MANITOBA STANDARDS MANUAL
FOR WOMEN’S SHELTERS

January 2008

Developed by the Family Violence Prevention Program
and Manitoba’s Women’s Shelters
Manual Maintenance and Distribution

The Family Violence Prevention Program updates the Standards Manual for Women’s Shelters to reflect changes in policy, procedures or Departmental requirements.

Manual Updates

<table>
<thead>
<tr>
<th>Section</th>
<th>New</th>
<th>Revised 01.08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction 1 Women’s Shelter Program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Introduction 3 Definitions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.0 Introduction to Part I</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1.1 Service Provider Identifying Information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Replaces Organizational Identifying Information</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1.5 Shelter By-Laws</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.1.6 Annual Reports</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.2.4 Conflict of Interest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.3.3 Operational Planning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.3.5 Staff Recruitment and Screening</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.4 Financial Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.4.2 Financial Controls and Procedures</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## Manual Updates (continued)

<table>
<thead>
<tr>
<th>Section</th>
<th>New</th>
<th>Revised 01.08</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.4.3 Staffing Reports</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>- Replaces Preliminary Budget Submissions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.4.4 Annual Operating Budget</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>- Replaces Final Budget Submissions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.4.5 Interim Financial Reports</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>1.4.6 Board Approval of Budget and Interim Financial Reports</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>1.4.7 Annual Audit</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>1.4.8 Other Required Financial Reports</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>- Replaces Supplementary Reports</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.5.2 Record Retention and Destruction</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>1.5.3 Client Records Contents</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>1.6.5 Shelter Facility Security</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>2.1.1 Human Rights</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>2.2.6 Parental Permission for Children’s Counseling</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>2.2.12 Critical Incidents</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>2.2.13 Outings and Fail to Return</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>- Previously Distributed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.2.14 Interruption of Residential Services</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>- Previously Distributed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.3.1 Admission Criteria</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>2.3.3 Intake and Assessment</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>2.4.4 Individual Counseling Services</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>
## Manual Updates (continued)

<table>
<thead>
<tr>
<th>Section</th>
<th>New</th>
<th>Revised 01.08</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appendix A: Employment and Income Assistance Guidelines (Previously distributed)</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Appendix B: Guidelines for Extension of Stay Requests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appendix C: Financial Reporting Requirements</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>- Replaces Agency Reporting Requirements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Appendix E: Revised Manitoba Guidelines on Identifying and Reporting a Child in Need of Protection (Previously distributed)</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>Map of Manitoba’s Designated Intake and Emergency After-House Agencies (CFS)</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Appendix G: Form for Reporting Security Concerns and Minimum Security Standards and Framework</td>
<td>√</td>
<td></td>
</tr>
<tr>
<td>Appendix I: Critical Incident Report Form</td>
<td></td>
<td>√</td>
</tr>
<tr>
<td>- Added Critical Incident Reporting Procedures</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Table of Contents

## Introduction

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Issued</th>
<th>Revised</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intro. 1</td>
<td>Women’s Shelter Program</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td></td>
<td>Program Overview</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Development of Standards</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Service Purchase</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Quality Assurance</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intro. 2</td>
<td>Use of the Manual</td>
<td>12.92</td>
<td>09.03</td>
</tr>
<tr>
<td></td>
<td>Manual Development</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Manual Content and Structure</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intro. 3</td>
<td>Definitions</td>
<td>12.92</td>
<td>01.08</td>
</tr>
</tbody>
</table>

## Part 1: Shelter Governance and Administration

<table>
<thead>
<tr>
<th>Section</th>
<th>Description</th>
<th>Issued</th>
<th>Revised</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.0</td>
<td>Introduction to Part 1</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>1.1</td>
<td>Incorporation and By-Laws</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Service Provider Identifying Information</td>
<td>05.97</td>
<td>01.08</td>
</tr>
<tr>
<td></td>
<td>Notification of Changes</td>
<td>05.97</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Shelter Incorporation</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td></td>
<td>Registration Renewals</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Shelter-By-Laws</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td></td>
<td>Annual Reports</td>
<td>05.97</td>
<td>01.08</td>
</tr>
<tr>
<td>1.2</td>
<td>Shelter Boards</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Board Membership and Composition</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td></td>
<td>Board Orientation and Training</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td></td>
<td>Accountability and Delegation</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td></td>
<td>Conflict of Interest</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>1.3</td>
<td>Organizational Development</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mission Statement</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Goals and Objectives</td>
<td>12.92</td>
<td>09.03</td>
</tr>
<tr>
<td></td>
<td>Operational Planning</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>Section</td>
<td>Title</td>
<td>Issue Date</td>
<td>Revised Date</td>
</tr>
<tr>
<td>---------</td>
<td>------------------------------------------------------------</td>
<td>------------</td>
<td>--------------</td>
</tr>
<tr>
<td>1.3.4</td>
<td>Organizational Structure</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td>1.3.5</td>
<td>Staff Recruitment and Screening</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>1.3.6</td>
<td>Human Resource Management</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td>1.3.7</td>
<td>Labour-Management Agreements</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td>1.3.8</td>
<td>Position Descriptions</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td>1.3.9</td>
<td>Fair Employment Practices</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td>1.4</td>
<td>Financial Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.4.1</td>
<td>Service Purchase Agreement</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td>1.4.2</td>
<td>Financial Controls and Procedures</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>1.4.3</td>
<td>Staffing Reports</td>
<td>01.08</td>
<td></td>
</tr>
<tr>
<td>1.4.4</td>
<td>Annual Operating Budget</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>1.4.5</td>
<td>Interim Financial Reports</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>1.4.6</td>
<td>Board Approval of Budget and Interim Financial Reports</td>
<td>05.97</td>
<td>01.08</td>
</tr>
<tr>
<td>1.4.7</td>
<td>Annual Audit</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>1.4.8</td>
<td>Other Required Financial Reports</td>
<td>01.08</td>
<td></td>
</tr>
<tr>
<td>1.4.9</td>
<td>Statistical Reports – Units of Service</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td>1.4.10</td>
<td>Fee Waiver Invoices</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td>1.5</td>
<td>Administrative and Client Records Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.5.1</td>
<td>Record Storage and Access</td>
<td>12.92</td>
<td>09.03</td>
</tr>
<tr>
<td>1.5.2</td>
<td>Record Retention and Destruction</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td>1.5.3</td>
<td>Client Record Contents</td>
<td>12.92</td>
<td>09.07</td>
</tr>
<tr>
<td>1.5.4</td>
<td>Client Record Maintenance</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td>1.5.5</td>
<td>Confidentiality of Client Records</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td>1.5.6</td>
<td>Client Access to Records</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td>1.6</td>
<td>Physical Facilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.6.1</td>
<td>Adherence to Legislation/Regulations</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td>1.6.2</td>
<td>Local Codes and By-Laws</td>
<td>05.97</td>
<td></td>
</tr>
<tr>
<td>1.6.3</td>
<td>Annual Fire Inspection</td>
<td>05.97</td>
<td>09.03</td>
</tr>
<tr>
<td>1.6.4</td>
<td>Annual Housing Inspection</td>
<td>09.03</td>
<td></td>
</tr>
<tr>
<td>1.6.5</td>
<td>Shelter Facility Security</td>
<td>09.03</td>
<td>01.08</td>
</tr>
</tbody>
</table>
# Part 2: Shelter Services

## 2.0 Introduction to Part 2

<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Issued</th>
<th>Revised</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.0</td>
<td>Introduction to Part 2</td>
<td>12.92</td>
<td></td>
</tr>
</tbody>
</table>

## 2.1 Protection of Rights

<table>
<thead>
<tr>
<th>Subsection</th>
<th>Title</th>
<th>Issued</th>
<th>Revised</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1.1</td>
<td>Human Rights</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>2.1.2</td>
<td>Right to Service</td>
<td>12.92</td>
<td>09.03</td>
</tr>
<tr>
<td>2.1.3</td>
<td>Right to Privacy</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td>2.1.4</td>
<td>Consent to Release Information</td>
<td>09.03</td>
<td></td>
</tr>
<tr>
<td>2.1.5</td>
<td>Right to Appeal Client Complaints</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td>2.1.6</td>
<td>Right to Services with Cultural Sensitivity</td>
<td>08.02</td>
<td></td>
</tr>
<tr>
<td>2.1.7</td>
<td>Information/Crisis Line Privacy Protection</td>
<td>12.93</td>
<td></td>
</tr>
</tbody>
</table>

## 2.2 Client Safety and Health

<table>
<thead>
<tr>
<th>Subsection</th>
<th>Title</th>
<th>Issued</th>
<th>Revised</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.2.1</td>
<td>Confidentiality &amp; Safety of Admitted Clients</td>
<td>12.92</td>
<td>09.03</td>
</tr>
<tr>
<td>2.2.2</td>
<td>Special Precautions</td>
<td>12.92</td>
<td>08.02</td>
</tr>
<tr>
<td>2.2.3</td>
<td>Supervision and Safety of Children</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td>2.2.4</td>
<td>Preferred Child Care Practices</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td>2.2.5</td>
<td>Parental Permission for Children’s Outings</td>
<td>12.92</td>
<td>03.99</td>
</tr>
<tr>
<td>2.2.6</td>
<td>Parental Permission for Children’s Counselling</td>
<td>01.08</td>
<td></td>
</tr>
<tr>
<td>2.2.7</td>
<td>CFS and Women’s Shelter Protocol</td>
<td>05.97</td>
<td></td>
</tr>
<tr>
<td>2.2.8</td>
<td>Children in Need of Protection</td>
<td>12.92</td>
<td>09.03</td>
</tr>
<tr>
<td>2.2.9</td>
<td>Medication Storage and Access</td>
<td>12.92</td>
<td></td>
</tr>
<tr>
<td>2.2.10</td>
<td>Communicable Disease Policy</td>
<td>12.92</td>
<td>09.03</td>
</tr>
<tr>
<td>2.2.11</td>
<td>Fire Safety Plan and Procedures</td>
<td>05.97</td>
<td></td>
</tr>
<tr>
<td>2.2.12</td>
<td>Critical Incidents</td>
<td>09.03</td>
<td></td>
</tr>
<tr>
<td>2.2.13</td>
<td>Outings and Failure to Return</td>
<td>08.04</td>
<td></td>
</tr>
<tr>
<td>2.2.14</td>
<td>Interruption of Residential Services</td>
<td>02.06</td>
<td></td>
</tr>
</tbody>
</table>

## 2.3 Admission Criteria and Process

<table>
<thead>
<tr>
<th>Subsection</th>
<th>Title</th>
<th>Issued</th>
<th>Revised</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.3.1</td>
<td>Admission Criteria</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>2.3.2</td>
<td>Non-Admitted Clients</td>
<td>12.92</td>
<td>09.03</td>
</tr>
<tr>
<td>2.3.3</td>
<td>Intake and Assessment</td>
<td>12.92</td>
<td>01.08</td>
</tr>
<tr>
<td>2.3.4</td>
<td>Intake and Assessment for Children</td>
<td>05.97</td>
<td></td>
</tr>
<tr>
<td>2.3.5</td>
<td>Management of Client Assets</td>
<td>12.92</td>
<td></td>
</tr>
</tbody>
</table>

## 2.4 Shelter Services and Resources
### Manual Appendix

<table>
<thead>
<tr>
<th>Appendix</th>
<th>Title</th>
<th>Edition</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Employment and Income Assistance (Income Security) Guidelines</td>
<td>12.92</td>
</tr>
<tr>
<td></td>
<td>Employment and Income Assistance Information Sheet</td>
<td>09.06</td>
</tr>
<tr>
<td>B</td>
<td>Guidelines for Extension of Stay Requests</td>
<td>12.92</td>
</tr>
<tr>
<td>C</td>
<td>Financial Reporting Requirements</td>
<td>01.06</td>
</tr>
<tr>
<td>D</td>
<td>Manitoba Conflict of Interest Policy and Guidelines</td>
<td>12.92</td>
</tr>
<tr>
<td>E</td>
<td>Manitoba Guidelines on Identifying and Reporting a Child in Need of Protection (includes instructions for accessing the Child Abuse Registry and a sample letter for agency use)</td>
<td>12.92</td>
</tr>
<tr>
<td></td>
<td>Map of Designated Intake and Emergency After-Hours Agencies (CFS)</td>
<td>01.08</td>
</tr>
<tr>
<td>F</td>
<td>List of Legislation, Regulations, Codes and By-Laws for Physical Facilities</td>
<td>08.02</td>
</tr>
<tr>
<td>Appendix G:</td>
<td>Minimum Shelter Security Standards and Form for Reporting Concerns</td>
<td>01.08</td>
</tr>
<tr>
<td>-----------</td>
<td>---------------------------------------------------------------</td>
<td>-------</td>
</tr>
<tr>
<td>Appendix H:</td>
<td>Communicable Disease Control</td>
<td>09.03</td>
</tr>
<tr>
<td>Appendix I:</td>
<td>Critical Incident Report Form</td>
<td>09.03</td>
</tr>
<tr>
<td></td>
<td>Critical Incident Reporting Procedures</td>
<td></td>
</tr>
<tr>
<td>Appendix J:</td>
<td>Provincial Procedures on Criminal Record Checks</td>
<td>09.03</td>
</tr>
</tbody>
</table>
INTRODUCTION

2008

Family Violence Prevention Program
Family and Community Support Services Division
Department of Family Services and Housing
Women’s Shelter Program

This section provides an overview of the Women’s Shelter Program. It contains information about the program, the development of standards, funding agreements and quality assurance activities.

Program Overview

The Women’s Shelter Program in Manitoba began in the late 1970's and continues to take a leadership role in Canada in the field of woman abuse services.

Background Information

In 1984, the Government of Manitoba assigned responsibility for the funding and co-ordination of woman abuse services to the Department of Community (Family) Services.

The Family Violence Prevention Program (FVPP) was created in 1985. The current mandate of the Program is to promote the elimination of intimate partner violence through the development and support of a continuum of community-based services. The FVPP provides policy and program direction to services for women, their children and men impacted by intimate partner abuse, and is responsible for monitoring and reviewing the quality of these services and ensuring accountability in the use of public funds allocated to agencies delivering programs in this field.

Program Purpose

The purpose of the Women’s Shelter Program is to offer protection and a full range of support services for abused women and their children, and to provide abused women with opportunities to learn of available resources and alternatives to facilitate informed personal choices and decisions.
Program Description

Women’s shelters provide emergency accommodation for abused women and their children on a 24 hour basis, seven days a week. Access to shelter is universal regardless of the financial resources available to the individual. Support services include:

- crisis intervention
- emotional support
- individual and group counselling
- information and referral
- essential transportation
- food and shelter
- child care
- follow-up

Many shelters also act as developmental resources in such areas as:

- recruitment and training of volunteers
- providing community education
- facilitating awareness workshops for personnel from other disciplines
- participating in or conducting research

Departmental Funding

The Department of Family Services and Housing funds basic needs and emergency services according to guidelines issued by Employment and Income Assistance (see Manual Appendix A). These needs and services can include:

- food and accommodation
- personal incidentals
- medication
- emergency transportation to and from shelters
- special needs
The Department also allocates funds through the FVPP for the following services:

- administration
- crisis intervention
- children’s support
- follow-up
- crisis telephone lines

The Department also flows a grant to shelters for facility maintenance and janitorial services.

**Fee Waiver**

Fee waiver is a grant provided by the Family Violence Prevention Program to shelters to offset the costs associated with admitted clients who do not qualify for Employment and Income Assistance benefits. Allowable expenses for fee waiver are consistent with allowable expenses outlined in Employment and Income Assistance guidelines (Appendix A). Agencies recover these costs by submitting the prescribed invoice and other documentation to the FVPP on a monthly basis. The Family Violence Prevention Program reimburses fee waiver costs on a quarterly basis.

For clients needing an extension of stay, the Extension guidelines and form to be used for requests to Employment and Income Assistance apply equally to requests for extension under fee waiver. The Extension guidelines are included for information purposes as Appendix B.

**Development of Standards**

The development of standards was prompted by the belief, shared by the Department and the shelter community, that standards are
necessary to ensure the qualitative evolution of services for abused women.

The Family Violence Prevention Program began the process of developing standards in consultation and partnership with the Manitoba Association of Women’s Shelters Inc. This process is consistent with a department-wide initiative to develop standards for all service areas.

Service Purchase Agreements

The Department of Family Services and Housing requires Service Purchase Agreements (formerly known as Service and Funding Agreements) with community-based non-profit agencies receiving public monies.

The general purpose of these agreements is to clarify and formalize the relationship between external agencies and the Manitoba Government through defining the rights, responsibilities and expectations of each party.

Quality Assurance

The Family Violence Prevention Program uses the following accountability measures to ensure adherence with established expectations and standards:

- agency adherence reviews
- program consultations
- monitoring of adherence to Service Purchase Agreements
- program evaluation as required under section 2.5 of this manual
Agency Adherence Reviews

The Family Violence Prevention Program will conduct an agency adherence review every second year, unless there is a significant change in leadership or there are changes to the standards manual which require updating of agency policy and procedures. Four weeks (20 working days) written notice will be given to the shelter board of directors. Note that the FVPP will request a complete copy of the agency’s policies and procedures prior to the review to facilitate the process.

The review may include but is not limited to one or more of the following:

- examining agency policies and procedures, financial statements, and other documents required by the standards;
- engaging in discussions with service personnel to determine their knowledge of the standards and agency policies;
- touring the service provider’s premises; or
- where applicable, examining permits and other documents issued to service providers pursuant to any federal, provincial or municipal regulations or by-laws.

Effects of Non-Adherence

Where there is evidence of non-adherence to the standards, the FVPP may undertake one or more of the following steps:

- negotiate terms and conditions with service providers to re-establish adherence to standards;
- request in writing that the service provider initiate negotiated remedial measures within a specified period of time;
- initiate a service review and/or funding audit and evaluation;
standards manual for women’s shelters

introduction

women’s shelter program

number: intro.1

date: 01.08

page: 6 of 6

- negotiate revised reporting requirements as part of an existing service purchase agreement;

- suspend or terminate an existing service purchase agreement and enter into a time-limited agreement determined by the FVPP; or

- suspend or terminate an existing service purchase agreement and decline to enter into a new one.

program consultations

the family violence prevention program will conduct a consultation with the program every second year, unless there is a significant change in leadership, requiring that a consultation be conducted more frequently. Four weeks (20 working days) written notice will be given to the service provider. During this consultation, the FVPP may interview members of the board, the director, counsellors and/or other staff persons. The areas of discussion include but are not limited to the following:

- agency boards;
- community relationships;
- operational planning;
- client evaluations;
- staffing issues;
- counselling services;
- collaboration with collateral agencies; and
- statistics.
Use of the Manual

This section provides information about the development of this manual, its content and structure, and distribution and maintenance procedures. Comments on the development of the manual include a statement of its purpose and objectives.

Manual Development

This manual outlines minimum requirements for all Women’s Shelters in receipt of public funds in the form of core grants allocated by the Department of Family Services and Housing. It contains standards both the shelters and the Department believe are appropriate for governance, administration, facilities and services.

The development and updating of these standards has involved women in the shelter community who have invaluable knowledge and experience in delivering services to abused women and their children.

The standards apply to two areas. Part 1 deals with shelter governance and administration, and includes standards for physical facilities. Part 2 deals with shelter services.

Purpose and Objectives

The public continues to demand a high quality and accountability in the delivery of social services. The purpose of standards for shelters is to ensure the delivery of quality services to consumers while recognizing and respecting the autonomy of these agencies.
The development of this manual addresses the demand for quality services through the following objectives:

- Program direction to assist agencies and others in the management and operation of shelter services.
- A comprehensive set of standards in one manual to use in staff orientation and training.
- A manual readily accessible to staff in shelters, the Department and other organizations.
- A statement of minimum expectations for program planning and evaluation by shelters and the Department and for communication with the public.
- A statement of provincial requirements to be used in quality assurance activities by shelters and the Department.
- Clarification of authority, responsibility and accountability within and between shelters and the Department.

Manual Content and Structure

The manual is divided into four parts:

- Introduction
- Shelter Governance and Administration
- Shelter Services
- Manual Appendix

Manual Content

Introduction – provides background and contextual information on the women’s shelter program, information about the manual, and a glossary of terms.
Shelter Governance and Administration – contains standards for shelter governance and administration and physical facilities.

Shelter Services – contains standards for shelter services.

Manual Appendix – contains the Employment and Income Assistance Guidelines (Income Security); the Request for Extension of Stay guidelines; the Financial Reporting Requirements; the Manitoba Conflict of Interest Policy and Guidelines; the Manitoba Guidelines on Identifying and Reporting a Child in Need of Protection; a List of Legislation, Regulations, Codes and By-Laws for Physical Facilities; the Minimum Shelter Facility Security Standards, Security Framework, and Communication Form; information on Communicable Disease Control; a sample Critical Incident Report form; and the provincial procedures on criminal record checks.

Standards, Policies and Guidelines

The standards set out minimum requirements for the operation of women’s shelters and for women’s programs and services. The manual does not include detailed procedures. These are left to the discretion of individual shelter organizations throughout the province.

Applicable provincial policies and guidelines are stated or referred to in the text or in specific standards. The manual appendices include these policy statements and guidelines in their entirety.

Structure and Numbering

The manual has been modularized and each subject has its own electronic file. Pages within modules are set up for two-sided copying. The structure of the manual is designed to facilitate user access to information and the updating of the manual.
The Introduction has three distinct modules entitled Intro.1, Intro.2, and Intro.3. In content, these three introductory sections compare closely with the original version of the manual. Intro.1 is primarily an overview of the provincial program; Intro.2 describes manual content and use; and, Intro.3 contains terms used throughout the manual. There is no numbering system in the Introductory modules.

Part I deals with Shelter Governance and Administration. Each module title in Part I is identified by adding a decimal and number. Under each module title, standards are then numbered sequentially.

For example, Part I, Title 1 is 1.1 Incorporation and By-Laws. The standard for Service Provider Identifying Information under Incorporation and By-Laws is 1.1.1.

Part 2 deals with Shelter Services. Module titles in this section begin with the number 2.

For example, Part 2, Title 1 is 2.1 Protection of Rights. The standard for Human Rights under Protection of Rights is 2.1.1.

All pages in the manual have headers to indicate:

- the title of the part;
- the module title;
- the module number;
- the date of the issue; and
- the specific page number within the module.

You are encouraged to refer to the Table of Contents to find the module number containing the information you need, and to add tab insert pages for easy access to major parts of the manual.

The Manual Appendix contains the generally applicable provincial guidelines.
Distribution and Maintenance

This manual is a public document. It is distributed to all shelters and may also be distributed to other organizations funded by the Family Violence Prevention Program and involved in making referrals to shelters or providing follow-up support services to women who have been shelter clients.

The chairperson or president of the board and the director of the shelter are the designated contact persons to distribute and maintain the manuals for their organization. Additions or updates to the manual are sent to these contact persons.

Additions are sent out under a covering letter which notes the module title or specific pages to be added or replaced. Manual holders may keep a record of all changes by inserting the covering letters at the front of the manual. It is recommended that covering letters be kept in chronological order as a record of additions or changes to the manual.

New or revised pages are also dated the month they are approved, alerting users to any additions or changes.

Only the most recent pages are retained in the manual. Replaced pages are to be removed to avoid confusion.

Manual holders are encouraged to identify concerns and make suggestions for improving or revising the manual by writing or contacting:

Director
Family Violence Prevention Program
Family and Community Support Services Division
Manitoba Family Services and Housing
4126 – 300 Carlton Street
Winnipeg, Manitoba
R3B 2K6
Telephone: (204) 945-1709
Standards Manual for Women’s Shelters

Definitions

This section defines key terms used throughout the manual.

Terms

**Abused woman:**
any woman who identifies herself as having been physically, psychologically, emotionally or sexually abused by an intimate partner.

**Accompaniment and Practical Support:**
involves accompanying and providing practical support for women who are attempting or planning to access other resources.

**Agency:**
refers to a shelter receiving core funds from the Department, and, in this document, is used interchangeably with the term service provider.

**Board:**
the community volunteers duly elected as the governing body of the agency and, in this document, is used interchangeably with the term organization.

**Child Witness:**
a child who lives with a woman who has been abused by an intimate partner.

**Department:**
the Department of Family Services and Housing.
Standards Manual for Women’s Shelters

Introduction
Use of Manual

Number: Intro.2
Date: 01.08
Page: 2 of 3

**FVPP:**
the Family Violence Prevention Program.

**Intimate Partner Abuse:**
is actual or threatened physical or sexual violence, and/or psychological and emotional abuse directed toward a spouse, ex-spouse, current or former common-law, or current or former dating partner. Intimate partners may be of the opposite or same sex. Some of the common terms used to describe intimate partner abuse are domestic abuse, spouse abuse, domestic violence and battering.

**Policy:**
a general plan of action adopted by the Department or an agency in relation to operations or service goals; a formalized statement describing the guiding principle or philosophy adopted by a service provider in relation to a specific Standard.

**Principle:**
a comprehensive and fundamental law, doctrine, value or assumption; a rule or code of conduct or service.

**Procedure:**
a mode of performing a task or way of carrying out an activity; in the context of “policy and procedures”, the method and manner by which the policy will be implemented; preferred or required practices.

**Standard:**
a minimum level of performance expressed in precise measurable terms; a mandatory requirement used as a basis for review or audit; a concise statement of expectations requiring adherence to clearly defined practices or procedures, and resulting in measurable outputs or outcomes.
Trans (or transgendered or transidentified): includes transsexuals and other variations and combinations of gender identity and expression. Trans is an umbrella term that embraces people who cross socially constructed gender boundaries with a gender identity, presentation or behaviour not typically associated with their perceived, actual or biological sex. People who describe themselves as trans may not feel, look, dress or behave in a way expected of women (or men) in their culture. Please note: It may be sexual harassment to ask questions about intimate physical details (e.g., Have you had surgery?). (Definition adapted from: Trans Inclusion Policy for Women’s Organizations, Darke and Cope for the Women/Trans Dialogue Planning Committee and the Trans Alliance Society, Winter 2002).
Shelter Governance and Administration

Introduction

Part 1 of the manual articulates standards related to governance and administration. Many provisions in this section of the manual are reflective of the reporting requirements for all agencies receiving public monies through the Department of Family Services and Housing. Established in 2006, the Financial Reporting Requirements (FRR) replace the Agency Reporting Requirements and summarize the information agencies are requested to provide and the time lines for reporting.

The Financial Reporting Requirements are included as Appendix C to the manual.
Incorporation and By-Laws

This section contains standards related to shelter incorporation and by-laws. Manitoba policies require that shelter organizations receiving funding from the province have legal status as non-profit entities under The Corporations Act.

The Financial Reporting Requirements (Appendix C) of the Department of Family Services and Housing are referenced as applicable.

Standards

1.1.1 Service Provider Identifying Information

Shelters maintain service provider identifying information as outlined in the Financial Reporting Requirements (Appendix C).

On April 30th this information is submitted in writing to the Family Violence Prevention Program. The information includes identifying information (e.g., address, telephone number), corporate status, collective bargaining agreements, board and staff related information, a listing of programs, an annual operational plan as well as any changes to the constitution and by-laws. Supplementary information may also be requested by the Department.

1.1.2 Notification of Changes

The board notifies the Family Violence Prevention Program in writing within 14 working days of any changes in organizational structure, board membership or senior staff positions.
1.1.3 Shelter Incorporation

Shelters are incorporated as non-profit organizations under The Corporations Act. Each shelter provides the Family Violence Prevention Program with a copy of the original “Articles of Incorporation” and the corporation by-laws.

1.1.4 Registration Renewals

Shelters renew their registrations annually and within the prescribed time with the Corporations Program, Department of Consumer and Corporate Affairs.

1.1.5 Shelter By-Laws

Shelter by-laws comply with The Corporations Act and regulations and are consistent with provincial legislation and policies relevant to shelter operations and services.

Copies of consolidated by-laws are forwarded to the Family Violence Prevention Program upon request and amendments must be submitted as part of each year’s Service Provider Identifying Information. Any changes should indicate the date of approval by the membership.

1.1.6 Annual Reports

The board submits a copy of the Annual Report within six months of year end. If no formal report is prepared, the minutes of the annual general meeting should be submitted along with the following information: (i) comments relating to the year’s activities, (ii) a report on the achievement of program and service results, (iii) use of volunteers (see Appendix C for detailed information requirements).
Shelter Boards

This section contains standards related to the organization and function of boards of directors, and to conflict of interest.

The board of directors is independently incorporated as the legal entity with authority to govern the agency. The board is ultimately responsible for the operations and management of the shelter. The by-laws provide a framework within which the board meets its management obligations to develop internal policies in matters such as finances and budgeting, fund raising, personnel management, program development and public relations. *The board involves the shelter director and staff in the planning and development of services and programs for abused women and their children.*

The manual entitled *The Roles, Responsibilities and Functions of a Board*, developed by the Department of Family Services and Housing, is an excellent resource and reference guide.

Standards

1.2.1 Board Membership and Composition

The by-laws of the organization define the requirements for the election of board members, board size and composition, committees of the board, and the roles and responsibilities of members and officers in governing the agency. The organization will have an open call for board members, minimally once per year.

1.2.2 Board Orientation and Training

The organization has written policies and procedures to orient and train board members. Orientation and training are carried out at least annually and usually during the month following the summer recess.
1.2.3 Accountability and Delegation

The board is accountable for the overall management of the agency and develops written service and personnel policies.

The board delegates authority for specific matters related to the daily operation of the program and the implementation of policies to the director, consistent with the director’s position description.

The shelter director attends board meetings in an advisory capacity and as a non-voting member.

1.2.4 Conflict of Interest

The board and staff adhere to the Department of Family Services and Housing’s Conflict of Interest Policy and Guidelines (Appendix D).

It is the responsibility of the board to ensure that the conflict of interest policy is communicated to all board members and to employees of the agency, and to establish procedures for ensuring compliance with the policies and guidelines.

Members of the board, senior and direct service staff sign a declaration where a potential or actual conflict of interest exists annually or immediately where a conflict of interest arises or changes.
Organizational Development

This section contains information and standards related to the mission statement of the organization and the need for operational planning within the context of service goals and objectives. The rationale and recommendations for operational planning are highlighted. Goals are defined as the intended outcomes of agency services, and objectives are the specific means through which goals are to be achieved. The Financial Reporting Requirements (FRR) are referenced as applicable.

This section also includes standards related to personnel policies and labour-management agreements. *The provisions of an active labour-management agreement in a shelter organization would supersede the minimum requirements set out in these standards.*

The Operational Plan

Operational planning is an important management practice that results in a documented plan for the agency’s operations. Planning occurs through a collaborative effort, led by the board of directors and actively involving the agency director and staff.

Operational planning enables the board and staff of the agency to convert strategy and resourcing decisions into a short-term, results oriented plan for the year. It transforms the more abstract mission and vision for the agency into concrete steps that can be dealt with daily.

*In order to meet the reporting requirements of the Department, reference to the schedules of the Service Purchase Agreement is essential to the process. Each schedule or cost centre describes the required service activities and expected outcomes of those activities. From this framework, the agency can plan its service activities, define any resource needs and/or adjustments and then attach a cost.*
An operational plan usually includes:

- the identification of key internal and external issues, needs, opportunities, or problems facing the agency;

- a ranked list of program and operational objectives for the fiscal period;

- a description of desired outcomes for each objective, their measurement criteria, and performance indicators to form the basis for consistent reporting systems;

- a list of all activities and tasks necessary to achieve operational objectives and produce the desired outcomes;

- the identification of the resources assigned to the activities and tasks, and the individuals who are responsible and accountable for the successful completion of the activities and tasks;

- a costing of associated staff and other resources needed to accomplish each activity or task (a detailed budget); and

- the time frames or completion dates for developmental tasks or projects.

Standards

1.3.1 Mission Statement

The organization has a written mission statement that identifies the client group to be served and articulates the overall purpose of the agency.

The mission statement includes reference to women from violent relationships and the need to empower these women to make informed decisions.
1.3.2 Goals and Objectives

The organization has written statements of service goals and objectives. These goals and objectives are stated in measurable terms and identify the programs and services to be provided, and are consistent with the organization’s Service Purchase Agreement with the Department of Family Services and Housing.

1.3.3 Operational Planning

The board, in collaboration with agency staff, formally conducts an annual planning process for the coming fiscal year, and develops written strategies based on identified program and financial needs and priorities.

The operational plan is submitted with the service provider identifying information (Appendix C).

1.3.4 Organizational Structure

The board maintains a current organizational chart showing the structure of the organization and setting out the relationships between the board, committees of the board, the director, shelter staff and volunteers.

1.3.5 Staff Recruitment and Hiring

The organization has written policies defining the recruitment and screening procedures for all potential employees and volunteers. Screening includes a criminal record check and a child abuse registry check. In addition, the organization has a policy defining the number of years after which every employee’s criminal record and child abuse registry check should be updated.

The provincial procedures on criminal record checks are contained in Appendix J. Instructions for how to access the child abuse registry and a sample letter are included in Appendix E.
1.3.6 Human Resource Management

The organization has written personnel policies that outline expectations of personnel, including a code of conduct, working conditions, staff training, labour-management relations where applicable, benefits and entitlements, grievance procedures, and disciplinary procedures.

These policies are readily accessible to all employees and are part of the orientation of new employees at the point of hiring.

1.3.7 Labour-Management Agreements

In organizations where a formal labour contract or collective agreement is in place, a copy is provided to the Family Violence Prevention Program upon request.

1.3.8 Position Descriptions

The organization develops and keeps current written position descriptions defining the duties and responsibilities of each employee.

1.3.9 Fair Employment Practices

The organization complies with applicable federal and provincial laws and regulations governing fair employment practices and contractual relationships with staff.
Financial Management

The standards in this section reflect budgetary and audit requirements for shelters receiving core funding from the Department. The Financial Reporting Requirements for all external agencies are included as Appendix C.

Service Purchase Agreements

It is the policy of the Manitoba government to fund external agencies on the basis of a negotiated Service Purchase Agreement. A Service Purchase Agreement is a written contract requiring each party to perform certain obligations or deliver specific services. These Agreements clarify and formalize the relationship between the agency and the government.

The Budget Process

The financial viability of the agency depends on the budgeting process to establish direct correlation between service planning and delivery, and committed financial resources. The control of agency finances is maintained through collaborative efforts of the board of directors and management staff, with the board having ultimate responsibility.

The budget process is an opportunity to ensure that the services that the board has agreed are essential are provided within the funds available. The outcome of the budget process is compatible with the terms outlined in the Service Purchase Agreement signed by the agency and the Department of Family Services and Housing.

The budget process is an opportunity to accomplish the following:
Standards Manual for Women’s Shelters

Shelter Governance and Administration
Financial Management

Number: 1.4
Date: 01.08
Page: 2 of 5

- compile a list of programs and activities;
- determine the costs associated with each program and activity;
- determine the revenues that are or can be realistically expected;
- compare costs and revenues;
- set priorities based on client and administrative needs and costs, and the availability of funds; and
- balance, monitor and adjust the budget, so that a financial deficit is not incurred.

**Budget Documents**

Budget documents provide a written record of the budget process and include the following components (see Appendix C for details):

- a balanced Annual Operating Budget presenting the budget for the current year, the proposed budget, the variance between these two budget years as well as an explanation of significant variances;
- a budgeted staffing report reconciled to the budget;
- a board signature.

The board ensures that planning flows from the agency’s mission statement and that budget documents reflect the overall goals and purpose of the organization.

**Surplus/Deficit Policy Guidelines**

There will be no payment of deficits or recovery of surpluses. Financial statements should not show an agency’s deficit as an accounts receivable or a surplus as an accounts payable, unless the Department of Family Services and Housing has formally approved the deficit payment or surplus recovery.

When an agency has a surplus of granted funds, the agency may request to utilize the surplus. Approval from the FVPP Director must be sought whether the agency wishes to spend the surplus.
inside or outside of the cost centre from which it generated. The FVPP reserves the right to review, question, and/or deny the request.

When requesting approval to spend surplus funds, agencies should consider the following:

- no surplus funds are to be used for capital expenses;
- funds are to be spent in a manner that does not generate an ongoing funding need;
- the agency must explain how the expenditure of surplus funds will benefit services to the agency’s clients; and
- the request needs to detail the logistics of the expenditure.

If an agency receives approval to spend surplus funds they must provide the FVPP a brief write-up (detailing project outcomes, participant levels, and actual expenditures and revenues as applicable) when the project is completed. In addition, where of benefit to another program, all material should be shared with other FVPP funded agencies.

Standards

1.4.1 Service Purchase Agreement

The board of directors and the Department of Family Services and Housing have a current and duly signed Service Purchase Agreement.

1.4.2 Financial Controls and Procedures

The agency maintains financial statements and records in accordance with the Department of Family Services and Housing’s Financial Reporting Requirements.

The agency employs acceptable accounting practices, and maintains financial statements and records in accordance
with relevant legislation (e.g., Revenue Canada).

### 1.4.3 Staffing Reports

The agency submits a staffing report with the annual operating budget and with year-end audited financial statements.

The staffing report should be consistent with the form contained within the Financial Reporting Requirements, completed for each cost centre, and reconcile to the annual budget or audited financial statements as applicable.

### 1.4.4 Annual Operating Budget

The board submits a balanced final budget, in accordance with the Department of Family Services and Housing’s FRR, to the Family Violence Prevention Program by April 30. See above text on budget documents and Appendix C for details.

### 1.4.5 Interim Financial Reports

The board ensures that revenues and expenditures are summarized at the second and fourth quarter mark, unless otherwise specified by the Department. As per the Financial Reporting Requirements, these reports are submitted to the Family Violence Prevention Program on October 31 and May 15 respectively.

### 1.4.6 Board Approval of Budget and Quarterly Reports

The Annual Operating Budget and the Interim Financial Reports are signed (and dated) by the Board Chair indicating board approval.

### 1.4.7 Annual Audit

The annual audit is completed by a qualified professional approved
by the board and membership, and adheres to the noted general and specific requirements specified in the FRR.

The audited financial statement is forwarded to the Family Violence Prevention Program by June 30.

Copies of the management letter (which communicates matters identified by the auditor during the financial statement audit), and other related correspondence/comments/suggestions to the agency are submitted with the audited statement.

1.4.8 Other Required Financial Reports

The agency submits a Department of Family Services and Housing Surplus Report, noting the surplus/deficit for the current year and the accumulated surplus/deficit amount, along with the Audited Financial Statements (June 30).

The agency submits a Compensation Disclosure form within six months of year-end as part of the Audited Financial Statements or in a statement prepared for this purpose and certified by the auditor. Note that if none of the service provider payments meet the requirement of a Compensation Disclosure, a formal written acknowledgement in the form of a “Nil” report is submitted to the Family Violence Prevention Program.

1.4.9 Statistical Reports - Units of Service

Statistical reports are compiled on the prescribed form and enumerate units of service in each program area funded by the Family Violence Prevention Program.

The agency submits monthly statistical reports to the Family Violence Prevention Program by the 25th day of the month following the period being reported.

1.4.10 Fee Waiver Invoices

The agency completes and submits fee waiver invoices to the Crisis Shelter Liaison Coordinator on a monthly basis. Fee waiver billings for each client listed on the invoice are accompanied by receipts for allowable expenses and a signed copy of the “short needs form”.

Family Violence Prevention Program
Administrative and Client Records Management

This section contains standards concerning the management of both administrative and client service records.

Standards

1.5.1 Record Storage and Access

The organization develops, implements and updates as needed a policy and procedures intended to ensure that records, including those of persons interviewed but not admitted to the program, are protected from loss and unauthorized removal or access. This standard applies to both paper and electronic records.

1.5.2 Record Retention and Destruction

The organization has a written policy governing record retention and written procedures for record destruction - for both paper and electronic records - that safeguards against any breach of client confidentiality.

This policy complies with applicable federal and provincial laws and regulations governing the management of both administrative and client records, including FIPPA (Freedom of Information and the Protection of Privacy Act) and PHIA (Personal Health Information Act).

1.5.3 Client Record Contents

The shelter maintains one record for each client (parent and child) admitted for counselling services, children’s counselling services, or follow-up services. The record includes: the completed intake and assessment form
• the completed “short needs form”, where applicable
• the service plan
• case notes outlining the client’s expressed needs, services provided by the shelter and by other resources
• documentation of requests for other agency involvement, including written consent forms
• documentation of outcomes of service
• departure interview

Where a service record does not contain a completed departure interview form, the designated shelter worker notes the circumstances of the client at departure.

1.5.4 Client Record Maintenance

The organization has a policy that appropriate shelter staff keep the record current for each client from the point of intake to termination of services. All case notes are initialled and dated by the author, and, in accordance with standard 2.1.3, are shared with shelter personnel on a need to know basis only.

1.5.5 Confidentiality of Client Records

The organization has written policies and procedures stating that client records, including paper and electronic records, are:

• stored in a secure manner;
• strictly confidential;
• the property of the agency; and
• only disclosed to other parties with the informed and written consent of the client who is the subject of the record or in accordance with the law.

1.5.6 Client Access to Records

The organization has written policies and procedures ensuring that clients have clearly defined right of access to their record, except where precluded by law (for example, in a child abuse situation), and are informed of this right.
Physical Facilities

The organization operates and maintains the physical facility in accordance with minimum health and safety standards as set out by other departments or levels of government. Upon a request to the Family Violence Prevention Program, shelters are given information on how to obtain copies of provincial or federal statutes, regulations and codes that are mandatory throughout the province.

Standards

1.6.1 Adherence to Legislation and Regulations

The organization ensures that its premises and equipment conform to all applicable health, safety, building and fire codes, by-laws, regulations and legislation (see Appendix F).

1.6.2 Local Codes and By-Laws

The shelter acquires copies of city or municipal codes or by-laws that apply only to their locale.

1.6.3 Annual Fire Inspection

The organization requests and undergoes a fire safety inspection annually. The organization is required to:

- provide the FVPP with the date that the inspection is scheduled to take place, and
- forward the final report to the FVPP within three days of its receipt.
The organization will implement basic fire prevention principles, such as keeping walkways free of obstacles, and keeping miscellaneous items away from boilers and vents.

**1.6.4 Annual Housing Inspection**

The organization requests and undergoes a housing facility/maintenance inspection with the Manitoba Housing Authority annually.

**1.6.5 Shelter Facility Security**

The organization undergoes a shelter facility audit as per the routine cycle established by FVPP and conducted by authorized security consultants. The audit will review shelter facility security utilizing established principles of practice and standardized specifications as articulated by the FVPP.

The organization complies with the minimum shelter standards developed in consultation with FVPP and produced for review as part of the security audit process. These standards can be found in Appendix G.

The organization is responsible for the regular monitoring of shelter facility security mechanisms. Any non-urgent requirements for security maintenance, repair or replacement are communicated to the FVPP within 24 hours from when the concern is first noted. The form for reporting non-urgent security concerns can be found in Appendix G. **Urgent shelter facility security requirements are to be immediately communicated to the local MHA (Manitoba Housing Authority) office either by direct dial or utilizing the MHA automated maintenance request system at 1-800-661-4663 (1-800-661-HOME).**

NB: Any immediate threat of breach or actual breach of shelter facility security should be reported to local police authorities as per established shelter protocol. In a shelter security breach, the integrity of the shelter facility is understood as secondary to client safety.
PART 2: Shelter Services

2008

Family Violence Prevention Program
Family and Community Support Services Division
Department of Family Services and Housing
Family Violence Prevention Program

Standards Manual for Women’s Shelters

Shelter Services
Introduction to Part 2

Number: 2.0
Date: 01.08
Page: 1 of 2

Shelter Services

Introduction


Shelter organizations are encouraged to refer to their current Service Purchase Agreement for additional information on service activities and expected outcomes.

Service Principles

The Women’s Shelter program is founded on the following service principles:

• Women should not be forced to remain in a violent or abusive environment due to the lack of safe alternatives.

• Women have a right to be informed of alternatives and to make self-determined choices within the context of their own life situation.

• Women have a right to receive services which are sensitive to and respect their cultural and linguistic heritage, religious beliefs and sexual orientation.

• Services designed for child witnesses to family violence are developmentally appropriate.

• Children are entitled to receive shelter services and to exercise choices regarding program participation.
- Services are provided in a supportive, non-judgemental environment.

- Services are provided in a manner that respects client confidentiality and the right to privacy.

- Women and children are entitled to be informed of their rights and to participate in decisions affecting those rights.
Protection of Rights

This section contains standards related to the rights of consumers of shelter services.

Standards

2.1.1 Human Rights

The agency has a written policy stating that shelter services are extended to all women who are victims of abuse as defined in the introduction to the manual regardless of age, race, faith, socio-economic status, physical or mental capabilities or sexual orientation. This policy also applies to transgendered women.

2.1.2 Right to Service

The agency has a written policy stating that shelter services are accessible on a voluntary basis, and that there are no fees charged to clients for services provided by the shelter.

2.1.3 Right to Privacy

The agency has a written policy statement defining the client’s right to privacy. This policy should include but is not limited to the following measures:

* depending on the expressed preference of the client, private space or offices are available for interviewing or counselling at intake and throughout the duration of the woman’s stay;

* information concerning clients is shared among shelter personnel on a need-to-know basis only (see also standard 1.5.5 on client confidentiality and standard 2.2.1 on client safety); and

* clients are protected from invasion of their privacy except
where there is reasonable cause to believe that the safety of the client, her individual family members, or third parties is jeopardized due to such possible threats as the presence of fire hazards, substance abuse, concealed weapons, or other life threatening concerns.

2.1.4 Consent to Release Information

The agency has a written policy stating that information recorded or known about a client will not be shared with outside agencies without the written consent of the client except when required to do so by legislation, Court order, or a medical crisis. Written consent of the client should be time limited and indicate with whom the information may be shared.

2.1.5 Right to Appeal - Client Complaints

The organization has written procedures that guarantee clients the right to register a complaint regarding any aspect of services received in shelter and the right to have the complaint heard in an impartial forum.

Shelter staff provide the written Right to Appeal procedures to clients within 48 hours following intake, and ensure that the client understands the meaning of and process for appeal.

The Right to Appeal procedures clearly outline the steps to be taken and include the right of appeal to the board of directors.

2.1.6 Right to Services with Cultural Sensitivity

The organization ensures that women and their children can receive services that are sensitive to and respect their cultural and linguistic heritage, religious beliefs and sexual orientation. The organization will make efforts to reflect community diversity in its staff and board complement.
2.1.7 Information/Crisis Line Privacy Protection

The agency has a policy in place to protect the anonymity of callers to the crisis line. To this end, the shelter does not subscribe to Call Display and does not request or otherwise access computer printouts of numbers calling the toll-free telephone service.
Client Safety and Health

This section contains standards related to client safety and child protection. For easy reference, the Manitoba Guidelines on Identifying and Reporting a Child in Need of Protection are included in the manual as Appendix E. As well, a map indicating the division of the province by Designated Intake and Emergency After-Hours Agencies is included in Appendix E.

Standards

2.2.1 Confidentiality and Safety of Admitted Clients

The shelter has a written policy intended to protect client confidentiality and ensure client safety upon admission.

The policy includes the following components:

- that as a general rule, shelter staff do not confirm admission or disclose the whereabouts of a woman admitted to the shelter for service to any person
- addresses the exceptions to this general rule when required to disclose due to legislation, judicial order or medical crisis.
- clarifies that the purpose of the policy is to protect the client from the abuser, and does not limit contact to other support services.
- articulates the procedure for cooperating with police inquiries, including verification of the police officer’s identity before further discussion with the inquiring officer.
- notes that in the case of a missing person inquiry, the shelter is only obligated to say that they know the whereabouts of the woman, and to remind police that even this information is strictly confidential.
- a process of signed “release of information” when consulting with another service that the woman may be or had been involved with.
2.2.2 Special Precautions

The shelter has written policies and special precautions to be used when shelter staff or clients of the shelter have received threats or there is concern for their safety. These procedures should include the identification of responsibilities of staff, and a designated place of safety in the event of a need for evacuation.

2.2.3 Supervision and Safety of Children

The shelter has written procedures intended to ensure the supervision and safety of children when the mother or guardian of those children is not on the premises.

The written procedures are given to women with children at the point of intake and are explained during the orientation to the shelter program.

2.2.4 Preferred Child Care Practices

The shelter has written policies and procedures outlining preferred child care practices, including disciplinary methods.

2.2.5 Parental Permission for Children’s Outings

Shelter staff obtain a mother’s or guardian’s written permission when her children are attending a shelter-sponsored outing without her being present at the outing.

2.2.6 Parental Permission for Children’s Counseling

Shelter staff obtain a mother’s or guardian’s written permission before her children participate in any counseling activities.

2.2.7 C&FS and Women’s Shelter Protocol

The shelter has a written protocol, developed in co-operation with the
local Child and Family Service agency and consistent with the *Guidelines for the Development of Protocols Between Child and Family Service Agencies and Women's Shelters*, describing the expectations and obligations of each party to the protocol in matters of child protection. If the agency relates to more than one child and family service agency, additional protocols may need to be developed.

### 2.2.8 Children in Need of Protection

The shelter has a written policy and procedures, consistent with the protocols, requiring staff to report suspected cases of children in need of protection to a child and family service agency, notwithstanding that the information on which the belief is founded is confidential.

*Except in rare circumstances, which are left to the discretion of management, it is the practice of the shelter to discuss with the mother the exact nature of the concerns prior to contacting a Child and Family Service agency (CFS). Where deemed appropriate and provided there is no breach of the law, the mother is given the opportunity to report the information to CFS on her own volition. Shelter staff record the date and time of the identification or disclosure of suspected abuse or neglect, and the date and time of the report to CFS on the client’s service file. The shelter staff responsible for the report affixes her signature to the recording on the client’s service file.*

### 2.2.9 Medication Storage and Access

The shelter has a written policy and procedures intended to ensure the safe storage of and client access to prescribed and over-the-counter medication.

### 2.2.10 Communicable Disease Policy

The shelter has a written policy outlining hygienic procedures to be followed to prevent the spread of communicable diseases and parasites in the facility. Communicable diseases are transmitted from
one person to another and include those contracted through the exposure to blood and/or body fluids of an infected person (e.g., HIV, Hepatitis B), and those contracted through exposure to airborne droplets (e.g., Tuberculosis, Meningococcal disease).

The use of universal precautions in all such cases is required, though specific measures will vary depending on the disease. Universal precautions (also known as routine practices) have been developed by the World Health Organization and interpreted and applied by Manitoba Health (see Appendix H).

2.2.11 Fire Safety Plan and Procedures

A fire safety plan and evacuation procedures are developed by the agency and posted throughout the facility in highly visible locations.

The shelter’s fire safety plan and evacuation procedures are provided to each client during her intake and orientation.

2.2.12 Critical Incidents

If there is a critical incident, the service provider will inform the Family Violence Prevention Program and the Chair or designated board member within 24 hours. If a life-threatening incident should occur, the Chair and the FVPP should be contacted within three hours.

Within seven working days of the incident, a written Critical Incident Report (Appendix I), signed by a designated service provider, must be submitted to the FVPP.

2.2.13 Outings and Failure to Return

The shelter has a written policy and procedures regarding clients leaving the shelter for outings, appointments, etc. without agency accompaniment.
The policy/procedures include the following components:

- Personalized protection planning is done with each client at some point after intake and prior to their first outing;
- The procedures regarding outings and failure to return from outings are discussed with each client at some point after intake and prior to their first outing;
- Staff ensure information is recorded regarding the client’s destination(s), telephone number if available, and expected time of return, which is signed by the client;
- Prior to their first outing without agency accompaniment, each client is reminded of the action the agency will take if the client fails to return by the designated time;
- Failures to return are noted in client files; and
- Procedures address what to do if a client fails to return by the designated time.

### 2.2.14 Interruption of Residential Services

The organization has a written policy and procedures in place for any occasion warranting the temporary interruption or cessation of emergency shelter services.

In the range of programs designed to intervene in and prevent the incidence of intimate partner abuse, residential crisis shelters are designed to offer security and support 24 hours a day, seven days a week, and are therefore considered critical services. As such, with the exception of unanticipated emergencies (i.e. flooding, fire threat, and security threat), residential services will not be interrupted for any reason without the following in place:

- Approved plan of action, developed in consultation with FVPP
- The plan will include treatment of client safety, alternate service delivery arrangements, communication protocol with all related collateral or community supports (i.e. police) and a process for information dissemination
- The roles and responsibilities of all involved parties will be identified, articulated and agreed-upon prior to any action impacting service delivery
Standards Manual for Women’s Shelters

Shelter Services
Admission Criteria and Process

Number: 2.3
Date: 02.09
Page: 1 of 3

Admission Criteria and Process

Standards

2.3.1 Admission Criteria

Shelter services are designed specifically for women who have been abused by intimate partners and their children. Following this, only women (and their children) seeking support for dealing with intimate partner abuse should be admitted. In exceptional circumstances, such as where no other emergency shelter services exist, a woman (and her children) deemed to be at risk due to other forms of family violence, may be admitted on a temporary basis until a more suitable resource can be secured.

The shelter has a policy for the admission of clients for service based on needs and the availability of space.

Exceptions may include:

- women assessed by shelter staff as being at imminent risk and needing alternative intervention services due to indicators such as serious mental disturbance or chronic chemical dependency; or

- women under the influence of alcohol or drugs who, in the opinion of shelter staff, present a risk to other women and children in residence.

The shelter also has a policy that specifies what to do when the shelter is full. Generally, the first plan of action should be to refer and transfer the woman to another shelter to ensure that she is accommodated in a safe and secure location; the second option would be to place the woman in a hotel or motel.

In the case of a woman having an older male child, care should
be used during admission. An older male child could be seen as threatening by other women in the shelter. A family in immediate danger should not be referred elsewhere unless the family room is unavailable.

2.3.2 Non-Admitted Clients

If a woman does not fit the criteria for admission or fits the exceptions to admissions outlined above, under no circumstances is she to be turned away.

Rather, the agency should err on the side of caution and ensure that clients not accepted for admission are brought in for assessment and then referred to other resources. When necessary, clients should also be provided with assistance to access those resources.

2.3.3 Intake and Assessment

Intake at shelters is available on a 24 hour basis, seven days a week.

The shelter has a written policy and procedure describing the intake and assessment process. The process requires the use of a structured intake form and the completion of the “short needs form”. An intake should occur within 24 hours of a client being admitted.

The information collected on the “short needs form” does not, under any circumstances, affect eligibility for shelter services.

Shelter staff follow and complete the intake and assessment process for every abused woman and her child/ren seeking services from the shelter in the residential, non-residential, or follow-up programs.

2.3.4 Intake and Assessment for Children

The agency has a policy and procedures which state that:
• Where admitted children are receiving basic residential services only, shelter staff collect needed information from the accompanying adult. The information remains on the adult’s file.

• Shelter staff complete the intake and assessment process, as is age and developmentally appropriate, for every child admitted to the children’s counselling program.

2.3.5 Management of Client Assets

The shelter has a written policy defining its role and responsibility in the management and safekeeping of client assets and valuables. The policy is communicated to the client at admission.

Where the shelter assumes responsibility for monies or other valuables on behalf of clients, written procedures are in place to ensure safe storage and the recording of transactions.
Shelter Services and Resources

This section begins with a list of key service components of the shelter program, funded by the Department of Family Services and Housing. Standards are related to requirements in specific service areas.

**Core Support Services**

* information/crisis telephone lines  
* intake and assessment  
* crisis counselling  
* individual and group counselling  
* children’s support and counselling  
* information, referral and advocacy  
* protection planning  
* departure planning

**Follow-Up Services**

* intake and assessment  
* individual and group counselling  
* on-going protection planning as needed  
* information, referral and advocacy

**Standards**

**2.4.1 Residential Care**

The shelter has written policies with regard to meeting clients’ basic needs through the provision of safe accommodation, meals, emergency clothing, personal hygiene supplies, laundry facilities, and, safe transportation to and from shelter for medical and legal appointments.
2.4.2 Client-Centred Planning

The agency has a policy that, in the individual counselling component of the residential, non-residential and follow-up programs, shelter staff and the woman develop a client-centred plan.

This plan should clearly identify the woman’s expectations of counselling services, her goals, ways to meet those goals during her participation in the services, and ways to measure achievement of goals.

2.4.3 Crisis Intervention Counselling

The agency has a policy that designated shelter staff provide crisis intervention counselling.

2.4.4 Individual Counselling Services

The agency has a policy that designated shelter staff provide individual counselling for both residential clients and community women requesting this service.

The policy should also state that women in the residential program are provided with an opportunity to receive a minimum of one hour of individual counselling in a 24-hour period.

2.4.5 Support Groups

The agency has a policy that shelter staff facilitate on-going self-help support groups for both residential clients and community women requesting this service.

2.4.6 Children’s Counselling

The shelter has a designated children’s counsellor. The children’s counsellor provides individual counselling and group programs.
intended to assist children to cope with the effects of witnessing violence in the home.

2.4.7 Follow-Up Services

The agency has a policy that the shelter provides follow-up services.

The staff person delivering follow-up services provides individual counselling and facilitates support groups for former clients of the shelter.

2.4.8 Withdrawal of Services

The agency has a written policy that clearly states the circumstances under which staff would not support a client’s extension of stay in shelter, and the circumstances under which a client may be asked to leave the shelter.

The policy and how it will be implemented is explained to each woman on an as-needed basis. Consistent with standard 2.1.5, each woman should be advised of her right to appeal.

2.4.9 Information/Crisis Telephone Lines

The shelter ensures that toll-free telephone lines are available and accessible to women on a 24 hour basis.
Service Monitoring and Evaluation

This section includes standards for client evaluation of service and overall service monitoring and evaluation.

Standards

2.5.1 Client Evaluation of Service

The organization has a written policy and procedure to obtain a written evaluation from each client at departure, and to review these evaluations on a regular basis.

2.5.2 Monitoring of Client Files

The agency has a written policy and procedures in place to internally audit client records at least annually to determine whether services provided are compatible with the goals and objectives of the program and the needs of clients.

2.5.3 Service Monitoring and Evaluation Measures

The organization has a written policy and procedures in place to conduct an independent external evaluation, at least every five years, of the quality and effectiveness of services provided.

The FVPP recommends that the evaluations measure the following six key components:

- client satisfaction / if services are meeting client needs / impact of program on clients
- staff experience
- director experience
- board experience
- collateral agency/referrals experience
- files reviews/ desk audit.

A copy of the evaluation report is submitted to the FVPP. The agency has a policy to form a committee, with representation from the FVPP, to oversee the implementation of the recommendations noted in the report.