

Making Minimal Rules Work Checklist¹

1. Rules have a clear connection to agency's mission and core values
 - a) The shelter program has a clearly articulated mission and values. The Mission or values speak to the atmosphere staff hopes to create in the shelter, and the program's commitment to survivor centered advocacy.
 - b) The staff owns and articulates the mission and values. Each person understands the mission and how it informs the atmosphere, the spirit in which actions are taken and decision making.
 - c) The agency/program mission and values shape the application process and interviews include a values screen which will identify fit and comfort with the agency's mission and core values.
 - d) Ongoing in-service trainings address not only tasks but also the mission and core values of the program, and ways staff can embody these in all their actions.

2. The program makes time for routine reflection and reevaluation
 - a) Program staff have time for self-reflection as a regular part of their weekly and monthly routines. Agency yearly routines include staff retreats and designated time to evaluate program mission, values and policies.
 - b) The program implements a regular feedback loop for survivors who have used the program to express freely what they found supportive and what they found unhelpful. Leadership has a commitment to make use of this feedback to help keep programs on track with the needs and thoughts of the people using the program.

3. Whenever possible, the program seeks to create a physical environment that minimizes conflicts and makes it easy for residents to succeed
 - a) When conflicts or issues arise regularly, the program examines how the building, policies, or procedures can be improved to minimize the issue. (For example, if residents frequently complain about noise levels, physical fixes to control slamming doors, increase soundproofing are more effective and less controlling than requiring residents to change their behavior.)
 - b) The program employs physical design solutions to ease communal living, increase harmony, support parenting in shelter and ensure security. (For more on this, please see <http://buildingdignity.wscadv.org>)

¹ This section is adapted from Margaret Leonard's essay "Reflections on Shelter Rules" in *Parenting in Public* by Donna Haig Friedman (Columbia University Press, 2000), pages 152-156

4. A healthy work environment

- a) Supervisors model a commitment to trying to making the program work for each resident, staying flexible, trying lots of alternatives, learning, and maintaining a compassionate and nonjudgmental point of view.
- b) Frontline advocates have emotional support, access to training, time to do work outside the shelter in the community, reasonable hours, and wages that enable good self care. These all work to help staff keep in touch with the “big picture” and work positively with shelter residents.
- c) Leadership actively balances commitments to staff and resident input, mission and values, and openness to change.

5. Survivor centered advocacy and conversation are valued over rule enforcement. Staff seeks to create conversations rather than impose consequences

- a) Staff understand that when a survivor engages in problematic behavior, it is a great time to find out what the real needs are; and that this requires conversation, not consequences.
- b) Staff and leadership maintain humility about their capacity to know what will make the shelter work for the families in it; an ongoing commitment exists to listening to and learning from residents.
- c) Advocates regularly engage residents, sharing with them the spirit and intent of rules and guidelines, and being open to their articulation of what makes communal living work well for them, and what makes it difficult.
- d) Highly functional and well facilitated house meetings create a space for residents to articulate their hopes and expectations for the living environment, and to get support for problem solving.

6. Expertise and insight are available through strong collaborations and a diverse staff

- a) Advocates have clarity regarding resources and options for residents within the community.
- b) The agency builds strong collaborations with community providers who can provide assistance and consultation when residents have mental health, substance abuse or other issues which make communal living a challenge.
- c) Routine work with parents includes processes to plan for children’s needs, particularly when substance abuse is an issue. (For example, If staff knows who to call or where children should go if the mother needs treatment or disappears, this can alleviate anxieties and facilitate the program’s flexibility in responding to the needs of the individual resident.) See WSCADV’s Supporting Parenting Checklist ([link](#)) for more on this.
- d) Staff includes one or more people with chemical dependency expertise to provide support to residents in recovery; get residents and the program connected to resources, and to provide consultation to other staff.

7. Clear, respectful, trauma-sensitive communications with residents

- a) All the written material given to residents, including rules/guidelines invites cooperation, collaboration and mutual accountability in tone and wording.
- b) Advocates assess each resident's readiness to receive information during the first few days; and know new residents may not be ready to hear about and remember all the rules and routines when they first arrive.
- c) Routine processes for intake are trauma-sensitive and acknowledge that people can only take in so much information at one time. Staff does not expect residents to fully take in or read the information given to them about rules and how the house runs.
- d) Information and expectations about communal living (what to do with dirty diapers, chores) is clearly distinguished from information about behaviors that clearly threaten safety (i.e., threatening someone with a weapon, cooking meth in the kitchen) and might lead to being asked to leave the program.
- e) The response to behavior that does not harmonize with group living comes from a place of understanding that residents need information and does not assume that residents willfully and knowingly break rules.
- f) Routine practices ensure that literacy and language access are not barriers to understanding how the program works. Rules are explained verbally. When staff cannot communicate with residents in their primary language, discussions about rules and communal living take place with interpretation.
- g) Staff frame problems in terms of fit with the program instead of personal failure; staff avoid judging residents in their conversations with residents and with each other.