New Beginnings
Standards for Ontario Indigenous Shelters
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Before All Else

This document is dedicated to our Indigenous Women and Girls that were taken from their families, communities, clans and nations too soon. May all shelters utilize these Indigenous Shelter Standards to foster a new beginning by creating a culturally safe, responsible and welcoming environment that fosters protection and healing for our Indigenous women, children and families from the generations of colonized oppression and abuse of our Indigenous Peoples.
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Nya:wenkowa, Meegwetch, Migwetch
In 2015, the Ministry of Community and Social Services (MCSS) introduced Violence Against Women (VAW) Emergency Shelter Standards. These standards were created through a series of engagements with leaders from shelters across Ontario. They are intended for Violence Against Women emergency shelters and are framed as expectations of the ministry. Corresponding policies were to be instituted by the spring of 2016.

Currently, the ten on-reserve Ontario shelters funded by Indigenous and Northern Affairs Canada (INAC) and the five on-reserve Ontario shelters funded by the Ministry of Community and Social Services (MCSS) are not subject to the expectations of the ministry to institute the mainstream standards. This circumstance provided an opportunity for Indigenous shelter leaders to develop standards for Indigenous shelters, ahead of the curve. This document is not mandatory for Indigenous shelters to integrate. It should be viewed as a reference for shelters to develop operating policies and consider logical procedures that make sense to their unique circumstances.

In 2016 eight Indigenous shelter leaders came together, under the leadership of the Aboriginal Shelters of Ontario (ASOO) to review the MCSS standards document, disseminate it and re-create standards that aligned with Indigenous realities of shelters on reserve. The Indigenous Working Group (IWG) that formed took time from their busy schedules to Indigenize the standards and see these as a more considerate tool for Indigenous worldviews. These leaders worked hard to develop this teaching tool and envisioned a document that could assist Indigenous shelters to better organize services for the wellbeing of Indigenous Peoples.

The standards document before you, we hope, will support the improvement of services and the wellbeing of Indigenous families. They convey a collective vision of professionalism that guides the daily practices of members of the Indigenous Working Group (IWG).

We know that shelters are at varying degrees of policy development. The IWG recognizes that policies play an important role in the day to day operations of Indigenous shelters. They provide staff with a sound understanding of their roles and responsibilities. They convey a message of assurance to staff that they are part of a soundly managed organization. Developing, integrating and enforcing policies can bolster a shelter’s reputation in the eyes of funders who will view the shelter with more credibility. Policies can also provide residents and persons using services with clarity when questions or conflicts arise. Communal living requires defined guidelines to keep peace and harmony and to perpetuate healing and wellness.

The IWG wishes to see this tool reflected upon as a resource for non-Indigenous shelters to help their staff to better understand the needs of Indigenous Peoples. The standards within this document could serve as an opportunity to examine current practices as they relate to Indigenous clients and integrate new practices when working with Indigenous clients. Consider ‘New Beginnings: Standards for Ontario Indigenous Shelters’ a tool of inspiration.
Reference Definitions:

**Access to services**: Any person and/or Indigenous and/or dependents who receive services in the shelter, referrals to services in the community, or information and safety planning support over the phone through the crisis line.

**Community minded practices**: Akin to a best practice or wise practice. These practices keep the collective well-being of the Indigenous community at the forefront of decision making.

**Person**: Any individual or Indigenous person that are receiving services from the shelter.

**Dependents**: Children, family members, and/or individuals affected by violence and/or abuse, who are currently residing in the home of the person seeking services.

**Emergency shelter / Shelter**: Safe and secure temporary residence that is available 24/7 for person and dependents who have experienced violence and/or abuse.

**Family violence**: The intentional and systematic use of tactics to establish and maintain power and control over a person’s thoughts, emotions, beliefs, and behaviours. This may include physical, mental, emotional, spiritual, financial and/or sexual abuse.

**Indigenous**: Peoples inhabiting or existing in a land from the earliest times or from before the arrival of colonists.

**Preliminary intake information**: Information obtained from the shelter resident upon intake such as name and date of birth of persons and dependents, and information related to safety concerns and risks.

**Resident**: A person who is accessing shelter services.

**Remote and isolated communities**: Communities that have limited local services, situated far from urban centres and/or without year-round road access.

**Responsibilities**: The relationship that Indigenous people have regarding their roles and responsibilities which are culturally inherent to the well-being and functioning of our nations, communities, and shelters.

**Rights**: Rights, freedoms, responsibilities and legal entitlements in accordance with the laws of the Province of Ontario and/or Canada.

**Rural communities**: A geographic area located outside of towns and cities.

**Shelter at capacity**: When a shelter can no longer admit a person and their dependents due to lack of available beds.

**Survivor**: A person who has experienced violence and/or abuse in any of its forms.

**Transition**: Services and supports provided by the shelter in an effort to support persons and dependents to move on from their stay at the shelter.

**Two-spirited**: An Indigenous term that includes lesbian, gay, bisexual, transgender or queer (LGBTQ) Indigenous people.
ACCESS TO SHELTER SERVICES
1.1 Access Criteria

Shelters will admit Indigenous people and their dependents 24/7, and must have a written policy that articulates the access criteria, which should include the following:

Shelter services are for all those who identify as a person, aged 16 years and older, and their dependents who are experiencing, threatened by and/or affected by violence or abuse of any kind.

Dependents

Shelters will have a written procedure on how staff will support persons and their dependents that access shelter services. A dependent refers to children, family members, and/or individuals affected by violence and/or abuse, who are currently residing in the home of the person seeking services. Access to shelter services will include the completion of an assessment of immediate safety needs. Based on the assessment, shelters will provide services to person and their dependents, if available, or provide referrals to more appropriate services in the community or other Indigenous services.

People Who Do Not Meet Access Criteria

The shelter will have a written policy that outlines the steps the shelter will take to refer persons and their dependents who do not meet the eligibility criteria to appropriate services. Shelters will have up-to-date information on local service providers to refer person’s and their dependents.

1.2 Shelter at Capacity

The shelter will have a written policy and procedure that outlines the steps that will be taken to refer people and dependents to alternative shelter or community services when the shelter is full. These steps will include completing an assessment of safety concerns, safety planning, as appropriate, and working with the person in an effort to find the most appropriate solution to support their safety. Shelter policies will acknowledge that person’s may choose not to access alternative shelters or services, this should be documented accurately.

1.3 Intake and Assessment

The shelter will have an intake procedure, which includes the completion of an intake form, an initial assessment of the person’s and dependents’ experience of violence and/or abuse and level of risk, and safety planning.

Shelters will obtain persons and dependents’ preliminary information within 24 hours of being admitted to the shelter. Preliminary information includes name and date of birth of person’s and dependents, and information related to safety concerns and risks. In addition to preliminary information, shelters will determine the appropriate length of time to complete the full intake and assessment procedure. Safety planning and risk assessment is also noted in Standard 3.3 - Safety Assessment and Risk Management.

The shelter may provide transportation assistance for persons and dependents travelling to the shelter.

1.4 Length of Stay

It is recognized that persons who are accessing shelter services may face a number of circumstances that impact their length of stay. As such, shelters will have a written policy that outlines an appropriate length of stay for person and dependents. The length of stay policy will take into consideration the unique situation of each person and the local community realities; and thus, shall include reassessment of the person’s needs.
1.5 Transitioning from the Shelter

The shelter will have a written procedure that outlines the various reasons for persons and dependents transitioning from the shelter, which could include but is not limited to:

- The person has found alternative housing,
- The person has chosen to return to her partner,
- The person failed to participate in shelter programs,
- The person has voluntarily decided to leave the shelter,
- The person poses a safety risk to other residents,
- The person breaches the safety policies of the shelter,
- The person has been transferred to another shelter due to safety concerns,
- The person’s current needs would be more effectively served by other agencies and resources,
- The person has cultural, linguistic, or territorial considerations.

When transitioning from the shelter; shelter staff will encourage, where appropriate, continuation of non-residential services or access to additional information, referrals to resources and community services for persons and dependents.

1.6 Referrals to Other Services

The shelter will have a written policy that outlines how the shelter will work collaboratively with persons and dependents to make referrals to other services such as children’s mental health services, medical, housing and legal supports, counselling, and mental health, addictions services and cultural supports.

1.7 Shelter-to-Shelter Transfer

The shelter will have a written policy that outlines the reasons persons and dependents may be transferred to another shelter. The procedures shall include questions related to how the transferring shelter may assist financially with the transfer. The procedure will also include a written/signed release of information between shelters and residents; signed by residents.

1.8 Resident Not Returning to the Shelter

The shelter will have a written policy and procedure regarding how the shelter will respond to and work with persons and dependents who are residing in the shelter and do not return to the shelter at the time they had specified. It is encouraged that shelters work with persons, upon intake, to determine how they would like the shelter to respond in the case they do not return. Additionally, this policy also pertains to the handling of all personal belongings. Recognizing that there is a high number of Missing and Murdered Indigenous Women, girls, men and boys; shelters will have a protocol with the police service in their jurisdiction, which will include relevant procedures to respond to missing persons, including their dependents.
PERSON / RESIDENT RIGHTS AND SHELTER RESPONSIBILITIES
2.1 Right to Receive Service

The shelter will have a written policy that outlines that all persons and dependents at risk of or experiencing violence and/or abuse have the right to access shelter services, when available and appropriate.

2.2 Resident Rights and Responsibilities

It is the shelter’s responsibility to ensure that the rights of people accessing services are respected and protected.

It is the resident’s responsibility to ensure that the rights of others accessing services are respected and protected.

It is recommended that these rights and responsibilities are reflected in staff and resident manuals.

The shelter will have a written policy that outlines the rights of persons and dependents accessing shelter services, which will include:

- The right to be treated with respect and to be free from discrimination,
- The right to self-determination and individual decision-making,
- The right to access culturally safe supports,
- The right to a fair and clear complaint process without fear of reprisal,
- The right to provide input and feedback into shelter programs,
- The right to receive support from staff and identify short-term and long-term priorities,
- The right to information about services and resources in order to make informed decisions,
- The right to confidentiality of personal information and identity, except in the case of duty to report,
- The rights of persons and dependents accessing shelter services will be regularly communicated to persons/residents.

2.3 Privacy and Right to Confidentiality

The shelter will have a written policy and procedure to protect the privacy and confidentiality of all persons and dependents who receive services. This policy will also reflect duty to report requirements.

The policy will include the following:

- Board members, Chief and Council representatives, management, staff, volunteers, visitors, placement students, persons and dependents will sign a confidentiality agreement developed by the shelter to maintain the confidentiality of all current and former shelter residents;
- The shelter will not confirm admission, disclose the whereabouts, or any information about persons or dependents, unless there is an imminent risk to the person and their dependents or as required by law;
- Shelter staff will obtain consent from persons and dependents, prior to consulting with or providing referrals to other service providers.
2.4 Consent from Persons and Dependents

The shelter will have a written policy stating that information recorded or known about persons and dependents will not be shared with outside agencies without the written consent from persons, unless required by law. Written consent should be obtained from all persons 16 years of age and older and indicate the type of information, how, and with whom information may be shared, the length of time the consent will be in effect. The written policy will indicate that persons and dependents may withdraw written consent at any time.

2.5 Person’s Records

The shelter will have a written policy and procedure to protect the records of persons, in paper and electronic form, from destruction, theft, or damage. The written policy and procedure will guide the management of service records, which includes how records are to be:

- Maintained and secured,
- Removed and transferred,
- Length of time before they are destroyed and how they will be destroyed; 3 to 7 years is a suggested timeframe.

2.6 Food and Nutrition

Shelters will have a written policy outlining how they will make every effort to provide food that is responsive to the religious, spiritual, cultural, nutritional, and dietary needs of persons and dependents. Shelters may use First Nations Food Guide for suggestions on the size, variety, quality, and nutritional value of meals.

2.7 Complaints Process

The shelter will have a written policy and procedure outlining how persons and dependents can report and attempt to resolve complaints. The policy and procedure will outline how and when persons and dependents accessing shelter services will be informed of the complaints process. Shelters will regularly communicate and make available the complaints policy and procedure to persons and dependents, and maintain written records of formal complaints and their attempted or actual resolution.

Complaints may include but are not limited to:

- Conduct of another receiving services,
- Complaint against shelter staff,
- Complaint about service provision,
- Complaint about health and safety concerns.

2.8 Supporting the Safety and Security of Shelter Persons/Residents

Shelters will have a written policy and procedure that outlines how they will work with persons to assess behavior that may impact the safety and security of other shelter residents.
2.9 Use of Substances

Shelters provide access to all persons seeking shelter services, including those who use substances, as long as it is safe for others. The shelter will have a policy and procedure that outlines how they will provide support to persons who use substances, which could include the assessment of immediate safety needs and relevant community supports. The written policy and procedure will outline how the shelter will respond to persons who are in possession of substances and/or use substances on shelter premises.

2.10 Supports for Persons and Dependents with Mental Health Needs

Shelters will provide access to emergency shelter services to all persons and dependents, including persons with mental health needs based on assessment of safety factors for individual, other residents and staff. The shelter will have a written procedure that ensures services are responsive to persons and children with mental health needs. The written procedure will outline how staff will work with or refer persons with mental health concerns.
3 PROGRAM STANDARDS
3.1 Crisis Line Services
The shelter will ensure that crisis line services are available by phone and text telephone 24 hours a day, seven days a week, 365 days each year. Shelters will have a service plan in place when telephones are not available.

3.2 Residential Support
The shelter will have a written policy that outlines how the shelter will meet persons’ and dependents’ basic needs, including the provision of safe accommodation, meals, emergency clothing, personal hygiene supplies, laundry facilities, and essential baby supplies.

3.3 Safety Planning and Risk Assessment
The shelter will have a written procedure that outlines how each person accessing shelter services will complete an assessment using a risk assessment tool, and discuss safety planning and risk management strategies with staff. Safety planning reflects the person’s immediate personal circumstances, needs, and choices. The safety plan is to be monitored and reassessed regularly.

3.4 Individual Support Planning
The shelter will have a written policy and procedure for shelter staff to provide ongoing support for persons and dependents during their stay at the shelter. Ongoing support could include, but is not limited to:

- Crisis intervention,
- Emotional support,
- Risk assessment,
- Safety planning,
- Family violence education awareness,
- Suicide intervention.

This planning will include supporting person’s and dependents to navigate or access a variety of systems, including but not limited to justice, employment, housing supports, health, police, education, child welfare services, and traditional knowledge holders for culturally safe programming.

Shelter staff will work with persons and dependents to establish short and long-term priorities, and the supports required from staff and community resources.

Some shelters may also provide outreach support planning for persons and dependents that are not living in the shelter. If this is the case, the shelter will have a written policy that outlines their procedures.

3.5 Supports for Children
It is recognized that shelters provide a continuum of services and supports for children. The shelter will have a written policy and procedure that outlines the services and supports that will be provided to children, including how children will be a part of safety planning and risk assessment. The policy will include how shelter staff will work with persons to determine the appropriate supports for children, and/or the appropriate referral to services in the community.
3.6 Duty to Report

The shelter will have a written policy and procedure, requiring staff to report any suspicion that a child is or may be in need of protection to the local children’s aid society (CAS). The policy must also require staff to document and report the information on which the report is based. The policy will meet all requirements in the Child and Family Services Act, respecting reporting protection concerns. The policy will also require the shelter to inform each person upon intake that staff may be required to make a report in accordance with requirements under the Child and Family Services Act.

It is recommended that the policy reflects the way staff communicate their duty to report and the supports that will be provided to them if child welfare authorities intervene.

It is recommended that a Memorandum of Understanding (MOU) be developed between shelters and the local CAS. (Please see Appendix A).

3.7 Culturally Safe Supports

Shelters will have a written policy and procedure that outlines the supports that will be provided to persons and dependents accessing shelter services. Culturally safe supports may include:

- Any culturally relevant supports available locally or otherwise,
- Access to traditional knowledge holders,
- Access to Indigenous language interpreter,
- Access to ceremonies,
- Access to space for traditional practices,
- Access to traditional medicines,
- Information and referrals to culturally safe services.
4 STAFF AND VOLUNTEERS
4.1 Staff Orientation

The shelter will have a written policy that outlines the orientation procedure for all its new employees and volunteers. Where applicable all employees, volunteers, and students are required to be familiar with the shelter’s policies and procedures.

As a Community Minded practice it is recommended that newly elected Board of Directors as well as Elected Council representatives participate in an orientation.

4.2 Safety for Staff and Volunteers

The shelter will have a written policy and procedure on how to support the safety and well-being of staff, volunteers, in the shelter, consistent with the Occupational Health and Safety Act. In the case of a security issue or concern with a resident, the written policy will outline the procedures that will be in place, such as the availability of on-call staff and local emergency services.

It is recommended that Shelters review Bill-168 as a guideline to develop policies to protect staff.
5 HEALTH AND SAFETY
5.1 Adherence to Laws

All shelters will comply with any and all applicable territorial, federal, and provincial by-laws, laws, statutes, regulations and orders.

5.2 Health and Safety

The shelter will review their health and safety policies and procedures to promote the health, safety, and wellness of persons and dependents using the shelter. This policy includes employees and volunteers. The following health considerations will be included in written policies and procedures:

General Health and Safety

- Persons and dependents are safe and secure within the facility and entrances are secured against unwanted entry.
- Emergency exits will be equipped with an alarm to alert staff/volunteers of unauthorized comings and goings.
- A pest management program is in place that includes prevention of pest infestation.
- Designated smoking areas.

Infectious Diseases and Outbreaks

The shelter will have a written policy outlining how and when they will report on increased rates of illness, when to contact local health services and/or the local public health unit, how they will support any public health unit investigation, and how they will support ill residents to receive care, when required.

Shelter will have a written policy related to the prevention of staff infectious diseases.

5.3 First Aid and Cardiopulmonary Resuscitation (CPR)

The shelter will have a written policy that outlines that at least one staff certified in Standard First Aid and CPR is on duty at all times in the shelter. It is highly recommended that shelters also have an automated external defibrillator and trained staff to operate.

5.4 Food Safety

The shelter will have a written policy that outlines how employees, persons and dependents, and volunteers adhere to food safety requirements. This includes requirements related to food handling during food preparation, processing, packaging, service, storage, and transportation.

5.5 Fire Safety and Emergency Preparedness

The shelter will have a written policy that outlines that the shelter complies with an emergency and/or fire evacuation plan. All employees and volunteers will be familiar with the plan, and will make persons and dependents aware upon admission to the shelter, when appropriate. Diagrams of the evacuation plan will be posted in all sleeping and communal areas. The shelter will comply with the Ontario Fire Code. Fire extinguishers and smoke alarms are regularly serviced and available in areas where services are provided.
5.6 Safety for Children

The shelter will have a written policy on the procedures to monitor that children’s equipment is age appropriate and well-maintained. Cribs, appropriate bedding, car seats, strollers, high chairs, toys, and playpens should reference specifications approved by the Canadian Standards Association (CSA). Cribs must be provided for all children under two years of age, as per appropriate safety standards in accordance with CSA.

5.7 Resident Medication

The shelter will have a written policy that all prescribed and over-the-counter medications are kept in locked storage.

5.8 Serious Occurrences

The shelter will have a written policy for reporting serious occurrences.

It is recommended that Serious Occurrence Reporting (SOR) mirror the Ministry Guidelines, where applicable to each unique community.

5.9 Continuity of Service

The shelter will have a written policy and procedure outlining the arrangements to provide continuous delivery of critical services and identification of necessary resources to support ongoing services.
6 SERVICE MONITORING AND EVALUATION
6.1 Service Review

The shelter will provide persons and dependents with opportunities to give feedback on whether they were satisfied with the services and supports they received.

6.2 Evaluation

The shelter will have a written policy regarding program evaluation.

Program evaluations should look at the shelter’s program performance, quality, efficiency, personal outcomes, and the effectiveness of the services provided.

The policy should note mechanisms to make changes to programs, where warranted. The program evaluation should include a review of compliance with internal written policies.
A MEMORANDUM OF UNDERSTANDING TEMPLATE
MEMORANDUM OF UNDERSTANDING TEMPLATE

When establishing protocols of cooperation between shelters and local CAS; after an oral agreement and before a legal contract; there is the Memorandum of Understanding (MOU). It lays down the fundamentals of the agreement you have entered into and outlines the future involvement of both groups involved. The following template may be tailored to each individual shelter’s unique requirements:

**Identification of Parties**

The first part of an MOU should state who the partnership is between. In this case the shelter will be named as a party and the name of the other entity (child welfare agency, health services, and police) should be included.

**Background (suggested)**

A background can link the past to the present and identify the history, nuances such as dates and shared purpose of coming to the decision to develop an MOU.

**Shared Values (suggested)**

In this section the parties could determine where they share values or guiding principles.

**Purpose and Agreements**

The memorandum should state the purpose and goals of the collaboration or partnership between the two entities. The specific agreements should be detailed into separate paragraphs or listings along the lines of what group A will do and what the shelter will do.

**Duration and Term of Memorandum and Termination Process**

This memorandum shall commence on [date] and continue until [date]. The agreement can be terminated by either party giving [# of months] notice in writing to the other party.

**Meetings and Reporting**

In this section you will indicate how often you will meet and reporting expectations.

**Financial Considerations**

Nothing in the MOU shall be deemed a financial commitment or an obligation for funding from either party.

This agreement acknowledges that all financial agreements are to be negotiated outside of the parameters of this document.

**Signatures (with dates)**

The signatures with dates should include a minimum of one signature from each party named in the MOU.