



**HOMELESS SERVICES UNITED**

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**Testimony of Catherine Trapani, Executive Director, Homeless Services United, Inc.  
Before the NYC Council Committee on General Welfare  
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**ONE YEAR AFTER THE 90 DAY REVIEW OF HOMELESS SERVICES**

**INTRODUCTION**

My name is Catherine Trapani, and I am the Executive Director of Homeless Services United (HSU). HSU is a coalition of over 50 non-profit agencies serving homeless and at-risk adults and families in New York City. HSU provides advocacy, information, and training to member agencies to expand their capacity to deliver high-quality services. HSU advocates for expansion of affordable housing and prevention services and for immediate access to safe, decent, emergency and transitional housing, outreach and drop-in services for homeless New Yorkers.

Homeless Service United's member agencies operate hundreds of programs including shelters, drop-in centers, food pantries, HomeBase, and outreach and prevention services. Each day, HSU member programs work with thousands of homeless families and individuals, preventing shelter entry whenever possible and working to end homelessness through counseling, social services, health care, legal services, and public benefits assistance, among many other supports.

One full year after the completion of the 90 day review of homeless services, we have seen great progress in some areas – evictions are down, placements into permanent and transitional housing from outreach teams are up and shelter conditions are improving - but, we still have a tremendous amount of work to do. When the administration sets clear goals, dedicates necessary resources, designates and empowers project managers and, effectively engages service providers during policy development and implementation, great things can be accomplished.

Where progress has lagged, it is usually in an area where one of those elements is missing –sufficient funding, leadership, or collaboration and coordination with experienced providers.

**FUNDING**

Absent comprehensive shelter services' rate reform, many of the underlying reasons why the system was allowed to get into a state of disrepair with limited available services for clients that necessitated the review in the first place, remain a problem. Issues like not being allowed to have a capital reserve fund to ensure adequate resources are in place to repair buildings as they age, not having escalation clauses in contracts to help providers keep up with rising occupancy costs in rented properties or increasing health care costs for employees, and, not providing sufficient resources to pay competitive wages to attract and retain qualified staff are all unresolved.

Providers still have not seen the framework the administration plans to use for rate reform and it remains unclear if this exercise is limited to direct program costs or, if it includes other drivers of spending on shelter services such as administrative costs and fringe. The preliminary budget released by the administration does not explicitly designate any funding for the rationalization and reform of rates and it is unclear when providers can expect to see enhancement in funding and in which areas.

This fiscal uncertainty coupled with ongoing chronic delays in contract registration has put homeless service providers in precarious situations making it difficult to implement program enhancements imagined by the 90-day review. For example, last year DHS announced one way they would enhance and target services for families in shelter as described in the review would be accomplished via the Thrive Mental Health Initiative. Shelters were instructed to submit proposals on how they would utilize social workers in their shelter programs and told the agency would work with them to implement the change. One year later, these shelter providers are still awaiting contract amendments to fund these new staff lines to be registered. Until the funding is available, providers cannot afford to hire this staff. One HSU member who did hire social workers shortly after DHS announced the initiative has been self-funding those positions for a year without any reimbursement from the City – this practice is completely unsustainable. Yet, on April 17, 2017, DHS sent families with children shelter providers a letter informing them that those who requested social workers in 2016 must hire them by April 30<sup>th</sup> – just two weeks from now. This mandate is being strongly reinforced in meetings with providers despite the fact that the agency has not providing any funding to fulfill it. Adding insult to injury, such demands are made of providers while DHS has several vacancies in their ranks, including that of the Chief Homeless Services Administrator. **If the City hopes to see system-wide results, sustainable, adequate funding mechanisms and timely contracting must be part of the strategy.**

## LEADERSHIP

Even in cases where funding has not been an issue, some of the initiatives announced in the review have yet to take shape. Examples of low to no cost initiatives HSU had hoped would be implemented quickly, include targeting rental assistance for youth in DYCD shelters and eliminating the requirement for school aged children to be present at PATH for multiple appointments at intake. With no administrator yet appointed to lead DHS, several vacancies in DHS staff and, the absence of a clear chain of responsibility for the implementation of the myriad of initiatives announced, progress in these and several other areas has proven elusive. While there may be obstacles to implementing these changes that HSU is not aware of, from the outside, it appears as if the delay is due to a lack of capacity at the agency level to implement the change.

In addition to the above mentioned staff vacancies, there has also been considerable turn over in contracts and program staff at DHS. This turnover has resulted in a loss of institutional knowledge and gaps in operational support for homeless services providers. For the remaining DHS staff, morale is low. People are juggling multiple responsibilities receiving pressure from all sides to overhaul agency operations with limited person-power. A current organizational chart is not publicly available and, while the commissioner has been extremely accommodating to HSU and made himself and his senior staff available to work on many issues facing the sector, homeless service providers would benefit mightily from having partners to work with on day to day operational concerns. **DHS must appoint leaders and develop the internal capacity to manage the changes announced in the review and support staff charged with implementing reforms if they are to be successful.**

## **COLLABORATION AND COORDINATION**

### Program Operations

For those initiatives outlined in the review that have already been implemented, the most successful have been those in which the Department of Social Services (DSS) has worked collaboratively with providers to implement the change. For example, working collaboratively with HSU and our member programs, DSS and the Mayor's Office of Operations streamlined shelter inspections by first piloting and then expanding a coordinated inspection system that allowed shelter providers to work with multiple City agencies to inspect shelters on the same day, consistently record violations and provider corrective action plans and, track repairs using a building compliance system. This work happened alongside a related project to establish new protocols to track "new needs" requests for repair funding to ensure providers have the necessary resources to maintain their properties. While the "new needs" process still isn't perfect, the collaborative spirit of this work has paid off – non-cluster violations are down more than 80% system wide.

Areas in which there has been less success in implementing reforms often occur when there is a disconnect between ideas and practical issues impacting implementation that could be addressed with improved collaboration with homeless services providers. This may be due to the lack of staff available at DHS for program management as discussed earlier but, it also may be indicative of an organizational culture that does not consistently support collaboration and provider feedback.

Thoughtful collaboration with providers can often identify other potential obstacles to success and improve outcomes for clients. For example, when the City first changed the way 311 responded to reports of homeless persons on the street in an effort to be more responsive to community concerns, they initially started deploying outreach teams for every call that came in to 311. Outreach teams were quickly overwhelmed and distracted from their core work serving chronically homeless people living on the streets because 311 callers cannot distinguish between pan handlers and those who are actually chronically homeless. The City took feedback from providers and modified the way 311 routed calls to allow teams to focus on the neediest clients. Following that change, nearly 700 people have been brought in off the streets.

Despite these successes, homeless services providers are not consistently included in the implementation of new initiatives which can lead to a clumsy rollout. Examples of barriers to implementation that could have been resolved by closer collaboration with service providers include those stymied by relatively mundane, operational obstacles known best to persons working directly in programs. Some homeless services programs lack the physical space to accommodate the new program initiatives. Shelters that were assigned enhanced security personnel do not have sufficient space to provide locker rooms and office space for these workers. Homeless prevention programs also struggled to accommodate co-location of HRA staff at their HomeBase offices.

Returning to the example of having social workers in family shelters – not only are those positions not yet funded but, early on there was confusion about what exactly they were being asked to do within existing program models. When the first staff members were hired at sites able to self-fund the reform until City funds could be made available, the role they were to play was not clear. New hires were mandated to attend DHS sponsored training on evidenced based practices in shelter but, existing shelter staff were not allowed to attend that training, including persons expected to supervise the new social work staff. As a result, supervisors were put in the position to have to ask their own employees what DHS was instructing them to do so they could understand what the agency expected of the program. A better approach would have been more inclusive so that program leadership could effectively integrate

new staff into existing program models with more frequent communication to ease confusion and better manage systems' change.

**More advanced planning, communication, inclusive training, additional resources for additional office space or, repurposing existing space for enhanced social services for clients *even if it would result in having fewer shelter units available for occupancy* would go a long way towards improving the implementation of programmatic reforms.**

### Re-housing

Perhaps the most crucial element of an effective homeless services delivery system is having access to robust permanent housing resources. Sadly, the current suite of rental assistance programs (LINC, SEPS, CITYFEPS), Supportive Housing, HPD Section and affordable units and, NYCHA Public Housing have not been able to move families and individuals out of shelter in sufficient numbers. Part of this problem is simple supply – there are not permanently affordable resources to go around. **The City can and should increase the number of public housing units available to homeless New Yorkers as well as commit more deeply affordable HPD financed housing units to homeless families.** In addition, the City should also partner with homeless services providers to better target existing resources so that clients can be matched with the type of housing assistance most appropriate for their needs so they can exit shelter quickly and, avoid returning to shelter in the future.

Current practice reserves homeless priority for NYCHA public housing units – the most deeply affordable housing option of all – for homeless households with at least one working adult. Working households also qualify for a LINC I voucher where they can rent an apartment in the community using a City sponsored subsidy. Households that face significant barriers to employment cannot qualify for either of these options but, because they may not have mental health or substance abuse disorders required to access supportive housing and, cannot qualify for a subsidy like CityFEPS that requires a recent eviction, they have no pathway to permanent housing at all. One such family residing in an HSU member program consists of a deaf mother raising a blind son who spends most of her days shuttling her child back and forth to therapy and service programs to help him learn to navigate the world with his disability. DHS is pressuring the provider to place this client in permanent housing and continuously asks how many apartments this person has looked at and what she is doing to leave shelter. These questions persist even though she has limited income, does not qualify for any subsidy programs and is ill equipped to land a full time job to qualify for a LINC I voucher or NYCHA priority given her the obstacles she is faced with. Families like this must be given access to NYCHA priority or an HPD set-aside unit. Families that have the ability to work full time should be given flexible housing assistance not dependent on their eligibility for TANF programs (pegged at 200% of the federal poverty level or less) at rates that reflect the current housing market to allow them to transition back to the community quickly and permanently.

The City pledged to streamline rental assistance programs in the 90-day review – providers should be part of this conversation. Shelter providers can help identify gaps in existing programs and re-align eligibility criteria with the realities homeless people confront every day so that we can match people with the kinds of housing supports they need to exit shelter quickly and permanently.

### **NYC COUNCIL BILLS**

Finally, before I conclude my testimony I would like to remark upon the bills being heard by the Committee today.

- Int. 622 - A Local Law to amend the administrative code of the city of New York, in relation to requiring the department of homeless services to educate homeless persons on domestic violence and child abuse.
  - Domestic violence is a leading cause of homelessness among families. The more that we can do to educate families and individuals about the signs of abuse and the services available to help support victims the better. HSU recommends that the Mayor's Office to Combat Domestic Violence work with the Council and the Department of Social Services to implement a public education campaign that helps spread the word about available victims' services.
- Int. 1066 - A Local Law to amend the administrative code of the city of New York, in relation to requiring the department of homeless service to conduct quarterly point-in-time counts of the unsheltered homeless population
  - HSU agrees that more frequent counts of unsheltered New Yorkers can more accurately reflect the number of homeless people living on the streets and in our transit system than the single count currently conducted each winter as required by HUD. DSS has adopted an approach similar to the one proposed in this legislation already via its HOME-STAT initiative that is showing impressive results. Given the allocation of appropriate resources, HSU would support the expansion of this work citywide.
- Int. 1443 – A Local Law to amend the administrative code of the city of New York, in relation to requiring that certain Department of Homeless Services employees be trained in administering opioid antagonists
  - The opioid epidemic is a serious public health emergency. Fortunately, medications are available to neutralize the effect of an overdose and have been proven to save lives. Most HSU members already train their staff to administer such drugs to persons suspected of overdosing. Many member agency staff members have saved lives by having done so. We encourage this training to continue citywide and support efforts to reach additional staff. HSU requests that the Department of Homeless Services work collaborative with homeless services providers to develop, fund and implement a robust training program so that all appropriate staff have access to this life saving training.
- Int. 1459- A Local Law updating the report on utilization of and applications for multi-agency emergency housing assistance
  - HSU supports any and all effort to improve the utility of existing reports to effectively capture the scope of the homeless crisis in New York City.
- Int. 1460 - A Local Law to amend the administrative code of the city of New York, in relation to requiring the formation of an interagency coordinating council to combat homelessness
  - HSU supports the creation of an interagency taskforce on homelessness that is inclusive of homeless services providers. Much of the testimony given today centers around on how the expertise of providers can be more effectively leveraged when crafting and implementing policy to the benefit of homeless New Yorkers citywide.

## **CONCLUSION**

Homeless Services United recognizes the difficulty in remaking an entire service delivery system – the structural reforms alone require a tremendous amount of effort to achieve – but we hope that the City is willing to meaningfully engage with providers as full partners to realize our shared goal delivering high quality services as efficiently and effectively as possible in order to prevent, reduce and manage homelessness. Thank you for the opportunity to testify.