

Developing the Supportive Housing Program

participant materials
supportive housing training series



DEVELOPING A SUPPORTIVE HOUSING PROGRAM

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THE PRINCIPLES OF SUPPORTIVE HOUSING

In practice, supportive housing programs are diverse and are intended to have the flexibility to serve a wide range of individuals. Variations in program philosophy, size, location, tenant mix, staffing and support are among a myriad of elements that make each housing site different from the next. A site's tenancy, for instance, might include working people, the unemployed and underemployed, people living with AIDS, mentally or physically ill individuals, the formerly homeless, substance abusers in recovery or still using and others. Coupled with affordability, the flexibility to adapt services to the needs of the building's tenants is possibly one of the model's greatest strengths.

Although there are many differences among supportive housing programs, numerous principles have informed and guided the model's development. This handout reviews core principles that providers need to consider in order to address the housing stability and health and human service needs of their tenants.

Affordability

The primary purpose of supportive housing is to increase the availability of housing to low income people.

- Tenants may be expected to pay rent but typically not in an amount that exceeds thirty per cent of gross income.
- Providers have managed to operate fiscally viable housing sites by relying upon rent subsidy programs such as Section 8.
- Some projects also rely on the rental streams provided by units reserved for individuals who are employed, and still others have structured programs to include the use of low income housing tax credits.

Safety and Comfort

Tenants should feel comfortable and safe in their homes. The needs of some tenants will often require that the provider pay particular attention to safety issues. People who have been homeless have frequently been victims of or exposed to violence. Weaker tenants can become prey and the targets of intimidation and exploitation.

Being comfortable and safe at home are priorities that most of us have.

- Meeting or exceeding building codes and providing extra security and "creature" comforts when resources allow are efforts that all tenants appreciate.
- A secure environment includes the development and implementation of clear administrative procedures for rent collection, building maintenance, monitoring

visitors, enforcement of house rules, and is likely to include mechanisms for exchanging information with tenants.

- Promptly addressing safety concerns that are expressed by the tenants is important. Staff and tenants must feel that they have some collective control over their environment. In residences where people feel part of a larger community, they are also more likely to look out for their neighbors and work together to create a safe and comfortable environment.

Support Services are Accessible, Flexible, and Target Residential Stability

Ideally, supportive services are reflective of the tenants' needs and goals. Service programs also require adjustment as the needs and interests of the individual tenants and the larger supportive housing project community evolve and change. By design, supportive housing project support services are intended to help ensure stability and to maximize each tenant's ability to live independently. Support services must be easily accessible and available to tenants. Evaluating if services are effective and useful should occur on a regular basis.

- Programs that have a concentration of individuals with disabilities or other special needs will likely emphasize ongoing assistance with medication and money management, training and assistance with activities of daily living, support in achieving and maintaining sobriety, and accessing health and mental health services.
- Sites vary in how they provide or arrange for services but uniformly stress residential stability as a basic and primary goal of their efforts. In promoting supportive housing project stability, services providers focus on assisting tenants to meet their lease obligations, including paying rent, maintaining a safe and healthy living environment, allowing others the peaceful enjoyment of their homes and complying with basic house rules.
- Depending upon the tenancy and the type of resources available, services can be shaped to have the widest possible appeal and may range from support groups for substance abusers to classes in cooking, the arts, high school equivalency preparation and vocational counseling.
- Linkages with legal services, immigration services and local entitlement and benefits offices are usually essential. Although tenants sometimes need to be aggressively encouraged to use program resources, the onus is on the provider to make the program useful, available and of interest to tenants.
- Supportive housing programs vary in their ability to modify or significantly change their programs because funding, regulatory or other structural requirements may impose restrictions or limitations. In this regard, providers need to carefully weigh the long-term impact that funding or other regulatory agreements could have on a project.

Empowerment and Independence

Supportive housing is intended for people who, at a minimum, can live independently with some assistance. The role of the supportive housing staff is to provide the assistance and, whenever possible, help the tenant increase his or her level of independence. It is expected that some people will eventually be able to live independently without ongoing support, others will need help from time to time, and still others will require help in perpetuity. In general, however, most tenants will benefit from services that are intended to further their independence.

Examples of program efforts specifically intended to foster independence and empower tenants include the following:

- Appointing tenant representatives to the organization's Board of Directors
- Involving tenants directly in the management structure of a project or building
- Providing employment opportunities and vocational services
- Promoting a tenancy that is heterogeneous and integrates individuals with disabilities or other special needs
- Encouraging tenant councils and advisory groups
- Involving tenants in making and modifying house rules
- Providing tenants with property leases
- Allowing overnight guests

In fostering independence, providers need to respect the individual priorities, patterns and communities that take shape in housing settings. Tenants should be able to make lifestyle choices, for instance, even though they may conflict with the provider's preferences. Alcohol, sex and gambling, for example, are issues that can be inherently challenging. Similarly, some tenants will prefer to have limited (if any) interaction with the supportive services staff or with other tenants. Developing meaningful structures that empower tenants will help to ensure the long-term success of a project.

SUPPORTIVE SERVICES IN HOUSING

The primary goals of most supportive service programs are to help tenants maintain their housing and maximize their capacity for independent living. Supportive housing provides an opportunity to serve a broad range of people based on their individual needs.

Services in supportive housing are meant to be flexible and adjust to the changing needs of tenants rather than tenants adjusting to fit into the supportive service program.

Services critical in achieving residential stability and maximizing independence.

- Assistance with budgeting and paying rent
- Access to employment
- Tenant involvement in the ongoing development of the supportive housing project community, including house rules and services offered
- Medication monitoring and management
- Daily living skills training or assistance — particularly meal preparation, housekeeping, developing support networks and socialization
- Medical and health services
- Counseling and support in achieving self-identified goals
- Assistance in meeting lease obligations and complying with house rules
- Referrals to other services or programs
- Conflict-resolution training

In many supportive housing programs, tenant participation in services is not a condition of tenancy. Oftentimes, tenants become engaged in services when they identify a need for assistance in meeting the standard obligations of tenancy, such as paying rent, allowing others the peaceful enjoyment of their homes, maintaining their living units in safe and healthy manner and/or following house rules. In any case, service staff must work to engage tenants in ensuring they live in safe, decent, healthy environments.

PHILOSOPHICAL APPROACHES TO SERVICES

When developing a service program, it is important to clarify an approach to service delivery. This provides a framework for discussing the program when hiring staff or interviewing potential tenants. This handout categorizes and lists characteristics of some general approaches to services.

A. Housing First, Voluntary Services

- Housing is a choice, not a placement
- Housing is a person's home, not a residential treatment program
- People have a right to safe, affordable housing
- All tenants hold property leases and have the full rights and obligations of tenancy
- Participation in services is voluntary and not a condition of tenancy
- Staff must work to build relationships with tenants, particularly those who need support in maintaining their housing
- Tenants prefer "normal" kinds of living arrangements and practical, flexible supportive services
- Classes which teach skills such as yoga, creative writing or ESL might be offered as opposed to more traditional "therapeutic" groups
- User friendly services driven by tenant needs and individual goals

B. Consumer Driven

- Consumers are active community members
- Tenants are involved in planning and program design, services implementation, evaluation and policy development
- Tenants are hired as staff
- Tenants have a mechanism to communicate with or participate on the organization's board of directors
- When tenants are empowered to govern their living community, they are more likely to respect property and treat neighbors with respect
- Tenants are encouraged to make lifestyle choices even though they may conflict with the provider's preferences
- Leadership development and skills training is offered
- Tenants participate in the design of the house rules and therefore may be more likely to abide by them

C. Supportive Approach

- Staff helps stabilize the residence by providing services to meet tenant needs
- Staff is available around the clock, either on-site or through emergency beepers, to provide the support promised to tenants during intake
- Providers seek to create a nurturing environment where tenants have easy access to food, services, and social events and to minimize tenants' need to go outside the building
- Services are usually required as a condition of tenancy, or at least highly encouraged
- Leverage may be used to encourage service participation

D. Harm Reduction

- People deserve safe, affordable housing regardless of their special needs
- Services aim to help people reduce the harm caused by their special needs, such as substance abuse, mental illness or health-related complications
- In helping people to achieve goals they set for themselves, a trusting relationship is established with the provider. This relationship has been proven to be a key to many individual change processes
- Services focus on helping tenants stay housed by assisting with the management of problems that interfere with their ability to meet the obligations of tenancy, such as paying rent
- Tenants are encouraged to explore obstacles toward their goals in an open and non-judgmental atmosphere where they can contemplate costs and benefits of receiving treatment for special needs — staff does not want to alienate tenants or cause them to begin a dishonest game of hiding their drug use, psychiatric symptoms, etc.
- Participation in services is not usually a condition of tenancy

E. Therapeutic Community

- The environment is highly structured with well-defined expectations. Tenants contract with staff to participate in a treatment process that will allow them to develop or return to socially productive lives
- It is assumed that people who end up in supportive housing need to change negative patterns of behavior. Services are designed to help tenants identify areas for change to promote their social, emotional and psychological well-being
- The community is used as the therapist to help people grow
- Fellow tenants are seen as peers and role models while staff members are viewed as facilitators, authorities and guides in the self-help process
- Participation in services is generally required as a condition of residency

CONSIDERATIONS WHEN CHOOSING A TENANT POPULATION

PROGRAM CAPACITY TO MEET THE SERVICE NEEDS OF TENANTS

- Does funding ensure a staff to tenant ratio that will allow staff to meet tenant needs? When funding is inadequate to meet the needs of the tenants, the provider must consider making changes in the population to be served or the goals of the program.
- Does the program fit in with the overall organizational mission? Consider differences and similarities about this project as compared with others the organization now runs. If this project reflects an emerging need that has not yet been addressed by the agency, have discussions taken place about how this project might change/expand the focus of the organization?
- Are resources available for building a service program in a supportive residence? Is there adequate staff capacity and expertise to design and develop such a program? Providers who have tried to cut costs by cutting back on staff coverage sometimes face the difficult task of trying to get funding after the fact, when they realize the resources are inadequate for meeting the needs of the tenants.

TENANT MIX CONSIDERATIONS

- A residence serving different kinds of people is less likely to be stigmatized than a residence that houses a homogeneous group of individuals.
- Mixed housing more closely reflects the surrounding community, fitting more naturally into the neighborhood.
- Mixed housing is less likely to feel institutional to tenants.
- The example of the more independent tenants can help set standards for norms of behavior.
- Integrating tenants of different abilities, needs and ages can strengthen the therapeutic qualities of the social environment.
- Low income working people may not want to associate with people with special needs. Oftentimes, this requires education to help dispel myths about mental illness, AIDS or whatever special need group has been stigmatized.
- It is helpful to blend funding streams so that the provider can work with the whole person and not just one of his/her "problems." Using multiple funding streams can be a complex process.

TIPS FOR DEVELOPING EFFECTIVE PROGRAM GOALS

Program goals are concise statements about what a program intends to accomplish. Goals will not necessarily describe program activities but will identify what will result from those activities. This handout outlines some tips for developing effective program goals.

- Consider the purpose of combining housing with services. Services are generally offered to help people meet the obligations of tenancy so that they may permanently live in safe, affordable housing.
- Typical program goals in supportive housing include:
 - ✓ Provide safe, affordable housing as a permanent residential option
 - ✓ Assist tenants in securing jobs that promote financial independence
 - ✓ Assist tenants in recovering from substance abuse
 - ✓ Reduce harm experienced by tenants due to substance abuse
 - ✓ Increase natural supports available to tenants
 - ✓ Assist tenants in reducing symptoms of mental illness
 - ✓ Promote the use of available community based services
- Translate goals into day-to-day services. The example below illustrates how an agreed upon goal might be interpreted differently.

GOAL: We will provide services that will help each tenant reach his/her maximum level of independence.

INTERPRETATION A: We will avoid services that infantilize tenants. These include things like helping people get to appointments, managing medications, knocking on doors to check on people we haven't seen in a while. If people want services, they'll come to us.

INTERPRETATION B: Some people won't achieve any level of independence or stability without the types of assistance mentioned. Therefore, we have an obligation to provide those services if we are to meet our goal.

SUPPORTIVE SERVICES PLANNING WORKSHEET: PROJECT GOALS

		<i>Projections</i>	
Served by the housing at any one time	✓	Number of individuals or families	OR % of total individuals or families*
A. Project Goals			
Provide safe affordable housing	<input type="checkbox"/>		
Offer a permanent residential option	<input type="checkbox"/>		
Help tenants meet the obligations of tenancy	<input type="checkbox"/>		
Transition tenants into less service-intensive housing options	<input type="checkbox"/>		
Transition tenants into unserved housing in the community	<input type="checkbox"/>		
Increase residential stability	<input type="checkbox"/>		
Maximize tenants' self-determination	<input type="checkbox"/>		
Increase tenants' daily living skills	<input type="checkbox"/>		
Increase tenants' income	<input type="checkbox"/>		
Increase access to employment opportunities	<input type="checkbox"/>		
Begin recovery from substance abuse (indicate amount of clean time if applicable)	<input type="checkbox"/>		
Maintain recovery from substance abuse	<input type="checkbox"/>		
Reduce harm experienced due to substance abuse	<input type="checkbox"/>		
Begin recovery from mental illness	<input type="checkbox"/>		
Maintain recovery from mental illness	<input type="checkbox"/>		
Prevent foster care placement of children	<input type="checkbox"/>		
Reunite families	<input type="checkbox"/>		
Improve parenting skills	<input type="checkbox"/>		
Increase natural supports	<input type="checkbox"/>		
Improve tenants' physical health	<input type="checkbox"/>		
Promote appropriate use of community based services	<input type="checkbox"/>		
Decrease use of crisis/emergency services	<input type="checkbox"/>		
Decrease criminal justice system involvement	<input type="checkbox"/>		
Other (specify)	<input type="checkbox"/>		

Projections

Planning Worksheet – Goals and Conditions of Residency

<i>*Served by the housing at any one time</i>	✓	Number of individuals or families*	<u>OR</u> % of total individuals or families*
<u>B. Lease</u>	<input type="checkbox"/>		
Lease term of one year or more	<input type="checkbox"/>		
Tenants will not have leases	<input type="checkbox"/>		
Tenants will sign a program agreement	<input type="checkbox"/>		
Other (specify)	<input type="checkbox"/>		
<u>C. Length of Stay Restrictions</u>			
1. There will be no limitations on length of stay as long as tenant is in lease compliance	<input type="checkbox"/>		
2. Tenant will be urged, but not required, to move on after a defined period (specify period)	<input type="checkbox"/>		
3. Tenant will be required to vacate unit at defined period of time (specify period)	<input type="checkbox"/>		
4. Other (specify)	<input type="checkbox"/>		
<u>D. Anticipated Average Length of Stay in the Housing Regardless of any Restrictions</u>			
Six months to one year	<input type="checkbox"/>		
1–2 years	<input type="checkbox"/>		
2–3 years	<input type="checkbox"/>		
3–5 years	<input type="checkbox"/>		
over 5 years	<input type="checkbox"/>		
<u>E. Sharing of Units</u>			
1. Each individual/family to have own apartment	<input type="checkbox"/>		
2. Each individual/family to have own bedroom, but will share kitchen and bath with other individuals/families	<input type="checkbox"/>		
3. Each individual/family to have own bedroom and bath, but will share kitchen with others	<input type="checkbox"/>		
4. Each individual/family to have own bedroom and kitchen, but will share bath with others	<input type="checkbox"/>		
5. Tenants will share bedrooms, kitchen and bath	<input type="checkbox"/>		

Planning Worksheet – Goals and Conditions of Residency

Projections

<i>*Served by the housing at any one time</i>	✓	Number of individuals or families*	OR % of total individuals or families*
<u>F. Participation in Services</u>			
1. Participation in services will not be a condition of residency	<input type="checkbox"/>		
2. Tenant will be required to participate in services in order to receive certain benefits in the residence (specify)	<input type="checkbox"/>		
3. Tenant will be required to participate in services as a condition of residency	<input type="checkbox"/>		
4. Tenant will be required to participate in services under certain circumstances (specify)	<input type="checkbox"/>		
<u>G. Sobriety Requirement in Lease/House Rules</u>			
1. Alcohol and drug use to be prohibited or restricted on premises (but not off premises)	<input type="checkbox"/>		
2. "Dry" housing — alcohol and drug use (on and off premises) will not be allowed	<input type="checkbox"/>		
3. Alcohol permitted on-site but illegal drug use not tolerated	<input type="checkbox"/>		
4. Alcohol not prohibited on-site but only in tenants' private units, not in common areas	<input type="checkbox"/>		
5. Alcohol and drug usage will not be addressed in the lease or house rules	<input type="checkbox"/>		
6. Other (specify)	<input type="checkbox"/>		
<u>H. Tenant Involvement</u>			
1. Tenant participation in program management not anticipated	<input type="checkbox"/>		
2. Tenant council or tenant association that advises program and/or housing management will be established	<input type="checkbox"/>		
3. Tenants will be involved in decisions such as house rules, intake and screening, services planning and program development	<input type="checkbox"/>		
4. Other (specify)	<input type="checkbox"/>		

**PROGRAM GOALS EXERCISE:
TRANSLATING GOALS INTO SERVICES**

DIRECTIONS:

Come up with as many interpretations as possible for each goal listed below.

What services would you provide to actualize each goal? [Be prepared to support your interpretation and explain to the group how you see it fitting in with the goal.]

Make suggestions about how these goals might be re-worded for clarification.

1. The program will provide services and create an environment that fosters health and sobriety.

2. The program strives to maximize tenant choice about the living environment.

3. The program will serve anyone who could benefit from our housing and services. We will accept all applicants to our housing as long as they are committed to improving the quality of their lives.

4. The goal of this residence is to create and maintain a sober living environment.

5. Service staff will assist tenants in reaching their self-identified goals.

6. This program aims to integrate special needs and non-special needs tenants.

PHYSICAL DESIGN CONSIDERATIONS

Successful service programs take into account the effect a building model may have on the delivery of the services and adapt accordingly. In cases where a project involves renovation or new construction, the physical building design should be compatible with the plan for delivering services. This handout lists some specific program design considerations.

OFFICE SPACE & LOCATION OF SERVICES

- Are offices easily accessible to all tenants, including those with physical disabilities?
- Do offices provide privacy?
- Is there an institutional appearance to the service offices?
- Is there room for staff to hold meetings?

COMMON SPACES

- Is there a homey and user friendly atmosphere to common spaces?
- Is there a lobby or place where people naturally must come and go? (Can make it easier for staff to interact with people who might not ever come into an office.)
- Is there sufficient common space to hold activities and groups?
- Is the atmosphere of the common spaces welcoming?

SECURITY FEATURES

- Is the front entry area supervised?
- Are security cameras placed where they can help security staff keep an eye on out of the way areas?
- Do tenants carry keys or have keycard entry? What happens when tenants lose keys?
- Do security staff patrol floors at night after staff leaves?

GENERAL BUILDING DESIGN

- Does the building fit in with other buildings in the community?
- Was the building built to be a permanent residence or has it been re-designed to accommodate tenants?
- Do tenants have their own baths? Kitchens?

UNIT DESIGN

- Will the units be self-contained [private bath and kitchen]?
- If not self-contained, how many tenants will be sharing facilities?
- Will the units be furnished?
- Do tenants have their own baths? Kitchens?

PARTNER SELECTION CRITERIA

THE ORGANIZATION'S MISSION AND GOALS

- What do you think the goals of this program should be?
- What populations are you interested in serving and why (e.g., singles, families, people with special needs)?
- What are the reasons you want/need to partner with another organization?

THE ORGANIZATION'S VALUES AND PHILOSOPHY

- Does your agency have an approach to services in supportive housing?
- What motivates your agency to be involved in this project?

THE ORGANIZATION'S EXPERIENCE WITH SIMILAR PROJECTS

- How much experience does your organization have with projects of this type?
- What experience do you have working with a partner?

THE ORGANIZATION'S EXPECTATIONS FOR TENANT BEHAVIOR

- What kinds of behavior from tenants will be unacceptable to you (e.g., alcohol use, drug use, poor personal hygiene and noise disturbances)?
- What will you expect from tenants and what should they expect from you?
- How have you and/or how do you plan to involve tenants in activities?
- What are your expectations regarding house rules (e.g., guests, disruptive behavior)?
- What should the eviction criteria be?

THE ORGANIZATION'S MANAGEMENT STYLE/ORGANIZATIONAL CULTURE

- Describe your staff (staff patterns, expertise, hours, supervisory hierarchy).
- What decisions do you think should be made jointly between property management and social service teams?
- How does your agency handle conflicts in working relationships?
- How do you propose to handle tenant information sharing between your agency and staff from other agencies, including your partner?

THE ORGANIZATION'S VISION FOR COLLABORATION

- What kinds of issues do you think your partner agency should be responsible for? (house rules enforcement, evictions, staff hiring, etc.)

THE PROCESS FOR CREATING PARTNERSHIPS

- RESEARCH AND IDENTIFY POTENTIAL PARTNERS.
- SEND A REQUEST FOR PROPOSALS (RFP) to a short, prescreened list of qualified and interested providers who have been identified through interview and recommendations.
- ARRANGE A MEETING TO DISCUSS SELECTION CRITERIA WITH RESPONDENTS TO THE RFP.
- VISIT EACH OTHER'S SITES AND OFFICES.
- ARRANGE A SERIES OF MEETINGS TO FURTHER EXPLORE COMPATIBILITY.
- WRITE DOWN AGREED UPON CONCRETE PROJECT GOALS THAT BALANCE THE INTERESTS OF THE PARTIES.
- WORK ON PRELIMINARY PROJECT TASKS TOGETHER, such as creating a project-specific organizational chart, house rules, tenant handbook, etc.
- SOLIDIFY THE AGREEMENT. After you have chosen a partner and agreed to work together, you can draft a letter of intent between your organizations. It should outline the roles of each party, which party will be responsible for various costs and a project timeline. It should also contain information about terminating the agreement if either party fails to perform their responsibilities. Later in the process, a more formal agreement, or Memoranda of Understanding, can be executed. This will clarify specific roles, responsibilities, and relationships between the parties.
- INVEST IN MUTUAL CROSS-TRAINING. Two subjects that invariably come up include how to share information and principles of confidentiality and special needs training for building staff.

TENANT INVOLVEMENT

BENEFITS OF INVOLVING TENANTS IN PROGRAM & PROJECT DESIGN

- Increases tenant satisfaction by providing relevant activities and services
- Tenants more likely to feel a sense of ownership
- Promotes positive norms
- Teaches tenants skills needed to impact their environment
- Increases opportunities for communication (peers, tenant to staff, etc.)
- Improves social and psychological ties among community members
- Increases safety and security

INVOLVE TENANTS IN DECISION-MAKING PROCESSES

- Involve tenants in the planning of activities, outings, parties
- Identify natural leaders and develop leadership skills
- Solicit input about the services offered
- Involve tenants in the development of house rules and other building policies
- Create open communication forums such as community meetings
- Establish tenant councils/tenant advisory committees
- Hire tenants in staff positions
- Involve tenants in the intake process

SERVICE DELIVERY APPROACH

APPROACHES

- Available on-site 24 hours a day
- On-site some hours and days
- Located at a centralized office off-site
- On-call 24 hours per day
- Meet tenants in their homes
- See tenants in the office only
- See tenants by appointment only

GROUP VS. INDIVIDUAL WORK CONSIDERATIONS

- Group work allows for economy of time and effort. More people can be assisted in less time. More cost-effective
- Groups allow for identification with peers.
- Groups allow the leader to observe participants interacting with others. These observations could provide important information about how participants may interact with others in a workplace setting as well.
- Individual work allows for privacy and confidential sharing of information.
- Individual work is effective for some people who may feel that their issues need more personal attention and time.
- Individual work provides an individualized teaching and learning opportunity. Groups are directed towards the general, common needs of members.
- While groups may offer an opportunity for support, they may also offer more sources of critical feedback. This may have a negative impact on some people.

USING REFERRAL SERVICES

Working in collaboration with existing community services is vital to the case management system. A major principle of this model is a good referral system.

- Share resources and lessons learned between staff. There is no reason to re-invent the wheel when using outside services.
- Integrate your program into the community to widen the availability of resources.
- Invite community representatives from various referral agencies in your area to your site for community meetings.
- Send literature about your program to referral sites.
- Get to know the contacts at the various referral agencies.
- Integrate resource sharing into the programmatic design at your site (in-house resource log, community Rolodex with important numbers and contact persons, tenant input on the quality of services offered by referral agencies).
- Be mindful that contact between your site and the referral site should be done only when a consent form has been signed by the tenant. Be sure to have releases (consents) signed by tenant for active and consistent communication between case management and referral site.
- Be sure to document all salient information received or given to referral agency.

SAMPLE JOB DESCRIPTIONS FOR SUPPORTIVE HOUSING STAFF

There is a myriad of different staffing patterns used in supportive housing programs across the country. The staff required will depend on the size of the residence, the populations served and the goals of the program. Most residences use a direct service staff/tenant ratio of between 1:10 and 1:25. (This ratio is for supportive service staff only and does not include facility or property management staff.) The following list of positions includes common staff titles and roles used by supportive housing programs.

- **Program Directors/Supervisors** — oversee program development, implementation, coordination and evaluation, provide regular supervision to direct service staff, orient new staff to program mission, goals, policies and procedures, coordinate site coverage, ensure that the development and implementation of service plans are consistent with program goals and of maximum benefit to tenants, monitor and evaluate staff performance, coordinate social services with building management services, develop and modify policies and procedures, identify problems related to resources and personnel management, oversee production of internal and external reports, oversee compliance with funders
- **Case Managers** — provide direct services to tenants, develop and implement individual service plans, assist tenants in achieving goals, facilitate groups and activities, teach and/or assist tenants in developing ADL, communication and self-advocacy skills, facilitate the development of tenant council and other community building activities, make referrals to community-based services, assist in accessing and maintaining entitlements/benefits, advocate for needed services, and assist tenants in meeting the obligations of tenancy
- **Substance Abuse/MICA Specialists** — may not be assigned their own case load but instead may run groups related to substance use and work directly with tenants who have issues with use, oversee recovery readiness services, provide relapse prevention and recovery planning services, provide individual counseling, facilitate methadone maintenance services, educate staff and tenants about approaches to managing substance use, such as stages of change and harm reduction, organize sober recreational activities

- **Residential Aides** — assist Case Managers in carrying out their responsibilities, provide support and concrete assistance to tenants, assist/train tenants in the skills of daily living, escort to appointments, provide supervision and coverage
- **Recreation Specialists** — run groups and arrange for various activities on- and off-site, including music, art, or exercise classes, may work individually with tenants needing assistance socializing or reducing isolation, plan events and celebrations, identify recreational opportunities in the neighborhood and surrounding community
- **ADL Specialists** — assist and teach tenants basic living skills such as budgeting, cooking, personal hygiene and self-care, housekeeping activities, use of public transportation and other community services
- **Peer Counselors** — staff who have had life experiences similar to the tenants of the supportive housing program (e.g., homelessness, mental illness, substance use, HIV) provide support and concrete assistance, teach advocacy skills and apply principles of self help programs
- **Vocational Counselors** — also called Career Counselors or Employment Specialists, these staff conduct vocational/educational assessments and assist tenants in developing career plans, work with Case Managers to integrate vocational plans into general service plans, identify obstacles to maintaining employment and provide ongoing assistance in minimizing the negative impact of these obstacles to success
- **Job Developers** — establish relationships with businesses in the community to help secure jobs for program participants. Job Developers also serve as liaisons between the residence and the job site and address problems and issues that come up regarding specific placements

STAFFING CONSIDERATIONS IN SUPPORTIVE HOUSING

STAFF TO TENANT RATIO

Determining an appropriate staff to tenant ratio depends on the tenant's service needs. Most supportive residences range somewhere between 1:10 and 1:25. Providers planning to serve a population with considerable service needs (e.g., people who are mentally ill & chemically addicted (MICA), homeless or recently discharged from hospitals) must secure adequate funding to ensure a ratio that will allow for the intensive service relationship that will be necessary.

STAFF CAPACITY

Review the collective experiences within the agency and assess which are similar to and different from the proposed project. Does the agency possess sufficient knowledge, experience and expertise to plan and develop the project? Would the project benefit from a partnership between organizations?

HOURS OF PROGRAM/STAFF COVERAGE

New projects often benefit from expanded program hours. This can help provide a sense of continuity from the day to evening, provide an opportunity to engage tenants who are not available during the day and improve the overall safety and security of the new facility. After the kinks are worked out and staff and tenants know each other better, providers sometimes cut back on the evening program hours.

STAFFING PATTERN

Many supportive residences follow similar staffing patterns. Consider who will supervise the clinical staff as well as the property management staff. Have provisions been made for adequate administrative coverage?

STRUCTURING PARTNERSHIPS

Some projects are designed so that one provider is responsible for both the social services and the property management services. Other projects are designed with two different agencies providing these services. If different agencies will be working together, it is important that they agree on the goals of the project and clarify roles and expectations as soon as possible. Efforts should be made to plan for effective communication structures.

**SUPPORTIVE SERVICES PLANNING WORKSHEET:
SERVICE APPROACH AND STAFFING PATTERNS**

A. SERVICE DELIVERY APPROACH

1. Indicate how staff will make themselves available to tenants. For the purposes of this section, home visit can denote both single and scattered site housing, but the term "on-site" refers to single site or clustered housing.

- () Service staff will be on-site 24 hours/day
- () Service staff will be on-site some hours/day, (list hours and days) _____
- () Service staff will be located at a centralized office, off-site
- () Service staff will be on-call 24 hours per day
- () Service staff will meet with tenants in their homes
- () Maximum frequency of contact the program can accommodate _____
- () Minimum frequency of contact the program can accommodate _____
- () Service staff will see participants in their office
- () Other (describe) _____

2. Indicate how tenants will access services.

- () Service staff/participant interaction will be flexible, based on need
- () Service staff will be available by appointment only
- () Service staff will have walk-in hours (describe) _____
- () Tenants will be able to make appointments with staff
- () Other (describe) _____

B. STAFFING PATTERNS

Briefly define the job function and specific areas of expertise required, the total number of staff for this position, the ratio to program participants, educational requirements and the salary range.

Social Service Titles

1. **Case Managers:** _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

2. Residential Aides: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

3. Vocational Counselors: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

4. Job Developers: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

5. Substance Abuse/MICA Specialists: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

6. Recreation Specialists: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

7. ADL Specialists: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

8. Peer Counselors: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

9. Supervisors/Team Leaders: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

10. Other (_____): _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

11. Other (_____): _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

12. Other (_____): _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

Property Management Titles

1. Property/Tenant Manager: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

2. Assistant Manager: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

3. Superintendent: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

4. Porters: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

5. Housekeepers: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

6. Janitors: _____

Total # of staff needed: __ Staff ratio to program participants: _____
Educational requirements: _____ Salary range: _____

7. Intake/Compliance Specialist: _____

Total # of staff needed: __ Staff ratio to program participants: _____
 Educational requirements: _____ Salary range: _____

8. Other (_____): _____

Total # of staff needed: __ Staff ratio to program participants: _____
 Educational requirements: _____ Salary range: _____

9. Other (_____): _____

Total # of staff needed: __ Staff ratio to program participants: _____
 Educational requirements: _____ Salary range: _____

10. Other (_____): _____

Total # of staff needed: __ Staff ratio to program participants: _____
 Educational requirements: _____ Salary range: _____

Additional requirements for staff:

- () Bi/Multi-lingual (list languages) _____
- () Drivers license
- () Computer literate
- () Expertise in specialized areas, such as domestic violence (list) _____
- () Emphasis on hiring consumers or persons who have experienced homelessness
- () Other _____

GROUP EXERCISE ON STAFF ROLES

Choose a reporter for your group. The trainer will assign each group one or more of the following job titles. Although specific titles for staff positions may vary from program to program, the following listing provides a glossary of common titles.

Brainstorm about the various roles and responsibilities associated with each title assigned to your group. When the trainer announces the time to end the discussion, each group's reporter will report back to the large group. For each role discussed, note any issues of collaboration with other staff positions, pros and cons of having the position in the program and which role responsibilities became confusing and why.

1. SERVICE STAFF ROLES AND JOB DESCRIPTIONS

- Case Manager
- Residential Aides
- Vocational Counselors
- Job Developers
- Substance Abuse/MICA Specialists
- Recreation Specialists
- ADL Specialists
- Peer Counselors
- Supervisors/Team Leaders
- Administrative Staff

2. PROPERTY MANAGEMENT STAFF ROLES AND JOB DESCRIPTIONS

- Property/Tenant Manager
- Assistant Manager/Superintendent
- Housekeepers
- Intake/Compliance Specialist

SUPERVISION AND TRAINING

PURPOSE OF SUPERVISION AND TRAINING

- Hold staff accountable to certain standards
- Orient staff to their roles
- Orient staff to the mission of the organization
- Teach skills and connect to resources
- Help staff identify learning needs and goals
- Help support people to do their best jobs

IMPORTANCE OF PROVIDING REGULAR ONGOING SUPERVISION AND TRAINING

- The supervisor has control over the process of supervision. In the crisis-driven world of residential services, the supervisor can create a safe haven for the employee
- Creates a safe relationship to help individual take risks and grow
- Addresses strengths and weaknesses together so that problems/negatives are not the only focus of face-to-face meeting
- Allows for early intervention of problem behaviors and provides support and education to address problems so they don't snowball
- Allows time for goals to be identified and progress towards work goals as well as personal goals to be monitored
- Allows the supervisor better accountability, quality assurance
- Enhances skills and expands knowledge base

PROPERTY MANAGEMENT AND SUPPORTIVE SERVICES: ROLES AND RESPONSIBILITIES — AREAS OF OVERLAP

The following responsibilities are generally shared by both the social service and property management staff in supportive housing programs. It is important to keep lines of communication open when discussing these areas of overlap, and staff should be educated regarding issues of confidentiality.

Intake: Tenant Selection and Interviewing

- Service Interview — focus on service history and current needs
- Management Interview — focus on ability to pay rent and meet obligations of tenancy
- Tenant Interview — focus on characteristics of a good neighbor
- Common Concerns: Who makes the final decision? How much information can be shared from the service interview?

Orientation of Incoming Tenants

- Services can help tenants with concrete needs around the move, such as unpacking, getting familiar with the building routine, location of laundry, neighborhood resources, staff locations and responsibilities.
- Management orients tenants about building maintenance issues, fire drills, tenant meetings.

Rent Payment and Arrears

- Services can provide tenants with assistance in paying their rent (budgeting, addressing cost of substance abuse, vocational services).
- Management is usually responsible for collecting rent and addressing issues of rent arrears.
- Services and property management need to meet regularly to discuss plans for complementing each other's roles in dealing with rent arrears problems.

Dealing with Nuisance and Disruptive Behaviors

- House rules are generally developed jointly by Management and Services. Staff may develop some basic rules and tenant input can be solicited to add or revise these. All staff can help promote healthy cultural norms for the building; it is frequently service staff who help to structure these efforts.
- Property management's role is generally to issue warnings and notices of violations; services can try to help the tenant correct the problem. Other tenants are also important to involve in creating a safe and enjoyable living environment.

Procedures in Crises (e.g., psychiatric, medical, physical or fire)

- Clear policies and procedures should be in place for dealing with disruptions. These should clearly spell out the chain of command in case of emergency, what information to provide to EMS, when to beep staff on call, what information to record and how.

Tenant Grievance Procedures

- Staff and tenants should be aware of systems for evaluating the program and the services given. Management and Service staff generally work on this together, with service staff informing tenants about procedures through individual case management meetings or tenant meetings.

Community Building

- Many issues mentioned above involve aspects of community building. The tenants as well as management and service staffs are members of the building community and influence the culture of the community.
- Staff should be aware of trends in the community and plan strategies for positively influencing the culture.

Dealing with Health and Safety Issues

- Management may want to conduct regular room inspections together with services.
- Services can teach ADL skills to tenants, such as practicing good hygiene habits, cooking and cleaning skills, etc.
- Services can assist with obtaining home health services if indicated due to inability to maintain health and safety standards

COMMUNICATION STRUCTURES

CONSIDER WHO NEEDS WHAT INFORMATION

A common mistake made in the early stages of developing supportive housing projects is to invite *all* staff to *all* meetings. Time spent deciding exactly who needs what information, and how they might best get this information, is time well spent. It can be helpful to draw diagrams illustrating which groups will convene for which purposes. The next step is to fill in staff names and positions detailing who will attend these meetings. Give careful thought to who must attend each meeting. If someone is working on something else, is it mandatory that they be interrupted or is it more beneficial to relay information back to them?

Tips for keeping the group small:

- Solicit input from some people in writing rather than request attendance
- Ask people to attend only as much of the meeting as needed
- Establish sub-committees to work on specific projects

CONSIDER OPTIONS FOR CONVEYING INFORMATION

Meetings can get bogged down with administrative details. Much of this type of information can be communicated by written memos, voicemail messages or e-mail, saving time in meetings for information that requires discussion. Decide what types of information should be discussed in supervision, small groups or large group settings.

ESTABLISH AN AGENDA

Circulate the agenda, specifying start and end time, in advance and ask for contributions. Create standing agenda topics for regularly held meetings.

TIPS FOR RUNNING AN EFFICIENT MEETING

- Start on time and close the door with or without the full group
- Set the tone immediately. Review the agenda and schedule
- Assign roles to increase involvement (facilitator, recorder)
- Add interest by varying the pace, inviting outside guests and encouraging discussion
- When complicated issues are on the agenda, introduce ahead of time so people aren't caught off guard
- Limit the time given to outspoken group members
- Minimize gossip or small talk ("We need to move on now.")
- Summarize decisions made and clarify any vague points before closing
- Schedule a follow-up meeting before leaving

MAINTAINING COMMUNICATION BETWEEN PROPERTY MANAGEMENT AND SOCIAL SERVICE STAFF

- Orient each discipline early on to each other's role
- Maintain a log/communication book between security/front desk staff and services
- Schedule regular meetings between the director of property management and the director of social services to review key issues in the relationship, address policies and procedures and resolve conflicts between staff
- Ensure there is a clear decision-making process (what will be decided by team leaders, be consensus, by democratic process) and clear lines of authority within and between property management and social services
- Schedule joint staff meetings
- Respect and value the input and feedback from one another
- Appoint an incident-review committee
- Provide team-building retreats
- Provide joint trainings on such topics as confidentiality, understanding special needs populations and substance use

MAINTAINING CASE RECORDS AND DOCUMENTATION

The following are some basic principles behind maintaining accurate and timely case records in supportive housing.

- Provides quick access to salient information relevant to tenant in case of crisis.
- Assists with continuity of support service between all staff allowing for each to have a current record to assist with optimal interventions.
- Allows for continuity of support when any given worker is not present.
- Acts as an official record of progress and barometer of movement toward accomplishing goals and objectives.
- Can be used as a tool to tailor support services to the needs of a tenant.
- Can be used as an accurate history of crisis patterns. Often, tenants may experience crisis on anniversary dates, holidays and birthdays.
- Enhances the quality of service delivery. With heavy caseloads, referencing case records can assist case managers in the delivery of service.
- Ensures that compliance with audit standards is followed. Funding sources audit case records regularly to ensure that guidelines are being followed and that the quality of service delivery is optimal.
- Encourages follow through with goals and objectives and indicates past accomplishments that may assist the tenant with issues of self-efficacy and motivation to achieving current goals.

WHAT TO INCLUDE IN A CHART

TENANT IDENTIFYING INFORMATION

- Face Sheet due upon enrollment or tenant transfer (update yearly)
- Interview Face Sheet, Intake Information and Tenant Interview Status Form

CONSENT FORMS/RELEASE OF INFORMATION

- Consent Checklist (document attempts if no consent is signed)
- Consent Forms (update every six months)

PSYCHOSOCIAL ASSESSMENT

- Initial Psychosocial Assessment and updates

SERVICE PLAN

- Comprehensive Service Plan (90 days from enrollment)
- Service Plan Review (1st year: every three months/thereafter every six months)

PROGRESS NOTES (WEEKLY)

- Notes should reflect progress to service plan goals/objectives
- Notes should ID tenant, date, purpose, signature & title of worker, and service

DOCUMENT OF PARTICIPATION

- Identifies types of activities received (monthly)
- Describes tenant's pattern of attendance or contacts (monthly)

MEDICAL DOCUMENTATION

- Health Assessment
- Medical Exam (annually) and all other medical documents

MEDICATION

- Medication Regimen forms: update as medications change
- Monthly Medication Log (if medications are monitored)

VOCATIONAL/EDUCATIONAL

- Vocational Assessment and Career Plans
- Employment History

ENTITLEMENTS

- Current Benefits Verification (update annually)

MISCELLANEOUS

- Incident Reports, Discharge Summaries, Correspondence

DEVELOPING POLICIES AND PROCEDURES: A GUIDELINE FOR SUPPORTIVE HOUSING PROVIDERS

Having clear policies and procedures in place helps supportive residences run smoothly. A policy manual provides support and guidance for staff so they know what to do as well as where and when to call for support. Many programs have three different manuals: A *Welcome/Orientation Guide for Tenants*, a *Personnel Policies and Procedures Manual for staff* and a *Building Operating/Program Policies and Procedures Manual for staff*. Policies and Procedures Manual should include: who does what, when or how often is it done, how it is done (in writing, in a meeting, etc.), what resources are available (staff on call, logbooks) all relevant forms.

AN OPERATIONS POLICIES AND PROCEDURES MANUAL SHOULD INCLUDE:

INTRODUCTION

- Introduction
- Agency Overview and Mission
- Program Description and Goals

ORGANIZATIONAL CHART

- Organizational Chart
- Job Descriptions

ADMISSION AND DISCHARGE POLICIES

- Tenant Selection Processes
- Eviction Processes

BUILDING MANAGEMENT POLICIES

- Rent Collection
- Room Inspections
- Repairs and Maintenance
- Lease Violations
- Health and Safety Violations
- Front Desk Responsibilities
- Building Security and Visitor Policies

SOCIAL SERVICE POLICIES

- Program policies (i.e., medication management, budgeting assistance, representative payee, referrals, etc.)
- Service Documentation Policy
- Confidentiality Policy
- Fraternalization Policy
- Miscellaneous operations: Car Policy, Petty Cash, etc.

EMERGENCY POLICIES AND PROCEDURES

- ❑ Psychiatric/Medical
- ❑ Accidents and Death
- ❑ On-Call Phone Numbers, Emergency Contacts and Resources

FIRE SAFETY POLICY

- ❑ Fire Prevention and Inspection Policy

GRIEVANCE POLICIES

- ❑ Informal Tenant Grievance Policy
- ❑ Formal Tenant Grievance Policy
- ❑ Dispute Resolution Services

CHILD ABUSE AND NEGLECT REPORTING

- ❑ Criteria for Identifying Incident of Abuse or Neglect
- ❑ Child Abuse and Neglect Reporting

INCIDENT REVIEW POLICIES

- ❑ Investigating an Incident
- ❑ Writing and Filing Incident Reports

MEDICAL POLICIES

- ❑ Medication Storage
- ❑ Monitoring Medications

WHAT TO INCLUDE IN A TENANT-WELCOME/ORIENTATION GUIDE

INTRODUCTION

- ❑ Agency Overview
- ❑ Program Description and Goals
- ❑ Organizational Chart and Job Descriptions

BUILDING PROCEDURES

- ❑ Requesting Repairs
- ❑ Mail/Phone messages
- ❑ Garbage Disposal
- ❑ Apartment Care
- ❑ Lost Keys
- ❑ Move-in and Security Deposit
- ❑ Furniture and Liability for Damage
- ❑ Apartment Inspection

HOUSE RULES AND CONSEQUENCES

- ❑ Noise
- ❑ Illegal Activities
- ❑ Health and Safety Violations
- ❑ Smoking
- ❑ Evictions and Holdovers

RENT COLLECTION

- ❑ Procedures for Collection
- ❑ Rent Arrears and Payment

FACILITIES

- ❑ Laundry Room, Dining Room, Activity Rooms, Garden/Outdoor Space
- ❑ Phones (using public phones, installing room phones, taking messages)
- ❑ Mail Room
- ❑ Storage
- ❑ Garbage Pick Up

GRIEVANCE PROCEDURES

- ❑ Formal Grievances
- ❑ Dispute-Resolution Services

SECURITY

- ❑ Visitor/Guest Policies

SOCIAL SERVICES

- ❑ Description of Services Available
- ❑ Hours of Program and How to Access Services

TENANT COUNCIL

- ❑ Purpose and Goals
- ❑ How to Become Involved

SAMPLE TENANT SATISFACTION SURVEY

Instructions: This survey will help ABC Housing improve our services to you. Your answers will be kept strictly confidential and will only be used to evaluate and improve the services here. Please indicate your agreement or disagreement with each of the statements below. Fill in the answer that best represents your opinion.

Demographic Information

1. Age: _____
2. Gender: Male Female
3. Primary Language: _____ Secondary Language: _____
4. How long living in service site: Years _____ Months _____
5. Race/Ethnicity: African American/Black (not of Hispanic background)
 White/Caucasian (not of Hispanic background)
 Hispanic/Latino (of any race)
 Asian/South Asian/Pacific Islander
 Other _____
6. Please select the category(ies) that best describes what you do on most days (check all that apply):
 - Work a full-time job
 - Work a part-time job
 - Go to school or a training class
 - Go to a service program
 - Do volunteer work
 - Stay in the building, usually in my room
 - Stay in the building and visit neighbors/friends
 - Stay in the building and attend programs
 - Pursue creative/artistic interests
7. Would you say that drug and alcohol use in the building (check one):
 - Is not a problem
 - Is a big problem
 - Is sometimes a problem
 - Makes life unbearable

Service Utilization

8. How often do you see or speak with your ABC HOUSING representative or Case Manager?
- Usually every day
 - Few times per month
 - About once every couple of months
 - Never
 - Few times per week
 - About once per month
 - Couple of times per year

9. Has your ABC HOUSING representative or Case Manager been (check one):
- Extremely helpful
 - Usually helpful
 - Not very helpful _____

10. Check all that apply:
- I don't know who my ABC HOUSING representative or Case Manager is
 - I would like help from ABC HOUSING Case Manager
 - I would not like/don't need any help from ABC HOUSING Case Manager

11. Since you have lived in the building, how many ABC HOUSING representatives or Case Managers have you worked with (circle one):
- 1 2 3 4 5 6 7 8 9 10 10+

12. How has the number of ABC HOUSING representatives or Case Managers affected your willingness to work with your present ABC HOUSING worker?

13. In what ways has your ABC HOUSING representative been helpful (check all that apply)?
- Provided support, listened to me when I had a problem
 - Assisted me with money management
 - Assisted with my medication management
 - Referred me to a clinic, program or therapist
 - Advocated for me with another service provider
 - Helped me with entitlements/benefits (i.e., SSI, SSD, food stamps, PA)
 - Helped me with transportation
 - Helped me with getting food
 - Helped me with finding recreation or social activities
 - Helped me set goals for myself
 - Helped me with work/training opportunities
 - Helped me keep my room clean and orderly
 - Helped me to shop or cook
 - Other: _____

Sample Tenant Satisfaction Survey

14. Do you use any of the following ABC HOUSING services and, if you do, how frequently?

Service	Once/Week	Few Times/ Month	Once/Month	Less than Once/Month	Never
Art/Arts & Crafts Class					
Bingo					
Beading Classes					
Men/Women's Group					
Tenant Meeting					
Trips/Activities/Parties					
Support Group					
Community Room Use					
On-Site AA/NA Meetings					
Movie/Video Group					
45 & Over Group					
Advocacy Committee					

Other: _____

What activities/classes/groups/trips/events would you suggest and participate in?

Level of Comfort

15. How comfortable do you feel in the neighborhood (check one)?

- Very Comfortable Somewhat comfortable
 Not very comfortable Very uncomfortable

Why or why not?: _____

16. How comfortable do you feel in the building (check one)?

- Very Comfortable Somewhat comfortable
 Not very comfortable Very uncomfortable

Why or why not?: _____

Quality of Services

17. Over the past year, would you say that the case management and counseling services that ABC HOUSING delivers have:

- Gotten better
- Gotten worse
- Stayed pretty much the same
- Don't know, have no opinion

18. Over the past year, would you say the group activities and classes that ABC HOUSING provides have:

- Gotten better
- Gotten worse
- Stayed pretty much the same
- Don't know, have no opinion

19. Over the past year, would you say the special events and trips that ABC HOUSING provides have:

- Gotten better
- Gotten worse
- Stayed pretty much the same
- Don't know, have no opinion

Level of Satisfaction

Check the response that best indicates your opinion.

20. I like the services I receive here.

- Strongly Agree
- Strongly Disagree
- Agree
- Disagree
- No Opinion
- Not Applicable

21. If I had other choices, I would still choose to get services from this agency.

- Strongly Agree
- Strongly Disagree
- Agree
- Disagree
- No Opinion
- Not Applicable

22. I would recommend this agency to a friend or family member.

- Strongly Agree
- Strongly Disagree
- Agree
- Disagree
- No Opinion
- Not Applicable

23. Staff are willing to help as long as I feel it is necessary.

- Strongly Agree
- Strongly Disagree
- Agree
- Disagree
- No Opinion
- Not Applicable

24. Staff return my phone calls within 24 hours.

- Strongly Agree
- Strongly Disagree
- Agree
- Disagree
- No Opinion
- Not Applicable

25. Services are available at times that are good for me.

- Strongly Agree
- Strongly Disagree
- Agree
- Disagree
- No Opinion
- Not Applicable

Sample Tenant Satisfaction Survey

26. I am able to get all the service I think I need.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

27. Staff believe that I can grow, change and recover.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

28. I feel safe to raise questions or complaints with staff.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

29. Staff respect my wishes about who is and is not to be given information about my treatment.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

30. Staff are sensitive to my cultural/ethnic background.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

31. Staff help me so that I can manage my sobriety and recovery.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

32. I feel comfortable about asking questions about my treatment and medication.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

33. Staff and I work together to plan my treatment.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

34. I, not staff, decide my treatment goals.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

35. Staff tell me what medication side effects to watch for.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

36. I am given written information that I can understand.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

37. I deal more effectively with daily problems as a direct result of services I receive.

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

DEVELOPING A SUPPORTIVE HOUSING PROGRAM: ADDITIONAL READINGS

Amherst H. Wilder Foundation: "Strategic Planning Workbook for Nonprofit Organizations." Amherst H. Wilder Foundation, 1998

A practical and straightforward resource manual with worksheets and strategies designed to enable nonprofits to create a shared vision of the future to guide staff in making everyday choices. Samples of actual strategic plans are included along with tips for implementing and updating current plans.

Amherst H. Wilder Foundation: "Collaboration: What Makes it Work." Amherst H. Wilder Foundation, 1992

This reports offers a detailed review of 19 factors that influence successful collaborations and discusses their implications for new and existing collaborative relationships.

Barrow, S., Cordova, P., Struening E.: "Evaluation of A-Plus: A Report on Case Management Services and Housing Outcomes." New York, NY: New York State Psychiatric Institute (Report: 43 pages), 1996

This report examines case management and housing outcomes in a sample of homeless women with a serious mental illness who were referred to "A Project to Link Up Services" (A-Plus), which provides psychiatric and case management services to women in NYC shelters. Topics include aims, design and methods of the outcomes evaluation, delivery of case management services and linkage to mental health services and quality of life.

Blake, J.: "The Times Square: A Case Study in Successful Supportive Housing." New York: Development Training Institute, Inc., 1997

This publication looks at the development and operation of a large and innovative supportive housing project in New York City. It discusses predevelopment and siting issues, financing, creation of a community, economic development initiatives and the day-to-day operations of the project, including service provision.

Centers for Disease Control: CDC National AIDS Clearinghouse HIV/AIDS Materials. U.S. Department of Health and Human Services

Request a full listing of free brochures and materials on HIV and AIDS by calling the Centers for Disease Control (CDC) at 1-800-458-5231. The listings include brochures, reports and publications on HIV and AIDS in a number of languages.

Center for Mental Health Services: "Creating Housing and Supports for People Who Have Serious Mental Illnesses." Center for Mental Health Services, 1994

This monograph provides a historical perspective and offers practical advice on developing supportive housing for people with mental illnesses. Topics include planning for supportive services, tenant selection, lease compliance, basic financing and mechanisms for coordination. Case studies include state projects in Connecticut, Massachusetts, Illinois, Maryland and Pennsylvania. This publication can be ordered from the National Resource Center on Homelessness and Mental Illness.

Cohen, C., Phillips, M., Mendez, M., Ordonez, R.: "Sustaining Strong Communities in World of Devolution: Empowerment-Based Social Services in Housing Settings," 1999

This paper is based on studies of Phipps House and their Community Development Corporation in the South Bronx. It focuses on the integration of social services in housing and explores how the devolution of the welfare state has affected the manner in which social services need to be conceptualized and delivered in housing settings in order to support tenants and the community.

Felt, M.; Kwok, P.: *Financial Management in Human Services*. New York: Haworth Press, Inc., 1998

This book discusses key issues in administering a social service program to help run programs more efficiently and effectively. Included is information on issues such as program goals and objectives and the differences in productivity measurement as perceived by a program's funders and by the service providers whom the program employs.

Ford, J., Young, D., Perez, B., Obermeyer, R., Rohner, D.: "Needs Assessment for Persons with Severe Mental Illness: What Services are Needed for Successful Community Living?" *Community Mental Health Journal*, 28(6): 491-503, 1992

This article presents the results of a survey that asked 90 community mental health agency case managers in Ohio to assess the community support and residential needs of over 1,400 of their clients. The survey was conducted to determine what services in addition to traditional case management are most needed by clients to establish and sustain quality of life in the community. Medication monitoring, psychosocial treatment, vocational activities and therapy were rated as high priority needs.

Interagency Council on the Homeless: "Reaching Out: A Guide for Service Providers." Washington, DC: Interagency Council on the Homeless, 1991

This is a practical, hands-on guide designed to help service providers 1) understand the characteristics and service needs of homeless persons who live in a wide variety of settings, 2) plan and administer a local outreach effort, and 3) explore innovative strategies to provide outreach and other needed services.

McNamara, C.: "Basic Guide to Program Evaluation." The Management Assistance Program for Nonprofits, 1998

This article provides an excellent discussion of the hows and whys of program evaluation, including a detailed descriptions of different evaluation methods, reporting strategies, pitfalls to avoid and a discussion of who should carry out the evaluation.

Prochaska, J., DiClemente, C., Norcross, J.: "In Search of How People Change." *American Psychologist*, 1992

This article shares the authors' recommendation for the implementation of integrated care systems as opposed to the more traditional parallel or sequential systems. Using an integrated theoretical framework, a continuous and comprehensive model system of care for dually diagnosed individuals can be designed.

Raif, N., Shore, B.: "Advanced Case Management: New Strategies for the Nineties." Newbury Park, CA: Sage Publications, Inc., 1993

This book provides an overview of issues related to case management services. It illustrates the diversity of solutions that case managers, their supervisors, and administrators have developed in an emerging practice context. Innovative approaches used by case managers as part of their everyday work are highlighted. These include: 1) forms of outreach and assessment; 2) alternative methods for engaging family members and natural supports; 3) wrap around service plans that use flexible dollars; and 4) emerging strategies that are more responsive to the needs of a culturally diverse constituency. Issues concerning cultural competence in treatment are also discussed. Available for \$18.95 from: Sage Publications, Inc., (805) 499-0721.

Reynolds, S.: "Not a Solo Act: Creating Successful Partnerships to Develop & Operate Supportive Housing." Corporation for Supportive Housing, 1997

This manual was created to facilitate successful collaborations between two or more lead organizations in order to efficiently and effectively fill the many roles required to develop and maintain successful supportive residences. It is aimed at maximizing each "partner's" strengths and minimizing problems that can arise in planning, development and operations.

Springer, E.: "Effective AIDS Prevention with Active Drug Users: The Harm Reduction Model. Counseling Chemically Dependent People with HIV Illness." New York, The Haworth Press, Inc. 1991

This chapter reviews the basic premise of Harm Reduction. Ms. Springer explores new philosophies regarding services for persons with addiction and investigates the successful model of Harm Reduction started in the mid-1980s in Mersey, England. It gives the readers an understanding of how to work more effectively with chemically dependent persons with HIV.

Upadhyia, G: "MICA Populations and HIV." *The Body: An AIDS and HIV Information Recourse*, Vol. 9, No. 3, Summer 2000

This article looks at the connections and impact of dual diagnosis and HIV Disease. It investigates the components of effective integrated treatment delivery for this multi-service need population.

Internet Sites

Bazelon Center for Mental Health Law

<http://www.bazelon.org>

Bazelon is a nonprofit legal advocacy organization whose advocacy is based on the principle that every individual is entitled to choice and dignity. For many people with mental disabilities, this means something as basic as having a decent place to live, supportive services and equality of opportunity. The Bazelon site offers numerous publications, including fair housing information.

Center for Urban Community Services

<http://www.cucs.org>

Center for Urban Community Services (CUCS) provides a continuum of supportive services for homeless and formerly homeless people, including street outreach, a drop-in center, transitional and permanent housing programs, and vocational and educational programs. Particular emphasis is placed on specialized services for people with mental illness, HIV/AIDS and chemical dependency. This website provides information and links to a variety of resources regarding transitional and permanent housing.

Corporation for Supportive Housing

<http://www.csh.org>

CSH's mission is to help communities create permanent housing with services to prevent and end homelessness. CSH works through collaborations with private, nonprofit and government partners, and strives to address the needs of tenants of supportive housing. CSH's website includes a Resource Library with downloadable reports, studies, guides and manuals aimed at developing new and better supportive housing; policy and advocacy updates; and a calendar of events.

National Alliance to End Homelessness (NAEH)

<http://www.naeh.org>

The National Alliance to End Homelessness (NAEH), a nationwide federation of public, private and nonprofit organizations, demonstrates that homelessness can be ended. NAEH offers key facts on homelessness, affordable housing, roots of homelessness, best practice and profiles, publications and resources, fact sheets and comprehensive links to national organizations and government agencies that address homelessness.

National Resource Center on Homelessness and Mental Illness

<http://www.prainc.com/nrc/>

The National Resource Center on Homelessness and Mental Illness provides technical assistance, identifies and synthesizes knowledge, and disseminates information. Users can be linked to findings from Federal demonstration and Knowledge Development and Application (KDA) projects, research on homelessness and mental illness and information on federal projects.

Wilder Foundation

<http://www.wilder.org>

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This website offers practical guidance for nonprofit agencies, including information on affordable housing, collaborating with partners and community building. Publications can be ordered for a fee with some available to download for free. There are helpful links to other sites.