Agenda

• Angeline Sulak, Frontline Services, Coordinated Intake Program Manager
• Lehman Busbee, Cleveland Mediation Center, Diversion Program Manager
• Jen Pfleiderer, EDEN, Director of Housing Programs
• Anne Dennstedt, EDEN, Supervisor of Housing Locators
• Q&A
Core Components of Rapid Re-Housing

- Housing Identification
- Rent and Move-In Assistance (Financial)
- Rapid Re-housing Case Management and Services
Rapid Re-Housing Webinar Series

- Core Components –
  - Housing Identification Strategies (12/14)
  - Financial Assistance (1/15)
  - Rapid Re-housing Case Management and Services (2/15)
- Ramping Up Rapid Re-housing
  - Los Angeles, CA & Mercer County (3/15)
  - Virginia (4/15)
  - Houston, TX and Hamilton Family Center, San Francisco, CA (5/15)
- Targeted Populations/Partnerships
  - Single Adults (6/15)
  - Serving Youth and Young Adults (7/15)
- Transforming Homeless Systems Using Rapid Re-Housing
  - Transforming Homeless Service Systems in Spokane, Wash. (10/15)
  - Transforming Homeless Service Systems in Pierce County, Wash. (2/9)
  - Transforming Homeless Service Systems in Jacksonville, Florida (3/8)

Available at: http://www.endhomelessness.org/library/entry/rapid-re-housing-webinars
Addressing and Ending Family Homelessness in Cleveland

Angeline Sulak, LISW-S, Frontline Service
Lehman Busbee, Cleveland Mediation Center
Anne Dennstedt, QMHS, EDEN, Inc.
Jen Pfleiderer, EDEN, Inc.
Overview/Agenda

1. Overview of Cleveland
2. Coordinated Intake
3. Diversion
4. Progressive Engagement Model
5. Process of Housing Families
6. Challenging Families
7. Questions/Comments
Overview of Cleveland

HOMELESSNESS in CLEVELAND:

- Newly Homeless 2015: 2922 Singles 374 Families
- PIT Count 2013: 2052 Sheltered 77 Unsheltered
- PIT Count 2014: 2075 Sheltered 28 Unsheltered
- CI/A Intakes 2015: 6,236

- LITERALLY HOMELESS VS. DOUBLED UP
- GUARANTEED SHELTER
- HOUSING FIRST APPROACH
- PROGRESSIVE ENGAGEMENT APPROACH
Why Coordinated Intake?

- We care about the homeless person/family getting the best service possible and ending or preventing their homelessness as soon as possible.

- We care about getting the right intervention, at the right level of intensity, to the right person.

- We care that people may be turned away for being hard to serve

- We care about continually working on ways of reducing and ending homelessness
Coordinated Intake Goals

- Respond to the ‘emergency of homelessness’ by getting the right intervention, at the right level of intensity, to the right person
- Reduce number of individuals and families entering shelter
- Expedite exits from shelter to housing
- Use limited resources efficiently, effectively, fairly.
- Facilitate coordination/communication among service providers
- Standardize Data Entry for tracking, reporting, coordination
- Crisis assessment and linkage
Background

- Old system was no system, 20+ shelters working independently, multiple intakes, ‘creaming’

- Informal Coordinated Intake: 2010

- Formalized CI/A: 2012

- Single Point of Entry for Homeless Services

- 1736 Superior Ave (Cosgrove Bldg.)

- Hours: 8am-8pm, Monday-Friday
  - Weekends: On call system for families

- Staff: 7 staff, 1 Manager

- FrontLine Service contracted by Cleveland/Cuyahoga County (CoC)

- HUD mandated
How Does CI/A Work

**FIVE STEPS**

1) Intake & Assessment

2) Diversion

3) Housing Plan (if needed)

4) Linkage to Shelter + Crisis Services, if needed

5) Coordinated Exit
Intake & Assessment

**Intake**

Homeless Management Information System (HMIS)
- Demographic Information used for tracking, reporting
- Shared, with permission, with other providers
- Referrals made to providers through HMIS

**Assessment**

- Housing Barrier Assessment
- Housing Barrier Score
- Income, Work History, Housing History, Homeless History, Health, Mental Health, AOD, Family Status, Legal, Other
# Coordinated Intake - Housing Barrier Guide

<table>
<thead>
<tr>
<th>Client Name: ______________________</th>
<th>Staff: ______________________</th>
<th>Date: ____________</th>
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**TOTAL BARRIER SCORE:** ______

**BARRIER LEVEL** - Based on score and Coordinated Intake assessment
- □ Lower to Moderate Barriers (0-40)
- □ Moderate to Higher Barriers (40+)

**ASSESSOR COMMENT:** ____________________________________________

## 1. Non-Employment Income
- □ 1. Unable to work, has low non-employment income (e.g., 1 SSI check)
- □ 2. Unable to work, no income, but has applied or intends to apply for non-employment income (e.g., SSI)
- □ 5. Unable to work, no income, not eligible for non-employment income (e.g., SSI)

## 2. Work History
- □ 1. Has part-time work, insufficient to pay rent
- □ 2. Able to work, Unemployed for less than 1 year
- □ 5. Able to work, Unemployed for more than 1 yr.
- □ 10. Able to work, but has never worked

## 3. Housing History
- □ 1. No rental history or new to an area
- □ 5. 2-3 evictions – or lost EDEN Permanent Voucher – or Evicted from Public Housing
- □ 10. 4+ evictions – or has been through Rapid Re-Housing 2+ times.

## 4. Homeless History
- □ 1. Homeless 1 or 2 times previously
- □ 5. 3 times homeless in past 3 years
- □ 10. 4+ times homeless in past 3 years, or 1 year continuously homeless

## 5. Health
- □ 1. HOH has physical disability – or child with physical disability or special needs
- □ 5. HOH has developmental disability
- □ 10. HOH has physical or developmental disability, unable to live independently or care for children

## 6. Mental Health
- □ 1. Mental illness, slight impairment in functioning (e.g., to work, care children, etc.)
- □ 9. Severe Mental Illness-receiving treatment/meds, Significant impairment, persistent problems with functioning
- □ 10. Severe Mental Illness – untreated, or exhibiting psychotic symptoms, high difficulty in functioning

## 7. Drugs / Alcohol
- □ 1. Moderate use - weekly intoxication or in recovery (< 6 mos)
- □ 5. Regular use to extent that causes social, income or housing issues
- □ 10. Chronically addicted, daily intoxication or currently in detox

## 8. Family Status (max 20 pts)
- □ 1. HOH pregnant
- □ 2. Has 1+ children in custody
- □ 5. Custody of 5+ children
- □ 10. HOH under 25 yrs.
- □ 5. HOH ‘aged-out’ of foster care
- □ 10. Domestic violence survivor

## 9. Legal Issues
- □ 2. Convicted of a felony, parole or probation
- □ 5. Multiple Felonies, or recently released from prison, or active warrant (non-traffic)
- □ 10. Convicted of sexual oriented offense, child endangerment, arson, violent felony in last 7 yrs

## 10. Other Barriers
- □ 1. Limited English proficiency
- □ 2. Undocumented immigrant
- □ 2. Utility debt over $1K
- □ 3. Pays Child support
- □ 5. Multiple discharges from shelter
- □ 6. HOH attending High School
**What is Diversion?**

- Diversion is helping persons determine if it is possible for them to stay anywhere else that’s safe, other than a shelter. This could be temporary or permanent.
- Persons chart their own way out of shelter and back into housing – we follow their lead, providing the minimum amount of assistance (and therefore intervention into their lives) to help them get housed.
TYPES OF DIVERSIONS

Diversion should always be safe and appropriate for the client.

- **Helping persons go back where they have recently stayed** – mediation + food or utility assistance. Sometimes back rent.

- **Relocate to a stable home out of town** – phone facilitation + greyhound fare.

- **Own (new) housing** – temp place to stay during housing search. We order inspection and pay first month’s rent and deposit.

- **Return to their own residence** – Previous places they have lived are options, non DV relationship issues.
CURRENT WORK IN SHELTERS

- Help persons determine if it’s possible for them to stay anywhere else that’s safe, other than a shelter. This could be temporary or permanent.
- We have funds for local and Greyhound bus tickets, food, grocery & gas station gift cards, or utility assistance that can be used to help persons stay with friends or family.
- Use ESG funds for back rent or 1st month’s rent & deposit.
- Most persons we see have been *doubled up* – staying *temporarily* with friends or family.
CONFLICT RESOLUTION APPROACH

- Based on Transformative Mediation Theory
- *Homelessness is a crisis* – like in conflict, persons in crisis are less able to clearly think through problems & and advocate for themselves than they are when *not in crisis*.
- So as in conflict, we first *listen* and *validate* their experience – as our mission says, *honoring all people, building their capacity to act*.
- *Client-centered*. We don’t assume what people need, we help them articulate their needs.
- We use a *strength-based approach* – helping clients identify and mine strengths, successes and resources they’ve used in the past to help them with this bout of homelessness.
- We support and trust that persons want to succeed, have done so previously and help them tap into their own strengths and past successes to help them with their current situation.
Progressive Engagement Model

Housing Plan

- **Short-Term Plan - Tonight**
- **Interim Plan – Place to stay while working on Plan**
- **Long-Term Plan – Permanent Placement**

**RESOURCE MATCHING:**
Getting the Right Intervention, at the Right Level, According to One’s Housing barriers

- **Low-Moderate Housing Barriers:** Shelter/ Rapid Re-housing
- **Higher Housing Barriers:** Transition in Place
- **Very High Barriers:** Permanent Supportive Housing, Perm. Vouchers
Coordinated Exit using Progressive Engagement Model

RAPID RE-HOUSING
Case Management
4 Mo Rental Subsidy

Milestones Met
No Additional Housing Assistance Required

ZACCHEAUS HOUSING
Intensive Case Management
6 Addtl Mo Rental Subsidy

PERMANENT HOUSING VOUCHER
Mental Health C.M.
Permanent Subsidy

No Additional Housing Assistance Required

PERMANENT HOUSING VOUCHER
Mental Health C.M.
Permanent Subsidy

CMHA-Public Housing
Families will get the highest priority on the CMHA waitlist
Family Housing Options

- **Rapid Rehousing (RRH)**
  - Most families are referred to RRH from Coordinated Intake.
  - Assistance consists of a SD and 4 months of rental assistance.
  - Case management is attached.
  - Families can be bridged to Zacchaeus Housing and/or a permanent voucher if the family has extremely high barriers and needs further assistance.
  - Families can only receive RRH twice.
Family Housing Options

Zacchaeus Housing
- In order to be eligible for ZHS, the family needs to be in the RRH program.
- Every month, there are several spots open to bridge. Families are selected on the highest need, not “first come, first serve”.
- Assistance consists of 6 more months of rental assistance. This includes a rental subsidy (clients pay 30% of their income) and case management.

EDEN voucher
- Families that need further assistance and have a MH DX, can apply for an EDEN administered subsidy.
- These vouchers are permanent
- Families are again selected on the highest need, not “first come, first serve”.

Other housing resources
- Laura’s Home transitional program
- Maggie’s Place (reopening in the fall)
- HM Life

Cleveland Housing Network
CMHA-Public Housing
Our RRH Program

1. Referred from Shelter
2. Housing Locator works with client
3. Ongoing Case Management from Partner Agency

Security Deposit and 4 months of Rental Assistance Provided

Housing Locator
- HQS Certified
- Fills Out Application with Family and discusses barriers
- Sends Housing Leads to Family weekly
- Coordination With Shelter Staff / Weekly Meetings
DEVELOPING LANDLORD RELATIONSHIPS

- Landlord Forums
- Referrals from Current landlords
- Using Existing Landlord Base from Permanent Programs
- On Time Payments
- Explain Advantages
  - Case Management
  - Helping a Family
- No Eviction Goal
Housing Barriers for RRH Clients

- Chronically Homeless
- Large Family Size
- Large Utility Balances
- Extremely Low-Very Low Income
- Poor Housing/Credit History/Evictions
- Criminal Background/Legal Issues
- Pregnant or High Risk Pregnancy
- Language Barriers
STRATEGIES TO OVERCOME BARRIERS

- Know Your Landlord Pool
- Using other Community Resources (PRC, Furniture Bank)
- Shelter Milestones
- RRH Case Management Milestones
PAR T NERSHIP AT S H E L T E R L E V E L

- Milestones
  - Refer Families within 7 Days of Entry into Shelter
  - Enroll Client in Employment/Income Effort
  - Link Client with Housing Locator, assist with Locating Housing
  - Determine Utility, ID, and Furniture Needs
  - Coordinate with Central Intake re: Shelter Terminations
  - Provide a list of Discharged Clients at Weekly Meetings
  - Attend Weekly Housing Locator/Shelter Staff Meetings
  - Family move out within 48 Hours of Passed Inspection
  - Unit Cleaned and Ready for New Family within 24 hours of move out
NON COMPLIANT/CHALLENGING FAMILIES AT SHELTER LEVEL

- Failure to Locate Housing By Deadline
- Families that Cannot Function in Shelter Environment
- Shelter Discharges
- Mediation/Behavioral Contract
PARTNERSHIP AT CASE MANAGEMENT LEVEL

- Milestones
  - Visit Client at least 1x per Month
  - Submit Case Management documentation as required
  - Reviews Lease with client and provides education re: tenant/landlord responsibilities
  - Link Client to Childcare Assistance if needed
  - Address Income Needs with Family
  - Link with Community Case Management for support
  - Complete Eviction Prevention Plan
  - Attend RRH CM Meetings twice per month
  - Bring Milestone Notes to RRH CM Meetings
Determining Additional Assistance Needs (ZHS, Permanent Voucher)

- Previous failed RRH Enrollments
- Review Family Barriers and Updated Barrier Score
- Ability of Family to Pay Rent
- Discuss Additional Temporary Assistance vs. Permanent Assistance
- Families with significant mental health needs and/or AoD issues
- Compliance with Case Management Services and assessment of Milestones
- Timelines for Transition to Additional Program
## Old Process vs. New Process

<table>
<thead>
<tr>
<th>Old Process</th>
<th>New Process</th>
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<tbody>
<tr>
<td>S/D and 2 months of assistance, extended up 2x’s for a total of 6 months</td>
<td>Progressive Engagement – all initially go through RRH and are screened for more intensive services</td>
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<tr>
<td>Families Returning to Shelter</td>
<td>Focus on No Eviction Policy</td>
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<td>Continual Assessment and Programmatic Changes</td>
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OUTCOMES/SUCCESSES

- Days from approval to moving into housing are decreasing –
  - Old Process: 60 Days
  - New Process: 42 Days
  - HUD Goal: 30 Days

- Returns to Shelter after receiving RRH decreased from 23% to 17%
  
  Only 1 Family Returned to Shelter that went through ZHS and 0 families returned that have received a Permanent Voucher

- 72 Hour Turnaround for Shelter Space and Placements

- Standardizing Services provided by Shelter Providers and RRH Case Managers
Questions/Comments

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Questions?

A recording of this webinar and presentation slides will be available at www.endhomelessness.org
Sign up for our Rapid Re-Housing Newsletter (www.naeh.org)

Upcoming Rapid Re-Housing Webinars:

• **April 27 at 1 pm (ET):** Closing a Case: Knowing When to End Rapid Re-Housing Assistance
• **May 10 at 1 pm (ET):** Transforming Homeless Services in West Virginia