

FAMILY VIOLENCE SHELTER AND TRANSITIONAL HOUSING ANNUAL REPORT

DCI number/Fiscal year:
455955 (2024-2025)

Purpose:
This is a report provided by recipients of Shelter and Transitional (second-stage) Housing funding to confirm that funding and spending correspond, and to describe the results of funding these facilities.

Note:

- Section 1 is to be completed by Shelter funding recipients.
- Section 2 is to be completed by Transitional (second-stage) Housing funding recipients. If you are a Shelter or Transitional Housing funding recipient that has received prevention project funding, complete the [Family Violence Prevention Project Annual Report \(DCI 1063749\)](#) to report your prevention project activities.

Reporting period:
for the previous fiscal year ending March 31

Due date:
May 31st

Field definitions:

Field	Definition
1. Shelter - To be completed by Shelter funding recipients.	
1(a) Identification	The purpose of this subsection is to collect necessary identification information related to the shelter.
Recipient name	The name of the Indigenous community, First Nation institution, association or organization (including tribal councils), or other organization that has received funding under this authority.
Recipient number	The recipient number assigned by Indigenous Services Canada (ISC) for the Indigenous community, First Nation institution, association or organization (including tribal councils), or other organization that has received funding under this authority.
Shelter contact	
Given name Family name Title Telephone number Facsimile number Email address	The given name, family name, position title, telephone number, facsimile number and email address (if applicable) of the person who can be contacted for further information about the shelter. A valid telephone or facsimile number includes the 3 digit area code in the format ###-###-####.
Shelter information	
Shelter name	The full name of your shelter.
1(b) Indigenous Services Canada funded shelter expenditures	The purpose of this subsection is to determine the costs required to run a shelter. Fill all applicable fields.

Field	Definition
Item/Amount	<p>Complete all applicable fields:</p> <ul style="list-style-type: none"> - Staff salaries and benefits - Professional fees: <ul style="list-style-type: none"> • Translation • Legal services fees and costs • Financial services - Honoraria - Staff and development training: <ul style="list-style-type: none"> • Membership and conferences fees • Tutoring functions (e.g., online training, other professional development opportunities) - Board/Committee operations - Small appliance, furniture, and equipment - Resident expenses <ul style="list-style-type: none"> • Food • Bedding, towels, soaps • Personal incidentals (e.g., clothes, diapers, sanitary pads) • Transportation to and from shelter - Supplies (e.g., cleaning, linen, personal protective equipment) - Property taxes - Insurance - fire, liability, etc. - Maintenance (e.g., minor repairs, painting, landscaping, other) - Replacement reserve - Utilities (i.e., heating, light and power, garbage, snow removal, water and sewer) - Computer, IT services, internet access, softwares - Security (e.g., fences, cameras, file cabinets) - Transportation costs (insurance, maintenance, fuel, driver) - Other operating costs <ul style="list-style-type: none"> • Client needs assessments • Library and resources • Off hour emergency services • Data collection - Costs for programming and services - Post shelter arrangements and referrals - Costs for training forums, workshops, outreach, awareness (including instructional and information materials) - Recruitment costs - Administration

Field	Definition
	<ul style="list-style-type: none"> - Audit Total shelter expenditures (calculated automatically)
Comments (optional)	Include any comments related to shelter expenditures.
1(c) Shelter services	The purpose of this subsection is to determine the top five shelter services being offered in your shelter.
Main shelter services offered	Prioritize from 1 to 5 (1 being the most important): <ul style="list-style-type: none"> - Advocacy/Referral to services or programs - Children's programs - Community education and awareness raising - Counselling - Crisis intervention - Crisis line (24/7 telephone line) - Culturally-based programming - Housing information/Procedures - Individual case planning (social, legal, medical, etc.) - Programming related to wellbeing and healthy relationships - Referrals to transitional (second-stage) housing - Transportation - Women's programs - Other (specify)
1(d) Results and challenges	The purpose of this subsection is to explain the main results of your shelter activities, based on the work plan you submitted at the beginning of the year.
Describe shelter activities and results; this includes successful prevention initiatives, accomplishments, challenges in terms of need and outcomes.	Describe shelter activities and results; this includes successful prevention initiatives, accomplishments, challenges in terms of need and outcomes.
1(e) Shelter capacity	The purpose of this subsection is to determine the number of staff within the shelter.
Numeric value	Indicate the appropriate numeric value for each line: <ul style="list-style-type: none"> - Full time staff - Part time staff - Volunteers - Beds for clients available - Maximum shelter capacity (including accompanying children) - Transportation vehicles
1(f) Shelter use	The purpose of this subsection is to determine the number of clients, communities, bed nights, crisis calls, clients requiring transportation to shelter, and referrals from various sources.

Field	Definition
<p>Numeric value</p> <ul style="list-style-type: none"> - Total number of clients served - Indigenous communities served - Bed nights - Crisis calls received - Clients requiring transportation to shelter - Cases referred to the shelter 	<p>Indicate the appropriate numeric value for each line:</p> <ul style="list-style-type: none"> - Number of clients served - Indigenous communities served - Bed nights - Crisis calls received - Clients requiring transportation to shelter - Cases referred to the shelter <p>Number of communities served is determined based on where your clients are from. Bed nights is the sum of all nights spent for all clients in the past year. For example, one person using a bed for five nights counts as five bed nights.</p>
<p>Types of services available to male survivors of family violence</p>	<p>Provide a brief narrative on the types of services available to male survivors of family violence.</p>
<p>Types of services available to 2SLGBTQQIA+ survivors of family violence</p>	<p>Provide a brief narrative on the types of services available to survivors of family violence who identify as 2SLGBTQQIA+.</p>
<p>Types of services available to survivors of human trafficking</p>	<p>Provide a brief narrative on the types of services available to survivors of human trafficking.</p>
<p>1(g) Shelter clientele</p>	<p>The purpose of this subsection is to identify a number of details related to shelter clientele.</p>
<p>Numeric value</p> <ul style="list-style-type: none"> - First Nation clients served - Métis clients served - Inuit clients served - Innu clients served - Non-status Indigenous clients served - Non-Indigenous clients served - Indigenous women served (First Nation, Inuit or Métis) ordinarily resident ON reserve. - Indigenous women served (First Nation, Inuit or Métis) living OFF reserve - Non-Indigenous women served living ON or OFF reserve - Indigenous clients served (First Nation, Inuit or Métis) who identify as 2SLGBTQQIA+ living ON reserve - Indigenous clients served (First Nation, Inuit or Métis) who identify as 2SLGBTQQIA+ living OFF reserve - Non-Indigenous clients served who identify as 2SLGBTQQIA+ living ON or OFF reserve - Indigenous men served (First Nation, Inuit or Métis) living OFF reserve - Non-Indigenous men served living ON or OFF reserve 	<p>Indicate the appropriate numeric value for each line:</p> <ul style="list-style-type: none"> - Number of First Nation clients served - Number of Métis clients served - Number of Inuit clients served - Number of Innu clients served - Number of non-status Indigenous clients served - Number of non-Indigenous clients served - Number of Indigenous women served (First Nation, Métis or Inuit) ordinarily resident ON reserve - Number of Indigenous women served (First Nation, Inuit or Métis) living OFF reserve - Non-Indigenous women served living ON or OFF reserve - Number of Indigenous clients served (First Nation, Inuit or Métis) who identify as 2SLGBTQQIA+ living ON reserve - Number of Indigenous clients served (First Nation, Inuit or Métis) who identify as 2SLGBTQQIA+ living OFF reserve - Number of non-Indigenous clients served who identify as 2SLGBTQQIA+ living ON or OFF reserve

Field	Definition
<ul style="list-style-type: none"> - Accompanying minors (aged <18) served - Unaccompanied minors (aged <18) 	<ul style="list-style-type: none"> - Number of Indigenous men served (First Nation, Métis or Inuit) ordinarily resident ON reserve - Number of Indigenous men served (First Nation, Inuit or Métis) living OFF reserve - Number of non-Indigenous men served living ON or OFF reserve - Number of accompanying minors (aged <18) served - Number of unaccompanied minors (aged <18) served
1(h) Clients served, by age	The purpose of this subsection is to identify the age range of clients that have accessed services in your shelter.
Numeric value <ul style="list-style-type: none"> - Children (0-14 years old) - Youth (15 to 24 years old) - 25 to 34 years old - 35 to 50 years old - 51 years old and over - Unknown age 	Indicate the appropriate numeric value for each line: <ul style="list-style-type: none"> - Children (0-14 years old) - Youth (15-24 years old) - 25 to 34 years old - 35 to 50 years old - 51 years old and over - Unknown age
1(i) Clients turned away	The purpose of this subsection is to provide information as to the reason if clients are being turned away from your shelter.
Numeric value <ul style="list-style-type: none"> - Clients turned away due to lack of capacity/resources - Clients turned away due to being ineligible for services - Clients who received alternative accommodations (hotel room, motel room, etc.) - Clients turned away due to other reasons - Specify "other reasons": - Total clients turned away 	Indicate the appropriate numeric value for each line: <ul style="list-style-type: none"> - Number of clients turned away due to lack of capacity/resources - Number of clients turned away due to being ineligible for services - Number of clients who receive alternative accommodations (hotel room, motel room, etc.) - Number of clients turned away due to other reasons - Total clients turned away <p>Provide a brief description of "other reasons" for turning clients away if applicable.</p>
1(j) Shelter stays, by length and frequency	The purpose of this subsection is to provide information regarding the average length of stays and frequency of stays of your shelter clientele.
Average shelter stay length (days)	Indicate the average shelter stay length in days.
Shelter stay frequency (recurrence rates) – 1 previous stay in the last 12 months	Indicate the appropriate numeric value for each line: <ul style="list-style-type: none"> - Shelter stays with a frequency (recurrence rate) of: no previous stays in the last 12 months
Shelter stay frequency (recurrence rates) – 2+ previous stays in the last 12 months	

Field	Definition
Shelter stay frequency (recurrence rates) - unknown	<ul style="list-style-type: none"> - Shelter stays with a frequency (recurrence rate) of: 1 previous stay in the last 12 months - Shelter stays with a frequency (recurrence rate) of: 2+ previous stays in the last 12 months - Shelter stays with a frequency (recurrence rate) of: unknown
1(k) Additional information (optional)	The purpose of this subsection is to collect additional information not otherwise included in the report.
Additional information	Provide information about additional initiatives and activities run by the shelter that you wish to share with program management and representatives.
1(l) Shelter prevention project	The purpose of this subsection is to direct you to the Family Violence Prevention Project Annual Report if your shelter received additional funding for prevention projects.
Complete the Family Violence Prevention Project Annual Report (DCI 1063749) if the shelter received additional funding for prevention projects.	If your shelter has applied for prevention project funding (i.e., in addition to your shelter budgets), complete Family Violence Prevention Project Annual Report (DCI 1063749), accessible via the Reporting Guide.
Declaration	
Given name Family name Title Date (YYYYMMDD)	The given name, family name and position title of the person who acknowledged the accuracy of the information, and the date on which it was completed. Dates are in the format of 'Year-Month-Day'.
2. Transition (second-stage) Housing - To be completed by Transition Housing funding recipients.	
2(a) Identification	The purpose of this subsection is to collect necessary identification information related to the transition home.
Recipient name	The name of the Indigenous community, institution, association or organization (including tribal councils), or other organization that has received funding under this authority.
Recipient name	The recipient number assigned by Indigenous Services Canada for the Indigenous community, institution, association or organization (including tribal councils), or other organization that has received funding under this authority.
Transition home contact	
Given name Family name Title Telephone number Facsimile number	The given name, family name, position title, telephone number, facsimile number and email address (if applicable) of the person who can be contacted for further information about the transition home. A valid telephone or facsimile number includes the 3 digit area code in the format ###-###-####.

Field	Definition
Email address	
Transition home information	
Transition home name	The full name of your transition home.
2(b) Indigenous Services Canada funded transition housing expenditures	The purpose of this subsection is to determine the costs required to run a transition home. Fill all applicable fields.
<p>Item/Amount (\$)</p> <ul style="list-style-type: none"> - Staff salaries and benefits - Professional fees – Translation - Professional fees – Legal services fees and costs - Professional fees – Financial services - Honoraria - Staff and development training – Membership and conference fees - Staff and development training – Tutoring functions (e.g. online training, other professional development opportunities) - Staff and development training – Board/Committee operations - Equipment - Resident expenses – Food - Resident expenses – Bedding, towels, soaps - Resident expenses – Personal incidentals (e.g. clothes, diapers, sanitary pads) - Resident expenses – Transportation to and from shelter - Supplies (e.g. cleaning, linen, personal protective equipment) - Property taxes - Insurance – fire, liability, etc. - Maintenance (e.g. minor repairs, painting, landscaping, other) - Replacement reserve - Utilities (i.e. heating, light and power, garbage, snow removal, water and sewer) - Computer, IT, services, internet access, softwares - Security (e.g. fences, camera, file cabinets) - Transportation costs (insurance, maintenance, fuel, driver) - Other operating costs – Client needs assessments - Other operating costs – Library and resources 	<p>Complete all applicable fields:</p> <ul style="list-style-type: none"> - Staff salaries and benefits - Professional fees <ul style="list-style-type: none"> • Translation • Legal services fees and costs • Financial services - Honoraria - Staff and development training <ul style="list-style-type: none"> • Membership and conference fees • Tutoring functions (e.g., online training, other professional development opportunities) • Board/Committee operations - Small appliance, furniture, and equipment - Resident expenses <ul style="list-style-type: none"> • Food • Bedding, towels, soaps • Personal incidentals (e.g., clothes, diapers, sanitary pads) • Transportation to and from shelter - Supplies (e.g., cleaning, linen, personal protective equipment) - Property taxes - Insurance – fire, liability, etc. - Maintenance (e.g., minor repairs, painting, landscaping, other) - Replacement reserve - Utilities (i.e., heating, light and power, garbage, snow removal, water and sewer) - Computer, IT services, internet access, softwares - Security (e.g., fences, cameras, file cabinets) - Transportation costs (insurance, maintenance, fuel, driver) - Other operating costs: <ul style="list-style-type: none"> • Client needs assessments • Library and resources • Off hour emergency services • Data collection

Field	Definition
<ul style="list-style-type: none"> - Other operating costs – Data collection - Costs of programming and services - Post transition housing arrangements and referrals - Costs for training forums, workshops, outreach, awareness (including instructional and information materials) - Recruitment costs - Administration - Audit - Other expenditure items - Total transition house expenditures 	<ul style="list-style-type: none"> - Costs for programming and services - Post transition housing arrangements and referrals - Costs for training forums, workshops, outreach, awareness (including instructional and information materials) - Recruitment costs - Administration - Audit <p>Total transition house expenditures (calculated automatically)</p>
Provide the amounts for any top up funding received from the program during this fiscal year, if applicable.	Provide the amounts for any top up funding received from the program during this fiscal year, if applicable.
Comments (optional)	Include any comments related to transition house expenditures.
2(c) Transition housing services	The purpose of this subsection is to determine the top five services being offered in your transition home.
Main services offered	<p>Prioritize from 1 to 5 (1 being the most important):</p> <ul style="list-style-type: none"> - Advocacy/Referral to services or programs - Children’s programs - Community education and awareness raising - Counselling - Crisis prevention - Culturally-based programming - Housing information/Procedures - Individual case planning (social, legal, medical, etc.) - Programming related to well-being and healthy relationships - Transitional programming (building client abilities to transition to permanent housing) - Transportation - Women’s programs - Other (specify)
2(d) Results and challenges	The purpose of this subsection is to explain the main results of your transition home activities, based on the work plan you submitted at the beginning of the year.
Describe transition home activities and results; this includes successful prevention initiatives, accomplishments, challenges in terms of need and outcomes.	Describe transition home activities and results; this includes successful prevention initiatives, accomplishments, challenges in terms of need and outcomes.
2(e) Transition home capacity	The purpose of this subsection is to determine the capacity of the transition home.

Field	Definition
<p>Numeric value</p> <ul style="list-style-type: none"> - Full time staff - Part time staff - Volunteers - Beds for clients available - Rooms available - Rooms available - Maximum housing capacity (including accompanying children) - Transportation vehicles 	<p>Indicate the appropriate numeric value for each line:</p> <ul style="list-style-type: none"> - Full time staff - Part time staff - Volunteers - Beds for clients available - Rooms available - Rooms available - Maximum housing capacity (including accompanying children) - Transportation vehicles
<p>2(f) Transition home use</p>	<p>The purpose of this subsection is to determine the number of clients, communities, bed nights, crisis calls, clients requiring transportation to the transition home, and referrals from various sources.</p>
<p>Numeric value</p> <ul style="list-style-type: none"> - Total number of clients served - Indigenous communities served - Bed nights - Crisis calls received - Clients requiring transportation to transition home - Cases referred to the transition home 	<p>Indicate the appropriate numeric value for each line:</p> <ul style="list-style-type: none"> - Number of clients served - Indigenous communities served - Bed nights - Crisis calls received - Clients requiring transportation to transition home - Cases referred to the transition home <p>Number of communities served is determined based on where your clients are from. Bed nights is the sum of all nights spent for all clients in the past year. For example, one person using a bed for five nights counts as five bed nights.</p>
<p>Types of services available to male survivors of family violence</p>	<p>Provide a brief narrative on the types of services available to male survivors of family violence.</p>
<p>Types of services available to 2SLGBTQQIA+ survivors of family violence</p>	<p>Provide a brief narrative on the types of services available to 2SLGBTQQIA+ survivors of family violence.</p>
<p>Types of services available to survivors of human trafficking</p>	<p>Provide a brief narrative on the types of services available to survivors of human trafficking.</p>
<p>2(g) Transition home clientele</p>	<p>The purpose of this subsection is to identify a number of details related to transition home clientele.</p>
<p>Numeric value</p>	<p>Indicate the appropriate numeric value for each line:</p> <ul style="list-style-type: none"> - Number of First Nation clients served - Number of Métis clients served - Number of Inuit clients served - Number of Innu clients served - Number of non-status Indigenous clients served - Number of non-Indigenous clients served - Number of Indigenous women served (First Nation, Métis or Inuit) ordinarily resident ON reserve

Field	Definition
	<ul style="list-style-type: none"> - Number of Indigenous women served (First Nation, Inuit or Métis) living OFF reserve - Number of non-Indigenous women served living ON or OFF reserve - Number of Indigenous clients served (First Nation, Inuit or Métis) who identify as 2SLGBTQQIA+ living ON reserve - Number of Indigenous clients served (First Nation, Inuit or Métis) who identify as 2SLGBTQQIA+ living OFF reserve - Number of non-Indigenous clients served who identify as 2SLGBTQQIA+ living ON or OFF reserve - Number of Indigenous men served (First Nation, Métis or Inuit) living ON reserve - Number of Indigenous men served (First Nation, Inuit or Métis) living OFF reserve - Number of non-Indigenous men served living ON or OFF reserve - Number of accompanying minors (aged <18) served - Number of unaccompanied minors (aged <18) served
2(h) Clients served, by age	The purpose of this subsection is to identify the age range of clients that have accessed services in your transition home.
Numeric value	<p>Indicate the appropriate numeric value for each line:</p> <ul style="list-style-type: none"> - Children (0-14 years old) - Youth (15-24 years old) - 25 to 34 years old - 35 to 50 years old - 51 years old and over - Unknown age
2(i) Clients turned away	The purpose of this subsection is to provide information as to the reason if clients are being turned away from your transition home.
<p>Numeric value</p> <ul style="list-style-type: none"> - Clients turned away due to lack of capacity/resources - Clients turned away due to being ineligible for services - Clients who receive alternative accommodations (hotel room, motel rooms, etc.) - Clients turned away due to other reasons - Specify "other reasons": - Total clients turned away 	<p>Indicate the appropriate numeric value for each line:</p> <ul style="list-style-type: none"> - Number of clients turned away due to lack of capacity/resources - Number of clients turned away due to being ineligible for services - Number of clients who receive alternative accommodations (hotel room, motel room, etc.) - Number of clients turned away due to other reasons - Total clients turned away

Field	Definition
	Provide a brief description of "other reasons" for turning clients away if applicable.
2(j) Transition home stays, by length and frequency	The purpose of this subsection is to provide information regarding length of stays (and frequency of stays) of your transition home clientele.
Average transition home stay length (months)	Indicate the average transition home stay length in months.
Numeric value <ul style="list-style-type: none"> - Transition home stay frequency (recurrence rates) – no previous stays in the last 12 months - Transition home stay frequency (recurrence rates) – 1 previous stay in the last 12 months - Transition home stay frequency (recurrence rates) – 2+ previous stays in the last 12 months - Transition home stay frequency (recurrence rates) – unknown 	Indicate the appropriate numeric value for each line: <ul style="list-style-type: none"> - Transition home stays with a frequency (recurrence rate) of: no previous stays in the last 12 months - Transition home stays with a frequency (recurrence rate) of: 1 previous stay in the last 12 months - Transition home stays with a frequency (recurrence rate) of: 2+ previous stays in the last 12 months - Transition home stays with a frequency (recurrence rate) of: unknown
2(k) Additional information (optional)	The purpose of this subsection is to collect additional information not otherwise included in the report.
Additional transition housing initiatives and activities not otherwise included in report	Provide information about additional initiatives and activities run by the transition home that you wish to share with program management and representatives.
2(l) Transition housing prevention project	The purpose of this subsection is to collect information about prevention projects in your transition home.
Complete Family Violence Prevention Project Annual Report (DCI 1063749) if the transition home received additional funding for prevention projects	If your transition home has applied for prevention project funding (i.e., in addition to your shelter budgets), complete the Family Violence Prevention Project Annual Report (DCI 1063749), accessible via the Reporting Guide.
Declaration	
Given name Family name Title Date (YYYYMMDD)	The given name, family name and position title of the person who acknowledged the accuracy of the information, and the date on which it was completed. Dates are in the format of 'Year-Month-Day'.