

Testimony of the New York City Department of Housing Preservation and Development to the New York City Council Committee on General Welfare regarding Supportive Housing and the NY 15/15 Initiative

Tuesday, April 24, 2018

Good afternoon Chair Levin and members of the General Welfare Committee. I am Maria Torres-Springer, the Commissioner of the New York City Department of Housing Preservation and Development (HPD). Thank you for the opportunity to testify today about supportive housing and the progress of the 15/15 initiative. I'd also like to thank Commissioner Steve Banks for his testimony on all of the important work that the Department of Social Services (DSS) does to promote supportive housing.

Last night, about 60,000 New Yorkers slept in one of the many homeless shelters throughout our city. This number is a grave reminder of the severity of the affordability crisis we face. The many individuals and families currently residing in our shelter system come from neighborhoods across each of the five boroughs –they live, work, and attend school among us – they were our neighbors until they fell on hard times and now lack a stable place to call home.

Many of the people currently residing in shelters have long histories of homelessness, and some have other challenges, including mental illness, addiction, or are living with HIV/AIDS. Many of these New Yorkers have the fewest options for exiting the shelter system and obtaining stable housing. For this reason, creating supportive housing is the best tool at HPD's disposal to help these populations. The production of supportive housing enables the City to move more individuals and families with special needs out of the shelter system and into permanent, rent stabilized homes with access to individualized, on-site social services that help tenants maintain their housing for the long term.

For HPD to sustain a high rate of supportive housing production, it must be able to rely on consistent streams of services, rental assistance, and capital funding. Towards the beginning of this mayoral administration, the city faced a two-fold challenge regarding these resources: First, the NY/NY III services funding agreement was winding down, and second, the supply of federal project-based Section 8 vouchers remained insufficient for all of HPD's needs. In response, the Mayor announced in 2015 a major commitment of City resources to establish the NYC 15/15 Initiative, which will create 15,000 supportive housing apartments over 15 years, in partnership with DSS.

Approximately half of this commitment of 15,000 apartments will be met through services and rental assistance funding for scattered-sight supportive housing apartments, administered by the Human Resources Administration (HRA). The other half will be created through the new construction of congregate supportive housing buildings, administered by HPD. The 7,500 congregate supportive housing apartments will require a total of \$2.6 billion in capital funds over 15 years to develop. The City will provide \$1 billion in City capital towards this total amount, all but \$380 million of which has already been budgeted through *Housing New York*. The remaining capital costs – approximately \$1.6 billion – will be offset with low-income tax credits, and other private sources.

There will be additional funds dedicated to ensure that these new buildings will have the crucial social services contracts they need to serve their tenants. Additionally, the City committed to create a new, city-funded rental assistance program to reduce pressure on our finite Section 8 pipeline, which is currently facing additional threats at the federal level. This new program has freed up Section 8 to produce units for low-income seniors and other homeless households that do not need supportive housing. NYC 15/15 rental assistance will mimic the long-term structure and funding rates of project-based Section 8, paying the difference between the tenants' share of rent, equal to 30% of their incomes, and the rent needed for proper building maintenance and operations.

The 15/15 initiative is part of a long history of investment in supportive housing. HPD's Supportive Housing Loan Program (SHLP) is the primary capital financing tool for the City's supportive housing production. SHLP makes loans to primarily non-profit developers of permanent supportive housing. All projects include on-site social services. Projects developed through SHLP are made up of 60% apartments for New Yorkers who are chronically homeless and disabled, and the remaining 40% of apartments are reserved for households earning up to 60% of the Area Median Income, who are also able to access the social services in place. In the Supportive Housing and service funds we need to create this vital housing resource. This includes City Capital, Low Income Housing Tax Credits, project-based rental assistance, and, historically, a variety of City and State social service contracts, HOME and project-based Section 8. I am proud to say that since the beginning of Housing New York (Jan 1, 2014), we have financed the construction or preservation of more than 3,000 supportive housing apartments.

I would like to thank the Council for holding two hearings last year jointly with the Committees on General Welfare and Housing and Buildings that underscored the importance of housing for those who are formerly homeless. In particular, about five months ago, on HPD's Coordination with DHS/HRA to Address the Homelessness Crisis, and earlier in 2017, on Supportive Housing in the Schermerhorn, a 217-apartment supportive housing project in Cobble Hill, Brooklyn. I specifically want to thank Chair Levin, whose district covers the Schermerhorn, for his leadership in making that hearing happen. As many of you witnessed then, the Schermerhorn is a community asset and fits within the character of the neighborhood. The building was created when the developer of the market rate townhouses on the same site approached Breaking Ground about a partnership. Even years after the Schermerhorn opened, passersby still mistake this supportive housing building for market-rate condos!

This building is not an outlier; it is emblematic of the high quality planning and design that is the standard for all of our supportive housing projects. Supportive housing projects are not "facilities" or "institutions" – they are affordable apartment buildings that provide tenants with rent stabilized leases and all of the same rights and responsibilities as any other tenant in a rental apartment in New York City. They are built with sensitivity to the privacy supportive housing tenants deserve due to the various stigmas attached to people with supportive needs. Supportive housing projects provide amenities such as community spaces and computer rooms, all while incorporating innovative design elements that make these buildings vibrant places to live. A typical supportive housing project includes a 60/40 split between supportive housing apartments and other affordable apartments available to any household that income qualifies. This ensures that the projects are integrated and serve a range of your constituents. I encourage you to join HPD to visit supportive housing projects in your districts so you can see the many ways these buildings enrich their neighborhoods. When you visit one of our supportive housing projects, you can hear personal stories of tenants who previously lived in shelter, often for many years, but who are now reconnecting with family, addressing their health needs, and finding employment.

Supportive housing is also a cost-effective solution for addressing the homelessness crisis. Peer-reviewed research found that for every supportive apartment, taxpayers save more than \$10,000 per year in public resources that would otherwise be spent on shelters, emergency rooms, jails, and psychiatric facilities. In fact, research has even shown that contrary to popular belief, supportive housing projects increase property values in the areas surrounding them. In 2008, the Furman Center examined property values in neighborhoods surrounding more than 120 supportive housing projects, and found that the value of the adjacent properties increased after supportive housing was built. This is in part because supportive housing providers replace eyesores – vacant lots or severely underutilized land – with beautiful, well maintained buildings. The Public Design Commission just last week released a report on design in affordable housing, and four out of the seven case studies of good design were supportive housing.

Of course, supportive housing is not the only tool we have for bringing people out of the shelter system. We are working to increase the number of set-aside apartments in HPD programs, which can be used to house homeless families and individuals with fewer social service needs than those who might be better suited to supportive housing. As part of our efforts to expand housing production for the formerly homeless while also ensuring that these apartments continue to be distributed in every neighborhood in which HPD is doing business, we recently re-tooled our most popular term sheets to require homeless set-asides. The ELLA (Extremely Low & Low-Income Affordability) and Mix and Match (mixed income) programs now both include 10% homeless set-asides. We have also included homeless set-asides - effective upon re-rental - in all our preservation programs. While supportive housing is our best tool for serving homeless individuals with special needs, these set asides are particularly useful for creating housing for homeless families. These new set-asides, along with the 30% set-aside in the Senior Affordable Rental Apartments (SARA) program, and 60% SHLP set-aside, have enabled us to more than double the rate of our homeless housing production since the onset of Housing New York. During the second half of FY 2014, we were producing homeless apartments at a rate of about 1000 homes annually. In FY 2017, we closed on more than 2,500 homeless apartments. In total, we have created and preserved over 7,200 apartments for formerly homeless households since January of 2014, as a part of the overall Housing New York plan.

HPD, the Department of Homeless Services (DHS), and HRA communicate daily to coordinate our response to the homelessness crisis; one of the major avenues for which is through our efforts to refer homeless households out of shelters and into permanent housing. For supportive housing apartments, HPD and HRA conduct periodic meetings so that HRA knows when specific HPD buildings will be completing construction and when apartments will become available. DHS also attends marketing and lease-up kick-off meetings with HPD and the project development teams so that they are aware of construction and marketing timelines. When an apartment is available, HRA refers three suitable shelter clients to the apartment, and the landlord makes their decision. Communication between our agencies occurs at several points during the referral and placement. Our agencies will continue to seek ways to streamline the supportive and homeless housing referral process and ensure that the shelter system's most vulnerable clients receive the housing they so desperately need.

I must now turn to all of you to ask for your help. It is essential that we continue the progress we have made to create even more supportive housing, and the Council is a critical partner in helping us build more of it. HPD is extremely grateful to the Council Members here today for helping us educate New Yorkers about the benefits of supportive housing and for welcoming a number of wonderful supportive housing developments throughout the neighborhoods you represent.

In addition to Chair Levin and his support for The Schermerhorn, which I mentioned previously, many other Council Members are already great partners to HPD in helping us bring new supportive housing developments to their respective neighborhoods. I want to thank Council Member Torres for his ongoing support for supportive housing developments in his district. Just the other day, Breaking Ground's Webster Residence on 178th Street in the Bronx completed construction, and will soon be home to 171 low income and formerly homeless tenants. Council Member Gibson has been a similar ally; in November, the Doe Fund celebrated the opening of its Crotona Park Residence in her district. This building provides housing to 36 individuals living with HIV and AIDS, as well as 24 low-income seniors that had been on the NYCHA waitlist. I would also like to thank Council Member Salamanca for his service and leadership as the Chair of the Land Use Committee. I am grateful for his assistance shepherding supportive housing projects through the land use committee, and look forward to our continued partnership over the next few years. I especially want to thank Speaker Johnson for his strong commitment to supportive housing and the benefits it brings to our neighbors and communities. These are just a few examples of our partnerships with the Council throughout the last few years to build more and better supportive housing projects. So many of you have welcomed these projects into your districts. But we need your continued help if we are to create more of this much-needed resource.

When proposing a new supportive housing project, we often hear unfounded assumptions about how the project will impact the surrounding neighborhood, or questions about how we chose a specific site and whether we are building supportive housing exclusively in low income communities. We need your help to address these neighborhood concerns and shatter the myths that supportive housing is bad for communities or concentrated in certain neighborhoods.

Many of our largest and oldest supportive housing projects, such as the Times Square Hotel and the Christopher, both in Speaker Johnson's district, have operated in high value neighborhoods for decades, proving that supportive housing projects are successful components of their neighborhoods' urban fabrics. The high concentration of supportive housing apartments in southern Manhattan is also an important tool for affirmatively furthering fair housing across the city.

We are often forced to reduce or eliminate homeless set-asides to garner support for our projects, which minimizes our ability to make inroads into ending homelessness in our city. As you engage in public and private discussions on this issue in your communities and with fellow elected officials, we need your help in combating the misperceptions associated with homeless and supportive housing. Communities across the City need to know that they cannot both be opposed to the siting of homeless shelters and to the siting of permanent housing for formerly homeless and supportive populations that would ultimately reduce the need for shelters. One is a key solution to the other, and opposing them both gets us nowhere. Further, homelessness disproportionately affects people of color. Fear of homeless and supportive housing is too often

rooted in racism and presents a barrier to its creation in more neighborhoods throughout the city. We need your help in unmasking this opposition so that more homeless and supportive housing apartments can ultimately serve the city's communities of color. Finally, it is important to illustrate that the very ELI and VLI constituents we are all so fervently seeking to support are the same individuals and families who cycle in and out of the shelter system and who will benefit the most from increased homeless and supportive housing production. Homeless individuals and families are our fellow New Yorkers who have fallen on hard times and who need our genuine support the most.

Supportive housing is the formerly chronically homeless woman who struggled for years living with a serious mental illness, but who is now receiving the supports she needs to maintain her housing and her health; it is the man who contracted HIV at the height of the AIDS epidemic, but who after years living on the streets is now living a long and healthy life thanks to the stability his apartment has provided him; and it is the formerly incarcerated person who cycled in and out of jail and shelter has found a job through the assistance of his on-site case manager. Supportive housing is the LGBTQ young person who became homeless when their family objected to their identity, but who has now found an affirming community that loves them for who they are; it is the chronically homeless man who struggles with addiction, but instead of becoming the next victim of the opioid crisis is now standing on firmer ground because of his housing; and it is the single mother who was raised in foster care and her young child who have been in and out shelter, who have found safety and security in their new home.

Supportive housing is in many ways the diverse face of New York City, and as a part of our identity as New Yorkers, we must welcome supportive housing tenants into all of our communities. We are all in this together, so I will be leaning on all of you to do what you can to ensure that we continue to create new opportunities for homeless New Yorkers. We should build on the example set just last week when we worked collaboratively with the Council's Land Use Committee to approve WSFSSH, a 100% affordable project in Manhattan Valley, providing up to 275 apartments for low-income families and seniors. We look forward to the project being taken up by the full Council tomorrow.

I extend my sincerest gratitude to all of you for your ongoing help defending City, State, and especially Federal resources that are used to create homeless and supportive housing. I look forward to building on the progress we have made together with our many partners both in the Council and in the Administration towards seeing NYC 15/15 come to fruition.

Thank you for your time and attention.



Human Resources Administration Department of Homeless Services

<u>Testimony of Steven Banks, Commissioner, Department of Social Services</u> <u>Oversight Hearing regarding the NYC 15/15 plan before the Committee on General Welfare</u> <u>April 24, 2018</u>

Good Afternoon. Thank you Chair Levin and the members of the General Welfare Committee for giving us the opportunity to testify today on the subject of Supportive Housing in New York City.

My name is Steven Banks and I am the Commissioner of the New York City Department of Social Services which oversees the Human Resources Administration (HRA) and Department of Homeless Services. I would like to thank Commissioner Torres-Springer as well as HPD's support and partnership as we continue to implement our reforms.

Background on Homelessness

I would like to begin my testimony, as I've done previously before this committee, by contextualizing homelessness in New York City and highlighting the structural and economic factors that drive this challenge. There is no one size fits all approach to addressing homelessness, which is why our approach is multi-faceted and includes four core components - prevention, bringing people in from the streets, rehousing, and transforming the provision of shelter from a haphazard system to a borough-based approach. Of course, one significant contributing factor to homelessness is an insufficient supply of viable housing options for low-income New Yorkers. From 2005-2015, the median rent in New York City increased by 18.3 percent, while household income increased by only 4.8 percent. The most recent Housing and Vacancy Survey showed some sign of change estimating that household incomes among renters rose by 10.9 percent in real terms while rents increased 6.2 percent in 2017 but we are still combating the long-term trend. Furthermore, between 1994 and 2012, the city lost about 16 percent of the total rent-regulated housing stock, which encompassed approximately 150,000 units. These trends, among other contributing factors, created a situation where, by 2015, the city had only half the housing it needed to serve about three million low-income New Yorkers. And while the city's overall rental vacancy rate of 3.36 percent poses a problem for people across all incomes, renters who are only able to afford an apartment costing \$800 or less must search in a market with an even lower vacancy rate of 1.15 percent in 2017, down from 1.8 percent in 2014.

The devastating effects of economic inequality and past inaction from prior administrations in New York City, Albany and Washington led to the homeless crisis we face today. However, the initiatives of both HRA and DHS are beginning to reverse the trend. The average monthly census for DHS shelters increased 115 percent from 1994 into 2014 — rising from 23,868 men, women, and children in January 1994, to 31,009 in January 2002, and reaching 51,470 in January 2014. Without the initiatives that we have been implementing, the current DHS census would be in excess of 71,000 instead of at the 60,000 level where it is today. In fact, a recent Furman Center study found that the year-over-year shelter census growth from calendar year 2015 to calendar year 2016 was the lowest increase since 2011, the year the State and City ended the Advantage rental assistance

program, leading to a 38-percent increase in homelessness. The DHS shelter census for 2017 remained roughly flat compared to 2016 – this is the first time in more than a decade that the DHS census has remained level. And during the first four months of Fiscal 2018 compared with the same period in the prior year, the number of families with children entering the DHS shelter system declined by 15.1 percent and adult family entrants declined by 10.8 percent.

Since FY14 we expanded and enhanced our services and assistance, including, but not limited to, the following initiatives:

- Created and implemented rental assistance programs and restored Section 8 and New York City Housing Authority priorities, which through December 2017 have helped over 81,124 children and adults move out of, or avert entry into, shelter;
- Established the Homelessness Prevention Administration within HRA and provided emergency rental arrears assistance to 217,000 households through FY17;
- Aggressively expanded free legal assistance for New Yorkers facing eviction, harassment by
 unscrupulous landlords and other displacement pressures by increasing funding for legal services for
 tenants from \$6 million in FY13 to \$77 million by FY18 a 12-fold increase, providing legal assistance to
 over 180,000 New Yorkers. These services have begun to yield positive results: the Mayor recently
 announced that residential evictions by marshals dropped by 27 percent from 2013 to 2017, helping
 more than 70,000 New Yorkers stay in their homes during that time.

Supportive Housing

Some New Yorkers face heightened barriers to securing and maintaining stable housing due to mental health issues, substance use disorders (SUD), HIV and/or other disabling medical conditions. Supportive Housing is targeted to reach this particularly vulnerable cross-section of New Yorkers. And within the Administration's comprehensive strategy to turn the tide on homelessness, Supportive Housing is one critical component in our efforts.

Supportive Housing not only provides a secure living environment that helps to stabilize residents, but it also connects those who meet the eligibility requirements with support services to ensure that they have access to the tools necessary to maintain their personal highest level of self-sufficiency. Services in this housing model are customized to meet the individual needs of each resident and can include connection to mental health and substance use treatment, employment, and education. This robust, evidence-based framework, which builds on decades of experience and evaluation, is one tool in our toolbox to address homelessness in NYC. For example, our latest data on NY/NYIII housing retention rates shows us that 88% of clients remain stably house after one year and 78% after two. By providing a combination of stable housing and support services, we are helping vulnerable populations achieve their maximum functional capacity in a safe and supportive environment.

History of Supportive Housing in NYC

The history of Supportive Housing in NYC highlights the importance of our current efforts. Supportive Housing has existed in NYC since the 1980s. Over the past few decades, we have gained a wealth of knowledge from implementing the Supportive Housing model, and analyzing the outcomes. Beginning in 1990, the City and State shared in the development and implementation of Supportive Housing using an evidenced-based model to keep some of the most vulnerable New Yorkers stably housed. These agreements are known as New York/New York I, II, and III. The NY/NY III agreement was implemented to create 9,000 units of Supportive Housing in NYC between 2005 and 2015. Currently, the city and state are still completing units committed in that NY/NY III plan and we continue to engage in eligibility determinations, placement, tracking, contract administration, oversight, and evaluation of these units.

The Mayor's 15/15 Plan

In the absence of a fourth NY/NY agreement, in 2015, this Administration launched the **largest municipal commitment to Supportive Housing ever: the Mayor's 15/15 plan.** The Mayor's plan, which commits to developing 15,000 units over 15 years, includes more units than the combined number of units from the three previous NY/NY agreements and reaches further than any other Supportive Housing effort in the country. We are confident that this sweeping and comprehensive plan, along with existing services provided through NY/NY agreements, will continue to improve the lives of New Yorkers in need who benefit from a combination of stable housing and supportive services. It's important to note that while NYC 15/15 has been ramping up, the City continues to make placements into supportive housing via vacancies and new units from the prior NY/NY agreements. Since 2014, the City has placed over 5,000 people from shelter into supportive housing units, including re-rentals into NY/NY I, II, and III units and new units in NY/NY III that are still coming online.

Structure of the 15/15 plan

There are two types of Supportive Housing:

- Single-site (also referred to as congregate), which is a designated building where each individual or family has private living quarters and may share kitchens and/or common recreational rooms or other facilities; and
- Scattered-site, which are units in private apartment buildings spread across neighborhoods and communities throughout the city that are designated for targeted vulnerable populations;
- Both housing models include on-site services for the residents.

Over 15 years, the expectation is that the City will create 7,500 newly-built congregate units and obtain an additional 7,500 scattered-site units. These residential units are equipped with on-site case management and supportive services and adhere to safety and quality standards in accordance with local, state, and federal laws and regulations.

Tenants in Supportive Housing sign a standard lease or occupancy agreement and receive rental assistance, along with voluntary, strength-based support services that are customized to meet each individual's specific needs. Our Requests For Proposals require services for an individual or the entire family; and in the case of

family supportive housing, providers must offer programming that is developmentally appropriate for children and families. A case management team is responsible for developing a person-centered assessment and service plan, and connecting residents to comprehensive support services including:

- Case management;
- Educational, vocational, and other recovery-oriented services;
- Medication management and counseling;
- Assistance in gaining access to government benefits, such as food stamps;
- Referrals to medical services, mental health care, and treatment for drug and alcohol use; and
- Recommendations for other needed services, such as legal support.

In supportive housing, individuals pay 30 percent of their income towards rent and are not required to participate in services to maintain their tenancy, but many do. Professional staff members engage with tenants, providing motivational support that reduces isolation and increases their connection to much needed supports. This cost-effective approach to deliver stable and permanent housing to New Yorkers struggling with mental illness, homelessness, and substance use, as well as other vulnerable populations such as New Yorkers with HIV, is worth every penny of investment. Research shows that Supportive Housing reduces the City's reliance on homeless shelters, hospitals, mental health institutions, and incarceration, setting up these individuals and families for success and in the long-term saving tax payers. And Supportive Housing creates positive outcomes for the individuals and their families, the community and government.

Progress in the Right Direction

Expanding Eligibility

Throughout the years, eligibility for Supportive Housing in NYC has expanded to encompass additional categories of vulnerable New Yorkers. The first and second NY/NY agreements provided services to homeless New Yorkers who were seriously mentally ill (SMI). The third NY/NY agreement significantly expanded eligibility to include homeless or at risk of homelessness individuals and families with a broader range of mental health and/or substance use disorders (SUD) or HIV. It also included individuals aging out of foster care or transitioning from State psychiatric facilities.

Building on this expansion, the Mayor's 15/15 plan further reforms eligibility to reach adults, single adults or heads of families, with an SMI or SUD and history of chronic homelessness, or young adults, single, pregnant or head of family, at risk of homelessness.

Supportive Housing Task Force Update

Following the historic announcement of NYC 15/15 in November of 2015, the Mayor assembled a 28-member Task Force comprised of a broad representation of subject matter experts from supportive housing providers and advocates, to social service practitioners. City agencies worked closely with the Task Force and also assembled focus groups with clients to ensure a broad range of feedback. The Task Force was convened in January of 2016 and their work culminated in a report issued in December 2016. This report included 23 specific recommendations that outlined the ways in which the NYC 15/15 plan could expand and improve upon the previous NY/NY agreements. The 23 recommendations are grouped into the following categories: data and evaluation; referral process; services models; and streamlining development. In the year and a half since those recommendations came out, the City has made significant progress.

In last year's testimony, we outlined for the Council the 23 Task Force recommendations and detailed some early successes. As of today, we are well underway in the implementation of those recommendations; more than 75% of the recommendations are either completed or ongoing, and the remaining recommendations are in the process of being implemented.

Prioritizing the Most Vulnerable Individuals

We have had success in developing and implementing a process to identify and prioritize clients who are in the greatest need of Supportive Housing. Part of the Supportive Housing Task Force recommendations included moving away from the rigid population categories of NY/NY III and expanding the eligibility to three broad populations – adults, families, and young adults. In last year's testimony, we noted that HRA had begun working with the Coordinated Assessment Placement System (CAPS) Steering Committee to develop the Coordinated Assessment Survey, a universal tool to assist case managers and housing specialists to understand the different types of Supportive Housing and rental subsidies for which their clients may be eligible. The survey is now accessible to all 12,000 Placement, Assessment, and Client Tracking (PACT) users across NYC, improving the efficiency of referrals and placements of vulnerable individuals and families.

The CAPS survey works in conjunction with the Standardized Vulnerability Assessment (SVA), which was implemented on January 23, 2018. Through the SVA, all approved Supportive Housing applications receive a vulnerability rating of high, medium, or low based on criteria that contribute to the probability an individual or family is vulnerable to becoming or remaining homeless. Some of these criteria include multi-system contacts, functional impairments, high utilization of Medicaid, and length of time homeless. The SVA is determined by live data feeds with DHS, the HRA HIV/AIDS Services Administration, the Department of Corrections, and the Department of Health and Mental Hygiene as well as the information contained in the 2010e Supportive Housing application that HRA administers. These live feeds provide real-time shelter stay, Medicaid expenditures, and other information to determine eligibility and vulnerability for homeless individuals.

As of February 2018, almost 6,000 client surveys have been completed, and HRA continues to work with the aforementioned agencies, along with many additional City, State, advocacy and community-based stakeholders to fully implement CAPS citywide.

Making the Application Accessible

In previous testimony, we detailed the 2010e application process, administered by HRA, which allows referring agencies to electronically submit the application to HRA's Placement, Assessment, and Client Tracking Unit (PACT). In 2016, we streamlined the application to include automatic uploads of copies of supportive documents required for housing, such as the client's social security card and income information. In 2017, we expanded access to the application process to a broad range of referral sources including the Department of Housing Preservation and Development, HRA's Office of Domestic Violence, and the Department of Youth and Community Development. Further, we made it easier to apply for Supportive Housing by allowing additional

professionals, such as licensed clinical social workers and psychologists, to complete the required mental health evaluations for the 2010e application. We also now prepopulate sections of the 2010e with information collected as part of the Coordinated Assessment Survey. This reduces redundancy for individuals completing the application while ensuring consistency in information.

We have also made progress in educating the public, stakeholders, and other agencies of the Supportive Housing model. In March of 2018 we launched the first comprehensive city webpage on Supportive Housing. It explains the process to apply for Supportive Housing, to build Supportive Housing units, and-to provide services for Supportive Housing. This platform is easy to navigate and allows users to access consolidated information from multiple city agencies and community-based organizations to learn about available services and how to access them.

Results to Date

Drawing on the work of the Supportive Housing Task Force's experts – and even before the release of the Task Force's recommendations and report in December 2016 – in August 2016, the City released its first RFP for scatter site housing and awarded 505 units. This RFP includes evidence-informed practices geared towards helping individuals on their personal path to recovery such as motivational interviewing, person centered planning and trauma informed care. After the release of the Task Force's recommendations and report, the City also released an open-ended RFP for scatter site housing and an open-ended RFP for congregate units.

We are on track with the awards for NYC 15/15 units for this 15-year program that has improved the prior NY/NY plans through the Supportive Housing Task Force's December 2016 reform recommendations. Through the 15/15 plan thus far, we have made 1,426 awards to providers, including 505 scattered and 921 congregate units, 460 of which are congregate units that have closed on financing and are included in the 3,059 units in the HPD production pipeline. Through HPD's overall supportive housing production pipeline, between January 1, 2014 and December 31, 2017, HPD has funded 2,599 supportive units in addition to the 460 NYC 15/15 units through the preservation of existing supportive projects, remaining NY/NY III commitments, and other federal and state projects.

The City has and continues to move people out of shelter and into supportive housing. From 2014 to date, the Administration has provided Supportive Housing to over 5,000 New Yorkers moving out of shelter through a combination of units that have come available through the prior NY/NY pipeline as well as units that have come online through the new NYC 15/15 initiative.

In 2017 – the same year in which the first NYC 15/15 awards were made – we projected that we would have 500 clients linked to units by the end of December 2017. And for the second year following the awards – even while development and construction were ramping up – we projected that we would link an additional 500 clients to Supportive Housing units. Today, we are on pace with our target to reach the 1,000-client goal by the end of this calendar year: 337 clients have already moved into units, 170 clients are linked to units and are in the process of moving, and we expect at least 411 NYC 15/15 units will come online during 2018 – for a total of at least 918 so far for the 15-year initiative. In addition, HPD continues to develop supportive housing units that will come online in 2018, including remaining NY/NY III units.

Partnering for the Future

it is important to talk about the progress we have made against the backdrop of a unit shortage in the market. In our efforts to achieve the goals set out in the 15/15 plan, we face the challenge of operating in a market where the demand for units far exceeds the supply. Put simply, the abundance of renters in the market competing for the same units, coupled with a 1.15% vacancy rate for affordable apartments, influences the pace at which we are able to expand our scattered site program. This continuing work, coupled with our rental assistance programs and legal assistance services, all contribute to address the challenge of homelessness in our city and have made it possible to break the trajectory and hold the DHS shelter census flat for the first time in a decade.

In sum, within our multi-pronged plan to address the problem of homelessness that has built up over four decades, Supportive Housing is a critical component that benefits one cross-section of the population with a particular set of needs. Implementing the NYC 15/15 plan will provide permanent, stable housing and essential social services for some of the most vulnerable New Yorkers. Turning the tide on homelessness overall, however, goes far beyond developing and building Supportive Housing; it requires a multifaceted approach that focuses on prevention, bringing people in from the streets 24/7, rehousing people who become homeless, and transforming the approach to providing shelter that has been used over the nearly 40 years. The agencies before you today work in close partnership with each other, other City agencies, and community- and faith-based organizations to help ameliorate housing insecurity and homelessness for New Yorkers. Further, the recent integration of HRA and DHS has facilitated coordination between housing units in each agency and has improved the efficiency with which we deliver services to low-income New Yorkers.

Legislation

The proposed legislation, Intro 147, would require the Human Resources Administration (HRA) to issue an annual report regarding supportive housing. We look forward to working with the sponsors to address the concerns that underlie the proposed legislation.

We have made progress over the past few years, but we know we have much more work to do to address this decades-old problem. We look forward to our continued partnership with the Council to provide the help that New Yorkers need to get back on their feet.

Thank you again for this opportunity to testify and I welcome your questions.



Department of Homeless Services DAILY REPORT 4/23/2018 N. 49.

(Data from Sunday, April 22, 2018)

| SINGLE ADULTS | |
|-------------------------------------|-----|
| Drop-in Center Clients Served | 689 |
| Drop-in Center Overnight Census | 271 |
| Faith Bed Census | 166 |
| Outreach Contacts | 333 |
| Outreach Placements | 5 |
| Safe Haven Utilization | 950 |
| Veterans In Shurt-term Housing | 241 |
| Criminal Justice Short-term Housing | 148 |

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| FAMILY INTAKE | |
|-----------------------------------------------------|----|
| Families Requesting Temporary Housing at PATH | 78 |
| Adult Families Requesting Temporary Housing at AFIC | 9 |
| Families Placed in Overnight Accommodations | 0 |
| Families w/children at PATH Overnight (pre 10PM) | 0 |

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| TOTAL SHELTER CENSUS | | | | | | |
|----------------------|--------|--|--|--|--|--|
| Adults | 37,485 | | | | | |
| Children | 22,132 | | | | | |
| Total Individuals | 59,617 | | | | | |

| SINGLE ADULT SHELTER CENSUS | | | | | |
|-----------------------------|--------|--|--|--|--|
| Men | 11,248 | | | | |
| Women | 4,155 | | | | |
| Total Single Adults | 15,403 | | | | |

| FAMILIES WITH CHILDREN CENSUS | | | | | |
|-------------------------------|--------|--|--|--|--|
| Families | 12,418 | | | | |
| Adults | 16,987 | | | | |
| Children | 22,132 | | | | |
| Individuals | 39,119 | | | | |

| ADULT FAMILIES CENSUS | | | | |
|-----------------------|-------|--|--|--|
| Families | 2,408 | | | |
| Individuals (Adults) | 5,095 | | | |

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| TY 19 12,412 12,409 12,414 12,428 12,728 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,729 12,728 11,729 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 12,728 <th12,728< th=""> <th12,728< th=""> <th12,728< th=""></th12,728<></th12,728<></th12,728<> | 1 Aut Scot | Qct Nov | Dec Jan | Feb 1 Ma | ar Apr | May | June |
| TY II 12,510 13,225 12,307 12,319 12,423 12,323 12,324 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,323 12,329 12,329 12,329 12,329 12,329 12,329 12,329 12,329 12,329 12,329 12,329 12,329 12,329 12,329 12,329 12,331 12,331 12,331 12,332 12,332 12,332 12,331 12,331 12,331 12,332 12,332 12,331 12,331 12,331 12,331 12,331 12,332 12,332 12,332 12,332 12,332 12,332 12,332 12,332 12,331 12,331 12,331 12,331 12,331 12,331 12,331 12,333 12,333 12,333 </td <td>12,489 12,741</td> <td></td> <td>12,758 12,773</td> <td></td> <td></td> <td></td> <td></td> | 12,489 12,741 | | 12,758 12,773 | | | | |
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| FY 15 1,331 2,004 2,667 2,103 2,126 2,134 2,159 2,172 2,165 2,149 2,147 → FY 15 1,054 1,805 1,824 1,855 1,676 1,872 1,860 1,683 1,903 1,903 → FY 13 1,639 1,676 1,872 1,862 1,600 1,683 1,903 → FY 13 1,639 1,676 1,789 1,726 1,776 1,779 1,611 → FY 12 1,234 1,306 1,341 1,376 1,400 1,303 1,475 1,505 1,525 1,571 1,600 → FY 11 1,305 1,328 1,323 1,309 1,317 1,315 1,316 1,228 1,333 1,308 1,300 → FY 11 1,305 1,328 1,323 1,309 1,317 1,315 1,316 1,228 1,333 1,308 1,300 → FY 11 1,305 1,328 1,328 1,328 1,228 1,228 | 2,517 | DIIS | Aduli Family Census | 6 | Constraints of the second seco | | |
| → FY 14 1,794 1,805 1,824 1,855 1,876 1,872 1,800 1,881 1,883 1,503 → FY 13 1,639 1,673 1,680 1,659 1,686 1,706 1,729 1,769 1,611 → FY 13 1,639 1,673 1,880 1,686 1,706 1,729 1,766 1,793 1,611 → FY 13 1,264 1,305 1,241 1,376 1,400 1,303 1,475 1,505 1,571 1,608 → FY 11 1,305 1,328 1,323 1,309 1,317 1,315 1,316 1,228 1,333 1,308 1,303 → FY 11 1,305 1,328 1,323 1,309 1,317 1,315 1,316 1,228 1,333 1,308 1,303 → FY 11 1,305 1,327 1,328 1,315 1,316 1,228 1,233 1,308 1,303 | Aug Sept 2,516 2,517 2,376 2,395 | Oct Nov 2,501 2,204 2,415 2,247 | Aduli Family Census | Feb MA 2,487 2,501 2,5 | Agr 2,520 | \$ | Lange Lang |
| FY 13 1.639 1.673 1.680 1.669 1.683 1.686 1.705 1.749 1.766 1.793 1.811 FY 12 1.284 1.306 1.341 1.376 1.400 1.383 1.475 1.505 1.575 1.571 1.605 FY 12 1.284 1.306 1.341 1.376 1.400 1.383 1.475 1.505 1.575 1.571 1.605 FY 11 1.305 1.328 1.323 1.309 1.315 1.316 1.228 1.333 1.308 1.303 FY 11 1.305 1.327 1.348 1.315 1.316 1.228 1.333 1.308 1.303 | Aug Sept. 2.516 2.517 2.375 2.395 2.125 2.140 | DHS | Aduli Family Census | Feb MA 2,487 2,501 2,5 2,239 2,2 | 1 Aer 1 2,520 17 2,276 | | |
| → FY 12 1,294 1,308 1,341 1,376 1,400 1,303 1,475 1,505 1,575 1,571 1,608 → FY 11 1,305 1,326 1,323 1,309 1,317 1,315 1,316 1,228 1,333 1,308 1,303 1,305 1,305 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1,325 1 | Aug Sept. 2.515 2.517 2.375 2.395 2.120 2.140 2.004 2.067 | DHS | Aduli Family Census | Feb Md 2,487 2,501 2,5 2,239 2,2 2,172 2,5 | V Agr 11 2.520 17 2.276 15 2.149 | S | 2,46(2,24) |
| | Aug Sept. 2,515 2,517 2,375 2,395 2,125 2,140 2,004 2,067 1,005 1,224 | DHS | Aduli Family Census | Fab Mi ZAB7 Z,501 Z,250 Z,272 Z,172 Z,17 L,600 1.8 | 1 2.520 1 2.520 1 2.520 1 2.520 1 2.520 2.149 3 1.1683 | 6 | |
| Image: FY 0[1.332 1.353 1.274 1.248 1.215 1.283 1.284 1.288 1.299 1.280 1.275 FY 09, 1.139 1.171 1.227 1.207 1.337 1.326 1.310 1.295 1.315 1.307 | Aug Sept. 2,375 2,395 2,204 2,067 1,605 1,824 | DIIS C Nov 2.501 2.504 2.415 2.479 2.107 2.176 2.103 2.128 1.655 1.872 1.659 1.883 | Aduli Family Census | Feb Mi 2.467 2.501 2.5 2.239 2.2 2.172 2.1 1.500 1.8 1.749 1.7 1.505 1.5 | 11 2.520 17 2.520 17 2.276 1.683 1.683 1.683 1.571 | \$ | |
| FY 09: 1,139 1.171 ↓ 1,227 ↓ 1,277 ↓ 1,297 ↓ 1,337 ↓ 1,326 ↓ 1,310 ↓ 1,295 ↓ 1,315 ↓ 1,307 ↓ | Aug Sept 2,515 2,517 2,757 2,395 2,126 2,140 2,004 2,667 1,860 1,305 1,326 1,213 | DHS 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 1.855 1.870 1.855 1.870 1.659 1.306 1.306 1.306 | Aduli Family Census | Fab Mi Z.487 2,501 Z.5501 2,55 Z.239 2,2 Z.172 2,17 J.500 1,8 J.749 1,7 J.505 1,5 J.228 1,3 J.228 1,3 | Apr 1 2,520 17 2,276 18 2,149 19 1,763 19 1,763 19 1,571 13 1,308 | May 2.488 2.301 2.147 1.903 1.611 1.606 1.303 | |
| | Aug Sept 2,575 2,517 2,575 2,395 2,125 2,140 2,004 2,067 1,605 1,824 1,308 1,241 1,253 1,223 | DHS | Aduli Family Census | Feb Mit 2,501 2,59 2,239 2,2 2,172 2,11 1,600 1.8 1,779 1,7 1,505 1,5 1,228 1,3 1,228 1,3 | V Acr 2.520 1. 2.520 1. 2.520 2.149 3. 1.683 1.793 1.571 1.3 1.280 | 6 | June 2,456 2,347 1,922 1,911 1,922 1,921 1,922 |
| | Aug Sept 2,575 2,517 2,575 2,395 2,125 2,140 2,004 2,067 1,605 1,824 1,308 1,241 1,253 1,223 | DHS | Aduli Family Census | Feb Mit 2,501 2,59 2,239 2,2 2,172 2,11 1,600 1.8 1,779 1,7 1,505 1,5 1,228 1,3 1,228 1,3 | V Acr 2.520 1. 2.520 1. 2.520 2.149 3. 1.683 1.793 1.571 1.3 1.280 | 6 | |

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| 1 413. par 14 | July 13,95% | Анр)4,112 | Sept [4,189 | Oci 14,308 | Nuv 4,485 | Dec 14,576 | : Jan 1 14,895 | Feb 15,216 | Mar | Apr 13,943 | May | Jus (3.46% |
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| estadates FY 18 | July 13,958 12,939 11,970 10,474 9,833 | Aug. 14,112 22,988 12,086 10,554 9,854 9,121 8,235 | Scpi 14,139 13,083 12,247 10,759 9,928 9,928 9,928 9,928 | Oct 14,308 13,322 12,477 10,954 9,949 9,332 8,505 | Nov 14,485 13,472 12,685 11,164 9,947 9,365 8,574 | Dec 14,676 13,815 12,781 11,301 10,006 9,537 8,534 | : Jan 14,805 13,657 12,943 11,526 10,172 9,666 8,744 | Feb 15,216 13,057 13,067 11,779 10,294 9,608 8,836 | Mar 13,884 13,165 11,852 16,303 9,818 8,810 | Apr 13.943 13.135 11.857 10.371 9.530 8.859 | May 13.995 13.112 11.811 10.369 | Jus 13.468 11.060 11.934 10,370 9,857 |
| subset FY 18 m | July 13,055 12,939 11,970 10,474 9,833 8,968 8,177 7,639 | Анр 14,112 12,988 12,086 10,554 9,854 9,121 8,235 7,844 | Sepi 14,189 13,083 12,247 10,759 9,928 9,281 9,281 9,221 8,046 | Oct 14.308 13.322 12.477 10.954 9.549 9.332 8.505 8.278 | Nuv 14,485 13,472 12,685 71,164 9,947 9,365 | Dec 14,676 13,815 12,781 11,301 10,006 9,537 8,584 8,581 | : Jan 14,805 13,857 12,943 11,526 10,172 9,666 8,766 | Feb 15,216 13,795 13,067 11,779 10,294 9,808 8,836 | Mar 13.884 (3.165 11.852 16.383 9.818 6.810 8.844 | Apr 13,943 13,135 11,857 10,371 9,530 8,529 8,629 | May 13.995 13.112 1.611 10.565 9.546 8.850 8.438 | Jus 13.465 13.060 11.037 9.857 8.877 8.877 |
| FY 18 FY 17 FY 17 FY 18 FY | July 13,955 12,939 11,970 10,474 9,833 8,968 8,177 | Анр 14,112 22,988 12,086 10,554 9,854 9,121 8,235 | Sepi 14,159 12,247 10,259 9,928 9,281 9,421 | Oct 14,308 13,322 12,477 10,954 9,949 9,332 8,505 | Nov 14,485 13,472 12,685 14,164 0,947 0,365 8,574 | Dec 14,676 13,515 12,781 11,301 10,006 9,537 8,584 | : Jan 14,895 13,657 12,943 11,526 11,526 10,172 9,666 8,744 | 1 Feb 15,216 13,795 13,067 11,779 10,294 9,808 8,836 8,851 | Mar 13,884 13,165 11,852 16,303 9,818 8,810 | Арг 13,943 13,136 11,857 10,371 9,530 8,850 | May 13,995 13,112 11,811 10,269 9,546 8,850 | Jus (3.408 (1),060 (1),934 (0,370 9,857 8,877 |

*Due to data conversion the average monthly consus for December 2011 and January 2012 for Families with Children and Adult Families is based upon data for a partial month.

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(Shelter's Name)

HOUSING PLAN

(Housing Specialist)

| Resident Name: | Rm #: | Admission Date: | |
|---------------------------|-------|--------------------------|------------|
| Telephone: | | Caseworker: | . - |
| I.M./LDSS: | | Boro/County: | |
| P.A. Caseworker: | | Telephone: | |
| Social Security #: | | P.A. Identification #: | |
| Date you became homeless: | | Reason for homelessness: | |
| Marital Status: | | | <u>-</u> |

List the head of household's last four places of residence:

| Address | County/Borough | Date moved in | Date moved out | Reason for move |
|---------|----------------|---------------|----------------|-----------------|
| 1. | | | | |
| 2 | . • | . · | | |
| 3. | | | | |
| 4. | | | | |
| 7. | | | | |

List all persons who live with the family in the shelter:

| Name | | Relationship | Age | Citizenship | Income Amount | List School Attending |
|------|-----------------------------------------------|--------------|-----|-------------|---------------|-----------------------|
| 1. | НОН | | | | | , , |
| 2. | | | | | | |
| 3. | <u>, , , , , , , , , , , , , , , , , , , </u> | | | ~ | | |
| 4. | | | | | · | 1 |
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Page 1 of 3

1. Does the family have any children in foster care? Explain the need for foster care: Yes 🗌 🛛 No 🗍

2. Does the family anticipate additional individuals residing with them in permanent housing? If yes, please list below.

| NAME | AGE | SEX | RELATIONSHIP | FAMILY REUNIFICATION PLANS: |
|------------------------------------------------------------------------|-----------|------------|-------------------------------------|---------------------------------------|
| | | | | |
| | | | | |
| | | | · · · | |
| | | | | |
| | | | | |
| General Health: | 1 | <u> </u> | | |
| Parent(s): | | c | hild(ren): | |
| Special problems: | | | - | |
| | | | | · · · · · · · · · · · · · · · · · · · |
| | | | | |
| Is any member of the far If yes, when is the I | | | · · · · · | Yes 🔲 No 🗍 |
| 2. Is any member of the fa | mily disa | bled? | . • | Yes 🗋 🐳 No 🗋 |
| If yes, enter the name | ne and c | lisability | | |
| 3. Are any family members | currenti | y involve | d in a special program? | Yes 🗌 No 🛄 |
| Who: | | | · | |
| Substance Abuse: | Aicoho | lism Col | unseling: Mental Hea | th: Other: |
| 4. Explain any reason why | the fami | y may be | e disqualified for permanent housir | |
| 5. Has any member of the fa | | | | Who? |
| 6. Has any member of the f | | | on probation or parole? Yes 🗌 | No 🗌 Who? |
| | | | | . · . · |

INCOME:

| Current Sources of Income (all that apply) | Monthly |
|-----------------------------------------------------------|---------|
| Public Assistance/Family Assistance Safety Net Assistance | \$ |
| Supplemental Security Income (SSI) | \$ |
| Social Security | \$ |
| Employment | \$ |
| Other (please specify): | \$ |

| Entitlement | Mandated? | Amount Mandated | Amount Currently Received | |
|------------------------|----------------|-----------------|------------------------------|--|
| WIC | Yes () No () | | | |
| Home Emergency | Yes () No () | | | |
| Food Stamps | Yes () No () | | | |
| Car fare (apt. search) | Yes () No () | | | |
| Car fare (school) | Yes () No () | | | |
| Pregnancy | Yes () No () | | | |
| Other (Specify): | | · · · · | | |
| | Yes () No () | | | |

| T. Mie dity taning members currency encoded in a naming program of according sensor. | 1. | Are any family | members currently | enrolled in a training program or attending school? | Yes 🗌 🛛 N | lo [|] |
|--------------------------------------------------------------------------------------|----|----------------|-------------------|-----------------------------------------------------|-----------|------|---|
|--------------------------------------------------------------------------------------|----|----------------|-------------------|-----------------------------------------------------|-----------|------|---|

2. Name and address of program or school: ______

Date started: ______ Expected date of completion: _____

3. How many bedrooms needed?

4. List other housing applications filed?

| a | | Date Applied: |
|------------------------------------|--------|---------------|
| b | | Date Applied: |
| C | | Date Applied: |
| d | | Date Applied: |
| 5. Does the family have furniture? | Where? | |
| 6. Date placed in storage | | · · · |
| Housing Special | list: | |

Date of Survey:

Page 3 of 3

NY-600 - New York City CoC

| 24th Street CR/ | SRO |
|-----------------|-----|
|-----------------|-----|

| 124th Street CR/SRO | CoCR | \$636,820 |
|--------------------------------|--------|-----------|
| 124th Street Residence Housing | CoCR . | \$232,174 |
| 129th Street Residence | CoCR | \$386,863 |
| 1885 Third Avenue Residence | CoCR | \$352,273 |

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<u>State</u>

CoC Name

| Project Name 255 East Broadway | Program CoCR | Awarded Amount \$265,322 |
|---------------------------------------------------|-----------------|-----------------------------|
| 290 East 3rd Street Residence | CoCR | \$560,412 |
| 631 East 6th Street Residence | CoCR | \$123,455 |
| 74th Street Home Expansion | CoCR | \$120,405 |
| ABC Permanent Supportive Housing Program | CoCR | \$130,131 |
| Abraham Apartments | CoCR | \$96,047 |
| Ali Forney 11 | CoCR | \$446,938 |
| Ali Forney Center | CoCR | \$537,905 |
| Anchor House, Inc. | CoCR | \$245,232 . |
| ARC Consolidated | CoCR | \$1,146,890 |
| Athena House | CoCR | \$782,390 |
| BAC CoC PSH Program FY2017 | CoCR | \$394,122 |
| Bowery | CoCR | \$391,758 |
| Breaking Ground Consolidated | CoCR | \$3,522,607 |
| Briarwood SRO | CoCR | \$629,967 |
| Bridges to Home RRH for Young Adults Renewal 2017 | CoCR | \$1,129,426 |
| Bronx Park East Residence | CoCR | \$586,478 |
| Bronx Permanent Housing | CoCR | \$841,412 |
| Brooklyn Bureau Voc/Ed Program | CoCR | \$254,430 |
| Bryce House TH-RRH Project | CoC | \$979,517 |
| Burnside Community Residence | CoCR | \$594,066 |
| Camba Consolidated | CoCR | \$1,133,857 |
| Casa Renacer | CoCR | \$599,511 |

| • | Casa Sandra Supportive Housing Program for Social Change FY2017 | CoCR | \$331,109 |
|---|-----------------------------------------------------------------|------|-----------|
| | Cathedral Condos | CoCR | \$29,778 |
| | CCM Consolidated | CoCR | \$648,567 |
| | Cedar Tremont House | CoCR | \$542,684 |
| | Chelsea Court | CoCR | \$174,758 |
| | | | |

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| State | · | | | |
|--------------------|---|---|-------------|----------------|
| <u>CoC Name</u> | | | | |
| Project Name | | · | Program | Awarded Amount |
| Chelsea Leaf North | | | CoCR | \$263,078 |

| Chelsea Leaf North | CoCR | \$263,078 |
|-----------------------------------------|------|-------------|
| Citileaf Chelsea South | CoCR | \$554,920 |
| Clinton Housing W. 42nd Street | CoCR | \$223,765 |
| Cluster House | CoCR | \$176,577 |
| Columba Kavanagh House, Inc. | CoCR | \$402,454 |
| Community Access Consolidated Community | CoCR | \$1,697,718 |
| House | CoCR | \$414,421 |
| Community Housing Program | CoCR | \$624,095 |
| Congregate Renewal Project application | CoCR | \$136,464 |
| 2017 Continuum of Care 2017 Renewal | CoCR | \$533,140 |
| Corner House | CoCR | \$184,074 |
| Crotona SRO | CoCR | \$235,875 |
| CUCS Kingsbridge Heights | CoC | \$670,836 |
| Diversity Works | CoCR | \$570,409 |
| Diversity Works FY 2017 | CoCR | \$305,715 |
| Dorothy Day | CoCR | \$235,028 |
| Dorothy McGowan | CoCR | \$417,051 |
| East 9th Street Residence Program | CoCR | \$392,792 |
| East New York Residence Program | CoCR | \$523,399 |
| Edith MacGuire Residence | CoCR | \$716,806 |
| Ehrlich Residence | CoCR | \$521,314 |
| El Regreso Foundation | CoCR | \$258,691 |
| Emerson Family Development Center | CoCR | \$391,445 |
| Emerson Family Supported | CoCR | \$769,604 |
| | | |

| Families in SHINE | | CoCR | \$307,106 |
|----------------------------|---|------|-----------|
| Flatbush Aveunue Residence | I | CoCR | \$134,543 |
| Flora Vista | | CoCR | \$289,525 |
| Fortune Academy Residence | | CoCR | \$465,648 |

<u>State</u>

<u>CoC Name</u>

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| Project Name | Program CoCR | <u>Awarded Amount</u> \$900,911 |
|--------------------------------------------------------------------|-----------------|------------------------------------|
| Fortune Academy S+C | CoCR | \$143,549 |
| Fox Point | CoCR | \$252,845 |
| Freya House | CoCR | \$935,802 |
| Frost'd Scatter Site PH | | |
| Geel Consolidated | CoCR | \$1,196,153 |
| Genesis Homes Supportive Housing Program I | CoCR | \$889,633 |
| Georgia's Place | CoCR | \$236,604 |
| Gibb Mansion | CoCR | \$560,412 |
| Good Shepherd Services - Chelsea Foyer NOFA 2017 | CoCR | \$379,697 |
| Grace House | CoCR | \$448,965 |
| Gramercy Leaf | CoCR | \$651,642 |
| Harlem United Family PH | CoCR | \$412,830 |
| Havens | CoCR | \$225,326 |
| Hill House | CoCR | \$271,885 |
| HMIS Project Application FY2017 | CoCR | \$1,298,261 |
| Home | CoCR | \$423,476 |
| Housing + Solutions S+C | CoCR | \$244,173 |
| Housing for Homeless and Addicted to Alcohol | CoCR | \$493,368 |
| Housing Options | CoCR | \$293,546 |
| HUD Jefferson Housing Program | CoCR | \$363,032 |
| Ilene R. Smith Residence | CoCR | \$443,117 |
| In Homes Now | CoCR | \$634,745 |
| Integrated Permanent Housing, Support Services, Employment Program | CoCR | \$192,990 |
| Ivan Shapiro House | CoCR | \$380,256 |
| lyana House | CoCR | \$413,880 |
| | | |

| JHB Housing | CoCR | \$417,051 |
|-------------------|------|-----------|
| JHB Housing, Inc. | CoCR | \$133,895 |
| Kenmore Hall | CoCR | \$404,746 |

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<u>State</u>

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| <u>CoC Name</u> | | |
|----------------------------------------|------------------------|-----------------------------|
| Project Name | <u>Program</u> CoCR | Awarded Amount \$283,836 |
| Kingsbridge CR/SRO | CoCR | |
| Kingsbridge Terrace | | \$337,821 |
| Lantern Consolidated | CoCR | \$5,177,883 |
| Lawton Street Residence | CoCR | \$257,095 |
| Lenniger | CoCR | \$875,579 |
| LESC House FY2017 | CoCR | \$501,474 |
| Lewis Ave Residence | CoCR | \$134,544 |
| Liberty Avenue | CoCR | \$336,604 |
| Lindenguild Hall | CoCR | \$472,612 |
| Loring Place Vocational Education | CoCR | \$50,618 |
| Maple House CR/SRO | CoCR | \$473,078 |
| Muhlenberg Residence | CoCR | \$218,079 |
| NCS Consolidated | CoCR | \$484,235 |
| New Cov RRH | CoC | \$1,826,603 |
| New Covenant | CoCR | \$410,787 |
| North Core Studios | CoCR | \$443,117 |
| NSP Renewal project application 2017 | CoCR | \$298,019 |
| NY-600 CoC Planning Application FY2017 | CoC | \$1,250,000 |
| OASAS S+C | CoCR | \$2,102,183 |
| Odyssey House Haven | CoCR | \$831,406 |
| OMH SUS Knick/Beach | CoCR | \$426,925 |
| OMH/Pibly 2017 | CoCR | \$360,124 |
| OMH/SUS 12 | CoCR | \$203,026 |
| OMH/SUS 40 | CoCR | \$684,328 |
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\$350,001

\$1,370,652

CoCR

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Palace Hotel SRO

Palladia consolidated

| Park West House II | CoCR | \$125,838 |
|----------------------|------|-------------|
| PCMH City Wide Homes | CoCR | \$2,245,797 |

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| <u>CoC Name</u> | | |
|------------------------------------------|-------------------|------------------------------------|
| Project Name | Program CoCR | <u>Awarded Amount</u> \$244,901 |
| Permanent Housing 2 | | |
| Permanent Housing 3 | CoCR | \$1,816,303 |
| Peter Jay Sharp Residence | CoCR | \$443,117 |
| Pleasant Ave House | CoCR | \$260,120 |
| PRI Transitions | CoCR | \$677,690 |
| Project Hospitality Permanent Housing | CoCR | \$1,683,657 |
| Project Renewal consolidated | CoCR | \$1,965,120 |
| Promesa Shelter Plus Care | [·] CoCR | \$990,367 |
| Rapid Rehousing | CoCR | \$1,375,397 |
| Rapid Rehousing 2 | CoC | \$2,518,604 |
| Rental Assistance Program | CoCR | \$439,797 |
| Richard Dicker Residence | CoCR | · \$510,038 |
| Rico's Place | | \$243,503 |
| Riverside Place | CoCR | \$902,663 |
| Rustin House | CoCR | \$873,872 |
| S.H.I.P. for Young Adults Renewal 2017 | CoCR | \$654,573 |
| Safe Home 2017 | CoCR | \$229,908 |
| Sankofa | CoCR | \$801,242 |
| Scattered Sites | . CoCR | \$295,424 |
| Schafer Hall Family Program Renewal 2017 | CoCR | \$666,718 |
| Schafer Hall SHP | CoCR | \$370,169 |
| Shelter + Care '94 | CoCR | . \$691,522 |
| Shelter + Care '95 | CoCR | \$504,287 |
| Shelter Plus Care | CoCR | \$418,882 |
| SHINE Families | CoCR | \$382,280 |
| SHINE Moms and Children | CoCR | \$516,086 |
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\$427,084

CoCR

Wazobia House

West 74th Street Home

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\$338,854

\$165,389

CoCR

CoCR

| State | | |
|----------------------------------------------|-----------------------|-----------------------------|
| CoC Name | | |
| Project Name | <u>Program</u> CoC | Awarded Amount \$495,088 |
| SSO CAPS FY17 Expansion | | |
| SSO CAPS Grant 2017 | CoCR | \$600,000 |
| St. John's House II | CoCR | \$302,334 |
| St. Joseph Consolidated | CoCR | \$1,629,105 |
| Stand Up Harlem Housing Program | CoCR | \$423,474 |
| Stardom Hall | CoCR | \$503,989 |
| STARS II Renewal 2017 | CoCR | \$198,554 |
| Staten Island Scattered Site Housing Program | CoCR | \$313,002 |
| Stepping Stone Residence Nevins Street CRO | CoCR | \$239,298 |
| Stratford House | CoCR | \$749,888 |
| SUS Broadway | CoCR | \$325,456 |
| SUS Brooklyn Supported Housing | CoCR | \$1,161,002 |
| SUS consolidated | CoCR | \$964,430 |
| SUS Decatur | CoCR | \$303,256 |
| SUS Morris Avenue | CoCR | \$184,749 |
| | CoCR | \$379,706 |
| Tech | CoCR | \$146,384 |
| The Bridge S+C | CoCR | \$109,333 |
| The Christopher | CoCR | \$272,781 |
| The Ehrlich Residence | | |
| The Prince George | CoCR | \$314,204 |
| United Bronx Parents Shelter Plus Care | CoCR | \$346,692 |
| Urban Center for Change | CoCR | \$250,294 |
| · Vets | CoCR | \$155,257 |
| VIP Consolidated | CoCR | \$938,364 |
| Warren Street Residence | CoCR | \$443,117 |
| Warren Street SRO | CoCR | \$442,428 |

<u>State</u> <u>CoC Name</u>

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| <u>Project Name</u> West Harlem Transitional Services | Program CoCR | <u>Awarded Amount</u> \$1,327,350 |
|----------------------------------------------------------|-----------------|--------------------------------------|
| White Plains Road CR/SRO | CoCR | \$669,306 |
| WISH Families | CoCR | \$1,223,993 |
| Women In Need SPC 1 Triangle House | CoCR | \$151,737 |
| Women In Need SPC 2 Brooklyn Recovery | CoCR | \$230,383 |
| Women In Need SPC 3 Bronx Recovery | CoCR | \$344,721 |
| Women In Need SPC 4 Families in Recovery | CoCR | \$134,600 |
| WSFSSH Consolidated | CoCR | \$587,412 |
| WWC renewal project 2017 | CoCR | \$198,827 |
| Young Mothers Program 2 2017 Renewal | CoCR | \$122,361 |

NY-600.Total: \$107,934,572

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Home (/) > Programs (/programs/) > CoC: Continuum of Care Program (/programs/coc/) > Continuum of Care (CoC) Program Eligibility Requirements

Continuum of Care (CoC) Program Eligibility Requirements

The CoC Program is designed to assist individuals (including unaccompanied youth) and families experiencing homelessness and to provide the services needed to help such individuals move into transitional and permanent housing, with the goal of long-term stability. More broadly, the CoC Program is designed to promote community-wide planning and strategic use of resources to address homelessness; improve coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness; improve data collection and performance measurement; and allow each community to tailor its programs to the particular strengths and challenges in assisting homeless individuals and families within that community.

Eligible Applicants

Under the <u>CoC Program interim rule</u> (/resource/2033/hearth-coc-program-interim-rule/), eligible applicants consist of nonprofit organizations, State and local governments, instrumentalities of local governments, and public housing agencies. An eligible applicant must be designated by the Continuum of Care to submit an application to HUD for grant funds. The Continuum's designation must state whether the Continuum is designating more than one applicant to apply for funds, and if it is, which applicant is being designated as the Collaborative Applicant. A Continuum of Care that is designating only one applicant for funds must designate that applicant to be the Collaborative Applicant. For-profit entities are not eligible to apply for grants or to be subrecipients of grant funds.

Program Components

The CoC Program interim rule provides that Continuum of Care Program funds may be used for projects under five program components: permanent housing, transitional housing, supportive services only, HMIS, and, in some cases, homelessness prevention. Administrative costs are eligible under all components. Where possible, the components set forth in the Continuum of Care Program are consistent with the components allowable under the Emergency Solutions Grants program. This eases the administrative burden on recipients of both programs and ensures that reporting requirements and data quality benchmarks are consistently established and applied to like projects. One significant distinction between the Emergency Solutions Grants Program can be found in the eligible activities and administration requirements for assistance provided under the rapid re-housing component in this interim rule.

The five program components that can be funded through the CoC Program are listed below.

Permanent Housing

Permanent housing (PH) is defined as community-based housing without a designated length of stay in which formerly homeless individuals and families live as independently as possible. Under PH, a program participant must be the tenant on a lease (or sublease) for an initial term of at least one year that is renewable and is terminable only for cause. Further, leases (or sublease) must be renewable for a minimum term of one month. The CoC Program funds two types of persmanent housing: permanent supportive housing (PSH) for persons with disabilities and rapid re-housing. Permanent supportive housing is permanent housing with indefinite leasing or rental assistance paired with supportive services to

assist homeless persons with a disability or families with an adult or child member with a disability achieve

Continuum of Care (CoC) Program Eligibility Requirements - HUD Exchange

housing stability. Rapid re-housing (RRH) emphasizes housing search and relocation services and short- and medium-term rental assistance to move homeless persons and families (with or without a disability) as rapidly as possible into permanent housing.

Transitional Housing

Transitional housing (TH) is designed to provide homeless individuals and families with the interim stability and support to sucessfully move to and maintain permanent housing. Transitional housing may be used to cover the costs of up to 24 months of housing with accompanying supportive services. Program participants must have a lease (or sublease) or occupancy agreement in place when residing in transitional housing. The provisions of the CoC Program's TH program component have not changed significantly from the TH provisions under SHP.

3 Supportive Services Only

The supportive services only (SSO) program component allows recipients and subrecipients to provide services to homeless individuals and families not residing in housing operated by the recipient. SSO recipients and subrecipients may use the funds to conduct outreach to sheltered and unsheltered homeless persons and families, link clients with housing or other necessary services, and provide ongoing support. SSO projects may be offered in a structure or structures at one central site, or in multiple buildings at scattered sites where services are delivered. Projects may be operated independent of a building (e.g., street outreach) and in a variety of community-based settings, including in homeless programs operated by other agencies.

Homeless Management Information System

VATA Funds under this component may be used only by Homeless Management Information System (HMIS) leads for leasing a structure in which the HMIS operates, for operating the structure in which the HMIS is housed, and/or for covering other costs related to establishing, operating, and customizing a CoC's HMIS. Other recipients and subrecipients may not apply for funds under the HMIS program component, but may include costs associated with contributing data to the CoC's HMIS within their project under another program component (PH, TH, SSO, or HP).

β Homelessness Prevention

Eviction Brewentie Recipients and subrecipients located in HUD-designated High Performing Communities (HPCs) may use CoC Program funds for homelessness prevention assistance for individuals and families at risk of homelessness. The services under this component may include housing relocation and stabilization services as well as short- and medium-term rental assistance to prevent an individual or family from becoming homeless. Through this component, recipients and subrecipients may help individuals and families at-risk of homelessness to maintain their existing housing or transition to new permanent housing. Homelessness prevention must be administered in accordance with 24 CFR part 576.

Other Components

Safe Havens

The Safe Haven program component is no longer eligible under the CoC Program. No **new** Safe Haven projects will be funded, but the CoC Program interim rule explicitly states that all projects eligible under the McKinney-Vento Act before passage of the HEARTH Act, including Safe Havens, may be renewed in to

continue ongoing leasing, operations, supportive services, rental assistance, HMIS operation, and

administrative functions beyond the initial funding period. The annual CoC Program NOFA will provide additional details.

Section 8 Moderate Rehabilitation SRO

The Section 8 Moderate Rehabilitation SRO Program component is no longer eligible under the CoC Program. No **new** SRO projects will be funded. Current SRO projects will continue to be renewed under the Multifamily Assisted Housing Reform and Affordability Act of 1997.

Eligible Costs

The CoC Program interim rule sets forth the costs eligible for each program component in § 578.37(a). Not all costs are eligible in each program component, and in some cases, certain costs cannot be combined in a single unit or structure. The eligible costs for contributing data to the HMIS designated by the Continuum of Care are also eligible under all components. The eligible costs are summarized below.

Acquisition

Acquisition of real property is an eligible cost category under the PH, TH, and SSO program components. Grant funds may be used for up to 100 percent of the cost of purchasing property for the purpose of providing permanent housing, transitional housing, and supportive services only activities.

Rehabilitation

Rehabilitation of structures is an eligible cost category under the PH, TH, and SSO program components. Eligible rehabilitation costs include installing cost-saving energy measures and bringing a structure up to health and safety standards. Rehabilitation on leased properties is ineligible.

New Construction

New construction of structures is eligible under the PH and TH program components. New construction may include building entirely new facilities, constructing an addition to an existing structure that increases the floor area by 100 percent or more, and the cost of land for construction. Projects must demonstrate that construction is more cost-effective than rehabilitation. Unlike the previous regulations, the CoC Program interim rule establishes no maximum grant limits for rehabilitation or new construction. CoC Program funds may be used for up to 100 percent of costs as long as the match requirement is met through other resources. New construction on leased properties is ineligible.

Leasing Costs

Leasing is an eligible cost category under the PH, TH, SSO, and HMIS program components. Funds may be used to lease individual units or all or part of structures. Rents must be reasonable and, in the case of individual units, the rent paid may not exceed HUD-determined Fair Market Rents. Leasing funds may not be used for units or structures owned by the recipient, subrecipient, their parent organization(s), any other related organization(s), or organizations that are members of a partnership where the partnership owns the structure without a HUD-authorized exception. When leasing funds are used to pay rent on units, the lease must be between the recipient or the subrecipient and the landowner, with a sublease or occupancy agreement with the program participant. The recipient may, but is not required to, charge the program participant an occupancy charge, consistent with the parameters specified in the interim rule.

Rental Assistance Costs

Rental assistance is an eligible cost category under the PH and TH program components and may be tenant-

Continuum of Care (CoC) Program Eligibility Requirements - HUD Exchange

based (TBRA), sponsor-based (SBRA), or project-based (PBRA), depending upon the component type.

Rental assistance may be short-term for up to 3 months; medium-term for 3 to 24 months; or long-term for more than 24 months. The length of assistance depends upon the component type under which the cost is funded. Recipients must serve as many program participants as identified in their funding application to HUD, but, if the amount reserved for the term of the grant exceeds the amount needed to pay actual costs, the excess funds may be used to cover property damage, rent increases, or the rental needs of a greater number of program participants.

- TBRA. Program participants select any appropriately sized unit within the CoC's geographic area, although recipients or subrecipients may restrict the location under certain circumstances to ensure the availability of the appropriate supportive services. Except for victims of domestic violence, program participants may not retain their rental assistance if they relocate to a unit outside the CoC's geographic area.
- **SBRA.** Program participants must reside in housing owned or leased by a sponsor organization and arranged through a contract between the recipient and the sponsor organization.
- PBRA. Program participants must reside in housing provided through a contract with the owner of an existing structure whereby the owner agrees to lease subsidized units to program participants.
 Program participants may not retain their rental assistance if they relocate to a unit outside the project.

When rental assistance funds are used to pay rent on units, the lease must be between the program participant and the landowner. Each program participant, on whose behalf rental assistance payments are made, must pay a contribution toward rent consistent with the requirements of the interim rule.

Supportive Services Costs

Supportive services are eligible costs under the PH, TH, and SSO program components. The CoC Program interim rule specifies all eligible services and clarifies that any cost not listed in the rule is ineligible. As in the past, services must be offered to residents of PSH and TH for the full period of their residence. RRH programs must require program participants to meet with a case manager at least monthly.

Services may be provided to formerly homeless individuals for up to six months after their exit from homelessness, including the six months following exit from a transitional housing project. Recipients and subrecipients are required to perform an annual assessment of the service needs of their program participants and to adjust services accordingly. Eligible costs include the cost of providing services, the salary and benefits of staff providing services, and materials and supplies used in providing services.

Operating Costs

Operating costs are eligible under the PH, TH, and HMIS program components. Funds may be used to pay the day-to-day operating costs in a single structure or individual housing units, including maintenance (such as scheduled replacement of major systems), repair, building security (when CoC Program funds pay for more than 50 percent of the facility by unit or area), electricity, gas, water, furniture, equipment, property insurance, and taxes. These costs may not be combined with rental assistance costs within the same unit or structure, and operating costs are not eligible under the SSO program component.

HMIS Costs

Costs related to contributing client data to or maintaining data in the CoC's HMIS or a comparable database for victim services providers or legal services providers are eligible costs under the PH, TH, SSO, and HMIS program components. Eligible HMIS costs include hardware, equipment and software costs; training and

overhead; and staffing costs associated with contributing data to the HMIS designated by the CoC for its

geographic area.

Project Administration

Recipients and subrecipients may use up to 10 percent of any grant, excluding the amount for CoC planning and Unified Funding Agency (UFA) costs, established through the CoC Program NOFA for project administrative costs. These costs include expenses related to the overall administration of the grant (24 CFR part 578.59), such as management, coordination, monitoring, and evaluation activities and environmental review.

Related Resources

CoC Program Laws, Regulations, and Notices (/coc/coc-program-law-regulations-and-notices/)

CoC Program User Guides, Tools, and Webinars (/coc/guides)

CoC Program Competition HUD Guidance (/e-snaps/fy-2013-coc-program-nofa-coc-programcompetition/) Home (/) > Programs (/programs/) > SHP: Supportive Housing Program (/programs/shp/) > SHP Eligibility Requirements

SHP Eligibility Requirements

The former <u>Supportive Housing Program (SHP)</u> has been consolidated with other HUD competitive homelessness assistance grant programs, including the <u>Shelter Plus Care (SPC) Program</u> and the <u>Section 8</u> <u>Moderate Rehabilitation/Single Room Occupancy (SRO) Program</u>, to create the <u>new Continuum of Care (CoC)</u> <u>Program</u>. The eligibility requirements below pertain to the former Supportive Housing Program. Please ensure you have read the CoC Program interim rule (/resource/2033/hearth-coc-program-interim-rule/).

Eligible Beneficiaries

SHP helps homeless people who are sleeping in places not meant for human habitation, such as cars, parks, sidewalks, and abandoned buildings, or those who are living in transitional housing or sleeping in an emergency shelter as a primary nighttime residence.

On December 5, 2011, HUD published the **final rule** on the **Definition of Homeless (/resource/1928/hearthdefining-homeless-final-rule/)** in the Federal Register. As this is the final rule, there is not a further comment period for the definition of homeless. The final rule on the Definition of Homeless went into effect on January 4, 2012. The final rule applies to all recipients of Emergency Solutions Grants (ESG) program funds as well as **all** recipients of CoC Program funding awarded through the FY2011 and 2012 CoC Program Competition'. Recipients of the former Emergency Shelter Grants program funds, as well as existing SHP and S+C projects that did **not** renew in the FY2011 or FY2012 CoC Competitions, must continue to use the definition of homeless in effect prior to January 4, 2012, which is attached to their current grant agreements.

Eligible Activities

SHP funding is generally available to support the following activities in supportive housing projects:

Acquisition and Rehabilitation

Many applicants propose to purchase property that will be used to provide supportive housing to homeless persons. In each project, the SHP grant for acquisition and rehabilitation is available up to between \$200,000 and \$400,000 per structure, depending on the area. Consult the HUD Field Office to determine the acquisition and rehabilitation cost limits for your area. The recipient must match the funds received for this purpose with money from other sources.

New Construction

Proposals to build structures in which homeless persons will reside were also funded under SHP. Grants for new construction are limited to \$400,000 per structure, regardless of where the project is located. If the applicant is also acquiring the land in tandem with the new construction, the \$400,000 limit applies to both activities. The recipient must match the funds received for this purpose with money from other sources.

Leasing

Grantees may lease structures to provide supportive housing or supportive services, or individual units.

Supportive Services

Services directly facilitating the movement of homeless participants to independent living are eligible for SHP

SHP Eligibility Requirements - HUD Exchange

support, such as outreach, case management, childcare, job training/placement, health care, and transportation. SHP grantees must share in the costs of supportive services, including a cash match of the total services budget. Grantees are encouraged to augment the support received in this activity via mainstream resources like Medicaid or Supplemental Security Income (SSI).

Operating Costs

Costs associated with the physical, day-to-day operations of a supportive housing facility and requiring cash payments are eligible, such as maintenance and repair, operations staff, utilities, equipment, supplies, insurance, food, relocation, and furnishings. In addition, grantees must provide a cash contribution equal to 25 percent of the total operating costs budget.

Project Administrative Costs

Up to 5 percent of any grant awarded under SHP may be used for paying the costs of administering the assistance (i.e., the costs associated with reporting to HUD). Applicants and project sponsors must work together to determine a fair plan for distributing administrative funds between applicant and project sponsor.

Development or Implementation of Homeless Management Information Systems (HMIS)

These are now categorized as separate, eligible activity with a separate budget line item in the SHP budget summary. Grantees must contribute 20 percent of the total HMIS budget.

Grant Size and Duration

The term of new SHP grants was 3 years. Renewal grants may be a 1 year term.

Requirements and Responsibilities

Specific performance measures must be established population to be served. Grant recipients are required to regularly monitor their clients' progress in meeting performance measures. In addition to recordkeeping purposes, HUD requires recordkeeping and annual progress reports. Grantees are also expected to make changes in their program or adjust performance measures in response to ongoing evaluation of their progress.

Related Resources

SHP Law, Regulations, and Notices (/shp/shp-law-regulations-and-notices)

SHP Guides, Tools, and Webinars (/shp/guides)

SHP Reports, Program Data, and Program Rents (/shp/shp-reports-program-data-and-program-rents/)

e-snaps: Homeless Assistance Application and Grants Management System (/e-snaps)

HDX: Homelessness Data Exchange (/hdx)

HMIS: Homeless Management Information System (/hmis)

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https://www.hudexchange.info/proorams/shp/shp-eligibility-requirements/

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Home (/) > Programs (/programs/) > CoC: Continuum of Care Program

Continuum of Care (CoC) Program

The Continuum of Care (CoC) Program is designed to promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and State and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.

- Learn about CoC Program Eligibility Requirements (/coc/coc-program-eligibility-requirements/)
- View SNAPS In Focus (/homelessness-assistance/snaps-in-focus/)
- View SNAPS-Shots (/resource/2893/snaps-shots/)
- View System Performance Measures Resources (/programs/coc/system-performance-measures/)
- View CoC Program Laws, Regulations, and Notices (/coc/coc-program-law-regulations-and-notices/)
- View CoC Program Competition: FY 2018 Funding Availability (/programs/e-snaps/fy-2018-coc-program-nofa-coc-program-competition/)
- View CoC Program Competition: e-snaps Resources (/e-snaps/guides/coc-program-competition-resources/)

CoC Program Training Material and Resources

CoC Program Toolkit (/programs/coc/toolkit)

This toolkit provides user guides, tools, webinars, and other resources on the following topics:

- Introduction to the CoC Program (/programs/coc/toolkit/introduction-to-the-coc-program)
- CoC Responsibilities and Duties (/programs/coc/toolkit/responsibilities-and-duties)
- Determining and Documenting Homelessness (/programs/coc/toolkit/determining-and-documenting-homelessness/)
- CoC Program Components and Eligible Costs (/programs/coc/toolkit/program-components-and-eligible-costs/)
- Grant Administration (Includes Recordkeeping and Financial) (/programs/coc/toolkit/grant-administration/)

Coordinated Entry Resources (/programs/coc/toolkit/responsibilities-and-duties)

These resources aid in the establishment and operations of a coordinated entry system which provides a process for conducting comprehensive entries of housing and services needs for individuals and families.

CoC Startup Training Webinars (https://www.hudexchange.info/trainings/courses/coc-program-start-up-trainingwebinars-for-fy-2013-funds1/)

These webinars assist FY 2013/FY 2014 CoC recipients and subrecipients to gain an understanding of grant operations and administration.

CoC News & Announcements

Solicitation for Members for the Housing Counseling Federal Advisory Committee (/news/solicitation-for-members-for-the-housing-counseling-federaladvisory-committee)

Date Posted: April 20, 2018

Register Today: Point-in-Time Count Office Hours - April 26, 2018 - 3:00 PM EDT (/news/register-today-point-in-time-count-office-hours) Date Posted: April 19, 2018

From our Partners: Safety Planning with Survivors of Domestic and Sexual Violence: A Guide for Homeless/Housing Programs Webinar – April 19, 2018 (/news/from-our-partners-safety-planning-with-survivors-of-domestic-and-sexual-violence-a-guide-for-homeless-housing-programs-webinar-april-19-2018) Date Posted: April 18, 2018

FY 2018 CoC Program Registration Process: CoC Program Registration Notice Posted to the HUD Exchange (/news/fy-2018-coc-program-registration-processcoc-program-registration-notice-posted-to-the-hud-exchange) Date Posted: April 13, 2018

Submittal Deadline Reminders: 2018 HIC and PIT Count Data and FY 2017 System Performance Measures Report (/news/submittal-deadline-reminders-2018hic-and-pit-count-data-and-fy-2017-system-performance-measures-report) Date Posted: April 11, 2018

SNAPS In Focus: Preventing and Ending Youth Homelessness (/news/snaps-in-focus-preventing-and-ending-youth-homelessness) Date Posted: April 09, 2018

View All CoC News & Announcements (/news/?ct=%5B%22News%22%5D&topic=%5B%22CoC%3A%20Continuum%20of%20Care%20Program%22%5D)

饺 Learn About Homelessness Assistance Programs (/homelessness-assistance/)

Join a Mailing List (/mailinglist/)

Contact a CoC (/grantees/contacts/?

params=%7B%2Žlimit%22%3A20%2C%22sort%22%3A%22%22%2C%22order%22%3A%22%22%2C%22years%22%3A%5B%5I View CoC FAQs (/coc/faqs/)

Ask a CoC Program Question (/ask-a-question/my-question/)

CoC Program Application and Reporting Systems

e-snaps: Homeless Assistance Application and Grants Management System (/e-snaps/)

HMIS: Homeless Management Information System (/hmis/)

HDX: Homelessness Data Exchange (/hdx/)

Sage HMIS Reporting Repository (/programs/e-snaps/guides/apr/)

CoC Program Reports, Program Data and Program Rents

Annual Homeless Assessment Report (AHAR) (/hdx/guides/ahar)

Annual Performance Report (APR) (/programs/e-snaps/guides/apr/)

FY 2017 CoC Awards and Funding Allocations (https://www.hud.gov/program_offices/comm_planning/homeless/budget/2017)

FY 2016 and Prior Years CoC Awards and Funding Allocations (https://www.hudexchange.info/grantees/allocations-awards/? params=%7B%22limit%22%3A20%2C%22COC%22%3Afalse%2C%22sort%22%3A%22%22%2C%22min%22%3A%22%22%2C%22years%22%3A%5B%5D%2C%22d

CoC Awards by Program Component (/coc/awards-by-component)

CoC Dashboard Reports (/programs/coc/coc-dashboard-reports/)

CoC GIS Tools (/coc/gis-tools/)

Fair Market Rents (/resource/2933/hud-fair-market-rents/)

Grant Inventory Worksheet (GIW) Reports (https://www.hudexchange.info/programs/coc/coc-giw-reports/)

Homeless Populations and Subpopulations Reports (/resource-library/coc-homeless-populations-and-subpopulations-reports/)

Housing Inventory Count (HIC) (/hdx/guides/pit-hic)

Housing Inventory Count Reports (/resource-library/coc-housing-inventory-count-reports/)

Point-In-Time (PIT) Count (/hdx/guides/pit-hic)

View More Report and Data Information (/coc/coc-program-reports-program-data-and-program-rents)

Featured Topics

Notice CPD-17-11: Determining a Program'Participant's Rent Contribution, Occupancy Charge or Utility Reimbursement in the Continuum of Care (CoC) Program when the Program Participant is Responsible for the Utilities (/resource/5630/notice-cpd-17-11-determining-program-participant-rentcontribution-in-the-coc-program/)

Grants Administration User Guide: Understanding Grants Administration and Requirements of the CoC Program Interim Rule (/resource/2946/cocprogram-grants-administration-user-guide/) Laws, Regulations, and Federal Register Notices

CoC Program Interim Rule

Date Published: July 2012

Description

The Continuum of Care (CoC) Program interim rule focuses on regulatory implementation of the CoC Program, including the CoC planning process. The CoC Program was created through the McKinney-Vento Homeless Assistance Act As Amended by S.896 Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 (https://www.hudexchange.info/resource/1715/mckinney-vento-homelessassistance-act-amended-by-hearth-act-of-2009/).

The CoC Program interim rule was first published in the Federal Register on July 31, 2012 and became effective August 30, 2012. The public comment period closed on November 16, 2012. An updated version of the CoC Program interim rule was published in the Federal Register on April 1, 2017.

The updated version incorporates changes made in CoC Program Interim Rule Amendment to § 578.51(c): Increasing Mobility Options for Homeless Individuals and Families With Tenant-Based Rental Assistance (https://www.hudexchange.info/resource/5064/coc-program-interim-rule-amendment-to-578-51-c/), which was established in response to the Violence Against Women Reauthorization Act of 2013 (https://www.hudexchange.info/resource/4717/federal-register-notice-reauthorization-of-the-violenceagainst-women-act-vawa-2013/). Prior to the publication of the updated interim rule, the Amendment was published and went into effect on July 14, 2016 and was open for comment until August 15, 2016 on the Federal Register page on the CoC Program Interim Rule

(https://www.federalregister.gov/articles/2016/06/14/2016-13684/continuum-of-care-programincreasing-mobility-options-for-homeless-individuals-and-families-with).

The updated CoC Program interim rule revises section 578.51(c) to address the mobility of homeless individuals and families with tenant-based rental assistance; section 578.99(j) to provide protections for victims of domestic violence, dating violence, sexual assault, or stalking; and section 578.3 incorporating the final definition of chronically homeless.

Though not specifically reflected in the CoC Program interim rule, a notable change to the CoC Program has been implemented through the "Fixing America's Surface Transportation Act (http://transportation.house.gov/uploadedfiles/fastact_xml.pdf)," signed December 4, 2015, under Section 79001. Authority to Administer Rental Assistance. The Act amends the HEARTH Act and allows nonprofits to administer rental assistance under the CoC Program.

Note that the final Homeless Definition (https://www.hudexchange.info/resource/1928/hearth-defining-

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homeless-final-rule/) and Chronically Homeless Definition

(https://www.hudexchange.info/resource/4847/hearth-defining-chronically-homeless-final-rule/) are in effect for administration of the CoC Program interim rule.

Resource Links

- CoC Program Interim Rule, published April 1, 2017 (https://www.gpo.gov/fdsys/pkg/CFR-2017-title24-vol3/xml/CFR-2017-title24-vol3-part578.xml) (HTML)
- CoC Program Interim Rule, effective August 30, 2012 (/resources/documents/CoCProgramInterimRule.pdf) (PDF)
- CoC Program Interim Rule, effective August 30, 2012 (Formatted Version) (/resources/documents/CoCProgramInterimRule_FormattedVersion.pdf) (PDF)
- CoC Program Interim Rule Public Comment Period Extension Notice, published September 28, 2012 (/resources/documents/CoCProgramInterimRule_PublicCommentPeriodExtension.pdf) (PDF)

| Tags: | CoC |
|-------|-----|
|-------|-----|

Author Organization HUD

Resource Approver HUD Approved

Homeless Management Information System

A Homeless Management Information System (HMIS) is a local information technology system used to collect clientlevel data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Each Continuum of Care is responsible for selecting an HMIS software solution that complies with HUD's data collection, management, and reporting standards.

- Learn about HMIS Requirements (/hmis/hmis-requirements)
- View HMIS Regulations and Notices (/hmis/hmis-regulations-and-notices)
- Learn more about HMIS Data and Technical Standards (/hmis/hmis-data-and-technical-standards/)

HMIS Guides and Tools

These resources are intended to assist Continuum of Care (CoC) Program grantees, HUD-Veterans Affairs Supportive Housing (HUD-VASH) Program grantees, and Veterans Homelessness Prevention Demonstration (VHPD) Program grantees, and HMIS vendors in designing, implementing, and maintaining an HMIS. Resources available include templates and tools, sample policies and procedures, training modules, and manuals.

View HMIS Guides and Tools (/hmis/guides)

HMIS News & Announcements

HUD Releases 2017 HMIS Data Standards Data Dictionary Version 1.3 (/news/hud-releases-2017-hmis-datastandards-data-dictionary-version-1-3) Date Posted: March 21, 2018

2018 NHSDC Spring Conference - Pittsburgh, PA - April 18-19, 2018 (/news/2018-nhsdc-spring-conferencepittsburgh-pa) Date Posted: March 20, 2018

New Resources on Counting Survivors of Domestic Violence in the Point-In-Time (PIT) Count (/news/newresources-on-counting-survivors-of-domestic-violence-in-the-point-in-time-pit-count) Date Posted: January 12, 2018

ESG CAPER Submission Updates (/news/esg-caper-submission-updates) Date Posted: September 29, 2017

NHSDC Fall 2017 Conference – San Diego, CA October 11-12, 2017 (/news/nhsdc-fall-2017-conference-san-diegoca-october-11-12-2017) Date Posted: August 31, 2017

New Resource Available for Reporting on Chronic Homelessness (/news/new-resource-available-for-reporting-onchronic-homelessness) Date Posted: August 16, 2017

View All HMIS News & Announcements (/news/? ct=%5B%22News%22%5D&topic=%5B%22HMIS%3A%20Homeless%20Management%20Information%20System%22%5D)

💮 Learn About Homelessness Assistance Programs (/homelessness-assistance/) Ioin a Mailing List (/mailinglist/)

View HMIS FAQs (https://www.hudexchange.info/hmis/faqs/)

Ask an HMIS Question (/program-support/my-question/)

Related Programs

AND RECEIPTION OF A DESCRIPTION OF A DES

CoC: Continuum of Care Program (/coc)

RHSP: Rural Housing Stability Assistance Program (/rhsp)

VHPD: Veterans Homelessness Prevention Demonstration Program (/vhpd)

Related Reporting Systems

e-snaps: Homeless Assistance Application and Grants Management System (/e-snaps) HDX: Homelessness Data Exchange (/hdx)

Featured Topics

Federal Partner Participation (/hmis/federal-partner-participation/) HMIS Software Provider Forum (/hmis/hmis-software-provider-forum/)

URBAN JUSTICE CENTER

FOR THE RECORD

April 24, 2018

Council Member Stephen Levin Chair, Committee on General Welfare New York City Council 250 Broadway New York, NY 10007

Re: Int. No 147-2018, local law to amend the administrative code of the City of New York, on relation to reporting on supportive housing

Dear Council Member Levin,

The Urban Justice Center strongly supports Int. No 147-2018 and asks that the City Council pass the legislation as soon as possible.

Sincerely,

Doug Lasdon

Executive Director



SAFETY NET ACTIVISTS

Supported by the Safety Net Project at the Urban Justice Center

City of New York Committee on General Welfare Int 0147-2018 In relation to reporting on Supportive Housing Tuesday, April 24, 2018

Good Afternoon,

My name Is Peter Malvan and I have had the experience of working in supportive and supported housing from Outreach and support in HUD's Housing First Model in NYC from 1991 through 2010.

In this time, I have noticed two things that are the basis of non-movement from higher levels supportive housing to supported housing. People with supports make progress and become positive role models by going through a continuum of care and going from one program to another in progression toward the goal of moving toward more independent housing. They make clear their desire to move yet are considered very compliant or easy. At this point they are **warehoused** and continue to progress to more independent services but not housing. The issue that presents itself is that despite their progress and compliance their desire to move becomes connected to service plans that continually link them to "6 months to two year programs" as prerequisite to actually filing applications toward movement. Somehow it becomes unrealistic to apply for NYCHA or these days NYC HPD Housing Connect Housing.

For many years there was a concept of people being not ready for housing. When NY/NY agreement was made there was a plan to move people through a progressive continuum of care. In 1991 to 1995 our original HUD "Housing First Model" program depended upon obtaining income but placed people in SRO or apartments with connected supports. I have worked in high support housing where the focus was to build living skills of individual while they participate in going for goals they set for themselves. This worked where I was employed and the staff did not decide whether or not a person was ready for application for independent housing. If they chose to apply for NYCHA or other housing the applications were filed if the wait list was long and the individual was eager to move application for more independent or less supportive was done and they moved with the updates of changing address with agency application was placed was changed.

Working in drop in centers people with physical disabilities would show up and let the staff know that the facility they had been placed had fallen out of habitability for persons with mobility impairment and would get short stays by the end of which repairs had been accomplished. The use of complaints pushed the work and the individuals could not be retaliated against while away.

Today I am co-chair of the HUD NYC Continuum of Cares Consumer Committee and people in supportive housing direct issues to me. It is noteworthy that complaints made with NYC through 911 are many times responded to with inspection. When complaints are made to offices of members of City Government or state government and releases are signed to communicate with agencies there are tales generated that convince the offices to cease assisting the consumer. There is the treatment of persons with forensic histories two of which I can elaborate on. One client I had worked with through outreach and placed in 2007 and another was referred to me in 2017. One was placed in a building that had no heat in a newly rehabilitated building. The agency answer to no heat was call 311 over a 3-year period and provision of a heater. Persistence with complaint resulted initially with psychiatric evaluation for the tenant. I advocated in person for the consumer only have the outreach from the agency harass me and tell me that the assistant executive director of that agency says for them to say "Hello" in wee hours of morning. The consumer pursued through and utilized housing court until repairs were ordered by court. Subsequently the agency had consumer taken to hospital for a psychiatric evaluation and provided enough information to triage to have consumer psychiatrically admitted for first time. The hospital then gave the consumer to take an injection of Haloperidol Decanoate or they could release the consumer.

There was an opportunity to assist the consumer and assist the landlord there by obtaining more independent housing stock. As an agency that develops housing they knew that the contractors who rehabbed the building are responsible for needed repairs within a set time span of completion of the work. There is an issue that the building received a City of New York certificate of occupancy despite the lack of heat working in half the building. As Real Estate developers of housing they knew that once it was demonstrated that there was no heat they could assist the landlord in going after the contractor for repair of issue.

Another consumer who had accomplished cessation of parole lives in building where there are conditions that affect their medical conditions adversely did 311 calls and the issue which affects the entire building was verified. The consumer made it clear that they need to move and complained about an additional social service fee above and beyond the 30% of income rent. The response was the production of a HRA 2010e application submitted in 2018 noting future appointments in December of 2017, the consumer being on parole and details on the offence for which the consumer had been convicted which was neither fire setting drug dealing nor predatory. Within the Consumer committee members and proxys have been through situations where they have complained about conditions of sites they live in supportive housing through 311. Their work orders and requests have become invisible or fallen on deaf ears initially resulting in production of misinformation indicating that they owe back rent in error, followed by having to take providers to court on more than one occasion.

We have had issues where data entry mistakes have shut down HUD VASH Sect 8 supplement and even after resolving that mistake was made and the consumer still is stuck having to pay back a HRA One Shot Deal. This rent payment averted the eviction. The agency which made the data entry mistake is leaving consumer responsible to repay part of emergency grant.

One of the members has had the situation of applying for lateral movement from supportive housing site to independent housing site run by the same agency as the supportive housing site. It is noteworthy that the unit the consumer pays 1/3 of their income for with subsidy paying the rest up to 100% of established rental AMR for area that the consumer. The consumer was promised as all consumers are placed in the small rooms containing mini kitchen sink, bath sink toilet, shower and one window for units that range from <240Sq Ft and less with window openings from 2" to 6". The Supportive Housing network of New York sent me information indicating that such units should have minimum standard of 300 Sq Ft. It is noteworthy that that this is indicator that these units are eligible for \$800/month from LINC or SEPS vouchers not the amounts they receive. The size of the units leaves the inhabitants in need of storage.

| Space | Area | Minimum Dimension |
|----------------|--------|--------------------------|
| Kitchenette | 20 sf | 10'-0" |
| LR/DA/SA | 150 sf | 10'-0" |
| Net Floor Area | 300 sf | 10'-0" |

Table 4.1 MINIMUM SIZES FOR TYPICAL EFFICIENCY UNITS

Supportive Housing can be one wonderful partial solution to homelessness, but it requires City of New York City Council and other government agencies to independently monitor and arbiter on habitability and human rights. Supportive Housing was developed to decrease human suffering not financially capitalize on it. The original plan included development and movement to independent permanent housing. It has not lived up to that. It appears focus on finance has made residents a commodity and funding only consideration. This can change. Our City may need to give teeth to already existing federal and state standards and protections for its inhabitants.

In closing the supportive housing in NYC requires a set of laws governing their set up their response to problems with operating systems for heat, air conditioning, mold testing and repairs. If this is not taken care of internally and it clearly is not, then City and State inspection and legislation such as the legislation mandating bleeding and upkeep of heating systems be extended to supportive housing and implemented outside collaborative applicant for their funding as it would be a conflict of interest.

As the situation prevails now those living in Supportive Housing are treated much like a commodity to bring funding rather than human beings. The emancipation proclamation was 153 years ago.

Contact Information Peter Malvan jhh_pmalvan@hotmail.com





Testimony to the New York City Council Committee on General Welfare Submitted by the Supportive Housing Network of New York April 24, 2018

Good afternoon. I would like to thank Council Member Levin and the General Welfare Committee for this hearing today and their recognition of the importance of supportive housing in the homeless service continuum.

My name is Laura Mascuch and I am the executive director of the Supportive Housing Network of New York. I also serve as the Co-Chair of the New York City Coalition on the Continuum of Care (CoC), the planning body that serves to allocate HUD funding for homelessness and permanent supportive housing programs.

The Supportive Housing Network of New York is a membership organization representing approximately 200 nonprofit developers and operators of supportive housing statewide, as well as other professionals who contribute to the advancement of this important model. Supportive housing is permanent affordable housing with embedded social services for vulnerable individuals and families, people who are homeless and living with disabilities and/or other barriers to maintaining stable housing. There are thousands experiencing mental illness and substance use disorders who rely on supportive housing. At the same time, thousands more languish on waiting lists or on the street, until more units of supportive housing become available. We are extremely grateful for NYC 15/15, the City's commitment to build 15,000 new units of supportive housing over the next 15 years. We look forward to working with the Council and our agency partners to execute this plan.

I would like to emphasize that supportive housing is permanent affordable housing. It is not to be confused with emergency shelter or transitional housing. Supportive housing is a critical component of the City's multi-pronged effort to emerge from the homelessness crisis in which we find ourselves.

People are homeless for a variety of reasons and the City has many initiatives to address these diverse needs. Supportive housing is specifically targeted to meet the needs of people who require the unique marriage of housing and services – those who without housing would not be able to access the services they need and without services would not be able to maintain their housing.

If you are concerned about our growing shelter census, supportive housing will stem that growth. Providing a permanent housing option for a chronically homeless individual will open up a shelter bed other individuals can cycle through. When long-term shelter stayers have the opportunity to find a permanent home, the shelter can return to what it was meant to be – a short-term emergency option of last resort. If you are concerned about people living on our streets and our subways, supportive housing is the answer. Street outreach teams and Safe Havens, specialized shelters with low barriers to entry, are the routes to the permanent supportive housing destination.

NYC 15/15 comes at a specific moment in our City and State's political history. Prior to the announcement of this initiative in 2015, the City and State had jointly developed supportive housing under the aptly named *New York/New York* agreements. In 1990 the first agreement was signed by Governor Mario Cuomo and Mayor David Dinkins. Over the course of three agreements, 14,000 units of supportive housing have been created. The NY/NY III Agreement is currently winding down, but units that have been in the pipeline are still coming online.

At the end of 2015, without prospects for a NY/NY IV Agreement, and facing the end of NY/NY III, Mayor de Blasio announced the City's commitment to create 15,000 units of supportive housing over the next fifteen years, an initiative that is known as NYC 15/15. NYC 15/15 is a two-part initiative. Half of the units (7,500) are planned as part of congregate, or single-site, residences and the other half are planned as scattered site apartments in the community.

Shortly thereafter, Governor Andrew Cuomo announced the State's commitment to create 20,000 single-site units of supportive housing over the next fifteen years, an initiative that is known as the Empire State Supportive Housing Initiative (ESSHI). While this is a statewide commitment, a large portion of the units are expected to be created here in New York City.

In order to generate recommendations for NYC 15/15, the Mayor convened a Supportive Housing Task Force, which I co-chaired with DSS Commissioner Steven Banks and then-HPD Commissioner Vicki Been. The Task Force was staffed by more than two dozen industry veterans who generated 23 recommendations, released in December 2016.

The first of the 23 recommendations was to "target units to three broad populations – adults, families, and youth – and incorporate a vulnerability index to target housing to those most in need." The NYC 15/15 RFPs reflect this recommendation. The majority of units are to be created for chronically homeless individuals – meaning homeless for one year or more – with substance use disorder and/or serious mental illness. Another 2,640 are for families where head of household meets the same criteria. The remaining 1,687 will be devoted to homeless youth, including singles and those who are pregnant and parenting. Both homeless young adults and those who are pregnant or parenting are new populations for supportive housing and their inclusion in NYC 15/15 was the direct result of the City's following Task Force recommendations.

The financial model for the NYC 15/15 congregate program provides critical funding to sustain a residence, at levels we have not seen in any other supportive housing program to date. The program incorporates both a rental assistance contract and a separate service contract, both funded by City Tax Levy dollars. The rental assistance contract between the building owner and HPD is 15 years and funds rents up to the HUD standard, Fair Market Rent (FMR). The service contract between the service provider and DOHMH is five years (with four-year renewals), and funds services at rates ranging from \$17,500 to \$28,738 per household per year, depending on the population. We are truly grateful to the Council and the Administration for allocating sufficient funding to provide the range and breadth of services that are needed to help chronically homeless and vulnerable people stabilize their lives.

NYC 15/15 also incorporates Task Force recommendations concerning supportive housing for families and young adults. For families, 15/15 services are intended to serve the entire family, not just the head of household; for young adults, supportive housing is no longer offered on a time-limited basis.

Congregate supportive housing grows the supply of affordable housing both for chronically homeless people and low-income families and individuals. In single site residences, 60% of apartments are typically dedicated for tenants eligible for support services, while the remaining 40% are affordable apartments for other members of the community, with eligibility mirroring HPD affordable housing lotteries.

A 2008 city-wide study conducted by NYU Furman Center found that single site residences led to higher than average property values. Additionally, congregate residences provide community benefits including community space that is available to local organizations, support for local businesses, and partnerships with health, safety and arts organizations. Single site residences also create jobs for local residents both during and after construction.

It should be noted, however, that, apart from the dearth of affordable appropriate land on which to build supportive housing, the single greatest impediment to developing new residences is local opposition, often based in misinformation and fear. We look to the City Council for leadership in this area.

The NYC 15/15 scattered site program is facing tougher odds. While there are many benefits to a scattered site model – such as shorter timeframes from contract award to tenant leasing, community integration, and an increased sense of independence for tenants who are more stable – the current market and regulatory environment impose serious challenges. As market rents rise and rent stabilization is lost in neighborhoods that have traditionally been affordable, landlords are losing interest in scattered site programs.

Furthermore, there are approximately 14,000 units of scattered site housing in New York City that predate NYC 15/15. The majority of these units are funded by the New York State Office of Mental Health, though some are funded by other state and city agencies such as NYS OASAS, NYC HASA, and NYC DOHMH. Many of these existing scattered site contracts are in danger due to stagnant rates and landlords who refuse to renew leases. Unit turnover in existing contracts means nonprofits are looking to rent new units every year, creating more competition in the market for the new NYC 15/15 scattered site program. Additional competition comes from other subsidy programs, such as LINC, SEPS, and CITYFEPS, which offer incentives such as rent up-front and signing bonuses that the scattered site programs do not.

For all of these reasons, my assessment of the current market is that it is unlikely to absorb another 500 units per year for the duration of the NYC 15/15 program.

In my role as Co-Chair of the Coalition for the Continuum of Care, I should mention that as a result of HUD requirements, HRA has created and begun to implement a vulnerability assessment, with input from a steering committee of the CoC and broad stakeholder input. Individuals and families will be assessed on their Medicaid service utilization and number of systems they have come into contact with, including corrections, hospitals, domestic violence services, and foster care. Prioritizing the most vulnerable people for permanent supportive housing will transform lives, reduce future harm, and mitigate trauma, but it will also limit utilization of these expensive services.

The vulnerability assessment is one part of the Coordinated Assessment and Placement System (CAPS). Regarding Intro 147, while we appreciate the efforts of the Council to increase transparency, fairness, and equity in the supportive housing placement process, we believe that the introduced bill is duplicative of CAPS. Under CAPS, applicants who are rejected by --or reject -- multiple programs will be moved to a case review process. CAPS will also implement a comprehensive evaluation process and provide annual reports. The Network would, therefore, recommend that City Council wait until the CAPS system is implemented before moving forward with passing legislation such as Intro 147.

While land is expensive and creates a challenge for developing new supportive housing residences, the benefits that these residences bring to neighborhoods are many. We must leave no stone unturned regarding City and State-owned sites, partnerships with business, landlords and local nonprofits. As the Council is aware, supportive housing is not only the most effective intervention for addressing chronic homelessness, it is cost-effective as well: According to a 2017 report from the New York State Department of Health, targeting people with high Medicaid utilization for supportive housing reduces substance use rehab admissions by 44%, reduces inpatient psychiatric admissions by 27% and reduces inpatient days overall by 40%. A 2017 study from Los Angeles found that permanent supportive housing for a population that was largely chronically homeless led to 60% reduction in use of public services.¹

We appreciate the Council's abiding interest in addressing homelessness in New York City and its longstanding support of supportive housing. We look to the Council's leadership to assist the nonprofit community find and site supportive housing. Thank you for this opportunity to testify.

Respectfully submitted by:

Laura Mascuch Executive Director Supportive Housing Network of New York 247 West 37th Street, 18th Floor New York, NY 10018 646-619-9641 Imascuch@shnny.org

FOR THE RECORD



April 24, 2018

Testimony for the New York City Council General Welfare Committee RE: Update on the NYC 15/15 Initiative and Intro 147 | April 24, 2018

Submitted by: Hector Mata, Care Coordination Manager, VOCAL-NY. Contact: hector@vocalny.org and (917) 669-9738.

Good afternoon. My name is Hector Mata and I am the Care Coordinator Manager at Voices Of Community Activists & Leaders (VOCAL-NY). VOCAL-NY is a grassroots organization building power among low-income people affected by HIV/AIDS, mass incarceration and the drug war in order to create healthy and just communities. On behalf of VOCAL-NY, I want to thank General Welfare Committee Chair Stephen Levin and the other members of this committee for the opportunity today to provide testimony.

In my capacity as the Care Coordination Manager at VOCAL-NY, I am responsible for overseeing and providing intake, assessment, referrals, and ongoing care coordination for participants of VOCAL-NY. I work with an average of 80 individuals on a regular basis. To be a participant in our Harm Reduction program, one must be a current drug user, but most people who I work with are dealing with co-occurring disorders: substance use disorder, and mental health disabilities and/or chronic health conditions.

Of the 80 participants that I provide case management for, more than half are chronically homeless. 80% are living in the City's shelter system, SRO, or are street homeless while most of these individuals would fall into the adult singles population of the NY/NY 15, most people have never heard of supportive housing or the 2010E housing application. More often, people have been talked to about or awarded housing vouchers, such as SEPS and LINC. If they have been awarded a voucher, many times, they are still unable to get housing due to source of income discrimination and other obstacles.

At VOCAL-NY, we don't get tired of saying: housing is healthcare. Supportive housing is a critical component of helping people who are struggling with a substance use disorder, mental health conditions or chronic health issues. Supportive housing is the housing that our participants need. However, most are not even getting their foot in the door or giving the chance to even apply for it. That means they are missing opportunities to stabilize their health and avoid other crises, like having contact with the criminal justice system or experiencing an overdose.

While it's clear that many things still have to improve to ensure that people in need are even considered for supportive housing applications, we worry about what comes after they apply as well.

We support Intro 147, which would require the Department of Social Services to report on 2010E acceptances, denials, placements, rejections, and reasons for rejections. We know the realities that our participants face as they seek support: systems and people that perpetually stigmatize them. Stigma can be an enormous barrier to accessing opportunities and rights, and it becomes a vicious cycle: exclusion from the very services people need increases the need for all of these services. These steps to make the process of receiving services more transparent, helps the people who need those services. By having this information, we can more clearly pinpoint who is not receiving the help they need, and why they are not receiving the help, and find a better way to assist such individuals.

Thank you.





Testimony of Coalition for the Homeless And The Legal Aid Society

On

Oversight: Update on the NYC 15/15 Initiative Int 147: In relation to reporting on supportive housing

Presented before

New York City Council Committee on General Welfare Committee on Mental Health, Disabilities and Addiction

> Giselle Routhier Policy Director Coalition for the Homeless

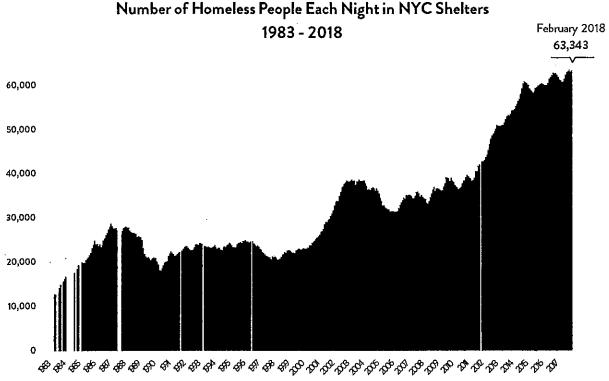
Josh Goldfein Staff Attorney The Legal Aid Society

April 24, 2018

The Coalition for the Homeless and The Legal Aid Society welcome this opportunity to testify before the New York City Council Committee on General Welfare regarding the NYC 15/15 Initiative, Intro 147, and other topics related to supportive housing.

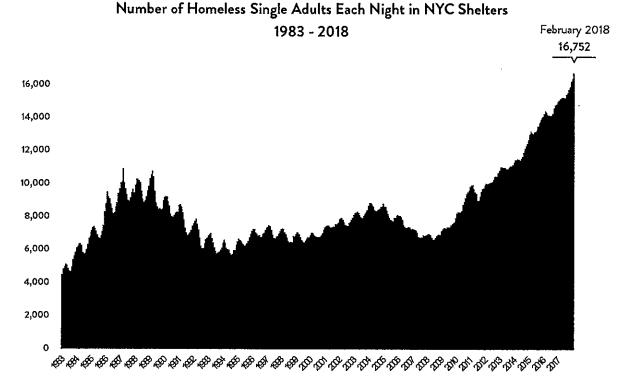
Record Homelessness in NYC

New York City remains in the midst of the worst homelessness crisis since the Great Depression. Each night, more than 63,300 New Yorkers sleep in City shelters. Over the course of fiscal year 2017, a record 129,803 unique individuals spent some time in a shelter, including more than 45,000 children and 38,600 single adults.



Source: NYCDepartment of Homeless Services and Human Resource Administration; LL37 Reports Data include individuals in veteran's shelters, Safe Havens, stabilization beds, and HPD emergency shelters.

As the number of homeless families in shelters has stabilized around record levels (remaining at approximately 15,600 between September 2017 and February 2018), the number of homeless single adults continues to rise each month. In February 2018, 16,752 homeless single adults slept in shelters or safe havens each night. The number of homeless single adults in shelters just surpassed 16,000 for the first time in December 2017 and is now poised to hit 17,000 in mere months if this trend continues. The number of homeless single adults is 10 percent higher than it was just one year ago and has increased by 140 percent in the past decade.

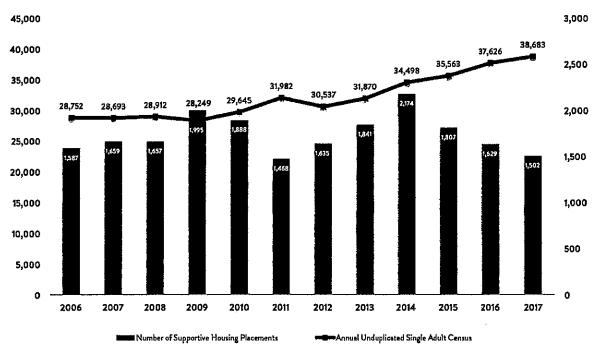


Source: NYCDepartment of Homeless Services and Human Resource Administration; 11.37 Reports

NYC 15/15 Initiative

While the NYC 15/15 Initiative targets supportive housing units to three broad populations (adults, families, and youth), the articulated goals of the initiative include allocating the majority of units to single adults with serious mental illnesses. The planned production of units is split evenly between scattered-site units and congregate (new construction) units. The scattered-site units are rented on the private market, with funding made available to provide mobile supportive services for individuals placed in those units. While congregate units often take years to plan, develop, and construct, scattered-site units can theoretically be brought online with very little lead time. However, the City remains far behind its goal of opening 505 scattered site units by December 2017: As of today, only about 200 units have opened. Additionally, the City has awarded contracts for the production of 921 congregate units, with 406 of those already in the construction phase.

In fiscal year 2017, just 1,502 single adults were assisted in moving into supportive housing from shelters – the lowest number in six years. Given the critical need for supportive housing for the record number of single adults, it is absolutely essential that units be brought online with appropriate urgency and that the process for accessing and maintaining these units does not exclude the most vulnerable individuals.



Annual Supportive Housing Placements for Single Adults Fiscal Years 2006 -2017

Source: NYC Department of Homeless Services

Supportive Housing Application, Eligibility, and Placement Process

As the need has increased and units have become scarcer, we have encountered many issues relating to the application for, eligibility criteria for, and placement process for supportive housing. In addition, DSS has implemented new policies in response to the HUD Coordinated Entry mandate that pose serious concerns regarding the allocation of supportive housing units to those in need. For example, homeless applicants for supportive housing are now assigned a vulnerability score based in part on the number of systems contacts they have had, posing accuracy problems for extremely vulnerable homeless New Yorkers who are disengaged from government agencies. Further, the lack of an official appeals process ignores the need for flexibility when serving individuals with serious needs and increases the likelihood of errors. Copies of letters we have sent to DSS concerning these and a range of other issues are attached.

In particular, we have made the following broader recommendations to DSS regarding the supportive housing application, eligibility, and placement process:

- The application, eligibility determination, and vulnerability assessment processes must be accessible to clients who are disengaged from government agencies.
- An impartial appeals process must be established for eligibility and vulnerability determinations.
- New criteria to establish vulnerability must be made more flexible in the initial stage in order to accommodate high-needs individuals who do not have the required systems contacts to produce a vulnerability score that matches their needs.

- Information regarding eligibility and vulnerability determinations should be provided to clients in writing.
- DSS must affirmatively assist clients to understand the process and obtain necessary documentation during the application process.
- Providers should not be permitted to require additional documentation from applicants beyond PACT application documents or anything else that is outside the scope of funding and eligibility requirements.

Supportive Housing Evictions and Tenant Stability

In the coming years, as tens of thousands of supportive housing units are brought online, the City must ensure that they are introduced to the market in ways that protect the tenancies of the residents of these new units as well as the residents of the City's dwindling stock of vitally needed affordable housing.

The Legal Aid Society and Coalition for the Homeless too often encounter supportive housing providers moving to evict tenants in Housing Court in violation of the ADA and other civil rights protections, presumably because getting rid of a resident who requires a higher level of services is seen as an easier way to resolve a problematic relationship than actually meeting the resident's complex needs as required by law. When supportive housing programs are underfunded and yet expected to serve high-need clients, the natural result is for providers to seek to reduce their costs by eliminating their need to serve such clients. This has too often been done through evictions. Supportive housing providers should have contractual obligations to work with tenants to accommodate their needs rather than reflexively seeking to evict them as a result of the very disabilities which made them eligible for supportive housing in the first place.

We also see supportive housing tenants in scattered-site placements faced with eviction when landlords attempt to reclaim the units for what they believe will be higher-paying tenants. As in our litigation with the provider Pathways to Housing, we see landlords filing petitions in Housing Court against the provider but failing to name the tenant who actually lives in the apartment, giving them no notice that they are about to be homeless again. Supportive housing tenants we represent have told us they were afraid to report problem conditions in their apartments out of fear they would be transferred or evicted as a result.

It can be difficult for advocates, let alone the tenants themselves, to ascertain which regulatory schemes in the patchwork of supportive housing programs govern a particular program. We agree with HPD that supportive housing tenants should have leases in their own names to make clear to all parties what their rights are. We also recommend that the Council pass legislation to ensure that supportive housing tenants are informed of their rights, including:

- a) Whether the apartment is subject to the Rent Stabilization Laws;
- b) Whether the apartment is in a building that is in receipt of a tax exemption or abatement;
- c) The right to court process prior to eviction;
- d) The right to enforce the Housing Maintenance Code, including provisions concerning lead paint hazards and heat and hot water;
- e) The right to be free from discrimination and to request reasonable accommodations;

- f) The right to rent receipts;
- g) The right to have family and/or additional occupants in the apartment;
- h) Rights under the Mental Hygiene Law;
- i) The right to be free from harassment; and
- j) The name of the programs funding and operating the resident's unit; any applicable grievance, or equivalent, policy or procedure to register and hear resident complaints; contact information for a responsible person at the administering agency; and the details of their rental obligation.

We have provided a draft bill (attached) that would address these issues to the committee's counsel for your consideration.

We are also concerned that as the City and State add tens of thousands of units of urgently needed supportive housing over the coming years, pressure will mount to meet the lofty goals set forth in public commitments by adding more scattered-site units than previously announced. Many landlords believe that renting to supportive housing providers gives them an end-run around rent stabilization protections and allows them to deregulate units over time by briefly installing non-profit providers as tenants of record. We must be vigilant that this does not result in displacement of existing tenants from affordable housing, robbing Peter to pay Paul. New York City cannot afford to lose any more units of affordable housing and rent regulated housing.

Intro 147 and Reporting

Coalition for the Homeless and The Legal Aid Society support the intent of Intro 147 and believe it would create an important mechanism for the public and advocates to understand the complicated and often opaque processes of applying for and receiving supportive housing. Additionally, it could provide insights into more systemic problems that need attention by DSS. We would like to meet with Council staff to propose amendments that would make the bill more effective at attaining these goals.

We thank you for the opportunity to testify on this very important subject.

About The Legal Aid Society and Coalition for the Homeless

<u>The Legal Aid Society</u>: The Legal Aid Society, the nation's oldest and largest not-for-profit legal services organization, is more than a law firm for clients who cannot afford to pay for counsel. It is an indispensable component of the legal, social, and economic fabric of New York City – passionately advocating for low-income individuals and families across a variety of civil, criminal and juvenile rights matters, while also fighting for legal reform.

The Legal Aid Society has performed this role in City, State and federal courts since 1876. It does so by capitalizing on the diverse expertise, experience, and capabilities of more than 1,100 lawyers, working with some 800 social workers, investigators, paralegals and support and administrative staff. Through a network of borough, neighborhood, and courthouse offices in 26 locations in New York City, the Society provides comprehensive legal services in all five boroughs of New York City for clients who cannot afford to pay for private coursel.

The Society's legal program operates three major practices — Civil, Criminal and Juvenile Rights — and receives volunteer help from law firms, corporate law departments and expert consultants that is coordinated by the Society's Pro Bono program. With its annual caseload of more than 300,000 legal matters, The Legal Aid Society takes on more cases for more clients than any other legal services organization in the United States. And it brings a depth and breadth of perspective that is unmatched in the legal profession.

The Legal Aid Society's unique value is an ability to go beyond any one case to create more equitable outcomes for individuals and broader, more powerful systemic change for society as a whole. In addition to the annual caseload of 300,000 individual cases and legal matters, the Society's law reform representation for clients benefits more than 1.7 million low-income families and individuals in New York City and the landmark rulings in many of these cases have a State-wide and national impact.

The Legal Aid Society is uniquely positioned to speak on issues of law and policy as they relate to New York City's runaway and homeless youth. Each of our three practice areas routinely interacts with the RHY population. The Legal Aid Society is counsel to the Coalition for the Homeless and for homeless women and men in the Callahan and Eldredge cases. The Legal Aid Society is also counsel in the McCain/Boston litigation in which a final judgment requires the provision of lawful shelter to homeless families. Recently Legal Aid, along with institutional plaintiffs Coalition for the Homeless and Center for Independence of the Disabled - NY, settled Butler v. City of New York on behalf of all disabled New Yorkers experiencing homelessness. Legal Aid's Juvenile Rights Practice provides comprehensive representation as attorneys for children who appear before the New York City Family Court in abuse, neglect, juvenile delinquency, and other proceedings affecting children's rights and welfare. Last year, our staff represented approximately 34,000 children. Last year, the Society's Civil Practice provided free direct legal assistance in more than 48,500 cases and legal matters through neighborhood offices in all five boroughs, and 23 specialized units, of which the Homeless Rights Project is one. Our Criminal Practice handles over 220,000 trial and post-conviction cases a year, some of which arise out of arrests predicated on our clients' homeless status. Our perspective comes from daily

contact with children and their families, and also from our frequent interactions with the courts, social service providers, and State and City agencies.

In addition to representing many thousands of children, youth, and adults each year in trial and appellate courts, we also pursue impact litigation and other law reform initiatives on behalf of our clients. On December 30, 2013, The Legal Aid Society, in collaboration with Patterson Belknap Webb & Tyler, LLC, filed C.W. v. The City of New York, a federal class action lawsuit on behalf of RHY in New York City. The lawsuit seeks to establish that young people in New York have a right to youth-specific shelter, and to remedy (1) the City's consistent failure to provide an adequate number of shelter beds for RHY, (2) its routine discharge of youth from crisis shelters before permanent housing has been secured, and (3) its longstanding failure to provide reasonable accommodations or mental health services to RHY with disabilities. Our goal in litigation is to ensure that the City creates and maintains enough youth-specific beds to meet the needs of all youth seeking shelter. No youth should languish on the street while relegated to a shelter waiting list or be discharged from shelter due to arbitrary time limits. In addition, we seek to ensure that youth discharged from shelter are provided with due process prior to any ejection from shelter. All five of the bills at issue today would bring us closer to these goals, by giving youth more time in crisis shelter to secure other housing, by fostering transparency and accountability in service provision, by streamlining the intake and assessment process between DYCD and DHS, and by providing young adults aged 21-24 with age-appropriate services.

<u>Coalition for the Homeless</u>: Coalition for the Homeless, founded in 1981, is a not-for-profit advocacy and direct services organization that assists more than 3,500 homeless New Yorkers each day. The Coalition advocates for proven, cost-effective solutions to the crisis of modern homelessness, which is now in its fourth decade. The Coalition also protects the rights of homeless people through litigation involving the right to emergency shelter, the right to vote, and life-saving housing and services for homeless people living with mental illness and HIV/AIDS.

The Coalition operates 11 direct-services programs that offer vital services to homeless, at-risk, and low-income New Yorkers. These programs also demonstrate effective, long-term solutions and include: Supportive housing for families and individuals living with AIDS; job-training for homeless and formerly-homeless women; and permanent housing for formerly-homeless families and individuals. Our summer sleep-away camp and after-school program help hundreds of homeless children each year. The Coalition's mobile soup kitchen distributes over 900 nutritious hot meals each night to homeless and hungry New Yorkers on the streets of Manhattan and the Bronx. Finally, our Crisis Intervention Department assists more than 1,000 homeless and at-risk households each month with eviction prevention, individual advocacy, referrals for shelter and emergency food programs, and assistance with public benefits as well as basic necessities such as diapers, formula, work uniforms, and money for medications and groceries.

The Coalition was founded in concert with landmark right to shelter litigation filed on behalf of homeless men and women (*Callahan v. Carey* and *Eldredge v. Koch*) and remains a plaintiff in these now consolidated cases. In 1981 the City and State entered into a consent decree in *Callahan* through which they agreed: "The City defendants shall provide shelter and board to each homeless man who applies for it provided that (a) the man meets the need standard to

qualify for the home relief program established in New York State; or (b) the man by reason of physical, mental or social dysfunction is in need of temporary shelter." The *Eldredge* case extended this legal requirement to homeless single women. The *Callahan* consent decree and the *Eldredge* case also guarantee basic standards for shelters for homeless men and women. Pursuant to the decree, the Coalition serves as court-appointed monitor of municipal shelters for homeless adults, and the City has also authorized the Coalition to monitor other facilities serving homeless families.

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Attachment 1: Correspondence with HRA regarding supportive housing applications, eligibility, placements and evictions, from October 2017 and April 2018



April 4, 2018

Michael Bosket Human Resources Administration 150 Greenwich Street, 30th Floor New York, NY 10007

Dear Michael,

Thank you for your response to our letter dated October 31, 2017 – and for subsequent discussions HRA PACT has offered surrounding the CAPS process. While our formal response is contained below, we look forward to continuing the discussion and would greatly appreciate the opportunity to meet again.

Supportive Housing Application & Eligibility

(1) CFTH: The application and eligibility determination processes should be set forth in the form of a written policy, and any potentially eligible person should be permitted to apply.

HRA: Draft policy and procedures from the PACT unit are currently under review to include relevant information that has been requested by CFTH. The comprehensive policy and procedure are expected to be completed soon and this will be shared with CFTH once published. HRA reviews all supportive housing applications received by referral sources.

CFTH: Please advise as to when the draft policy and procedures currently being reviewed by the PACT unit will be finalized and implemented. What policy is being used in the interim and how are reviewers being trained to determine eligibility currently?

What will HRA do to accommodate applications for this public benefit from those (including people with disabilities) without a referral source?

(2) CFTH: HRA should be required to assist applicants and their referring providers in securing documents needed to complete the application. Applications should not be found "unable to review" or effectively denied unless the required documents demonstrating eligibility have not been attached to the application and HRA has contacted the applicant to offer assistance in obtaining missing documentation. Additionally, HRA should provide a pre-denial notice to clients and their advocates with an opportunity to respond to any basis HRA may have found to deny the application.

HRA: HRA PACT reviewers do not have direct contact with clients. Reviewers assist the referral source in clarifying what documents are needed and most referral sources (hospitals, jail, homeless shelters, etc.) already provide housing assistance including assistance to obtain necessary documentation as part of their service provision.

"Unable to Complete" status on an application is not a denial or disapproval. It indicates to the referral source that more information is needed to determine if the applicant meets the clinical or homeless criteria for supportive housing. PACT reviewer consultation by email or phone is available to the referral source to explain the reason why the application is "unable to complete" and clarify what additional information is needed to complete the application. Once the application is complete, the decision can be made on eligibility for all supportive housing.

"Disapproved" applications are considered point in time determinations on a specific application. The referral source may submit another application at any time with new information which may result in a new "approved" determination. There is no "pre-denial" notice as all determinations are made within 1-3 business days of the date of application and all determinations can be reviewed again in consultation with the PACT reviewer, the unit director, or the medical director, if the referral source does not agree for any reason.

CFTH: As per the social services law, local districts have an affirmative responsibility to assist applicants in obtaining documents needed to establish their eligibility for benefits.

Please explain why "HRA PACT reviewers do not have direct contact with clients" when needed to assist them in obtaining documents needed to establish their eligibility.

Although an "unable to complete" determination is not intended to be a denial, it effectively functions as one if the documentation requested is not available. In accordance with social services law, we ask that HRA PACT reviewers first document efforts made to assist in obtaining the necessary documentation.

In our experience, the PACT reviewer consultation process is inconsistent depending on which reviewer makes the determination. Will the forthcoming policies and procedures explain a clear set of standards for such consultations?

(3) CFTH: Reviewers should consider all medical documentation and attribute weight to the documentation consistent with the SSA *"Treating Physician Rule,"* 20 C.F.R. § 404.1527.

HRA: HRA makes clinical eligibility determinations for mental health designated supportive housing according to the SOMH criteria for serious mental illness. Medical documentation is required from a licensed professional and given the appropriate weight. The evidence of functional impairment must be clearly outlined in the evaluation and supported by the client's history as described in the assessments. There are also prior applications that are reviewed and compared for consistency with the current application.

A significant number of psychiatric evaluations submitted with the SH application are completed by licensed clinicians that are not treating physician and application of the SSA Treating Physician Rule may actually have a negative impact on a many of these clients. According to the SSA Treating Physician Rules (TPR), less weight is given to documentation provided by evaluating clinicians rather than treating physicians, and less weight is given to clinicians who have no longitudinal history with a client rather than treating physicians. Thus, utilizing SSA's TPRs may actually have a negative impact on many of these clients as psychosocial assessments and psychiatric evaluations are frequently completed solely for the SH application itself and the individuals completing these evaluations do not have a history with the client. CFTH: Can you provide additional detail on the "weight" given to medical documentation? To clarify, we recommended that the Treating Physician Rule be used as a framework for clients with treating physicians, consistent with how HRA applies it under the Reasonable Accommodation policy within the Lovely H settlement.

The underlying point of this recommendation is that PACT reviewers should not override the documented diagnosis made by a treating physician or dispute evidence submitted by licensed professionals who have met with the client because, as previously noted, PACT does not have direct contact with clients.

When comparing new applications to prior applications "for consistency," what is the process or consequence if an inconsistency between applications is discovered?

(4) CFTH: Consistent with HUD regulations, client and provider reports for time periods when a client may have been sleeping out of doors should be counted toward the length of homelessness.

HRA: This request is outside the scope of HRA's area of responsibility, as each funding source determines the definition of homelessness and criteria for counting homeless time. According to the NY/NY III definitions and criteria for homeless documentation, an outreach team or drop-in program provides a written attestation that program staff have been working with a client for a certain period of time. This documentation is reviewed, and if consistent with prior applications or housing history submitted, the homeless time is counted from the point of engagement with the client. Additionally, homeless data exchange is conducted with DHS and HASA for count of days in each system – this is part of the supportive housing application review process.

CFTH: To clarify, the purpose of this recommendation wasn't about the definition of homelessness so much as the types of documentation that can be used to establish eligibility under a given definition – specifically, that client self-attestations and other provider reports should be accepted as collateral evidence of eligibility, as permitted under HUD regulations. Additionally, clients and providers would not know what the funding source of a given unit might be during the 2010e submission stage, so it is unclear why the funding source for a subsequently identified unit would be a factor at this point in the process.

(5) CFTH: The recommendations of referring providers regarding types of housing options most suitable for the client (i.e., SMI versus SUD) should be given weight and the broadest possible array of approvals, including more than one category, should be provided when a client meets eligibility criteria for more than one category of housing.

HRA: Psychiatric evaluations and psychosocial assessments that contain recommendations on types of housing options most suitable for the client are heavily considered in the final determination. Applications are reviewed for all categories of mental health and NY/NY III categories of supportive housing and applicants receive a determination for each category they are eligible.

CFTH: Please elaborate on how these recommendations are "heavily considered," including how much weight they are given as a rule.

Many Coalition clients are not found eligible for Category A or NYC 15/15, and we have found that PACT is hesitant to approve for multiple categories such as A and F for chronically homeless

clients diagnosed with serious mental illness and substance use disorders, or A and I for youth who are seriously mentally ill and chronically homeless. Please provide data on how many clients have received approvals for more than one category of housing.

(6) CFTH: All applicants who meet the eligibility requirements should receive approvals regardless of the supportive housing vacancy rate.

HRA: This is the current HRA policy. Eligibility is a separate process from the referral and placement of an eligible household to a vacant unit. As stated above, the eligibility is based solely on meeting the criteria for the particular supportive housing category.

CFTH: Please elaborate on the current policy.

(7) CFTH: The CAPS vulnerability index should not provide burdensome documentation requirements that could serve as obstacles for the clients who are most vulnerable and in the greatest need. A subset of available placements, we suggest no less than 50%, should be made available to those with the longest durations of homelessness.

HRA: The CAPS vulnerability index is not yet implemented. It is currently being developed as part of the 2010e application and no additional documentation will be required. Moreover, as you saw during the demonstration on November 8, 2017, the Coordinated Assessment Survey has no additional documentation requirements, and is not burdensome. It's a short assessment to be completed with the client to assist in the identification of potential eligibility for supportive housing and/or rental assistance programs. The system returns data from multiple sources to display valuable information including documentation HRA may have in its records such as copies of birth certificates, Social Security cards and other forms of ID as well as HRA budget letters. It also provides a detailed list of all forms of housing a client may be eligible for. This can be used as a support for direct care workers and the client to use in an effort to assist the client with the housing plan of his/her choice.

For supportive housing dedicated to chronically homeless individuals, the length of homeless time is taken into consideration for referral and placement, but a policy dedicating a percentage of available units to those with the longest duration of homelessness is not within HRA's scope. This would be the responsibility of the contracting agency to specify with the supportive housing provider. In the NY/NY III agreement and NYC 15/15 initiative, many of the target populations are designated for chronically homeless individuals or families.

CFTH: Please refer to the more detailed feedback CFTH has submitted related to the CAPS policy and procedures document.

Please explain why "a policy dedicating a percentage of available units to those with the longest duration of homelessness is not within HRA's scope," when HRA has played a significant role in determining the Standardized Vulnerability Assessment criteria and will continue to refine the SVA as the lead government agency on the CAPS Steering Committee.

(8) CFTH: HRA should notify applicants and their referring providers of the receipt of their applications and the eligibility determinations in writing, in the language the applicant prefers and at an appropriate reading level.

HRA: The referring worker is provided with a Service Request number and an immediate message confirming transmission of the application. Applications are processed within 1-3 business days, and typically determinations are made within one day. The referring worker will receive an automated notification by email of a determination on the application and the determination letter is available for review with the applicant. Determination letters are not client facing documents. They are letters to the referral source. Placing the burden on the client to self-refer to providers is not recommended given the complexity of the referral/placement process. It is HRA's expectation that the referral source work with the client to navigate this process. Moreover, as discussed during the November 8, 2017 demonstration, the Coordinated Assessment Survey will pull up past applications and eligibility determinations to the referral source so that they may better assist the client.

CFTH: To clarify, our recommendation was not to place the burden on the client, but rather to simultaneously notify clients and providers of the receipt and outcome of the applications, as is the case with several other benefits programs. This could potentially be accomplished through Access NYC. What is the justification for not notifying both clients and providers directly?

What is HRA's justification for not allowing clients, including those with disabilities, to apply for this public benefit unless they have a referral source?

(9) CFTH: HRA should establish an appeals process to allow applicants to seek reversal of adverse PACT determinations through an impartial review process that mirrors the reasonable accommodations application and approval process. HRA staff making determinations should have expertise in serving people with mental illnesses, other disabilities, and histories of homelessness.

HRA: There is an impartial review process. This process is as follows and will be further detailed in the forthcoming procedure:

- 1. HRA requests the referring providers contact the PACT reviewers to discuss the case in an effort to resolve issues, as the majority of changes to the determination can be addressed at this level.
- 2. If the referral source is not satisfied after this level review, they may contact the supervisor of the program to discuss the application further.
- 3. If the referral source is not satisfied at this level, they may request that the HRA Medical Director review the application to determine if the client is eligible or not for the final determination.

All PACT reviewers are licensed social workers with the required years of diverse experience and expertise working with individuals with mental illness, disabilities and/or homelessness.

CFTH: The review process outlined for conferencing is helpful, but is not truly impartial because it is exclusively overseen by the PACT unit and HRA. Furthermore, it is not open to clients. We recommend that the appeals process include staff (i.e., trained clinicians experienced in working with homeless individuals), outside PACT who can objectively review the application and determination. We also recommend that clients be provided with direct appeal rights.

Placement Process

(10) CFTH: Supportive housing providers should be able to accept applications from clients served by community providers for available units to ensure those not connected to shelters or a specific government program have equal access supportive housing.

HRA: Supportive Housing providers under the NY/NY III agreement are required to use the appropriate placement agency to fill the vacant units. HRA is the placement agency for many of the supportive housing populations. The HRA placement unit makes every effort to place clients that are not connected to shelters and coordinate with those service providers on the placement process.

CFTH: The response given does not address our primary concern and only mentions NY/NY III units, not NYC 15/15 units. The referral process and access to units, regardless of the agreements, should be expanded to providers other than DHS – particularly those who serve clients on the streets and in DHS shelters.

(11) CFTH: Providers should not be permitted to require any additional documentation in order to schedule a client interview beyond the PACT application documents and determination.

HRA: Additional documentation for interview should be limited to those needed to satisfy other funding source eligibility or leasing requirements and be compliant with all City, State, and Federal nondiscrimination laws. It would not serve clients well to attend interviews for placement in a site they will not qualify for based on funding or other leasing requirements.

CFTH: It has been our experience that documentation and other requirements outside of funding eligibility requirements – and in conflict with nondiscrimination laws – have been requested and amount to a separate eligibility process for individual sites. How does HRA ensure that providers only request additional documentation that is specifically needed to satisfy funding source eligibility, as opposed to more burdensome and unnecessary documentation that might be used for discriminatory purposes?

(12) CFTH: HRA should review each decision by a supportive housing provider in which the provider declines to serve an eligible applicant to ensure that applicants are not being unlawfully discriminated against on the basis of their disabilities. Housing readiness, severity of illness, or physical presentation at an interview should not disqualify an applicant who has been approved for the housing in question. Fair housing rules, including source of income discrimination laws, should be followed.

HRA: Each funding source determines the system of monitoring supportive housing rejections. Placement entities under the NY/NY III Agreement (DHS, HRA, ACS, and SOMH) have developed a general practice to refer 3 eligible clients for each vacancy in order to increase the probability of a client attending the interview and to expedite filling the vacancy. Clients are often escorted to the interview to assist with attendance. Clients that are rejected by the provider or do not attend the interview are referred again in order to provide them another opportunity for placement. Providers are expected to adhere to principles that require low barrier access and are expected to follow all program expectations and local, state and federal laws regarding rejections based on housing readiness, income source or severity of illness. CFTH: How does HRA communicate clients' rights to them, so they can determine what may constitute unlawful discrimination during the placement process and report any suspected violations of their rights to the appropriate authorities?

(13) CFTH: Clients and their referring providers should be informed in writing of an acceptance, denial, or other outcome of a supportive housing interview, and the process to appeal any adverse decision.

HRA: This request is outside HRA's area of responsibility and would be the responsibility of the contract agency to require this in the scope of services and monitor with the SH provider. SH providers inform the placement entities and referral sources of the outcome or status of the housing interviews in the PACT referral/response system. If the referral source and placement entity disagree with a clinical rejection reason, the decision is discussed with the SH provider to explore their reasons and any recommendations for placement or agree to interview the client again.

CFTH: Will this process for discussing disagreements about clinical rejection reasons remain the same now that CAPS implementation has begun?

Acceptance & Move-In Requirements

(14) CFTH: Clients should be given at least two full weeks' notice in advance of their move-in date, including all documents or fees required for move in. The provider should assist those who need help to secure any documentation that may be required.

HRA: Intake and admission processes are dictated and monitored by the contract agency that funds the supportive housing units. HRA has no control over these processes.

CFTH: While we appreciate that there are areas where HRA does not have direct oversight, we also recognize HRA's unique position in the supportive housing system as a whole and would like to further discuss ways in which we can work together to improve client experiences during acceptance and tenancy in supportive housing.

(15) CFTH: Clients should be provided with leases in their names between them and the landlord.

HRA: Congregate SH projects/sites have leases directly with the clients. Scatter site SH programs are able to provide either direct leases or sublease agreements to the clients. This is determined between the program and the funding source of each provider.

CFTH: Please see response to #14 above.

(16) CFTH: At apartment offer and again at lease signing clients should be provided with a statement of their rights as recipients of supportive housing, specific to the unit in question. Those rights should include, but not be limited to, meaningful access to case management assistance, mediation assistance with roommates, emergency contact numbers, information and rights in relationship to any payee arrangement, and their status and protections, if applicable, as a rent stabilized tenant or Section 8 recipient.

HRA: These procedures are dictated and monitored by the funding source with each SH provider. The process described above pertains to documents reviewed with the client on admission to the SH program. The documents are commonly referred to as the "client rights and responsibilities" and are a requirement for all mental health dedicated units funded by SOMH and DOHMH.

CFTH: Clients and advocates often have difficulty determining what the funding source is for a particular unit, and therefore it is unclear whether clients in all units funded by SOMH and DOHMH do in fact receive documentation of the "client rights and responsibilities." Please provide CFTH with a copy of the aforementioned requirements.

(17) CFTH: An ombudsman hotline should be established by HRA to receive and respond to complaints by clients having difficulty receiving the services they need in supportive housing.

HRA: Clients can call 311 to make complaints. All 311 calls are routed to appropriate city agency program area to resolve, including those related to HRA.

CFTH: With the new supportive housing units opening, is there a plan to create a separate ombudsman resource specifically for supportive housing tenants? Please explain HRA's process for resolving client complaints when notified of an issue through 311.

(18) CFTH: Each supportive housing contract should include a requirement that the owner of the property respond to requests for repairs and make any needed non-emergency repairs within 72 hours of the receipt of the complaint.

HRA: SH Providers are required by contract to assist in keeping apartments maintained at an appropriate standard and to conduct regular apartment inspections. If substandard conditions are detected, the provider is to assist with the repair including assisting the client to advocate for repairs with the landlord or contacting the landlord with the client's permission.

CFTH: Is there a timeframe established for making repairs when a complaint is received?

(19) CFTH: Each supportive housing contract should include a requirement that the owner of the property and any service provider under sub-contract follow a reasonable accommodations procedure that HRA should outline to protect tenants from facing eviction as a result of the very disabilities that qualified them for supportive housing in the first place.

HRA: These procedures are dictated and monitored by the funding source with each SH provider. Generally, SH providers are required by contract to make every effort to assist clients to meet the responsibilities of maintaining their apartment, including anything that puts the client at risk of eviction with their landlord.

CFTH: Please see response to #14 above.

Transitions & Eviction

(20) CFTH: Clients should be notified at move-in, and upon request prospectively, that if they wish to transition to another supportive housing provider, an application will be submitted by their current case manager and sent to providers for possible interview and move.

HRA: This is already in practice. If a client is no longer satisfied with their apartment or needs a change in location for whatever reason, the SH provider attempts to assist the client to move and complete a 2010e if the client chooses supportive housing.

CFTH: Are clients notified of this practice in writing at move-in?

(21) CFTH: If, at any time, a client is no longer eligible for the unit into which they initially moved – or the building or program is no longer appropriate as a result of an improvement in or the decline of a client's well-being - the agency with which the tenant is housed, should assist the client with an application to transition to another more appropriate program (or setting), taking into account the client's wishes and the goal of avoiding homelessness or unnecessary hospitalizations for the tenant.

HRA: These procedures are dictated and monitored by the funding source with each SH provider. All funding sources require client-centered service planning to develop goals and address the needs of the client in the community. If there is a need for additional support as a result of decline in a client's wellness, the SH provider is contracted to locate alternative/appropriate housing options as part of discharge planning. If a client has achieved self-sufficiency, they can work on finding alternative or more independent housing.

CFTH: Please see response to #14 above.

(22) CFTH: Tenants should be informed annually in writing about programs available to assist them with moving on from supportive housing into apartments in the community and how an application can be submitted and approved.

HRA: See above response on client-centered service planning.

CFTH: Please see response to #14 above.

(23) CFTH: For clients in violation of one or more provider or agency policy, attempts should be made to schedule at least two case conferences with the tenant in order to mediate the conflict and attempt to chart a path forward with the goal of preventing homelessness for the tenant. This could function like the escalated case conferences for HASA tenants.

HRA: These procedures are dictated and monitored by the funding source with each provider. Generally, SH providers are contracted to make every effort to assist clients to meet the responsibilities of maintaining the terms of their lease or program agreement. Case conferences are standard practice in the field of SH to resolve issues impacting the client's engagement with the program.

CFTH: Please see response to #14 above.

(24) CFTH: A reasonable accommodation process should be implemented to ensure that clients are not penalized as a result of their disabilities.

HRA: These procedures are dictated and monitored by the funding source with each SH provider. Similar to above answer about the "client rights and responsibilities," the client has a right to request a reasonable accommodation and to grieve any action taken by the SH provider and these grievances must be documented. Phone numbers are provided in the client rights to hotlines at the funding agency and at the Human Rights Commission if at any time the client feels their rights have been violated.

CFTH: Please see response to #14 above.

(25) CFTH: If a client falls behind in their rent, every effort should be made by the provider to connect the client with eviction prevention financial resources to preserve their tenancy, including assistance applying for a one-shot deal from HRA and referral to available legal resources. Providers should be required to document their efforts to help tenants avoid eviction and their review of payment records to ensure that tenants are properly credited for payments. Any attempts to evict tenants should be reviewed by HRA to ensure that tenants are not being illegally or unfairly forced out of their homes.

HRA: These procedures are dictated and monitored by the funding source with each SH provider. Generally, SH providers are required by contract to make every effort to assist clients to meet the responsibilities of maintaining their apartment, including anything that puts the client at risk of eviction with their landlord.

CFTH: Please see response to #14 above.

(26) CFTH: Prior to service of court documents, supportive housing providers should refer clients facing possible eviction to a legal services housing court attorney. All such clients have a right to counsel.

HRA: This is determined by the SH provider and is outside of HRA's area of responsibility.

CFTH: Please see response to #14 above.

(27) CFTH: Evictions, when they occur, should take place through the housing court process, including service of a 10-day notice and court papers, hiring of a marshal, if need be, etc. Self-help evictions and harassment should never be used to force tenants to leave supportive housing.

HRA: Each funding source monitors the discharge process of clients from supportive housing. Harassment or coercion of a client to leave a program would be considered a violation of their rights and the contract agency would require the SH provider to cease the unauthorized practice immediately.

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CFTH: Please see response to #14 above.

(28) CFTH: All discharge procedures associated with the supportive housing unit in question should be followed, including OMH Part 595 regulations.

HRA: OMH 595 regulations only apply to the licensed programs funded by SOMH. Discharge from SOMH funded Supported Housing model is delineated in the Supported Housing Guidelines. Each funding source has distinct discharge planning procedures.

CFTH: Please see response to #14 above.

Thank you again for your consideration of these suggestions. We look forward to discussing these items further with you at your earliest convenience.

Sincerely,

Tim Campbell Deputy Executive Director for Programs

Attachment 2: Correspondence with HRA regarding the Coordinated Assessment and Placement System (CAPS), from December 2017

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Robin Pagliuco, Director, Coordinated Entry Customized Assistance Services NYC Human Resources Administration 150 Greenwich Street, 30th Floor New York, NY 10007 Email: <u>pagliucor@hra.nyc.gov</u>

December 21, 2017

Dear Robin:

We write to express our concerns regarding the Coordinated Assessment and Placement System (CAPS) to be implemented beginning next month. We recognize that this coordinated entry system is being developed pursuant to a mandate from the U.S. Department of Housing and Urban Development, and that some requirements could present unintended consequences. As CAPS is developed and implemented in New York City, we want to summarize the primary concerns we have communicated to CAPS steering committee members throughout the past year of the planning process, in the hope that they will be addressed prior to implementation:

- 1) CAPS must be accessible to clients who are disengaged from government agencies. Many of the clients we serve are not engaged with shelters or other providers. The City must ensure that Coalition for the Homeless and other organizations maintain the current level of access to supportive housing resources and advocacy avenues for these vulnerable clients once CAPS is implemented. At the November 13th CAPS info session, we were informed that multi-system use by an applicant will be a key factor in the forthcoming vulnerability index. Recognizing that many of the most vulnerable clients may be disconnected from services altogether, the CAPS process must ensure that housing resources will remain available to clients who are disengaged from government agencies based on other eligibility criteria, such as chronicity. The vulnerability of such clients independent of multi-system use must be appropriately assessed based on the available facts, such as length of time homeless and degree of impairment. Social services providers such as Coalition for the Homeless, who regularly work with vulnerable disabled homeless clients who have previously refused to interact with government-associated services, should be able to submit documentation of their own contacts with such individuals in lieu of evidence of interactions with government systems.
- 2) <u>CAPS must guarantee an appeals process for clients.</u> Although the intent of CAPS is to identify the clients who are most vulnerable and pair them with housing options that best match their needs, errors are inevitable in any such assessment. It is essential that CAPS provide a clear and expedited appeals procedure for clients and their advocates when such errors are made or when the experiences and conditions of a client might not fit exactly into the vulnerability index framework.

In addition to these primary concerns, the following goals must also inform the CAPS process: CAPS must comply with Federal, State, and City laws prohibiting discrimination on the basis of disability; the CAPS development process and established procedures must be transparent, as should any evaluations and revisions to the system; and CAPS should be made available to runaway and homeless youth.

Because we are not a voting member of the NYC Coalition on the Continuum of Care, we are outside the formal review process. Nevertheless, we represent the interests of the homeless individuals and families most in need and should be informed in tandem with that process; given an opportunity to provide feedback on any forthcoming CAPS policies and procedures; and offered training on CAPS implementation. Therefore, we request that:

- 1) HRA send the draft policies and procedures to Coalition for the Homeless when the draft is simultaneously sent to Continuum of Care voting members on January 8th.
- Coalition for the Homeless be provided the opportunity to submit suggested amendments to the draft policies and procedures for review by the voting members before the Continuum of Care vote on January 19th.
- 3) HRA provide any relevant trainings to Coalition for the Homeless staff in advance of the January 23rd implementation date, and proactively offer updates and trainings before any subsequent components of CAPS are implemented.

We thank you for your consideration of these important issues as CAPS is implemented in the coming months. We are available to meet at your convenience to further our dialogue.

Best,

Giselle Routhier Policy Director

Tim Campbell Deputy Executive Director for Programs

Attachment 3: Draft supportive housing residents' rights bill

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DRAFT Supportive Housing Residents' Rights Bill

Be it enacted by the Council as follows: .

Title 26 [XX] of the administrative code of the city of New York is amended by adding a new chapter [XX] to read as follows:

§26-XX Definitions. When used in this chapter, unless a different meaning clearly appears from the context, the following terms shall mean and include:

Supportive housing. "Supportive housing" shall mean housing with accompanying support services geared towards assisting individuals and families who have experienced a period of homelessness, hospitalization, incarceration, or are aging out of foster care, maintain housing in the community.

Dwelling unit. "Dwelling" shall have the same meaning as in the Housing Maintenance Code § 27-2004.

Resident. "Resident" shall mean a person occupying, or intending to occupy, the dwelling unit for thirty consecutive days or more.

§26-XXX. Notice of Supportive Housing Residents' Rights. Every provider of supportive housing shall be required to provide every resident at the time of initial occupancy, and at each lease renewal, and upon request, a notice in a form approved by the Department, that informs the resident of the following:

a. Rent Stabilization Coverage. Whether the dwelling unit is subject to the Rent Stabilization Laws [NYC Admin. Code§ 26-504 et seq.] and, if the dwelling unit is not subject to the Rent Stabilization Laws, the reason it is exempt. If it is subject to the Rent Stabilization Laws, the notice shall also provide information concerning how to obtain a rent history from the Division of Housing and Community Renewal.

b. Receipt of Tax Abatements or Exemptions. Whether the dwelling unit is in a building that is in receipt of a tax exemption or abatement, including but not limited to abatements or exemptions pursuant to R.P.T.L. §§ 421-a, 421-g, or NYC Admin. Code § 11-243. If the building is in receipt of an exemption or abatement, the notice will include the abatement or exemption start and end dates.

c. Court Process. The resident's right to court process prior to eviction pursuant to R.P.A.P.L. Article 7.

d. Habitable Housing. The resident's right to enforce the Housing Maintenance Code [NYC Admin. Code § 27-2001 et seq.] including but not limited to provisions concerning lead paint hazards and heat and hot water, and information concerning how to report violations and contact information for the person or people responsible for maintaining Housing Maintenance Code standards and responding to emergencies. e. Freedom from Discrimination. The resident's right to be free from discrimination, the right to request reasonable accommodations, and information concerning reporting violations of the NYS and NYC Human Rights Laws [NYS HRL § 290 et seq. and Title 8 of the NYC Administrative Code].

f. Receipts for Payments Received. The resident's right to receipts for payments made in exchange for occupancy pursuant to R.P.L. § 235-e.

g. Roommates. The resident's right to have family and/or additional occupants pursuant to R.P.L. § 235-f.

h. Mental Hygiene Law. Whether the dwelling unit is subject to 14 N.Y.C.R.R. § 595 et seq. and the resident's rights under that section, including but not limited to 14 N.Y.C.R.R. § 595.10.

i. Harassment. The right to be free from harassment, a description of conduct presumed to be harassment pursuant to NYC Admin. Code § 27-2004, and the manner in which anti-harassment law can be enforced.

j. Regulatory Scheme. (i) Each funding stream used to provide social services, subsidize rents, or underwrite the development of the unit or property; (ii) the name(s) of the program(s) pursuant to which the resident is occupying the dwelling unit; (iii) the name of the agency administering the program and/or providing services or assistance pursuant (i) and (ii); (v) any applicable grievance, or equivalent, policy or procedure to register and hear resident complaints; (iv) any applicable regulations; (v) contact information for a responsible person at the administering agency; (vi) the total rent, resident rent, and agency rent amounts; and (vii) the manner in which the rent will be paid.

§26-XXX.Eviction Proceedings. Any provider that is subject to this chapter that is initiating an eviction proceeding pursuant to Article 7 of the R.P.A.P.L., shall plead compliance with this chapter pursuant to R.P.A.P.L. § 741.

§26-XXX. Penalties. (a) Any owner who violates the provisions of XX shall be liable for a civil penalty of two hundred fifty dollars. For purposes of this section, each dwelling unit for which an owner fails to provide the notice required pursuant to XX of this chapter shall be deemed a separate violation.

(b) The Department shall receive, investigate, and respond to complaints concerning violations of this section. All complaints, responses, and violations issued by the Department will be posted on the Department's webpage and will include the identity of the supportive housing provider, the date of complaint, results and date of conclusion of any investigation, and the number and amount of penalties assessed.

FOR THE RECORD



New York City Metro

Testimony of Matt Kudish, LMSW, MPA Executive Director NAMI-NYC Metro

Re: Intro 147

Hon. Steven Levin Committee on General Welfare New York City Council April 24 2018 Thank you Chair Levin and the members of the General Welfare Committee for holding this important oversight hearing on supportive housing and to discuss Intro 147. My name is Matt Kudish and I am the Executive Director of the National Alliance on Mental Illness of New York City (NAMI-NYC Metro).

About NAMI-NYC

The National Alliance on Mental Illness of New York City (NAMI-NYC Metro) is a grassroots organization that provides support, education, and advocacy for families and individuals impacted by mental illness. As one of the largest affiliates of the National Alliance on Mental Illness (NAMI), we work collaboratively with our state and national affiliates, and with other stakeholders in the community, to educate the public, advocate for legislation, improve the mental health system, and end discrimination.

NAMI-NYC Metro offers a telephone Helpline that provides information, education, and support to anyone in NYC impacted by mental illness, and is the best way to learn more about our other programs and services. These include peer-led, evidence-based or evidence-informed classes that educate individuals and family members about mental illness, teach skills to enhance communication and manage crises, and provide strategies to embrace and support the concept of recovery; nearly thirty monthly support and socialization groups; and public education and anti-stigma events and campaigns.

The Importance of Supportive Housing

Supportive housing functions as a major lifeline for many of the most vulnerable individuals struggling with mental illness in New York City. The New York/New York agreements alone have provided thousands of homes for individuals struggling with mental illness, many of whom also struggle with cooccurring substance use disorders. The Mayor's promise to build 15,000 more units of supportive housing only serves to expand the resources available to some of the most vulnerable among us.

As is well known, many of the individuals eligible for supportive housing are often the same individuals surviving the institutional circuit – cycling from jail, to the emergency room, to psychiatric hospitalization, to shelters and so on. Supportive housing provides a place where these individuals can access a door to close and to lock, and begin to experience a sense of stability – decreasing ER visits, and increasing their access to stable treatment. This stability can be a decisive first step to being able to manage their mental health needs in an environment where they are encouraged and accompanied by competent and caring service providers.

> NAMI-NYC Metro 505 8th Avenue, Suite 1103, New York, NY 10018 www.naminyc.org

Many NAMI-NYC participants live in or have applied for supportive housing. We know first-hand how critical this far-too-scarce resource is in the lives of thousands of New Yorkers. And we also know how terrifying the consequences of ongoing homelessness are for those experiencing mental illness. Supportive housing has been shown to decrease emergency room visits, decrease hospital stays, decrease incarceration, and decrease shelter stays. Supportive housing has also been shown to increase social networks, improve individuals' mental health, improve overall quality of life and allow for increased incomes.¹ There is simply no question how important supportive housing is for those experiencing serious mental illness.

The Need for Intro 147

The strengths of supportive housing lead to the same reasons why Intro 147 is so important, especially right now when another 15,000 units of supportive housing are on their way. Unfortunately, we know how harmful "creaming" or "cherry-picking" can be on the lives of those living on the margins, particularly those struggling with serious and persistent mental illness, and we know it occurs in the supportive housing interviewing process. Our participants have lived the experience of being passed over for a home because they were seen as "lacking insight," or having used substances, or being told they "need a higher level of care," even after being assessed and deemed eligible by HRA for particular services. Supportive housing providers interviewing applicants sometimes make snap judgments with severe consequences, and since there's always another applicant waiting, they may not understand how much impact their judgments have.

Creaming in supportive housing is antithetical to what that model is intended to accomplish and leaves some of our most vulnerable, to put it simply, even more vulnerable – left to continued homelessness and all that comes with it. This is why we fully support this bill, which will help facilitate transparency and, we hope, ultimately help ensure that all eligible applicants are treated fairly.

Intro 147 does not intervene in the current supportive housing application process. Rather, the bill requires that the Department of Social Services (DSS) provide an annual report that makes transparent who is getting into supportive housing and who is not, and why those who are denied are being denied. There is simply no reason we *shouldn't* have this data – having it can only ensure

¹ A useful literature review has been produced by the Corporation for Supportive Housing (CSH). See: <u>http://www.csh.org/wp-content/uploads/2017/04/CSH-Lit-Review-All-Papers.pdf</u>

that individuals are treated with the care and respect they need, across the board.

Data obtained through a Freedom of Information Law (FOIL) request by Legal Services shows just how much detail is given when applicants are denied for housing – a lot of information is provided into the thinking of providers when they decide to reject applicants. Unfortunately, that data included far too many examples of individuals turned away from housing due to symptoms of their mental illness. Intro 147 would ensure that when this happens the City Council has a chance to be made aware of it through an annual report of rejection reasoning's. This annual report will provide information that could help prevent this type of discrimination from occurring in the future.

Adding Creaming Into the Stigma Discussion

A decisive public conversation has begun about the grave problems of stigmatizing mental illness. It is our hope that with passage of Intro 147 we can begin a more public discussion of the problems with creaming, and the issues of stigma that inherently accompany it. At NAMI our participants struggle with this first hand. Creaming – which relies on a vast number of assumptions and often stigmas about those experiencing mental illness – is a significant barrier faced by those struggling the most. This bill can be one important step toward deepening the public discussion around mental illness and stigma, particularly as it intersects with poverty, homelessness, and racism.

Conclusion

While I regret not being able to be able to testify in person today, I would be happy to discuss further any issues raised in this testimony. I can be reached at 212-684-3365 or at mkudish@naminyc.org.

NAMI-NYC Metro 505 8th Avenue, Suite 1103, New York, NY 10018 www.naminyc.org

FOR THE RECORD

Testimony of Cathy Kim Program Director, Most Vulnerable Populations Enterprise Community Partners, Inc.

To the New York City Council Committee on General Welfare Oversight hearing on the NYC 15/15 Initiative

April 24, 2018

My name is Cathy Kim and I lead the Vulnerable Populations program for Enterprise Community Partners, a nonprofit organization that has worked to create and preserve affordable housing, including supportive housing, here and nationwide for over 30 years. On behalf of Enterprise, thank you, Chair Levin and the Committee on General Welfare for your dedication to addressing family homelessness, promoting supportive housing, and ensuring that social safety nets exist for all New Yorkers.

The New York City 15/15 Initiative is a historic commitment by the city to invest in 15,000 units of permanent supportive housing over 15 years. This initiative funds a proven solution to homelessness, incorporating social services into permanently affordable housing for vulnerable individuals and families. NYC 15/15 is a critical component to ending the city's homelessness crisis and we commend the City for the progress underway, as demonstrated through the 1,400 NYC 15/15 units developed since 2015. We would also like to commend the City for the sustainable financial model it developed for the congregate, single-site residence portion of the NYC 15/15 program. Both the rental assistance and service contracts allocate the resources and funding necessary to help homeless households stabilizes their lives.

The scattered site portion of the NYC 15/15 program, however, face challenges that must be addressed. First, many landlords are losing interest in renting units to the NYC 15/15 scattered site program in the face of increasing rents and loss of rent stabilized units. Second, service rates for contracts established under earlier New York/New York agreements are dangerously low. Low service rates jeopardize the ability of providers to deliver the necessary services that make supportive housing effective, making it near impossible to adequately pay and retain staff and, ultimately, to maintain these existing supportive units. Eventually, when a provider can no longer deliver services due to increased rents and low service rates, the service contract is not renewed, leaving the supportive housing provider searching for new units, which also creates competition for the NYC 15/15 scattered site unit program. All of this is cause for the concern that the City will not be able to fulfill its scattered site production commitments, or 500 units per year for the next 15 years.

Another area of concern for Enterprise is the allocation of the NYC 15/15 units. Most of the NYC 15/15 units are dedicated to chronically homeless individuals with a small allocation dedicated to families with children. We are concerned about this allocation given that the 75 percent of those who are homeless are members of a family with children. Today, over 23,000 children, coming from nearly 15,000 families across the city's shelter system, will sleep in a shelter on any given night while only 2,640 NYC 15/15 units are dedicated to families with children. We urgently need more housing and service solutions that are appropriate for *families with children* who are at risk of or are experiencing homelessness. One solution that we ask the city to consider is a service-enriched housing model, which integrates service coordination into the operation and management of affordable rental housing for special-needs and/or low-income residents. Service-enriched housing does not have the same eligibility requirements as NYC 15/15 – namely that it does not require a clinical diagnosis of the head of household – and is designed to provide long-term, trauma-informed support for both parents and their children. We feel that a service-enriched housing model could serve as a great complement to the supportive housing model.

Finally, while Enterprise is supportive of the framework presented in <u>Intro 147</u>, we strongly believe that the legislation should not duplicate the efforts of the City's Coordinated Assessment and Placement System (CAPS). CAPS is currently being developed and implemented by the NYC Human Resources Administration (HRA) and will compile and analyze data similar to that noted in Intro 147 for both formal and informal reviews of the program. We recommend that CAPS is given the time to be fully implemented before moving forward with passing legislation along the lines of Intro 147.

New York City has demonstrated its commitment to supportive housing as a solution to homelessness. We must do more, however, to ensure that service providers receive adequate support to own and operate supportive housing. And we as a City must consider other complementary solutions like service-enriched housing that address the needs of families with children that do not qualify for the City's supply of supportive housing. We look forward to working with the city as they continue to implement NYC 15/15 and work to ensure that all New Yorkers have the safety and security that an affordable home provides.

<u>Should Urban Pathways' Donors Fund its Management's</u> <u>Wallets or Military Veterans' Efforts to become</u> Self-Sufficient & Fire

Banks of HRA?

Key facts:

1. New York State Social Services Law 18 NYCRR §352.23(a) contains the following terms:

"Resources shall be so utilized as to eliminate or reduce the need for assistance, rehabilitate the client and conserve public funds through assignment and recovery."

HRA has been flagrantly and consistently been violating this law partly because of fraud that Urban has been committing since 2016 against me and others that has harmed us and other taxpayers and voters.

- 2. By clicking on the following links to news articles, you can read about violence related to people residing in one of Urban's facilities located at 1974 Hughes Avenue in the Bronx near where I reside that raises the question of how atrociously has Urban been operating its facilities that may have caused enormous stress to people and led them to engage in acts of violence inside and near them that jeopardizes the safety of unsuspecting and innocent victims unaffiliated with Urban:
 - a. https://www.nytimes.com/2017/11/13/nyregion/police-shoot-kill-bronx-man.html
 - b. <u>http://www.nydailynews.com/new-york/bronx/man-70-stabbed-neck-fight-bronx-article-1.2851670</u>
 - This article that dates back to 11/1/16 confirms that Urban's CEO Frederick Shack blatantly lied by claiming that the violence that occurred within one of its facilities that was discussed in that article was unprecedented in Urban's facilities.

- Long before those articles were written, the New York Daily News published the following two key articles about HRA:
 - a. "Cops Nab Man Suspected in Homeless Shelter Murder" (4/18/16). The following is

 a link to that article that was written by Rocco Parascandola and Graham Rayman:

http://www.nydailynews.com/new-york/nyc-crime/cobs-nab-man-suspectedhomeless-shelter-murder-article-1.2605639

That article discussed a murder that occurred in HRA's Bellevue Men's homeless shelter in April of 2016 after I told Mr. Banks face-to-face on 3/1/16 that my iPhone was stolen in February of 2016 within that shelter due to inadequate security because no locks were installed on the doors to rooms people slept in within that facility and no security cameras were installed in the hallways outside of those rooms to track down people who commit crimes in it. At the time I told Mr. Banks that, he told me that security in HRA's shelters was being subjected to a 90-day review by the NYPD. After the murder in that shelter in April of 2016, the probable reason why the murderer was able to escape from it after committing the murder was due to the ongoing lack of security cameras and randomized roving patrols by guards in its hallways to deter and immediately respond to acts of crime within it.

b. "Exclusive: City HRA Fails to Comply with Own Procedures: Analysis" (5/8/14).

The following is a link to that article that was written by Corinne Lestch:

http://www.nydailynews.com/new-york/exclusive-city-hra-fails-comply-procedures-analysis-article-1.1783844

That article reported the results of an audit that was conducted by a legal services organization named Urban Justice about how HRA conducts its operations and the article's headline perfectly describes what it's and how HRA continues to conduct its operations about.

- After those articles were written, the New York Daily News published the following two key articles about HRA:
 - a. "Violence Redefined at NYC Homeless Shelters Keeping Stats Down" (2/17/18). The following is a link to that article that was written by Greg Smith:

http://www.nydailynews.com/new-york/violence-redefined-nyc-homelessshelters-keeping-stats-article-1.3826801

That excellent article reported the fact that HRA fraudulently colluded with a New York State government agency named the Office of Temporary and Disability Assistance ("OTDA") to conceal information about serious security incidents that occur in shelters that HRA and its business partners operate that are funded by taxpayers and that HRA and its partners have required by applicable New York State Law (18 NYCRR § 352.38) to transparently and promptly report to OTDA. In regards to this and how the NYPD manufactures crime statistics in a way that rivals the creativity and imagination of kids who are given Lego blocks to <u>invent</u> things, it seems that HRA, OTDA, and the NYPD attended the same statistics and ethics classes before burning or defecating on the Ten Commandments.

b. "Homeless Shelter Covers Up Assaults, Drug Deals, Theft: Suit" (4/19/18). The following is a link to that article that was written by Greg Smith:

 $\frac{http://www.nydailynews.com/new-york/homeless-shelter-covers-assaults-drug-deals-theft-suit-article-1.3944250$

That additional superb article by Mr. Smith concerns the lawsuit assigned the index number of 153406/2018 that Daniel P. Kennedy filed on 4/13/18 with the New York

State Supreme Court in Manhattan. The chief claims against HRA (I refer to HRA instead of DHS because DHS is part of HRA) in that lawsuit is that HRA illegally retaliated against Mr. Kennedy by firing him in response to protected whistleblowing activity he was engaged in against HRA by objecting to pressure he was subjected to by HRA personnel to conceal or otherwise underreport serious security incidents to other regulatory agencies for incidents that occurred in HRA shelters.

- 5. On 9/15/16, an administrative law judge assigned to OTDA issued a decision entirely in my favor in regards to government benefits against HRA because of fraud and negligence by Urban and HRA related to my housing. Since then, HRA has refused to fully comply with that decision and OTDA has fraudulently colluded with HRA by refusing to enforce its terms and effectively prevent from continuing to kick HRA's ASS on the merits in legal proceedings OTDA arranges. Due to these circumstances, I filed a separate lawsuit on 1/17/17 against HRA with the New York State Supreme Court in Manhattan that is assigned the index number of 100054/2017 to enforce OTDA's 9/15/16 decision and act in OTDA's place for other claims I have against HRA. In that sealed lawsuit, there have been repeated acts of flagrant judicial misconduct and fraud by HRA and I intend to file papers in it within a few days to re-open it to both viciously and legally kick HRA's ass further while doing the same to other members of the Mayor's administration in the context of that lawsuit and a related federal lawsuit that will soon be filed.
- 6. On 8/1/17 and in her capacity as a Senior Deputy General Counsel for HRA, Ann Marie Scalia committed yet another act of wire fraud in violation of the federal criminal statute of 18 U.S.C. §1343 in furtherance of a fraudulent scheme by HRA when she sent me an e-mail message at 5:58 pm from the e-mail address of <u>scaliaa@hra.nyc.gov</u> that contained a binding

and fully-enforceable agreement that she issued to me on HRA's behalf without any qualifying remarks, disclaimer, or caveat in which she ended it by stating the following before she and others and HRA illegally and substantially disavowed that agreement by refusing to fully comply with its terms:

"We will continue to try to address your concerns and assist you <u>in any way possible</u>." When she issued that agreement to me, she did so in response to a conversation that I had on 7/18/17 with HRA's Commissioner and the Mayor during the public resource fair meeting that the Mayor held in Kew Gardens in Queens, where I talked to the Mayor in front of Gloria Pazmino of Politico, Michael Gartland while he was a reporter for the New York Post, and other alleged journalists that reprehensibly chose to conceal that conversation from the public that facilitated voter fraud and voter suppression that the Mayor, NYPD, Mayor's administration, and New York City Council members engaged in during last year's New York City government elections. The following is a link to a video recording of that meeting that the Mayor's office provided to me at 8:38 am on 11/21/17 in an e-mail message it sent to me from the e-mail address of <u>openrecords@records.nyc.gov</u> in response to a FOIL demand (ID #: FOIL-2017-002-00687) that it continues to fraudulently conceal:

https://drive.google.com/file/d/1Mx1q3XQfZgJaEBgUQj89BpqzSboo9xKw/view

My conversation with the Mayor during that meeting lasted for roughly 1 minute and 52 seconds and begins at roughly the 1 hour, 8 minute, and 35 second mark from the beginning of that recording.

- <u>\$261,589</u> is the total compensation listed for Urban's CEO Frederick Shack in its 2015 IRS Form 990 filing while Urban has claimed to be a non-profit.
- 8. <u>\$134,951</u> is the total compensation listed for Urban's Lisa Lombardi in that 2015 filing.

9. Since 2011, Urban's IRS filings have shown that roughly 45% of its annual expenses have been related to compensation while it has claimed to be a non-profit. The following is a link to the ProPublica report confirming this:

https://projects.propublica.org/nonprofits/organizations/132933675

10. By opening the PDF file stored on the Internet at the following address and turning to page 8, you can read about a plan HRA announced on 1/26/16 to give Urban more than <u>\$1.85</u>
<u>Million</u> from taxpayers to a) acquire the building in which I and other military veterans reside and b) serve as its landlord:

http://www.nyc.gov/html/dcas/downloads/pdf/cityrecord/cityrecord-01-27-16.pdf

11. By clicking on the following link, you can read about an additional or modified plan HRA had in March of 2016 to give Urban more than <u>\$2.77 Million</u> from taxpayers in relation to the building in which I and other military veterans reside:

https://a856-cityrecord.nyc.gov/RequestDetail/20160310105

- 12. By clicking on the following link, you can read about the public hearing where I testified against Urban in relation to a proposal the dumbasses at HRA concocted to give Urban more than <u>\$10.6 Million</u> more from taxpayers supposedly to help it operate a building in Manhattan, but that it may unsurprisingly instead choose to partly embezzle and kickback to government officials that may live at 48 Sherman Street in Brooklyn to take it to the Banks: https://a856-cityrecord.nyc.gov/RequestDetail/20180403107
- 13. By searching ACRIS' web site at the following address, you can obtain a copy of the mortgage agreement that was issued in 2016 in the amount of <u>\$3.15 Million</u> for the building located at 802 Fairmount Place in the Bronx:

http://a836-acris.nyc.gov/CP/

Upon reviewing that mortgage, you can realize that the borrower has been in violation of its terms by not having repairs made in it in a proper, complete, timely manner in compliance with all applicable laws that include having permits issued before repairs are made and having that building validly registered with HPD.

14. By searching HPD's web site at the following address, it will show that the building located at 802 Fairmount Place in the Bronx hasn't been validly registered with it since 9/1/17 while Urban appears to have been illegally collecting rents in violation of New York Multiple

Dwelling Law § 325 for those who reside in that building:

http://www1.nyc.gov/site/hpd/index.page

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- 15. By clicking on the following link, you can read about an event that Urban has been preparing to hold on 5/10/18 at the Grand Hyatt by Grand Central that is likely to be a fundraiser: http://www.urbanpathways.org/2018-gala-1/
- 16. According to the U.S. Department of Housing and Urban Development ("HUD") that

Governor Cuomo used to run while the Mayor was essentially his "Captain", the term

"permanent housing" is defined as follows:

"Permanent housing is defined as housing in which the resident has a lease for a term of at least one year, which is renewable by the tenant and which may be terminated by the landlord for cause."

Source: Page 7 in the following Microsoft Word document on HUD's web site at the

following Internet address:

https://archives.hud.gov/funding/2003/forms/40110-b.doc

17. "Permanent housing" is nearly identically defined in the following way on the HUD

Exchange that is referenced as an official source of information in HRA's Turning the Tide

on Homelessness report:

"Permanent housing is defined as housing where tenants have leases that confer the full rights, responsibilities, and legal protections under Federal, state, and local housing laws."

The preceding definition appears on page 2 within the following PDF file that is stored on the web site of the HUD Exchange located at the following address:

https://www.hudexchange.info/resources/documents/Housing-First-Permanent-Supportive-Housing-Brief.pdf

HRA's "Turning the Tide on Homelessness" report that is a load of BS is available on the Internet at the following address and contains information in the footnotes on page 14 about the HUD Exchange just discussed:

http://www1.nyc.gov/assets/dhs/downloads/pdf/turning-the-tide-on-homelessness.pdf

- 18. Despite the preceding facts and that fact that I have never had a valid apartment lease agreement for the apartment in which I reside due to fraud and negligence by both Urban and HRA that occurred after I signed that lease on 2/16/16 in HRA's offices with Urban's Lisa Lombardi and that I began reporting to HRA on 3/10/16 after discovering that fraud on 3/7/16, HRA has steadfastly and fraudulently claimed that I have been residing in permanent housing since March of 2016 that is indisputably a lie and one that enabled me to have been viciously assaulted on 7/2/16.
- 19. Since I've testified truthfully and in detail at previous New York City Council meetings against Urban and HRA partly about the facts that a) I was viciously assaulted on 7/2/16 by my former roommate Ronald Sullivan due to fraud, forgery, and negligence by Urban that HRA negligently condoned, b) that 7/2/16 assault was foreseeable and preventable because Mr. Sullivan tried to previously commit that assault in the same exact location on 5/12/16 and was physically restrained by one or Urban's personnel then, and c) that 7/2/16 assault

caused me to suffer a concussion I was diagnosed with on 7/30/16 that caused me to experience memory loss and other substantial problems that prevented me from being able to perform well in a job interview on 8/18/16 for a job that would have paid me \$450 daily, I urge you to click on the following link that is to a video recording of testimony I gave on 6/19/17 to the Committee on Oversight and Investigations:

https://councilnyc.viebit.com/player.php?hash=mpfP5DcsXgf5

My testimony in that video begins at the 35-minute and 18-second mark from its beginning.

20. The testimony that I gave back then and since against Urban and HRA raise the following major, obvious, and very disturbing question:

Why haven't HRA, the New York City Council, the Mayor's office, and other government regulators like the New York City Department of Investigations, Bronx District Attorney's office, New York State Attorney General's office gotten off their asses to do their jobs by holding HRA, Urban, and HRA's other business partners, and housing court judges accountable for illegal acts they committed that caused me irreparable harm?

21. After Mr. Sullivan tried to assault me on 5/12/16, Urban wrongfully refused to grant a request I reasonably made to its personnel on 5/12/16 and on 5/19/16 while talking with Urban's Lisa Lombardi and Ron Abad by phone to have it immediately evict Mr. Sullivan from the apartment I was forced to share with him because of Urban's bait-and-switch fraud and forgery that illegally prevented me from having the private apartment for which I signed a binding apartment lease on 2/16/16. The requests I made have him evicted on 5/12/16 and 5/19/16 were entirely reasonable because he had attempted to assault me on 5/12/16 in the apartment I shared with him. Also, after I was assaulted on 7/2/16, Kishea Paulemont of

Urban sent a letter to me dated 8/4/16 that indicated that courtesy copies of it had been sent to HRA's Commissioner, Urban's CEO, Urban's Lisa Lombardi, and Ron Abad. That letter was sent after Ms. Lombardi told me on 5/19/16 that Urban didn't have anywhere else to house Mr. Sullivan when I ordered her to have him evicted from where I reside for security reasons. Also, that letter was sent after I asked Mr. Abad on 5/19/16 how far problems between Mr. Sullivan and I needed to escalate before Urban would take appropriate corrective action and he didn't answer that question. In Urban's 8/4/16 letter, it fraudulently claimed the following:

- a. I had recently raised concerns to it.
- b. It was concerned about my safety.
- c. It could not help me without meeting with me.
- d. The only way we can assist with a resolution is to meet.
- 22. After I was assaulted on 7/2/16 in the building in which I reside, someone who also lived in it at that time told me on 7/3/16 that my roommate who had assaulted me made incriminating remarks about having committed that assault as he fled from my building on 7/2/16 that I shared with the NYPD and Bronx D.A.'s office shortly thereafter. However, the Bronx D.A.'s office never used the testimony from that witness during the criminal assault trial in February of 2017 of Ronald Sullivan (my former mentally unstable roommate who committed the 7/2/16 assault) that was presided over by Bronx Criminal Court Judge Cori Weston, who our shitty Mayor Bill de Blasio appointed. During Mr. Sullivan's trial, Ms. Weston fraudulently refused to allow pertinent security logs to be used as evidence in that case that strongly suggested that Mr. Sullivan assaulted me on 7/2/16 in the building in which I reside, the Bronx D.A.'s office didn't formally appeal her decision to fraudulently exclude

those security logs, and the Bronx D.A.'s office didn't file all of the applicable criminal charges against Mr. Sullivan that it should have and that the applicable evidence substantiated.

- 23. While talking to Mr. Banks on 4/18/18 at the Mayor's public town hall meeting, he refused to answer a question I asked him to be told by HRA who provides oversight of Urban with respect to the building in which I reside that I previously asked to Ann Marie Scalia of HRA on 4/9/18 during a phone call I legally recorded on video and that she refused to answer. As I asked Mr. Banks that and other questions lawfully on 4/18/18, someone who serves as his bodyguard illegally interfered with my First Amendment and Fourteenth Amendment rights, my rights pursuant to New York State's Open Meetings Law, and the federal and New York State criminal statutes of 18 U.S.C. § 245(b)(5), 18 U.S.C. § 241, NYPL § 175.25, and NYPL § 240.26 that Mr. Banks illegally condoned. Prior to 4/18/18, that bodyguard similarly violated my rights and these laws in this way as I talked with Mr. Banks on 3/28/18, 12/14/18, and 7/19/18 at additional public meetings that the Mayor held. During several of those conversations with Mr. Banks, I legally recorded them electronically for use as evidence that should help Mr. Banks, his bodyguard, Pinny Ringel of the Mayor's Community Affairs Unit who also violated my rights and the preceding laws on 3/28/18 and additional dates have a long time to spend in prison.
- 24. When I first truthfully talked about Mr. Banks being a fraud with the Mayor on 3/15/17 at his public town hall meeting with Corey Johnson and the New York City Council during one of its public hearings on or about 4/20/17 with Mr. Levin, I was extraordinarily discreet and enormously pulled my punches against HRA and Urban by not talking about the fact that I had been viciously assaulted on 7/2/16 due to HRA and Urban's fraud and negligence. After

I stopped being discreet and talked with a) Mr. Banks on 7/18/17 and 12/14/17 and b) the Mayor on 1/8/18 about my having been assaulted, I never got an apology from them nor Urban for having been assaulted and they never even expressed to me that they were sorry that it had happened to me. Instead, Mr. Banks fraudulently and reprehensibly had the audacity to tell me on 12/14/17 that HRA isn't responsible for crime while he was referring to crime that occurs in its facilities and shelters its business partners operate with funding it provides to them from taxpayers. Back then, I also told Mr. Banks that other people have been assaulted in the building in which I reside that prompted one of those victims who happened to have been a key witness in the assault case against Mr. Sullivan to have fled to someplace like Albany due to the absence of proper oversight of HRA and its business partners that provide housing. On 4/18/18, someone who appeared to be a retired member of the FDNY and sat directly in front of me at the Mayor's town hall in the Bronx that the grandstanding and NYPD puppet Vanessa Gibson moderated raised the issue of a lack of proper oversight of HRA and its partners before the Mayor, HPD's Commissioner, and Mr. Banks disingenuously responded to his remarks about nonexistent oversight.

25. When I talked with Mr. Banks on 12/14/17, that chat was after he blatantly and obviously lied on 12/16/16 during a meeting that was held at the New York Law School that I attended and was recorded on video by that school. The following is a link to that video recording that shows me starting to ask questions about legal representation to Mr. Banks at a point that is 48 minutes and 39 seconds from the beginning of that recording:

http://nyls.mediasite.com/mediasite/Plav/c3c2c01b7c344c77996ce8fa975cfab71d During that meeting, Mr. Banks lied by stating the following:

a. He and the Mayor own New York City's homeless problem.

- b. "The things we can control, we're very focused on trying to control."
- c. HRA's legal services partners must decide on the merits as to whether to provide legal assistance or legal representation to those HRA refers to them for such assistance and representation. He made this remark in response to a question I asked him:
 - While he was married to Jean Schneider, who is the Supervising Judge of New York City's Housing Courts citywide,
 - ii. After I first met him on 3/1/16 at the Yale Club in Manhattan near Grand Central while New York State Chief Judge Janet DiFiore was in the room and I asked Mr. Banks for help with getting legal representation from HRA's legal services partners through its Office of Civil Justice that is run by Jordan Dressler.
 - iii. Long before Mr. Dressler was a member of the same "Special Commission on the Future of the New York City Housing Court" that New York State Chief Judge Janet DiFiore established while Queens Housing Court Judge Clifton Nembhard was also on that commission at the same time and after I told Mr. Banks that Mr. Nembhard caused me to be illegally evicted from my apartment on 10/22/15 largely by having illegally deprived me of my right to present evidence in court cases to which he was assigned that were against my landlord after he and 2 court officers visited my apartment on 7/10/15 and conducted a fraudulent inspection in it while Judge Nembhard allowed those court officers to illegally coerce me to end an audio recording I was making at that time for use as evidence on appeal about how they were conducting that

inspection in my apartment instead of a courthouse. Page 32 in the following report that commission issued in January of 2018 confirms that Mr. Dressler was part of that same commission with Mr. Nembhard long after I gave Mr. Banks roughly 6 court transcripts on 3/1/16 to independently prove the claims I made to him against Judge Nembhard and another housing judge far worse than Queens Housing Court Judge Terrence O'Connor who the New York State Commission on Judicial Conduct recommended on 3/30/18 to be fired as a judge. The following is a copy of the report that commission issued on 3/30/18 that contains that determination against Mr. O'Connor and was issued long after I previously filed a valid complaint against him and Judge Nembhard, New York City Housing Judge Inez Hoyos, and others that commission refused to take appropriate corrective action about that have allowed those assholes to violate the rights of others and cause them irreparable harm to prove that "Tenants Stand Alone in Housing Court" and this council, the Mayor, Mr. Banks, New York State's Attorney General, and Governor Cuomo lied by expressing remarks to the contrary:

https://assets.documentcloud.org/documents/4436329/O-Connor-Terrence-C-2018-03-30-DET.pdf

iv. The same New York State Commission on Judicial Conduct just discussed issued in 2018 Annual Report in which it wrote the following on page 10 about the number of complaints that were filed against judges throughout New York State in 2017 while also including charts in it that confirm it egregiously rarely disciplines judges and typically gives them nothing more than a slap on the wrist when it bothers to "discipline" them:

"Last year, 2,143 new complaints were received, the highest total ever."

The following is a link to that report:

http://www.scjc.state.ny.us/Publications/AnnualReports/nyscjc.2018Annualreport.pdf

Closing Remarks:

1. Urban illegally committed fraud and forgery with respect to binding and fully-enforceable apartment lease agreements that were signed on 2/16/16 in front of witnesses in HRA's offices located at 33 Beaver Street in Manhattan with Lisa Lombardi of Urban. Urban did so by subjecting people who signed such lease agreements on that date at that location to an illegal bait-and-switch fraud by substantially changing the terms of the lease agreements that were signed without authorization from the residents who signed them with Urban. I have been among the chief victims of this scheme that HRA's Commissioner has been aware of and illegally condoned because this scheme enabled me to be viciously assaulted on 7/2/16 that caused me a concussion that in turn cost me the ability to be adequately considered for a job that would have paid me \$450 daily. Thanks to egregious fraud and negligence by Urban, HRA, the Bronx D.A.'s office, NYPD, Bronx Criminal Court Judge Cori Weston, and Mayor, there is a good chance that you may not see your kids after taking them to school because it appears that Ronald Sullivan now works for the New York City Department of Education. Did I mention that he proved to be mentally unstable and a time-bomb on 7/2/16 by punching me more than 15 times on my head by my left temple without provocation and after he tried to assault me in that same location on 5/12/16, but was physically restrained by Thomas Fair who worked for Urban then? How well will your kids take 15 punches to their head from Mr. Sullivan while he is roughly 6 foot 2 in height and seems to weigh about 230

Page 15 of 16

pounds? Why not call him at 917-771-9842 to find out, unless he changed his phone number. Otherwise, why not post "**Please don't kill my kids**" on his Facebook page here? <u>https://www.facebook.com/ronald.sullivan.351</u>

Information confirming fraud by Urban discovered on 3/7/16 was promptly reported to HRA and Ben Kallos prior to again being reported to DOI & Rafael Salamanca, Jr. long afterwards without appropriate corrective action being taken:

From HRA's own records:

| 3/16/2016 | CA Application Interview | Mensah,R | He also provided a lease stating in apartment by himself but when he moved he found out there was someone else sharing the apartment with him, and the first lease he signed was change by landlord. He also stated heAs per management change address and mailing address only. |
|-----------|--------------------------------|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3/16/2016 | Make Case Comment | Harris, V | He also provided a lease stating this is where he moved to but stated he was surpose to be moving in apartment by himself but when he moved he found out there was someone else sharing the apartment with him. and the first lease he signed was change by landlord. |

3/10/16 e-mail to Ben Kallos and his staff:

Subject: Re: Legal Resources Date: March 10, 2016 at 2:48:17 PM EST To: "Lim, Sooji" <SLim@council.nyc.gov>

Cc: "Lightbody, Debbie" <DLightbody@council.nyc.gov>, Ben Kallos <bkallos@benkallos.com>, jtowsen@council.nyc.gov

Absolutely.

Also, how can the S70 Million legal fund administered by HRA be put to use to provide me with pro bono legal counsel for litigation involving the following issues, since the roughly 15 legal assistance groups I've contacted for assistance have declined to provide it?

a) frivolous lawsuits by Queens landlord

b) wage-theft, worker misclassification, fraud, and retaliation by Credit Suisse and NTT Data, Inc.

c) Fraud, illegal change to original lease terms, and breach of contract by new landlord in the Bronx.

My Phone Calls with Urban's Lisa Lombardi and Ron Abad on 5/19/16 About Having Ronald Sullivan Evicted from Where I Reside:

Billing period: Apr 29, 2016 - May 28, 2016 Showing details for Talk usage

Showing search results for: 212.736.7385 Totals: 2 calls

| Date / Time | Contact 🔺 | Location | Minutes |
|-----------------------|------------------------|--------------|---------|
| 05/19/2016 11:33AM | \$ 212.736.7385 | Incoming, CL | 24 |
| 05/19/2016 11:13AM | \$ 2.736.7385 | New York, NY | 10 |

🕊 Incoming Call 👘 🖏 Utgoing Call

Mount Sinai Beth Israel

Department of Emergency Medicine First Avenue at 16th Street New York, NY 10003

212-844-1644

Medical Records

Take-Home Instructions for the Patient

DOS: 07/02/2016 19:51

Patient's Name: Medical Record Number: E.D. Attending Physician: MD Nicole Nembhard E.D. Resident or Physician Assistant: PA-C Dafna Gershoony E.D. Primary Nurse : Adora Chatman, RN Primary Care Provider: Physician - Non-BI Primary Diagnosis: Abrasion of left forearm Additional Diagnoses: Head injury

If you were seen in the Emergency Department today and you have any questions relating to your treatment, please call 212-420-2840

PLEASE NOTE: The examination and treatment that you have received in the Emergency Department have been rendered on an emergency basis only and are not intended to be a substitute for or an effort to provide complete medical service. A follow-up doctor or facility is named below. It is important that you be checked again as recommended below and report any new or remaining problems at that time, because it is impossible to recognize and treat all elements of injury or illness in a single Emergency Department visit. In addition, if an X-Ray has been taken here, it has been read on a preliminary basis only, and a final review will be made by the Radiologist. If there is a change in the preliminary x-ray reading you will be contacted by our follow-up staff

Call to arrange an appointment to see the following physician for follow-up care.

WARNING: You or your child may have been treated with a scdative or pain medicine to provide comfort during your Emergency Department visit. Even though most of the effects will be gone by the time you leave for home, some effects may linger for up to 24 hours. These include: sleepiness, confused thinking, dizziness, nausea, and difficulty walking. If you or your child received this medication, it is very important that activities should be limited or supervised for at least the next 24 hours:

- · Do not drive a car or operate machinery and be very careful around stairs.
- · Avoid alcohol or any other sedating medicines
- · Children should not ride bikes, use a skateboard, go swimming, or play on swings or monkeybars.

IMPORTANT INFORMATION ABOUT YOUR PAPER PRESCRIPTION

As of 3/27/16, New York State Department of Health now requires computer-generated (electronic) prescriptions for all medications be sent directly to your pharmacy. However, Mount Sinai Beth Israel providers have been granted a temporary waiver from the ePrescribing requirement and may write paper prescriptions. By law, once a provider has been granted a waiver, the pharmacy must fill your prescription.

What if my pharmacy refuses to fill my paper prescription?

1. Tell the pharmacist to call the New York State Bureau of Narcotic Enforcement (BNE) directly at 866-811-7957 (8.45 am to 4.45 pm), wait for assistance, and the operator will confirm that paper prescription can be filled.

2. Tell your provider that your pharmacy refused to fill your prescription. Be sure to give your provider the name, address, and phone number of the pharmacy.

Mount Sinai Beth Israel

Department of Emergency Medicine First Avenue at 16th Street New York, NY 10003 212-844-1644

Take-Home Instructions for the Patient

DOS: 07/30/2016 13:27

Patient's Name: Medical Record Number: E.D. Attending Physician: MD Kimberly Henderson E.D. Resident or Physician Assistant: RPA-C Ursula Jemiolo E.D. Primary Nurse : Marjorie Rubin, RN Primary Care Provider: Physician - Non-Bl Primary Diagnosis: Concussion w/o LOC Additional Diagnoses:

If you were seen in the Emergency Department today and you have any questions relating to your treatment, please call 212-420-2840

PLEASE NOTE: The examination and treatment that you have received in the Emergency Department have been rendered on an emergency basis only and are not intended to be a substitute for or an effort to provide complete medical service. A follow-up doctor or facility is named below. It is important that you be checked again as recommended below and report any new or remaining problems at that time, because it is impossible to recognize and treat all elements of injury or illness in a single Emergency Department visit. In addition, if an X-Ray has been taken here, it has been read on a preliminary basis only, and a final review will be made by the Radiologist. If there is a change in the preliminary x-ray reading you will be contacted by our follow-up staff

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2. Tell your provider that your pharmacy refused to fill your prescription. Be sure to give your provider the name, address, and phone number of the pharmacy.

7/30/2016 3:21:07 PM



Kishea Paulemont 1947 Hughes Ave Bronx, New York 10457

Augusts 4, 2016

802 Fairmount Ave Bronx New York 10460

Hello Mr. Komatsu

Within the last several days you have brought up some concerns in which we would like to meet, further discuss and come up with a plan to resolve. We have received and heard your concerns. You informed management of an injury you sustained through an altercation with your roommate. Your safety is key and we are very much concern. The only way we can assist with a resolution is to meet. Although we have made several other attempts in the past, we are hopeful due to the severity of the situation you will be willing to meet to ensure the situation is resolved.

Can please give me a call at 718-960-4393x836 to schedule an appointment. In addition to meeting with us, would you provide us with any medical documentation that validates your injuries? This will help expedite any needed services. We look forward to meeting with you.

Thanks Kishea Paulemont

Cc: Fred Shack Ron Abad Lisa Lombardi Banks (HRA) (DHS)

Secure | https://www.facebook.com/ronald.sullivan.351?pnref=lhc.friends

| F Ronald Sullivan | Case Details - Charges CASE INFORMATION | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| | Case #: | Bronx Criminal Court 2016BX042188 Sullivan, Ronald G | | | |
| | Charge PL 120.15 00 | Daail B Misdemeanor, 1 count, Not an arrest charge, Arraignment charge | | | |
| Blezzed | PL 240.26 01 | Description: Menacing 3rd Violation, 1 count, Not an arrest charge, Arraignment charge Description: Harassment 2nd- Phy Contact | | | |
| Constraints of Provide comparisons and a second on proceeding to the constraints of the process of the process of the constraints of | PL 120.00 01 **TOP CHARGE** | A Misdemeanor, 1 count, Arrest charge, Arraignment charge Description: Aslt Wint Causes Phys Injury | | | |

DO YOU KNOW RONALD?

If you know Ronald, send him a message.

intro
 SR. S.L.H at New York City Department of Education
 Studied Dietetics and Foodservice Management Program at LaGuardia CC
 Went to George Westinghouse V.T.H.S
 Uves in New York, New York
 Divorced
 From Jackson, Mississippi

Joined March 2010

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PUBLIC SUPPORT

July 1, 2015 through July 30, 2016

New York State Hunger Prevention & Nutrition Assistance Program New York City Department of Health & Mental Hygiene New York City Department of Homeless Services New York State Office of Mental Health The Fashion District BID The Flatiron BID The Port Authority of New York & New Jersey United States Department of Housing & Urban Development

\$75,000 - \$100,000+ Deutsche Bank Americas

Robin Hood Foundation

\$50,000 - \$74,999

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\$25,000 - \$49,999

Bank of America Merrill Lynch Barker Welfare Foundation Ernst & Young LLP The Charina Endowment Fund The Shaw Family Endowment Fund

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WSFSSH CENTRAL OFFICE 2345 Broadway, New York, NY 10024 • T. 212.721.6032 F. 212.721.6043 www.wsfssh.org

Testimony to the New York City Council Committee on General Welfare Submitted by the West Side Federation for Senior and Supportive Housing (WSFSSH) April 24, 2018

Good afternoon. I would like to thank Council Member Levin and the General Welfare Committee for this hearing today and their recognition of the importance of supportive housing in the homeless service continuum.

My name is Paul Freitag and I am the Executive Director of the West Side Federation for Senior and Supportive Housing (WSFSSH). I also served on the Mayor's Task Force for Supportive Housing convened in 2016 which recommended many of the elements incorporated into NYC 15/15.

For over 40 years WSFSSH has provided housing in combination with social services to older New Yorkers. Our work was one of the models used in the formulation of the components of what is now referred to as "supportive housing." Supportive housing is permanent affordable housing with embedded social services for vulnerable individuals and families; often serving people who are homeless and living with disabilities and/or other barriers to maintaining stable housing. Additionally, there are thousands experiencing mental illness and substance use disorders who rely on supportive housing. It is important to emphasize that supportive housing is permanent affordable housing. It is not to be confused with emergency shelter or transitional housing. Supportive housing is a critical component of the City's multi-pronged effort to emerge from the homelessness crisis in which we find ourselves.

Currently WSFSSH operates over 2000 units of senior housing in 26 buildings on the west side of Manhattan, in Harlem and the Bronx. I would like to be able to say that during our 40 year history we have seen a reduction in the need for supportive housing, but unfortunately, that is not the case. Thousands of New Yorkers are languishing on waiting lists or on the street, until more units of supportive housing become available. We are extremely grateful for NYC 15/15, the City's commitment to build 15,000 new units of supportive housing over the next 15 years. We look forward to working with the Council and our agency partners to execute this plan.

NYC 15/15 comes at a specific moment in our City and State's political history. Prior to the announcement of this initiative in 2015, the City and State had jointly developed supportive housing

under the aptly named *New York/New York* agreements. Under the NY/NY I, II and III programs, WSFSSH developed almost 300 units of supportive housing.

At the end of 2015, without prospects for a NY/NY IV Agreement, and facing the end of NY/NY III, Mayor de Blasio announced the City's commitment to create 15,000 units of supportive housing over the next fifteen years, an initiative that is known as NYC 15/15. WSFSSH currently is slated to use NYC 15/15 in our **WSFSSH at West 108th Street** project where it will provide both social services subsidy and rental assistance for 60 units of senior supportive housing. We are truly grateful to the Council and the Administration for allocating sufficient funding to provide the range and breadth of services that are needed to help chronically homeless and vulnerable people stabilize their lives.

A 2008 city-wide study conducted by NYU Furman Center found that single site residences led to higher than average property values. Additionally, congregate residences provide community benefits including community space that is available to local organizations, support for local businesses, and partnerships with health, safety and arts organizations. Single site residences also create jobs for local residents both during and after construction. Our **WSFSSH at West 108**th **Street** project provides an example of the community-enhancing benefits of supportive housing. In addition to the housing units, this project will be providing a 5,000 SF Community Clinic that will provide affordable healthcare to neighborhood residents, and also will provide storage spaces for ambulances for a non-profit ambulance corps. Additionally the project will include improvements to an adjacent playground and will provide much-needed community meeting spaces.

While land is expensive and creates a challenge for developing new supportive housing residences, the benefits that these residences bring to neighborhoods are many. As the Council is aware, supportive housing is not only the most effective intervention for addressing chronic homelessness, it is cost-effective as well: According to a 2017 report from the New York State Department of Health, targeting people with high Medicaid utilization for supportive housing reduces substance use rehab admissions by 44%, reduces inpatient psychiatric admissions by 27% and reduces inpatient days overall by 40%. Based on WSFSSH's 40 year history of developing and operating supportive housing, I can say from first-hand experience that supportive housing provides a stable home and community to residents for whom life on the streets could be the likely alternative.

We appreciate the Council's abiding interest in addressing homelessness in New York City and its longstanding support of supportive housing. WSFSSH looks forward to working with you to continue to address the homelessness crisis and the critical shortage of affordable housing in New York City.

Thank you for this opportunity to testify.

Respectfully submitted by:

Paul R. Freitag Executive Director West Side Federation for Senior and Supportive Housing 2345 Broadway | New York, NY 10024 <u>PFreitag@wsfssh.org</u>



Testimony of

Amy Blumsack, Director of Organizing & Policy, Neighbors Together Delivered Before the General Welfare Committee, New York City Council General Welfare Committee Oversight Hearing on The NYC 15/15 Initiative and Intro 147-2018

April 24, 2018

My name is Amy Blumsack, and I am the Director of Organizing and Policy at Neighbors Together, a large soup kitchen and community based organization located in central Brooklyn. Our mission is to end hunger and poverty in the surrounding neighborhoods of Ocean Hill, Brownsville, and Bedford-Stuyvesant. We serve over 10,000 unique individuals per year, and assist people who are struggling with poverty, lack of affordable housing, homelessness, food insecurity, histories of incarceration and addiction, and other pressing issues. Since Fiscal Year 15, Neighbors Together has assisted over 650 members with housing services, 50% of whom were seeking supportive housing services, ranging from assistance with gathering documentation, through application submission, advocacy, interview support, and securing supportive housing placement.

Thank you for the opportunity to testify on Intro 147, and thank you for identifying and addressing the critical need to increase and improve tracking and transparency around supportive housing in New York City. This bill will give the City, advocates, and individuals seeking supportive housing greater clarity on how our current systems are working, and whose needs are not being adequately met.

Housing is the greatest need among our members and has been such for the better part of the last decade. Many of our members are among the lowest income New Yorkers, either the working poor or living on fixed incomes such as public assistance and social security. Over 40% of respondents in our 2018 survey reported being homeless or unstably housed. In the last four fiscal years, 20% of the people seen in our Empowerment Program were seeking access to supportive housing. Because such a significant portion of the people who come through our doors are both eligible for supportive housing and in need of low-income housing, Neighbors Together shifted our approach four years ago and instead of focusing solely on 2010e supportive housing application approvals, our organization dedicated a full time employee to work with members on the full range of supportive housing placement services, including 2010e submission, approval, interview support, and placement advocacy. Currently Neighbors Together has one full-time employee and one part-time employee dedicated to assisting our members with supportive housing, and this approach has seen very strong outcomes, significantly increasing the number of people we have helped to secure and move into supportive housing units.

Despite Neighbors Together's organizational expertise and well-honed systems to support members' ability to access supportive housing, there are many factors that are outside of our control, such as the supportive housing market, inconsistencies between supportive housing application reviewers at the Human Resources Administration, and supportive housing providers themselves. Neighbors Together's supportive housing specialist has repeatedly experienced providers assess applicants for a higher level of care than necessary due to the applicant's history of incarceration, regardless of research on likelihood of recidivism, and therefore preventing that applicant from accessing available supportive housing. Additionally, providers have repeatedly turned people down for exhibiting symptoms related to their mental health diagnoses, in a seeming effort to cherry pick or skim the top of the pool of applicants. This is disconcerting because it works at cross purposes to the reason supportive housing exists- to provide housing for the city's most vulnerable residents. In organizations that only provide 2010e application assistance, it is likely that even higher numbers of supportive housing eligible applicants are prevented from accessing supportive housing because there is no one to help them navigate the world of housing providers and advocate for them throughout the process of securing and attending interviews. It is for these reasons that Neighbors Together strongly supports Intro 147. This bill will create greater transparency and clarity on why people are being turned away from one of the most sought-after resources in New York City- affordable housing. As City Council and the Department of Social Services gain greater clarity through the reporting required in Intro 147, inconsistencies can be identified and interventions can be created to address those issues.

Safe housing is the foundation from which all other things become possible. Securing placement in supportive housing can put an end to the vicious cycle of homelessness, hospitalization, treatment, incarceration and subsequent homelessness that is the daily reality for so many low-income New Yorkers. Neighbors Together acknowledges Mayor De Blasio and New York City's continued investment in supportive housing through the NYC 15/15 Initiative, and also recognizes that even with the new commitment, the need for supportive housing far outpaces the supply. As new supportive housing units begin to come online through the NYC 15/15 Initiative, now is the perfect time to pass a bill that will increase understanding of why certain people are able to access those new units while others are not.

Neighbors Together would like to express gratitude to the General Welfare Committee Chair Council Member Levin, and Council Members Brannan and Ayala for championing Into 147. With strong support from City Council, government, advocates, directly affected New Yorkers and communitybased organizations can partner to ensure that New Yorkers are better able to access the critical resources of supportive housing.

Thank you for your time and consideration.

If you have any further questions or would like more information related to the above testimony, please contact Amy Blumsack at Neighbors Together: 718-498-7256, ext. 5003 or amy@neighborstogether.org.



April 24, 2018

Good Morning. My name is Nicole Bramstedt. I am the Director of Policy at Urban Pathways. Thank you to the New York City (NYC) Council Committee on General Welfare for holding this hearing on the NYC 15/15 supportive housing initiative and the opportunity to testify.

Urban Pathways will testify about operating supportive housing, including the NYC 15/15 initiative to develop 15,000 units of supportive housing over 15 years. We will also provide five recommendations for ensuring supportive housing in New York City thrives. Specifically, we recommend that the City: (1) make a \$200 Million budget investment in City-contracted human services nonprofits to address inadequate indirect and fringe rates and escalating occupancy and insurance costs; (2) adjust the operating funding for NYC 15/15 scattered-site units to the current fiscal year (FY) Fair Market Rent; (3) obligate NYC 15/15 supportive housing providers to engage in tenant advisory efforts, as a condition of funding; (4) continue the NYC Supportive Housing Task Force as a working group; and (5) ensure individuals with criminal justice backgrounds are eligible for NYC 15/15.

About Urban Pathways

Since 1975, Urban Pathways has worked to engage the City's most vulnerable - homeless adults - and provide them with "a way home". Our continuum of programs in four of the five boroughs include six street outreach programs, the Olivieri Drop-in Center and the Hegeman, Travelers and 105th Street Safe Havens as well as the congregate and scattered-site supportive housing units detailed below.

Background

In FY 2017, Urban Pathways assisted over 686 individuals via NYS and NYC contracted-supportive housing. This includes over 194 individuals in scattered-site supportive housing - affordable, permanent market rate apartments "scattered" throughout Manhattan, Brooklyn and the Bronx, accompanied by support services. This also includes 492 individuals in congregate supportive housing - affordable, studio apartments in one building with on-site support services:

- 165 individuals in the 17th district of Council Member Salamanca 86 individuals at 162nd
 Street Apartments,¹ 56 individuals at Hughes House and 23 individuals at Fairmount Place;
- 152 individuals in the 16th district of Council Member Gibson 83 individuals at Clinton Avenue Apartments,² 43 individuals at Boston Road Apartments³ and 26 individuals at Crotona Community Residence;
- 60 individuals at Ivan Shapiro House in the 3rd district of Council Speaker Johnson;
- 59 individuals at Cluster House in the 7th district of Council Member Levine; and
- 56 individuals at Hallet's Cove in the 22nd district of Council Member Constantinides.

¹ This includes 31 community residents in low-income apartments.

² This includes 27 community residents in low-income apartments.

³ This includes 13 community residents in low-income apartments.

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The first part of my testimony addresses the issues that we encounter with operating supportive housing, including the NYC 15/15 scattered-site housing.

The City Inadequately Invests in Its Human Services Contracts, Including the NYC 15/15 Scattered-Site Supportive Housing Contracts.

A consistent challenge we face in operating supportive housing is inadequate City investment that complicates our ability to best run our residences. This inadequate investment leaves providers like us with constant financial shortfalls. This obligates us to resort to fundraising to fill gaps at the expense of our programs. It also compromises our tenants' well-being, contrary to the tenets of the supportive housing model.

One example of this underinvestment comes in the form of City contracts that underfund contract lines critical to the success of the supportive housing residences and their tenants. In the FY19 budget, there are two areas of human service nonprofit operations that we ask the Council to direct its attention – inadequate indirect and fringe rates and escalating occupancy and insurance costs.

I will elaborate on the inadequate City indirect and fringe rates. Regarding indirect rates, as a result of FY18 City budget investment, the City did raise our indirect rate from 8.5 to 10 percent. While this raise is appreciated, the 10 percent indirect rate remains below our actual indirect rate of 14 to 16 percent. In addition to inadequate indirect rates, the City fringe rates are low. Currently, the City permits a fringe rate of 26 to 27 percent. This is also inadequate, largely due to the increasing cost of health care we face annually, which was a double-digit increase again this past year. To make up for these differences between the City and our actual indirect and fringe rates, we fundraise. This comes at the expense of our programs and services and thus our tenants, as we must apply fundraising dollars towards these rate gaps instead of towards program innovation and service improvements.

Another example of insufficient City investment is an inadequate operating rate for NYC 15/15 scattered-site units. For NYC 15/15 scattered-site housing, "[o]perating funding will not exceed Fair Market Rent (FMR) at the time of contract signing ... with an anticipated 2% annual escalator."⁴ However, FMR may increase by more than two percent each fiscal year. From FY16-17, the FMR for a one-bedroom apartment increased five percent from \$1,293 to \$1,352.⁵ From FY17-18, this FMR increased 12 percent, from \$1,352 in FY17 to \$1,514 in FY18.⁶ This leaves supportive housing providers to make-up the difference, which ultimately compromises tenant well-being. Providers must place tenants in cheaper apartments, which is often an apartment further from public transportation and

⁵ The U.S. Department of Housing and Urban Development. The Final FY 2017 New York, NY HUD Metro FMR Area FMRs for All Bedroom Sizes. Accessed at <u>https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2017_code/2017summary.odn</u>.

⁴ NYC 15/15 Scattered Site RFP. Accessed at <u>https://shnny.org/rfps/nyc-15-15-service-operating-scattered-site-rfp/</u>.

⁶ The U.S. Department of Housing and Urban Development. The Final FY 2018 New York, NY HUD Metro FMR Area FMRs for All Bedroom Sizes. Accessed at <u>https://www.huduser.gov/portal/datasets/fmr/fmrs/FY2018_code/2018summary.odn</u>.

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New York City Council Oversight Hearing Supportive Housing

Presented by Nicole Bramstedt, Policy Director

April 24, 2018

thus support systems. Or providers must double-up tenants in multi-bedroom apartments, often leading to roommate conflict and compromised well-being.

While It's a Cost-Effective Housing Option for Them, Those Released from NYS Correctional Facilities May Not Be Eligible for Supportive Housing.

NYS correctional facilities are increasingly a feeder to City shelters. As reported by Coalition for the Homeless in its 2018 State of the Homeless Report, from 2014-17, NYS correctional facilities increasingly released formerly incarcerated individuals to City shelters. In 2017, City shelters accepted more than 4,000 individuals from upstate prisons.⁷ Accordingly, one in five entrants to City shelters now comes directly from a NYS prison, up from one in ten only four years ago.⁸

As demonstrated by recent pilot programs in New York City, supportive housing is a cost-effective housing option for this population. The Frequent Users Service Enhancement (FUSE) pilot - supportive housing for the justice-involved - demonstrated a reduced use of shelter, jails and emergency rooms, with each individual housed generating \$15,000 in public savings.⁹ As a result of this success, the City implemented the Justice-Involved Supportive Housing (JISH) pilot for frequent users of jail and shelter, which Urban Pathways is proud to be a participating provider with Fortune Society and CAMBA.

However, the federal Department of Housing and Urban Development (HUD) definition of chronic homelessness limits the use of supportive housing as a housing option for this population. According to the HUD chronic homeless definition, those released from 90+ day stays in prisons or jails are not chronically homeless and thus don't qualify for housing programs that are funded with HUD dollars or that base eligibility on the HUD definition.¹⁰ Thus, an individual released from a 90+ day stay in prison or jail must often either enter a shelter or a safe haven or live on the streets to be eligible for supportive housing. This includes NYC 15/15 supportive housing, which bases eligibility on the HUD definition.¹¹

Recommendations

Given these issues, we make the following five recommendations to ensure supportive housing has the impact intended. The first four recommendations help to ensure optimal operation of supportive

⁷ The Coalition for the Homeless. State of the Homeless 2018. March 2018. Accessed at

http://www.coalitionforthehomeless.org/wp-content/uploads/2018/03/CFHStateoftheHomeless2018.pdf . ⁸ Id.

⁹ Corporation for Supportive Housing. *Justice Served: Fair Treatment for the Formerly Incarcerated*. April 27, 2016. Accessed at http://www.csh.org/wp-content/uploads/2016/04/NYC_SHTaskForce_JusticeRecommendations_4.26.16.pdf .

¹⁰ See Flowchart of HUD's Definition of Chronic Homelessness. Accessed at <u>https://www.hudexchange.info/resources/documents/Flowchart-of-HUDs-Definition-of-Chronic-Homelessness.pdf</u>.

¹¹ See Corporation for Supportive Housing. *New Era of Supportive Housing in New York*. Accessed at http://www.csh.org/wp-content/uploads/2017/10/NewEraofSupportiveHousingNY.pdf .

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housing. The final recommendation helps to ensure supportive housing addresses a growing feeder into City homelessness – those with criminal justice backgrounds.

(1) Ensure Optimal Operation of NYC 15/15 Supportive Housing.

For supportive housing to thrive, we need to ensure providers can run residences to their best capabilities. We thus make the following four recommendations to ensure optimal operation of supportive housing. The first two recommendations address inadequacies in funding. The third and fourth recommendations ensure the opportunity for consistent tenant and provider input.

1. Make a \$200 Million FY19 Budget Investment in City Human Services Contracts to Address Inadequate Indirect and Fringe Rates and Escalating Occupancy and Insurance Costs.

Last year saw an important investment in human services nonprofit providers with City contracts. With the Council's help, we secured \$300 million of our \$500 million ask to help nonprofit providers cover the cost of delivering needed services like the support component of supportive housing. However, as discussed above, there remains underinvestment that challenges and even threatens the operation of our City-contracted supportive housing residences. This inadequate investment comes in the form of the City underfunding our indirect and fringe rates as well as failing to address our escalating occupancy and insurance costs.

Accordingly, we request a \$200 million budget investment in the FY19 City budget to address inadequate indirect and fringe rates and escalating occupancy and insurance costs. This budget ask includes funding parameters that set:

- 1.) a floor of 15 percent for indirect in all City human services contracts;
- 2.) a 37 percent fringe rate in all human service contracts to reflect a generally accepted industry standard and that mirrors the fringe rate used by the City for its City employees;
- 3.) a 10 percent increase in the portions of human services contracts covering occupancy and casualty and liability insurance to cover escalating costs in these areas.
- 2. Adjust the Operating Funding for NYC 15/15 Scattered-Site Units to the Current Fiscal Year FMR.

The City Supportive Housing Task Force's Streamlining Development Subcommittee made five recommendations to address rates, contracts and access to capital for development, so to not repeat the rate issues plaguing NY/NY scattered-site supportive housing. Among these is recommendation #22, which recommends managing the rental subsidy at FMR and building in regular increases to the NYC 15/15 rental subsidy.

Accordingly, operating funding for NYC 15/15 scattered-site units will not exceed FMR at the time of contract signing with an anticipated annual two percent escalator. Still, as discussed above, this doesn't remedy the ills of the NY/NY scattered-site model but perpetuates them. Thus, we recommend the City adjust the operating funding to the current fiscal year FMR.

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3. Obligate NYC 15/15 Providers to Engage in Tenant Advisory Efforts, as a Condition of City Funding.

An additional component of ensuring the successful operation of supportive housing is a meaningful opportunity for tenant input. Therefore, as the City continues the NYC 15/15 initiative, it should obligate providers to engage in tenant advisory efforts as a condition of funding. Doing so is consistent with the HUD Notice of Funding Availability Application, which awards points for consumer participation.

The tenant advisory efforts of three providers provide examples. Community Access has the Program Participatory Advisory Group, a tenant body democratically elected by Community Access tenants that advises senior management and creates initiatives. Urban Pathways has monthly site-based advisory groups to address residence issues and improve self-advocacy. Breaking Ground conducts quarterly tenant advisory groups for its scattered-site tenants.

4. Continue the NYC Supportive Housing Task Force as a Working Group, Meeting Regularly with Task Force Members.

We commend the City for creating the Supportive Housing Task Force and implementing muchneeded changes. It's this dialogue with those on the ground - the providers - that helps ensure NYC 15/15 supportive housing does not repeat the mistakes of NY/NY supportive housing.

As the City implements the NYC 15/15 initiative, it should continue the Task Force as a working Task Force that addresses implementation challenges within each of the four subcommittees. It's important that the Task Force be a working entity versus a check-in meeting in which the City reports out to providers on implementation. Continuing it as a working group will maintain the critical dialogue that the Task Force initiated. It will give providers an ear responsive to their concerns. It will also help the City monitor challenges arising in development and operation.

(2) Ensure NYC 15/15 Supportive Housing Captures the Complexities of Homelessness.

For the NYC 15/15 initiative to truly address City homelessness in the cost-effective fashion that it's intended, it should encompass the complexities of homelessness, including those with criminal justice backgrounds. We thus make the below recommendation.

1. Ensure Individuals with Criminal Justice Backgrounds Are Eligible for NYC 15/15.

The City should ensure individuals with criminal justice histories, including those exiting 90+ day stays in jails or prisons are eligible for NYC 15/15 housing. As demonstrated by the FUSE and JISH pilots, supportive housing is a proven, cost-effective housing option for this population.

For guidance, the City should look to the 2016 Corporation for Supportive Housing (CSH) report, *Justice Served: Fair Treatment for the Formerly Incarcerated*. It provides two particularly

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applicable recommendations.¹² The first is that at least 15 percent of new City supportive housing for each special needs group - single adults, families and young adults - be dedicated to those with criminal justice histories. As this percentage is based on an estimated portion of Department of Homeless Services (DHS) clients with a criminal justice history, it should be adjusted to reflect current data, particularly given the influx of individuals from NYS correctional facilities. The second recommendation is that the City annually conducts an analysis of denials to supportive housing based on criminal justice history, which should inform the above percentage of supportive housing for those with criminal justice backgrounds.

Conclusion

Urban Pathways thanks the Committee for the opportunity to testify on the NYC 15/15 initiative and to provide recommendations for ensuring it is most effective for providers and tenants alike.

Nicole Bramstedt Director of Policy, Urban Pathways Phone: 212-736-7385 X233 Email: <u>nbramstedt@urbanpathways.org</u>

¹² Corporation for Supportive Housing. Justice Served: Fair Treatment for the Formerly Incarcerated. Accessed at http://www.csh.org/wp-content/uploads/2016/04/NYC_SHTaskForce_JusticeRecommendations_4.26.16.pdf.



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105 Carlton Avenue Brooklyn, NY 11205

Phone: (718) 625-4545

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www.BCHandS.org

BROOKLYN COMMUNITY HOUSING AND SERVICES

Testimony Provided by Jeff Nemetsky, Executive Director Brooklyn Community Housing and Services, Inc.

For

The New York City Council General Welfare Committee and Housing Committees

April 24, 2018

Good afternoon. My name is Jeff Nemetsky and I am the Executive Director for Brooklyn Community Housing and Services, a not-for-profit supportive housing agency headquartered in Fort Greene.

I would like to thank the General Welfare Committee and Chairman Levin for organizing this important hearing today, and the members of the committee for being such robust advocates for supportive housing, both now and throughout recent years.

My organization, BCHS, was founded in 1978 by a group of local clergy from Downtown Brooklyn, and is committed to ending homelessness in Brooklyn. We now serve nearly 1,000 formerly homeless and at-risk residents a year through a range of short-term, transitional and permanent supportive housing, and provide a continuum of related services.

As everyone here today knows, there will be more than 60,000 homeless people going to sleep in a City shelter tonight, with thousands more on the street. To state the obvious, not one of these people, no one, was born deserving to become homeless; no one was born so strong that they could withstand the trauma of living on the street or in a shelter without being badly damaged or scarred; and most of the people who are homeless today were born to mothers and fathers who, like all of us, harbored only dreams of a good life for their children.

The creation of 15,000 units of new permanent supportive housing through the NYC 15/15 initiative is the solution for so many of those who are currently homeless and have a special need of one kind or another, and it will allow thousands of vulnerable people to regain their independence, reclaim their dignity, and live once more with hope. At BCHS, each year more than 95% of the formerly homeless individuals who come to us successfully maintain their housing with our agency or move on to even greater independence in the community - we know this approach works.

From our perspective, the NYC 15/15 effort has been a great step forward for the field. It has been guided by a series of recommendations from a task force of supportive housing experts and incorporates a vulnerability index to target housing to those most in need. Options for populations not previously targeted by supportive housing programs in the past have been created as well.

Prioritizing the most vulnerable people for permanent supportive housing is not only humane and compassionate but will also result in substantial savings of public dollars. Let me give you two brief examples of why I think this targeting is such an important aspect of NYC 15/15 and holds so much promise.

At BCHS we have been running two demonstration programs for very high need formerly homeless populations: 1) individuals with significant histories of incarceration, and 2) formerly homeless seniors. Over time we had found that these two groups had more involved circumstances than the general supportive housing population, were experiencing worse outcomes, and were utilizing expensive institutional care more often.

We raised private money to provide enhanced services to both these groups – including lower caseloads, more targeted mental health and nursing services, support groups and wellness activities - and have found the positive change to be significant and quantifiable.

For example, our program for seniors has reduced the total number of days BCHS' older residents spend in the hospital each year by 90% (from an average of 415 days a year for all our older residents combined to just under 50 days a year currently). And because our older residents' health care is almost entirely paid for by Medicaid and other government sources, this great reduction in the amount of time spent in the hospital results in significant taxpayer savings.

In our other demonstration program we have had similar success - 90% of the individuals with significant histories of incarceration successfully maintain their housing with us each year or move on to greater independence – and because jail and prison are also so much more expensive than supportive housing, this initiative too results in substantial taxpayer savings.

We believe that the funding model for NYC 15/15 is the most realistic one we have seen yet in supportive housing, and will help agencies like ours provide better and more targeted services to a greater number of high need populations like the ones I described, resulting in even more positive outcomes and even greater savings in the future. Like many, we believe the main challenge facing NYC 15/15 is the same as the one facing most New Yorkers – the high cost of real estate. As both a congregate and scattered-site housing provider, we have seen this impact across the field, but we are hopeful that over time and with the support of our government partners, these challenges will be able to be addressed.

In short, we feel that well designed, well maintained, and well run supportive housing helps formerly homeless individuals achieve stability and independence in an extraordinarily effective way and is truly the solution for tens of thousands of people who are currently homeless. Efforts to broaden the populations served, target those most in need with a data driven and accountable process, and provide truly appropriate funding, makes the NYC 15/15 initiative the most thoughtful and comprehensive approach yet to supportive housing and to our current crisis of homelessness, and we appreciate this Committee's support. Thank you.



TESTIMONY

ON

Oversight: Update on the NYC 15/15 Initiative

AND

Intro 147-2018, A Local Law to amend the administrative code of the city of New York, in relation to reporting on supportive housing

PRESENTED BEFORE:

THE NEW YORK CITY COUNCIL'S COMMITTEE ON GENERAL WELFARE

PRESENTED BY:

SANDRA GRESL STAFF ATTORNEY MOBILIZATION FOR JUSTICE, INC.

April 24, 2018

MOBILIZATION FOR JUSTICE, INC., 100 William Street, 6th Floor, New York, NY 10038 212-417-3700 <u>www.mfjlegal.org</u>

I. Introduction.

Mobilization for Justice, Inc. ("MFJ," formerly MFY Legal Services) envisions a society in which there is equal justice for all. To make this vision a reality, for over 50 years MFJ has provided free legal assistance to residents of New York City on a wide range of civil legal issues, prioritizing the needs of people who are low-income, disenfranchised or have disabilities. We provide advice and representation to more than 10,000 poor and working poor New Yorkers each year, benefitting over 20,000 people.

While every project at MFJ serves people with mental illness, MFJ's Mental Health Law Project specifically addresses the civil legal needs of people with mental illness in the five boroughs of New York City. The Mental Health Law Project works in partnership with inpatient and outpatient behavioral health providers throughout the city to prevent homelessness, stabilize income, support employment, and promote recovery for adults living with mental illness. Last year, the Mental Health Law Project served over 1,500 clients with mental illness, many whom reside in supportive housing. Together with MFJ's general housing practice and our Adult Home Advocacy Project, the Mental Health Law Project witnesses daily the power of supportive housing to positively transform and stabilize the lives of our clients.

We appreciate the Committee's work on this critical issue and submit this testimony to highlight the importance of supportive housing for our clients. Specifically, we submit this testimony in support of the NYC 15/15 initiative and in support of Introduction 147.

II. More Supportive Housing is Necessary in New York City.

MFJ supports the expansion of supportive housing for people with mental illness in New York City. The city currently faces a major housing crisis that disproportionately impacts people with disabilities. Supportive housing programs are necessary to address the affordability gap and ensure that people with mental illness have access to safe, stable housing.

A. There is a severe lack of affordable housing for people with mental illness and other disabilities.

The current supply of housing does not meet the needs of persons with mental illness living in the city. Federally subsidized public housing continues to be extremely limited and the cost of private apartments remains unaffordable for those relying on public benefits for income.

People with disabilities are more than twice as likely to live in poverty as people without disabilities.¹ In New York in 2014, the general poverty rate was 15.5%,² but was 28.6% for

¹ Nicole Levy, *New York Lags Behind Nation on Helping People With Disabilities: Study*, DNAinfo.com (July 26, 2015), https://www.dnainfo.com/new-york/20150724/astoria/new-york-lags-behind-nation-on-helping-people-with-disabilities-study.

² New York State Community Action Association, *New York State Poverty Report* (March 2015) available at http://nyscommunityaction.org/wp-content/uploads/2014/03/2015-Poverty-Report-w-50th-logos-for-online.pdf.

people with disabilities.³ Many New Yorkers with disabilities rely solely on public assistance or Supplemental Security Income (SSI) to meet their expenses. Public assistance provides only a \$215 monthly allowance for shelter in single person households. This amount that has not increased since 1990⁴ and is grossly inadequate. SSI beneficiaries living alone receive \$837 monthly, which includes an \$87 supplement paid by New York State.⁵ A 2016 report found that an SSI recipient in the New York City area would have to pay 165% of her income for the average efficiency apartment.⁶

People with disabilities are employed at far lower rates than other New Yorkers. While the general employment rate is 70%, only 29% of people with disabilities are employed full or parttime.⁷ The gap between the general employment rate and the employment rate for people with disabilities is greater in New York City than it is at the State or national level.⁸ Yet even fulltime work at minimum wage pays only approximately \$480 to 520 weekly.⁹ With rents increasing faster than wages, many people with disabilities, even those who are employed, cannot afford the rising New York City rents.¹⁰

B. Supportive housing is a critical resource for individuals with mental illness and other vulnerable populations.

Supportive housing helps vulnerable New Yorkers with mental health disabilities afford safe, stable housing that is integrated in the community. Stable housing reduces hospitalizations, incarcerations, and unnecessary institutionalization.¹¹

The most cost-effective and integrated form of supportive housing is scattered-site housing, also referred to as supported housing. Scattered site housing refers to an apartment in the community that comes with rent assistance and support services. Eligible individuals can live alone or with roommates. Support services can include visits from case managers and help with moving, health care, shopping, cleaning, medication, or personal care. Almost 20,000 individuals with mental

³ Press Release, Gov. Andrew M. Cuomo, *Governor Cuomo Signs Executive Order Establishing Commission to Create Employment First Policy for New York* (September 17, 2014) http://www.governor.ny.gov/news/governor-cuomo-signs-executive-order-establishing-commission-create-employment-first-policy-new.

⁴ Jiggetts v. Grinker, 75 N.Y.2d 411, 416 (1990).

⁵ New York State Office of Temporary and Disability Assistance, SSI and SSP Benefit Levels Chart effective January 1, 2018 (November 6, 2017) available at https://otda.ny.gov/programs/ssp/2018-Maximum-Monthly-Benefit-Amounts.pdf.

⁶ Technical Assistance Collaborative Inc., *Priced Out in 2016: The Housing Crisis for People with Disabilities* (December 2017), p. 30, available at http://www.tacinc.org/media/59493/priced-out-in-2016.pdf.

⁷ Center for the Disabled-NY, *ADA at 26 in New York City* (2016), p.1, available at https://www.cidny.org/wp-content/uploads/2017/07/ADA-at-26-in-NYC.pdf.

⁸ Id.

⁹ See New York State Department of Labor,

https://labor.ny.gov/workerprotection/laborstandards/workprot/minwage.shtm (last visited April 16, 2018). ¹⁰ NYU Furman Center, NYU Furman Center & Capital One Release Affordable Rental Housing Landscape Illustrating NYC Rental Housing Trends (April 24, 2014) available at

http://furmancenter.org/files/pr/NYUFurmanCenter_NYCRentalLandscape_23APR2014.pdf.

¹¹ See Olmstead v. L.C. ex rel. Zimring, 527 U.S. 581, 600-01, 119 S. Ct. 2176, 2187, 144 L. Ed. 2d 540 (1999).

illness are served in supported housing statewide,¹² and over 12,000 of those individuals live in New York City.¹³ Studies examining the cost effectiveness of supported housing have found that public investment in supported housing results in long-term savings.¹⁴ Funding supportive housing units improves the lives of individuals living with mental illness, and ultimately saves taxpayer money. In responding to the housing affordability gap for New York City residents with mental health disabilities and the current homelessness crisis, the NYC 15/15 initiative is vital.

III. The Supportive Housing Program Should Not Only Be Maintained, but Improved.

Greater oversight of supportive housing programs will help to ensure that the individuals who most need supportive housing are not only better able to access it, but also receive the supports necessary to maintain it.

A. Intro 147 will help to ensure that the individuals most in need are able to access supportive housing.

MFJ supports greater oversight of supportive housing programs to ensure that people with mental illness are afforded meaningful access to supportive housing. Over the last year, MFJ has convened a series of meetings with other legal services and advocacy organizations to discuss the problems our clients face in relation to supportive housing. Each organization has shared concerns regarding the invisible barriers that prevent many individuals in our communities from obtaining supportive housing.

Providers often "screen out" applicants on arbitrary, unfair, or discriminatory grounds. For example, some providers refuse to provide housing to applicants on the basis of highly subjective claims such as "lack of insight into mental illness" or because an applicant has a recent history of substance use. Other providers deny housing if they deem an individual to be "too mentally ill." This means that those who are most in need may be the least able to access supportive housing. Each of our individual organizations have identified a need for greater oversight of supportive housing application denials, specifically, a mechanism to ensure that eligible applicants are not being inappropriately or illegally denied housing. We also think there needs to be a clear administrative procedure for applicants to appeal if they are denied a housing placement.

Intro 147 is an important step towards increasing oversight of the supportive housing application process and monitoring application or placement denials. Intro 147 does not substantially alter the supportive housing application process in any way. Rather, it increases transparency by requiring the Department of Social Services to produce an annual report on the number of individuals referred to, accepted to, rejected for, and still awaiting placement for supportive

http://bi.omh.ny.gov/adult_housing/reports?p=rpi&g=Statewide&y=2013&q=Dec+31.

¹³ The Supportive Housing Network of New York, New York City Scattered Site Housing: Policy Brief 2 (December 14, 2015), available at http://shnny.org/uploads/Network_Scattered_Site_Position_Paper_FINAL.pdf. ¹⁴ Dennis Culhane et al., *Public Service Reductions Associated with Placement of Homeless Persons with Severe*

¹² Office of Mental Health, Residential Program Indicators Report, available at

Mental Illness in Supported Housing, Housing Policy Debate, Vol. 13, Issue 1 (2002) available at http://repository.upenn.edu/cgi/viewcontent.cgi?article=1067&context=spp_papers.

housing disaggregated by specified demographic information points. MFJ commends chairperson Levin for introducing this bill and the committee for holding this hearing.

B. Greater oversight of supportive housing programs can better ensure that individuals are permanently housed with necessary supports.

MFJ also recommends greater oversight of supportive housing programs to ensure that, once approved, people with mental illness are afforded the necessary supports to maintain their supportive housing and thrive in the community.

MHLP regularly provides legal advice and representation in housing court to tenants who face eviction from supportive housing for small amounts of rent arrears or lease violations that may be directly related to the very disability that makes them eligible for supportive housing. We also receive many calls from tenants in supportive housing who need repairs in their apartment or are not receiving adequate case management support.

While congregate care supportive housing units, also known as community residences, are generally licensed and regulated by the New York State Office of Mental Health (OMH), the OMH does not monitor evictions from scattered-site supportive housing. For example, the OMH does not require scattered-site supportive housing programs to report when they evict a tenanteither by court process or through unilateral "discharge" or "termination of sublease." While at least some supported housing contracts that MFJ has reviewed explicitly require a scattered-site supportive housing provider to create all possible opportunities for corrective action by the tenant prior to commencing an eviction case, the OMH does not have a mechanism in place to monitor what, if any, preventive measures were actually taken.

Given this void, City oversight of evictions from supportive housing is one way to put the City's commitment to Housing First¹⁵ principles into practice. Increased City oversight would go a long way toward increasing housing stability for tenants with mental health disabilities and preventing unnecessary re-entry to the shelter system.

C. Supportive housing residents should be provided with the tools they need to understand and assert their rights in supportive housing.

In addition to increasing oversight, MFJ recommends empowering tenants to meaningfully assert their rights in supportive housing by ensuring that tenants are provided adequate and accurate information regarding their housing arrangements. Many supportive housing programs operate through a patchwork of different funding streams that can be confusing for an advocate, let alone a tenant, to untangle. For example, MFJ often receives calls from residents in scattered site

¹⁵ Housing First is a proven approach to homelessness prevention that focuses on providing people with permanent housing as quickly as possible, and then providing voluntary supportive services as needed. *See* U.S. Interagency Council on Homelessness, https://www.usich.gov/solutions/housing/housing-first (last visited January 17, 2017) ("[Housing First] is based on overwhelming evidence that all people experiencing homelessness can achieve stability in permanent housing if provided with the appropriate levels of services. Study after study has shown that Housing First yields higher housing retention rates, reduces the use of crisis services and institutions, and improves people's health and social outcomes.")

housing who may have a sublease agreement with a non-profit supportive housing provider and do not know who to contact if they need repairs- the supportive housing provider or the building management office. Or, in some supported housing programs, an individual's rent subsidy may administered by Section 8, but support services are provided by a separate agency under a separate contract. Tenants often do not know whom to contact to request a rent adjustment, obtain assistance to apply for a rent arrears grant, or obtain repairs. Both scattered site and congregate care supportive housing providers should be required to provide incoming tenants with written notice outlining, at a minimum: the regulatory status of the apartment or applicable regulatory schemes; a tenant's right to habitable housing and how to request a reasonable accommodation.

D. Supportive housing providers must have the resources to ensure that the housing they maintain is stable and truly supportive.

MFJ supports increased funding for supportive housing. While we commend the City for its commitment to the NYC 15/15 initiative, its success will require contract rates that keep pace with increases in rent in New York City. Inadequate funding for supportive housing providers leads to cuts in vital support services, higher staff turnover, and rental housing units in poorer condition. Such actions undermine the Housing First model, which is essential to making supportive housing must be sufficient to allow providers to access safe and habitable housing, train and retain staff, and provide the appropriate wrap-around services to clients that are vital to the long-term success of this type of housing.

IV. Conclusion.

We thank the Committee on General Welfare for holding this hearing and considering our testimony. The shortage of affordable housing in this city is a serious problem affecting the most vulnerable of New Yorkers, including individuals with mental illness. MFJ remains committed to improving housing for people with mental health needs and we encourage the Committee's continued attention to this important issue. We applaud your efforts to oversee implementation of NYC 15/15 and strongly encourage you to pass Intro 147.



new destiny

12 w 37th street, 7th floor new york, ny 10018

646 472.0262 646 472.0266 fax newdestinyhousing.org

Testimony of New Destiny Housing Corporation Oversight Hearing by Committee on General Welfare on the NYC 15/15 Initiative April 24, 2018

Presented by

housing

Carol Corden, Executive Director, New Destiny Housing Corporation

Thank you for the opportunity to testify today at this Oversight Hearing on the NYC 15/15 Supportive Housing Initiative. My name is Carol Corden and I am the Executive Director of New Destiny Housing, a 23-year old not-for-profit committed to ending the cycle of domestic violence and homelessness by connecting families to safe, permanent housing and services. New Destiny currently operates service-enriched affordable housing in the Bronx and Brooklyn for homeless domestic violence survivors. Most of the households we serve are families-typically a woman with one or two children.

My testimony today is about who is NOT served by NYC 15/15 and comes from the perspective of an organization whose mission is to help victims of domestic violence achieve long-term safety and stability.

Our image of homelessness tends to be a homeless man on the street but it could as easily be a young mother fleeing from domestic violence with her children. One is simply more visible than the other. Victims of domestic violence are a significant subset of the families who make up almost 70% of the residents using New York City shelters. ¹

The 2017 HUD Point in Time Count (PIT) for New York City revealed that victims of domestic violence were the third largest homeless sub-population after individuals with mental illness and substance abuse histories.²

The City's second largest shelter system is dedicated to serving homeless victims of domestic violence –which is acknowledged to be a major driver of homelessness in NYC.

Survivors served by HRA domestic violence shelters are in a system where the State-mandated length of stay is 180 days. Most leave the system still suffering from the trauma of domestic violence and homelessness and facing other life challenges which make housing stability precarious. Shelter residents are overwhelmingly low-income with no or interrupted job histories that make it nearly impossible to afford housing in New York City without assistance. They lack social support networks and have little experience of independent living. In addition, most survivors have children who have been affected by their exposure to violence and

homelessness. Homeless domestic violence survivors are, in other words, strong candidates for supportive housing.

Yet, few will be served by NYC 15/15 because they must meet two requirements to qualify: (1) chronic homelessness and (2) medical disability.

Because of the NYS-mandated 180-day maximum stay, most survivors coming from the HRA specialized domestic violence shelter system will not meet the federal definition of "chronic homelessness." ³ In fact, according to New York City's 2017 HUD Point In Time Count, fewer than 10% of *all* homeless families currently sheltered can meet that standard. ⁴

The second eligibility requirement for NYC 15/15 is "medical disability" as determined by an interview using the 2010e form administered by a medical professional or a trained MSW. This label is a problem for families in general and for households headed by domestic violence victims in particular.

Low-income homeless families with children, many headed by a single parent, are vulnerable to charges of neglect and abuse. They have few material resources, are living in less than ideal circumstances, have minimal social networks and supports, are often dealing with their own trauma as well as that of their children—and are subject to 24-hour observation by staff members who are mandated reporters. Adding the stigma of a diagnosis of mental illness or substance abuse further threatens their family's stability.

For domestic violence survivors, the stakes are even higher. A homeless mother labeled as having a medical disability is more likely to lose her children in a custody battle with her abuser. She has two strikes against her – she cannot provide stable housing for her children and she has a diagnosis that threatens her competency as a parent.

It's not surprising then that supportive housing served only a small number of families with children under NY/NY III. ⁵ Of those families, a very small number came from the domestic violence shelter system. ⁶ Supportive housing, under NYC 15/15 as currently structured, will not be available to most homeless families.

There are two ways to address this situation. One is by making the eligibility criteria more appropriate for homeless families; the other is by creating new models to serve vulnerable families.

NYC 15/15 has already created a priority for youth, a homeless sub-population which is not "chronically homeless" according to the HUD definition, by using a more flexible screening process. There is an understanding that youth are at risk of homelessness because of their life circumstances and the resulting challenges they face -- not necessarily because of a medical disability.

Similar accommodations should be made for vulnerable homeless families, including those headed by domestic violence survivors.

A second approach is to develop and fund another model for homeless families. That model could be service-enriched housing – a non-medical model with voluntary services provided on site and through referrals. New Destiny has been operating service-enriched housing for families headed by domestic violence survivors for a number of years. With services tailored to address the specific needs of low-income domestic violence survivors, this approach has been successful in helping families stay together and remain housing stable and violence free.

The "homeless" is far from a homogeneous or monolithic group. The 60,000 individuals in the City's homeless system are there for a variety of reasons and have diverse needs. They include adults, youth, seniors, families with children and adult families, veterans, people reentering from prisons and nursing homes. All of them need safe, affordable permanent housing and some have substantial life challenges that can be managed with on-site support services.

Yet, NYC 15/15 only addresses a small number of the users of homeless shelters.

Some might argue that it does address the most vulnerable and needy. But, how do we know this? What are the data that support this contention?

For this reason, **New Destiny supports Intro. 147** – In relation to reporting on supportive housing. We need to document who is – and who is not—being served by supportive housing.

We recognize that the individuals currently prioritized for NYC 15/15 supportive housing require services in conjunction with safe, permanent housing. But, vulnerable low-income homeless families should also have access to these resources.

Who can say that a 5-year old living with a depressed mother fleeing domestic violence in a hotel close to JFK Airport is not as vulnerable and in need of support services as a 67-year old Vietnam veteran on the subway platform?

This shouldn't be an either/or issue. Both need and can benefit from supportive housing.

I thank the Council, on behalf of New Destiny Housing, for the opportunity to speak today and welcome any questions you may have.

Contact Information: Carol Corden, Executive Director New Destiny Housing 646-472-0262 ext. 11 Ccorden@newdestinyhousing.org

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FOOTNOTES

- (1) Source: Department of Social Services, as cited in <u>Turning the Tide on Homelessness in New</u> <u>York City</u>, City of New York, February 2017, p. 8.
- (2) HUD 2017 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations, NY-600 New York City CoC, Point in Time Date: 2/7/2017, online report.
- (3) The HUD definition of a chronically homeless person is "either (1) an unaccompanied homeless individual with a disabling condition who has been continuously homeless for a year or more, or (2) an unaccompanied individual with a disabling condition who has had at least four episodes of homelessness in the past three years."
- (4) HUD 2017 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations, NY-600 New York City CoC, Point in Time Date: 2/7/2017, online report.

The report documents 14,245 households with at least one adult and one child who are homeless in NYC but only 1,345 households with at least one adult and one child who are chronically homeless.

- (5) NY/NY III had a goal of producing 9,000 units of supportive housing over 10 years. 1,500 of those units were designated for homeless families where the head of household qualified for Populations D or G.
- (6) In December 2014 HRA, eight years into the ten year NY/NY III program, reported that "fewer than 10" domestic violence survivors from the specialized domestic violence shelter system had been able to qualify for NY/NY III housing.



COMMITTEE ON GENERAL WELFARE

April 24, 2018

OVERSIGHT: UPDATE ON THE NYC 15/15 INITIATIVE

Good afternoon. I am Kristin Miller, Director of the Metro team for CSH, a New York City-based nonprofit that finances, provides expertise and advocates for supportive housing.

As everyone in this chamber is aware, developers scale considerable hurdles to build supportive housing for people facing homelessness in New York City. They must locate available and affordable properties, cobble together financing from the City, State and myriad other sources, woo the community, and line up the special services needed by residents.

Given these considerable challenges, it is imperative for each member of this Council to become a champion of supportive housing in your districts and neighborhoods, helping us to educate our fellow New Yorkers on the value that quality supportive housing brings to everyone who lives, works and visits in this City.

It is not easy being a proponent. There are a great number of myths surrounding affordable, supportive housing and NIMBYism is a strong current to swim against. But the evidence is on our side. It has been proven time and again the only way to truly address the needs of homeless individuals and families is with strategic efforts to create more affordable, supportive housing throughout the City.

Given the labyrinth developers must navigate, supportive housing creation does not always happen as quickly as we would like it to unfold. All the more reason why your support and community buy-in becomes important.

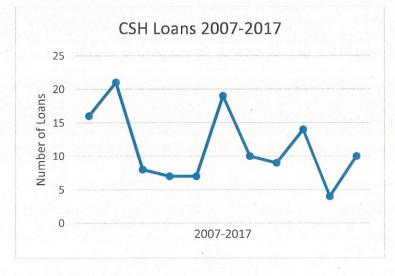
When unfounded fears and biases add months – and in some cases years – to an already timeconsuming process, whole projects and the chance to move more New Yorkers off the streets can be lost forever.

Mayor de Blasio has earmarked additional and substantial resources to create supportive housing because he understands the challenges and solution.

Timing is becoming more of a consideration as new avenues for the development of supportive housing open up. As NY/NY III has wound down, we are seeing greater and greater interest in accessing the additional resources committed by the de Blasio Administration.

In the years 2012-2015 as NY/NYIII was at its height, CSH closed an average of 13 loans per year (\$17.7 million). Then, as the initiative was ending in 2016, we had a dramatic decrease

and closed only 4 loans (\$11.8 million). Once the NY4 initiative was agreed upon, we once again saw a great uptick, closing 10 loans (\$21.6 million) in 2017. So far this year at CSH, for example, we have 30 NYC supportive housing projects at various stages of our loan process. This translates to the creation of up to 1,500 new supportive housing units and 3,000 new units in our pipeline for individuals and families desperately in need of affordable housing with supports.



And the strategic elements are falling into place as well. As co-chair of the New York City Continuum of Care Coordinated Assessment & Placement System or CAPS Steering Committee, I can share with you the progress to better match those in need directly to supportive housing.

CAPS is a system that will streamline the process by which people access housing in NYC. The system is being designed by a dedicated group of public sector agencies and non-profit organizations collaborating to develop the scope and strategy for implementing HUD-mandated coordinated entry for homeless persons in New York City. Coordinated entry is an approach to ending homelessness that requires comprehensive coordination of all housing and service resources in a community to ensure people experiencing homelessness are matched with the appropriate permanent placements, thereby leveraging efficiently and effectively available supportive housing. Analysis of CAPS activities will provide the city with more information on our housing placement process and the gaps and needs for housing in NYC.

As we work together to push out more resources and ensure they are used to house as many as possible, we, more than ever, need your voices of support to be loud and decisive. Help us dispel the concerns, answer the questions, and move supportive housing forward in every borough of the City.



FOR THE RECORD

245 West 29th Street, Suite 902 New York, NY 10001 T 646.624.2341 F 646.624.2301 www.jerichoproject.org

New York City Council Testimony to the Committee on General Welfare April 24th, 2018 By Jericho Project

I am Tori Lyon, CEO of the Jericho Project, a nonprofit provider of supportive housing and other programs for homeless individuals and families in New York City. Thank you for allowing me to testify today.

I was honored to serve on the Mayor's Supportive Housing Task Force that helped to guide the implementation of the NYC 15/15 Initiative. I feel that Jericho and other providers on the task force were heard, and that our recommendations were incorporated into the final program. New York City continues to lead the nation in its production of supportive housing, and I am grateful to the Mayor and the City Council for championing this successful model.

Jericho currently has 544 permanent supportive housing units in its portfolio, which include NY-NY II, NY-NY III, the NYC 15/15 initiative, as well as general homeless units. Jericho has two 15/15 contracts to date, and our direct experience with these contracts will be the focus of my testimony today.

Walton House, Jericho's new supportive housing project at 2065 Walton Avenue in the Bronx, was awarded a 33-unit services contract last year for young adults ages 18 to 25. There are also an additional 56 units for veterans, which were awarded HUD-VASH vouchers through NYHCA and capital funding from HPD. We have identified all tenants, and move-ins will start next month. This will be the first congregate project opening with 15/15 funding.

The services funding awards for young adults are very competitive, and we have been able to develop a rich service program that will enable young adults to achieve independence and thrive as they enter adulthood. The new centralized referral process has been extremely effective. 2010e applications were able to get completed and approved quickly, and interviews were coordinated closely with City agencies. Jericho followed a "Housing First" approach to rent up, and did not reject any referral that chose to continue the application process.

Jericho's second 15/15 award is a 35-unit scatter site contract for chronically homeless single adults, with a contract start date of July 1, 2017. Again, the services funding under the 15/15 initiative were competitive and adequate, and we are able to maintain a low caseload ratio, which is crucial for scatter site programs where case managers need to meet tenants in their homes throughout the City.



However, the rental side of the 15/15 scatter site program has been more challenging. The rents allowable under our contract are significantly below the Fair Market Rents. That reality, together with the scarcity of studios and one bedrooms as well as competition with many other programs, has made rent up stall. We have been forced to rent two bedrooms and put two unrelated people in apartments, which is more programmatically difficult. The City needs to consider raising scatter site rents to be competitive with Fair Market Rent. While we understand that this may contribute to continued increases in rent, without a competitive rate, the scatter site program is not viable for providers.

..

Finally, I would like to make a couple of points about the application and contracting process: the RFP process was very good, and awards were made quickly. This is important because many funding sources need to see a services award in place before closing on the financing. In addition, the City has been very flexible in making the program work with various other funding and subsidy sources. However, the lengthy contracting and payment process continues to be a real challenge, especially when providers agree to start services before the contract is registered.

As a provider, I remain very grateful to the City Council and the City agencies for making this resource available as a vital tool to help address homelessness for New York City's most vulnerable citizens. Thank you.



FOR THE RECORD

HOMELESS SERVICES UNITED 446 W. 33RD STREET, 6TH FLOOR NEW YORK, NY 10001-2901 T 212-367-1562 www.HSUnited.org

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

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

Good afternoon, my name is Catherine Trapani and I am the Executive Director of Homeless Services United (HSU). HSU is a coalition of 50 non-profit agencies serving homeless and at-risk adults and families in New York City. HSU provides advocacy, information, and training to member agencies to expand their capacity to deliver high-quality services. HSU advocates for expansion of affordable housing and prevention services and for immediate access to safe, decent, emergency and transitional housing, outreach and drop-in services for homeless New Yorkers.

Homeless Services United's member agencies operate hundreds of programs including shelters, drop-in centers, food pantries, HomeBase, and outreach and prevention services. Each day, HSU member programs work with thousands of homeless families and individuals, preventing shelter entry whenever possible and working to end homelessness through counseling, social services, health care, legal services, and public benefits assistance, among many other supports.

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

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

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

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

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

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

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

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

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

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



FOR THE RECORD

Craig Hughes, MA, M. Phil, LMSW hughes.crai@gmail.com

Testimony of Craig Hughes

Re: Oversight, Supportive Housing Re: Intro-147

Hon. Steven Levin Committee on General Welfare New York City Council April 24 2018

Testimony Sections

- 1. Amplifying the discussion for a right to housing
- 2. Supportive housing and creaming
- 3. Looking at the data
- 4. The referral wheel: Churning via supportive housing rejections
- 5. Municipal outreach, safe havens, and stabilization beds stand out
- 6. Housing First
- 7. Intro-147
- 8. Fair Hearing Rights, Creating a Tenant Bill of Rights and Training for LGBTQI Competency
- 9. Conclusion

Thank you, Chair Levin, and members of the committee on General Welfare, for the opportunity to testify before you today. My name is Craig Hughes and I am a social worker and researcher who has worked in social services in New York City for about a decade, overwhelmingly with individuals and families experiencing homelessness. I am testifying in support of Intro-147, with a critical eye toward how gatekeeping the resource of supportive housing functions in New York City.

I should also note that I live in a block with both a stabilization shelter and a supportive housing building. This matters in that I certainly make the argument, throughout this testimony, that there must be more Council oversight over the supportive-housing-rejection process because supportive housing needs to work for the most vulnerable – it needs to house those seen as requiring substantive assistance. I'd certainly support individuals struggling the most being placed on my block.

We Must Amplify and Grow the Discussion About a Right to Housing

It may make the most sense to begin by saying what we are *not* talking about. In a City where the commodification of housing is at pinnacle levels, where housing is often used as a source of investment and conspicuous capital, it serves as an irony that the administration that bills itself as the most progressive New York City has seen in decades – and depending on source of the rhetoric, perhaps ever – we are *not* generally talking about either the decommodification of housing or housing as a basic right. The latter discussion has gained some traction in human rights and academic circles, and we are seeing the emergence of grassroots progressive initiative within that realm, but New York City government has made only marginal effort to make a serious discussion of this.¹

The reality is that we would likely not have to have discussions of parsing limited resources, like supportive housing, if we began from a framework that there should be a basic assumption of housing; a basic right *to* housing. If we started from an assumption that every human being deserves a home, we would be in a very different place.² For supportive housing beginning this process this might look like moving from an "interview" process to an "intake" process for every eligible applicant.

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¹ The Department of Housing Preservation and Development's (HPD) recent support of Community Land Trust – the result of organizing by homeless and other housing advocates – was a significant step. The growth of Community Land Trusts more generally provides strong direction for the City. See: "Enterprise Awards New York City \$1.65 Million to Support the Formation and Expansion of Community Land Trusts," HPD Press release, 7/19/2017: <u>http://www1.nyc.gov/site/hpd/about/press-releases/2017/07/07-19b-17.page</u>

² A couple of useful resources to begin this discussion would include: Peter Marcuse & David Madden, *In Defense of Housing: The Politics of Crisis* (Verso, 2016); National Economic and Social Rights Initiative (NESRI), "Rights Based Urban Development," <u>https://www.nesri.org/initiatives/rights-based-urban-development</u>;

Supportive Housing and Creaming

With that, the City continues to deal with austerity politics with a focus on incentivizing the business of private developers. And it is within that world that supportive housing has thrived – it is, undoubtedly, a great example of the best a private/public intersection can offer. Further, there is ample reason to believe that supportive housing has saved the lives of many thousands of individuals by providing safe, typically affordable, housing from which individuals struggling at high levels can stay. Most of this housing is intended for individuals with serious and persistent mental illness, though some has gone to other populations.

Unfortunately, as evidenced in part by the examples in this testimony, and as I can testify to from experience assisting individuals in the supportive housing application process, those struggling the most may often find themselves rejected for that exact reason. The reality is that supportive housing providers and landlords – who are often the same entities, or maintain close-enough daily working relationships to sync in practice – often abuse their discretion in making decisions with deep consequences about providing or not providing housing.

In his classic political science work *Street-Level Bureaucracy*, Michael Lipsky defined the concept of creaming, and he did so directly in relation to insufficient resources:

Confronted with more clients than can readily be accommodated streetlevel bureaucrats often choose (or skim off the top) those who seem most likely to succeed in terms of bureaucratic success criteria. This will happen despite formal requirements to provide clients with equal chances for service, and even in the face of policies designed to favor clients with relatively poor probabilities of success. [...] Why does creaming take place, particularly in the face of official opposition to the practice? In every case of creaming the agency's incentives reward successes with client clients, but they provide no substantial rewards for the risks taken.³

Lipsky's concept is apt for what we know happens with supportive housing. Indeed, "creaming" in the supportive housing process is a sort of open secret.

In this hearing you will likely listen to providers who tell you they aren't provided enough service dollars to manage their work, and this is undoubtedly

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³ Michael Lipsky. 1980. Street-level Bureaucracy: Dilemmas of the Individual in Public Service. 30th Anniversary edition. New York: Russel Sage, p. 107.

true.⁴ But what data that has been FOIL'd tells us, and what I've learned in practice, is that the issues of taking discretionary choices too far includes but goes beyond a simple issue of dollars and cents. Rather, it gets into areas of abusing gatekeeping authority over housing via hyper-subjective assessments and decisions by service professionals and property management agencies that brings up many questions about who and how decisions are made in the distribution of supportive housing slots and resources. Creaming prevails, but creaming is adjoined by disability discrimination, and a host of other serious issues.

Indeed, creaming is, unfortunately, an insufficient concept to grasp what exactly is occurring on the ground with supportive housing referrals. Another key conceptualization, which helps fully grasp what is going on, is provided by Ivan Illich. Illich argued that professionalism wasn't defined just by training, but rather had directly to do with the authority professionals administered. He argued,

Professionals tell you what you need and claim the power to prescribe. They not only recommend what is good, but actually ordain what is right. Neither income, long training, delicate tasks nor social standing is the mark of the professional. Rather, it is [their] authority to define a person as client, to determine that person's need and to hand the person a prescription. This professional authority comprises three roles: the sapiential authority to advise, instruct and direct; the moral authority that makes its acceptance not just useful but obligatory; and charismatic authority that allows the professional to appeal to some supreme interest of [their] client that not only outranks conscience but sometimes even the *raison d'etat.*⁵

Indeed, what seems to be occurring likely lies at the intersections of these insights of Lipsky and Illich. And what it points to is (a) a need for more funding and (b) a need for controls over the decision making at the front door of the supportive housing system. At the least, it calls for Council oversight over the rejection process to ensure that blatantly offensive and discriminatory decisions are not allowed.

Looking at the Data

Data FOIL'd by Legal Services New York City (LSNYC) and subsequently provided to a group of advocates showed some alarming results in preliminary

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⁴ Because I suspect this will comprise a significant amount of testimony, I will not address the need for more funding here. Nonetheless, it is decisive to note that funds for services are far too low and desperately need to be increased.

⁵ Ivan Illich. 1977. "Disabling Professions." In *Disabling Professions*, eds. Illich, Zola, McKnight, Caplan, Shaiken. New York and London: Marion Boyars, p. 19.

analysis, which was conducted by Stout Risius Ross Advisors, LLC. The FOIL'd data covered supportive housing interview-referral results between 2013-2016. Take for example results of interview referrals for Population A of the New York/New York III supportive housing agreement. This category of housing, which provided the largest number in the agreement, is intended to serve individuals who are chronically street-or-shelter homeless, and have a diagnosed serious and persistent mental illness (SPMI). Within this category, of a total of 8,954 referrals approximately 15.5% of interviewees were rejected because they were deemed by assessors, on the spot, to need a higher level of care, were struggling with too intense of a mental illness, were experiencing suicidal ideations, or lacked "insight" into their mental illness. Some qualitative examples, randomly picked, illustrate this situation:

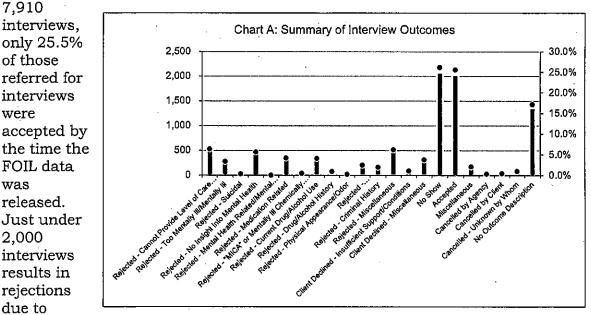
- "[Interviewee] Declined Applicant was acting bizzare during the interview process and responding to internal stimuli, laughing without reason. Applicant was also guarded with information in regard to her mental health and substance abuse history."
- "[Interviewee] Rejected Clt does not display the ability to live independently, has poor insight into his mental illness and requires a higher level of care. Clt has a long history of substance abuse and has only recently become sober, has not sufficiently displayed an ability to remain sober"
- "[Interviewee] Rejected Clt has poor insight into mental illness, minimizes personal responsibility for any problems in his life. Clt has been sober for a short time but does not display the ability to remain sober or live independently. Clt requires a higher level of care"
- "[Interviewee] Rejected- Client was disoriented during the interview. He has no insight into his mental illness. He was limited in his ability to express any independent living skills. Client's sobriety is unclear"
- "[Interviewee] Rejected-needs a higher level of care. client had no insight into his mental illness and substance abuse."

It is important to note that at the time of interview the City's Human Resources Administration (HRA) had already made an evaluation based on a psychiatric evaluation, a psychosocial and other information provided in each application. Yet, on the spot, providers made snap decisions that kept housing from clearlystruggling individuals who had already been found eligible by the City. The Department of Homeless Services [DHS] has been responsible for overseeing the process by which providers interact with the interviewing agencies, and sent these reasons by email – meaning they are fully aware how this process was repeatedly occurring.

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Take the denials for Population A applicants (Chart A).⁶ These are individuals who the City has already deemed eligible for Population A housing. Of the



issues directly related to their mental health or substance use. Perhaps the most egregious of these examples – which were small in number (18) but perhaps clarify the point in their extremity – were those rejected because they were deemed to have a problematic physical appearance or were malodorous. A few examples help make this point:

- "[Interviewee] Rejected Clt minimizes substance abuse history, reports background that differs from provided summary, is disheveled and malodorous. Clt has poor insight regarding his mental illness, requires a higher level of care."
- "[Interviewee] Rejected/ Client was disheveled; presented as minimally engaged with interview; minimized the use of substance abuse and how it has effected his life."
- "[Interviewee] Rejected/ Client clearly symptomatic/disheveled with poor insight his mental health illness."

Clearly the individuals mentioned above might take some extra patience and care to support, but are these reasons truly reasonable to keep someone already deemed eligible by New York City's social service arm for supportive housing, from accessing that supportive housing?

Unfortunately, the older New York/New York I & II units don't appear to be faring much better. Of 4,689 referrals from DHS, and 4,044 known interviews,

⁶ The City did not de-duplicate this data, meaning interview outcomes (or lack thereof) could include the same person more than once. Additionally, some rejections were categorized in multiple categories.

only approximately 16.1% were accepted for placement at the time the FOIL's were received.⁷ Of these who were interviewed, more than 1,000 interviews resulted in

denials for Chart B: Summary of Interview Outcomes NY/NY | & !! reasons 1,200 30.0% directly related to their mental 1,000 25.0% illness. 800 20.0% including needing a 600 15.0% higher level of 400 10.0% care, showing symptoms of 200 5.0% their mental 0.0% illness, lacking insight into their mental health, experiencing suicidality. matters related to their medication, substance use

issues or their appearance.

<u> The Referral Wheel – Churning via Supportive Housing Denials</u>

What this data often shows is that supportive housing applicants are often put in a kind of referral wheel, sent from place to place but without being *placed*. Providers often make informal redeterminations from what clinical staff with the City has already determined and reject applicants via surface-level assessments. Saying someone lacks "insight", or has too close a relation with intoxicating substances, or simply "needs a higher level of care" are the supportive housing versions of tightening the front door that we've seen in welfare centers and in the worst days of the municipal shelter family intake system. These kinds of push-away and churning mechanisms are not appropriate for some of the most vulnerable among us and should be monitored and halted.

Again, we should be quickly moving from an "interview" to an "intake" process for *all* eligible applicants. Additional steps would include thorough implementation of comprehensive harm reduction approaches to supportive

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⁷ The City did not de-duplicate this data, meaning interview outcomes (or lack thereof) could include the same person more than once. Additionally, some rejections were categorized in multiple categories.

housing services and increased use of ACT teams. Finally, there is no clear reason why supportive housing application's should lapse – applications should remain active until the individual is housed.

Municipal Outreach, Stabilization and Safe Haven Rejections Stand Out

As is well known, New York City's estimate of the street outreach population substantially increased in 2017. With such a deeply flawed approach to tallying street homeless people – one that systematically downplays how many people live on City streets – there is ample reason to think that the City should have consistently been focused on closely scrutinizing denials for any individual referred from outreach providers or stabilization or safe haven beds.⁸ And yet, many of these individuals find themselves rejected for reasons with questionable validity, as well. Again, these are individuals already deemed eligible – by trained clinical staff at HRA – for certain types of supportive housing, for which they are then referred to interviews for. A random handful of Safe Haven rejections will make this point:

- "Rejected, due to history of noncompliance and actively using substances. I am Recommending level 11 setting with mica services to assist with substance issues and symptoms management. Client preference is Manhattan."
- "Rejected Clt refuses to take medication, noncompliant with medical treatment. Clt stated he is currently drinking a pint of rum a day."
- "Rejected-requires higher level of care
- "[O]wes arrears to HPD, therefore no. otherwise wouldve been a good candidate
- "[N]o. Section 8 arrears"
- "[Interviewee] Rejected Clt stated she has been homeless since the age of 17. Clt has no insight into mental illness, refuses medication. Clt has a chronic history of substance abuse and criminal activity. Clt needs a higher level of care."

Municipal outreach examples are also telling:

- "Rejected. Applicant presented with poor insight into his illness; he was unable to appropriately answer questions. Recommend a 24hr facilty with more structure."
- "Rejected provided inconsistent information about his diagnoses and his medication. [Interviewee] stated that he does not have an Axis I

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⁸ On the HOPE effort, see: Carl Bialik, "Is New York City Undercounting Its Homeless Population?", *Wall Street Journal* 6/8/2007: <u>https://blogs.wsj.com/numbers/is-new-york-city-undercounting-its-homeless-population-123/;</u> Emma Whitford, "Annual Street Homeless Count Shows 40 Percent Increase Over 2016", 7/7/2017: <u>http://gothamist.com/2017/07/05/homeless_count_2017.php;</u>

diagnoses and that the information that we were asking about was false. [Interviewee] also stated that he was not previously hospitalized for psychiatric reasons in Cuba when his intake packet stated he was. [Interviewee] also stated that him hearing voices was false that sometimes he just thinks inside his own head which can be confused as him hearing voices. [Interviewee] also stated that he does not have a substance abuse problems [...] refuses to attend AA/NA meetings because he is not an alcoholic. [Interviewee] also provided inconsistent information about the previous inpatient substance abuse programs he has attended stating that he has never been to these places. We believe this client needs a much higher level of care."

- "Applicant denied. Applicant presented with poor insight illness and treatment. Team recommends a smaller setting with more structure."
- "Rejected presented with delusions, concern for daily living skills, lack insight into mental health symptoms"
- "Rejected. Client's presents as psychiatrically disorganized and unfocused. He needs more support than it can be provided at [housing building]. Information regarding his finances is inconsistent..."
- "Rejected- Client was unable to fully respond to questions during the interview as her thoughts were disorganized and she responded inappropriately to basic interview questions."

Housing First

In their recent work *Housing First: Ending Homelessness, Transforming Systems and Changing Lives*, Padgett, Henwood and Tsemberis critique the traditional "staircase" or steps model to housing: get sober, get treatment and *then* get housing. Rather, the authors *begin* from the premise that "having a home is the route to a better life." They then propose a housing first system whereby permanent housing is offered as the initial "step" and a client can selfrequest other "steps"/supports if needed. There is substantial evidence to support this approach to supportive housing.⁹

The authors of the aforementioned study noted a preceding study they had been involved in. They explained,

One of the most powerful messages given to incoming clients in non-[Housing First] programs is that permanent independent housing is within their grasp if they comply with program rules and prove themselves "housing ready" – anywhere from six months to two years is the typical window of time given to them upon program entry. We found in interviews that [case managers] in the non-HF programs spent much of their time preparing their clients for the next step up the staircase.

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⁹ Deborah K. Padgett, Benjamin F. Henwood, Sam J. Tsemberis. 2016. Housing First: Ending Homelessness, Transforming Systems, and Changing Lives. New York: Oxford University Press.

not, as expected, focusing on treatment for mental illness or substance dependence.¹⁰

These researchers found that case managers in housing first programs "were *more* likely to address their client's needs – treatment and otherwise – because they were already stably housed." This isn't shocking from the perspective of common sense: if you provide housing to someone, then a base survival need is met, which allows them other opportunities and room to make other decisions in their lives that may have been previously much more difficult.

<u>Intro-147</u>

Intro-147 does not alter the supportive housing system. It does nothing more than demand some transparency from the Department of Social Services and, implicitly, the supportive housing industry. As the examples above show, there is a deep need for some sunlight. The City already collects this data, so it is entirely conceivable to provide it in report to the Council. Components of the proposed report are discussed below.

- **Subsections 1-4, 6:** DSS already collects this data, though may have to devise a way to more specifically collect and aggregate how long someone has been homeless.
- Subsection 5: DSS already collects this data, though may have to devise a way to more specifically collect and aggregate how long someone has been homeless and will need to devise a way to report on the qualitative denial reasons. A major risk here is that the qualitative denial reasons provided following interviews are turned into pre-chosen drop-down menus for providers that masks creaming resolve it. Accordingly, DSS should not be allowed to simply streamline the denial-reason process in a way that provides less data than was available, for example, in FOILs mentioned above.
- Subsection 7: DSS already collects this data, though may have to devise a way to more specifically collect and aggregate how long someone has been homeless and will need to devise a way to report on the qualitative denial reasons. A major risk here is that the qualitative denial reasons provided following interviews are turned into pre-chosen drop-down menus for providers that masks creaming resolve it. Accordingly, DSS should not be allowed to simply streamline the denial-reason process in a way that provides less data than was available, for example, in FOILs mentioned above.
- **Subsection 8:** DSS could provide a snapshot of this data but this request would be more useful if it considered all individuals' applications who have expired in a given year, how many times individuals with

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¹⁰ *Ibid*, p. 124.

expired-applications from the given year applied, and whether said individuals are still waiting for housing or have another outcome.

Fair Hearing Rights, Creating A Tenant Bill of Rights and Training for LGBTQI Competency

There is a significant need for a redress mechanism for applicants denied supportive housing. Supportive housing applicants cannot appeal their denials accept through informal HRA channels. When a single official says "no" that is the end of the line. This is, at best, insufficient. Supportive housing applicants should be able to appeal eligibility denials or placement denials, expeditiously and with an advocate present.

There is also a desperate need for supportive housing tenants to be systematically informed of their tenant rights and for oversight of providers and landlords' use of pushout mechanisms.

A supportive housing tenant bill of rights would include, at the least, the following: rent stabilization status; building tax abatement and exemption information; right to defend themselves in Housing Court; right to enforce the Housing Maintenance Code; the right to be free from discrimination and request reasonable accommodations; and the right to have family and roommates.

Further, there must be ongoing trainings are supportive housing buildings to ensure that tenants who are LGBTQI are protected from discrimination, including but not limited to training all staff on LGBTQI sensitivity and competency.

Conclusion

Thank you for your time today. I look forward to answering any questions you might have.

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Testimony of

Jamie Powlovich Executive Director Coalition for Homeless Youth

Before the

The New York City Council General Welfare Committee

On

Oversight – New York City 15/15 Initiative & Int. 0147-2018

April 24, 2018

Introduction

Good afternoon. My name is Jamie Powlovich, and I am the Executive Director of the Coalition for Homeless Youth (CHY), also known as the Empire State Coalition of Youth and Family Services. CHY has advocated for the needs of runaway and homeless youth (RHY) for nearly 40 years. The coalition is comprised of 60 providers of services to homeless youth across New York State, including 29 members in New York City. Our members include both providers of supportive housing and programs that refer homeless youth into supportive housing.

I would like to thank Chair Levin and the members of the General Welfare Committee for holding today's hearing. I appreciate being given the opportunity to testify before you today, and CHY commends the council for scheduling this much needed hearing on supportive housing.

Background

New York City has never adequately supported the needs of homeless young people or the providers that serve them. Although under the current Administration many positive steps have been made, we are still only touching the surface of meeting the need. Runaway and homeless youth, as a population, are young people between the ages of 16 and 24, who have unique developmental needs and often fall between the cracks of the State's child welfare and adult homeless systems. DYCD contracts with various social service agencies to provide short-term crisis shelters, transitional living programs, drop-in centers and street outreach programs which offer food, shelter, case management, mental and medical health care, educational and vocational programming, legal services, programs for young mothers and a multitude of other services. Many homeless young people have previous trauma and experiences with the juvenile and adult criminal justice systems;¹ a large percentage of youth have had both positive and negative experiences in foster care;² many lack a high school diploma or employment,³ and all have experienced neglect by the systems and adults that were supposed to support them and guide them into adulthood. For too long providers have struggled to meet the needs of the homeless youth in New York City with insufficient resources. Although the actual current number of homeless youth in NYC is unknown, a 2007 study by CHY and Columbia University estimated that on any given night there are 3,800 homeless youth sleeping on the streets of New York City.⁴ However, there are currently only 557 beds to offer them⁵.

Although providers have reported that the needed increase in beds has resulted in a significant reduction in monthly turnaways, DYCD has still not shown that it is able to provide beds for all youth seeking shelter. On the ground, agencies are still left in the heart-wrenching position of having to turn away youth who are seeking services due to lack of capacity. When a bed in a youth shelter is not available, providers are forced to refer youth to adult homeless shelters that are not developmentally appropriate, do not

¹Covenant House. 2014. "Homeless Youth - What We Know..." Available at: http://ny.covenanthouse.org/homeless-youth-what-we-know; Empire State Coalition of Youth and Family Services. 2008. "A Count of Homeless Youth in New York City." Available at: http://www.citylimits.org/images_pdfs/pdfs/HomelessYouth.pdf.

² Ibid. ³ Ibid.

⁴Empire State Coalition of Youth and Family Services. 2008. "A Count of Homeless Youth in New York City." Available at: http://www.citylimits.org/images_pdfs/pdfs/HomelessYouth.pdf.

⁵ Email correspondence with Department of Community Development, dated 4/23/18

provide the comprehensive wraparound services offered by RHY programs and put the young person at risk of exploitation and physical risk. Additionally, youth continue to be reluctant to go to adult shelters out of fear, and not feeling confident that their needs will be met. Instead, many youth who are unable to access services spend their nights on the streets, in abandoned buildings or riding the subways, or risk sexual exploitation in order to gain a place to stay.

Equally as concerning as the amount of youth that are left without access to age appropriate shelter resources while homeless, is their lack of access to safe, permanent housing so that they can successfully exit homelessness. Currently, homeless youth are one of the only homeless sub-populations in New York City that has not been given access to almost any permanent housing options to exit homelessness. Youth relying on DYCD's homeless youth programs have no access to local housing subsidies like LINC. These young people do not receive any priority access to NYCHA units, or priority access to Section 8 subsidies. Youth eligible for supportive housing also face significant barriers to accessing a unit. This reality leaves too many very vulnerable young people cycling in and out of homelessness.

While we acknowledge the strength of New York City's strong, long-term commitment to providing supportive housing, data shows that it is failing at providing permanent housing to homeless young people exiting DYCD programs. City data obtained by CHY via FOIL from DYCD shows that from July 2017 through January 2018 about 2% of youth discharged from DYCD Transitional Independent Living Programs (TIL) successfully moved into Supportive Housing. This is compared to less than one percent of those discharged from DYCD crisis beds meeting the same outcome (19 out 1904 discharges). Although Supportive Housing supported 26 young people in exiting homelessness in the timeline outlined above, there were countless more that were discharged to the street, the adult homeless system and other non-permanent placements, that did qualify, but never got accepted.

New York City 15/15 Initiative

CHY commends the city for its commitment to increasing the amount of supportive housing beds that will be set-aside for young people within the new city Supportive Housing initiative, NYC 15/15. Out of the 15,000 new supportive housing units that are expected to be developed by 2030, there will be a set-aside of nearly 1,700 units for young people. For singles, there will be 989 congregate units and 247 scatter-site units, and for pregnant and parenting youth, 361 congregate units and 90 scatter-site units.⁶ This is a drastic and much needed increase from the only 400 permanent supportive housing beds for youth provided under the NY/NY III supportive housing agreement between NYC and NYS. However, CHY has significant concerns regarding the new Coordinated Assessment Placement System (CAPS) being used to prioritize individuals for placement in support housing, more specifically the proposed handling of homeless youths' confidential information that is outlined in the NYC CAPS Policy & Procedure Manual as well as in consent forms CAS-700 and CAS-701.

CHY made numerous attempts to work collaboratively with the CoC to make sure that youth specific concerns were raised earlier in this process, and to support in making the necessary changes.

⁶ New York City Coalition on the Continuum of Care. "Application for Youth Housing Demonstration Program." Submitted to HUD 4/17/2018, in authors possession

Unfortunately, our requests to be a part of both the CoC CAPS Steering Committee as well as the CAPS Working Group focused on youth were both denied. In addition, we sent our concerns directly to the Human Resources Administration (HRA), but are still waiting for a response. We have outlined these concerns below.

NYC CAPS Policy & Procedure Manual

Barriers for Youth to Access Housing

The current Standardized Vulnerability Assessment (SVA) creates a significant barrier to homeless youth being able to achieve a "High" scoring, and therefore prevents them from being given priority access to safe and supportive long-term housing. The clear majority of RHY are able bodied individuals who do not frequently utilize the systems that would qualify them for priority placement. Youth that we would consider the most vulnerable, and therefore the intended population, do not regularly utilize the systems being tracked at all. Although it is our understanding that the youth-specific Vulnerability Assessment Tool (SAV) is still being designed, we believe that in order to make it beneficial to the most vulnerable RHY, it must include a method for service providers to document a youth's "vulnerable" status, and not rely solely on system utilization data. Furthermore, our members report that HRA does not give more than one homeless systems contacts to young people who receive services from both DHS and DYCD RHY programming (ie living in a DHS shelter but receiving RHY services at a DYCD Drop-in). They consider this "double counting" homelessness. This means that the city is only prioritizing those individuals who regularly access high cost services, who are costing the city the most money in supports, which ignores those who do not and are in need.

DYCD Sharing Identifiable Data with Other City Agencies

As per Appendix A: CAPS Implementation Timeline, Phase I, HRA will begin the "Planning and implementation of additional data feeds, including the Department of Youth and Community Development (DYCD)." During a CAPS Demo for RHY provides at HRA on January 5, 2018, DYCD staff confirmed that the "data" that would be shared would include youths' names, dates of birth, social security numbers and program utilization information. This was again confirmed in the New York City Coalition on the Continuum of Care. "Application for Youth Housing Demonstration Program." Which states that "Coordinated Assessment Placement System (CAPS) for young people 18 years old and older. Through CAPS, the Coordinated Assessment Survey (CAS) is available to all users of the homeless database in NYC – 13,000 individual users, 3,000 programs and over 1,000 agencies. NYCCoC is preparing to implement the CAS at more intake points including HIV/AIDS (HASA) shelters and Domestic Violence shelters. In addition, the CoC is working to integrate Veterans data into CAPS and working with DYCD to pull previous RHY homeless data into CAPS so that all previous stays in youth shelters would be counted in history of homelessness. NYC is using a Standardized Vulnerability Assessment (SVA) in CAPS and by the end of 2018 will have one specific for youth.⁷" The following is the statutory and regulatory language that prohibits the proposed disclosure of information:

NY Executive Law, Article 19-H (the NY Runaway and Homeless Youth Act (NY RHYA)), § 532-e: "The office of children and family services shall: (e) develop and promulgate ... regulations ...

⁷ New York City Coalition on the Continuum of Care. "Application for Youth Housing Demonstration Program." Submitted to HUD 4/17/2018, in authors possession

prohibiting the disclosure or transferal of any records containing the identity of individual youth receiving services pursuant to this section, without the written consent of the youth."

NYS Office of Children and Family Services (OCFS) regulations further clarify the prohibition in:

9 NYCRR § 182-1.6(a) : "The disclosure of records or files, in whole or in part, pertaining to youth who are or have been in a runaway program, to any person, agency or institution is prohibited."

9 NYCRR § 182-2.6(a): "The disclosure of records or files, in whole or in part, pertaining to youth who are or have been in a transitional independent living support program, to any person, agency or institution is prohibited."

The only exceptions to this confidentiality requirement are for the purposes of reporting suspected child abuse or maltreatment, or where a youth has given written consent. As such, the proposed data feed is in clear violation of the NY RHYA and applicable regulations.

Consent Forms & Security

We appreciate the city's attempt at creating a method for individuals in need of housing to have control over their personal information. The new consents (CAS-700 and CAS-701), although very similar to the original 2010E consent, are not appropriate for homeless young people, as they do not comply with either the basic standard of informed consent or the NY RHYA statute and OCFS RHYA regulations. These consents are blanket consents. Blanket consents are inappropriate for a number of reasons, including that they do not provide an opportunity for the youth to have truly informed consent. In order for consent to be informed, and therefore a valid consent, a competent individual must be provided with sufficient information upon which to make a reasoned decision. A blanket consent form does not comply with the basic principles of informed consent or HIPAA, nor does it comply with the more rigorous requirements found in the Runaway and Homeless Youth regulations as indicated below.

CHY is not an expert on privacy or the Health Insurance Portability and Accountability Act (HIPAA), but consent forms CAS-700 and CAS-701 raise general concerns about the breadth of the consent being given. For example, we do not believe even a public health authority is permitted to do a compound authorization for things like psychotherapy notes, and the list of entities who would have access to the information shared is much broader than public health entities. We do know the sharing of any identifying information about youth who are in or have been in a program for runaway/homeless youth is strictly prohibited by both statute and regulation.

The applicable regulations provide:

9 NYCRR §§ 182-1.6 and 182-2.6. Confidentiality.

(b) Where necessary for the provision of services to youth in program, information may be released only upon receipt of written consent from the youth, including the following information: (1) the youth's name; (2) the name of the person authorized to release the information; (3) the name of the person authorized to receive the information; (4) the specific

information to be disclosed; (5) the specific purpose for release of the information; (6) the date, signature of the youth and the signature of at least one witness, who may be an agency representative; and (7) the period during which the consent for release of information is effective.

Thus, the RHYA law requires specific, individualized consent. Other forms of "consent" fail to provide sufficient information to comply with even the basic standard of informed consent.

Although consent forms CAS-700 and CAS-701 do list an expiration date, we find that a date 10 years from when the consent is signed unacceptable. HIPAA does require an expiration, which can be a date or an event, but its customary in the RHY community to have consents expire within one year. The fact that this consent would allow for the youth's information to be available in a city system for a decade is unethical and potentially unsafe. At the meeting on 1/5/18, it was also confirmed that all a person would need to access a youth's confidential information, including past 2010E applications, psychiatric evaluations, bio-psychosocial information, vital documents, housing history and HRA records, would be a PACT log-in, a youth's name and DOB. At this time, there is no security in place that would limit access to a youth's information to those persons working directly with that youth. This poses extreme concerns for youth who are involved in abusive relationships or have parents who work in agencies where they have PACT access, among other scenarios in which someone could access their information and use it for unintended purposes.

Lastly, the consent forms include the ability to release information to universities and other research hubs, but it is unclear what information would need to be shared with these entities and why. Nowhere in the consent forms is the service recipient informed that their information may be used in a research capacity. This could be perceived as the city's attempt to gather data on a population, without their informed consent, and should be removed.

The programs serving runaway and homeless youth in NYC are collectively committed to providing comprehensive services to homeless and runaway youth while maintaining each young person's right to confidentiality, as required by the New York State and federal Runaway and Homeless Youth Acts and any other federal legal requirements.

Int. 0147-2018

CHY is in full support of Int. 0147-2018, who would require DSS to report annually on the "number of individuals referred to, accepted to, rejected for, and still awaiting placement for support housing." At the January 19th, 2017, Supportive Housing Oversight Hearing, CHY testified that the creaming and cherry picking of applicants by providers is a pervasive issue that needs to be addressed. Sometimes young people are denied for supportive housing due to their age, though it's not written that way. Creaming also occurs by screening out applicants through quick, highly-subjective and surface-level claims of issues such as "lack of insight" into his/her or their mental illness, or being "non-complaint" with medication, or because an applicant has a recent history of substance use, or because they are simply deemed too mentally ill. One way of looking at this is that many of those most in need may be least likely to access this resource.

There is a need for oversight of denials and a mechanism to ensure that eligible applicants aren't being inappropriately screened out of permanent housing via questionable assessments. There is also a need for some type of mechanism through which applicants can challenge denials. It is of note that supportive housing denials are not subject to fair hearings or any other administrative procedure of further review. Advocating for a client whose denial appears inappropriate is typically an exercise in futility. Despite improvements to the system, this still holds true.

Conclusion

To conclude, CHY is appreciative for the opportunity to testify before you today. We are hopeful that the concerns outlined in this testimony will be considered, and are available to support in any way deemed appropriate.

Thank you

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