

# Critical Time Intervention For Rapid Rehousing

## CTI Worker Training

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**Part 1**

# **Introduction**

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# Core Components of Rapid Rehousing: Where does CTI fit?



# CTI RRH Main Objectives

- 1 Obtaining and coordinating financial benefits and resources
- 2 Accessing health care, child care, employment and education services (formal supports)
- 3 Managing financial resources
- 4 Connecting clients to effective informal social and community supports that address barriers to stable housing

# ■ Key Model Characteristics

- 1 Time Limited
- 2 Three Phases
- 3 Decreasing Contact
- 4 Highly Focused

- 5 Small Caseload
- 6 Decreasing Contact
- 7 Community Based

# Core Values

- 1 Strengths Based
- 2 Individualized
- 3 Culturally Sensitive

- 4 Transparent
- 5 Trauma Informed



# Strengths Based

- Identify and leverage client's own resources and capacities
- Honor client's right to self-determination:
  - Empowerment
  - View client as partner and collaborator
  - Shared decision making



# Individualized

- Caseloads are diverse- some need very little assistance, some need more intense help
- Level of assistance should be evaluated and adjusted continuously





# Culturally Sensitive

- Client views on how to solve a problem may differ from yours- important to balance respect for views with reality of situation
- Different views on money, the meaning of accepting “help”; especially from the government



# Transparent

- Clients have a right to know nature and extent of assistance they are eligible to receive, including the duration of financial assistance and case management support
- Addressing motivation through Housing Plan- what is the reality of the situation, what can be done in the time available?



# Trauma Informed

- Trauma histories are common among persons who become homeless
- Domestic violence is a common contributor to housing loss
- Emphasizing safety, establishing trust, and promoting opportunities for clients to rebuild a sense of control and empowerment are needed

Part 2

# CTI RRH Roles

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# CTI Workers and Supervisors



***CTI RRH workers*** are primary providers of case management services during CTI phases 1, 2 and 3



***The CTI supervisor*** guides, supports and oversees case manager's activities during all phases



# An Effective CTI Worker

- Connects with each client and/or client family immediately upon enrollment into RRH
- Establishes working relationship based on mutual trust and respect for the client
- Diligently works to identify and connect clients to needed resources
- Cultivates needed resources in the community where there are deficits



# An Effective CTI Worker

- Strengthens community partnerships to maximize access to resources
- Adheres to Phase Specific Plans and Housing Plan, adjusting plans as needed
- Utilizes supervision to inform and improve decision making, receive support

# What do we mean by small caseload?



Maximum of 20 **SCE**  
cases per worker

1

**SCE** give different **weight** to cases depending on phase

2

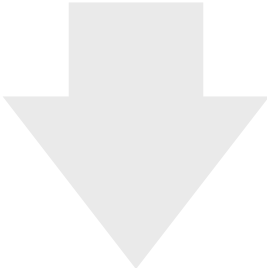
Accounts for **differing** intensity of work during each phase



# Caseload Weighting System

Pre-CTI	Phase One	Phase Two	Phase Three
<b>1.5</b>	<b>2</b>	<b>1</b>	<b>0.5</b>

# Example: Converting a standard caseload to an SCE caseload

PER CASELOAD	Pre-CTI	Phase One	Phase Two	Phase Three	Total
Number of clients in standard CW caseload	4	4	4	4	16
	x 1.5	x 2	x 1	x 0.5	
Number of Standard Caseload Equivalent cases	6	8	4	2	20



# An Effective Supervisor

- Ensures case manager practice is consistent with phase-specific activities and foci of the CTI model
- Encourages open communication and demonstrates a willingness to support, as well as instruct, supervisees
- Ensures that model-specific case planning and recording documents are being completed correctly and are up to date for all workers
- Carefully monitors workers to ensure that phase transition dates are observed
- Monitors and manages caseload to ensure there is reasonable time to provide services as intended



# The Role of Housing Specialist

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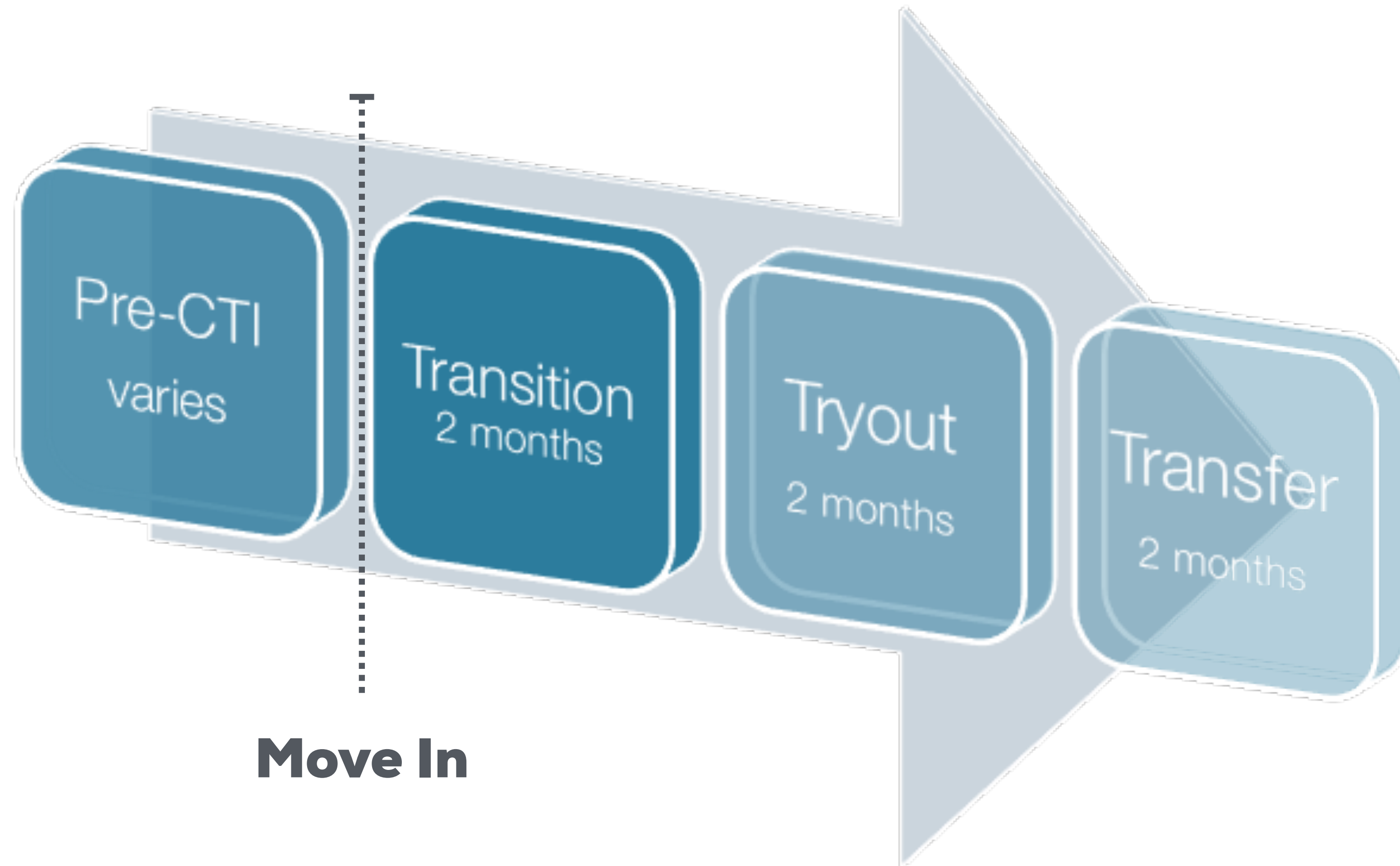
- Housing identification and lease negotiation
- Primary service provider during Pre-CTI phase
- Performs much of the work in the Pre-CTI phase, but on call for future negotiations or other challenges/advocacy needs related to housing

Part 3

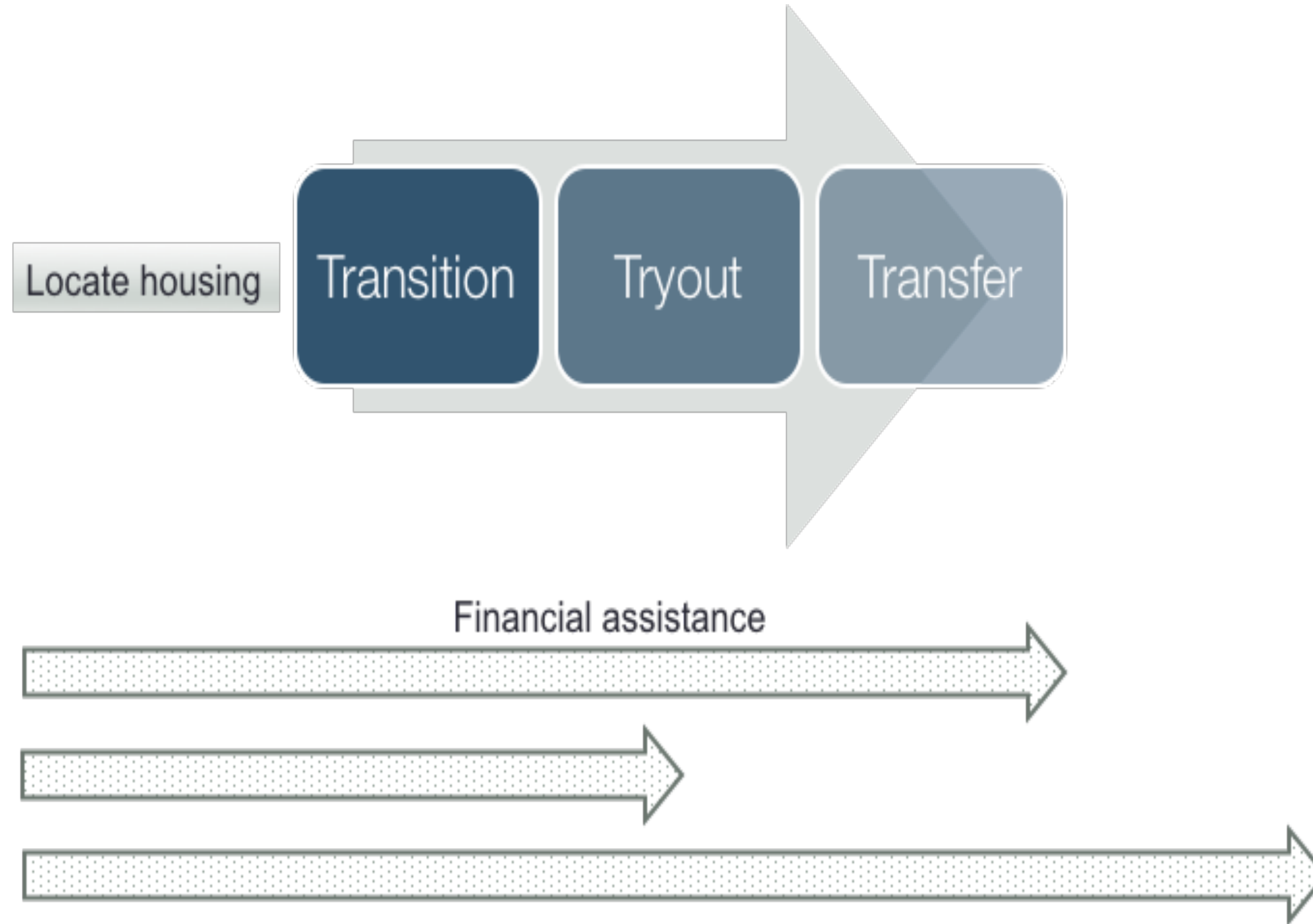
# CTI Phases





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# The Phases of CTI-RRH



# The Phases of CTI-RRH



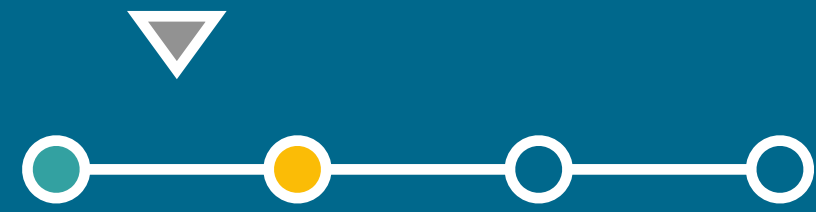
	Pre-CTI: Worker Activities	Phase One: Transition	Phase Two: Try-Out	Phase Three: Transfer
 Time Intensity	Flexible	<b>2 Months</b> Intense Weekly contact	<b>2 Months</b> Moderate Bi-weekly contact	<b>2 Months</b> Low Monthly contact
 Objective	Relationship Building Assessment	Complete Identification of resources and connect client	Monitor resource impact and client connection/access	Complete transfer of services to the community
 Action Steps	Educate/Advocate Begin Phase Specific Plan  Begin connection to resources	Accompany client to appointments, follow up to ensure connection  Phase I Specific Plan	Make adjustments to plan in collaboration with client  Phase II Specific Plan	Meet with new service providers or others in the support system; reflect on work with client  Phase III Specific Plan
 Potential Barriers	Housing placement may be delayed due to multiple challenges	Lack of resources; Client hesitant to engage Several competing “priorities”	Client may not be ready to assume rent; resources may be inadequate	Both client and worker may have difficulty ending, especially if goals aren’t met
 Strategies	Collaborate with Housing Specialist to teach/model housing location process; present services as a helpful resource, not an obligation	Do advance work of creating resource networks  Prioritize needs based on relevance to housing stability	Empower client to do what they can on their own; <i>create alternative plans if necessary</i>	Reduce involvement gradually and inform client early on about the length and nature of worker support





## Pre-CTI Phase

- Duration varies
- Objective: Housing Location and Assistance; Begin Relationship with case manager
- Worker begins assessment process, collaborates with Housing Specialist on Housing Plan and begins to develop Phase I Specific Plan;
- Connection to resources begins in this phase



## Transition from Pre-CTI to Phase 1

- Ideally, the Worker has been involved in the the Pre-CTI Phase
- Importance of communication between housing specialists and Worker throughout, especially at the end
- Worker should attend lease signing and/or move-in
- A face to face meeting with client, Worker and housing specialist to review work on Pre-CTI Phase, clarify the Worker role going into Phase I



# Phase One: Transition

- High intensity- at least once a week direct contact; assessment, completion of Phase Specific Plan and connection to resources
- Brief assessment related to housing barriers, strengths and challenges
- One to three focus areas chosen from a “menu” of domains

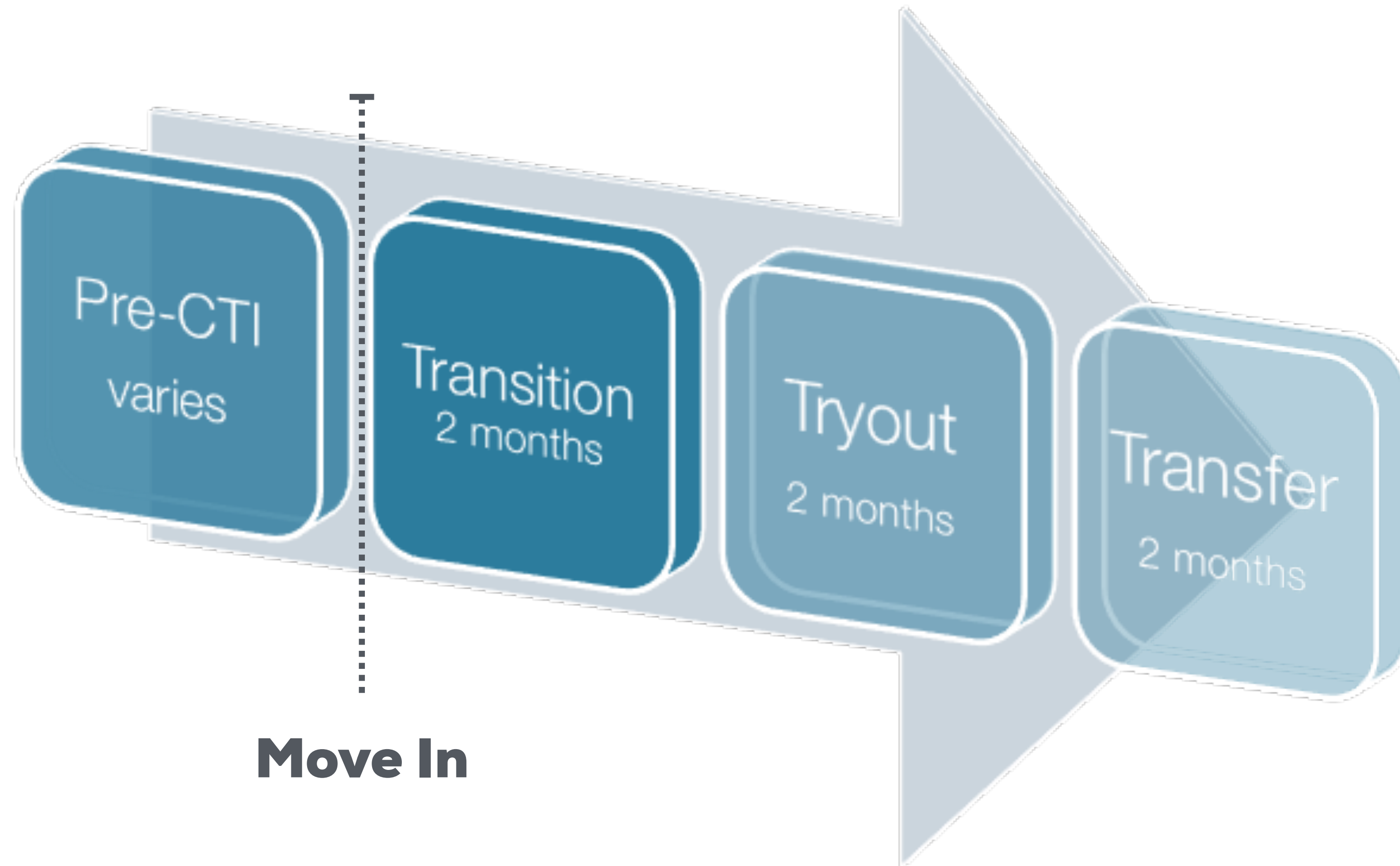
# Phase One: Focus Area Domains

- **Income generation**
- Budget management
- Survival needs (food, clothing, furniture, etc.)
- Health & mental health
- Child care
- Transportation
- Education (child/adult)

# Phase One: Activities

- Complete Phase Plan documents
- Identifying appropriate services in the community that address needs and can continue beyond CTI
- Accompany clients to appointments
- Follow up with linkages- call, visit- is the resource delivering what you and the client expect?  
Do you need to advocate?

# The Phases of CTI-RRH





## Phase Two: Try-Out

- Moderate Intensity- Direct contact at least biweekly
- Main objective: Monitor the impact of resources on goal attainment and make adjustments as necessary. Empower client to maintain resources independently of the case manager.

## Phase Two: Activities

- Monitoring to assess whether linkages are working and if resources are making an impact
- Revisit and adjust Phase Specific Plan to reflect the reality of resources now and in the future
- Emphasis on what is wrong with the **plan**, not what is wrong with the **person**





## Phase Three: Transfer

- Low Intensity- Direct contact 1-2X per month
- Final phase focuses on completing the transfer of primary case management responsibility to the community resources that will provide long-term support to the client
- Formal ending of Client-Worker relationship

## Phase Three: Activities

- Meeting together with key people in the support network
- Reviewing the work, reflecting on what was accomplished, what is ahead
- Review plan for client if challenges to housing stability arise in the future
- Avoid temptation to end services too early if client appears to be doing well!

# CTI RRH Forms

Primary forms are:

- Phase Date Form
- Phase Plan
- Progress Notes
- Closing Note

Use of CTI RRH Forms helps ensure fidelity with the model

Part 4

# Supervision

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# Supervision

## Weekly Team Supervision: 1.5 hours

### Aims:

- Improve problem-solving through sharing of ideas between peers and supervisor
- Encourage fidelity to the CTI-RRH model
- Help keep track of phase transition tasks and dates
- Focus on challenging cases

# What to Expect in Supervision

- Case presentation of each new client
- Review of cases that will end intervention within the coming month
- Review of cases that are facing major crisis or cannot be located
- Review of cases that have experienced major success or positive change
- Brief review of entire caseload every two weeks to ensure that phase changes are on schedule and that cases are not overlooked

# How to Prepare for Supervision

- CTI Worker prepares the content for supervision by bringing information from the caseload
- Keep “supervision” notes throughout the week on clients to be presented
- Be prepared to report in on number and types of visits, progress, challenges, successes
- Collaborate with supervisor in monitoring weighted caseload by providing justification for more or less “weight”
- Provide evidence for adjustments to six month timeframe
- Both worker and supervisor should regard the supervisory conference as a high priority meeting



Center for the Advancement of  
**Critical Time Intervention**

**CONTACT**

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