



Legislation Details (With Text)

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Title: A Local Law to amend the administrative code of the city of New York, in relation to monitoring and evaluating homelessness prevention and aftercare programs

Sponsors: Erik D. Bottcher, Jennifer Gutiérrez, Farah N. Louis, Gale A. Brewer, Sandra Ung, Crystal Hudson, Lincoln Restler

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Attachments: 1. Summary of Int. No. 658, 2. Int. No. 658, 3. March 19, 2024 - Stated Meeting Agenda, 4. Hearing Transcript - Stated Meeting 3-19-24

Date	Ver.	Action By	Action	Result
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Int. No. 658

By Council Members Bottcher, Gutiérrez, Louis, Brewer, Ung, Hudson and Restler

A Local Law to amend the administrative code of the city of New York, in relation to monitoring and evaluating homelessness prevention and aftercare programs

Be it enacted by the Council as follows:

Section 1. Chapter 1 of title 21 of the administrative code of the city of New York is amended by adding a new section 21-152 to read as follows:

§ 21-152 Evaluation of homelessness prevention and aftercare services. a. Definitions. For the purposes of this section, the following terms have the following meanings:

ACCESS HRA. The term “ACCESS HRA” means the website, mobile application, and any related or successor platforms through which individuals obtain information about and apply for some HRA benefits and clients obtain some HRA benefits case information.

Case. The term “case” means a matter that is opened upon a determination of a client’s eligibility to

receive services through a covered program and is resolved upon either: (i) delivery of all services for which such client is eligible; (ii) a change of eligibility or application status or availability of new information that renders such client ineligible for further service provision; or (iii) such client's voluntary disengagement with all covered programs for which they are eligible.

Client. The term "client" means a unique individual or household that is assessed for services or receives services from a covered provider.

Covered program. The term "covered program" means a program, including the program known as Homebase Homelessness Prevention Program and any successor program, that provides homelessness prevention services to at-risk clients or assists clients in securing permanent and habitable housing.

Covered provider. The term "covered provider" means an entity that has entered into a contract with the department or the department of homeless services to deliver homelessness prevention and aftercare services through a covered program.

HRA. The term "HRA" means the human resources administration.

Visitor. The term "visitor" means a unique individual or household that contacts a covered provider to inquire about services or eligibility to receive services through a covered program or HRA, whether in person, by telephone, online, or through the use of a mobile device application.

b. Annual report. No later than December 1, 2024, and annually thereafter, the department shall, in coordination with relevant covered providers, submit to the mayor and the speaker of the council and post on its website a report evaluating the outcomes and operations of covered programs during the preceding fiscal year. The report shall include, at minimum, the following information for the preceding fiscal year:

1. Services offered. The report shall describe:

(a) Services offered through covered programs and eligibility requirements for each service, as applicable, including but not limited to outreach, eligibility assessment, advice and assistance, case management for shelter aftercare services, and referrals for legal assistance, financial assistance, mediation

services, training or employment-related services, language access services, or coordination with other programs that serve the same or similar clients;

(b) Number of clients who received each type of service, disaggregated by month;

(c) Number of clients who received upgraded or downgraded services pursuant to an override of the eligibility assessment results, disaggregated by month; and

(d) Average length of client engagement, in number of days, as measured from first contact to case closure;

2. Population served. The report shall include, at minimum, the following information with respect to each covered provider, if known:

(a) List of funding sources available, including a description of each source's eligibility requirements for clients to receive services;

(b) Total number of visitors, disaggregated by month;

(c) The method by which visitors learned about the covered program or other services;

(d) Number of visitors identified as eligible to receive services, disaggregated by month;

(e) Total number of clients served, disaggregated by month;

(f) Demographic information for all visitors and clients, to include race or ethnicity, gender, community district, primary language, income level, family type, and any other information the department deems relevant;

(g) Number of clients represented by legal counsel at time of first contact with a covered provider;

(h) Number of clients represented by legal counsel at time of case closure;

(i) For visitors not served, whether a referral to an alternative agency, service provider, or online assistance platform was offered, and if so to which agency, service provider, or platform they were referred; and

(j) For visitors not served, reason for not receiving services, to include, at minimum, the number found to be:

(1) Ineligible, specifying all applicable reasons for ineligibility; or

(2) Eligible, but did not receive services, specifying all applicable reasons for not receiving services, if known, including, but not limited to (i) became ineligible after being accepted as a client, but before receiving any services; (ii) insufficient staff capacity; (iii) received assistance or referral for assistance from a program or service provider other than a covered program or provider, or an online assistance platform such as ACCESS HRA; (iv) elected not to continue, and reason why, if known; or (v) other reason, to be specified;

3. Program outcomes. The report shall include, at minimum, information about the following:

(a) Average timeframe, in number of days, per client case, measured from a client's first contact with a covered provider to case closure;

(b) Return rates for clients, including average timeframe, in number of days, between case closure and return to the covered program; and

(c) For clients served during the year prior to the preceding fiscal year, rate of client application to enter or entry into shelter within a year of receiving services;

4. Recommendations. The report shall include, at minimum, the following recommendations:

(a) Proposed criteria to monitor and evaluate outcomes of a covered program, including metrics to be measured or data to be collected in the future; and

(b) Recommendations for improving visitor and client outcomes, including by identifying best practices implemented by top-performing covered providers, legal or policy measures to expand eligibility or otherwise improve access to services, and any additional services or interventions that could contribute to improved outcomes for visitors or clients.

5. For all information required to be reported pursuant to this subdivision, if such information is not known, the department shall report on any actions that would be needed to make such information known, including, but not limited to, systems upgrades, additional staffing, and any other actions the department deems relevant.

c. Analysis of contractor performance. No later than December 1, 2024, and every third year thereafter,

the department shall include with the report required pursuant to subdivision b of this section an assessment of each covered provider's contract performance for delivery of the covered program, to include, at minimum, the following information with respect to each covered provider:

1. Overall quality of outcomes for clients and the metrics used to determine quality of outcomes;
2. Work environment in which services are provided, including data on current staffing levels, vacancies, and retention rates, employee pay and benefits structures and trends, ratio of client-facing staff to non-client-facing or support staff, and average case load per client-facing employee for each covered provider;
3. Degree to which contractual requirements to deliver services pursuant to the covered program were met by each covered provider over the previous 3 years;
4. Changes made by covered providers, if any, in response to feedback provided by the department over the previous 3 years;
5. Methodology for data gathering, retention, review, and analysis, including, but not limited to, regular audits, in relation to each covered provider; and
6. Identified best practices from top-performing providers and recommendations for implementation of the same or similar practices by the department or other covered providers.

d. Privacy and confidentiality. All information required to be provided pursuant to this section shall be individualized and anonymized, as applicable. No information that is required to be provided pursuant to this section shall be disclosed in a manner that would violate any applicable provision of federal, state, or local law relating to the privacy of information.

e. Data sharing. Relevant agencies, including, but not limited to, the department of homeless services, shall share with the department the data necessary to produce the reports required pursuant to this section.

§ 2. a. Definitions. For purposes of this section, the terms “covered program” and “covered provider” have the same meaning as set forth in section 21-152 of the administrative code of the city of New York.

Department. The term “department” means the department of social services.

b. Report on early indicators of housing instability. No later than January 31, 2025, the department shall submit to the mayor and the speaker of the council a report that provides, at minimum, the following:

1. Description of any early indicators the department has identified for individuals or households at elevated risk of losing access to housing;

2. Recommendations for early or additional intervention opportunities that could complement or expand services currently offered through covered programs or by covered providers;

3. Recommendations for expanding the populations served by covered programs; and

4. Proposed service delivery framework for the recommended services or interventions.

c. Privacy protections. No information that is required to be provided pursuant to this section shall be disclosed in a manner that would violate any applicable provision of federal, state, or local law relating to the privacy of information.

§ 3. This local law takes effect immediately.

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