What Works and for Whom?

PART 2

A Framework for Designing and Implementing Promising Practices Research
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INTRODUCTION

This framework is designed to be read in conjunction with “What Works and For Whom? A Hierarchy of Evidence for Promising Practices Research”. In Part 1, the differences between ‘emerging,’ ‘promising’ and ‘best’ practices were explored. Additionally, detailed information about the types of evidence or studies that fit each category was presented. In this document we move towards providing a comprehensive understanding of the steps and components required for programs to ensure that they are ‘promising practices’.

In order to develop more effective responses to homelessness, communities across the country have expressed a need for more, and better, information about interventions that can contribute to ending or preventing homelessness. To do this, we need a transparent mechanism for identifying, evaluating and promoting ‘promising practices’ that incorporates clear, well-defined language and enables the evaluation of interventions using measurable benchmarks and outcomes. This tool has been designed to enable service providers, policymakers and researchers to assess the effectiveness of an initiative and to determine whether or not it is a ‘promising practice’. Our focus on ‘promising’ rather than the broader term, ‘best practices’, is quite deliberate1. The term ‘best practice’ typically refers to a practice that has a broad and well-established body of research to demonstrate the effectiveness of the approach.

1. For a more detailed explanation of “Best Practices” and “Promising Practices, see Part 1 A Hierarchy of Evidence for Promising Practices Research.
‘Promising practices’ identify programs or service models that have demonstrated – through rigorous evaluation methods and a solid evidence base – to be effective in achieving targeted outcomes (e.g. stable housing, eviction prevention), but which rely on limited research (i.e. a single study or case). While the term can refer to a myriad of solutions, ranging from system and policy level initiatives to on the ground practice, this framework focuses on the assessment of programmatic interventions aimed at preventing and ending homelessness. To date, most research on homelessness or housing interventions in Canada has been done at the program level. Few communities have implemented truly integrated ‘systems responses’ to the problem; however we recognize that this is required to end homelessness. While effective programmatic responses are part of a broader systemic response and can be shaped by policy, future work is needed both to identify and assess promising systems responses practices.

In time, the body of research on promising practices in Canada will grow, enabling more effective planning and adaptation of interventions that have been proven to be successful. The growing acceptance and use of program evaluation, particularly outcomes evaluation and the expanded use of information systems for data collection and management, means there are an increasing number of investigations and reports that enable us to make an assessment of promising practices in the sector. There is now an opportunity to promote a number of practices that show promise for adaptation and reworking across the country as part of the shift to housing solutions and prevention rather than management of homelessness.

CHRN Promising Practices Working Group
The CHRN established a working group with leaders from the areas of research, policy and practice, to develop, refine and test the framework. The CHRN Working Group included: Stephen Gaetz, York University & the Canadian Homelessness Research Network; Fiona Scott, Canadian Homelessness Research Network; Allyson Marsolais, Canadian Homelessness Research Network; Tanya Gulliver, Canadian Homelessness Research Network; Bernie Pauly, University of Victoria; Alina Turner, Calgary Homeless Foundation; Yale Belanger, University of Lethbridge; Bradley Harris, Salvation Army; Isolde Daiki, York University; Jeannette Waegemakers Schiff, University of Calgary, Laural Raine, City of Toronto; Tim Aubry, University of Ottawa; Jeff Karabanow, Dalhousie University; Sheldon Pollett, Choice for Youth, NFLD; Dianne McCormack, University of New Brunswick; Carolann Barr, Raising the Roof.
Guiding Principles for Promising Practices
in the Homelessness Sector

In designing this framework, we want to acknowledge four key principles that underlie our approach:

1. Explicit focus on ending homelessness.
   Our promising practices framework is designed to identify those initiatives that do more than simply respond to homelessness, but that have the explicit goal of reducing homelessness and its harms, in particular through prevention or by helping people move out of homelessness as quickly as possible. These initiatives should be oriented towards people’s rights to housing and support. This is not to suggest that initiatives designed to help people while they are homeless are of no value, as people must have their immediate needs met. We are choosing to prioritize initiatives that work to reduce or end homelessness.

2. Clarity of intended impact.
   In determining a promising practice, there should be great clarity in how an intervention is planned. Clear goals and objectives, underpinned by a strong philosophical base are essential to an effective response, whether it is a program, policy or community response. The successful evaluation of a program depends on the clarity of the plan. For instance, if you are not certain about who you are serving, or what you are trying to accomplish, it becomes very difficult to assess if you did what you said you were going to do, or that you succeeded.

   There must be sound evidence that a program is achieving results as this separates a promising practice from a mere description. How do we really know something works? The sources of evidence should include quantitative and qualitative data that demonstrate change; for example, a reduction in the number of homeless people in the community. Promising practices must be able to demonstrate – through appropriate and rigorous data collection, analysis and evaluation – that they are effective in achieving targeted outcomes (e.g. stable housing, eviction prevention). Rigour includes using an appropriate research design, having the required sample size and using measures that are reliable, valid, and speak directly to the goals and objectives of the practice.

4. Integration within a system response.
   Promising practices must clearly demonstrate how the intervention integrates with other services or systems addressing issues of homelessness. The most effective initiatives support, or are part of, a coordinated, integrated system that helps people who are homeless or at imminent risk of homelessness. While there are outstanding individual initiatives that may warrant the designation of promising practice, we feel that such initiatives are even more effective when integrated into strategic and integrated systems.
The Structure of the Framework

This framework provides criteria and a clear structure to help determine a program’s effectiveness. Communities, service providers and governments, can use it as a resource to help guide evaluation assessment strategies and conceptualize the scope and breadth of evaluation research.

A determination, as to whether a program or practice is ‘promising’, is best done by an external evaluator, even if the evaluator draws on data produced internally by the organization. If the goal is to make a truly impartial assessment that is of broad value to the homelessness sector, this tool should ideally be implemented by a researcher/program evaluator who is external to the practice in order to objectively determine whether or not, and how, it fulfills the criteria.

The framework is divided into three categories:

1. Design of the Initiative

2. Evidence of Effectiveness

3. Collaboration and Systems Integration

Within each category, there are a range of program elements that, collectively, speak to the effectiveness of the whole. Within each element a range of indicators of effectiveness are also identified. The final section provides guidelines for communicating and disseminating information gathered from each of the sections.
THE FRAMEWORK

1. Design of the Practice

In determining if a practice is promising, there must be clear evidence of planning and readiness for evaluation. The intervention must be driven by a demonstrated need, have clearly defined goals and objectives that align with the mission and values of the practice and have a strong theoretical justification for why it may work. Practices that deal directly with clients must demonstrate a clearly defined model of client engagement.

- Any promising practice should be able to meet all of the criteria in section 1.1 below.
- Practices that have a direct human services component must meet all of the criteria in the section 1.2 to be considered promising.

1.1 Planning

A) The Case for the Practice
The key questions that underlie any effective intervention are:

- What is the problem you are trying to solve?
- Is there a case for undertaking a practice?
- Why this course of action and not something else? (This is important because sometimes we do things that we think are right, without a strong evidentiary basis.)

A promising practice should be able to demonstrate both the evidence that makes the case for this practice and how the research supports this course of action over another.

B) Mission, Goals, Objectives
Well-defined goals and objectives are important to help an organization measure whether or not they have achieved what they set out to do with a particular program or practice. A promising practice should be able to demonstrate:

- Mission, goals and objectives that are clear and attainable.
- That it maintains fidelity to their mission, goals and objectives.
C) Context
To assess the effectiveness of (and limitations) of any response, it is necessary to frame it in terms of the social, economic and policy contexts that frames the program response. A promising practice should demonstrate how:

- Socio-economic, geographic and historical considerations (high vacancy rates, cost of living, housing affordability, employment rates, etc.) impact on program design and delivery.
- The presence or absence of other services (either mainstream or those within the homelessness sector) impact on the service delivery model.
- The presence or absence of legislation and/or policy impedes or enables the development and implementation of the practice.
- Local contextual factors, including urban/rural differences, built form, the size of the community and the broader service infrastructure, shape the experience of homelessness and the response to it.

D) Planning Process
Practices can develop in different ways and with different degrees of coordination and planning. A promising practice should be able to demonstrate:

- A clear planning process including how the practice was developed, and what agencies, systems and individuals were consulted.
- How target groups are included in planning and implementation.
- That the practice has engaged in strategic planning, and how the results of the planning were used to inform practice development or adaptation.

E) Resources
Despite under-funding in the homelessness sector, it is important that practice delivery not be compromised by a lack of funding. A promising practice should be able to demonstrate:

- Adequate sources of funding.
- An organizational structure and staffing model that support the implementation of the practice.
- Supervision, training, professional development and support that ensure program effectiveness and fidelity to the mission and goals of the practice.

F) Quality Assurance
Program evaluation (see next section) is used to identify the outcomes of a practice; however it is also important to assess the quality of the practice from the perspective of clients and stakeholders. A promising practice should be able to demonstrate:

- Mechanisms that are in place for ongoing feedback and complaints (for non-anti-discriminatory issues).
- That clients’ feedback on the quality of the practice and its outcomes is collected.
- How other stakeholders are involved in providing feedback about the practice.
1.2 Client Engagement
This section applies to practices that have a direct human services component.

A) Identification of Target Population
In order for a practice to be effective, it must be designed for a specific target population, rather than trying to meet everyone’s needs. A promising practice should be able to demonstrate:

- A clearly defined target population (for example, chronically homeless men with a history of incarceration or young people at risk of homelessness).
- A practice design that reflects the needs of its population.
- That the practice fills a gap in services for the target population.
- That the practice undertakes activities that show an understanding of the diversity of their client population and the cultural needs of the communities.

B) Intake and Assessment
When a client’s complex needs are not assessed, or when the programmatic intervention chosen does not match risk and resiliency factors, there is a higher likelihood of poor outcomes. This confirms the critical role that comprehensive assessments play in ensuring that interventions are appropriately targeted to client needs. A promising practice should be able to demonstrate:

- An effective and comprehensive intake system that includes basic information about the client, their background, their needs and other relevant data.
- A shared intake and assessment tool to reduce duplication and support effective service delivery (in communities with multiple services).
- That the organization, through its practice, assesses each client’s level of acuity, risk and resilience in order to match the client to an appropriate level of service and support.

C) Approach to Working with Clients
The importance of the client’s input into how they can best be supported cannot be understated. Initiatives that are identified as promising practices should be client-centered and anti-discriminatory. While this term is often used without rigour, we define a client-centered approach as one where the individual plays a major role in defining their pathway out of homelessness, fully participates in decision-making, is presented with options and is treated with respect at all times. A promising practice should be able to demonstrate:

- A case management approach and how this works.
- A model of service that is client-driven. How does the practice demonstrate that it empowers clients through self-esteem building, involvement in planning and decision-making, education and training? In what other ways is the practice client-driven?

D) Anti-Discriminatory Practice
Clients must feel safe in their environment and not be concerned about being discriminated against or stigmatized because of who they are or what they do. A promising practice will be able to demonstrate:

- That people aren’t stigmatized because of their behaviour, appearance or activities including economic activities (i.e. sex work) and substance use.
- A formal anti-discriminatory policy that is operationalized through an active commitment to reduce and eliminate issues such as racism, sexism and homophobia.
- An effective process for complaints.
2. Evidence of Effectiveness

While within the homelessness sector there are many programs and practices that focus on meeting basic needs, some are more focused on individual, community or structural changes that will reduce or end homelessness as a problem. Promising practices need to be able to demonstrate, through evidence-based research, that the outcomes of the practice match the stated goals. For those practices focusing on change, the research should also demonstrate improvement for the client group and, potentially, the larger community.

This section identifies data and information that can be used to demonstrate that an initiative is achieving its goals. Several measures can be used to show the number of clients who received supports or interventions in order to avoid becoming homeless, the number of homeless people who have been housed, that the circumstances of homeless people have improved, or other measures that would indicate a reduction in homelessness or a decrease in the risk factors that contribute to homelessness. The most efficient way to demonstrate effectiveness is to build program evaluation into the work and to collect data that can be evaluated and used internally or externally (arms-length evaluation). The key here is, once again, generating credible evidence. In addition to quantitative data, qualitative information from service users and other stakeholders must also be collected.
2.1 Program Evaluation

Program evaluation is a research method designed to collect and analyze information and data in order to determine the effectiveness and efficiency of a particular program. Not all organizations will be able to collect and/or use data effectively to demonstrate their impact. This ability is dependent upon capacity and resources for data collection, analysis and report writing, and/or partnerships with academics and/or external evaluation consultants. Nevertheless, organizations can collect some information internally that can inform the effectiveness of the program and contribute to continuous improvement. This information can be used as indicators of the effectiveness of a practice and, when used in combination with additional methods, can be used as part of a rigorous external review.

Indicators and Outcomes

If a practice claims to make an individual or systemic impact, it should be able to demonstrate this through the use of evidence. In using data, there is often confusion between outputs, indicators and outcomes.

**Outputs** are merely numeric descriptions of program or service use. For instance, the number of people who use a service, stay in a shelter or use a food program would all be outputs. While this data is important in that it helps identify levels of service usage, it doesn’t tell you much about program effectiveness or change.

**Indicators** are concrete and specific measurements of specific activities. In evaluating program impact indicators should be designed to measure change. Data is used to determine whether and how your intervention has created change and whether they are aligned with the goals and objectives of your practice. In other words, did something happen as a result of your practice and what data is available to demonstrate this?

In determining promising practices for the homelessness sector, there are at least three kinds of indicators: systems, program and individual level indicators.

1. **System measurement indicators** can be used to show how a practice contributes to an integrated response to homelessness. There are few well-developed evaluation strategies for assessing integrated systems responses. A good example of indicators that are part of a ‘systems of care’ approach can be found in the Calgary Homeless Foundation’s System Planning Framework.

2. **Program indicators** can be used to show that an intervention has had a positive impact on clients. This may involve aggregating individual data.

3. **Individual indicators**, often derived from case management approaches, chart changes in a client’s circumstances, development and capacity and measure progress towards goals. Indicators can include both quantitative and qualitative data.

Outcomes are higher level determinations of the actual changes or impact of an intervention and answer the question of whether and how program goals and objectives have been achieved. They are the reason for doing the work in the first place. Determination of outcomes may require drawing on a number of indicators to make this case. For instance, if a program objective is to increase the housing stability of a group of people in a Housing First program, a range of indicators may be used to support this claim, including: fewer nights in shelters, improvements in health and well-being, reduced contact with law enforcement, etc.

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**Quantitative and Qualitative Data**

Quantitative and qualitative data serve different, but often complementary purposes. Quantitative data allows one to measure and quantify the level of change in an individual, or community, and can produce results that are generalizable. Qualitative data answers different questions and is more useful in capturing and describing processes, individual stories and experiences. Qualitative data can complement quantitative data by augmenting statistical information with client, staff and partner narratives. Without the voice of the service user, it may appear as though the practice is effective, but it actually may not address client needs or be seen as useful or engaging from their perspective. Qualitative methods that include interviews with staff, clients or other stakeholders, focus groups and/or document analyses can help clarify for whom the practice works, and why. In terms of what kind of data can be collected, organizations must comply with information and privacy laws in the province in which they operate. Academic research partners will also have to comply with ethics policies at their institution(s).

**Program Evaluation Summary**

A promising practice will have conducted a program evaluation and be able to demonstrate:

- a) Quantitative and qualitative data that supports the program’s goals in at least one indicator.
- b) Baseline data from which to compare outcomes.
- c) Data that can be used to inform program development or contribute to continuous improvement, including:
  - Positive findings in more than one indicator.
  - Negative findings that have informed practice development or adaptation.
- d) A clear relationship between the goals, methods and outcomes.
- e) That the practice feeds evaluation results into strategic planning.
- f) That the practice moves beyond funder-driven evaluation.

**2.2 Aggregated Data Management**

Data about peoples’ experiences of homelessness can inform solutions to homelessness. When programs collect data that both meets internal needs, but also allows for aggregation and analysis at a systems level, the needs of the clients and their communities can be better understood. Practices could benefit from the use of a system-wide data management tool.

While the presence or absence of integrated data management systems is typically beyond the control of programs or agencies, the point is that when such systems exist, a promising practice should be able to demonstrate how the data it collects contributes to, augments and feeds into the wider data management system.
3. Collaboration and Systems Integration

All practices exist in relation to other practices and activities. In some cases these practices operate in a disconnected, ad-hoc way. In other cases, individual organizations, agencies and practices operate within much more integrated and coordinated models of social service delivery. Systems integration is a method of organizing and delivering services, housing and programs that aims to coordinate resources to ensure community-level results align with long-term goals and ultimately meet client needs effectively. Rather than relying on an organization-by-organization approach, system planning aims to develop an approach for the delivery of initiatives in a purposeful, integrated and strategic manner.

An integrated systems response requires a collaborative community response, something that is usually beyond the scope of any agency or practice. What this all means is that we cannot hold otherwise effective programs or services accountable for the inadequacies of the local or regional response to homelessness. It is also true that while collaboration is a meaningful dimension, many practices that are considered promising or innovative emerged as a result of (or in spite of) a real lack of collaboration in the sector.

Nevertheless, in making the determination of promising practices, it is worth exploring and assessing how well the program is integrated into a broader network of programs, services and activities. Practices are deemed to be promising practices if they can demonstrate the nature of their collaboration (or lack of) with other services, including how the key activities are integrated into the work of other practices (agencies, programs, practices, services), which may include those in the homelessness sector, as well as other sectors (education, corrections, health, etc.).
3.1 Collaboration

Rather than trying to provide every type of service to clients, programs should focus on specific issues for which they have expertise, and work collaboratively with agencies that provide other types of services. A promising practice should be able to demonstrate:

- How the practice works with other practices, services and agencies external to the organization.
- How it works with other practices, services and agencies external to the organization.
- An intake and referral process that enables clients from other services to know about, and access, the program, service or system.
- A process for referring clients to other practices to ensure clients are able to access all the services they might need.
- How it collaborates with other sectors (health, education, immigration, corrections, etc.).
- Specific activities that involve partnership and how the partnership increases effectiveness.
- How the practice has responded to the lack of collaboration or service integration.

3.2 Systems Integration

Demonstration of systems integration is not only a criteria for identifying promising practices at the community level, but can also tell us much about what is happening at the agency or program level.

At the programmatic level, a promising practice should be able to demonstrate how its activities and impacts contribute to system level goals. No one program can end homelessness on its own. An intentional systems approach is critical to ensure interventions are aligned and working towards common community goals without unnecessary duplication or gaps.

A promising practice should be able to demonstrate:

- That it has a defined role in relation to other agencies and services within the system.
- That collaboration between agencies is an agreed upon indicator of systems integration.
- That a data management system is in place to support systems integration.
- That quality assurance measures are in place to ensure that clients flow through the system in an effective way and their needs are being met.
- That evidence of effectiveness is integrated between homelessness-serving agencies and programs, and mainstream services.
- Community-level results.
COMMUNICATING RESULTS

It is important to communicate what works to other homeless-serving agencies, researchers, policy makers, and stakeholders, in order to effect change both within and outside of the sector. This can include reports, articles, knowledge mobilization documents, resources, conference, workshops, presentations, toolkits, etc. and should be initiated by the organization.

As with program evaluation, not all organizations will have the capacity or resources to communicate and disseminate their outcomes effectively. Organizations may choose to work with external researchers or knowledge mobilization specialists in order to have access to people and other resources that can help disseminate the outcomes of an initiative more effectively. Funders need to invest in resources to support practices in this area.

These communication efforts should be able to demonstrate that the practice leads to:

- Policy changes at the broader, systems level.
- The ability for the program to be replicated and adapted by other organizations.

Communication efforts should also include a knowledge mobilization strategy that describes, structures and packages information about the practice in a way that facilitates transferability (i.e., the practice has quality training programs and manuals to enable service providers to adapt the initiative to local culture).

How to Capture and Describe a Promising Practice

The purpose of a case study is to identify, analyze and describe a particular initiative and its effectiveness. Ideally, a case study can become a tool from which others can learn and a basis from which effective initiatives can be adapted or replicated in other communities. We have developed an outline of the key components of a promising practices case study that will identify for a funder or community the key information needed to determine whether and how a program or practice is worthy of adaptation elsewhere.
1) Overview
To situate the case study in the context of the local, regional and national response to homelessness, include the following information:

**Justification for the Intervention**
Why does the initiative matter? What is the evidence used to justify the initiative? The reason for specific interventions is not always obvious, and there needs to be an evidence-based case for the initiative.

**Context for Operating the Practice**
It is important that a case study is framed within a socio-economic context that addresses geography, demographics and relevant elements of the existing community. These key context pieces include:

- A description of the locale and key indicators (population, unemployment rate, affordable housing, etc.).
- A mapping of social service infrastructure. How does the initiative fit within the larger organization, if applicable, or within the broader system of care?
- The relevant features of the policy/funding context (including relations between levels of government) that makes this work a priority, or conversely, create particular challenges.
- The presence or absence of a planned strategic and coordinated response to homelessness.
- An understanding of similar initiatives in other locations/jurisdictions.

2) Program Model
Describe the initiative. How does it work? What are the key components? This should include a description and analysis of:

- The goals, objectives, and underlying philosophy. Clearly lay out what the initiative is trying to accomplish.
- The initiative. What are the main components? Include a description of the key activities.
- The process. How does it work? Describe client flow through the service, and capture variations in individual need. What is the role of staff? What is the role of clients?

- The model fit and congruence. Describe client eligibility, evidence-based intake, assessments, referral and triage forms and processes, as well as staffing component and qualifications. Do all of these align in the program model?

3) Evidence of Effectiveness
Information on the outcomes of the initiative will demonstrate its effectiveness. Data collected from program evaluations, or indicators that show how the initiative is contributing to ending or preventing homelessness, need to be reported in the case study. The following information will help readers understand the impact of the initiative:

**Method of Evaluation**
- How was the evaluation conducted? Was it internal or external? What kind of data was drawn upon?
- What sort of data management system does the organization employ, and does it adequately capture the information the organization needs in order to assess program outcomes?

**Outcomes**
- What individual, program or systems level indicators were used to determine the outcomes of the initiative? What were the key findings? What kind of positive changes or outcomes does the initiative demonstrate? Where is the program unable to demonstrate these?
- Does the data clearly demonstrate the link between program goals, methods and outcomes?

**Quality Assurance**
To understand how effective any initiative is one needs to hear from those who use it. Research on user perspectives can be either quantitative or qualitative in nature. This data may be collected by the agency as part of its own evaluation. This will allow for a specific focus on who the initiative works for and the way in which variables such as gender, sexuality, ethnicity and race are addressed in the practice.
4) Structure of the Initiative
Those who are looking to replicate/adapt an initiative will want to know what is required to successfully implement the initiative including organizational culture, staffing, funding, resources and partnerships.

Resources and Organizational Model
It is important to understand how the organizational culture nurtures a commitment to evaluation, the governance structure of the initiative, how much it costs, how it is funded and how money is allocated. Information should include:

i) Staffing model (including roles and competencies of different staff)
   - How the team works

ii) Organizational relations
   - Relationship of practice to the rest of the organization

iii) Cost of initiative, including funding sources and budget

iv) Organizational culture
   - How much is there a demonstrated match between the organization’s mission and values, and those of the staff who deliver the services?

Partnerships and Collaborations
Partnerships generally describe formalized agreements between organizations, while collaborations involve looser relations that can be just as important. Information in this section should include:

- Who are the partners and in what ways do they contribute to the operation of the initiative?
- What organizations does the initiative collaborate with, and on what projects?
- How does the initiative contribute to a system of care?
- What kind of mainstream institutional supports are present in the community, are they being used, and why or why not?
- What kinds of mainstream institutional supports are absent, and what are the consequences for the program?

5) Key Learnings
One of the main benefits of a case study is that there is a body of knowledge about the intricacies and challenges of program planning and implementation that is useful to others. An effort should be made to identify the key learnings including challenges, strengths and important things to know that will help others successfully adapt a program model. Program indicators and outcomes rarely capture this very important information. Qualitative data is particularly essential in this case.

- What qualities of leadership enabled program development and what key relationships provided the catalyst for change?
- Was the program or approach inspired by an awareness of other existing models and how was information obtained, integrated and adapted? Were key changes to the approach important and why?
- How transferable is this initiative? How does running the practice in this city or town create opportunities/challenges?
- In some cases, significant organizational change is required to implement a new approach. How was this managed?
- Are there any factors particular to the local situation or context that either enabled or hindered progress?

6) Conclusion
The final section should include an analysis of the effectiveness of the initiative including an assessment of the initiative against the framework for promising practices. Show how the program demonstrates:

- Fidelity to the philosophy, goals and objectives of the program
- Program effectiveness
CONCLUSION

In order to truly make a significant impact on homelessness, it is crucial that funding decisions be based on the best evidence possible. Across Canada, communities are developing and implementing practices that effectively reduce or prevent homelessness, however they often lack the resources to disseminate information about the practice and its effects in a way that would allow other communities to replicate and adapt the service. By investing in program evaluation and dissemination strategies, efforts to end homelessness can be informed by what is known to be effective in ending homelessness.

_A Framework for Designing and Implementing Promising Practices Research_ is designed to assist communities and funders to identify, assess and communicate information about interventions that have been demonstrated to be effective in reducing or preventing homelessness.

While this framework focuses on identifying promising practices at the program level, there is also a need to develop tools to evaluate systems level responses and the impact of policy. As our knowledge about systems level responses develops for different kinds of communities, the Canadian Homelessness Research Network will endeavor to develop tools and resources to assist communities in measuring impact.

This framework is designed to be read in conjunction with _What Works and For Whom? PART 1 - A Hierarchy of Evidence for Promising Practices Research_. In Part 1, the differences between ‘emerging’, ‘promising’ and ‘best’ practices were explored. Additionally, detailed information about the types of evidence or studies that fit each category was presented. In this document we move towards providing a comprehensive understanding of the steps and components required for programs to ensure that they are ‘promising practices’.