City of Edmonton
Minimum Emergency Shelter Standards

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Affordable Housing & Homelessness
Social Development, Citizen Services
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Acknowledgements

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Stakeholder Engagement

The City of Edmonton lends its thanks to individuals from the following organizations and groups who participated in the engagement to develop the City of Edmonton's first Minimum Emergency Shelter Standards:

- Ministry of Community and Social Services (CSS);
- Alberta Health Services;
- Individuals with lived experience in the shelter system;
- Homeward Trust Edmonton;
- Emergency shelter providers including Hope Mission, the Women's Emergency Shelter Centre (WEAC) and Mustard Seed;
- Edmonton Police Service (EPS);
- Confederacy of Treaty 6 First Nations;
- Indigenous service providers including Bent Arrow, Niginan Housing and Métis Urban / Capital Housing Corporation;
- Youth Emergency Shelter Services (YESS);
- Day service providers including Boyle Street Community Services and Bissell Centre;
- George Spady Centre;
- Community Leagues;
- Business Improvement Areas (BIAs);
- Representatives from the City of Edmonton's Anti-Racism Advisory Committee;
- Representatives from the Women's Advocacy Voice of Edmonton Committee; and
- Representatives from the City of Edmonton's Accessibility Advisory Committee
Executive Summary

The City of Edmonton Minimum Emergency Shelter Standards are designed to help end homelessness in our community by demonstrating how emergency shelters can be accessible and housing-focused. By establishing minimum operating, service-delivery, and infrastructure standards based on research and best practices from the Canadian Shelter Transformation Network and other jurisdictions across Canada, this document is a guide-post for emergency shelters to evaluate their individual and collective success in helping individuals resolve their homelessness in order to live safer, healthier lives. It is also a document that can be used by funders and other key stakeholders in Edmonton’s homeless-serving system of care to inform future discussions about the role of emergency shelters in ending homelessness in Edmonton.

The City of Edmonton Minimum Emergency Shelter Standards (“the Standard”) outlines best practices for walk-up, overnight emergency shelter services for people experiencing homelessness in Edmonton. These shelters are distinct from shelters serving people fleeing domestic violence, youth shelters, and short-term/transitional housing options, which may require distinct service delivery models, referral based intake, and/or rent.

The Standard is informed by a set of guiding principles that directly tie into operational, service-delivery, and infrastructure best practices for emergency shelter operators to learn from and adopt. The Standard is designed to ensure that both essential services and connections to appropriate social support systems are client-centered, trauma informed, and that these services are delivered in a way that reduces harm for both individuals experiencing homelessness and the surrounding community.

A complete list of terms and definitions can be found on page 17. It is recommended that the Standard be reviewed and updated every three years in order to reflect up to date research and changes within Edmonton’s emergency shelter system.
**System Dependencies**

Emergency shelter services are a gateway to housing, health, and other programs necessary for Edmontonians to resolve their homelessness. While emergency shelters in Edmonton can orient their systems of care inside shelter to be housing-focused, trauma informed, and accessible, it is important to acknowledge that alignment with other systems, such as healthcare, justice, and housing, is critical for guests to successfully flow out of shelter into stable and appropriate housing solutions.

Throughout the engagement process, stakeholders emphasized the importance of increasing the supply of supportive housing for individuals with complex needs who are experiencing chronic homelessness as a necessary intervention to increase housing outcomes out of shelter. All shelter operators also articulated the need for integrated medical support services in emergency shelters in order to appropriately care for guests. These system dependencies, and others, require continued collaborative efforts between relevant health and social agencies to ensure appropriate care pathways for those in our community who present with multiple physical, mental, and addictions health needs.
Guiding Principles

1. Promote inclusion and welcome all who need services regardless of gender identity, ethnicity, sexual orientation, disability, cognitive or physical abilities.

2. Maintain a housing-focused approach to shelter service delivery, recognizing that stable housing is the primary need shared by all people experiencing homelessness, and that other health and social challenges can be better addressed once housing is secured.

3. Provide service delivery grounded in an anti-racist and trauma-informed approach that prioritizes the client’s safety, choice, and control, including consideration of specific Indigenous historical trauma.

4. In recognition of the over-representation of Indigenous peoples experiencing homelessness, recognize and respond to the needs of Indigenous guests with culturally appropriate and Indigenous specific operations and supports.

5. Respect clients’ cultural and spiritual identities and, if requested, connect them with pathways to access appropriate services in line with their identities.

6. Provide access and referrals to a full spectrum of addictions and recovery services, from harm reduction to abstinence based programming, and respect and support a client’s choice to access these services.

7. Collaborate with other service providers and stakeholders across the homeless-serving, health, and justice sectors, including but not limited to income and employment support programs, mental health, addictions, and recovery services, and Edmonton Police Service, to make appropriate referrals and develop case management plans for clients that lead to the best outcome.

8. Communicate information about the facility and operations in a way that is accessible, transparent, and clear about behavioural responsibilities and banning processes for guests and staff alike.

9. Develop relationships with the community where the facility is situated and establish open and transparent communications channels with neighbours.
**Operational Standards**

This section will establish minimum operational standards for day-to-day operations of emergency shelters in Edmonton. These standards are designed to increase accessibility for guests who may otherwise avoid shelter due to operational barriers.

**OUTCOME STATEMENT**

The successful implementation of the operational standards described in this section are expected to achieve the following outcomes:

- Increase the number of shelter spaces in Edmonton that are considered to be low-barrier
- Reduce the number of individuals choosing to sleep rough when there is available shelter space
- Minimize, or reduce, the number of critical incidents occurring at shelters

**Hours of Operation**

Emergency shelters operators should provide true 24/7 support to guests and not require them to leave the property for operational purposes (such as converting a space from sleeping services to meal services). In a 24/7 model, admission can occur at any time of day as capacity allows. In order to achieve this, there must be a clear separation of day-services space (including communal eating spaces, offices, and activity areas) from overnight sleeping space to allow guests to move from one space to another throughout the day.

**Sleeping Accommodations**

Dignified sleeping quarters should be provided in order to ensure guests can maintain healthy sleep hygiene for the duration of their stay in shelter. Sleep hygiene is a critical component of an individual’s overall physical and mental health. Dignified sleeping accommodation includes:

- Private or semi-private sleeping spaces where possible;
- A bed off the ground, with bed rails or lower heights for low-mobility guests or those impaired by substance use;
- Separation from communal eating or activity areas;
- Couples spaces, if needed;
- Day-sleep spaces;
- 2 meters between beds, if in a congregate setting (although this is not a preferred setting).

Operators will make reasonable efforts to accommodate client preference on sleeping location, utilizing a GBA+ lens.

**Storage for Guests**

Emergency shelters should ensure guests have safe and secure storage options for their belongings, and should not confiscate or ban items from being stored unless they pose a life-safety risk to staff and other guests. Rules around accessing storage, like what can and cannot be stored, how often a person can access their items if stored in a locked storage room, and how long an item will be stored before it is discarded - should be posted publicly, with storage records kept by operators.

Some examples of storage solutions include:
- Lockers or trunks: A 24/7 storage solution that allows an individual to safely lock up and access their own clothing, shoes, hygiene products, and other small personal items;
- Amnesty Totes or Safe Keeping Boxes: A storage system that allows guests to store items prohibited from shelter that might otherwise prevent them from being able to access services. These items can be stored in opaque bags for the guest to check-out upon leaving the shelter;
- Locked storage room: A larger storage space with a “check in - check out“ system for individuals who have large amounts of personal items that cannot be accommodated in a locker or trunk;
- Secure Bike Facility: Bicycles are a common mode of transport for individuals experiencing homelessness; a locked bike facility should be well designed to prevent theft.

**Hygiene Services**

Operators will provide a minimum of one shower stall for every twenty persons (per industry standards), and 1 toilet/sink for every 10 persons staying overnight (per National Building Code, Alberta Edition). A minimum of one washroom that is barrier-free, fully accessible and marked as gender
neutral must be provided. Access to showers by clients should be available on demand.

Basic hygiene and toiletry products should be provided to clients who cannot provide their own, including towels, soap, shampoo, a toothbrush, toothpaste, shaving products, menstrual hygiene products, and incontinence products as appropriate.

**Bedding & Laundry Services**
Operators should provide bedding, towels, and laundry services for clients (both commercial and self-serviced). A policy to regulate self-service machines - operating hours, sign up sheets, time for servicing and cleaning - should be posted where guests can read and understand it.

**Nutrition**
Nutritional needs are dependent upon the individual needs of each client, and food provision is an essential health service that should be included in shelter. Food service delivery that requires line-ups does not promote dignity for those accessing food services, and are known to cause unrest and frustration. Instead, food services that offer guests meal options at all times of the day are preferred, as both a health intervention, for guests who have underlying health conditions like diabetes, and as a way to increase accessibility for guests who may try to access shelter outside of pre-set meal times.

**Pets**
Emergency shelters should establish a pet policy that ensures that there is a plan in place to support people with pets who need to stay at the facility. If pets cannot be accommodated, emergency shelters should refer guests to a shelter that meets their needs and arrange for transport.

**Applicable Laws**
These Standards are meant to supplement, not to displace, any applicable laws, statutes, regulations, bylaws, policies and equivalents thereto. Operators shall adhere to all applicable laws, statutes, regulations, bylaws, policies, and equivalents thereto, including (without limitation) those outlined in the Government of Alberta's Homeless Shelter Accommodation Expectations.
Neighbourhood Impacts

All shelters should develop a Good Neighbour Commitment that lays out specific measures and actions that will be implemented by the operator to mitigate and minimize the impacts of the shelter operation on neighbouring properties, businesses, and residents. In order for a Good Neighbour Commitment to be acceptable in form and content to the City, it should include service standards, a 24/7 on-site contact, and an issue resolution process that is clearly communicated with nearby residents and businesses. Public sidewalks and building frontages should not be relied upon for queueing or smoking areas.
Service Delivery Standards

This section will establish minimum expectations for service delivery and programming for emergency shelter operations in Edmonton.

OUTCOME STATEMENT

The successful delivery of the programs and services described in this section are expected to achieve the following outcomes:

- Increase the number of individuals securing permanent housing from shelter
- Increase the number of individuals being diverted to temporary housing options that are more suitable for their circumstances
- Reduce the average length of stay for regular shelter clients

Expectations of Shelter Guests

Operators should develop an Admissions Policy that includes behavioural expectations of guests accessing overnight sleep space, day sleep space, and day space. The expectations must be posted transparently throughout the emergency shelter and communicated verbally to guests during admission to emergency shelter.

These expectations should include (but are not limited to):

- behavioural expectations, including a commitment to be respectful of staff and other shelter guests;
- items that are prohibited from entering shelter and options for storage of personal items (see: ‘Storage for Guests’);
- required participation in housing programs, and a commitment from guests to work on a housing plan.

Admission decisions will not be made based on a guest’s substance use; guests should be welcome to use emergency shelter services as long as they are safely mobile and are able to adhere to the behavioural expectations in place.
Service Restrictions
Decisions on restriction to access, (sometimes called banning or barring), will be made based on a clearly defined policy and consistent set of procedures that is publicly posted for guests and staff. Banning or barring should be minimized unless individual’s pose a safety threat to staff or other participants. A clear process for pursuing the removal or reconsideration of bans will also be articulated.

Admission & Diversion
During the admissions process, emergency shelter operators should:

- Determine whether or not the guest is suited for the programs and services offered at the shelter they are seeking to access;
- Provide a referral and arrange for transport for guests who are best suited to a different shelter or, if possible, divert to housing, based on their needs;
- Share with the guest clear expectations about the conditions for shelter use, orient guests to the space, and assign a bed.

The admissions process must demonstrate a clear pathway to intake for shelter guests, requiring that all guests participate in housing programs and can voluntarily participate in other specialized programs that support their pursuit of housing.

Diversion is the practice of referring people from shelter to safe and appropriate alternatives wherever possible. When new guests arrive, emergency shelters should have a diversion policy and process in place that works with the new guest to determine whether or not the shelter is an appropriate place for them to stay that night and, if it’s not, work towards a better solution.

Intake
Once guests have been admitted to shelter, a more comprehensive intake should be completed within one to three days. While guests may not be able to do a full intake on the same day as seeking admission (often reasonably seeking to have their basic needs met first), a more comprehensive intake
should be completed with guests in order to quickly connect them to a program that will facilitate their rapid exit from shelter into housing. Shelters should avoid the use of lengthy line ups or queues for beds.

**Specialized Program Requirements**

There are four specialized program areas that Edmonton shelter operators should develop, with corresponding policies and referral pathways, in order for an emergency shelter to meet Edmonton's Minimum Shelter Standards.

Consistent with a housing focused approach, there should be an embedded housing program in every single emergency shelter and service delivery should be tied to developing a housing plan and making housing referrals as frequently as possible. In order to achieve this, emergency shelter operators must ensure that all staff have a familiarity of the housing system. To maximize access to housing programs in shelter, shelter should be low-barrier and inclusive of the unique needs reflected in Edmonton's homeless population. In addition to a housing program, three additional program standards have been identified to increase accessibility to shelter and, by extension, housing programs.

### 1. Diversion and Housing First Programs

Emergency shelters must have integrated diversion and housing programs for shelter guests that are linked to Coordinated Access Housing Services, the primary pathway for housing support in Edmonton. It should be the goal of these programs, and all programs, to help move individuals out of shelter and into safe housing quickly. Emergency shelters can track their success in this area by measuring housing outcomes (increased) and guests' length of stay in shelter (decreased), and frequently reviewing intake information to identify individuals who are chronically in shelter. Chronic shelter users should be targeted for more enhanced housing support.

An embedded housing program should mandate that:

- Guests have engaged with a housing worker within 48 hours of entering an emergency shelter;
- Guests develop a housing plan within one week of entering shelter;
- If the housing program in shelter is not an appropriate fit, guests are referred to appropriate housing programs as quickly as possible.
2. Mental Health and Addictions Program

Operators will assist clients in obtaining appropriate mental health and addictions support services, which includes respecting client choice to access services from the full range of the addiction recovery spectrum. Where possible, programs should be offered on-site; in the event that is not possible, clear referral pathways and connections with the healthcare system should be established and tracked. This program should include:

- Clear protocols for guests prior to entry that explain what substances are prohibited from being used on site and corresponding storage options;
- Provision of medical and disposable sharps containers;
- Direction to resources that reduce the spread of communicable diseases as it relates to substance use, including the provision of clean and safe injection equipment or information on where to obtain it;
- Information for guests about where Supervised Consumption Services and other harm reduction programming can be accessed, if not on site;
- Staff training in overdose prevention and a clear protocol on how to respond to an overdose with provision of the appropriate tools;
- Referral pathways with warm hand-offs to appropriate support services when services in the facility are inadequate or unavailable.

3. Indigenous Support Program

The City of Edmonton recognizes that the overrepresentation of Indigenous peoples in vulnerable populations due to effects of historical trauma requires Indigenous people to lead program delivery and support services wherever possible. Operators are expected to work or partner directly with Indigenous organizations and individuals to ensure that program delivery and engagement is culturally competent. Examples of this may include:

- Conducting spiritual ceremonies, including smudging, sacred fire, and other teachings and protocols that can restore and support cultural healing from the effects of historical trauma;
- Involving Elders in the planning and implementation of support services ie. Elders counselling/guidance;
- Access to translation services to support personalized service delivery.
• Diversion efforts that seek to connect people to their families and home communities, wherever they may be.

4. LGBTQ2S+ and Youth Support Program
Operators will establish clear policies that reflect inclusiveness of LGBTQ2S+ individuals to ensure safer spaces for non-binary gendered people in Emergency Shelters, as recommended in the LGBTQ2S Youth and Housing Shelter Guidelines. Operators are required to respect and accept the self-defined sexual orientation, gender identity, and gender expression of an individual, including their pronoun. Operators will make appropriate referrals to youth programs and services for those who are not appropriately supported in adult-focused emergency shelters.
Infrastructure Standards

This section will outline infrastructure standards for shelter operators pursuing modifications of an existing building or building a new facility.

OUTCOME STATEMENT

That emergency shelters in Edmonton adopt best practices as outlined below when redesigning an existing shelter space or building a new shelter to improve service delivery, decrease negative community impacts, and increase accessibility for guests, in line with the Guiding Principles.

Built Form Considerations

Emergency shelters should have:

- private or semi-private sleeping spaces
- day space, separate from sleeping quarters, that provides areas for: communal meals, housing work, and staff offices
- barrier free and gender neutral washrooms
- a predictable lay-out, with minimal sharp corners and rounded walls to prevent individuals from bumping into one another
- enhanced materials used throughout to prevent noise transfer between spaces,
- A private and thoughtfully placed smoking area
- Safe parking and storage for bikes and shopping carts
- Increased ventilation and sanitation to support public health.
Terms and Definitions

**Anti-Racism**: Anti-racism is usually structured around conscious efforts and deliberate actions to provide equitable opportunities for all people on an individual and systemic level. It can be engaged by acknowledging personal privileges, confronting acts and systems of racial discrimination, and/or working to change personal racial biases. (Safer For All Report, March 30, 2021)

**Gender Based Analysis Plus (GBA+)**: An analytical tool often used with the intention of advancing gender equality. The “plus” in the name highlights that Gender-based Analysis goes beyond gender, and includes the examination of a range of factors such as age, education, race, language, geography, culture, and income. GBA+ is used to assess the potential impacts of policies, programs or initiatives on diverse groups of citizens, taking into account gender and other factors. (Gender-Based Analysis Plus Report, City of Edmonton, 2017)

**Harm Reduction**: A client-centered approach that seeks to reduce the health and social harms associated with addiction and substance use (Harm Reduction, Canadian Mental Health Association of Ontario, 2021)

**Housing Focused Shelter**: A housing-focused shelter is unrelenting in its pursuit to make homelessness as brief as possible while returning people to permanent accommodation. From the moment an individual or family pursues shelter, there are efforts to ensure a safe and appropriate exit from shelter. Housing focused shelter does not operate other programming that can interfere with ensuring stays are short-term with a return to housing rapidly. (Housing Focused Shelter, OrgCode Consulting Inc. in partnership with the Canadian Shelter Transformation Network and Canadian Alliance to End Homelessness, March 2019)

**Low-Barrier Shelter**: Low barrier shelters ensure that every reasonable barrier to shelter access (and by extension housing access) has been removed. (Housing Focused Shelter, OrgCode Consulting Inc. in partnership with the Canadian Shelter Transformation Network and Canadian Alliance to End Homelessness, March 2019)

**Trauma-Informed Care**: Services are provided in ways that recognize the need for physical and emotional safety, as well as choice and control in decisions affecting one’s treatment. Trauma-informed service delivery creates an environment where service users do not experience further traumatization or re-traumatization. (Trauma-Informed Care - Overview, Community Mental Health Action Plan, 2021)