Core Area 4	Demonstrating understanding and adherence to program delivery					
Module 4.6	Women's Transition Housing and Supports Programs					
Group 4.6.1	Program Administration Requirements are Fulfilled in Accordance with the Agreement					
Element	Description	Unaware - Developing	Aware - Developing	Meets		
4.6.1.a	Data entry for the WTHSP is timely and complete. For safe homes, transition houses and second stage – Excel Monthly Reporting.	Data reporting is always late and incomplete. Data entry mistakes persist and are usually not corrected.	Data reporting is often not timely or complete. Data entry mistakes persist and take a long time to correct.	Monthly reporting is complete with accuracy-within a month of the previous report. Housing Registry is up to date in terms of tenant data. Provider submits additional data and information to BC Housing upon request.		
4.6.1.b	Client consent and authorization is obtained upon intake.	Consent forms are not completed, and rights and responsibilities are not reviewed with clients during intake.	Consent forms are sporadically completed, and rights and responsibilities are sometimes reviewed with clients at intake.	A Consent Form is completed and signed for each client. Exchange of Information consent is also provided, if applicable (for service providers in the community). Client rights and responsibilities are reviewed during intake.		
4.6.1.c	Calculation of rents and assistance program payments and residency agreements are completed as needed/per agreement.	Declarations of income, assistance program payments and residency/tenancy agreements are not completed.	Declarations of income, assistance program payments and residency/tenancy agreements are completed sporadically.	The rent scale is applied to second stage housing. A declaration of income is completed at the time of accepting the unit. Residency/tenancy agreements are completed for each client.		
4.6.1.d	Key Performance Indicators (KPIs) are tracked, reported and reviewed for ways to achieve	Key performance indicator data is not adequately tracked and reported.	The provider has difficulty taking steps to achieve KPIs because of staffing and resource challenges.	Current KPIs are tracked and reported as per agreement, Steps are taken towards achieving KPIs e.g: 1. Clients receive support in accessing community resources available to them (target 80%) 2. Clients are provided with strategies that may enhance their safety (target 75%)		
Group 4.6.2	Women's Transition Housing and Supports	Women's Transition Housing and Supports Programs are Delivered in Accordance with the Agreement				
Element	Description	Unaware - Developing	Aware - Developing	Meets		
4.6.2.a	Initial contact services are provided consistently.	Initial contact services are not consistently provided. The crisis line is often not operational or short staffed.	Initial contact services are available but information gathering and relationship building limited, and referrals not provided.	The provider offers 24/7 access (unique to safe homes and transition houses) to initial contact services. Initial information gathering & relationship building: • safety assessment/short-term plan • identify immediate needs		

				• discuss current service availability Referrals to appropriate shelter/housing provided if the woman desires/requires shelter but cannot be accommodated at the time of contact. Referrals to other resources provided where required/desired. Access to transportation out of the community is offered where required for safety, as resources permit.
4.6.2.b	Safe Shelter/Housing and immediate basic needs are provided.	The number of rooms, units available is inconsistent. Staff turnover is common. Local health officials have raised concerns about the food service.	Short staffing is common, and it leads to challenges with room or unit availability, food service, and assistance in accessing childcare.	Shelter/ housing is provided in transition houses, safe home units, second stage housing, or long-term independent housing in accordance with the agreement. The facilities are staffed in accordance with the agreement. Food services and personal hygiene supplies are provided in accordance with the agreement (safe homes and transition houses only). Clients/residents have use of laundry facilities on or off site at no cost. Support is provided in accessing childcare (safe homes, transition houses, and second stage only).
4.6.2.c	Personal supports for women and children are provided.	Personal supports for women and children are not provided including safety planning for clients.	Personal supports for women and children are provided but most staff are not adequately trained for this work. The policies and procedures for supporting women and children are not up to date.	Adequately trained staff provide: • Personal Safety Planning (includes long term housing) • Crisis and emotional support for women and children • Access to information and education regarding the dynamics and impact of violence against women and children • Assistance obtaining key identification and documentation
4.6.2.d	The provider connects residents to community supports and services.	Women are rarely supported to access the services they need.	Women receive sporadic support to access needed supports and resources. Staff shortages may limit this work.	The provider offers referrals, support, and advocacy where appropriate, to assist women in accessing external services and resources. Transportation is offered, where resources permit and accompaniment to appointments is provided. The provider is involved in the continuous development and maintenance of

Group 4.6.3	The Provider Demonstrates Understanding	of the Women's Transition Hous	ing and Supports Programs Appro	relationships with provincial and community agencies involved in the delivery of services, and advocacy regarding the diverse needs of women and children At Risk of Violence. The provider promotes community awareness of the program for individual women to self-refer and for potential referral sources in the community. ach and Specific Requirements of the Agreement
Element	Description	Unaware - Developing	Aware - Developing	Meets
4.6.3.a	Safety from violence protocols are developed and implemented for women and children who are at risk of violence or who have experienced violence.	The organization does not have proactive policies and procedures in place to protect women and their children from violence. Staff are often responding to incidents where violence is threatened. The police are called regularly to the house to intervene.	Organizational policies and procedures for protecting women and their children from violence are dated. Staff training is also not kept up to date.	Maintaining the safety and security of women and children who are at risk of or fleeing violence or who have experienced violence, who are accessing WTHSP services is paramount. All policies and procedures are guided by this principle. Service providers have robust plans to maintain client safety while in receipt of services. Facility security measures in place to protect client safety while on site.
4.6.3.b	The provider maintains a high level of client accessibility to the WTHSP service and provides clear and consistent eligibility guidelines.	Eligibility criteria is unclear, and women are turned away even when they know the facility is not full. They do not know how to become eligible for service. Some women are unable to access the WTHSP facility because they have a pet, have many belongings, or have a disability that impacts their mobility.	Eligibility criteria seems to shift depending on staffing. Women seeking shelter are not sure if they will be admitted, especially if they have mental health and substance use concerns. It depends on whether the right person is working that shift. There is no service restriction complaints and appeal process in place.	Programs meet community need by being as accessible as possible. Younger women (< 19) are supported when the need arises. All dependent children and other family members of women fleeing violence are admitted. Services are culturally safe and language barriers are addressed. Services are accessible to gender diverse clients. Women with no legal status in Canada are admitted.
4.6.3.c	Efforts are made to improve or maintain client health and safety while participating in the WTHSP.	Staff are unaware of potential health and safety risks for clients and have not received basic required training. Physical and program design contributes to the occurrence of critical incidents. The provider is	Staff training is sporadic and policies and procedures for client health and safety are dated. To improve client health and safety, increasingly stringent rules and restrictions are implemented. Many of which serve to further	Staff have relevant life safety training such as first aid, overdose prevention and violence deescalation. The provider is able to effectively refer women and their dependents to a range of health services. Harm reduction practices and supplies and overdose prevention guidelines in place, including naloxone training and intake procedures for

		often experiencing health and safety crises on site and there are regular instances of clients being harmed. There are few relevant policies and procedures for maintaining client health and safety.	stigmatize clients. If provided, clients must request specific harm reduction supplies from staff in front of other clients.	ascertaining substance use. Safety measures for children are addressed by the provider. Transportation to alternatives is available.
4.6.3.d	Efforts are made to protect staff health and safety while working in the WTHSP.	Staff are regularly injured while at work due to lack of safety protocols and procedures. Staff do not have adequate safety training.	After experiencing staff safety incidents, the provider implements stricter rules and restrictions to prevent more situations from occurring. Staff training remains incomplete, and policies, procedures and protocols are dated.	Adequate staff protocols, procedures, policies, and training are in place to protect staff from harm. When an incident does occur, the provider uses the situation as a learning opportunity to prevent similar situations from occurring in the future.
4.6.3.e	Services provided are client-centred, demonstrate understanding of the client's needs (including cultural) and support client wellbeing.	The service environment is rigid, and rules based. Culture and individual needs of clients are not taken into consideration.	While services are delivered in a more flexible manner, staff continue to use too many rules and threats of punishment to coerce desired behaviour from clients. Staff training related to using a woman- centred approach has not occurred.	The provider offers gender appropriate, culturally safe, and inclusive environment with a focus on wellness. The service environment is flexible and collaborative. Core services are provided applying a woman-centred, non-judgmental, and inclusive approach. Women are supported to feel safe and seek emotional support. Providers are sensitive to a range of needs related to access and cultural considerations. The role of power imbalances is acknowledged and addressed.
4.6.3.f	Staff training requirements are provided in accordance with the agreement in a timely manner.	Staff training requirements are not being met.	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 agreement and the specific job descriptions.