



HOMELESS SERVICES UNITED

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**Testimony of Catherine Trapani, Executive Director, Homeless Services United, Inc.
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Introduction

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

Faced with record high homelessness, the de Blasio administration has made important investments in homeless services. They have expanded street outreach programs and the HomeBase homeless prevention network, invested in housing subsidies for persons exiting or trying to avoid entering shelter, introduced mental health services into the family shelter system and have begun to replace poor quality cluster site shelters with purpose built, service rich shelters.

"Model Budget" Implementation

As part of the new investments for DHS first announced **for Fiscal Year 2018**, the administration said that they would reform rates paid to shelter providers through implementing a "model budget" to finally reflect the true cost of responsibly operating shelter programs. These model budget investments **have only just now begun** implementation in families with children and adult shelters. When the effort was announced, shelter providers had high hopes that this process would finally adjust rates paid for services that had remained unchanged since the birth of the modern shelter system in the late 1980s and 90s. This investment is viewed as critical by all concerned. In many cases conditions at shelters had deteriorated due to chronic underfunding of maintenance and audits by the State Office of Temporary Disability and Assistance and the NYC Comptroller documented unacceptable conditions. In addition, salaries for case managers, housing specialists and other direct service staff had been budgeted at amounts so low, that turnover is an ongoing problem resulting in frequent vacancies that translate to higher caseloads and less individualized attention and support for residents. **The administration must accelerate the pace of registering the necessary model budget amendments so that nonprofits can finally put**

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these resources to work and continue to improve the conditions and programs in our shelters throughout the DHS portfolio.

Indirect Rates

The rate that nonprofits are allowed for the running of their organizations was not part of the DHS model budget exercise. It remains capped at the arbitrary level of 10%, the lowest amongst human service contracts, despite the fact that many independent auditors confirm the true cost of operating a nonprofit organization can be considerably higher.

The gap between what the City funds on our contracts and what we can supplement with private and philanthropic dollars has grown too wide. It is vital that no cuts are made to human service programs as part of the mandated budget reductions and the chronic underfunding of the sector is rectified.

The sector is united in asking the City Council to include in their budget response a request to the Mayor to invest \$250 million dollars to fill the gap between provider's indirect costs and the contract reimbursement rates from the City. The new Health and Human Services Cost Policies and Procedures Manual, developed as part of the Nonprofit Resiliency Committee, lays out standardized indirect costs for our sector. However, without increased funding to address the gaps this manual displays in our contracts, the fiscal crisis we are facing remains unaddressed. Based on numbers provided by the Office of Management and Budget, \$250 million should cover the costs to fully implement this manual.

HRA Prevention Programs

The best way to end homelessness is to prevent it from happening in the first place. HSU members citywide operate programs like HomeBase, Solutions to End Homelessness Prevention Programs and, FHEPS application programs to help New Yorkers stay in their homes when they experience a financial crisis or trouble with their landlords.

We are grateful that the City has continued its commitment to fund the HomeBase Program which has proven to be a successful model to keep households housed in the community. However, no one program can be all things to all people. HSU feels strongly that an array of interventions must be available to tailor the level and type of service needed to families and individuals Citywide to ensure that no one slips through the cracks and becomes homeless.

Family Homeless Eviction Prevention Supplement Community Based Organizations (FHEPS CBOs) - \$3,000,000

Following the settlement of the Velez case against the State, a new version of the FEPS program (renamed FHEPS) was created to support families on public assistance facing eviction or, in limited cases loss of their housing due to domestic violence with accessing and receiving a rental supplement that would allow them to retain their housing.

Community Based Organizations (CBOs) were to continue to implement the settlement agreement by helping families apply for the supplement program, negotiate with landlords to resolve housing court cases, help maintain benefits and a host of other services. The State shifted the CBOs' contracts to the City, and the City is now planning to cut the contracts altogether, contending that HRA can absorb the work these organizations have been doing for over 30 years with no new resources. Collectively, FHEPS providers citywide handled nearly 9300 cases in 2018.

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Much of what these CBOs do involve advocating for clients as they navigate complex systems including HRA's benefits. In many cases, particularly where clients are unable to meet HRA requirements on their own, CBOs take on the agency's duty to assist to ensure they are able to access benefits.

As HRA has worked to right-size PA caseloads and ensure all eligible persons are able to enroll in benefit programs for which they qualify, centers are at risk of becoming increasingly crowded and HRA workers are at risk of being increasingly overburdened. A recent study by the Urban Justice Center (UJC) Safety Net Project demonstrates that even as this administration has made significant strides in improving customer service, 10 out of 19 Job Centers still have a phone and voicemail compliance rate of less than 50% as documented by HRA data received in a FOIL request- this means that half of the time, clients are unable to reach workers to resolve case issues that could impact their ability to enroll in or maintain FHEPS benefits.

The UJC study also shows that as caseloads increase, "complaints to cases" ratios increases, demonstrating the added risks of burdening HRA staff with exclusive responsibility for FHEPS applications. Bronx County has the highest PA caseloads (and highest FHEPS applications rate) and also the highest complaint ratio at 14.25 per FOIL data.

Anecdotal and survey data found elsewhere in the report detail significant hurdles clients experience collecting required documents, accessing information and resources and other challenges. CBOs are valuable partners that help the system move more efficiently and reduce the burden on Job Center Staff, and we urge this partnership to continue to ensure those at risk of homelessness are able to maintain benefits.

We request that the Council fight to preserve these essential programs by funding these FHEPS contracts at their current levels - \$3 million.

CityFHEPS

While the State program covers families with children on public assistance being evicted from their homes, the City version (CityFHEPS) covers a host of other groups who are also at high risk of entering shelter. Unfortunately, even with the expanded coverage, there are still groups who have been left out of the program either by design or failure to implement critical components of the program.

Despite the regulations stating that homeless youth living in DYCD shelters may be referred to the CityFHEPS program, the City still has not created a referral protocol or mechanism for them to do so. This is the third iteration of a local rental assistance program that promised to include homeless youth but never did.

They were "working on it" when they implemented the LINC program but delayed implementation because they were going to transition to City FEPS. Then, when the rules and procedures weren't released we were told to wait again because the programs were about to consolidate and be released as "new City FHEPS" following the settlement of a lawsuit with the State. The rules for new CityFHEPS were published in November of 2018 and we still do not have a procedure to enroll young people in the program. It has been 4 years of promises – **young people need access to this program and the budget should reflect an increase to accommodate enrollment of runaway and homeless youth.**

Other groups have also been left out of the CityFHEPS program. If you are a tenant without children at risk of homelessness due to eviction, you can only get help if you have a history of shelter, an APS case or, are in a rent controlled apartment. Rent stabilized tenants are not eligible unless they have APS or have been in shelter

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before. In order to get help with your rent you actually have to go to shelter first or, be so disabled and in need of services that APS agrees to open a case. The single adult shelter census is rising faster than any other subpopulation in the homeless system – *we should be making it easier for people to retain their housing not forcing them into shelter and out of their rent stabilized units before we offer them assistance.* **The CityFHEPS program should be expanded to include rent stabilized single adults who are facing eviction if they have long term tenancies, or if they have other vulnerabilities making rehousing difficult such as being a senior or having a disability.**

In addition, CityFHEPS applications that originate from both shelter as well as some cases within the community, involve a very detailed “walkthrough” to verify the and ensure that the housing is appropriate and in good repair. These walkthroughs are very-time consuming, on average taking 4 hours per visit, with multiple visits often needed to approve the space. Non-profit housing specialists and case managers in most cases are tasked with this new process, but without any additional resources. **We ask that the Council commit additional funding to adequately fund non-profit providers to conduct these “walkthroughs”.**

Neighborhood-based Services

HSU is a member of the Family Homeless Coalition (FHC), a group of service and housing providers, children’s organizations, and advocacy organizations working collaboratively to push for strategies that would prevent family homelessness, focus on the needs of children and families experiencing homelessness, and support long-term stability of families with children who leave shelter.

The Coalition has a set of priorities that aims to prevent shelter entry, improve the well-being of children and their families that rely on shelter, and support families beyond shelter.

The proposed City’s FY20 budget fails to make the necessary investments to solve family homelessness. The Coalition is focused on two initiatives that have budget implications and can have a sustainable positive impact on this issue: Increasing the number of social workers in schools with high concentrations of students in transitional housing and developing a neighborhood-based prevention model that can support families before shelter is necessary and after shelter for those experiencing homelessness.

An innovative approach to prevention and aftercare is necessary to reduce and prevent family homelessness and to bolster housing security. A housing stability program is needed that is **neighborhood-based**, time-limited and aligned with varied households’ needs to remain stably housed.

- The program would serve 2 groups: (1) those who are housed but may be moving toward homelessness and (2) those who exit shelter.
- This program model is intended to complement existing HomeBase services, which currently are focused on individuals and families in crisis.

The Neighborhood-based Service Coordination Model would:

- provide services to those not immediately in crisis (e.g., tenants with rent arrears or just beginning legal action, including those without a history of shelter) to be able to provide support before they’re in crisis.
- provide dedicated outreach and follow-up
- expand the continuum of services available to families by working with people before eviction and/or those who have recently exited shelter that need longer-term supports
- refer families to HomeBase as appropriate

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Initiatives for Persons in Shelter

Bridging the Gap Social Workers - \$13.9 million

Today, there are record high numbers of students experiencing homelessness; more than 1 in 10 NYC students are experiencing homelessness. In 2017-18, a record 114,659 New York City students were identified as homeless.

Students experiencing homelessness have poorer educational outcomes than their housed peers, and students living in family shelters fair even worse, housing nearly 38,000 students during the 2017-18 school year. Homelessness can expose children to high levels of toxic stress and trauma. In addition, students living in shelters have higher rates of disability, suspension, lower proficiency rates in both reading and math, and higher rates of chronic absenteeism.

Funding for key educational supports is eliminated in the Preliminary Budget FY20. Three years ago, the Administration began several initiatives to provide the necessary educational support for students living in shelters, including Bridging the Gap social workers to work in schools with high numbers of students living in shelters. We are troubled by the elimination of these initiatives in the Prelim. **The City must restore the \$13.9 million included in the FY 19 budget and provide an additional \$6.5 million to hire an increased number of Bridging the Gap social workers to focus on serving these students, establish an Educational Support Center at PATH, and hire additional central and regional managers to help run the DOE's Students in Temporary Housing program.**

- Currently, 69 DOE social workers are working in schools with high numbers of students living in shelters. Social workers provide counseling services, connect students with academic support and other support services, and aim to reduce chronic absenteeism. **However, more than 100 schools with 50 or more students living in a shelter do not yet have a Bridging the Gap social worker.**
- **We strongly recommend a restoration of the existing funding for the 69 social workers and adding an additional 31 social workers in order to provide a total of 100 Bridging the Gap social workers.**

Client Care Coordinators

Thanks to support from the Thrive Initiative, Tier II shelters serving families with children were able to add social workers to their staff. These new staff members known as Client Care Coordinators have been able to assess the mental health needs of families in shelter, link clients to care, conduct assessments necessary for supportive housing entry and support parents of chronically absent children to improve school attendance.

These staff members have been critical to the success of families in shelter. **HSU therefore requests that families living in hotels be afforded the same level of service as those residing in Tier II shelters. DHS must allocate funding to hotel programs to hire client care coordinators.**

Combatting the Opioid Epidemic and Providing Comprehensive Health Services - \$23 million

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The opioid crisis continues to ravage the homeless community, particularly single adults in shelter. DHS, thanks in part to resources from the First Lady's Thrive initiative has done a good job in ensuring access to Naloxone to combat fatal overdoses, but we must do more.

Medically Assisted Treatment (MAT) is an evidence-based intervention that is proven to save lives. Using a "medication first" approach, medical professionals can prescribe medications like Suboxone that will reduce symptoms of withdrawal and prevent overdoses, providing a window of opportunity for recovery specialists to engage with clients and assist them with their recovery and health.

Some shelters for adults and families with children have medical clinics co-located with programs. The co-location model allows shelter residents to easily access care, lowering barriers to engagement with medical providers and making treatment for health issues, including opioid addiction more accessible to those most in need. Recently, DHS has tried to move away from this model suggesting that Health and Hospitals (H+H) could increase capacity to take on this function. This move deprives clients with an option to receive on-site care and ignores the fact that H+H has no record of providing care for this kind to homeless population while the existing network of providers is already doing good work. At a time when homeless deaths are on the rise, it is a mistake to move away from proven treatment models in the pursuit of cutting costs. Medical services should be a core component of shelter budgets.

To effectively address the opioid crisis and other critical health needs of Homeless New Yorkers, HSU proposes that DHS co-locate nurse practitioners at Mental Health, Assessment, and Single Adult shelters with high incidences of overdoses, to identify patients, prescribe medication and monitor the health of persons struggling with addiction. We further propose enhanced staffing at the DHS Office of the Medical Director, so it may act as a hub to identify treatment partners in and around the shelter system, deploy trainers to support shelter staff and clients with Naloxone and other resources, identify areas of need, and evaluate progress so that the system can remain nimble in its response to this and any other future public health crisis.

Safe Havens and Street Solutions

HSU is grateful to the administration for the addition of \$25,000,000 for new Safe Haven programs. The Safe Haven model along with expanded outreach services have proven successful in getting the most vulnerable people off the streets and into shelter and housing with over 2,000 people coming indoors and staying off the streets since 2016. In addition, thanks to Thrive, ACT teams have been deployed to support chronically homeless mentally ill people who typically cycle from street to hospital to jail to home. HSU is thankful for the support of the administration of our Street facing programs in getting people indoors and into care.

One area where the Street Solutions Programs could use support is with a rate adjustment. Unlike their peers in the traditional shelter programs, Safe Havens and Drop-in Centers did not go through a model budget exercise to modernize their rates. We request that the administration partner with the nonprofits holding contracts for safe havens and drop-in centers that have not received an adjustment in 10 or 20 years to ensure that they will be able to continue to provide the high level of service we rely upon to keep our most vulnerable residents safe.

Conclusion

HSU is grateful to the administration and the Council for the continued investments in our sector. We understand that these are uncertain economic times yet we know we must not balance the budget on the backs of the poorest New Yorkers. Now more than ever, a robust safety net is necessary to ensure the resiliency of our City no matter what changes to the economy may come down the road. Thank you for your time and

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commitment to addressing the needs and concerns of homeless and at-risk New Yorkers and those who serve them.