



Calgary Drop-In & Rehab Center – Data Collection

The Calgary Drop-In & Rehab Centre collects data with respect to the delivery of services to clients in a large shelter. The Shelter has data from the 1980's to the present, with the most comprehensive information is for the period from 2001 to the present. This information exists in three formats.

1. Historical information in paper format
2. Databases containing demographic, housing and associated information such as location of stay and state (sobriety) of stay. In addition there is behavioral information in associated logs, notes, referrals, and other services delivered to an individual client. Included would be interactions with internal departments such as counseling and health services. Additional information is collected as required for an employment training, and access to government services.
3. Excel spreadsheets containing outputs of services. This includes housing, meals, interactions with Emergency Services, client transportation, employment indicators such as lunches provided to go to work, clothing distribution, etc.

The DI collects information primarily in response to client demand for services, not funder requirements. As such, it is designed to measure outputs, not outcomes.

Priority Questions driving the collection of information:

- What does the person standing in front of me want “right now”?
- What does the agency need to know to deliver services?
- What information is required for the staff to do their job?

What our clients are looking for in the short term is shelter, food, safety, immediate medical needs, and to have their personal hygiene (shower, clean clothing) needs met. For most of the people that we have contact with this is all they want from us. Most clients use our services less than 7 times in a year.

For the clients who are high service users, they have a different set of concerns. They want to know if they can trust the staff, that services are predictable, that they are interacting with the same staff every time they come in, and that the shelter is a place where they are accepted. Predictability is very much a value, as knowing what the rules are, and how they will be applied is very important. It is also important to the client that the services delivered be predictable so they know to what to expect when they arrive at the shelter.

The DI staff primarily collect information at a passive level through interactions, and over time considerable information is collected on individual clients. This information is then used to advocate for the clients, with medical professionals, government and the courts. It is also used to design internal client services.

Data Collection Structure

For basic services, only basic information required:

- A name – not verified
- A date of birth – not verified
- Observed Race and Gender – not verified
- A picture is taken and biometric finger scan taken
ID is at no point requested, but the individual's identity is tagged to biometrics so it cannot be duplicated. This functions as the ID in our system.

Baseline information is collected:

- Housing information collected (date of stay, location of stay, state (sobriety))
- Staff & client assessment of health, housing health, and hygiene using a 4 point scale (new intakes since January 2016)

Behavioral information is collected:

- Logging of behaviors / events
 - Barring as a result of these behaviors
- Recording of conversations / staff interactions of note
- Requests for service from the counselors (ID, treatment, etc.)
- Interactions with Health Services
 - Detailed information collected under the Health Information Act by Medical Staff
- Referrals to other agencies
- Employments through the labour office
 - Skills and employment history
- Service requests (bag lunches, food hampers, etc.)
- Laundry appointments
- Medication tracking
- Elevator Passes
- Work Confirmations to get back lunches or late passes
- Mail
- Volunteering

Additional information is gathered over time as trust is built

- Interactions with Police and other agencies
- Client discloses more information about their situation
- Client applies for external services (taxes, government entitlements)
- Client applies to internal programs and additional information is disclosed
 - Emergency Contact
 - Family Contact
 - Education
 - Military Service

- Employment Skills
- Literacy
 - Computer learning Centre – tests for literacy
 - Employment Services training – tests for literacy
 - Supportive Housing – asks client about their ability to write in English
- First Language
- Fluency in English
- Ethnic Background
- Citizenship and Country of Birth
- General Medical Information
 - Family Doctor
 - Diagnosed Illnesses
 - Allergies
 - Medications
 - How do they pay for medication
 - Mental Health
- ID
- Income