

**WOMEN'S SERVICES - KOOTENAY HAVEN TRANSITION HOUSE - OUTCOMES REPORT APRIL 1<sup>ST</sup> 2018– MARCH 31<sup>ST</sup> 2019**

**PROGRAM DESCRIPTION** Kootenay Haven Transition House provides supportive transitional housing in a safe environment. Program objectives are individualized, practical and short-term (generally, not exceeding 30 days), to adult women and their children who have experienced or are at-risk of abuse, threats, or violence. A fundamental premise to service delivery is to respect women's rights to make choices based on their own understanding of their options. The home has 10 beds and service is provided on a highest-need, first-served basis.

**PURPOSE** – This report is intended for Board, management, program staff, stakeholders, and persons served. Feedback and suggestions to assist with continuous quality improvement planning are both solicited and encouraged. The data referenced in this report was collected, recorded, and collated via the use of the Share Vision electronic database system and tabulation.

| Key Demographic Indicators                | 2014<br>2015 | 2015<br>2016 | 2016<br>2017 | 2017<br>2018 | 2018<br>2019 | 2014-19<br>5 Yr.<br>Comparative | Findings   |
|---|--------------|--------------|--------------|--------------|--------------|---------------------------------|--|
| # of Women accessing residential services | 97           | 94           | 84           | 71           | 55           | <b>80</b>                       | The total number of women and their children served in Kootenay Haven 1 <sup>st</sup> Stage Services was lower than average. Kootenay Haven had a month where there were no women accessing services due to a change in programming. This could have changed the average number for the last 5 years.  |
| # of Female children in residence         | 10           | 15           | 22           | 14           | 15           | <b>15</b>                       |  |
| # of Male children in residence           | 11           | 14           | 15           | 9            | 3            | <b>10</b>                       |  |
| <b>Total</b>                              | <b>118</b>   | <b>123</b>   | <b>121</b>   | <b>94</b>    | <b>73</b>    | <b>106</b>                      |  |
| Average length of stay                    | 18<br>days   | 18<br>days   | 17<br>days   | 16<br>days   | 21<br>days   | <b>18<br/>days</b>              | Twelve of this year's overall total bed stays were 40 days plus in duration, which exceeds the standard 30 day bed stay. It is the opinion of staff that these extended stays were primarily due to the lack of available affordable housing. Despite these extended stays, the overall average length of stay remains comparable with the previous 5 years. |
| File Status at Year End                   | 2014<br>2015 | 2015<br>2016 | 2016<br>2017 | 2017<br>2018 | 2018<br>2019 | 2014-19<br>5 Yr.<br>Comparative | Findings   |
| Open                                      | 10           | 2            | 5            | 2            | 2            | <b>4</b>                        | As stated above, extensive renovations impacted overall occupancy. The height of renovation disruption was at year end and may explain why we had 2 residents at that point.   |
| Closed                                    | 97           | 92           | 79           | 69           | 53           | <b>78</b>                       |  |

| Risks & Barriers   | 2014<br>2015       | 2015<br>2016       | 2016<br>2017       | 2017<br>2018       | 2018<br>2019       | 2013-18<br>5 Yr.<br>Comparative | Findings  |
|--|--------------------|--------------------|--------------------|--------------------|--------------------|---------------------------------|---|
| # and % of women demonstrating behaviors indicative of mental health and / or anti-social behaviours | 57 of<br>97<br>58% | 55 of<br>94<br>58% | 42 of<br>84<br>50% | 39 of<br>71<br>55% | 27 of<br>55<br>49% | 54%                             | The percentage of clients experiencing mental health issues continues to exceed over half of those served.  |
| # and % of women with personal health and safety concerns due to risk of violence                    | 66<br>68%          | 87<br>92%          | 81<br>96%          | 68<br>96%          | 35<br>64%          | 83%                             | 96% of women served this year, indicated they were experiencing health and safety concerns due to their potential risk of violence.   |
| # and % experiencing long-term mental health problems (list diagnosis at intake)                     | 44<br>45%          | 40<br>42%          | 43<br>51%          | 35<br>49%          | 31<br>56%          | 49%                             | Almost half the women served have been diagnosed with some manner of mental health label.   |
| # and % significantly involved in drug or alcohol usage  | 57<br>58%          | 42<br>44%          | 40<br>48%          | 41<br>58%          | 28<br>51%          | 52%                             | This statistic is recorded based on self-disclosure of the woman at time of intake. This year's findings are congruent with the 5 year average.   |
| % involved in criminal activity  | 19<br>9%           | 17<br>18%          | 17<br>20%          | 9<br>13%           | 4<br>7%            | 13%                             | Percentage of women served with criminal records is lower this year, however, this does seem to be an emerging trend. These findings are based on self-reported data during the intake process. |

**REFERRAL ELSEWHERE** - Whenever risks and barriers such as those indicated above become prevailing factors program staff work collaboratively with clients to ensure appropriate community referral sources are identified and to provide assistance with the referral elsewhere process. In total, 111 community referrals were made on behalf of clients to other programs and agencies.

**GOAL SETTING & RESULTS** As a standard component of the intake process staff work with the women served to engage them in setting client goals. Service outcomes measuring feelings of safety, understanding levels of the domestic violence cycle, and knowledge of where to access help in the community are assessed at intake and at discharge. Of the 71 women served, 66 responded fully to both the pre and post surveys, which measure service outcome achievement ratios. Post surveys may occur at time of discharge, or at the time when a client has completed the educational component of the program. The educational component referenced here is specific to the cycle of violence and to the development of sustainment of healthy relationships etc. Completion of post surveys prior to discharge is intentional and serves to assist staff in capturing information required for both pre and post survey comparisons. Established service delivery effectiveness measures and outcomes achieved are recorded in the table below.

**EFFECTIVENESS MEASURES:**

| Objective: Effectiveness Measures                                  | Indicator   | Who Applied to   | Target Goal Expectancy           | Actual Result  | Met or Exceeded |
|--|---|--|----------------------------------|--|-----------------|
| <b>1. Safer place to live</b>                                      | % of people served when leaving the program, indicate they were going to a safer place. | All women accessing service who identified with crisis or safety risk at intake who completed pre admission and post surveys were completed. <b>(N= 55)</b>  | 75% of women accessing services. | <b>96% (53 of 55)</b> of women completing services indicated at end of services they were transitioning into a safer place.        | ✓<br>Exceeded   |
| <b>2. To increase understanding of cycle of violence:</b>          | Increased understanding of the cycle of violence  | All women accessing service <u>who identified limited or minimal understanding of the cycle of violence</u> and for whom post surveys were completed by client or by client with staff assistance. <b>(N=55)</b> | 75% of women accessing services  | <b>100% (55 of 55)</b> of women completing program services indicated they had an increased understanding of the cycle of violence | ✓<br>Exceeded   |
| <b>3. To increase knowledge of help available in the community</b> | Increased knowledge of help available in the community                                  | All women accessing service that identified limited or had minimal knowledge of help available in the community and for whom post surveys were completed by client or staff. <b>(N= 55 )</b>                     | 75% of women accessing services  | <b>100% (55 of 55)</b> of women completing services identified they had an increased connectedness to community supports.          | ✓<br>Exceeded   |

**PAST PARTICIPANT FEEDBACK** - The program did not distribute past participant feedback forms after June 2018. Starting April 2019, the participant forms will be distributed to past participants of the program upon discharge in hopes of collecting information (for example: Did the services provided assist in maintaining the desired outcome?).

**PROGRAM EFFICIENCIES:** The efficiency measured by Transition House staff is service utilization rates. Monthly occupancy rates are recorded through the tabulation of the number of beds occupied each night at the Transition House (10 bed resource). The documentation of occupancy rates was monitored to determine service utilization rates over time. The target goal established was to maintain a minimum average service utilization rate (of 60% occupancy) over the term of the fiscal year. Efficiency results have been tabulated below.

| Objective: Efficiency Measures        | Indicator                  | Who Applied to          | Target Goal Expectancy | Actual Result       | Met or Exceeded |
|---------------------------------------|----------------------------|-------------------------|------------------------|---------------------|-----------------|
| To maintain service utilization rates | Occupancy Rate (bed stays) | Nightly Bed Utilization | 60% occupancy rate     | 52%<br>1904 of 3650 | Not Met         |

**PROGRAM SATISFACTION**

| Objective: Consumer Input                         | Indicator   | Who Applied to                               | Target Expectancy | Actual Result     | Met or Exceeded |
|---|---|--|-------------------|-------------------|-----------------|
| 1.a To maintain person served satisfaction levels | Percent of persons Served who report overall program satisfaction and rated the services to be average or good. | All Persons served who completed exit survey | 85%               | 100%<br>45* of 45 | ✓<br>Met        |
| 1.b To maintain client centered services.         | Percent of person served who reported that services were client centered.                                       | All Persons served who completed exit survey | 100%              | 100%<br>45* of 45 | ✓<br>Met        |

| Objective: Stakeholder Input                   | Indicator   | Who Applied to  | Target Expectancy | Actual Result |               |
|--|---|---|-------------------|---------------|---------------|
| 2. To maintain stakeholder satisfaction levels | Percent of other stakeholders who report overall satisfaction with services | All other stakeholders (Surveys 20 distributed: 20 responses) | 85%               | 100%          | ✓<br>Exceeded |

**PROGRAM ACCESSIBILITY** During the year program staff received 64 requests to accommodate special needs of women in program (2 mobility; 3 dietary; 11 learning disabilities, etc.). Each of these requests were considered and upon review deemed reasonable to accommodate. Additionally, it is understood by staff that women seeking services frequently experience additional issues and, as such, we endeavor to extend services whenever possible to this client group as well. We target at minimum, half the women served, to be those who experience concurrent issues/disorders.

#### PROGRAM ACCESSIBILITY

| Objective: Access Measures   | Indicator   | Who Applied to  | Target Expectancy | Actual Result   | Met or Exceeded |
|--|---|---|-------------------|-----------------|-----------------|
| 1. Respond to requests for accommodations  | People with special needs (dietary, disabilities etc.) are accommodated wherever possible.                                | All persons accessing services who report the need for accommodations | 100%              | 100%            | ✓<br>Met        |
| 2. To maintain access by continuing, whenever possible, to include or extend service access to women at-risk of violence but also who experience concurrent issues | Percent of persons served who report concurrent issues including: homelessness, mental health, or substance misuse issues | All persons accessing services who report concurrent issues           | 50%               | 81%<br>45 of 55 | ✓<br>Exceeded   |

#### ADMINISTRATIVE OBJECTIVES

| Objective: Key Administrative Tasks  | Indicator                          | Who Applied to                     | Target Expectancy  | Actual Result  | Met or Exceeded |
|--------------------------------------|------------------------------------|------------------------------------|--------------------|--|-----------------|
| 2. Acquire new educational resources | New educational resources acquired | New educational resources acquired | Five new resources | - Start Where You Are Journals<br>- When Love Hurts (Domestic Abuse)<br>- Braving the Wilderness<br>- Gifts of Imperfection<br>- The Battered Woman Syndrome | ✓<br>Met        |

Date: April 30, 2019  
Data Source: Share Vision database system