

New York City Council Committee on General Welfare Oversight: Supportive Housing Intro 147 April 24, 2018

Testimony of Homeless Services United respectively submitted by Catherine Trapani Executive Director 212-367-1539 <u>ctrapani@hsunited.org</u>

Good afternoon, my name is Catherine Trapani and I am the Executive Director of Homeless Services United (HSU). HSU is a coalition of 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 Services 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.

On behalf of HSU, I would like to thank the City Council for holding this hearing. HSU has previously testified to the many benefits of supportive housing. We know that it is a vital

resource that has helped thousands of New Yorkers escape homelessness and live independently. Persons with mental health disorders and those who are chronically homeless have benefited the most because of the concentration of resources set aside for these groups but, other groups like families coping with the trauma of domestic violence or those with disabled household members and, runaway homeless youth also can benefit greatly from service enriched and supportive housing models.

As we've testified before, from the perspective of groups working with homeless individuals and families, the biggest challenge associate with supportive housing is that there simply isn't enough of it. Despite homelessness being at or near record highs street outreach, safe haven, stabilization program and drop-in service providers serving chronically homeless individuals living on the streets have reported a significant slow-down in the numbers of interviews for supportive housing they can arrange for their clients. The slow-down is largely attributable to (1) the dwindling supply of New York New York III housing units, (2) low turnover in existing supportive housing projects and (3) the slow pace of new units coming online from the New York City 15/15 and New York State Empire State Supportive Housing plans.

In recognition of the need to do more to get people off the streets and into housing more quickly, DHS recently instituted new performance targets for safe havens and traditional shelters that increase placement targets by 15%. Providers who fail to meet these targets are being told that they will be reported for failing to meet contractual requirements and have contracts removed however, no new resources are being given to providers to meet these goals. Programs are being advised to place mentally ill clients with substance use disorders in independent living, shared housing or other situations to meet placement targets even though we know that supportive housing is the proven solution for stability for persons with such complex needs. Instead of responding to the lack of available supportive housing units with unattainable targets thereby incentivizing inappropriate referrals and, threatening punitive measures, we recommend the City expedite the timeline to open new supportive housing units and improve the placement process to ensure that those living on the streets or in safe haven and stabilization programs have access to the housing they need. The City must continue to work on an aggressive implementation schedule for the New York City 15/15 program. This will involve communities throughout the City welcoming projects to their community. We welcome the Council's help to identify potential sites as well as assist in working with community members to ensure that projects can go forward and welcome the addition of service rich, supportive housing in their community. As a resident of a block that houses an SRO, supportive housing building for families and a stabilization shelter looking to place street homeless individuals in supportive housing, I can personally attest that well run shelters and supportive housing programs make good neighbors and every neighborhood should welcome such programs to the community.

In addition to addressing the siting challenge for congregate supportive housing facilities we also need to increase the pace of scattered site units coming online to ensure there is sufficient supply to meet the demand. One obstacle to getting traction from housing providers to open scattered site housing units is the discrepancy in rates for congregate and scattered site facilities. The rates are structured such that rates for services in scattered site programs are lower than congregate despite the fact that it is actually more expensive to deliver services to people living in multiple locations due to the lack of efficiency associated with scattered site programs. We strongly urge the City to create parity between scattered site and congregate housing rates so that providers can develop appropriate robust social service programs for both housing models and quickly open the scattered site units.

Even if we can begin to replenish the supply of available placements, we know there are not enough units to meet the need so we must ensure that the placements we are making are allocated to those who need supportive housing most to successfully move beyond homelessness and into housing. The process for navigating the application process remains onerous and, in a significant number of instances, even those who are referred for interviews for supportive housing placement can be rejected because they arrived to the interview late, appeared disheveled or disorganized, didn't have insight into their mental illness, were believed to be noncompliant with treatment plans or likely to be uncompliant with such plans, weren't able to effectively communicate with the interviewer or, appeared to be in need of a high level of care. Given that most persons who qualify for supportive housing have been homeless for at least a year and suffer from severe health conditions including mental illnesses and substance abuse disorders and, are not yet living in a stable enough situation to help them function as well as others, such things ought not be grounds for rejection from housing. Persons who struggle with the interview process are likely the ones who would most benefit from supportive housing. It is urgent that we measure and address these issues. Street homelessness is at or near record highs – it simply cannot be the case that a person applying for supportive housing can be rejected because they need a "high level of care" if the only alternative is that they remain homeless.

HSU strongly supports Intro-147 such that the City to track referrals, interviews, and placement outcomes so we know exactly how scare supportive housing resources are being used and can determine the magnitude of any gaps in the system that are leaving out some of the most vulnerable people experiencing homelessness.

The City has begun to take steps to try and address some of these issue by beginning to implement the new Coordinated Assessment Placement System (CAPS) and accompanying vulnerability index. CAPS is meant to streamline the application process, reduce reliance on paper records produced by applicants (particularly in cases where the person is already known to City systems and has records on file) and reduce agency and provider discretion thus ensuring that those with the highest needs are first in line for an available unit. The problem with the system as designed is that it prioritizes "multiple systems' involvement" and high Medicaid billing as key indicators of vulnerability over street homelessness, safe haven usage and assessments conducted by homeless services providers. This change means that someone who has been living outdoors, avoiding systems of care and unlikely to access traditional shelters is less likely to get linked to an apartment than someone stable enough to partner with services providers to address medical and other needs that would result in the requisite high healthcare spending and systems' involvement to achieve priority. This system means that the City is moving away from the proven "housing first" model favoring those who are already engaged in treatment. It is imperative that the vulnerability index be adjusted to ensure that those living on the streets or awaiting housing placement in safe havens and stabilization beds receive the priority they deserve to access housing.

Supportive housing only works to the extent that those who need it are able to access it. We need to ensure that housing providers are not turning away persons who may be challenging to work with and that housing models are flexible and appropriately funded to adequately care for persons seeking housing enriched with supportive services, even those with complex needs who struggle with the current framework.

Supportive housing has been an incredibly important resource in the fight to end homelessness. HSU is glad to see the City is committed to building on its success and hopes that some of the concerns raised to today will be addressed by the ongoing work to create new supportive housing resources. I also hope that as the City moves forward with plans to create more supportive housing that they can commit to tracking progress in these areas so we can be accountable to the most vulnerable citizens who so desperately need supportive housing to move beyond homelessness. I would like to thank the City Council for the opportunity to testify and look forward to working with you on this important issue.