does not attend one of their regularly scheduled visits, it will be documented in ETO. It will be clearly outlined to participants that if they miss two weeks of consecutive visits, they will be flagged for disengagement, and they may be discharged after 30 days based on the approval of the Team Lead. If they are discharged, they may be required to start the intake process over again in order to access services. If the participant has missed consecutive home visits and the Case Manager has reason to believe that they may be at risk, the Case Manager is responsible for calling in a welfare check through the Police. Case Managers will explain this to participants upon intake.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

Sample ETO Documentation to determine engagement. If the program does not utilize ETO for documentation, the Service Provider and CBO will review the tracking system that is in place to ensure measures are being followed.

Confidentiality and Protection of Information

Intent

To ensure each Service Provider has a policy on the safe handling of participant confidential information.

Requirement

The Service Provider is expected to create a policy regarding the safe handling of participant confidential information. At a minimum, the Service Provider will ensure that all participants have been informed of the type of personally identifying information that is being collected, the purpose of collecting said information, how the information will be used, how to access information, how it will be stored and for how long, who the information is allowed to be shared with, and who has access to this information (CBO and GoA). Participants must acknowledge that the Freedom of Information and Protection of Privacy Act (FOIP) applies to all information and records transferred to or collected, created, maintained, or stored by the program. The FOIP Disclaimer must be read to each participant at the point of intake, and the Client Acknowledgement that Information is Being Collected Form must be utilized and can be adapted according to the instruction on the form. Each Service Provider will designate an individual employee who is responsible for safety and security practices.

Additional Documents

[Consent to Collect Information.docx](#)

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Provide a copy of the confidentiality policy.
- All Service Providers will demonstrate that the Client Acknowledgement that Information is Being Collected forms are being used (in their original form or a CBO approved form) and are included in the hard copy Case Files.

Release of Information

Intent

To ensure each Service Provider has a consistent process regarding their release of information.

Requirement

Service Providers will have a policy in place that will ensure that participants authorize the use and disclosure of individually identifying personal information by signing the *Consent to the Disclosure of Personal Information* form. By signing the form, the participant will acknowledge that all other CBO funded Service Providers, including the CBO as the funder, will be included in the release. All other recipients will be added individually in writing. Participants may withdraw consent at any time and are to be advised that failure to provide consent will not result in any adverse decisions about the participant's rights, benefits, or services, other than limiting the ability of the program to provide service on behalf of the participant. This consent will be in effect for a minimum of one year after the client has ceased receiving services under the program.

Participant personal information is only to be released or shared under the following conditions:

- The Service Provider has a *Consent to the Disclosure of Personal Information* form that includes the specified party the participant or Case Manager wishes to share information with, is signed by the participant, and is valid.
- The specified party the Service Provider or Case Manager wishes to share information with is not included on the *Consent to the Disclosure of Personal Information* form or the consent is no longer valid, but the Service Provider is able to justify and verify that information sharing is in the best interests of the participant. This should only occur in rare and emergent cases; consent should be obtained in writing whenever possible.
- The information is requested by law enforcement or subpoena. The Service Provider is expected to consult with their legal counsel unless they have a policy or process in place for this that has already been approved by their legal counsel.

Additional Documents

[C3 Consent to Disclosure of Information to receive services form.docx](#)

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Provide a copy of the release of information policy
- All Service Providers will demonstrate that the Consent to the Disclosure of Personal Information form is being used (either in their original form or a CBO approved form) and stored in hard copy Case Management files.

Breach of Privacy

Intent

To ensure all Service Providers handle any instances of a breach of privacy in a consistent and satisfactory manner, and that all breaches are reported to the CBO in a standardized and consistent format.

Requirement

The Service Provider policy will speak to an event where the privacy of a participant has been compromised, including but not limited to loss or inappropriate (without participant consent) use of electronic documents, written documents, or verbal information sharing. The Service Provider must submit an incident report to the CBO within 24 hours of the breach occurring. It is then the responsibility of the CBO to notify the Minister, and further investigation may follow. All necessary steps will be taken to rectify the situation, which may result in negative consequences for the program and the current contract agreement.

Service Providers will also ensure that all staff funded under the CBO contract will review the Homeless Serving Agencies Breach Protocol upon hire and make the document readily available within their organization.

Additional Documents

[Breach of Privacy Outcomes Log.xlsx](#)

[Homeless Serving Agencies Breach Protocol - Approved \(002\).pdf](#)

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- All Service Providers will be able to demonstrate that CBO was notified within 24 hours in writing of any breach of privacy by completing the Breach of Privacy Outcomes Log.
- Provide a copy of the breach of privacy policy.

Participant Rights

Intent

To standardize Service Provider practice of informing participants of their rights within the program.

Requirement

Each Service Provider will have a process in place to ensure participants are made aware of the full process of engaging in support and of their rights at the time of intake. A written copy is to be offered to the participant. Rights are to be written in plain language that is easily understandable by the participant, and are to address the following:

- Being treated with dignity and respect
- Involvement with the program
- Involvement in service planning
- Establishing/setting long term goals
- Privacy and Confidentiality
- Grievance procedures
- Information sharing
- Advocacy
- Cultural connection

Additional Documents

[Rights and Responsibilities.docx](#)

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Provide a copy of the participant rights policy.
- Evidence participants are offered copies of the Participant Rights document (this could be a file spot check or other evidence based on the Service Provider).

Grievance Procedures

Intent

To ensure all Service Providers in receipt of CBO funding are informing participants of their options for ensuring standard treatment and care, and to make community members aware of the complaint process.

Requirement

Each Service Provider will have a written grievance process for participants, other agencies, and landlords in place which must, at a minimum:

- Be drafted and explained to participants in plain language.
- Be accessible to all participants, other agencies, and landlords.
- Outline how to submit a grievance.
- Outline documentation requirements for Service Provider staff.
- Outline a timeline for Service Provider response to the participant, other agency, or landlord.
- Outline how complaint resolutions will be communicated,
 - This includes how participants will be notified of the decision, and how the Service Provider or program staff will explain the decision to participants.
- Outline how a participant may appeal through the CBO,
 - The CBO policy speaks to instances where the grievance is sent directly to the CBO and outlines the process to be followed.
- For Service Providers with SH contracts, a Good Neighbor document is also required

This process must be reviewed with participants upon admission to and discharge from the program, and any time upon request. It is recognized, however, that review upon discharge may not be manageable in unplanned exits, reasons for not advising participants of the grievance procedure upon discharge must be documented in the participant case file.

Additional Documents

[Grievances Filed Outcomes Log.xlsx](#)

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Provide a copy of the grievance policy
- Review of Grievance Log

Data Collection & Data Entry

Intent

To ensure each Service Provider has a written policy and/or procedure surrounding the collection and handling of data into ETO.

Requirement

The performance of the entire system of care relies on the quality of the data that is entered into ETO. For those programs that do not report into ETO, a monthly data collection report will be sent to ensure information can be sent to the Government of Alberta.

Service Providers are required to have a Data Quality Plan that will ensure information entered into ETO is complete, accurate, reliable, valid, and updated regularly. The Plan will identify the staff responsible for ensuring the accuracy of the information entered into ETO and for maintaining data quality standards. It is encouraged that this staff is in a leadership position.

The Case Manager is responsible for ensuring that all information has been entered into ETO and updated in a timely manner. The Team Lead will ensure that Case Managers have input all referrals, case notes, and assessments into ETO by the 5th business day of each month for the month prior and will identify any outstanding data entry and if any information is missing, to create a plan for everything to be updated, which includes a timeline. The Team Lead is also responsible for ensuring the accuracy of the information that has been entered into the system.

CBO Staff will check information in ETO after the 5th business day of every month and will report to the Grant Administrator and the Team Lead on any discrepancies found. The Grant Administrator and the Team Lead will work together to ensure information is entered into the system by an agreed upon timeline.

Accountability

All Service Providers that are required to report in ETO are expected to adhere to this policy. This is identified on each Program Type in Section 2.

Grant Accountability Review

- Provide a copy of the data collection and data entry policy
- Provide a copy of the Data Quality Plan
- ETO spot checks and reporting

Duty to Report

Intent

To ensure Service Providers consistently practice a Duty to Report or Duty to Warn that strikes a balance between meeting governing legislation requirements and interpretations, participant and staff safety, confidentiality, the right to choose, and relationship building.

Requirements

Service Providers acknowledge that Case Managers may become aware that the participants receiving support may be engaged in activities that are in conflict with the law or the best interests of the participant. It is also acknowledged that the Service Provider and CBO are not law enforcement agencies, and will exercise discretion, balancing building trusting relationships and maintaining confidentiality with the risk of the situation and the safety of the participant and community at large.

The Case Manager may be obligated to follow the professional code of their registering body, which may require a Duty to Report. When this occurs, the Case Manager will discuss this with the Team Lead, who will advise the CBO accordingly.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

Review of Incident Reports relating to Duty to Report

Performance Management

Intent

To monitor the results of the system and ensure that Key Performance Indicators, locally derived system and Service Provider Outcomes, and OSSI Outputs are being met by CBO funded Service Providers.

Requirements

Performance Management is essential to understand how the system works, both individually at the Service Provider level and at the system level, showing the overall impact of how funds are spent. This will also monitor overall progress towards reducing homelessness in Lethbridge, by always directing Service Provider's back to the ultimate goal of reducing homelessness. Performance Management will describe what the system and its diverse service providers are, as a whole and individually, trying to achieve. This will also illustrate whether progress is being made towards preventing and reducing homelessness within the community.

Performance Management will also ensure that funded interventions are accountable to funders and taxpayers alike, by quantifying achievements towards the goal of reducing homelessness, and it will inform the next round of strategy review.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

ETO Reporting – ETO is expected to be updated based on the Standards outlined in this document, and both the CBO and the GoA will be pulling reports on a regular basis to ensure adherence to this standard

Section 4: System Administration (Case Management)

Participant Intake

Intent

To ensure all Service Providers practice consistent intake and screening process.

Requirement

Access to the Adaptive Case Management (ACM) team is through an Integrated Coordinated Access system, which means that referrals may come from a variety of Agencies, and this access must be coordinated to ensure that the intake process is applied with consistency and accountability. The referring agency or program is responsible for ensuring the participant is eligible for Case Management by completing the ACM referral, which includes a SPDAT and assessment questionnaire.

Prioritization of participants will be based on acuity and severity of presenting issues.

In all cases where the referral is coming from a Tier 3 Systems Navigator, a warm transfer will occur. This will occur with the Case Manager and Systems Navigator present with the participant, as well as any other supports the participant decides they want in attendance. At this warm transfer, the SPDAT will be reviewed and discussed with the participant to understand each component and rationale for the score. The SPDAT scores may be adjusted only when both the referring agency and the Case Manager agree. The Case Manager may only deny those who are prioritized for ACM if there is significant evidence to believe that the information provided was inaccurate and lead to an inappropriately higher acuity score, or if there is evidence that the participant doesn't meet the ACM program mandate.

Additional Documentation

[SPDAT-v4.01-Single-Print.pdf](#)

[F-SPDAT-v2.01-Family-Fillable.pdf](#)

Accountability

All Service Providers providing Case Management are expected to adhere to this policy.

Grant Accountability Review

Sample participant files for evidence of Intake Documentation

Service Prioritization

Intent

To ensure consistency during the Intake and Prioritization process, and to reduce barriers to participants who are eligible for and in need of support.

Requirement

For all CBO Funded programs that house participants, the SPDAT is the common prioritization tool that is used upon intake to ensure that participants are eligible for Case Management or SH services. The SPDAT is the only assessment tool required for ACM Intake, though if the program has specific criteria additional questions may be added to ensure participants meet all program criteria.

Additional Documentation

[SPDAT-v4.01-Single-Print.pdf](#)

[F-SPDAT-v2.01-Family-Fillable.pdf](#)

Accountability

All Service Providers that house participants (ACM/ICM and SH) are expected to adhere to this policy.

Grant Accountability Review

- Sample participant files for evidence of SPDAT
- Attendance at regular Placement Committee Meetings

Transportation

Intent

To ensure each Service Provider has policies and procedures in place surrounding the safe transportation of participants.

Requirement

The Service Provider has written policy and procedures that minimally address the following:

- Safe transportation of participants
- When participants are denied transportation
 - If taxi chits or bus passes are provided instead
- Mileage rates must meet the Eligible Expense Guidelines

Accountability

All Service Providers providing direct participant support are expected to adhere to this policy.

Grant Accountability Review

Transportation Policy review

Case Management Service Delivery

Intent

To ensure all Service Providers in receipt of CBO funding practice consistencies within their Case Management service delivery.

Requirement

Primary Case Manager

Each Service Provider will assign a primary case manager who is responsible for ensuring that Individualized Service Plans (ISPs) are being met, and for service co-ordination. A Back-up Case Manager may also be assigned (based on staffing model and availability) to a participant for things like holiday coverage, relationship building, and service delivery. In cases where it isn't possible to assign a backup case manager, relief staff may provide this role.

Case Management services begin as soon as the participant is assigned to a caseload. Upon intake, Case Managers will use assertive engagement to build a trusting relationship with participants. Case Managers will also begin emphasizing the importance of paying rent and utilities on time and in full to ensure housing stability. This conversation will also include discussion about paying utilities if it is required. Case managers will address barriers to housing, such as obtaining identification, opening bank accounts, etc.

A crisis plan must be established within the first month after being assigned to a caseload. An ISP is to be completed within 14 days.

Case Managers will support participants throughout the entirety of the housing process.

For Eviction Prevention and ACM, Case Managers will contact all landlords by the 5th business day of every month to confirm that rent has been paid in full and on time (unless doing so would put considerable strain on the landlord relationship – if so, this is to be documented). The Case Manager will provide a list of participants who have not paid their rent in full to the Team Lead for reporting. For SH programs, the monthly report will include which participants are unable to regularly pay the full program cost.

Case Managers will participate in the following activities:

- Viewings

Anytime participants are being housed, they will be accompanied to viewings as many times as it takes to ensure the participant is able to move into housing.

- Lease/Service Agreement Signing

Participants will be accompanied during the lease/service agreement signing so that the process and information in the lease can be explained to them in detail.

- Move Ins

Participants will be supported during the entire move in process, and Case Managers will ensure that a neighborhood and building orientation occur within the first week of housing.

The orientation to the building will include information on:

- When and how to pay rent
 - The participant will again be reminded that payment of rent on time and in full is expected, and the impact of not doing so
 - The participant will be strongly encouraged to sign up for third party rent and utility payments if they receive AB Works or AISH if possible
- how to access the building (for themselves and guests)
- intercom system (if applicable)
- where mail and packages will be delivered
- where laundry and garbage facilities are located
- if there is assigned parking or how to add parking later on
- how to contact the Landlord
- any other things specific to that location.

The orientation to the neighborhood will include things such as:

- transit stops and how to get there from their new home
- grocery or dollar stores
- various services the participant may need that are located nearby
- how to access their bank, place of worship, or other support

- Skill Building

For many participants, maintaining a home has not been modelled for them, or they may have lost their housing in the past due to not knowing or understanding when and how to practice housekeeping skills. Case Managers will encourage participants to build these life skills, either by modelling, creating systems that work for the participant, or making referrals to outside agencies, should these skills be currently out of reach for the participant (i.e., Meals on Wheels or paid housekeeping services). If the participant consistently demonstrates an inability to maintain their home, a Functional Assessment or Kitchen Assessment may be helpful, however these assessments are not to be used as a requirement for housing.

- Move Out/Housing Transitions

When a participant makes the ACM or Eviction Prevention Case Manager aware of plans to move, the Case Manager will encourage the participant to advise the landlord and may work with the participant to advise the landlord of such. If the participant has a rental subsidy, the Case Manager will ensure that LHA is advised immediately. Depending on the program, it may be the responsibility of the Case Manager to advise LHA. Case Managers and participants will take all steps to see the return of the security deposit.

- Rehousing
Participants on an ACM caseload who have lost their housing will be re-housed. Prior to re-housing, the Case Manager will discuss the situation with the participant to determine if the factors leading to housing loss could be mitigated in future placements, focusing on a strengths-based approach. There are no limits to the number of times a participant will be re-housed, though funding for security deposits is limited.
- Budgeting
Case Managers will identify if budgeting is a concern for participants and will support participants to learn how to budget their limited income. Housing stability through payment of rent will be prioritized in the budget, and housing placements will take finances into consideration when placing participants into housing. Third party payments will be encouraged wherever possible.

Case Load Determination

Caseload assignment and division is up to the discretion of the Team Lead.

Case Management Practice

Case Managers will tailor their support approach based on the needs of the participant and will offer services to the participant's highest level of independence. Case Managers will practice assertive engagement with participants.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy, and program specific expectations are explained above.

Grant Accountability Review

- Policies and/or Procedures relating to Case Management activities
- Case Manager Position Description

Objective Based Visit Frequency

Intent

To ensure all Service Providers who support participants in the Community are providing support at the following frequency at minimum.

Requirement

Visits to participants residing within the Community will be based on which program the participant is assigned to. The following schedule expectation is a minimum standard:

PROGRAM	VISIT REQUIREMENTS*
Case Management – Non-Housing	Minimum 1x per week
Case Management – Non-Housing Graduate	Minimum 1x per week
Rapid Rehousing	Minimum 2x per month
Outreach	Minimum 1x per week
Outreach High	Minimum 2x per week
HIMD – Rapid Rehousing	Minimum 2x per month
HIMD	Minimum 1x per week
HIMD - High	Minimum 2x per week
Graduate	Minimum 1x per month
Eviction Prevention	Minimum 2x per month

*Visit Requirements: meetings are to occur within the participant’s home as well as their natural settings. Participants are neither expected to nor required to attend appointments within the Service Provider’s office unless there are significant safety concerns. If the participant is unhoused, the Case Manager is still expected to go to them, wherever they are currently residing or within the larger community, unless doing so would result in significant risk. Missed visits should be documented in ETO for those programs using ETO.

If a participant requires more support, more visits can and should be included, as well as phone calls, text messages or emails as required to maintain regular contact with participants.

Accountability

All Service Providers who provide programs listed above are expected to adhere to this policy.

Grant Accountability Review

ETO spot checks to determine if minimum standards are met.

Team Lead Role

Intent

To ensure all Service Providers in receipt of CBO funding practice consistencies within their Team Lead responsibilities.

Requirement

Service Providers may use different naming processes, so these duties may be assigned to the Team Lead, or in cases where a Team Lead is not a position that Service Provider holds, a Supervisor or Manager may be named instead.

Team Lead

The role of the Team Lead is to provide direction to and day-to-day supervision of the Case Managers. In the event that service provider policies and procedures conflict with the Housing and Supports Handbook, the Team Lead is responsible for reporting this to their leadership team to ensure this is remedied to the satisfaction of all parties involved.

Caseload management is also the role of the Team Lead – they will observe caseloads to ensure caseloads are balanced between all Case Managers and no one has significantly more than any others.

Typically speaking the Team Lead does not carry a caseload so that they may become involved if a Case Manager requires additional support.

The Team Lead is responsible for ensuring accuracy and meeting timelines in reporting information into the HMIS.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

Team Lead Position Description

Crisis Support

Intent

To ensure each Service Provider that provides case management has a policy and process in place for crisis support for participants.

Requirement

The Service Provider has written policy and procedures that minimally address the following:

- How participants can access 24-hour, 7 day per week support should there be a crisis related to their housing or an immediate need for support.
- If the program does not offer 24-hour crisis support, a list of crisis resources will be provided to the participant.
- A copy of this resource is signed and dated, and a copy is kept in the participant hard copy case file.

A crisis plan must be established within the 14 days after being assigned to a caseload.

Additional Documents

[Crisis Contact List.docx](#)

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- All Service Providers will provide a copy of their crisis support policy and process.
- Sample participant files for evidence of Crisis Support

Assessments

Intent

To ensure each Service Provider that provides case management completes participant assessments with consistency.

Requirement

All Service Providers receiving funding from the Lethbridge CBO are required to use the SPDAT assessment tool. Training is provided by the CBO at no cost to the Service Provider. Every member of staff funded by the CBO is required to be trained in this assessment tool within 3 months of hire.

The Service Provider has written policy and procedures that minimally address the following:

- The assessment schedule:
 - Assessment will occur upon Intake.
 - Within 30 days of moving in.
 - Every 3 months
 - 30 days prior to planned discharge,
 - Within 2 days anytime a participant is re-housed.
- Storage of the completed assessments.
- Final assessments not completed 30 days before planned discharge may be administered up to 10 days after. Efforts to complete this will be documented.
- If the discharge is unplanned or unforeseen, documentation of the reason will be kept on file.
- When to complete a new SPDAT after a warm transfer from an outside organization.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Assessment Policy and/or Procedure for review
- Sample participant file.

Participant Centered Service Planning

Intent

To ensure each Service Provider practices service planning with consistency and includes the involvement of the participant along each step of the process.

Requirement

Service plans are written documents and will outline all steps, goals, activities, outcomes, timelines, and who each task is assigned to as it relates to Case Management support. It may exist in an electronic or paper format that must be secure at all times.

Service planning goals will be informed through the assessment process but determined by the participant. The Participant will guide the creation of the service plan. The Case Manager cannot include any activities or other items in the service plan that the Participant has not consented to, though the Case Manager can identify options and make recommendations. The participant will be offered a copy of their service plan, and proof of this will be obtained by the Case Manager.

The Service Provider will ensure that there is one integrated and complete ISP in place within the first two weeks of direct participant service for each client, which includes goals that are: specific, measurable, attainable, realistic, and time bound. The ISP must clearly outline who is responsible for each activity, to clarify who is directly responsible for any actionable items.

Participants will be offered a copy of the Service Plan and a signed and dated copy is to be kept by the Service Provider.

Service Plans are to be reviewed every 90 days or anytime a goal has been completed. Completed goals are to be recognized and celebrated in a way that is meaningful to the participant.

If there are no further goals to be completed, and all discharge protocols are met, then the participant may Graduate from the support program if remaining Graduation criteria are met.

Additional Documents

[Service Planning Document.docx](#)

Accountability

All Service Providers providing Case Management are expected to adhere to this policy.

Grant Accountability Review

- Participant centered service planning policy for review
- Sample ISP document

Community Partnership

Intent

To ensure each Service Provider has protocol in place to advocate on behalf of participants and to access services that will support participants.

Requirement

The Service Provider shall identify who within their organization is responsible for building partnerships within the community that will assist participants. The responsibility for this may be assigned to one person (e.g., Team Lead) or to a variety of people (e.g., each Case Manager is assigned the task of building and maintaining relationships within an identified area or agency). All CBO funded Service Providers will participate in Interagency meetings and Case Consults as required in order to provide the most effective service for participants.

Case Managers must understand the need of their participant and the type of support offered by the agency they are referring to, in order to ensure that it is the right fit for the participant, and accessible to the participant.

Advocacy is to be used in instances where it is understood that the participant does not meet the requirements of the agency, however the Team Lead and Case Manager believe the support would be the most appropriate for the participant and in the best interests of the participant, and will only be used when doing so does not compromise the policies of the agency that is being referred to, or the relationship between the Service Provider, the Agency, the Funder and/or the larger community.

Case Managers will ensure they collect all pertinent information from the participant prior to making the referral.

Accountability

All Service Providers providing Case Management are expected to adhere to this policy.

Grant Accountability Review

Narrative with Organization to identify Community Partners

Community Integration

Intent

To ensure each Service Provider integrates the participant with natural resources and supports in the community.

Requirement

Case Management support is an intervention that is expected to set participants up for long-term support and involve other community agencies as is appropriate. The goal of the Case Manager is to provide support to the participant's highest level of independence, and to graduate the participant when it is appropriate to do so. In order to meet these criteria, referrals to other agencies may be required. It is the responsibility of the Case Manager to know the services available in the community and to work to refer the participant to outside resources, wherever possible, and to encourage the participant to eventually achieve independence. Prior to graduation, the participant should have a social safety net of support available to keep them stable in housing.

Accountability

All Service Providers providing Case Management are expected to adhere to this policy.

Grant Accountability Review

Narrative with Organization to identify Community Integration opportunities and challenges.

Unplanned Discharge Process

Intent

To ensure each Service Provider has a policy and process in place surrounding the planned and unplanned discharge process for participants who are housed.

Requirement

Participation in the Case Management process is always optional and may end at any point for a variety of reasons. In the event of an end to service delivery, Case Managers are expected to take all reasonable steps to transfer the participant to the appropriate services and document this in ETO. During the intake process, the case manager is expected to discuss the discharge process in a way that the participant understands so that the participant knows what steps need to be taken in order to cease the services.

Foreseen, Unplanned Discharge

This is the process in which it appears evident that the participant is no longer a fit for this type of service. This will include things like participants not engaging with staff, struggling to get along with others in an SH facility, or other continued and ongoing behaviors that are witnessed and signal the possibility of services coming to an end.

Prior to a foreseen unplanned discharge from the program, staff will:

- Ensure that every reasonable effort has been made to address behavioral issues and rental arrears through whatever means necessary (including but not limited to mediation, conflict resolution, behavioral plans, landlord/property manager negotiations, third party rent payments, and moving to a different rental property).
- Discuss referrals to other supports are offered based on the needs of the participant at that time. All efforts to make a warm transfer occur will be attempted and documented.
- If it appears that the participant will be returning to a homeless shelter, all reasonable effort will be made to ensure that this is a last resort and documented in the case file.
- Process to re-apply to services is discussed should the participant need support in the future (if discharge occurred due to threats of violence against program staff, program can use discretion for allowing re-entry. If the Service Provider decides to not accept the client back, this should be documented including the reasons why not).

If this discharge is occurring from an SH facility, the Case Manager will call a case consult to collaborate with all other supports currently involved to determine the best plan of action for the participant and will include attendance from the receiving Service Provider.

Unforeseen, Unplanned Discharge

- Should a situation arise in which there is an unforeseen and unplanned discharge that is immediate and cannot be predicted, the information will be provided in a report that will be

reviewed by leadership to determine any themes or training opportunities that are needed for staff.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

- Review policies relating to discharge process.
- Review participant file.

Participant Return

Intent

To ensure each Service Provider has a process in place to ensure that participants who are reach out to access services are accepted or referred to the appropriate program with fairness and consistency.

Requirement

In instances where a participant has ended Case Management support with the Service Provider, but a change in circumstances resulted in a loss of housing or housing instability, the Service Provider will complete a SPDAT to determine the participant's eligibility for services. If the participant is eligible for ACM, they will be placed on a caseload based on capacity or a waiting list and given referral options if the presenting need is high. If the participant is not eligible for ACM services, they will be referred to the appropriate support for their situation.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

Review Participant Return policy

Graduation

Intent

To ensure each Service Provider graduates participants from their program with consistency.

Requirement

Service Providers must have a policy in place regarding when to graduate a participant. Graduation should be discussed immediately upon intake into the program so that it does not come as a surprise to the participant. The goal of the Case Management program is to be able to graduate participants into the community once their current situation has stabilized, however this does not mean that participants are pushed into graduation before they are ready. There must be a balance between planning for the participant's future once things have stabilized and taking steps to reduce self-sabotage with the participant.

Once the participant has achieved the following, the graduation process can begin:

- No pressing issues with their landlord that could lead to an eviction (receive confirmation from the landlord if at all possible) – this would include consistently paying rent in full (either with the support of subsidy or without) and on time for the past 6 consecutive months, and no outstanding damage that could result in housing instability.
- Consistently stable income (including through AB Works or AISH) or a demonstrated ability to access financial resources when required.
- Demonstrated ability to afford the rent (participants are not required to be paying Social Housing rates, but for participants who are in core housing need it is expected that a subsidy will be in place, if possible, prior to Graduation. If not, the participant will show they are able to consistently pay rent in full and on time over a period of at least 6 months with no more than one eviction notice for late rent during that time) and any utilities that are separate from the rent.
- Participant has met their ISP goals and cannot identify any further goals to achieve.
- Participant has or is aware of options that would constitute a social safety net so that should the participant need something in the future they are able to connect with their resources.
- Participant is not aware of any future events that may lead to housing instability (such as court dates or family reunification).
- Decreased acuity score based on the assessment tool.
- The exit planning process is complete and approved by the Team Lead and includes such things as expected obstacles and a recommended course of action should they occur. This document will be co-created with the participant and will be reflective of the participant's engagement in the process of continued stability.
- Participants may remain active for 6-12 months in the Graduate program. If the graduate loses their housing or has a setback that impacts stability during this time, the participant may re-engage with consistent supports. The Case Manager will determine the best course of action at this time – are the required supports minor and short term in nature or should the participant

re-enroll in the ACM program for more intensive support. If it is decided that the participant requires the ACM support, the participant will be assigned to a caseload, or the waiting list based on a new SPDAT score and discussion around pressing concerns.

Accountability

All Service Providers providing Case Management are expected to adhere to this policy.

Grant Accountability Review

Review Graduation policy

Participant Death

Intent

To ensure each Service Provider has consistent practices in place when notified of a participant death.

Requirement

In the event that a participant passes while receiving Case Management support, the Team Lead will provide support to the Case Manager as necessary.

Upon learning of a participant's passing, the Case Manager will advise their Team Lead and appropriate authorities. If the participant is housed, the Case Manager will advise the landlord as soon as they are able to. An incident report will be created and sent to the CBO. Please see the Incident Reporting policy for further detail on this process.

Accountability

All Service Providers receiving CBO Funding are expected to adhere to this policy.

Grant Accountability Review

Review Incident Reports where the Service Provider has identified a participant has passed.

Landlord Relations

Intent

To ensure Service Providers prioritize landlord relationships.

Requirement

CBO funded service providers who are responsible for housing participants are required to have a landlord relations policy. This policy will balance the needs of the participant with community relationships and landlord relationships. Taking a preventative stance wherever possible is important to maintaining landlord relations within the community.

If the Case Manager assists the participant in securing housing, the Case Manager will ensure that the landlord understands the support offered by the Case Manager and the benefits to renting to a supported participant, as well as who to contact when various situations arise, the times in which support is available, and if any support would be available after hours. The Case Manager will ensure that the participant has a lease directly with the landlord that does not require the support of the Case Manager in keeping the participant housed. The Case Manager and participant will complete a walk through with the landlord. Should the landlord not require or encourage a walk through, the Case Manager will document the rental to confirm the condition of the unit. The Case Manager will take photos of any concerns with the unit and the pictures will be stored for use upon move out, if required.

If the Case Manager does not assist the participant in securing housing, the Case Manager will still be responsible to collect the information relating to the lease – the Case Manager is responsible to know who the landlord is, if there is a lease, if a walkthrough was completed, the cost of the rent, if anyone else is residing in the property, and any other information the Case Manager believes to be important to the participant's current rental situation.

Information is only revealed to the landlord with the consent of the participant - the Case Manager will balance building a trusting relationship with the participant and with the landlord but will prioritize the relationship with the participant. The participant may be encouraged to disclose information to the landlord, with the help of the case manager such as in cases where there may be damage or difficulties in paying monthly rent amounts.

The Case Manager will contact each landlord by the 5th business day of every month and prepare a report to the Team Lead for each participant on their caseload. The Team Lead will report to the Funder within 2 business days the number of participants that have not paid their rent. Case Managers will also discuss other concerns the landlords have at this time to make sure the participant remains stable in housing. If the Case Manager is made aware that the participant has left the dwelling with no intention of returning, the Case Manager will report this information to the landlord as soon as is reasonably possible.

Case Managers will work with the participant and landlord to resolve tenancy issues and maintain stable housing. In cases where an eviction is inevitable, the Case Manager must remain neutral to ensure that

the landlord relationship remains intact, unless the landlord was acting outside of the Residential Tenancies Act.

The Team Lead is required to attend the Landlord engagement sessions hosted by the Funder and will act as the vessel between the committee and the Case Managers.

Accountability

All Service Providers who support participants in private landlord accommodations are expected to adhere to this policy.

Grant Accountability Review

Review landlord relations policy.

Eviction Prevention Practice

Intent

To ensure each Service Provider that provides Case Management operates from a preventative practice wherever possible. The benefits of the prevention methodology are widely documented.

Requirement

Service Providers are expected to have a policy that implements eviction prevention into their everyday practice as it relates to maintaining housing stability for participants. This includes but is not limited to maintaining relationships with landlords, connecting with landlords by the 5th business day of each month to confirm rental amounts have been received from participants, and coming up with a plan to pay any outstanding arrears before the participant faces housing instability.

Accountability

All Service Providers that are responsible for housing participants are expected to adhere to this policy.

Grant Accountability Review

Review Eviction Prevention policy.

Section 5: Supportive Housing

SH Programs are required to follow the Case Management section (unless otherwise noted). The following sections are in addition to that.

Participant Intake

Intent

To ensure all Service Providers practice consistent intake and screening process.

Requirement

Access to the Supportive Housing (SH) program is through the SH Consortium. This Consortium meets monthly to review applications and determine which program(s) the applicant is most suitable for.

Additional Documentation

[*SPDAT-v4.01-Single-Print.pdf*](#)

[*F-SPDAT-v2.01-Family-Fillable.pdf*](#)

Accountability

All Service Providers providing Supportive Housing are expected to adhere to this policy.

Grant Accountability Review

Sample participant files for evidence of Intake Documentation

Evictions & Revokes

Intent

To ensure each Service Provider that provides SH has a policy and process in place surrounding what happens when the participant elects to discontinue services or is evicted from the program.

Requirement

The Service Provider has written policy and procedures that minimally address the following:

- SH participants will be advised upon intake into the program which services are required as part of the program, and what happens if the participant opts out of a required program.
- SH participants may be advised upon intake what things could have them evicted from the program, unless doing so is expected to cause behavioral concerns.
- If an SH participant opts out of a required program, the policy must speak to how long they are given to remove their belongings, what happens with abandoned belongings, and how long they have to pick up any remaining items.

Accountability

All Service Providers providing SH are expected to adhere to this policy.

Grant Accountability Review

- Review of eviction and/or revoke policy

Safety Checks

Intent

To ensure each Service Provider that provides SH has a policy and process in place surrounding when and how safety checks are conducted.

Requirement

The Service Provider has written policy and procedures that minimally address the following:

- If the program conducts safety checks as part of their process
 - The process for requesting planned safety checks should be clearly outlined in a manner that is easy to understand for the client.
- When an unplanned safety check would be conducted.
- That unplanned safety checks are only conducted in accordance with the program policy.
- A process for re-informing the participant of their rights.
- A process for re-informing the participant of the grievance process.
- Documentation that must be completed for all safety checks, regardless of the outcome.
 - Documentation is at minimum a case note but may be an incident report depending on the outcome of the safety check.

Accountability

All Service Providers providing SH are expected to adhere to this policy.

Grant Accountability Review

- Review of safety check policy and process

Searches

Intent

To ensure each Service Provider that provides SH has a policy and process in place surrounding when and how searches are conducted.

Requirement

If the Service Provider conducts searches, the program has written policy and procedures for conducting searches that addresses:

- Whether searches are allowed within the program
- The parameters of the type of search allowed (room search, bag search, personal search, in plain sight search, etc.)
- The circumstances which result in a search
 - Only to ensure the safety of clients and others involved
 - When necessary to recover missing or stolen property
 - Only after consultation with the client and program manager
 - Every effort is made to respect the dignity of the client and to avoid undue or unnecessary force or embarrassment
- Programs which conduct searches will identify this in:
 - The program information provided to the participant or
 - The Individual Service Plan (ISP)
- Limits placed around the search:
 - Every effort is made to respect the dignity of the client and to avoid undue or unnecessary force or embarrassment
 - Strip searches may only be conducted by Police
 - Physically touching the person being searched is prohibited
 - Participants may be asked to empty their pockets and open their mouths
 - The use of a detection system
- There is a process in place to deal with
 - Unauthorized searches
 - The inadvertent finding of items
- An incident report is completed for all searches that are not part of regular programming
- Documentation is kept that demonstrates the participant was made aware of:
 - The reason for the search
 - The findings of the search
 - The right to initiate a grievance

Accountability

All Service Providers providing SH are expected to adhere to this policy

Grant Accountability Review

Review search policy

Site Breaks and Service Restrictions

Intent

To ensure each Service Provider that provides SH has a policy and process in place surrounding when and how site breaks and/or service restrictions occur.

Requirement

The Service Provider has written policy and procedures that minimally address the following:

- Whether or not they practice site breaks and service restrictions
- What instances the SH program would initiate that process
- When and how participants are advised of the process
- How long the site break will occur for
- How many site breaks before an eviction occurs

Accountability

All Service Providers providing SH are expected to adhere to this policy

Grant Accountability Review

- Review site break and/or service restriction policy

Key Definitions

Acuity: the level of need of the participant, as determined by the SPDAT score. A high acuity participant is considered to be between 35 – 60 on the Single or Youth SPDAT and a 54 – 80 on the Family SPDAT. This would qualify these participants for ACM or SH support. A mid-acuity participant is considered to be between 20 – 34 on the Single or Youth SPDAT and a 27 – 53 on the Family SPDAT. This would qualify these participants for Rapid-Rehousing or the Youth SH program. Any SPDAT score below these numbers is considered to be low acuity and would disqualify most people from accessing any rapid rehousing, ACM, or SH program unless other pressing needs were identified to prioritize that person higher.

Adaptive Case Management: a support system that has the ability to change to suit various conditions. Case Management has been successfully used to ensure people have what they need to remain stable in housing.

Affordable Housing: housing that the participant is able to afford based on their current situation and not an idealized situation. It is acknowledged that in many instances this can be difficult to meet in the current market conditions, however by finding accommodations that the participant is unable to afford even with a subsidy in place, participants are set up for immediate failure, which inhibits the relationship building process with the participant and could impact the relationship with that landlord. Factors to consider are the consistency of their income (AISH versus seasonal employment), availability of rental subsidy, and the participants other bills (especially considering a vehicle loan or MEP garnishing).

Appropriate Housing: housing that meets the participant's current needs. If the participant is a single individual, renting out a large (3+ bedroom) home is not necessary in their current situation, especially if it is not affordable.

Case Managers: professionals who are trained to provide housing support and will be knowledgeable in matters pertaining to the activities outlined in the contract.

CBO: The Community Based Organization is the organization that has been tasked with ensuring that participants' experience with homelessness are brief and non-recurring. LHA was named as the CBO April 1st, 2023.

Chronic Homelessness: an individual who has been continuously homeless for a year or more, or who has had at least four episodes of homelessness in the past three years. In order to be considered chronically homeless, a person must have been sleeping in a place not meant for human habitation (e.g., living on the streets) and/or in an emergency homeless shelter. ^{REFERENCE}

Episodic Homelessness: an individual who has been homeless for less than a year and has had fewer than four episodes of homelessness in the past three years. ^{REFERENCE}

Funder: Lethbridge Housing Authority as the CBO

HMIS Database: Efforts to Outcomes, software that is used to track and report on the work that is being done.

Imminent Risk of Homelessness: an individual that is experiencing difficulty maintaining their housing and has no alternatives for obtaining subsequent housing. Circumstances that often contribute to becoming at-risk of homelessness include: eviction, loss of income, unaffordable increase in the cost of housing, discharge from an institution without subsequent housing in place, irreparable damage or deterioration to residences, and fleeing from family violence.

Participant: the end user of supports.

Person-Centered: this is an approach to Case Management and SH support that wraps the support around the person and ensures the support focuses the care on the needs of the individual. This approach takes into consideration the person's preferences, needs, and values and uses this to guide decision making.

Recovery Oriented System of Care: person-centered, strength-based approach to ensuring every participant's tomorrow is better than today. Recovery-oriented systems of care address the chronicity of addiction and mental health by focusing on long-term measurable improvements in many aspects of life, supporting a community led response. The result is a coordinated network of services and supports that builds on the strengths and resilience of individuals, families, and communities to achieve improved health, well-being and quality of life for those with or at risk of addiction or mental health issues. Services and supports center on the needs and preferences of individuals balancing safety and harmony of the community. Recognizing that there are many pathways to recovery and well-being, a flexible menu of options is provided. Each individual is encouraged to exercise the greatest level of choice and responsibility for their recovery and well-being. ^{REFERENCE}

RTA: the Residential Tenancy Act for Alberta. Case Managers and Team Leads are expected to learn and understand the RTA to ensure that participants are treated fairly by landlords, and to help hold landlords accountable to practices that are detrimental to the participant.

Service Provider: An Agency or Program that is receiving funding from the CBO in order to carry out the activities of ensuring that a participant's experience with homelessness is brief and non-recurring. These activities can occur in one of the following strategic areas of investment: Housing Supports, Homeless Prevention, Connections to Long-Term Solutions, or Program Supports.

Significant Interaction: with regard to documentation standards and practices, a Significant Interaction will include the first phone call/email/text message that is sent each day. Following that, any mode of conversation that relates to the same topic will be documented as one Significant Interaction, and any unrelated topic changes would be documented as a separate Significant Interaction. (For example, if a text was sent regarding a home viewing, and several other messages follow, a summary of said text messages will constitute one Significant Interaction. Should the topic change to something significantly different, like medical concerns, this would be counted as a separate Significant Interaction. However, if the topic relates to the viewing, it could be included in the initial interaction. Case Managers will use their discretion here).

Strengths-based: this is an approach to Case Management and SH support that focuses on the strengths of the person and not on their deficits. The goal is to work with the individual and promote their well-being.

System Navigation: a process by which Case Managers or other agency staff work with participants to understand the programs that could be available to them, and provide the support required in order to connect the participant with the support. The Case Manager or other agency staff provide the pathway for the participant to connect to outside resources, which is tailored to the needs of the participant.