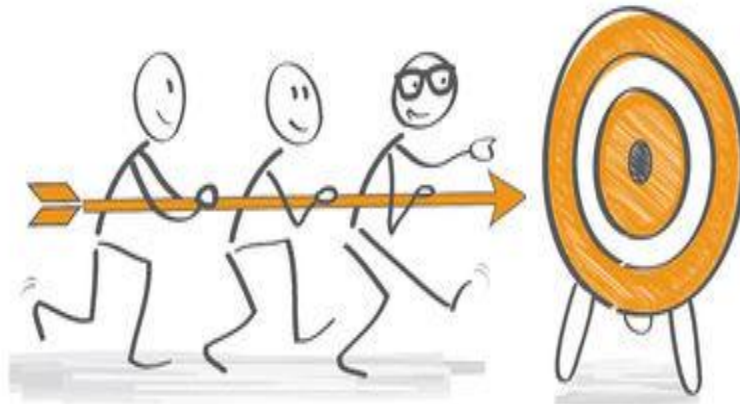


*Training and Consultation Program for Homeless Service  
Providers to Support Improved Performance*

Final Report and Recommendations for the  
Homeless Advisory Board of the Cleveland/Cuyahoga Continuum of Care  
Project Dates: January through May 2018



Prepared by Housing Innovations LLC

## Introduction

In late 2017, the Cuyahoga County Continuum of Care (CoC) engaged Housing Innovations (HI) to deliver a program of training and technical assistance to homeless service providers. The goal of the project was to improve their capacity to deliver high quality services that meet or exceed the community's established system and program performance measures. In addition to a series of group trainings sessions, HI provided consultation to individual programs to support application of the training concepts. Through training evaluations, observation, meetings and review of the Housing First standards with six programs, HI also assessed their capacity to implement these practices and achieve the desired outcomes.

Suzanne Wagner and Andrea White from Housing Innovations delivered the services for this project. The consultation included trainings for direct care and supervisory staff in evidence-based practices in homelessness, meetings with leadership staff from homeless agencies and other key informants, review of program and systems data, consultative/observation visits with staff from six shelters/RRH providers, and follow up technical assistance calls with leadership staff from each agency.

Project planning began in late 2017 and trainings were conducted in February and April. In May, HI conducted visits and consultation meetings with five programs and provided follow-up consultations over the telephone with shelter leadership staff. The report that follows summarizes the project's activities, reviews key findings and provides systems-level recommendations, as well as recommendations for housing-focused case management and stabilization services on the program level.

## Background

Nationally and locally, homeless programs have been in transformation over the past decade to develop services that are performance-based and achieve results in the most cost-effective manner possible. The US Department of Housing and Urban Development (HUD) has established a set of systems performance measures (SPMs) for communities that are heavily factored into the annual competitive funding application process for over \$2 billion in federal homeless resources. These measures are primarily focused on outcomes (as opposed to outputs) and include:

- ) Preventing people from entering the homeless system through shelter diversion efforts
- ) Reducing the length of time people are homeless and rapidly exiting from shelter
- ) Connecting people to permanent housing and assisting them to maintain it
- ) Improving income through benefits advocacy and employment assistance
- ) Ensuring people do not return to homelessness after leaving the homeless system by connecting with community-supports and services
- ) Reducing the number on homeless persons at a point in time and annually<sup>1</sup>

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<sup>1</sup> US Department of Housing and Urban Development. 2015. System Performance Measures Introductory Guide. <https://www.hudexchange.info/resource/3894/system-performance-measures-introductory-guide/>

At the same time, Housing First (HF), an evidence-based practice originally developed in permanent supportive housing, has been defined and adapted for other homeless programs including outreach, emergency shelter, transitional housing and rapid re-housing. In fact, the US Department of Housing and Urban Development has established standards for the implementation of the HF model in the range of homeless program types. See below for a link to the standards.<sup>2</sup>

There is mounting evidence that a “Housing First” (HF) approach is an effective intervention with a substantial majority of homeless households. In this approach, programs assist participants to access shelter and housing without pre-conditions such as income or treatment compliance, quickly locate permanent housing, and provide or arrange for supports pre- and post-housing to support stable tenancy. Teaching tenancy skills and how to meet lease obligations; assistance with housing selection and search and connecting to income and other supports are cornerstones of the practice.

These changes mean that many homeless programs have needed to “shift gears” and focus on housing exit planning, tenancy education, navigating landlords and other housing resources, and increasing connections with community resources and supports. At the same time, homeless people entering the system are presenting with complex needs that present challenges staff may not have skills or knowledge to address. In fact, among the single homeless population, some of the most complex and vulnerable people in the entire community are using the emergency shelter system. Additionally, with the continued implementation of diversion efforts, providers report that the families they are serving are higher need.

For decades, Cuyahoga County has had a homeless system that is reflective, adaptive, courageous, innovative and an early adopter of evidence-based and promising practices. From the HF Permanent Supportive Housing initiative in the mid-1990’s to the implementation of diversion, rapid re-housing and Central Intake in 2009 to the re-tooling of transitional housing over the last five years and the development of a plan to end youth homelessness in 2015, the community has been a leader nationally in testing and refining state-of-the-art solutions to homelessness that are both efficient and effective.

The community has been pioneering in its efforts to reduce the number of homeless people over time (including functionally ending Veteran homelessness and nearly ending chronic homelessness), re-working its inventory of housing and services to meet emerging needs, and using a data-driven approach to evaluating interventions and refining them accordingly. Indeed, the provision of this program of training and technical assistance focused specifically on improvement in SPM results is the first we have encountered in our consultation work around the country.

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<sup>2</sup> US Department of Housing and Urban Development. 2017. Housing First Assessment Tool. <https://www.hudexchange.info/resource/5294/housing-first-assessment-tool/>

## Summary of Project Activities

### Training:

A total of four full days of training were provided over a two-month period. Each was a two-day event with one day targeted to programs working with single adults and the other day for family programs. The training content was planned in consultation with the Office of Homeless Services. Sessions included direct service, supervisory and some managerial staff. After the first set of trainings, the trainers conducted a session with agency leadership staff to debrief the sessions and discuss agency needs regarding capacity-building.

Topics reviewed in the trainings included:

- ) Overview of Housing Stabilization Services
- ) Housing First
- ) Engagement Strategies and Person-Centered Planning
- ) Trauma-Informed Practice
- ) Program Rules and Expectations
- ) Assessment Domains
- ) Housing Stabilization Planning
- ) Motivational Interviewing Strategies
- ) Teaching Tenancy Skills, Rights and Responsibilities
- ) Work with Landlords to Promote Housing Stability
- ) Eviction Prevention and Harm Reduction
- ) Engaging Community Resources

A link to all the training materials can be found below.

<https://drive.google.com/open?id=1JbyeHmpoOdjFzxbMCazs0tG7ZO0BtpLq>

Training evaluations were completed by each participant after each day of training. The questionnaire is included as Appendix 1.

- ) For the February training for staff working with single adults, 60 evaluation forms were completed.
- ) For the February training for staff working with families, 59 evaluation forms were completed.
- ) For the April training for staff working with single adults, 31 evaluation forms were completed.
- ) For the April training for staff working with families, 47 evaluation forms were completed.

The training evaluation summaries for each day of training are embedded below.



Singles Tg Evaluation  
Summary 2-2018.pdf



Family Tg Evaluation  
Summary 2-2018.pdf



Singles Tg Evaluation  
Summary 4-2018.pdf



Family Tg 4-2018  
Evaluation Summary.pdf

Common themes emerged in response to the question about what people “will do differently in their work as a result of the training” (both from the written evaluations as well as individual program meetings). These include:

- ) Have more empathy for clients, be hopeful for them
- ) Listen to clients
- ) Use engagement strategies
- ) Be clear about my role
- ) Assess housing and homelessness history more thoroughly
- ) Rethink my approach to clients’ goals
- ) Implement warm handoffs between shelter and rapid re-housing staff
- ) Add lease compliance to life skills training
- ) Use motivational techniques
- ) Look for tenant education curriculum to implement
- ) Improve aftercare services
- ) More engagement with landlords

In response to the question about “additional information or training needed to implement the training practices”, again, common themes emerged in written and verbal feedback. These include:

- ) More and deeper training on Housing First, Harm Reduction
- ) Information about homeless youth, mental illness
- ) Balancing trauma-informed care and accountability/expectations for behavior
- ) Regular meetings with other providers to share practices, solutions; possibly f/u session on these trainings
- ) “Institutionalize” the warm handoff between shelter, RRH and Eden staff
- ) Standardized forms, system-wide release of information
- ) Continued conversations with other providers about what is working/not in their programs

#### **Consultation Visits to Programs and Follow-up Debriefs:**

HI also visited and met with staff from five programs for a half-day each. The purpose of the visit was to discuss follow up to the trainings, review and verbally complete the HF Standards Assessment Tool, discuss individual program performance on the SPMs, visit and tour the facilities, interview clients (where possible) and meet with leadership and direct services staff for consultation and questions.

In preparation for these meetings HI reviewed each program’s CY2017 HUD Annual Performance Report (APR), organizational charts, job descriptions, assessments and service plans, program rules and other relevant documents provided by the agencies. The agenda for these meetings is included in Appendix 2.

Shelters/agencies visited by HI are listed below.<sup>3</sup>

- ) Family Promise
- ) LMM - 2100 Lakeside
- ) Northpoint
- ) Westside Catholic
- ) Zelma George

Shortly after these visits, follow up calls were scheduled with each program to discuss any additional questions and provide specific recommendations for the agencies regarding ongoing program development and strategies to increase success on the SPMs. All agencies reported that the consultations were useful and appreciated the opportunity to discuss individual agency issues in confidence with HI.

### **Findings from the Consultation and System-Wide Recommendations**

Overall, participating agencies embraced this program of training and consultation and were appreciative of the opportunity to come together and network, learn about new tools and strategies and problem-solve with the trainers and each other. A number of agencies implemented practices and tools from the training immediately after the sessions. All agencies expressed a desire to have more tools, policies and processes standardized across the system regarding service delivery in shelter and RRH. Participation levels in the trainings varied across agencies and some had only two or three representatives attend the trainings; others had as many as ten to fifteen. The section that follows describes key findings followed by recommendations for the community to consider as a system.

#### **Understanding the Goals of the Homeless System**

- ) All agencies were familiar with the HUD SPMs and Housing First models and understand that their individual programs are responsible for meeting the measures as a community. However, the level of understanding, frequency of review and exposure to the actual performance results among all levels of staff varies.
- ) As noted, the CY 2017 HUD Annual Performance Reports (APR) for each shelter were reviewed by HI and referenced/explored in consultation visits and follow up calls. The APR includes the majority of the HUD SPMs but is not a user friendly, easy to read document. It seems that most staff had not looked at their APR data prior to the consultation.
  - o In order to continue to support a data-driven approach to program management, an excerpted quarterly report from the APR that contain just the SPMs and maybe two or three other indicators would be helpful. This report should be visually accessible and include charts and graphs that will help staff who have different learning styles and don't necessarily respond to data tables be able to integrate the information.

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<sup>3</sup> HI conducted a review of Norma Herr Women's Center earlier in 2018 and drafted a separate report and recommendations for that shelter program.

- ) Every shelter program was clear that the primary goal for clients was to move to housing as rapidly as possible. Each program described the intended length of stay differently to clients entering shelter. Some say 30 days; some say longer. As shelters shift across the country, some programs are not defining a fixed or intended length of stay. Instead, they are stating the goal is to help the person move to permanent housing as soon as possible. Other communities use a process to authorize length of stay for a week or two at a time. This is somewhat labor-intensive but reinforces the process and message with clients that the goal is rapid exit.
  - o The community should consider crafting a message about length of stay that can be used by all programs uniformly (with minor adaptations) when clients enter their programs.

### **Making Changes and Shifting to Housing First**

- ) Agencies have made changes but some are still reluctant about the new practice models and approaches. Programs have embraced HF in the programs in varying levels. Some programs are fully on board but others still struggle with letting go of the concepts of clients' "earning" assistance and the role of staff as rule enforcers that motivate change through consequences as opposed to incentives.
- ) Some agencies also seem to believe that Housing First means "anything goes" and are not aware that there are expectations for both clients and staff in this approach. Additionally, some (but not all) programs are struggling to engage clients when services are not required. Shifting to an approach where the onus on the program is to make services attractive to the clients has been a challenge for them.
  - o Implementing the HF approach requires buy-in from all levels of staff and increased trainings/consultation for executive and managerial staff on HF programming and how to incorporate it into their agency's work may be beneficial.
  - o Additionally, a number of providers expressed that sharing successful strategies in the implementation of HF across agencies on both on the managerial and direct service staff levels would be useful and a few staff mentioned "shadowing" at other agencies' programs. Some communities are using the "Communities of Practice" concept which offers facilitated group learning through regular convening and focused discussions. In these communities, information and resources are shared, successes as well as failures are examined for lessons learned, and peer to peer learning is encouraged.<sup>4</sup>

### **Staffing and Personnel**

- ) In general, reported caseloads are reasonable – around 20-25 in most cases. However, programs vary in the level of professional/seasoned staff engaged in oversight of supportive service delivery. Some agencies could benefit from hiring program supervisory staff who are professionals or seasoned social services managers. Additionally, there are staff who cannot shift to a strengths-based motivational approach with clients, they are focused on client's limitations and preventing them from "getting over". These staff may need to move on.
- ) The staffing pattern at some programs reflected a separation of roles between operations and support services. In these cases, there was a case management supervisor and shelter operations coordinator who work together to run the program and facility. This enabled the program to

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<sup>4</sup> See Eckert, P. 2006. *Communities of Practice* in the Encyclopedia of Language and Linguistics. Stanford University. <http://web.stanford.edu/~eckert/PDF/eckert2006.pdf>

ensure adequate oversight of all functions and mimics the separation of roles in housing between landlord/property manager and services provider, thereby helping to prepare people for “life after shelter” as a tenant. Additionally, this removes case managers from the role of “rule enforcer” which can (and usually does) undermine the establishment of the open, trusting, helping relationship required to motivate and support people through the housing planning and access processes.

- The community should consider setting system wide standards for job titles and descriptions (including qualifications), caseload ratios, supervisor/supervisee ratios and required trainings.

### **Housing Assessment, Planning and Access and Stabilization**

- ) A number of programs have adopted a housing-focused case management approach. This has been reflected in changes to job titles to capture housing responsibilities, the re-naming of service plans as “exit” or “housing” plans, beginning discussions about exit from shelter at entry and activities to teach tenant skills and prepare people to be leaseholders. Practice across agencies varies in terms of frequency of assessments, housing plans and expectation for contacts.
- ) There are already a large number of standards and required policies and procedures that the State and CoC already have in place. There are some gaps in these standards, primarily in the area of case management service expectations.
  - Most agencies expressed interest in community-wide standards for these activities as well as standardized documentation tools (e.g., assessment forms, service plans). Appendix 3 includes a list of recommended shelter program policies and indicates which are already included in the State of Ohio and Cuyahoga CoC standards and which are not. The CoC should prioritize among these policies and create community-wide standards, especially for conducting assessments and establishing and updating housing/exit plans.
- ) Most programs have adopted the recommended practice of keeping rules to a short list focused on ensuring safety and reinforcing standard housing/tenancy expectations.
  - The community may want to consider establishing a common set of rules that all shelters can use as a base with additional rules added only when there is a clear need.
- ) Coordination between the shelters, RRH providers and Eden staff was a topic of discussion in every training session as well as the individual consultations. Staff are eager to implement some of these ideas.
  - A number of recommendations surfaced around coordination especially as regards the “warm handoff” from one staff person/program to another. One was that the case manager meet with the client with the Eden Housing Locator to be a part of the planning process. Another was that the RRH case manager meet with the client, the shelter case manager and Eden staff prior to the person moving into housing (although sometimes this can happen very quickly in which case the meeting can be held post-housing. Detailing and formalizing the roles and these processes was almost universally endorsed. Processes should include the roles of all staff and expected level of involvement with people.
- ) Challenges in obtaining furniture, helping people move and with household set up came up repeatedly. It is difficult for people to settle into housing quickly if they don’t have basic



furnishings and a way to get them into their units. Each agency is doing it differently, with some more successful than others. Particularly for chronically homeless people, having the basics can go a long way toward helping them see a future for themselves in housing and be motivated to maintain it.

- There was overwhelming support for the creation of a centralized resource for furniture. The New Orleans CoC and Seattle/King county CoC have both established furniture warehouses that serve the entire homeless system. While it takes time, money and effort to develop such a resources, current efforts are uneven and it can be hard for people to invest in and commit to their homes if they don't feel like a home.

### **Program Discharges**

) There was near universal agreement that the use of “mediation” for clients at risk of shelter discharge was not that helpful. The involvement of a third party (Central Intake) in the discussions is helpful; but the framing of the meeting as a “mediation” seems problematic. If clients do not agree to meet, the intervention does not happen. Other communities have used a case conferencing model involving the Coordinated Entry entity, shelter supervisory and line staff and the client to explore and problem-solve in these situations, especially since discharge from the program will likely result in a return to the shelter system or street homelessness. The client is invited to attend; but participation is not required.

- The CoC should consider using a ‘case conferencing’ structure that includes Central Intake to review and determine next steps when a shelter resident is at risk of discharge to homelessness or refuses to engage in a housing plan or otherwise take steps to resolve his/her homelessness.
  - The purpose of the case conference would be to discuss interventions used to date; identify and leverage relationships and resources that may be helpful at other programs; and identify ways to resolve barriers to remaining in shelter and working a housing plan. The meeting may also identify a need for intervention by the County or CoC in securing resources or advocating for policy change and there should be a mechanism in place for follow up as needed.
  - The case conference should be a requirement for shelter staff even if the client declines to participate.

## Recommendations for Shelter Programming to Provide Housing-Focused Services

This section describes recommendations for program development at the agency level. Most agencies are implementing some or all of these practices.

1. Work to continue to create the safest environment possible.
  - a. Ensure that daily check in and out procedures enable staff to know who is in the facility at all times. (At 2100 Lakeside, LMM is using a fingerprint scanner that makes it efficient and relatively easy to manage check in and check out).
  - b. Limit shelter rules to a clear, brief list that focus on keeping the environment safe.<sup>5</sup> The list of rules should be short enough that staff and clients can easily memorize it, and limited to behaviors that present significant health and safety risks, e.g., weapons possession, violence, drug sales, and other criminal activities.
  - c. Reinforce norms and expectations for respect among all in the community, safety, kindness, mutual aid and support.
  - d. Ensure that staff are trained to mediate and de-escalate situations with clients as well as in person-centered planning, trauma-informed approaches and motivational techniques.
  - e. At a minimum, ensure that clients have a locked place to store valuables. Where people have private rooms, a way to lock the room at night can be especially important for people who have experienced trauma.
  
2. Environmentalize and Incentivize Housing Planning, Search and Finding
  - a. Ensure all staff understand their roles in helping the clients plan for and access housing. Incorporate these expectations into job descriptions and daily tasks and responsibilities.
  - b. Aside from responding to requests around basic needs, all staff should be having housing conversations with the clients (not just case managers/housing navigators). Monitors/advocates can be charged with searching online for apartment listings and other related resources and posting and directing people to them. They can also conduct brief housing workshops and be assigned to check in with the clients on a regular basis regarding housing-related activities and document them.
  - c. During focus groups, the clients requested more information on paper about housing as well as access to more computers for housing and employment searches.

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<sup>5</sup> In 2007 the Missouri Coalition Against Domestic and Sexual Violence (MCADSV) began a statewide project to examine and address the assumption that rules must exist in order to operate a shelter. The project sought to answer the question—“What would happen if there weren’t rules?” and the goal was to find a better way to welcome residents into shelter where they could experience autonomy despite the constraints of a communal living environment. Though intended primarily as a resource for domestic violence shelters, their how-to guide provides relevant resources for other types of shelters, including examples of challenges and successes, suggestions for practical ways to reduce or eliminate rules, a step-by-step approach to start a dialogue about rules within organizations, and a sample resident handbook. The guide is available at: [http://vawnet.org/sites/default/files/materials/files/2016-07/NRCDV\\_ShelterRules\\_0.pdf](http://vawnet.org/sites/default/files/materials/files/2016-07/NRCDV_ShelterRules_0.pdf)

- Provide materials so the clients can also engage on their own in housing education and search.
  - Seek to provide more access to written materials about housing as well as computers and other resources needed for housing search. This task could be assigned to Shelter Specialists/Monitors working on the 3<sup>rd</sup> shift.
- d. Accompany clients on the first (or first few) apartment viewings. Many of the woman have never had their own apartment or haven't had a lease in their own name in a while. Accompanying people on the first apartment viewing (and more if needed) enables staff to assess the person's skills in housing search and an opportunity to debrief and review the housing plan. Be prepared to accompany some people on multiple apartment viewings, especially more vulnerable/less skilled people. Some people will need Support to connect people to community resources is also a core element of Critical Time Intervention, an evidence-based practice to assist people in making transitions. See [www.criticaltime.org](http://www.criticaltime.org).
- e. Consider establishing a way to track progress on housing milestones and recognize successes both one on one and publicly. Log housing efforts made by the clients.
- f. Incentivize housing activities and celebrate move-outs as well as accomplishments along the way to housing exits. Provide positive reinforcement for working a housing plan.
- g. Offer a Housing Workshop Series that address the following subjects:
- ) Housing options and expectations
  - ) Tips on housing search
  - ) Rights and responsibilities of tenancy
  - ) Preparing for interviews with Landlords
  - ) Stretching your budget – resources for food, clothing,
- Offer the housing class daily for 30-45 minutes and rotate through topics. (Programs that occur in a weekly series send the message that this is a multi-week program.) Offer these in the evening as well as the morning/daytime.
  - Lutheran Metropolitan Ministries already runs a similar set of classes and might be a resource to assist in setting this up.
  - Another resource for tools and worksheets that can be used in these workshops can be found at the link below, a renter's toolkit put together by the Region of Waterloo in Canada.
    - ) [https://www.regionofwaterloo.ca/en/living-here/the-renter\\_s-toolkit.aspx](https://www.regionofwaterloo.ca/en/living-here/the-renter_s-toolkit.aspx)
  - Another useful resource is from the University of Minnesota Extension Program. Their Rentwise curriculum can be found at the link below
    - ) <https://www.extension.umn.edu/family/personal-finance/housing/rentwise/curriculum>
- h. Ensure that shelter and RRH staff are engaging with landlords, have an understanding of their roles with landlords and explain that to clients.
- i. Limit sponsored social and recreational activities and if possible, connect them into housing. For example, a writing class could focus on stories/ideas of home.

3. Implement a housing-focused case management approach. (See Appendix 4 for general housing-focused case management recommendations.)
  - a. All activities in the shelter and the majority of staff efforts should be oriented to the major goal of the program to help residents quickly and permanently end their homelessness by providing a safe environment that meets clients' basic needs.
  - b. The orientation and welcome message should reinforce that the goal is to resolve the housing crisis, help people move out to housing as quickly as possible as well as meet basic needs.
    - Staff should consider avoiding talking about a fixed length of stay if possible. When people ask how long they can stay, staff should explain that the goal is as brief as possible to figure out a housing solution.
    - Staff should also explain to the clients about the need to keep shelter stays as brief as possible to be able to accommodate the need of all the clients in the system as there are more clients than beds.
    - Daily orientations should continue and are an opportunity to meet new and orient them to the shelter's goals, norms, expectations and services.
  - c. Use assertive engagement strategies and seek to connect with the clients around housing search, preferences, needs and options.
    - A useful tool to help structure conversations around housing preferences and needs is embedded below.



Housing Planning  
Framework.docx

- d. Ensure that all shelter staff including monitors, advocates, navigators etc. understand their role in the program's goal to help people access housing and are engaging the clients in discussions of housing as often as possible, including casual check ins as well as more formal conversations.
- e. Case management coverage should extend into the early evenings and some weekend time to accommodate people who are working or otherwise engaged during regular business hours.
- f. Conduct a one-on-one housing assessment with each person who does not leave the shelter on their own within a few (3-5) days.
  - In this assessment, learn the person's plans for resolving the housing crisis.
  - Assess both housing and homelessness history as well as barriers to access and stability.
    - ) Understand causes of homelessness, history as a leaseholder and supports in previous housing situations.
    - ) Include an assessment of each person's experience in searching for, securing and maintaining a home.
  - Include discussions of housing planning round preferences and needs using the tool referenced above in item C.

- Prepare a basic genogram for each person to assess family relationship and supports. During the site visit, every woman the assessment team talked with made mention of children, siblings, grandchildren, parents and/or friends and significant others. This should include all the people that the individual considers her family, whether or not there are legal or biological connections. Below is a link to some information about genograms:
  - ) <https://www.genopro.com/genogram/>
- Ensure that housing assessments review all possible options a person may have including family and friends. Even if people are slated RRH, living alone may not be financially or otherwise viable for the long-term.
- Explore housing clients with roommate(s) or with or near friends/family and/or significant others.
  - ) RRH resources can be used to re-unite a person with family and secure a new dwelling for the entire family unit.
  - ) Note that the US department of Housing and Urban Development has a definition of family that is broad and inclusive.<sup>6</sup>
- g. Based on the housing assessment, continue to develop housing plans with all of the clients in the shelter within a two-week period from the data of entry.
  - Housing plans should be developed mutually with the client. They should include the housing goal and the tasks and resources needed to achieve that goal.
  - Consider waiting a specified number of days to develop formal housing plans and provide light-touch assistance for clients who are new to the system for the first time.
    - ) This enables people who can to self-resolve their housing crisis.
    - ) Light touch assistance includes providing apartment listings, tips on finding an apartment, computer access, referrals to resources etc.
  - Assist in facilitating “self-resolution” of housing crises. Forty-three percent of the clients who used the shelter last year left within 30 days, likely “self-resolving” their homelessness without a homeless system resource. Be sure to explore how participants think they will solve this crisis and support self-resolution. While having RRH for the participants has been a great resource for many, it is not unlimited and not everyone needs it.
  - Assist all interested clients to sign up for Section 8, Public Housing, HUD-assisted units and other affordable properties. While that may not be the shelter exit destination, it may be an option for the future. The reality is that many of these clients will always struggle financially and a subsidized unit would be of great long-term benefit.

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<sup>6</sup> “Family includes, but is not limited to, the following, regardless of actual or perceived sexual orientation, gender identity, or marital status: (1) A single person, who may be an elderly person, displaced person, disabled person, near-elderly person, or any other single person; or (2) A group of persons residing together, including: (i) A family with or without children; elderly, near-elderly, disabled, remaining member of tenant family.” 24 CFR 5.403.

- ) This is also an opportunity to reinforce the message that the *next* place that a person moves to is not the *last* place they will live.
- h. Once housing plans have been established, check in at least weekly with each person on progress and update plans at least bi-weekly to reinforce the message that case management is housing-focused and increase the sense of urgency about the plan.
    - Some shelters have begun calling these plans “exit plans” which reinforces the core message about the shelter’s purpose.
    - While services are ultimately voluntary for the participants, they are not for the staff. Staff should use assertive strategies to engage with the clients and be relentless in their efforts to support the clients in a successful housing exit.
    - Track progress on housing plans with the client and in supervisory meetings.
  - i. To reinforce the structure people will have in housing where the landlord is not the person’s case manager, implement a staff supervision structure that separates the roles of case manager from shelter rule enforcer. Many agencies are moving towards or have established separate roles for an Operations Coordinator and Case Management Supervisor/Coordinator.
4. Ensure connections to community resources to meet the varied and diverse needs of program’s target populations.
- a. Ensure the agency has an extensive network of community resources to meet the various service needs of the persons in the programs.
  - b. Assist the clients to make connections to community resources outside of the shelter. Offer to accompany on first appointment/visit if possible to support the person, assess how the person negotiates for services and to coach on getting needs met.
    - Since the clients will ultimately not be living at the shelter, supporting them in accessing and engaging successfully with community-based services and supports should be a core function for staff.
  - c. Continue to incorporate medical services and professionals and geriatric specialists into the staffing or resources engaged to address the aging, medically-needy population.
  - d. Ensure that adequate mental health services/capacity are available to assist with assessment and linkages to community-based case management.
  - e. Continue to develop/build out resources for elderly/aging population including Senior Housing, 202 properties, assisted living, nursing homes
  - f. Continue efforts to engage Adult Protective Services. APS should assist with connections to resources for aging and vulnerable adults in shelter. Staff noted that in Lorain County, APS removes people from shelter who are over age 65. Efforts to date to engage Cuyahoga APS at NHWC were unsuccessful and a formal request from the CoC might help re-start this process.
  - g. Ensure staff on all shifts are trained in identifying the signs of overdoses and either the use of Narcan or the process to access emergency resources.
    - Provide lists of AA/NA and other substance use treatment resources.
    - Build and deepen connections to substance abuse treatment resources including emergency, residential and outpatient programs. Invite providers on site to provide resources, offer classes and otherwise try to engage the clients in services.

- As noted elsewhere, establish the milestones in the housing access process and track and recognize achievements.
5. Adopt Continuous Quality Improvement (CQI) strategies. CQI starts with the belief that any service can be improved, regardless of how effective it may currently be and relies on data-driven decisions to inform ongoing, strategic efforts to make services better. Data are used as a flashlight to illuminate opportunities for improvement rather than as a hammer to punish people or programs. The community uses data extensively to evaluate efforts and plan and modify services and the program should as well. (See Appendix 5 for a description of CQI).
- a. The program should share data in a user-friendly format with all staff regularly (at least quarterly for all staff, bi-weekly for housing navigators) on the following key indicators:
    - Median and average length of stay for leavers
    - Rates of returns to homelessness
    - Rate of exits to permanent housing
    - Increases in income
  - b. Discussion should focus on how to improve on these indicators and set targets for future performance. These data are available in the HUD APR for the program and program managers should be able to run them for various time frames and comparisons.
6. Given the range of conditions and issues experienced by the clients in the homeless system and the expertise required to serve them, staff should be hired with expertise in aging, mental health, substance abuse, medical, geriatrics, and/or youth/young adults and assigned to clients accordingly. Staff should also be trained in understanding and addressing the issues and conditions experienced by the clients in the homeless system.
- a. This includes mental health, substance abuse, cognitive impairments, trauma, late adolescent development, domestic violence, aging, common medical conditions, LGBTQ issues, etc.
  - b. Staff should also receive ongoing training in person-centered planning, harm reduction, motivational interviewing, stages of change, trauma-informed care, de-escalation and mediation techniques, first aid and CPR.
  - c. While it is useful to bring different staff positions together for trainings to improve coordination, session targeted to specific staff such as shelter monitors, case managers program supervisors can allow time for staff to focus on their roles and specific strategies for successfully implementing them.

**Appendix 1. Housing Innovations Training Evaluation**

Date: \_\_\_\_\_ Training/Workshop Topic: \_\_\_\_\_

Title/Position: \_\_\_\_\_ Years working in the Field of Housing/Homelessness: \_\_\_\_\_

How would you rate this training overall?

Poor  Fair  Good  Very Good  Excellent

What was most helpful?

How would you improve the training?

How would you rate the trainer(s)' knowledge of the subject?

Poor  Fair  Good  Very Good  Excellent

How would you rate the trainer's skills at presenting and facilitating?

Poor  Fair  Good  Very Good  Excellent

What will you do differently in your work as a result of this training?

What additional training topics or information are you interested in?



## Appendix 2: Housing Innovations CoC Program Visit Agenda

May 15-17, 2018

Facilitators: Suzanne Wagner and Andrea White

### ***) For Reference: Purpose and Goals of the Housing Innovation Consultation Project***

- *Provide training to improve staff skills in assisting homeless people to rapidly end their homelessness permanently using a Housing First approach across program types/components*
- *Evaluate impact of the training*
- *Report on provider capacity to meet HUD performance standards and recommendations for improvements to agencies providing emergency shelter and rapid rehousing*

### **Agenda**

***Please note that instructions for Agencies are in italics***

#### ***) Meeting with Shelter/Agency Leadership Staff (approx. 30-45 minutes)***

- Review purpose and goals of visit, feedback on training, current successes and challenges in implementing Housing First and meeting Performance Standards, supports needed
- ***Note to Agencies:*** *Please provide a list of all shelter staff with titles and FTE dedicated to the shelter and Job Descriptions for the Shelter Case Manager and Shelter Monitors/Advocate/Specialist positions.*

#### ***) Meeting with Shelter Managers/Directors and Staff to discuss (approx. 45-60 minutes)***

- Feedback on trainings
- Discuss Housing First Standards
- Challenges and successes in implementing the model and meeting the measures
- Supports needed

#### ***) One on One Interviews (Andrea and Suzanne can split up to do these at the same time)***

- Interview with Shelter Client (approx. 20 minutes)
- Interview with Shelter Case Manager (approx. 20 minutes)

#### ***) Review of Documents (approx. 30-40 minutes)***

- 3 Client Service Plans – one initial, one update and one final Service Plan for three different clients
  - ***Note to Agencies:*** *Please print, redact names and have two copies available*
- Review of Shelter Rules and Resident Handbook/Orientation Materials
  - ***Note to Agencies:*** *Please have two hard copies available*

#### ***) Closing Meeting and Schedule F/U Telephone Conference (approx. 10 minutes)***

### Appendix 3: Recommendations for Shelter Policies for Supportive Services/Case Management

There is a fairly extensive set of required policies for emergency shelter that have been promulgated by the State of Ohio and the Cuyahoga Continuum of Care. A helpful worksheet to enable the agency to ensure all required policies are in place and indicate where they can be located is embedded below.



State of Ohio and  
CoC Shelter Standard:

These requirements provide a set of standards for shelter that address a range of operating rules. The existing standards do not address the supportive services/case management services provided by shelters. Agencies and the CoC should focus on developing following policies and procedures (P&P) specifically for the On-Site Supportive Services Program, as distinct from administrative, fiscal, personnel, and shelter operations P&P. The standards that are included in the State of Ohio and CoC regulations are underlined. The other recommended policies are suggestions from the Assessment Team at Housing Innovations.

#### Core Shelter Program Policies and Procedures for the On-Site Service Program

1. Mission and goals, values, expectations and norms of the program
2. Program Outcome Measures
3. Job Descriptions for all staff positions including responsibilities and requirements including:
  - ) Operations Manager/Supervisor
  - ) Services Manager/Supervisor
  - ) Case Manager/Housing Navigator
  - ) Shelter Advocate/Monitor
  - ) Others per the program design
4. Safety
  - ) Check in and out procedures
  - ) Shelter Rules
  - ) Coordination with security company
  - ) Conflict prevention, de-escalation and resolution strategies
5. Intake Process
  - ) Include non-discrimination, equal access and ADA reasonable accommodations
6. Assessment Process and Updates
7. Housing & Services Planning process
8. Housing Location Assistance – apartment search, applications
9. Connections to Community Resources and Supports
  - ) Included processes for referrals to health services other programs and “Warm Handoffs”
10. Discharge
  - ) Planned and unplanned discharge
11. Aftercare
12. Confidentiality

13. Incidents/Emergencies

- ) Medical including basic first aid
- ) Psychiatric
- ) Overdose
- ) Violence
- ) Suicide/Attempt
- ) Property

14. Medications

- ) Include over the counter, prescribed and controlled substances

15. Evacuation and Fire Safety Plans

16. Infection Prevention, Control and Universal Precautions Policy

17. Staff Training Requirements

18. Appendices:

- ) Shelter Rules
- ) Shelter Guest Handbook
- ) Guest Rights and Responsibilities
- ) Guest/Client Grievance Policy
- ) Documentation and Forms such as Logs, Progress Notes, Assessment Form, Housing/Exit/Service Plan, etc.

## Appendix 4: General Housing Focused Case Management Recommendations

As the national homeless service and policy landscape has shifted, shelters are in transformation across America. Shelters are encouraged to use Housing First Practices by removing barriers to entry, focusing on housing planning and stabilization, education on tenancy skills and making length of stay as brief as possible. HUD recently released HF standards for emergency shelter which can be found at the link in the footnote below<sup>7</sup>. These standards also note the use of best practices such as person-centered planning, strengths-base approaches, trauma informed care, harm reduction and motivational interviewing.

### Housing-focused Case Management

People commonly want some basic things from their lives, a safe, affordable place to live, income, friends, romantic relationships, a role in their communities and families, a chance for their children and themselves to get ahead, and services that meet their needs and offer choices. Often, due to negative experiences, including trauma, ruptured relationships, and failed experiences in the social services system, homeless people may not believe that these things are possible or that they can be helped to achieve them. People are more likely to change in the context of a safe, trustworthy relationship in which they can consider their situation and explore possible change steps. The recommendations below are intended to ensure that services provided to people experiencing homelessness are effective in helping them to rapidly secure and sustain permanent housing. After ensuring the safety and well-being of residents, the focus of shelter must be to support residents in returning to housing.

#### Ñ **Implement person-centered, housing-focused case management.**

- ) Use a person-centered, low-barrier approach to engaging focusing on strengths, drawing upon successes and using them to guide and build continued progress. (See below for more information about Evidence-based and Promising Practices)
- ) Help people to recognize their desires and interests, define a vision for what they want out of life and establish hope that those things are possible. Then design services to help the people achieve those things.
- ) Assist people to increase control over their own lives by developing the relationships, accessing the supports, and building the skills and abilities needed to achieve personal goals.
- ) Ensure housing and homelessness histories are explored. Assessment should focus on clients' strengths and seek to understand how people have managed in the past. Barriers to stability should also be identified.
- ) There are no evidence-based standards for caseload size but generally recommended ranges are from 1 case manager for every 15 people for very high needs to 1 to 20 for more moderate need levels or a mixed group.

A housing focused approach to case management services based on a Housing Plan is essential. The housing plan should:

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<sup>7</sup> US Department of Housing and Urban development Housing First Assessment Tool.  
<https://www.hudexchange.info/resource/5294/housing-first-assessment-tool/>

- J **Be timed strategically to conserve scarce resources - Staff should, generally, not initiate housing-focused case management immediately after entry.** Available HMIS data indicate that 33% of single adults and 16% of families spend one week or less in shelter and 87% of single adults and 56% of families spend less than one month, suggesting that, consistent with national trends, a large portion of homeless people resolve their homelessness without assistance (source: 2015 AHAR). Data also indicate that only 14% of people exiting from all program types return to the homeless system within 2 years. HMIS data should also be used to identify clients with a pattern of cycling in and out of homelessness, for whom housing-focused case management should begin within 2 days of shelter entry.
  - J **Focus on resolving the most critical barriers as quickly as possible.** Address basic needs of income, identification, and identify barriers that will impede housing placement. Identify temporary (non-shelter) housing where the household can stay while they receive assistance, if necessary, in resolving barriers to long-term stability.
  - J **Create clear goals and time frames.** The housing plan should establish an individualized target date for achieving the housing goal. Ensure that goals are person-centered, specific and measurable and that plans indicate who is responsible for indicated action steps and when those action steps will occur. Plans must outline steps to secure permanent housing as quickly as possible and address barriers to accessing housing and achieving housing stability.
  - J **Identify needed resources** - for example, first month rent, security deposits and/or roommate matching.
  - J **Clarify the roles of the client and the case manager** The Housing Plan establishes which tasks will be the responsibility of case manager and of the client. The case manager should provide a high level of support initially and assess what the person can and cannot do for themselves and adjust service intensity accordingly. The client and the case manager/housing navigator should sign the plan.
  - J **Track progress and adjust.** A good Housing Plan is dynamic, and goals should be updated regularly.
  - J **Include supervisory review.** The case manager’s supervisor should review, evaluate and sign-off on each initial Housing Plan and on each update.
  - J **Focus on the hardest to place.** Rather than focusing resources on the clients who may be easier to place, the longer a client is sheltered, the more targeted follow up should occur.
  - J **Include warm handoff and post placement follow up supports** – for example connections to community-based service providers and a minimum standard for the process of connecting to the next worker or service and any follow up contact by the shelter case manager.
- Ñ **Clearly establish housing planning as the primary responsibility for case managers.** Job descriptions for case management staff should clearly define their primary responsibility as securing an alternative housing option, as rapidly as possible, and securing necessary follow up supports for all clients on their caseload to achieve stable, permanent housing. In addition, both job descriptions and ongoing supervision should emphasize case managers’ critical role in helping to ensure that the program meets its monthly housing placement targets. Case managers’ role in facilitating service linkages should be targeted towards those linkages that are most essential to

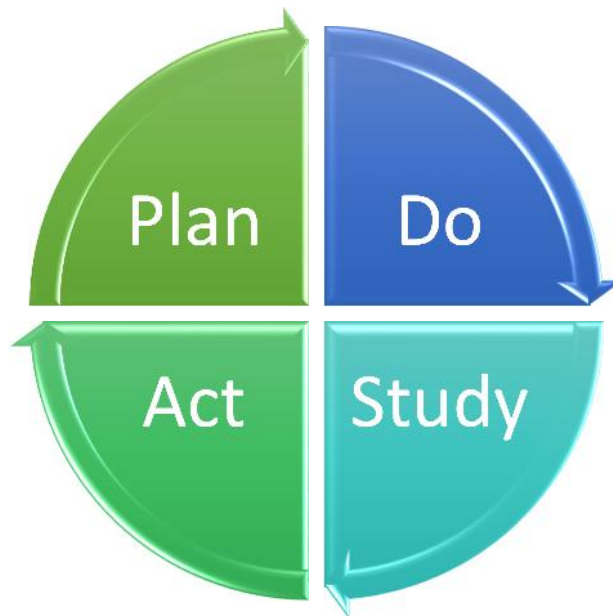
housing stability. Case notes should document contact attempts, services provided, including activities aimed at assisting residents to meet their housing plan goals, and efforts to help residents to establish linkages to other service providers, community resources, and support from friends and family.

- Ñ **Clearly establish the roles of shelter specialists/monitors/advocates in the housing planning process for the clients.** Job descriptions for shelter staff should clearly define their responsibilities in supporting housing plans and search. Staff should engage conversations with the clients about how housing plans are proceeding and possibly debriefing and documenting housing related activities.
  
- Ñ **Align staff and client schedules to enable completion of housing focused case management tasks. Staffing schedules should include case management services during business hours and some evening and weekend hours.** This will enable staff to work individually with people on critical housing focused case management tasks during business hours, accompany clients to important off-site appointments, and plan on-site programming that builds motivation, develops a housing-focused culture, and teaches critical skills.
  - ) Case management services should be flexible in response to resident needs and preferences offering a menu of meeting times, locations and services.

## Appendix 5: Continuous Quality Improvement

### What is Continuous Quality Improvement (CQI)?

CQI starts with the belief that any service can be improved, regardless of how effective it may currently be and relies on data-driven decisions to inform ongoing, strategic efforts to make services better. Data are used as a flashlight to illuminate opportunities for improvement rather than as a hammer to punish people or programs. The CQI cycle includes four stages:



- ) **Plan:** Identify an opportunity to improve services and plan for change. Includes establishing measurable performance targets, designing systems to track accurate outcome data, and involving staff in brainstorming factors limiting current performance.
- ) **Do:** Implement change on a small scale.
- ) **Study:** Use data to analyze actual performance against performance targets and monitor results over time to determine whether the change made a difference.
- ) **Act:** If the change was successful, implement it on a wider scale and continuously assess your results. If the change did not work, begin the cycle again. Continuously improve service quality by setting higher targets or selecting new outcomes to improve.

### Outcome and Output Measures

A CQI approach uses outcome measures to evaluate service effectiveness and output measures to determine whether processes are happening as they should to achieve desired outcomes. As illustrated by the example below, **outcomes are the difference made by the outputs.**

## Outcome Indicator

- Observable information that evaluates whether clients receive a desired benefit from a service (e.g., # of participants placed monthly in permanent housing)

## Output Indicator

- Observable information that evaluates whether a process is happening as it should to achieve the outcome (e.g., # of participants who obtain documents necessary for housing monthly)

Outcome and output indicators should be:

- ) **Meaningful** – Indicators should provide staff with valuable information about service effectiveness. Data must be accurate and available in a timely manner.
- ) **Measurable** – Indicators should be quantifiable.
- ) **Manageable** – Staff must be able to obtain and use the information without engaging in an overwhelming amount of work.

Use output measures when:

### The outcome is not immediately measurable.

- Use output measures to track progress and make course corrections.

### Outputs are known predictors of the outcomes.

- Use output measures to figure out what is going right and what needs to be adjusted.

## Performance Targets

Establishing clear targets for system and program performance helps program staff and managers to understand the extent to which they are realizing shared objectives and to prioritize the tasks that are most critical to achieving desired outcomes.

- ) Building on Systems Performance Measures established by HUD and project evaluation criteria established by the CoC, adopt performance targets at the community and program levels. For example:
  - Establish monthly housing placement targets for shelter and transitional programs.
  - Establish participant income growth targets for all homeless programs.
- ) Regularly and transparently evaluate actual performance against those targets (i.e. by disseminating regular performance reports at least semi-annually).



- )] Provide supports to help program managers to use data to identify opportunities to strengthen performance using a Continuous Quality Improvement approach.
- )] Incorporate performance measures and targets into program contracts.

### CQI is Staff Driven

Establishing clear performance targets helps direct service teams to understand the extent to which they are realizing program objectives and to prioritize the tasks that are most critical to achieving desired outcomes. The line staff most familiar with the key processes that lead to the desired outcomes should:

- )] Develop performance targets and adjust targets as more data becomes available.
- )] Develop the output measures that will be predictive of and useful to track progress towards achieving targets.
- )] Regularly review and discuss data reports designed to evaluate actual performance against performance targets.
- )] Brainstorm around issues that may be limiting current performance and opportunities to improve performance.

Teams should work together to make the cultural shifts described in the graphic below:

