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Vermont Research Partnership EXECUTIVE SUMMARY: GA Pilot Evaluation: Phase 1 November 15, 2007

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INTRODUCTION: This Executive Summary provides brief highlights of the full report of Phase 1 of the evaluation of the General Assistance (GA) pilots. The findings illustrate the experiences and perspectives of 12 staff members who work closely with the pilots in capacities of district or partnering organization leadership, eligibility, housing case management, field service coordination, disability determination, and vocational rehabilitation. In addition, two stakeholders in the Agency of Human Services provided interpretations of cost neutrality.

How do the GA Pilots differ from Traditional GA? Traditional GA provides some funding for emergency shelter to those who are homeless or at risk of homelessness for catastrophic conditions beyond their control. Typically this meant paying for a motel room or for back rent up to a limited expense cap. It was and continues to be essentially a ‘band-aid’ approach. The GA pilots have the flexibility to expand the definition of eligibility, expand the support package created to meet family needs and strengths, require family participation in working on goals of achieving stable housing, and exceed the expense cap (per client) in some instances.

Brief Overview of the Pilots: All the sites plan to extend eligibility to clients who are willing to work as equal partners with case management staff on addressing their housing related issues. All plan to make rule exceptions, such as extending GA benefits to those who are chronically homeless or at risk of homelessness due to issues outside the traditional boundaries of catastrophe, no cause eviction, or other causes beyond the client’s control.

Morrisville District: Morrisville has a part time “service coordinator” who offers case management to GA clients. The case management utilizes a collaborative team approach involving staff that work with GA eligibility, vocational rehabilitation, and SSI determination to help clients access services to address chronic issues that have hindered them from maintaining housing. Clients ‘pay back’ to the system when able by contributing their state tax return to Morrisville’s LIFT fund (for security deposit assistance). Morrisville’s transitional housing plans are currently stalled due to a community appeal process.

Springfield District: Springfield has a part time housing case manager who places GA pilot clients in four transitional apartments, through an arrangement with the local Family Center. Clients engage in a contractual agreement where they receive three months of case management support. In return, they contribute a portion of their salary towards housing costs and uphold behavioral guidelines as responsible tenants. Clients are encouraged to ‘graduate’ onto the permanent supported housing program, which offers placement into permanent housing with ongoing case management for up to three years.

St Albans District: St. Albans is in the start up phase of their pilot, and plan to include both case management and supported housing in their program. However, the pilot has grown out of a community ‘continuum of care’ approach, which brings together community organizations into a group called Housing Solutions. St. Albans has already been partnering with the two local

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shelters (Samaritan House and the DV shelter) and has involved Community Action and the Field Service Director's flexible funds to meet some needs (on a limited basis) of homeless populations.

FINDINGS: The findings are organized within a conceptual framework of costs and benefits, as follows:

- Costs and Benefits of the General Assistance (GA) Housing Pilot Programs
 - *Legislated goals of the pilots*
 - *How stakeholder interpret the legislative intent of cost neutrality*
 - *How site staff balance cost neutrality with program effectiveness*
- The Cost Neutrality Equation: Hidden and Anticipated Costs and Savings Over Time
 - *Where traditional GA falls short*
 - *Where the GA pilots are investing monetary and non-monetary resources*
 - *What staff project as the return on these investments*
- Recommendations for Tracking Outcomes and Cost Offsets of the Pilots
- Cautions, Ongoing Challenges and Suggestions
- Conclusion

Costs and Benefits of the General Assistance (GA) Housing Pilot Programs

Legislated goals of the pilots: According to Sec. 137a. General Assistance Housing Benefits; Flexibility Pilot Program:

The purpose of the pilot program is to mitigate poverty and serve applicants more effectively than currently served with the same amount of general assistance funds....It may grant exceptions to this program's eligibility rules, and may create programs and services as alternatives to these rules during the period of the pilot program....

This statement, from the legislation that authorized the Agency of Human Services to implement the GA Pilot programs for a three year period, sums up the essence of the cost/benefit theme. The pilots should be effective and frugal. However, the phrase, "the same amount of general assistance funds," needs interpretation due to the complexity of funding arrangements that make the pilot programs possible. This complexity will be discussed later in the section on the cost neutrality equation. The intent of this Phase 1 evaluation included gathering these interpretations of cost neutrality, initially from Agency stakeholders, and then from pilot staff.

How do stakeholders interpret the legislative intent of cost neutrality? Key stakeholders in the Agency of Human Services were asked to provide a definition of cost neutrality. Several possible interpretations were put forth, with a central theme being that the cost of providing the pilot not cost more than the cost of providing traditional GA assistance. This might be computed based on an average cost per family or an average cost per day. However, as one stakeholder pointed out, simply looking at overall cost does not distinguish between GA recipients receiving traditional GA services and those receiving services under the process/practice/rule changes of the pilot, nor does it ask if either this year or last year were abnormal years for GA needs. It does not consider whether or not non-GA funds were used to provide services for GA clients, nor does it consider

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whether or not all GA needs could be addressed. It simply defines cost neutrality as whether or not a district spent more GA money this year than last year. Another approach might focus only on “GA clients that have received GA services under the process/practice/rule changes of the pilot. It requires computing the aggregate amount of GA funds expended for these clients. It further requires computing, based on historical data, what is the aggregate amount of GA funds that would have been expended if these clients had been treated in the traditional manner.”

How do site staff balance cost neutrality with program effectiveness? Staff discussed four key ways they balance cost neutrality with their efforts to mitigate homelessness through the GA pilot programs, as follows:

- ***Rule Exceptions that Save Money and Increase Effectiveness:*** Essentially, each pilot grants exceptions, as it makes sense to, on a case by case basis and extends eligibility to those who are willing to become an equally responsible partner in improving their housing situation. The old rules were seen as leading to many denials for people who are remaining stuck in a homeless situation and are repeatedly applying for traditional GA assistance.
- ***Flexibility to Address Real Needs with Long Term Solutions while Saving Money:*** According to the staff, the exceptions allow flexibility for addressing real needs and mitigating problems that could exacerbate without creative options. In Morrisville, for example, this made it possible to provide a permanent housing solution instead of a temporary hotel accommodation that would have cost twice as much to house a family.
- ***Client Financial Contribution and Reimbursement:*** Springfield and Morrisville pilots built reciprocity into their programs. St. Albans saw the value of the approach and were beginning to think of ways they might feasibly incorporate this into their program. In Springfield, GA pilot participants are required to save 75% of their income and put it toward housing. Morrisville’s Landlord Insurance Fund for Tenants (LIFT) started independently of the GA Pilot but is now a resource to the pilot participants. The LIFT fund is used to help clients pay security deposits that they later reimburse through their state tax refunds.
- ***Replacing Costly Hotel Stays with Transitional Housing Opportunities:*** One of the traditional expenses of the GA program included costly hotel stays (often \$90 per night up to 84 nights). This money is now being spent on less costly alternatives such as supported temporary housing that lead to more permanent housing solutions for clients.

The Cost Neutrality Equation: Hidden and Anticipated Costs and Savings over Time

From interviews and a review of the literature, it is apparent that people who find themselves homeless or at risk of homelessness (before entry in the GA pilot) are likely to be housed in one or more of the following locations: homes of friends and family, prisons and corrections institutions, hospitals and emergency clinics, campgrounds (seasonally), foster homes, volatile landlord/tenant situations, shelters, hotels (through the traditional GA program), inadequate dwellings, or on the street. Hence, it could be concluded that people who are denied GA funds under the traditional rules, will likely find themselves in one of these places. In other words, denials often continue to cost public money somewhere, whether it is in correctional institutions

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or the local emergency room (ER). In light of this reality, one staff person reflected on the need for a broad view of cost neutrality. The cost neutrality equation is further complicated by the fact that GA funds are usually only a portion of the pilot's budget. Staff have become quite creative in "patching" together funding from a variety of sources to pay for case management and other aspects of the programs.

Where traditional GA falls short: For people with chronic homelessness patterns, traditional GA falls short. As one staff member articulated, "When we're providing the financial assistance without the case mgt, without helping the family figure out what caused the homelessness or the riff, what behaviors, that we're basically setting them up for failure."

How are the GA Pilots investing monetary and non-monetary resources? GA housing assistance usually includes General Assistance (including costly hotel stays) and Emergency Assistance (EA back rent for example). In the pilots, GA funds are augmented by other housing assistance funds and organizations. As a matter of fact, the investments extend beyond the total pilot budget, helping clients, if eligible, access social security and social security disability benefits. The pilots represent an investment in the following five areas, involving resources not limited to GA funding or even to monetary resources:

- ***Health Services and Disability Benefits:*** In the short run, the initial investment in the GA pilot may increase money spent (in non-GA budgets, such as federally funded Medicaid) on services such as medical care including mental health. It may shift costs out of GA assistance into SSI and SSDI (social security and social security disability income). However, according to staff in the pilot projects, a person on SSI who is able to retrain for job skills may eventually be able to work and either supplement SSI and become a taxpayer, or get off SSI completely, as some have done. Staff reported several success stories in this regard.
- ***Collaborative Problem Solving:*** Another investment involves human resources, both in terms of how staff approach the problem of eligibility for housing benefits and how they collaborate with partners inside and outside of the agency to find housing solutions. In each case there is an expansion of outreach and a greater demand for creative problem solving. These translate into investments of time and training, not necessarily dollar figures. The pilots involve start up costs that have not always been figured into the budgets of time and money.
- ***Client Capacity:*** A major investment goes into the population served through the GA Pilot. While the three pilots have their unique aspects, they share one common approach. They offer clientele (those experiencing homelessness or those at risk of homelessness) a supportive relationship in which to explore issues connected with their situation, and in which to access resources and services in their community that will help them stabilize their housing situation. Each pilot considers solving a client's housing problem a shared responsibility between the client and a housing case manager.
- ***Case Management:*** Each of the pilots considers case management one of the necessary components of their programs. Case managers bring specialized knowledge, experience and skills to their caseloads of individuals and families. They provide their clients with an appropriate amount of expectations, encouragement and boundaries. As they work together with

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clients to solve housing problems, they provide a stable, trustworthy relationship. Landlords come to trust them as well, and are more willing to provide housing to potentially difficult clients if they are participating in case management.

- ***Temporary and Supported Housing Programs:*** Supported housing generally refers to housing that includes case management support. In the GA pilots, case management is usually connected to temporary and permanent housing arrangements.

What is the projected return on these investments? Staff discussed the return on the investments outlined in the previous section. In some cases, they were desired and anticipated returns such as family stability, the mitigating of hopelessness in addition to homelessness, and the opportunity to address generational poverty. In other cases, these were actual returns, as illustrated by the success stories included in the full report and the one included below:

Success Story: Morrisville staff shared a success story from their GA pilot, of a client who had been on and off traditional GA assistance since 1983. She had been in and out of hospitals with severe mental health and substance abuse issues and also had frequent legal issues. Since the GA pilot case management began, the client moved from being homeless to a transitional apartment to a permanent apartment, having been able to get Section 8 in a timely manner. She is off GA and receiving SSI. Her physical and mental health issues have reduced significantly.

Recommendations for tracking outcomes and cost offsets: The interviews sought to identify data that will be analyzed in phases 2 and 3 of this evaluation study. These include data already tracked by the pilot sites as well as information that might be useful in determining cost offsets, cost neutrality, and program outcomes. Economic changes are ongoing variables. Awareness of these will be useful to placing GA pilot outcomes in a broader context.

Data on Cost Neutrality and Cost Offsets: A few cost – related measures include:

- 1) Patterns and costs of medical system and corrections system usage as well as child custody.
- 2) History of the client’s use of GA and cost to the system prior to the pilot.
- 3) Projections of hotel costs saved through participation in the pilot program.
- 4) How much money from GA funding was spent and saved on each pilot case.
- 5) Whether clients would have been eligible under traditional GA rules.

Data on Outcomes: A number of outcomes are being tracked by the sites. These vary by site but include whether program participants are engaging in their case management plan and fulfilling their responsibilities so that they can be successful tenants or homeowners. These, in addition to case records, will be important to understanding the effects of the pilot programs over time. Ideally the histories will give a perspective on at least a year before the pilot and a year or two into the pilot. Important perspectives on the pilot interventions and their effects will come from clients who agree to be interviewed in future phases of the evaluation.

Cautions to Consider: With the promising initial outcomes of the pilots and their potential for powerfully addressing homelessness and its relevant issues, balancing flexibility with caution seems important, especially when considering expansion. The continuum from support to self-

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sufficiency comes with risks as well as responsibilities. Just as prison could be seen as one end of a continuum with freely chosen housing on the other end, supported housing requires responsible and trustworthy case managers who maintain appropriate boundaries with clients. In addition, supported housing may not work for everyone.

Ongoing Challenges and Suggestions: The interviews identified some ongoing challenges and barriers to implementation that staff believe need to be acknowledged and addressed. Staff discussed service gaps and capacity issues and made suggestions for improvement.

Service Gaps: These include pockets of populations “that don’t qualify for adult developmental services or CRT, that have an IQ of 74 or 75, and need “a case manager that can help walk them through life.” Several staff identified substance abuse, mental health, and domestic violence as issues that call out for more services and better solutions. In addition, when children of families turn 18, the sudden loss of services presents “a huge gap.” A major barrier to helping GA pilot participants graduate into permanent housing is the current wait list for Section 8 housing. Transportation (including rising gas costs) is an obstacle for many people to get to work and to access services. The local economy was seen as a hindrance. Another issue is an inadequate child care subsidy.

Increasing Service and Staff Capacity: To address the substance abuse and mental health needs, one staff member emphasized increasing capacity both in the agency and in the community. This staff member had several others suggestion, including improved forms for medical providers to fill out regarding GA recipients’ ability to work, training staff in how to reach out to medical providers as partners, and implementing a consultation model for medical or psychological issues, perhaps even a local team representing a collaboration between disciplines. Others discussed the need for increased capacity to address homelessness with case management (service coordination) and some form of temporary housing. The need for the kind of service that the GA pilots offer is great and could likely be expanded with adequate resources and personnel.

CONCLUSION: The GA pilots have demonstrated successes in their first year that indicate promise for the mitigation of homelessness and poverty. Site staff have shown that they can balance cost neutrality with program effectiveness by making exceptions to rules when warranted and involving clients in a reciprocal relationship where they actively contribute as partners in the programs. The pilots’ flexibility to address needs with long term solutions in mind, such as replacing costly hotel stays with transitional and permanent supported housing opportunities, have already garnered results. The investment in collaborative problem solving that involves case management to increase client capacity also accesses needed health services and disability benefits as well as temporary and supportive housing when appropriate. Staff believe in the return on these investments and have already seen promising outcomes among clientele, some quite remarkable. Recommendations for tracking costs, with cost neutrality, cost offsets, and outcomes in mind, provide guidance for the next stage of the evaluation study. Ongoing social problems, service gaps, and capacity limitations show the need for further solution finding in the area of homelessness and its contributing issues.