



Shelter Diversion Pilot

Outcomes Evaluation
December 2025



Alliance to
End Homelessness
Ottawa



Land Acknowledgement

Ottawa is located on unceded Algonquin, Anishnabek territory, and is also the home of many diverse First Nations, Inuit, and Métis people. Put simply, these lands were stolen from the traditional keepers for the purposes of settlers. Dispossession of land is just one form of ongoing colonization that has led to First Nations, Inuit, and Métis people disproportionately experiencing homelessness.

Métis scholar Jesse Thistle developed a definition of Indigenous homelessness that goes beyond the lack of a physical building. Rather, Indigenous homelessness is more fully understood through a holistic lens about how Indigenous Peoples have often been disconnected from relationships in different ways.

Thistle identifies twelve different dimensions of individuals, families and communities isolated from their relationships to land, water, place, family, kin, each other, animals, cultures, languages and identities. As part of reconciliation, we need to redress extreme disparities in housing outcomes experienced by Indigenous Peoples.

Accessibility of For Indigenous, By Indigenous services and organizations, coupled with the support of Indigenous housing strategies and land-back initiatives, will be critical in the pursuit of a holistic system. Embracing Indigenous leadership and collaboration must lead the way in ensuring that all have a place to live.

About the Alliance

The Alliance to End Homelessness Ottawa is a member-driven coalition of over 75 organizations working together to end homelessness through advocacy, mobilization, and coordination. Our mission is to anchor the big picture - connecting people, programs, and policies - so the whole community can end homelessness together. Our work is guided by values of equity, collaboration, and system-level impact.

The Alliance emerged in the late 1980s from community members who were concerned about the changing and growing homelessness in Ottawa. Since then the Alliance has worked collaboratively to research and understand homelessness, advocate for structural change, and ultimately end homelessness.

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Foundation





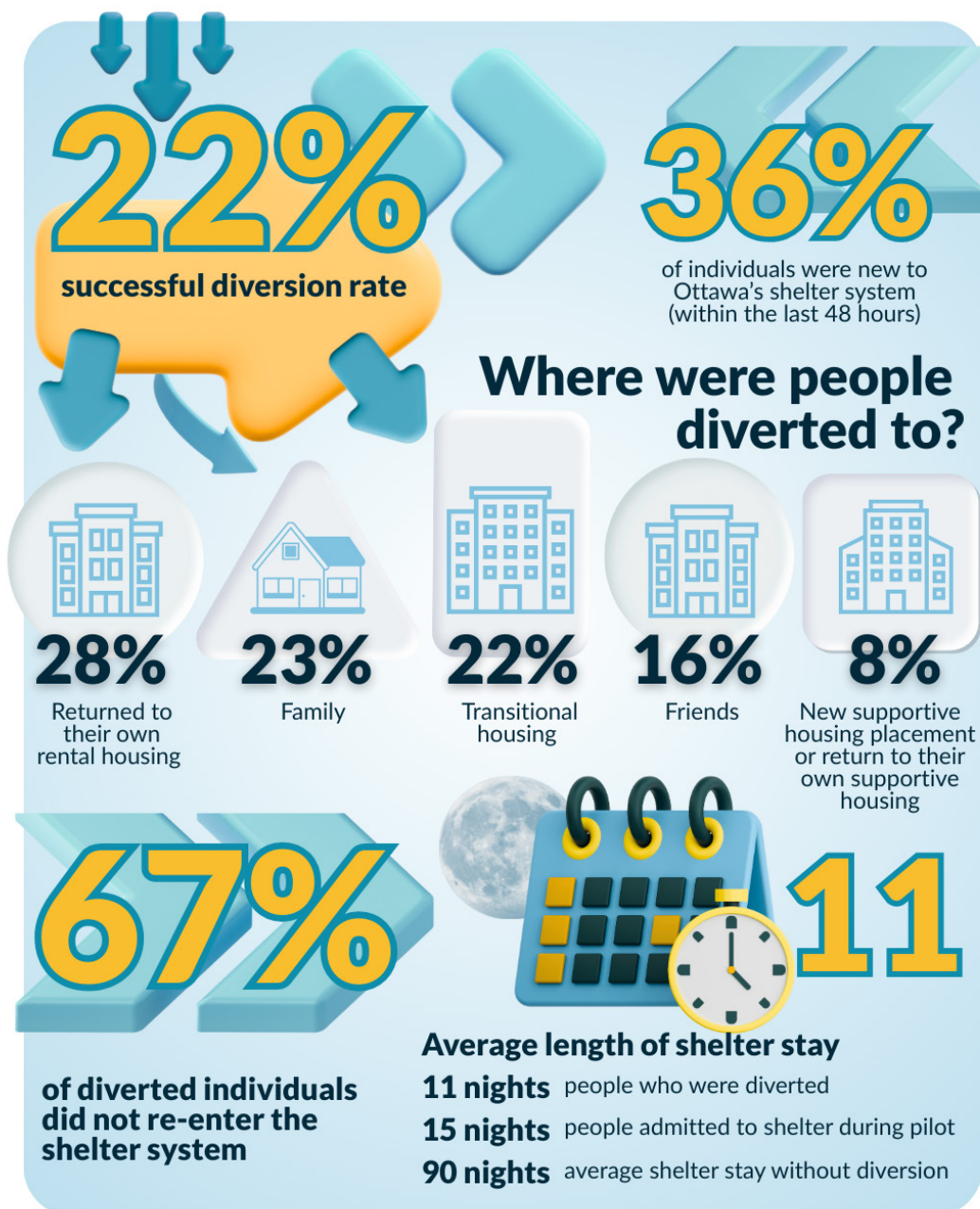
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Highlights

Shelter Diversion is an intervention that helps people who are seeking emergency shelter to identify and access safe and appropriate housing arrangements in their communities as a positive alternative to entering an emergency shelter.

A successful diversion means that a person was able to identify a safe and appropriate alternative to the shelter within the first 48 hours of seeking access, and to eventually reach that accommodation.

This report reviews a 6-month pilot initiative implemented at the Shepherds of Good Hope in Ottawa.



Executive Summary

In 2022, the City of Ottawa and local community partners convened by the Alliance to End Homelessness Ottawa decided to implement a pilot project on emergency shelter diversion. This approach has succeeded in other communities at reducing the number of people who need to access emergency shelter. This project was undertaken in partnership between the Shepherds of Good Hope (SGH) as the lead agency, the City of Ottawa as the funder and the Alliance to End Homelessness Ottawa as the system planner and convenor.

The pilot was designed to test current diversion practices, pilot new diversion practices, and ultimately inform the development of a coordinated, system-wide shelter diversion approach. This report presents the outcomes of the resulting six-month shelter diversion pilot implemented at SGH.

Between April and September 2025, SGH completed **395 diversion intakes**. The pilot achieved an **overall successful diversion rate of 22%**, more than doubling SGH's diversion rate from the previous year. Success rates were highest among youth, new shelter users, Indigenous individuals, and newcomers, particularly those experiencing recent housing instability or relationship breakdowns.

The outcomes evaluation was completed 1.5 months following the end of the pilot, at which time housing outcomes observed for diverted individuals were largely positive. **Two-thirds of the individuals tracked had not returned to an emergency shelter**, with the strongest housing stability observed among youth and individuals who were diverted to their own housing or supportive housing, a family member's housing, or to new supportive housing placements. Diversion also resulted in **significantly shorter shelter stays** for those temporarily admitted, thereby improving bed turnover and enabling the shelter to serve more people within their existing capacity.

Overall, the pilot confirms that shelter diversion is an effective, low-cost intervention that benefits both individuals and the shelter system. The findings support scaling up shelter diversion across the Ottawa homelessness service system through a coordinated effort with consistent practices and metrics.

The findings also support recommendations for an approach that:

- prioritizes populations with higher rates of success,
- is tailored to specific populations with unique needs, and
- includes follow-up support to prevent returns to homelessness.

Implemented system-wide, shelter diversion can play a meaningful role in reducing shelter inflow, preventing chronic homelessness, and improving the overall effectiveness of Ottawa's shelter system.



Introduction

This report outlines the outcomes of the shelter diversion pilot. At the beginning of this pilot, the main objectives were to:

1. Improve shelter diversion outcomes at a local emergency shelter, Shepherds of Good Hope, through process review and improvement guided by shelter diversion subject matter experts.
2. Share the learnings and findings across Ottawa's emergency shelter operators and partners to contribute to a coordinated and comprehensive sector-wide Shelter Diversion approach.

Context

Ottawa's shelter system consists of both community agency and municipally operated emergency and transitional shelters, supported by City of Ottawa funding and service coordination. The system serves a wide variety of people experiencing homelessness, including single adults, youth, older adults, families and children. Populations overrepresented in homelessness include Indigenous people, newcomers and racialized groups, and single-parent-led families.¹

35%

**increase in people
accessing shelters
since 2021**

The number of people using shelter in Ottawa has steadily increased over the last few years, with **9,390** unique individuals and/or families having accessed temporary emergency accommodations (i.e. shelters, hotel placements) in 2024 (a **35% increase** since 2021)². **Since 2021, the average length of stay for people using temporary emergency accommodations has hovered around 100 nights**³.

With increased demand, Ottawa's shelter system has been operating over capacity. In response, there has been an expansion in the shelter system's bed capacity, with an increase of over 700 permanent new transitional housing program beds between June 2023 and July 2025⁴. Despite these additions, Ottawa's emergency shelters have continued to need to use overflow capacity.

While adding bed capacity accommodates people in immediate need of shelter, it does not alleviate the shelter system crisis, and it doesn't prevent, reduce or end homelessness. A comprehensive response to the homelessness crisis must minimize inflow into the shelter system and maximize outflow to housing that meets people's needs. Shelter diversion is an underused tool that has the potential to be one of the most effective and cost-efficient approaches to reducing shelter inflow and ending homelessness for individuals.

1 2024 Ottawa Point-in-Time Count Executive Summary

2 Shelter system use and trends dashboard | City of Ottawa

3 Shelter system use and trends dashboard | City of Ottawa

4 Integrated Transition to Housing Strategy Close Out

Shelter Diversion

Shelter diversion is an intervention that helps people who are seeking shelter to **identify and access safe and appropriate housing arrangements** in their communities as a positive alternative to entering an emergency shelter.

At its core, shelter diversion is the process of **having a conversation with a person in crisis** and helping them identify solutions that may already be available to them. Shelter diversion may also involve connecting the individual to community resources, providing financial assistance, or helping to mediate with a landlord or family member.

Shelter diversion is not about blocking people's access to shelter, but rather about helping them avoid an unnecessary stay in an emergency shelter or, if admitted into the shelter, facilitating a swift return to housing.⁵ The benefits of this approach are clear in the known impacts of stays in shelter, which include:

- increased use of emergency services,
- adopting and becoming entrenched in a homeless identity and street culture,
- deterioration of physical and mental health, and
- increased vulnerability to developing substance use disorders.

The Niagara Region has seen promising results in reducing shelter inflow after **The RAFT**, a St. Catharines-based organization that addresses youth homelessness, led the implementation of a shelter diversion pilot, in which both youth and adult shelter providers participated. Overall, a **17% successful diversion rate** was achieved. When dividing the results between age groups, a 36% success rate was achieved with youth and an 11% success rate with adults⁶. Over time, successful diversion efforts contributed to a decrease in demand for youth shelter beds, allowing the Niagara Region to close a youth shelter in 2024⁷.

The City of Ottawa provides funding for diversion workers at emergency shelters. However, the approach to implementation has varied across shelter providers and has not decreased the demand for shelter beds. The absence of a coordinated approach and inconsistent definitions has led to inconsistent data collection. Ottawa's shelter system can realize the full benefits of shelter diversion by further investing in this updated and rigorous approach and by scaling up efforts across the community.

In a growing homelessness crisis, this pilot was developed to bolster existing diversion efforts and support the development of a sector-wide, coordinated shelter diversion approach.

5 Community Solutions, What is Diversion?

6 Lethby, Michael. (2021) Two Years of Shelter Diversion: Learnings and Lessons. Niagara: Niagara Resource Service for Youth.

7 PressReader.com | Youth shelter closing to better serve families



Project Description

Shepherds of Good Hope (SGH) agreed to be the lead agency as it was one of the agencies already conducting shelter diversion. SGH has been operating in Ottawa since 1983. Today, the agency operates an emergency shelter (250 permanent beds, with additional overflow/mat capacity), six supportive housing buildings (339 units), and a community kitchen/drop-in centre.

The pilot took place within SGH's three adult-shelter programs: a men's program, a women's program, and the Transitional Emergency Shelter Program (TESP), which provides specialized support for chronically homeless adults who suffer from acute physical health, mental health and/or substance use disorders. It is important to note that SGH offers low-barrier services throughout their shelter, drop-in and housing programs. As a result, the overall acuity level (that is, the severity and complexity of experience and needs) of individuals in the shelter may skew on the higher side than some other emergency shelters.

SGH received training and consultation services from Lethby Consulting to assess and improve their diversion outcomes. Lethby Consulting is led by Mike Lethby. Mike is also the Executive Director of The RAFT, from the Niagara Region, which has seen great success in shelter diversion. Lethby Consulting completed an organizational assessment with SGH to identify potential barriers to effective shelter diversion and existing strengths. They provided training to SGH staff on conducting two types of diversion assessments: a full assessment to be done by a diversion case manager, and a truncated "mini" assessment that could be done by any frontline worker upon initial client intake. In addition, they also provided SGH's management team with training and support for data collection.

The data collection for the pilot spanned six months, from the beginning of April to the end of September 2025. SGH staff primarily completed diversion intakes with clients who were newly entering the shelter (i.e., anyone who hadn't accessed the shelter system within the last 90 days). These clients received a diversion assessment (mini, full, or both, depending on circumstance). For the pilot, a diversion was considered successful when an alternative to the shelter was identified within the first 48 hours of the client seeking access, and the individual eventually reached that accommodation. Completion of the diversion process can take days or weeks as the case manager confirms the permanence and safety of the diversion alternative.

Where an alternative was not identified within 48 hours, the diversion case managers continued to work with clients for 30 days after they entered shelter, as is customary with SGH's practices. Due to limited capacity, the diversion case managers did not provide follow-up supports to individuals post-diversion.

Outcomes

Profile of those seeking shelter

395 diversion intakes were completed with 384 unique individuals. Of these individuals:

- 58% identified as men and 42% as women;
- 8% of individuals were youth (aged 18-24), 86% were adults (aged 25-64), and 6% were seniors (aged 65+);
- 65% of individuals were Canadian citizens, 11% were refugees or claimants, 4% were permanent residents, and 2% were work or student visa holders⁸;
- 12% of individuals self-identified as Indigenous;
- 1% of individuals reported being a veteran

When looking at shelter use, 36% of individuals were new to Ottawa's shelter system (within the last 48 hours). Almost a quarter of new shelter users were refugees / claimants. This speaks to developing trends in Ottawa, where newcomers are over-represented among those who are newly homeless. The remaining 64% of individuals who sought shelter had accessed the shelter system before, with a little over half having accessed a shelter in Ottawa for the first time more than a year ago.

In the intake process, staff recorded the reason why individuals were seeking access to shelter. Findings showed that:

- The top reason for seeking shelter was due to being presently homeless or on the street (41% of all intakes);
- 21% of intakes were seeking shelter due to a relationship breakdown (e.g., family or roommate conflict);
- 17% were seeking shelter primarily to gain access to other services (e.g., voluntarily leaving housing to access shelter for the purpose of accessing services);
- 10% due to an eviction (including both people being evicted and those who thought they were being evicted due to receiving a notice);
- 6% were identified as being at risk of homelessness (e.g., inappropriately housed, staying at a motel), and
- 6% were arriving due to services outflow (e.g., exiting incarceration, hospital, detox).

8 17% of individuals' status were not recorded during intake.



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Of note, women and refugees/claimants were overrepresented among those seeking shelter due to being presently homeless or on the street (+19% and +27%).

Among those seeking shelter due to a relationship breakdown, nearly half of the individuals were new to Ottawa's shelter system. Women and youth were also slightly overrepresented in this category. Relationship breakdowns being the second most common reason for seeking shelter highlights the impact that natural supports can have on someone's ability to remain housed, and the consequences when these connections deteriorate.

With 17% of individuals seeking access to shelter in order to access services, this finding highlights the need to address structural sectoral coordination so that people know there are other appropriate options available in the community to meet needs such as food, income support, health care, etc. Additionally, some individuals who are seeking shelter due to relationship breakdown may be fleeing violence but unable to access shelters and service agencies specializing in gender-based violence supports. This highlights a lack of capacity in that provincially-funded system.

Finally, Indigenous individuals were overrepresented among those seeking shelter from services outflow, making up 17% of individuals in that category (+42%).

Diversions and success factors

An overall successful diversion rate of 22% was achieved during the pilot period. SGH averaged 14.5 successful diversions per month, more than tripling their average monthly diversions from 2024. While the success rate varied from month to month, it never dropped below 10%. The peak success rate of 40% was in July, with 31 successful diversions completed. Considering the initial target set for the pilot project was to achieve an 11% success rate (as was achieved with adults seeking shelter in the Niagara Region pilot⁹), these results are an incredible success.

22%
diversion
success rate
overall

A review of the successful diversions highlighted several factors that increased the likelihood of success:

Age: The success rate for diversion varied by age group. **The highest likelihood of success was with youth (aged 18-24), at a rate of 32%.** A majority of the youth who were diverted were new to the shelter system and had been staying with a family or friend in the month prior to seeking shelter access. 70% of these individuals were diverted to a family or friend's home and did not return to the shelter system by the time this report was written. This result was expected; youth are more likely to have natural supports, such as family, still intact. This provides more opportunities to identify safe alternatives to shelter, when compared to older adults. Comparatively, adults (aged 25-64) had a 22% success rate and seniors (aged 65+) a 17% success rate.

32%
diversion
success rate
for youth

9 Lethby, Michael. (2021) Two Years of Shelter Diversion: Learnings and Lessons. Niagara: Niagara Resource Service for Youth.

Indigenous identity: Indigenous individuals were also at an increased likelihood of being diverted, with successful diversions occurring 33% of the time. A little over half of these individuals were originally referred to the shelter by institutions such as the Ottawa Police Service and hospitals. 60% of these individuals were diverted by returning to their own housing, and 33% were diverted to stay with family. Two individuals received a new supportive housing offer. There was also a higher rate of Indigenous people who received financial and coordination support from SGH for out-of-city transportation to reach their housing destinations.

Citizenship & immigration status: There was a higher rate of success with individuals who were in Canada on a work or student visa and with refugees/claimants (62.5% and 34% success rates, respectively). Many of these individuals were new to Ottawa's shelter system, and most of the successfully diverted refugees/claimants had arrived from a different city or country within the last month. It is important to note that a little over half of these individuals were diverted by being redirected to transitional housing tailored to newcomers. Ottawa hosts various models of transitional housing for newcomers. Some sites are more similar to emergency shelters, with congregate sleeping quarters. Others resemble group homes, with single or double-occupancy rooms. These were considered successful diversions within the context of this pilot: rather than entering the emergency shelter system, these individuals were redirected to a more suitable alternative designed to accommodate and support their integration over a 6 month to 1 year period.

There remains an opportunity to identify alternatives to emergency and transitional shelter for refugees and claimants. A quarter of diverted refugees/claimants went to stay at a friend's home. This challenges the assumption that this population does not have natural supports nearby. There was also one instance where an individual on a student visa, who had sought shelter after experiencing a significant decline in their mental health that left them unable to pay their rent, received support from SGH to return to their home country to be reunited with family.

New shelter users: As noted across the demographics highlighted above, there were higher rates of success among those who were new to the shelter system (30%). The rate of success for new shelter users was equivalent between newcomers and non-newcomers. A little over half of the individuals who were successfully diverted were new to the shelter system, achieving an overall 33% successful diversion rate. Of those who were successfully diverted, approximately a third of individuals were seeking shelter due to a relationship breakdown and had been staying with a friend or family member within a month of seeking shelter, while another third were seeking shelter primarily to access other services (access to food, clothing or healthcare).



Housing outcomes and returns to shelter

A total of 87 successful diversions were recorded among 85 unique individuals. This means that two individuals were diverted twice. For those who were successfully diverted during the project, the top types of accommodation that they were diverted to were:

- Their own rental housing (28%)
- Family (23%)
- Transitional housing (22%)
- Friends (16%)
- New supportive housing placement or their own supportive housing (8%)

The fact that 28% of individuals were diverted back to their own housing, plus additional individuals who were diverted back to their own supportive housing, may raise the question as to why these individuals sought shelter in the first place if they had housing available to them. There are a variety of reasons why individuals who are currently housed may access an emergency shelter:

- *The individual is seeking other services or supports.* This means that they are in need of a different community, health or social service and aren't sure where to find it (e.g., access to food, clothing, or healthcare navigation).
- *The individual mistakenly believes they were evicted from their current housing.* Shelters sometimes deal with cases of misunderstandings about landlord-tenant relationships and documentation. Confusion over Ontario's "N-forms", including the meaning of the form or the timelines associated with it, can bring people to the shelter.
- *The individual is experiencing minor conflict with a roommate or neighbour.* Tenants may be hesitant to return home due to conflicts with roommates or neighbours and don't know where to turn for help.
- *The individual requires medical monitoring or intervention.* At SGH specifically, some people present or are referred to the shelter to access the embedded healthcare program in TESP, for an acute health issue or monitored substance use recovery. When the team has deemed their health issue to be stable or resolved, they would return to their own home.

Data analysis included a review of data from the Homeless Individuals and Families Information System (HIFIS) to determine whether those who were diverted returned to an emergency shelter from the date of diversion to 1.5 months after the pilot's end. Among the 70 who could be accounted for in HIFIS, **67% of diverted individuals did not re-enter the emergency shelter system.** Those who were diverted to their own rental units or to family had lower rates of return to shelter, and 100% of individuals who were diverted to a new supportive housing placement or their own supportive housing remained out of the shelter system. The demographic group that had the lowest rate of return to shelter after being diverted was youth, with 70% remaining out of shelter.

67%
of diverted
individuals did
not re-enter
the emergency
shelter system

Of the individuals who returned to shelter, women and Canadian citizens had a slightly higher rate of return. Interestingly, **a strong majority (85%) of those who returned to shelter presented at SGH rather than another shelter, dispelling the notion that diversion redirects clients to other shelters.**

Those who were diverted to transitional housing or to friends' homes had higher rates of return compared to the overall average. This may suggest that different housing alternatives offer varying levels of stability (i.e., housing with family may offer more stability than with friends, and one's own housing offers more stability than transitional housing). **While transitional housing holds a necessary place in the current system, these findings suggest that permanent affordable housing with the supports needed to thrive is the long term goal.**

Lastly, those who were actively homeless, on the street, or experiencing an eviction at the time that they sought shelter returned to shelter at higher rates (+21% and +51% compared to the overall rate).

These findings highlight an opportunity for further investment in follow-up supports for individuals who remain at risk of homelessness post-diversion. Due to limited capacity, SGH did not continue to engage clients post-diversion. This means that past the point of diversion, staff could not continue working with the individual to further address the reason they sought shelter access in the first place. Future initiatives may wish to explore how results could be improved with ongoing engagement with individuals in the weeks immediately following their successful diversion.

Improved effectiveness

SGH's diversion practices notably improved throughout the pilot. Within the project period, SGH surpassed its total number of successful diversions in 2024 by 64%. These successes are in part attributable to procedure changes implemented after the organizational assessment. Changes in the shelter's bed booking procedure and intake tool created more opportunities for staff to intervene with people seeking shelter access and complete diversion assessments. In fact, **the number of diversion intakes increased each month** (with 42 in April and 109 in September), and **the number of successful diversions doubled from the first month of the pilot to the last.**

The diversion training completed with SGH staff was also instrumental to the pilot's success. A SGH program manager shared that, before the pilot, most staff within the shelter were unfamiliar with shelter diversion, and generally did not know who the diversion case managers were or how to engage with them. Since implementing the pilot, the culture around shelter diversion has shifted significantly. A staff survey completed in the latter half of the project revealed that **89% of staff felt they had a clear understanding of the goals and purpose of shelter diversion.** A majority of staff also indicated that they found the procedures around diversion intakes and referrals to the diversion case managers to be clear.



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In addition to the staff's improved understanding of shelter diversion, their participation in diversion increased. By training frontline staff to conduct mini assessments, they were able to explain diversion to clients, complete a preliminary assessment with individuals as they were seeking access to shelter, and, in many cases, complete a diversion before the individual reached a diversion case manager. In fact, **44% of successful diversions were achieved by administering a mini assessment only**. Since diversion case managers at SGH do not work 7 days a week, frontline staff were a key resource supporting the successful outcomes of the pilot.

As organizational culture shifted to enable shelter diversion, SGH increased the pool of funds to support diversion efforts, which were primarily used to purchase travel tickets to help individuals reach their housing destinations. The City of Ottawa has changed the funding structure to shelters in recent years, moving from a per-diem per shelter bed to block funding. This has removed the perverse incentive to fill shelter beds and facilitates opportunities for innovative solutions. **In part, the success of diversion comes from the flexibility to use funding as it is needed on a person-by-person basis.**

Impact

When there are such high demands for shelter beds, it can be challenging to fully appreciate the impacts of shelter diversion. While the success of this pilot has not yet resulted in empty shelter beds, it has allowed shelter staff to better use their bed space, with every person diverted making a shelter bed available for someone else who needs it and cannot be diverted.

This is a critical part of **increasing flow across the shelter system (decreasing inflow into shelter and increasing outflow from shelter to housing)**, which is a significant challenge in the current context. People who need emergency shelter often can't access it readily because some shelters are full and they do not have the means to access other options. Decreasing inflow helps address this challenge and enables greater long-term success. Shelter diversion has immediate impacts for those being diverted and long-term impacts on the wider shelter system.



These long-term impacts include:

Chronic homelessness prevention: Shelter stays can be traumatic and can have long-lasting and destabilizing effects on a person. Individuals who have previously experienced episodes of homelessness are more likely to become chronically homeless. On an individual level, each successful diversion ensured that the person involved either did not unnecessarily enter an emergency shelter or that their stay in shelter was brief. In this project, 21% of individuals who were successfully diverted were connected with a more appropriate housing alternative without being admitted to shelter.

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In Ottawa, the number of people experiencing chronic homelessness has increased from 813 in 2018 to 1,279 in 2024¹⁰. Shelter diversion allowed SGH to intervene with individuals as they were newly entering homelessness or experiencing housing instability. Preventing people from entering and becoming stuck in the shelter system reduces the likelihood of creating cycles of homelessness and chronic homelessness.

Higher bed turnover: SGH's diversion efforts ensured that shelter beds were being used by those who had no other options for safe and appropriate housing. While some avoided entry altogether, many diverted individuals temporarily accessed the shelter while the diversion team helped them arrange their housing. The average length of shelter stay for single adults in Ottawa was approximately **90 nights** in 2024¹¹. Comparatively, the average length of stay for the 22% of SGH clients who were successfully diverted was **11 nights** (including those who were diverted without being admitted to shelter) and **15 nights** (for those who were admitted to shelter).

Between their three shelter programs, SGH has the capacity to serve up to 278 individuals per night including overflow beds and mats, which are often in use. While many individuals will not be able to benefit from diversion, the reduction in inflow and faster turn over of occupied beds of those that do benefit means that the same number of beds can serve a greater number of people.

Cost-effective intervention: Shelter diversion is a cost-effective approach to ending homelessness and managing shelter bedspace. Diversion practices can often be easily integrated into a shelter's existing system with little additional cost to the shelter provider. While SGH was conducting shelter diversion prior to this pilot, after the initial training, they successfully doubled their diversion rate from the previous year using the same resources. As the City of Ottawa already funds a diversion worker for each of the adult shelters, this was an opportunity to train and support the diversion case managers in a more comprehensive way and strengthen diversion practices. Additionally, SGH used this pilot to train other front-line staff and adjust their intake processes to optimize diversion opportunities.

SGH also allocated funds to help individuals reach their identified housing alternative (primarily used to purchase travel tickets). Within the pilot period, a total of \$3,328 was spent on transportation. When averaged across the number of people who were successfully diverted, this amounts to **\$38 per person**. This is less than half the average cost per individual per day / night in SGH's shelter programs, which is \$86.11 when operating at full capacity (includes all direct costs, staffing, security, food and overhead).

Due to the shorter shelter stays, diversions are, on average, far less costly than the typical shelter stay. Using the same average cost, we can identify **savings of close to \$6,500 for each average stay** in the case of a successful diversion (15 days) when compared to Ottawa's average length of stay of 90 days.

\$6,500
savings compared
with Ottawa's
average length of stay

10 2024 City of Ottawa Housing Needs Assessment

11 Single Demographics dashboard – Shelter System | City of Ottawa



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Beds used to greater impact: When individuals who can be diverted are diverted, beds are more likely to be designated to individuals with high-acuity needs who require more intensive, long-term support, or those experiencing chronic homelessness. Not only are shelter beds made available to those who truly need them, but the associated case management resources are also then prioritized to those in greatest need. While this pilot did not evaluate broader case management outcomes, future initiatives could explore impacts in this area.

Key Findings & Recommendations

1. **Effective shelter diversion is relatively inexpensive and can be achieved through specialized training, adjusting existing processes, and involving and gaining buy-in from all shelter staff.** Ensuring that diversion case management is available both during the day and evening will increase capacity to intervene with individuals as they are seeking shelter access, and building a mini assessment into the intake process will help identify individuals who are well-suited for diversion who may otherwise fall through the cracks.
Moving forward, it would be beneficial to scale diversion processes to all points of intake and entry for people seeking access to emergency shelter, such as day-program agencies, outreach programs, or 211 or 311 phone services. Scaling up diversion at the system level and coordinating across sectors are key to reducing inflow.
2. **Shelter diversion benefits both the individual and the system.** Individuals benefit from safe and appropriate accommodations while avoiding exposure to the trauma associated with life in shelter. At the same time, shelter beds are quickly turned over and available for those with no other safe options. For an efficient system that is focused on reducing shelter inflow and length of stays, all emergency shelters in Ottawa should be equipped to practice shelter diversion using a coordinated approach and consistent metrics. Diversion approaches can be tailored to best serve the needs of specific populations with unique challenges, such as Indigenous people and newcomers.
3. **Shelter diversion has the highest rate of success among youth, new shelter users, and individuals who are newly entering an episode of homelessness or housing instability.** Flagging these factors will allow shelters to prioritize their efforts in times of high inflow.
4. **The Ottawa shelter system should limit its definition of a successful diversion to those who can identify and start working toward a positive alternative to shelter within the first 48 hours.** This definition was adopted within the context of the pilot. However, the SGH diversion team traditionally works with individuals up to 30 days after they enter shelter. SGH noted that by and large, if someone has not identified a housing alternative within the first few days, they are unlikely to be diverted.

5. **A lack of follow-up support for people who remain at risk of homelessness post-diversion may leave them more likely to return to shelter due to unresolved challenges to housing stability.** By limiting their focus to individuals with a higher likelihood of success, diversion case managers may have increased capacity to provide follow-up services to diverted clients. Moving forward, funding for diversion follow-up could generate greater housing stability for people.
6. **Natural supports, such as family and friends, are often vital to people's housing stability.** While breakdowns in these relationships represent one of the main reasons for entering homelessness, natural supports also represent the greatest opportunity for positive alternatives to shelter. There are several preventative program models we can look to in order to strengthen natural support systems, such as family support services and in-school homelessness prevention programs (Youth Reconnect and Upstream program models).

Conclusion

This pilot project provides valuable insight into how we can scale diversion practices across Ottawa. The results show that diversion can have a meaningful impact in transforming our shelter system and reducing both the number of people becoming homeless, and the number of people who get chronically stuck in the shelter system. Perhaps most striking is the reduction in average length of shelter stay for those successfully diverted. **Without diversion, the average length of stay is 90 days. With diversion, that number goes down to 11 days.** Diversion stops the trajectory into chronic homelessness. Over time, this will lead to meaningful reductions in chronic homelessness in our community. Scaling diversion practices across our shelter system is a critical next step in reducing homelessness in Ottawa.



Limitations and external factors

Due to limited resources, time constraints and external factors, the findings of this pilot should be interpreted in light of some limitations:

- When assessing the success of diversions, SGH attempted to contact diverted individuals to confirm whether they reached their identified housing alternative after leaving the shelter. However, many individuals could not be reached due to limited staff capacity, the absence of contact information for some individuals, and some individuals being unreachable after they left shelter. In cases where a diverted individual could not be contacted, the diversion was still considered successful if they did not access an emergency shelter immediately following the diversion.
- Analysis of returns to shelter was conducted using varying timeframes. The return to shelter data was collected at a single point in time, approximately 1.5 months after the pilot period concluded. As a result, individuals diverted in the beginning of the pilot were evaluated over a maximum follow-up period of 7.5 months, while those diverted later were evaluated over a minimum follow-up period of 1.5 months.
- Some individuals who were successfully diverted had not previously accessed the shelter system and were diverted without being admitted to SGH. In these cases, individuals were not recorded in HIFIS, and therefore could not be included in the return to shelter analysis.
- During the pilot project period, SGH opened a new supportive housing building for Indigenous people, women and others. Working with Indigenous partners SGH was able to successfully divert 2 Indigenous clients directly to new supportive housing placements through the coordinated access list. This success rate would not be standard if the pilot were expanded, unless new supportive housing options also came available and individuals qualified for placement.

Definitions

Acuity: the severity and complexity of a person's experience and needs. Acuity is used to determine the appropriate level, intensity, duration, and frequency of case managed supports to sustainably end a person or family's homelessness.

Chronic homelessness: persistent or long-term homelessness where an individual has been homeless for at least 180 days at some point over the course of the last year (not necessarily consecutive days); and/or experienced recurrent episodes of homelessness over three years that total at least 18 months.

Diversion intake: the gathering of client information necessary to admit a person to shelter and complete a diversion assessment.

Mini diversion assessment: the diversion tool used by front-line staff, which was integrated into SGH's shelter intake tool. This tool is used to collect basic information on the person, their reason for seeking shelter, their recent housing history and their existing supports.

Full diversion assessment: the diversion tool used by diversion case managers. This tool guides staff through an in-depth conversation on a person's present circumstances and support needs, their reason for seeking shelter, their housing history, their existing supports and housing plan.

Emergency shelter: A shelter that is accessible by an individual or family experiencing homelessness with or without a referral, with the intention of providing short-term accommodation and the support services required to move clients into housing.

Homeless Individuals and Families Information System (HIFIS): The Homeless Individuals and Families Information System is a computerized information management system used to book-in and book-out clients, maintain health records, preserve historical client records, communicate amongst users through bulletins, and collect information on the shelter population. It is a common database used by shelters to collect information on homelessness.

Temporary emergency accommodations: A shelter (bed, overflow cot or hotel room) that is accessible by an individual or family experiencing homelessness with or without a referral, with the intention of providing short-term accommodation and the support services required to move clients into housing.

Transitional housing: Housing that is intended to offer a time-limited supportive accommodation for its residents, including offering them the experience, tools, knowledge and opportunities for social and skill development to transition to independent living and self-sufficiency. It is considered an intermediate step between emergency shelter and supportive or independent housing. Stays are typically between three months and three years.

Successful diversion: for the purpose of this pilot, a diversion was considered successful when an alternative to the shelter was identified within the first 48 hours of the client seeking access, and the individual eventually reached that accommodation. Some individuals were able to identify an alternative within the first 48 hours, but stayed longer in the shelter while the diversion team helped them arrange access to their housing alternative. These were considered successful diversions.