Core Area 4	Demonstrating understanding and adherence to program delivery					
Module 4.4	Outreach Program (HOP, HPP, CHB-HPP)					
Group 4.4.1	Program Administration Requirements are Fulfilled in Accordance with the Agreement					
Element	Description	Unaware - Developing	Aware - Developing	Meets		
4.4.1.a	Outreach Program data entry in HIFIS is timely, complete, and accurate. Ensure client consent and authorization is obtained.	HIFIS reporting is always late and incomplete. Data entry mistakes persist and are usually not corrected. VAT assessments are not conducted.	HIFIS reporting is often not timely or complete. Data entry mistakes persist and take time to correct. VAT assessments are conducted sporadically, and results are often not entered in HIFIS.	The provider aims to enter client info daily into the database. If the provider is unable to enter the info daily, they do so within 7 days of providing the service. VAT assessments are entered into HIFIS. Client Consent and Authorization form is completed for each client. Client proof of income and assets is established, and a copy is kept on file.		
4.4.1.b	Key Performance Indicators (KPIs) are tracked, reported, and reviewed for ways to achieve	Key performance indicator data is not adequately reported.	Key performance indicator data is reported but local housing availability conditions make it difficult to take any steps to achieve targets.	Current key performance Indicators for the Program are tracked and reported per agreement. Steps are taken towards achieving KPIs E.g: Clients who are not housed are housed. Clients who are housed are supported to maintain housing Clients who are housed remain housed at 6 and 12 months Clients who are supported to maintain housing remain housed at 6 and 12 months Homelessness is prevented by assisting HPP clients at key transition points		
Group 4.4.2	Outreach Program (HOP, HPP, CHB-HPP) a	re Delivered in Accordance with t	he Agreement			
Element	Description	Unaware - Developing	Aware - Developing	Meets		
4.4.2.a	The provider is engaging with clients who are experiencing homelessness or at risk of homelessness, wherever they are situated, including those living in public places.	The provider relies on existing relationships with service providers to identify potential clients and does not have a full caseload. Eligibility criteria are not available for the Outreach Program. Assessments, referrals, and assistance are very limited.	The provider does not seek to find people experiencing homelessness who are living in public places. Eligibility criteria are applied randomly. Assessments, referrals, and assistance are provided sporadically and not effectively.	The provider uses a balanced approach to outreach to ensure staff are meeting and building rapport with people where they are located (both outside in the community and within other facilities, shelters, etc.). Eligibility criteria are clear and consistent. Staff complete a client needs assessment, including the use of the Vulnerability Assessment Tool (VAT), where necessary. They develop a case plan for all clients willing to participate and refer clients to appropriate housing options.		

4.4.2.b	For the HPP, the provider ensures that target populations at key transitions are served.	The provider is unable to identify target populations for HPP.	The majority of the clients served are not from target populations at key transitions.	The provider serves the following populations for HPP: People leaving corrections or hospital systems; women and gender diverse individuals who have experienced violence or who are at risk of violence; youth, including those leaving the care system; people of Indigenous descent.
4.4.2.c	The Provider gives rental supplements to eligible clients, where applicable.	Rental supplement administration is not consistent with the agreement and client files and records are not adequately maintained.	The provider has many inconsistencies regarding client eligibility, income thresholds, supplement amounts and allocations. Client information may not be fully entered into the database before rent supplements are disbursed.	Rent supplement administration is consistent with the agreement, including income thresholds, eligibility, determining supplement amounts, types, and allocations. Rent supplement options are maximized. Copies of this information are kept on file. Rent supplements target key populations for HOP and HPP (including CHB-HPP). The provider enters client information on a timely basis in the database before disbursing a rental supplement to that client. A reasonable standard of accommodation for clients is provided to maintain stability of tenancy and considers efficient allocation.
4.4.2.d	Where clients have been placed as tenants, the provider helps them maintain their housing and their ability to live independently.	Most clients placed as tenants by the provider, are unable to remain housed longer than 6 months.	At least half of the clients, placed as tenants by the provider, are unable to remain housed longer than 6 months	The provider assists tenants to maintain their housing and live independently by: • providing tenancy support and skills training; • providing follow up and ongoing support to clients, as appropriate; • referring clients to support services (including healthcare); and where appropriate, accompanies clients to appointments. • referring clients to income assistance, using the Homeless Application Protocol, where available; • assisting clients with Pension Benefits, Disability Benefits, obtaining a BC Identification Card, or establishing a bank account, as appropriate. • building and maintaining relationships with landlords providing housing to clients including providing education and resources to support and maintain client tenancies, where appropriate.

4.4.2.e	The provider develops linkages and partnerships with local service providers to ensure optimal service delivery to clients. The Provider Demonstrates Understanding	The provider has few functional linkages with other community service providers. The provider may have antagonistic relationships with some service providers.	The provider has some linkages to other community service providers but not enough to ensure optimal service delivery.	The provider engages in communication, partnerships, and innovative initiatives with other service providers to improve services available, including culturally appropriate services. The provider engages in regular contact with local housing providers to assist individuals experiencing homelessness in finding appropriate housing. The provider participates in local and regional initiatives, such as Coordinated Access and Assessment (CAA), where available, to improve the quality of service. Building and maintaining relationships with landlords providing housing to clients including providing education and resources to support and maintain client tenancies, where appropriate.	
Group 4.4.3	The Provider Demonstrates Understanding of the Outreach Program (HOP, HPP, CHB-HPP) Approach and Specific Requirements of the Agreement				
Element	Description	Unaware - Developing	Aware - Developing	Meets	
4.4.3.a	Services provided are client-centred, demonstrate understanding of the client's needs, and support client wellbeing.	The service environment is detached and judgemental. People experiencing homelessness avoid outreach workers.	Outreach workers target clients who require little effort. Outreach workers are unaware of unique client needs which are creating barriers to access.	Outreach workers build rapport with people who are difficult to connect with because of severe substance use and mental health issues. The service environment is supportive, welcoming and provides a sense of community. Clients feel safe and included. Staff actively support client wellbeing. Clients are connected to the specific resources they need, and providers regularly partner to improve the services available to clients. Cultural and spiritual support are accessed for clients when appropriate and available. The provider offers access to culturally appropriate services to individuals when they indicate interest.	
4.4.3.b	Efforts are made to improve or maintain client health and safety while receiving outreach support services.	The provider has inadequate policies and procedures to support client health and safety. Staff are not adequately trained.	The provider has out of date policies and procedures which do not adequately reflect current realities in outreach and do not adequately provide	Staff are well trained to respond to a range of situations including, but not limited to, drug overdoses, health emergencies, accidents, violence amongst clients, and mental health breaks. Harm reduction services and supplies are provided	

4.4.3.c	The Provider has a clear plan and process	Staff safety policies and	direction to support client health and safety. Staff safety polices are in place	respectfully, and in a way that effectively improves safety and balances clients' needs. Procedures are in place to address the safety of female and gender diverse clients. When issues occur, they are addressed with established policies and procedures. The service environment is safe, secure, welcoming, and supportive of clients. Written polices required by the agreement are in
	for supporting safety of outreach workers working in the community. Any outreach base/storefront meets safety standards and fits the program type.	procedures are not in place or not being actively used.	but out of date or not reflective the current outreach environment.	place including staff eligibility, selection, remuneration, training, and safety and security.
4.4.3.d	Staff training requirements are provided in accordance with the agreement in a timely manner.	Staff training requirements are not being met on a regular basis.	Staff training and upgrading are not occurring in a timely manner most likely because of high staff turnover.	The provider ensures that staff have required training and upgrading to meet the requirements of the service agreement and the specific job descriptions.