

Ask Me Anything!

Housing First
February 3, 2016

ABOUT AMAs

Ask Me Anything (AMA) sessions provide an opportunity for members of the Community Workspace on Homelessness to ask experts questions about homelessness. Each AMA features a different topic. Workspace members are able to post their questions in advance of the AMA, or join the experts live.

Our first AMA on February 3, 2016 with Wally Czech, Housing First Specialist, discussed the Housing First approach to ending homelessness. Housing First is a recovery-oriented approach, with the basic underlying principle that all people deserve housing, and that adequate housing is a precondition for recovery.

Clients are also provided with further services, including health, education, employment supports and community connections, as needed.

Case studies from Canada and abroad have shown that Housing First can effectively reduce chronic and episodic homelessness, and reduce the use of emergency services and shelters. In this AMA, Workspace members asked questions relating to available supports and services, landlord-client relationships, and how to monitor and organize housing.

This document is a transcript of the Housing First AMA. You can find the original discussion at: <http://bit.ly/1RQNFth>

THE EXPERT



Wally Czech is the Housing First Specialist with the City of Lethbridge in Alberta Canada. Wally has a Masters Degree in Counselling Psychology and has been in his current role since July of 2011 where he provides the clinical and operational support to all funded Housing First programs within the city. In addition he is responsible for ensuring best practices, Housing First fidelity, program development, training, and continuity of the Housing First system. Wally is passionate about Housing First and adherence to the core elements but being creative in fitting those elements into the demographics of the community you work in.

QUESTION #1 – TERRY BURDEN

I am struggling with landlord communication issues. How do I, as a Housing Case Manager, handle a situation where a client is being asked for information by a landlord that is against the human rights code? Is there a best practice for explaining to the landlord that they have breached the HRC without damaging the relationship or jeopardizing the client's chances of getting the unit?

■ WALLY CZECH

Landlord relations can be a tricky scenario. We want to be able to establish positive relationships with them yet our main role is to support and advocate for our client. I believe the best guide is that when you have to choose between supporting your client and appeasing a landlord, you may have to err on the side of the client. Yes we run the risk of burning a bridge with a landlord but when you weigh out the cost of losing a landlord verses the trust of the client, I think it becomes an obvious choice. But I also believe that landlord respect honesty and straightforwardness. I think you can approach them in a on combative way and provide them with documented information in a fashion that suggests you are trying to help them also by making sure they are clear on some of those rules and guidelines. This also speaks to the importance of being very thorough and clear prior to move in when you work with landlords. Those kinds of things can be discussed and put on the table right off the bat.

I thought I would add something. In the end the triad relationship between you, the client and the landlord is a business relationship. As long as you are clear with the landlord in the beginning that the goal for all three is to manage and maintain affordable and decent housing for everyone, then you can broach issues like that openly and without tension. I would also allow the landlord to explain why that information is believed to be important. If there is a reasonable reason for wanting it then you might be able to work with everyone to provide something that is beneficial for all. Keep it a win/win as much as possible.

QUESTION #2 – ERIN SHEA

I have some questions regarding the organization of for housing first teams and programs in other jurisdictions:

I have a lot of questions!

If possible could you answer the questions below from the perspective of what a client would experience if they were to go through your intake process? Some of the questions I am looking to answer are below.

What does the organizational structure of your Housing First program include? i.e.: How many teams do you have, what are the title of the positions of the people who sit on your teams ie: are there psychologist, counselors, social workers, nurses and landlords?

What kind of services do they include, are there case managers that handle the vulnerability assessments and medical clinicians that handle the clinical mental health assessments? What is the ratio of clients to case mangers or housing first teams?

How do you monitor clients housing? Is home visits to monitoring housing a separate duty that is handled aside from the housing first team's role?

■ WALLY CZECH

Our system of care begins with centralized intake. We have one for adults and for youth up to age 24. We have found it important to separate the two. Central Intake is where anyone experiencing homeless or housing issues can go for assistance. The core mandate is to assess (initially for Housing First appropriateness) using a common assessment tool, triage – determining the best agency fit for the Participant, and then to facilitate a quality referral including a warm transfer. If Participants are not appropriate for Housing First, central intake will provide additional referral, direction, and connection where necessary.

Additionally from our central intake we operate a diversion program. This encompasses a process where we work with new to shelter people to get them out of the shelter as quickly as possible by providing less intensive case management and supports. We also do what we call eviction prevention. People who are not Housing First Participants come to central intake at risk of eviction or losing housing. The workers there provide additional support, advocacy with landlords and funders, and case management to prevent the eviction or relocate people to more appropriate housing.

We also have a separate intake process from our Domestic Violence Shelter at the YWCA who provides Housing First referrals directly to a housing program at the YWCA where they use a form of intensive case management to house and provide follow-up supports.

Central Intake has 6 Housing First housing teams they can refer to encompassing both adult and youth populations. These teams currently do everything from landlord recruitment and retention to housing to the follow-up case management once housed. One team is a clinically based team which we are currently revamping to be either a full ACT team or a FACT team (Flexible ACT). That team has mental health and addiction specialists, OT, and hopefully a nurse practitioner type, peer specialist, and other case management. They provide more direct service than ICM brokering.

Case managers on our ICM teams complete ongoing SPDAT assessments and because of our high number of really complex Participants, work from a 15:1 ratio but I have also created a formula taking into account varying levels of complexity where some Participants count as 1.5 or even 2 clients. The ACT team works on a 10:1 ratio. Home visits are an expectation. I don't believe you can truly assist someone maintaining permanent housing if you are never in their home. However this is not always possible. We work to have 50% of our Objective based visits (goal focused) be in the home but as mentioned, not always possible.

We are looking to include what we feel is a very important role. That would be a housing locator who would do the majority of landlord recruitment and tenancy work for all teams which would free up case managers to focus primarily on the case management. Hope that helps.

QUESTION #3 – JESSE DONALDSON

What does it mean when we say that in a Housing First model, we separate housing from services/supports?

■ WALLY CZECH

This is a common point of confusion in Housing First Jesse. What we are really talking about is that neither housing nor supports are contingent upon the other. As Housing First programs, we should not be refusing a housing opportunity to someone if they are not engaged in services like mental health or addiction treatment. Likewise, we should not refuse to assist someone with connecting to those services if they are not housed. If someone is housed and they are or are not connected to other services and they lose their housing for any reason, this should not prevent us from continuing to assist the person in their goals. Sam Tsemberis once said, "Housing First is not about housing. It is about priorities. It just so happens that when you ask homeless people what their priorities are, the majority of them indicate housing." This is why establishing housing first is such a focus. But regardless of which avenue is the priority for a client, we do not base one type of support or housing on participation in another.

QUESTION #4 – RICK LEVER

I've been having some difficulty finding and more importantly retaining landlords throughout the housing first platform. Do you have any potential tips and/or strategies for strengthening these important relationships?

■ WALLY CZECH

Another important question. Landlords are very important part of the work we do. I have created a set of Standards of Practice for our programs. One is them is around landlord relationships. We have the expectation that case managers have minimally monthly contact with the landlords to update them and get their feedback. Another important tool our agencies have found helpful is to have landlord appreciation events and I am putting together a landlord advisory group where we will get regular input and feedback from our communities landlords. I would also recommend that as much transparency as possible up front without breaching confidentiality that you don't have a release for is important. Never promise landlords problem free tenancy but promise them responsiveness from your agencies and then make sure they are responsive.

QUESTION #5 – JULIA BAHEN

Housing First is premised on the idea of consumer choice and self-determination. How much choice are you able to provide to your clients? Is housing provided by your organization directly? Or are housing vouchers used?

■ WALLY CZECH

The answer to your question is neither. In our community we work primarily off of market scattered site rentals and whatever landlords we can recruit and units we can secure with property management companies on a client by client basis. However we have worked to create affordable housing agreements with property management companies where we have a certain percentage of their units that are reserved for Housing First participants and with a reduced rent. Otherwise we work with our income support office and rent supplements to make it more affordable.

QUESTION #6 – BRYAN SALI

Hi Everyone,

I'm working on a project to analyze the real risk of roommates in Housing First (re., two clients) and best practices around mitigating the risk. I'm finding it difficult to find any teams that will allow roommates and even more trouble finding any hard data relating to roommates (damages, relational challenges, case work issues, client success rates, etc). There is a lot of anecdotal information out there but I am in need of documented and analyzed data (quantitative or qualitative). Does anyone know any teams who have done this or are doing it, also any research out there?

Thanks!

■ WALLY CZECH

Hi Bryan. You will continue to have difficulty finding that sort of research or documentation. What I will say is that it is too bad that so many programs do not allow roommates. When it comes to the violation of a lease agreement then I get it. But if a participant really wants a roommate, and the case manager has discussed it with them so they have at least heard what potential risks are involved, why would we not support them in what their identified needs and wants are. Isn't that also consumer choice. How would you are I feel if someone told us that were not allowed to have a roommate to rent with. I agree that it could be problematic but it is important that they be given the opportunity. Sorry I couldn't give you the data that you need.

QUESTION #7 – JOVAN LOTTIS

Strange question:

What is the HF policy on pets? Obviously it would rely on the individual landlord or building manager's policy, but if pets are allowed on premise, is there any protocol/policy regarding this? What if a client already has a pet prior to placement?

■ WALLY CZECH

Please don't take this the wrong way Jovan but I must agree with you. Strange question. But I get why it might be asked. Based on the Housing First methodology and philosophy there is nothing that says pets should not be there. In fact, again when we talk about consumer choice, many of us choose to have pets. As you mentioned, if a landlord doesn't allow pets then the consumer has the choice to look for another place or let go of their pets. If they are like many other people, it is not an option to say goodbye to their pets. In addition, when it comes to moving from homelessness into housing, loneliness is often one of the biggest barriers to maintaining that housing. Many people leave housing because they do not have adequate social relationships and meaningful daily activity. This is often why guest management can be a struggle. So to be honest pets can be a great way to satisfy those areas. But many landlords are not open to pets and I can understand why.

QUESTION #8 – JUSTIN WONG

Homeless populations are not homogeneous – one service delivery model cannot be applied uniformly in different regions. How do you tailor your programming to suit the diverse needs of your clientele?

■ WALLY CZECH

I couldn't agree more Justin. In fact I have always said that a Housing First System of Care is not and should never be cookie cutter. The primary ingredients should be the same but it can take various shapes with interesting sprinkles and colors of icing.

So that being said, how do you get the system of care that is right for your community? I think the most important approach is to have a collaborative effort happening all the time with as many of the stakeholders as you can possibly bring to the table. Get their feedback about what the needs of the community are. Get their ideas of how they can see things implemented. Involve them in committees and meetings. For example, I facilitate a by weekly Interagency Complex Case Consultation meeting where we consult on our most challenging cases. We have at that table multiple members of the professional world in our community. We have members from mental health, addictions, police, Alberta health Services, probation, children's services, and so forth. So their involvement allows us to get amazing feedback about the needs of the community. Then we take that feedback, combine it with ongoing data collection, shelter analysis, and homeless counts, to solidify what the picture is here and what pieces of the system are lacking and need to be strengthened. I hope this provides some help. If you need more specific info please feel free to repost further questions.

You have to not be afraid to be creative and go out on a limb and try new things knowing that you may have to adjust funding, defund, or even eliminate programs along the way. It is a constant system of trial and error until you get the right programs that match your community demographics and needs.

If you look at the profiles of various communities that have been published in the COH's Housing First in Canada, as well as the different communities in the At Home Chez Soi study. They all had different approaches that were for the most part derived from the differences in their communities. Also a lot of good information for those communities came out of the study for areas that each community could do differently. For example, Winnipeg, with a 70% overrepresentation of Aboriginal homelessness, had to find creative ways to develop different more culturally appropriate housing models.