

Developing the Supportive Housing Program

curriculum

supportive housing training series



CORPORATION *for* SUPPORTIVE HOUSING



CUCS
Center for Urban Community Services, Inc.

HUD CURRICULUM

DEVELOPING A SUPPORTIVE HOUSING PROGRAM

PURPOSE AND GOALS: The purpose of this six-hour training is to provide administrative and supervisory level staff with information needed to develop and maintain a services program in a supportive housing project. This training provides an overview of the steps involved in designing and implementing an effective services program from conceptualization to developing a service menu.

AGENDA

- I. INTRODUCTION** (20–40 minutes)
- II. PROGRAM CONSIDERATIONS**
 - A. Principles of Supportive Housing (20–30 minutes)
 - B. Philosophy of Service Delivery (30–50 minutes)
 - C. Tenant Population (10–20 minutes)
 - D. Project Goals (30–40 minutes)
 - E. Physical Design Effects on Service Delivery (10–20 minutes)
 - F. Resources (30–40 minutes)
- III. DEVELOPING A SERVICE PROGRAM**
 - A. General Service Guidelines (10–20 minutes)
 - B. Deciding What Services to Provide (10–20 minutes)
 - C. Types of Services (30–40 minutes)
 - D. Service Delivery Approach (10–20 minutes)
 - E. On-site Services and Referrals to Community Based Services (20-30 minutes)
- IV. STAFFING CONSIDERATIONS**
 - A. Staff to Tenant Ratio (5–10 minutes)
 - B. Roles, Job Descriptions and Staffing Patterns (30–40 minutes)
 - C. Supervision and Training (10–20 minutes)
 - D. Coordinating Support Services & Building Management (20–30 minutes)
- V. STRUCTURES TO SUPPORT SERVICE DELIVERY**
 - A. Communication Structures (10–20 minutes)
 - B. Partnerships and Collateral Relationships (10–20 minutes)
 - C. Record Keeping and Charting (20–30 minutes)
 - D. Developing Policies and Procedures (20–30 minutes)
 - E. Ongoing Program Development (10–20 minutes)
- VI. CONCLUSION** (10–20 minutes)

HANDOUTS:

1. Agenda
2. Principles of Supportive Housing
3. Supportive Services in Housing
4. Philosophical Approaches to Service
5. Small Group Exercise on Clarifying a Philosophical Approach
6. Considerations When Choosing a Tenant Population
7. Tips for Developing Effective Program Goals
8. Supportive Services Planning Worksheet: Project Goals
9. Program Goals Exercise: Translating Goals Into Services
10. Physical Design Considerations
11. Partner Selection Criteria
12. The Process For Creating Partnerships
13. Tenant Involvement
14. Supportive Services Planning Worksheet: Menu of Services Available to Tenants
15. Service Delivery Approach
16. Using Referral Services
17. Sample Job Descriptions for Supportive Housing Staff
18. Staffing Considerations in Supportive Housing
19. Supportive Services Planning Worksheet: Service Approach and Staffing Patterns
20. Group Exercise on Staff Roles
21. Supervision and Training
22. Property Management and Supportive Services: Roles and Responsibilities—Areas of Overlap
23. Communication Structures
24. Maintaining Communication Between Property Management & Social Service Staff
25. Maintaining Case Records and Documentation
26. What to Include in a Chart
27. Developing Policies and Procedures: A Guideline for Supportive Housing Providers
28. Sample Tenant Satisfaction Survey
29. Developing a Supportive Housing Program: Additional Readings

Trainer's Preface

I. Brief Summary of Curriculum Content

This curriculum contains at least six hours of verbal content. This does not mean the content must be covered in its entirety. Depending on the intended focus of the training and the format (exercises and small group discussions vs. large group presentation), portions of this training can be elaborated, abridged and/or deleted.

II. Trainer Qualification

Key to the successful delivery of the curriculum and to participants learning is the qualifications of the trainer. What the trainer brings to the training session — including their knowledge about the subject being taught, their experience in supportive housing, and their training or teaching skills — will impact the quality of the training and the outcomes. This curriculum is intended for use by individuals with the appropriate constellation of talent and ability to guide the learning of others in addressing the issues that emerge in developing a supportive housing program. The person should have an understanding of the issues faced by clinical staff as well as building support staff.

III. Good Training Practice

A. How People Learn

People learn through a combination of lecture, visual aids and participation. The more actively they are involved in the process, the more information they will retain. For this reason, eliciting answers from the group rather than presenting material is usually preferable. Additionally, it is important to include exercises that stimulate interaction and experiential learning and not spend all of the time lecturing. Be aware, however, that group participation and discussion take more time than straightforward presentations and may cut down on the amount of content that can be covered. What is minimized or deleted from the curriculum should be based on the assessment of the group's learning needs and the goals initially contracted with the group.

B. Know Your Audience

The type of setting that the trainees work in and their roles will determine the areas of the curriculum that the trainer will focus on. Gathering as much information about the group beforehand is recommended. This training is targeted towards program directors, planners and supervisory level staff.

C. Introductions and Training Contract

Introductions should provide the trainer with more information as to who the audience is. The trainer will want to know the person's name, program and role, and what s/he hopes to get out of the training. The trainer should then clarify what will and will not be covered. This is the training contract.

D. Acknowledge and Use Expertise of the Participants

This is important as it allows people to learn from each other, builds group cohesion, keeps people involved and establishes an atmosphere of mutual respect. It is possible that some participants will already be working in supportive programs and their experience will be very valuable to other participants.

E. Flexibility

Throughout the training the trainer should continually assess the needs of the group and revise the amount of time devoted to each specific topic. Responding to the needs and interests of the group must be balanced with the agreement to cover certain topics. It is the trainer's responsibility to respond to the needs that arise and yet stay focused on the subject matter. For example, if participants are interested in spending a great deal of time on people with special needs, this section would be expanded and other parts shortened. If the group is working exclusively with PWA's, for example, more time would be spent on that topic area.

IV. Training Content

A. Sequence of Content

Depending on the area of practice of the majority of trainees (case managers, clinical supervisors and property management), the trainer may tailor the training content to address the primary area of interest of the group early on in the day.

B. Flexibility of Content

The amount of depth that this training allows for depends on the learning needs of the training group. If the trainees are new to the concept of a services program in a housing setting, the trainer should expect to cover all of the material presented in the allotted six-hour time frame. If, however, the trainees are already familiar with this concept and prepared to focus on implementing a plan, the trainer should expect to spend more time on sections III through V and allow for more discussion.

C. Personalizing Content

In order to personalize the training, it is important for the trainer to offer case examples or anecdotes regarding the topic. This can also be achieved by eliciting personal stories from trainees. Using these relevant stories will make the training more interesting and personal.

D. Matching Content to a Target Audience

This training is geared toward directors and supervisory level staff, both in Management and Social Services. It is important for the trainer to ensure that the trainees match the target audience for this training. It may also be helpful for direct service staff to attend so that they understand the process of developing the program.

V. Time Management of Content

Each section of the agenda has time frames allotted. Whenever possible, it is suggested that there be a 10 minute break every hour and a half. Of course, for an all day training there would be a lunch break for between forty-five minutes to one hour. The trainer should be aware that if a great deal of time is devoted to one topic area, other content areas might be sacrificed. Group exercises can always be abridged if necessary for time's sake. For example, if the group exercise involves dividing into four groups to work on four separate cases, the trainer should consider having each group work on a smaller number of cases. This will shorten the report back time, but will not eliminate the group process. Remember, elicitation and discussion takes more time than lecturing but less time than small group exercises. The trainer needs to balance this with the fact that lecturing is also the least effective way to teach.

The trainer will find that each time this curriculum is trained, it will vary. Being mindful of good training practice and making adjustments to the timing and sequence will allow for a tailored training that will be most beneficial to participants.

I: INTRODUCTION (20–40 minutes)

TRAINER NOTE: This section includes an introduction of the trainer, a review of the training incidentals (hours, breaks, coffee, bathroom locations), and a review of the training goals and objectives. This is followed by a roundtable introduction of trainees.

TRAINER STATES: The purpose of this training is to provide administrative and supervisory level staff information needed to design a services program in a supportive housing project from conceptualization to developing a service menu. Included are considerations in the process and structures to support the delivery of services. At the end of the training, participants will:

- Be able to identify a philosophical approach to services
- Understand the importance of clarifying program goals and be able to translate these goals into services
- Understand the impact of service design choices, including population served, whether services are offered on- or off-site and the effects of physical design
- Understand how to involve tenants in the design and operation of the service program
- Be able to develop a service menu appropriate to their tenant's needs and choices
- Be able to develop basic program policies and procedures
- Understand staffing considerations in designing a services program
- Be able to implement effective structures to support the delivery of services such as communication and reporting structures and a system for maintaining collateral relationships
- Understand the importance of evaluating the service program and basic evaluation methods

TRAINER NOTE: Trainer will introduce him/herself to trainees including experience in supportive housing, program development or service delivery. Each trainee is asked to introduce himself or herself by stating their name, agency, staff role and goals for the training. If someone mentions something in the go-round that is not on the agenda, but related, see if it can be tied to the training. Trainer should write the interests and expectations of trainees on flipchart. Trainer will review agenda and link trainee interests to agenda items for the day. See **HANDOUT #1: AGENDA**

LEARNING POINTS: Trainer is establishing the learning contract for the day. It is important to discuss what will and will not be covered during this introduction so trainees know what to expect.

II. PROGRAM CONSIDERATIONS

II.A: PRINCIPLES OF SUPPORTIVE HOUSING (20–30 minutes)

TRAINER NOTE: See *HANDOUT #2: PRINCIPLES OF SUPPORTIVE HOUSING*. Post the four key principles and ask trainees to brainstorm how to operationalize each principle [e.g., services to be offered]. This exercise can be done with the entire group or by breaking up into four small groups, each one assigned one principle.

BRIEF LECTURE:

The following are four key principles of Supportive Housing:

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

- Tenants may be expected to pay rent but typically not in an amount that exceeds 30% of gross income.
- Providers have managed to operate fiscally viable housing sites by relying upon rent subsidy programs such as Section 8 and Shelter + Care.
- Some projects also rely on the rental streams provided by units reserved for individuals who are employed, and still others have structured programs to include the use of low income housing tax credits.

SAFETY AND COMFORT — Tenants should feel comfortable and safe in their homes, and providers should pay particular attention to safety issues. People who have been homeless have frequently been victims of or exposed to violence. Weaker tenants can become prey and the targets of intimidation and exploitation.

- Meeting or exceeding building codes and providing extra security and “creature” comforts when resources allow are efforts that all tenants appreciate.
- A secure environment includes the development and implementation of clear administrative procedures for rent collection, building maintenance, monitoring visitors, enforcement of house rules, and is likely to include mechanisms for exchanging information with tenants. Promptly addressing safety concerns that are expressed by the tenants is important. Staff and tenants must feel that they have some collective control over their environment; they should look out for their neighbors and work together to create a safe and comfortable environment.

SUPPORT SERVICES ARE ACCESSIBLE, FLEXIBLE AND TARGET RESIDENTIAL STABILITY — Ideally, supportive services are reflective of the tenants’ needs and goals. Service programs also require adjustment as the needs and interests of the individual tenants and the larger residential community evolve and change. By design, support services are intended to help ensure stability and to maximize each tenant’s ability to live independently. At a minimum, support services must be easily accessible and available to tenants. Evaluating if services are effective and useful should occur on a regular basis.

- To help achieve these goals, programs emphasize ongoing assistance with medication and money management, training and assistance with activities of daily living, support in achieving and maintaining sobriety, and accessing health and mental health services.
- Service providers focus on assisting tenants to meet their lease obligations, including paying rent, maintaining a safe and healthy living environment, allowing others the peaceful enjoyment of their homes and complying with basic house rules.
- Depending upon the tenancy and the type of resources available, services can be shaped to have the widest possible appeal and may range from support groups for substance abusers to classes in cooking, the arts, high school equivalency preparation and vocational counseling.
- Linkages with legal services, immigration services and local entitlement and benefits offices are usually essential.
- Supportive housing programs vary in their ability to modify or significantly change their programs because funding, regulatory or other structural requirements may impose restrictions or limitations. In this regard, providers need to carefully weigh the long-term impact that funding or other regulatory agreements could have on a project.

EMPOWERMENT AND INDEPENDENCE — Supportive housing is intended for people who, at a minimum, can live independently with some assistance. The role of the supportive housing staff is to provide assistance and help the tenant increase his or her level of independence.

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

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

In fostering independence, providers need to respect the individual's priorities and choices. Tenants will make life-style choices that may conflict with the provider's preferences. Alcohol, sex and gambling, for example, are issues that can be inherently challenging. Similarly, some tenants will prefer to have limited (if any) interaction with the supportive services staff or with other tenants.

Developing meaningful structures that empower tenants will help to ensure the long-term success of a project.

TRAINER NOTE: See *HANDOUT #3: SUPPORTIVE SERVICES IN HOUSING*.

BRIEF LECTURE:

PURPOSE OF COMBINING HOUSING WITH SERVICES

- The purpose of combining supportive services with housing is to offer tenants a wide range of services designed to improve the quality and stability of their lives while increasing independence.
- Supportive services help people who might otherwise have difficulty living independently, such as persons with a history of homelessness and people with identified special needs. Services are geared toward assisting tenants achieve residential stability.
- Ideally, supportive services reflect the tenants' needs and goals. Effective programs adjust the services they offer as the needs and interests of the individual tenants and the larger residential community evolve and change.

TRAINER ELICITS: WHAT ARE EXAMPLES OF SERVICES THAT HELP TENANTS ACHIEVE RESIDENTIAL STABILITY? [Expected responses include:]

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

LEARNING POINTS: Participants will have an understanding of the basic principles of supportive housing. Trainees will also understand the benefits of combining housing with services.

II.B: PHILOSOPHY OF SERVICE DELIVERY (30–50 minutes)

TRAINER STATES: A philosophy of service delivery involves the guiding beliefs and values upon which you base your program and how you approach service delivery. These values tell outsiders what kind of an organization you are and why you embarked upon this project. The program's philosophical approach and goals should reflect the overall agency philosophy and tie in with the organizational mission.

When developing a service program, it is important to clarify the approach to service delivery. This will provide a framework for discussing the program when hiring staff or interviewing potential tenants and developing interventions. A unified approach can also help to minimize confusion and misunderstandings among community members.

TRAINER NOTE: See *HANDOUT #4: PHILOSOPHICAL APPROACHES TO SERVICE*.

BRIEF LECTURE:

Variations in philosophical approaches are among the numerous elements that make each housing site different from the next. These are general “approach to services” categories chosen to spur discussion and not intended to cover all possible approaches. Programs may adopt aspects of one or all of the models we’ll discuss. Similarly, programs may contain elements of more than one philosophy. Let’s look at some of the characteristics of each of these approaches and the assumptions upon which they are built.

HOUSING FIRST, VOLUNTARY SERVICES

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

CONSUMER DRIVEN

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

HARM REDUCTION

- People deserve safe, affordable housing regardless of their special needs
- Services aim to help people reduce the harm caused by their special needs such as substance abuse, mental illness or health-related complications
- In helping people to achieve goals they set for themselves, a trusting relationship is established
- Services focus on helping tenants stay housed by assisting them to meet the obligations of tenancy, such as paying rent
- Tenants are encouraged to explore obstacles toward their goals in an open and non-judgmental atmosphere. Staff does not want to alienate tenants or cause them to hide drug use or psychiatric symptoms
- Participation in services is not usually a condition of tenancy, and the focus is on making services attractive to tenants

SUPPORTIVE APPROACH

- Staff helps stabilize the supportive housing project by providing services to meet tenant needs
- Staff is available around the clock, either on-site or through emergency beepers, to provide the support promised to tenants during intake
- Providers seek to create a nurturing environment where tenants have easy access to food, services and social events and the need for tenants to go outside the building for services is minimal.
- Services are usually required as a condition of tenancy or at least highly encouraged

- Leverage may be used to encourage service participation

THERAPEUTIC COMMUNITY

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

TRAINER NOTE: Small Group or Dyadic Exercise on Clarifying Philosophical Approach. See ***HANDOUT #5: SMALL GROUP EXERCISE ON CLARIFYING PHILOSOPHICAL APPROACH.***

Break the trainees into small groups or pairs (divide by programs if possible). Allow 20 minutes to discuss the following questions from on Handout #6:

- Do any of the approaches we discussed reflect your program's philosophical approach to services? If so, how? If not, describe your approach.
- What forums exist, or would you like to see in place, for discussing the approach to services? How is the approach linked to the program goals?
- How is this approach presented to new staff?
- Choose one area (such as disruptive behaviors, program participation, or substance abuse) and talk about your programs' approach toward dealing with it.

When they are finished, ask them to report back to the larger group.

LEARNING POINT: The philosophy of service delivery is vital in the development of support services and should be clear to all staff.

II.C: TENANT POPULATION (10–20 minutes)

TRAINER NOTE: See *HANDOUT #6: CONSIDERATIONS WHEN CHOOSING A TENANT POPULATION*.

TRAINER STATES: Program considerations are impacted directly by the tenant population an agency chooses to provide services to. Some programs may choose to develop supportive housing projects specializing in support for persons living with mental illness, persons living with HIV, persons in recovery or in need of assistance with substance abuse, persons with a history of homelessness or a spectrum of other life experiences.

Some program considerations when serving people with special needs include:

- Psychiatric Resources
- Medication Management
- Appropriate Case Management
- Medical Resources
- Healthcare Support
- Home Care Resources
- Entitlements Assistance
- Training and Employment
- Education Services
- Substance Abuse Treatment Resources
- Relapse Response
- Worker/Tenant Caseload
- Unit Size
- Shared Facilities

TRAINER STATES: A mixed tenancy in supportive housing projects has become more common in recent years. This might mean the supportive housing project houses a combination of individuals who have disabilities with those who do not, and/or the supportive housing projects offers a mix of units for singles as well as apartments for families with children.

TRAINER ELICITS: WHAT DO YOU THINK MIGHT BE SOME OF THE ADVANTAGES TO DESIGNING A PROGRAM FOR A MIXED TENANCY? [Expected responses include:]

- A supportive housing project serving different kinds of people is less likely to be stigmatized than a supportive housing project that houses a homogeneous group of individuals

- Mixed housing more closely reflects the majority of communities, fitting more naturally into a neighborhood
- Mixed housing is less likely to feel institutional to tenants
- The more independent tenants can help set standards for norms of behavior
- Integrating tenants of different abilities, needs and ages can strengthen the therapeutic qualities of the environment

TRAINER ELICITS: IS THERE ANYONE HERE WITH EXPERIENCE INTEGRATING TENANTS WITH DIFFERENT SERVICE NEEDS, AGES AND/OR LEVELS OF INDEPENDENCE WHO WOULD LIKE TO DISCUSS THEIR EXPERIENCE? [It is helpful to hear about challenges trainees faced when integrating a mixed tenancy and strategies they employed to work through these challenges.]

TRAINER NOTE: The trainer should make sure the following points come up during this discussion.

- Low income working people may not want to associate with people with special needs. Oftentimes, this requires education to help dispel myths about mental illness, AIDS or whatever special needs group has been stigmatized.
- It is helpful to blend funding streams so that the provider can work with the whole person and not just one of his/her "problems." However, multiple funding streams can be a complex process.

TRAINER STATES: Serving one specific population can also be a viable choice. There are many supportive housing projects around the country that were designed exclusively to meet the needs of people with specific disabilities and some are model programs. These programs can be a good fit for organizations that may be reluctant to serve tenants with problems unfamiliar to staff or who do not feel ready to take on more diverse tenant configurations that will introduce a wider set of demands.

Later, in Developing a Service Program, we will address adapting services to meet the needs of specific tenant populations. Programs that have a concentration of individuals with disabilities or other special needs will likely emphasize ongoing assistance with medication and money management, training and assistance with activities of daily living, employment services, support in achieving and maintaining sobriety and assistance accessing health and mental health services.

LEARNING POINTS: Supportive housing programs are diverse and intended to have the flexibility to serve a wide range of individuals with services adapted to the needs of the tenants. The tenancy to be served has a major impact on the design of the service program. A sound understanding of the specific needs of the populations to be served is critical to designing an effective program.

II.D: PROJECT GOALS (30–40 minutes)

TRAINER STATES: Program goals are concise statements of what a program is designed to accomplish. They are the long-term aims of the program and are driven by the philosophical approach and values of the organization.

TRAINER ELICITS: WHY DO YOU THINK PROGRAM GOALS ARE IMPORTANT? WHAT PURPOSE DO THEY SERVE IN THE DESIGN AND DEVELOPMENT OF A SERVICE PROGRAM? [Expected response include:]

- Goals provide a focus for the work
- Goals drive every aspect of program design, including staff hired, tenants accepted and the services offered
- Goals define desired outcomes

TRAINER NOTE: See *HANDOUT #7: TIPS FOR DEVELOPING EFFECTIVE PROGRAM GOALS* and *HANDOUT #8: SUPPORTIVE SERVICES PLANNING WORKSHEET: PROJECT GOALS*.

TRAINER STATES: Goals define the results of what you intend to do. A goal can be stated as a description of a condition the program will achieve through services provided (outcome goal), or a measurable value of the services offered (process goal). Funders often want to see process goals since they describe the work that was done [e.g., a program may be asked to document the number of face-to-face contacts in a month or the number of tenants housed]. These types of process goals, however, do not reflect whether or not the program has achieved its desired outcome or mission.

Outcome goals should be stated in terms of measurable criteria, be related to tenants' needs and preferences and be written clearly, without jargon or ambiguity. Services can be seen as a means of actualizing program outcome goals. For example, providing career counseling is a means of actualizing the goal of employing tenants in meaningful work.

TRAINER ELICITS: WHAT ARE SOME EXAMPLES OF TYPICAL OUTCOME GOALS IN A SUPPORTIVE HOUSING PROJECT? [Expected responses include:]

- Provide safe, affordable housing as a permanent residential option
- Assist tenants in securing jobs that increase their income
- Assist tenants in recovering from substance abuse
- Reduce harm experienced by tenants due to substance abuse
- Assist tenants in reducing symptoms of mental illness
- Promote the use of available community based services
- Improve tenant's daily living skills

TRAINER STATES: In many programs, goals are implicit and not openly discussed among community members. Without discussing goals openly, different people may have different ideas about how goals affect the day-to-day services that are offered. For example, if a program goal is to help every tenant become as independent as possible, one staff member may interpret that to mean avoiding all services that infantilize tenants. This might include things like helping people get to appointments, managing medications, knocking on doors to check on people who haven't been seen in a while. Another staff member might see those same services as the supports necessary to assist people in reaching their maximum level of independence.

TRAINER NOTE: The following exercise will help highlight the different ways a goal might be interpreted. Case Examples Translating Goals into Services. See **HANDOUT #9: PROGRAM GOALS EXERCISE: TRANSLATING GOALS INTO SERVICES.** Divide trainees into small groups, giving two cases to each group, and ask them to discuss the following:

- Come up with as many interpretations as possible for each goal.
- What services would you provide to achieve this goal?
- Make suggestions about how these goals might be re-worded to clarify their meaning.

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

TRAINER'S KEY: PHILOSOPHICAL INTERPRETATIONS may include: Harm Reduction Model; or Abstinence Based Housing; or Therapeutic Community Model.

SERVICE INTERPRETATIONS may include: "Harm reduction model would provide low-demand, high-reward services that aim to reduce harm and focus on raising awareness and navigating persons toward abstinence.", or "Abstinence based housing would provide relapse prevention and support services for persons in recovery that may or may not tolerate relapse.", or "A therapeutic community would provide concrete services that focus on changing negative behavior and recovery that would not tolerate relapse."

RE-WORDING MAY INCLUDE: "The program will provide services and create an environment that fosters health and sobriety to active users."; or "The program will provide services and create an environment that fosters health and sobriety for persons in recovery to assist them to maintain recovery."; or "The program will provide services and create an environment that fosters health and sobriety to persons with addiction and in need of support in a structured, time-limited manner."

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

TRAINER'S KEY: PHILOSOPHICAL INTERPRETATIONS may include: "The entire design concept will include consumer involvement." or "Tenants will have input into the design of their apartments."

SERVICE INTERPRETATIONS may include: "A committee of prospective tenants will participate from the conceptualization of the service program to the implementation and be represented on the Board of Directors."; or "The program will maximize tenant choice by allowing individuals to personalize their living environment, including picking the type of furniture and apartment choice [i.e., front vs. back apartment, lower or upper floor]."

RE-WORDING may include: "The program strives to maximize tenant choice about the living environment by having tenants actively participate in the entire design of the program." or "The program strives to maximize tenant choice about the living environment by having tenants chose apartments and participate in personalizing the living space."

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

TRAINER'S KEY: PHILOSOPHICAL INTERPRETATIONS may include: "All persons who apply for services will be provided services." or "All persons assessed to be committed to improving the quality of their lives will be provided services."

SERVICE INTERPRETATIONS may include: "Services are provided to all individuals interested in our program on a first come, first serve basis [no one will be turned away]." or "Services will be provided to any individual who is assessed by staff during triage to be committed to improving the quality of their lives [triage for greatest degree of need or prioritize those that are the most likely to succeed.]"

RE-WORDING may include: "The program will serve all persons who could benefit from the program's housing and services on a first come first serve basis." or "The program will serve anyone who could benefit from our housing and services that staff assesses as committed to improving the quality of their lives as defined by the program."

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

TRAINER'S KEY: PHILOSOPHICAL INTERPRETATIONS may include: "Relapse is not tolerated." or "Relapse is tolerated"

SERVICE INTERPRETATIONS may include: "All residents are required to maintain sobriety, and anyone caught using drugs or alcohol will be

terminated from the program.” or “All residents are required to work with staff and anyone relapsing must be willing to work with staff to regain sobriety.”

RE-WORDING may include: “The goal of this residence is to create and maintain a sober living environment for all residents with zero tolerance of use.” or “The goal of this residence is to create and maintain a sober living environment that recognizes relapse as a normal part of recovery and assists persons who may relapse regain sobriety.”

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

TRAINER’S KEY: PHILOSOPHICAL INTERPRETATIONS may include: “Voluntary service” or “Mandatory services.”

SERVICE INTERPRETATIONS may include: “Services are voluntary and designed to build trust, be attractive and relevant to tenants with a focus on consumer-determined goal setting.” or “Tenants will be required to participate in goal setting as a condition of their tenancy.”

RE-WORDING may include: “Service staff will assist tenants in reaching their self-identified goals by offering voluntary services focusing on individualized tenant needs.” or “Service staff will assist tenants in reaching their self-identified goals as a condition of tenancy in the program.”

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

TRAINER’S KEY: PHILOSOPHICAL INTERPRETATIONS may include: “Services will be offered to all tenants regardless of special needs.” or “Services will only be offered to tenants with special needs.”

SERVICE INTERPRETATIONS may include: “Services will be offered equally to all tenants in an integrated community of special needs and non-special needs tenants.” or “The community of integrated tenants will share living space but only tenants identified as having special needs will be provided services.”

RE-WORDING may include: “This program aims to integrate special needs and non-special needs tenants by offering all services to all tenants.” or “This program aims to integrate special needs and non-special needs tenants and will be providing support services to those tenants identified as having a special need.”

LEARNING POINTS: Participants will understand that goals focus the work and drive program design. Every service offered should be meeting an intended goal. Goals mean different things to different people, so all staff should be clear on the interpretation.

II.E: PHYSICAL DESIGN EFFECTS ON SERVICE DELIVERY (10–20 minutes)**TRAINER NOTE:** See *HANDOUT #10: PHYSICAL DESIGN CONSIDERATIONS***BRIEF LECTURE:**

Social service staff should participate in the design process from the start, as the architects may not be fully familiar with the workings of an on-site supportive housing program. Successful service programs take into account the effect that the physical plant will have on the delivery of the services and adapt them accordingly. In cases where a project involves renovation or new construction, the physical building design should be compatible with the plan for delivering services.

SOME SPECIFIC PROGRAM DESIGN CONSIDERATIONS:**OFFICE SPACE & LOCATION OF SERVICES**

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

COMMON SPACES

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

SECURITY FEATURES

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

GENERAL BUILDING DESIGN

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

UNIT DESIGN

- Will the units be self-contained [private bath and kitchen]?
- If not self-contained, how many tenants will be sharing facilities?
- Shared facilities may be seen as transitional.
- Will the units be furnished?

LEARNING POINTS: Social service should participate in the physical design plans. The physical layout of a project should provide adequate and appropriate space for the delivery of services. Living units should be appropriate for the populations served and the project goals.

II.F: RESOURCES (30–40 minutes)

TRAINER STATES: As part of the process of designing a service program [and often as part of deciding to do a project in the first place], it is essential to evaluate your agency's capacity to design and operate the service program. The agency must look at its organizational structure, financial management and other administrative resources, clinical knowledge and practice skills to assess what additional resources are needed to create a successful program. Some considerations when assessing your capacity to meet the service needs of tenants include:

- **MISSION:** Providers should look at their overall organizational mission and decide how this project fits in. What are differences and similarities about this project as compared with others the organization now runs? If the project reflects an emerging need that has not yet been addressed by the agency, have discussions taken place about how this project might change/expand the focus of the organization?

It is helpful to plan for organizational growth and/or an expansion of the organizational mission as this can cause much stress and conflict in agencies that are not prepared for the changes. What would be helpful in assisting the agency to meet the needs of the project: partnerships, sub-contracts, consultants or toughing it out?

- **STAFFING:** Are resources available for developing the service program? Is there adequate staff capacity and expertise to design and develop such a program? Providers who have tried to cut costs by cutting back on staff coverage sometimes face the difficult task of trying to get funding after the fact, when they realize the resources are inadequate for meeting the needs of the tenants.
- **SERVICE ACCESS:** How will you access the range of services that your tenant population needs? Will the agency consider choice of services as a priority? Providers often decide to encourage the use of community services and make decisions to minimize treatment services on-site.
- **FUNDING:** Funding must ensure a staff to tenant ratio that will allow for effective helping relationships to develop. When funding is inadequate to meet the needs of the tenants, the provider must consider making changes in the population to be served or the goals of the program. Programs must ensure that all funding available to serve the tenant population can be accessed. For programs with a mixed population, most programs use multiple funding sources. Programs should assess their capacity not only to access funding but assure compliance with the requirements of each funding source as well. This includes financial management, reporting compliance and ability to manage clinical documentation.

- **COMMUNITY RESOURCES:** Some providers may decide to utilize community resources through referrals for some services. Programs must thoroughly assess the resources in the community for quality, availability, accessibility and whether they are appealing to tenants. Most agencies form agreements with local service providers to ensure that tenants have a choice of providers and that necessary services are accessible. Later in this training, we will look at how to develop relationships with community providers.
- **PARTNERSHIP:** Many agencies decide to partner with another organization with expertise in providing a certain aspect or aspects of the supportive housing project. Agencies may form a partnership with a developer and/or property manager. An agency may decide to sub-contract some of the task of running a building or decide to hire consultants to assist them.

TRAINER STATES: If your organization decides to partner with another agency, evaluating a “good fit” is crucial. Just as in any relationship, it needs to be assessed whether or not the two organizations are compatible.

The following broad areas should be looked at in assessing compatibility. Assessing compatibility takes time and usually requires more than one meeting.

TRAINER NOTE: See *HANDOUT #11: PARTNER SELECTION CRITERIA.*

THE ORGANIZATION'S MISSION AND GOALS

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

THE ORGANIZATION'S VALUES AND PHILOSOPHY

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

THE ORGANIZATION'S EXPERIENCE WITH SIMILAR PROJECTS

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

THE ORGANIZATION'S EXPECTATIONS FOR TENANT BEHAVIOR

- What kinds of behavior from tenants will be unacceptable to you? (e.g., alcohol use, drug use, bizarre dress, poor personal hygiene, noise disturbances)
- What will you expect from tenants and what should they expect from you?

- How have you or how do you plan to involve tenants in activities?
- What are your expectations regarding house rules? (e.g., overnight guests, disruptive behavior)
- What should the eviction criteria be?

THE ORGANIZATION'S MANAGEMENT STYLE/ORGANIZATIONAL CULTURE

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

THE ORGANIZATION'S VISION FOR COLLABORATION

- What kinds of issues do you think your partner agency should be responsible for? (address primary responsibility during rent-up, house rules enforcement, evictions, staff hiring for example)

TRAINER STATES: The following are suggested steps in the process for creating a partnership.

TRAINER NOTE: See *HANDOUT #12: THE PROCESS FOR CREATING PARTNERSHIPS*. Review points in handout.

- Research and identify potential collaborators
- Send a Request for Proposals (RFP) to a short, prescreened list of qualified and interested providers which have been identified through interview and recommendations
- Arrange a meeting to discuss selection criteria with respondents to the RFP
- Visit each other's sites and offices
- Arrange a series of meetings to further explore compatibility
- Write down agreed upon concrete project goals that balance the interests of the parties
- Work on preliminary project tasks together, such as creating a project specific organizational chart, house rules, tenant handbook, etc.
- Solidify the agreement: After you have chosen a partner and agreed to work together, you can draft a letter of intent between your organizations. This will specify the date the parties enter the agreement, your intent to work together to develop and/or maintain the supportive housing project and the tenancy to be

served. The roles of each party should be outlined, which party will be responsible for various costs and a project timeline should be included. It should also contain information about terminating the agreement if either party fails to perform their responsibilities. Legal counsel should review this document.

- Invest in mutual cross training: Two subjects which invariably come up include how to share information and principles of confidentiality, and building staff training on understanding people with special needs.

LEARNING POINT: Resources such as mission fit, staffing, community resources, access to services and partnership considerations must be considered when designing a service program. Decisions in one area often affect decisions in others. Developing partnerships early in the program development process is important. Providers must allow enough time to get to know potential partners and ensure a good fit.

III.: DEVELOPING A SERVICE PROGRAM

III.A: GENERAL SERVICE GUIDELINES (10–20 minutes)

TRAINER NOTE: The trainer should use this section as an introduction to considerations in developing a service program.

TRAINER STATES: The primary goals of most supportive service programs are to help tenants maintain their housing and maximize their capacity for independent living. Some people will need life-long support to accomplish these goals. Others may need them for a few months, and still others may need varying levels of support at different points in their lives.

Supportive housing, where tenants can live as long as they need or want to, provides an excellent opportunity to serve a range of people based on their individual needs. In order to meet tenants where they are, services must be easily accessible and offered on a flexible basis. Next we'll address how to decide what specific services you will provide in your supportive housing project.

LEARNING POINTS: Services in supportive housing are meant to be flexible and to adjust to the changing needs of tenants.

III.B: DECIDING WHAT SERVICES TO PROVIDE (10–20 minutes)

TRAINER ELICITS: WITH THE VAST ARRAY OF SERVICES YOU COULD PROVIDE IN YOUR HOUSING, HOW DO YOU DECIDE WHICH YOU WILL ACTUALLY OFFER? [Expected responses include:]

- Provide services that meet tenant needs and preferences
- Offer services that staff have expertise or experience in providing
- Consider available resources and try not to duplicate services that already exist in the community
- Solicit input from tenants or prospective tenants

TRAINER NOTE: See *HANDOUT #13: TENANT INVOLVEMENT*.

TRAINER STATES: Depending on the philosophical approach to service provision, a program may encourage minimum or maximum involvement of tenants in the design, operation and evaluation of the program.

TRAINER ELICITS: WHAT ARE THE BENEFITS OF INVOLVING TENANTS IN MAKING DECISIONS ABOUT THE SUPPORTIVE HOUSING PROJECT AND PROGRAM? [Expected responses include:]

- Increases resident satisfaction by providing relevant activities and services
- Increases the likelihood that the building will be maintained since tenants are more likely to take care of their homes if they feel they have a sense of ownership
- Allows for the identification of problems in all areas of living including services and management and provides a route to address them
- Promotes a set of positive norms that counteracts the development of negative communities and illicit activities
- Combats isolation that can result in psychiatric deterioration and relapse
- Teaches tenants the skills needed to impact their environment
- Increases opportunities for communication (peers, tenant to staff, etc.)
- Improves social and psychological ties among community members
- Enhances pride (more likely to invite family or friends to visit if tenants feel proud)
- Allows for increased opportunities for interaction in buildings with “mixed populations”
- Increases safety and security

TRAINER ELICITS: WHAT ARE SOME OF THE COSTS OR CHALLENGES ASSOCIATED WITH INVOLVING TENANTS? [Expected responses include:]

- Being part of a community means sharing part of oneself (time, experience) For some, this may seem like an invasion of privacy
- Some tenants may fear disappointment, having participated in ineffectual groups in the past
- Some tenants may fear staff retaliation for expressing negative opinions about the supportive housing project or another individual
- The skills needed for involving tenants may be outside the area of expertise for some providers
- Providers may fear creating a “grump wagon” or gripe session among tenants
- A more democratic and egalitarian model presents the risk that tenants who gain power through this process can operationalize an agenda that may differ from that of staff (e.g., may have different priorities)
- Staff may feel that time-consuming efforts to involve tenants in decisions are additional responsibilities not included in their job/roles as case managers

TRAINER NOTE: Write the following two headings on flipchart and as trainees give examples of each, record responses where they belong.

TRAINER ELICITS: WHAT ARE SOME OF THE STRATEGIES YOU USE OR SERVICES YOU OFFER TO INVOLVE TENANTS IN DECISIONS ABOUT THEIR HOMES? [Expected responses include:]

INVOLVE TENANTS IN DECISION-MAKING PROCESSES

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

LEARNING POINTS: Programs should provide services that meet the needs and preferences of tenants. Tenant input is vital in this process.

III.C: TYPES OF SERVICES (30–40 minutes)

TRAINER NOTE: See *HANDOUT #14: SUPPORTIVE SERVICES PLANNING WORKSHEET: MENU OF SERVICES AVAILABLE TO TENANTS*. This handout can be used to plan a service program or review an existing program [which services are provided, which are needed and who should provide them]. If time allows, break trainees into small groups and ask them to use the worksheet as described.

GENERAL SUPPORTIVE SERVICES

- Orienting new tenants/help moving in; Tenant's rights education; Case management/service coordination; Tenant engagement; Psychosocial assessment; Peer mentoring; Support groups; Recreational opportunities; Legal assistance; Transportation; Emergency financial assistance; Educational workshops and classes

INDEPENDENT LIVING SKILLS

- Communication skills; Conflict resolution/mediation training; Budgeting, rent payment; Credit counseling; Money management; Entitlement assistance; ADL training (cooking, cleaning, self-care, using transportation)

HEALTH/MEDICAL SERVICES

- Creating a healthy culture (nutritional services, exercise classes, smoking cessation classes); Health education; Personal care education/assistance; HIV/AIDS services

MENTAL HEALTH SERVICES

- Engaging tenants with a mental illness; Normalizing/destigmatizing mental illness; Education about mental illness and psychotropic medications; Liaison with psychiatrist

SUBSTANCE ABUSE SERVICES

- Approaches for dealing with abuse and relapse (damp, dry, wet); Establishing rules, consequences, and expectations for behavior; Links to detox, rehab and/or substance abuse counseling and self-help groups

VOCATIONAL SERVICES

- Career counseling; Job training; Job placement (include supportive and competitive employment)

SERVICES TO FAMILIES

- Support groups for parents, children and/or families; Parenting and child development classes; Childcare; Domestic violence services; Family reunification

LEARNING POINTS: Participants will understand the benefits of using a planning worksheet to help determine the types of services that will be offered.

III.D: SERVICE DELIVERY APPROACH (10–20 minutes)**TRAINER NOTE:** See *HANDOUT #15: SERVICE DELIVERY APPROACH*

TRAINER STATES: In order to provide services to tenants, service staff must work to engage tenants. Engagement strategies might include phone calls, knocking on doors and hosting dinners or parties. When services are offered voluntarily, the onus is on staff to make those services attractive. Providers need to consider how staff will make themselves available to tenants.

TRAINER ELICITS: WHAT ARE SOME OF THE PARAMETERS YOU'VE ESTABLISHED FOR MAKING YOURSELVES AVAILABLE TO TENANTS IN YOUR BUILDINGS? [Expected responses include:]

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

TRAINER STATES: In deciding which services you will provide, it is important to think about whether you will provide them on an individual basis or in groups.

TRAINER ELICITS: WHAT ARE SOME CONSIDERATIONS IN DECIDING TO OFFER VARIOUS SERVICES IN GROUPS OR INDIVIDUALLY? [Expected responses include:]

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

A consideration in deciding when to provide groups includes staff capacity. Programs must assess if staff has experience running groups and if resources are available to train staff in this area. Adequate resources must be available to provide for the needs of group members. This may include food, money to pay for outside speakers or any special equipment. Naturally, a space that can comfortably accommodate the group is required.

TRAINER STATES: In determining what types of groups to offer, groups conducted in supportive housing generally fall into three broad categories:

- **SUPPORTIVE:** Designed to provide support and mutual aid around a general or more specific theme or problem (e.g., eating disorders, substance abuse, mental illness, women's/men's issues, parenting, etc.). The expectation would be that tenants would discuss relevant issues, review coping strategies and offer support to each other.
- **EDUCATIONAL:** Designed to teach a skill or skills such as personal grooming, budgeting, resume writing, smoking cessation, yoga, etc. Some providers have found that tenants are more likely to attend informational groups or classes as they are less personally revealing. A person may choose to attend a recovery group off-site but feel less inclined to discuss their relapse with their neighbors. Some providers have charged a small fee for their classes and made them available to staff and external community members.
- **TASK/ACTIVITIES:** Designed to accomplish a task or tasks such as a house rules committee, tenants' recreation planning group, advocacy group, etc. Some providers combine such tasks-related groups with educationally focused groups that teach leadership, advocacy and organizing skills.

LEARNING POINT: Programs must determine the delivery approach for services. Considerations include hours, outreach, group work and individual counseling. Group work should include thought regarding the type, need, space, capacity, advantages and disadvantages of this method of delivery.

III.E: ON-SITE SERVICES VERSUS REFERRALS TO COMMUNITY BASED SERVICES (20–30 minutes)

TRAINER NOTE: See *HANDOUT #16: USING REFERRAL SERVICES*. This handout provides suggestions for developing an effective referral system and for collaborating with existing community agencies.

TRAINER ELICITS: WHAT ARE SOME ISSUES YOU TAKE INTO CONSIDERATION WHEN DECIDING WHICH SERVICES TO OFFER ON-SITE AS OPPOSED TO REFERRING TENANTS TO SERVICES IN THE COMMUNITY? [Expected responses include:]

- If a program believes that tenant independence is increased by the use of community services, that program is more likely to make an effort to refer outside the building for services whenever possible
- Relying on available community based programs can help make the most of a limited service budget
- It remains important to have on-site staff to maintain solid relationships with tenants and address a wide range of issues, including access, follow-up and continuity of services in the community
- Privacy issues with groups offered on-site. For example, attending an on-site AA meeting could identify a tenant with a substance abuse issue

TRAINER STATES: Working in collaboration with existing community services is vital to a social service program. A major principle of this model is a good referral system, which includes:

- Share resources and lessons learned between staff [no reason to re-invent the wheel when using outside services]
- Integrate your program into the community to access other existing resources
- Invite community representatives from various agencies in your area to your site for meetings and informational sessions
- Send literature about your program to other community based services
- Get to know the contacts at the various referral agencies
- Integrate resource sharing into the programmatic design at your site (in-house resource log, community Rolodex with important numbers and contact persons, tenant input on the quality of services offered by referral agencies)

- Be mindful that contact between your site and the referral site should be done only when a consent form has been signed by the tenant. Be sure to have releases (consents) signed by tenant for active and consistent communication between case management and referral site
- Be sure to document all salient information received or given to referral agency

LEARNING POINTS: Supportive services focus on helping tenants meet the obligations of their leases or occupancy agreements and develop the skills to live stably in the community. The list of services we reviewed today are some of those that are critical in achieving residential stability and maximizing capacities for independence. In addition to selecting a menu of services, programs must decide about models of service delivery (individual/groups) and which to provide on-site as opposed to by referral.

IV: STAFFING CONSIDERATIONS

IV.A: STAFF TO TENANT RATIO (5–10 minutes)

TRAINER NOTE: Trainer may decide to have a dialogue with trainees regarding their experience with staffing patterns and brainstorm solutions to problems associated with staffing patterns.

TRAINER STATES:

The staff to tenant ratio in supportive housing varies depending on the service needs of tenants. The general range is somewhere between one staff person for every ten tenants (when serving persons with disabilities or special needs) to one staff person for every thirty tenants.

LEARNING POINT: Determining the staff to tenant ratio will assist in developing staffing patterns that will allow for adequate service delivery. The appropriate staff ratio depends on the extent of need among the tenant population(s) and the scope and goals of the service program.

IV.B: ROLES, JOB DESCRIPTIONS AND STAFFING PATTERNS (30–40 minutes)

TRAINER NOTE: See *HANDOUT #17: SAMPLE JOB DESCRIPTIONS FOR SUPPORTIVE HOUSING STAFF*, *HANDOUT #18: STAFFING CONSIDERATIONS IN SUPPORTIVE HOUSING*, and *HANDOUT #19: SUPPORTIVE SERVICES PLANNING WORKSHEET: SERVICE APPROACH AND STAFFING PATTERNS*. Trainer can mention that *HANDOUT #19* can be used as a guide in developing staffing patterns.

TRAINER STATES: Most supportive housing projects utilize a case manager model. This usually consists of a professional staff member to oversee the service program and a case management staff made up of both paraprofessionals and/or professionals to provide direct services to tenants. We'll now take a look at some of the different roles and responsibilities of various staff working in supportive housing projects.

TRAINER ELICITS: WHY DO YOU THINK IT IS IMPORTANT FOR ALL STAFF MEMBERS TO HAVE CLEAR JOB DESCRIPTIONS? [Expected responses include:]

- Having clear expectations helps staff gain confidence
- Staff cannot be expected to meet expectations if they don't know what they are
- Job descriptions and clear expectations let people know if they are doing a good job or not
- Job descriptions tell other people, in and outside your organization, who is doing what
- Job descriptions explain the job to applicants when you are hiring
- Job descriptions give parameters for where various roles fit into the overall agency
- Job descriptions provide information that can be used to hold staff and supervisors accountable

TRAINER NOTE: GROUP EXERCISE ON STAFF ROLES. See *HANDOUT #20: GROUP EXERCISE ON STAFF ROLES*. Break trainees into small groups of four or five depending on the number of trainees. Assign each group one or more of the following job titles and instruct them to brainstorm about the various roles and responsibilities associated with that title. Ask the small groups to report back to the larger group in about 15 minutes. Ask trainees to note any issues of collaboration with other staff for each role discussed, pros and cons of having this position in the program and which role responsibilities became confusing and why. Following each position listed below are areas that are likely to emerge in the group discussions. Although specific titles for staff positions may vary from program to program, the following provides a listing of common titles.

BRIEF LECTURE:

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

- **PROGRAM DIRECTORS/SUPERVISORS** — oversee program development, implementation, coordination and evaluation, provide regular supervision to direct service staff, orient new staff to program mission, goals, policies and procedures, coordinate site coverage, ensure that the development and implementation of service plans are consistent with program goals and of maximum benefit to tenants, monitor and evaluate staff performance, coordinate social services with building management services, develop and modify policies and procedures, identify problems related to resources and personnel management, oversee production of internal and external reports, oversee compliance with funders, usually requires a masters degree and significant experience in this area
- **CASE MANAGERS** — provide direct services to tenants, develop and implement individual service plans, assist tenants in achieving goals, facilitate groups and activities, teach and/or assist tenants in developing ADL, communication and self-advocacy skills, facilitate the development of tenant council and other community building activities, make referrals to community based services, assist in accessing and maintaining entitlements/benefits, advocate for needed services and assist tenants in meeting the obligations of tenancy, may be para-professional position
- **SUBSTANCE ABUSE/MICA SPECIALISTS** — may not be assigned their own case load but instead may run groups related to substance use and work directly with tenants who have issues with use, oversee recovery readiness services, provide relapse prevention and recovery planning services, provide individual counseling, facilitate methadone maintenance services, educate staff and tenants about approaches to managing substance use, such as stages of change and harm reduction, organize sober recreational activities, requires experience in substance use services
- **RESIDENTIAL AIDES** — assist Case Managers in carrying out their responsibilities, provide support and concrete assistance to tenants, assist/train tenants in the skills of daily living, escort to appointments, provide supervision and coverage, para-professional position
- **RECREATION SPECIALISTS** — run groups and arrange for various activities on- and off-site, including music, art or exercise classes, may work individually with tenants needing assistance socializing or reducing isolation, plan events and celebrations, identify recreational opportunities in the neighborhood and surrounding community, para-professional position with preference of community connections

- **ADL SPECIALISTS** — assist and teach tenants basic living skills such as budgeting, cooking, personal hygiene and self-care, housekeeping activities, use of public transportation and other community services, para-professional position
- **PEER COUNSELORS** — staff who have had life experiences similar to the tenants of the supportive housing program (e.g., homelessness, mental illness, substance use, HIV), provide support and concrete assistance, teach advocacy skills and apply principles of self-help programs, para-professional position
- **VOCATIONAL COUNSELORS** — also called Career Counselors or Employment Specialists, conduct vocational/educational assessments and assist tenants in developing career plans, work with Case Managers to integrate vocational plans into general service plans, identify obstacles to maintaining employment and provide ongoing assistance in minimizing the negative impact of these obstacles to success, para-professional position, experience in employment and vocational counseling
- **JOB DEVELOPERS** — establish relationships with businesses in the community to help secure jobs for program participants. Job Developers also serve as liaisons between the supportive housing project and the job site and address problems and issues that come up regarding specific placements, para-professional position, experience in employment development

LEARNING POINTS: There are numerous ways to design and staff a service program, but clearly defined staff responsibilities are essential in the delivery of support services.

IV.C: SUPERVISION AND TRAINING (10–20 minutes)

TRAINER NOTE: See *HANDOUT #21: SUPERVISION AND TRAINING*.

TRAINER ELICITS: WHAT STRATEGIES DO YOU USE TO HELP ENSURE YOUR STAFF HAS THE CAPACITY TO PERFORM THEIR JOBS? [Expected response include:]

- Hire staff with experience and expertise
- Provide regular supervision
- Provide staff training and opportunities for advancement
- Ensure staff have adequate resources to carry out their responsibilities
- Check that expectations placed on staff are realistic
- Design a workable staffing pattern

TRAINER ELICITS: WHAT IS THE PURPOSE OF SUPERVISION? [Expected responses include:]

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

Supervision can happen in a variety of ways, depending on many factors. In the beginning with a new employee, you may have a designated time you meet regularly for a certain amount of time. Perhaps over time, you meet less frequently and for less time, depending on whether the employee feels the need to meet. In any case, it is almost always favorable to provide regular ongoing meetings as opposed to quick discussions on the run for the following reasons:

TRAINER ELICITS: WHY IS IT IMPORTANT TO PROVIDE REGULAR ONGOING SUPERVISION? [Expected response includes:]

- The supervisor has control over the process of supervision. In the crisis-driven world of residential services the supervisor can create a safe haven for the employee
- Creates a safe relationship to help individual take risks and grow
- Addresses strengths and weaknesses together so that problems/negatives are not the only focus of face-to-face meeting

- Allows for more planning regarding interventions and approaches
- Allows for early intervention of problem behaviors and provides support and education to address problems so they don't snowball
- Allows time for goals to be identified and progress toward work goals as well as personal goals to be monitored
- Allows the supervisor better accountability, quality assurance

TRAINER STATES: Agency support for supervision must be in place to make effective supervision a reality. If the supervisor is expected to devote time and effort to providing regular supervision, the organization also needs to allow time in the schedule for meetings and should consider the workload assignments of supervisors.

All levels of staff should receive training. Training can be provided by in-house specialists, informal topic guided meeting ["brown bag" discussions], bringing in outside trainers and sending staff to training centers.

TRAINER ELICITS: WHAT ARE SOME AREAS OF TRAINING THAT MIGHT ASSIST PROGRAMS TO DELIVER SERVICES MORE EFFECTIVELY? [Expected responses include:]

- Case Management
- Engagement
- Diagnostic Trainings
- Stress Reduction
- Addiction
- HIV Disease
- Cultural Competency
- Crisis and Conflict
- Communication
- Supervision

LEARNING POINTS: Regular and ongoing supervision assists programs in effectively providing services to tenants. Training all level of staff ensures competent services and expands the knowledge base of staff. Staff must have time in their schedules for supervision.

IV.D: WORKING WITH BUILDING MANAGEMENT (20–30 minutes)

TRAINER NOTE: See *HANDOUT #22: PROPERTY MANAGEMENT AND SUPPORTIVE SERVICES: ROLES AND RESPONSIBILITIES – AREAS OF OVERLAP*.

TRAINER STATES: Coordinating Property Management and Social Services in Supportive Housing is a training available through this series. We don't have the time to cover this topic in full today. It should be mentioned that there are different partnership models and pros and cons associated with each. You may choose to involve separate or single organizations in the functions of property management, building owner and service provider functions, just as you may decide to contract out for various services, such as HVAC, mechanical systems, pest control, etc.

It is important, regardless of which model you choose, to establish an effective working relationship between property management and social services staff. It is helpful to have representatives from both work together early on in the planning process as each will focus on different aspects of successful development of a project.

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

INTAKE: TENANT SELECTION AND INTERVIEWING

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

ORIENTATION OF INCOMING TENANTS

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

RENT PAYMENT AND ARREARS

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

DEALING WITH NUISANCE AND DISRUPTIVE BEHAVIORS

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

PROCEDURES IN CRISES (E.G., PSYCHIATRIC, MEDICAL, PHYSICAL OR FIRE)

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

TENANT GRIEVANCE PROCEDURES

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

COMMUNITY BUILDING

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

DEALING WITH HEALTH AND SAFETY ISSUES

- Management may want to conduct regular room inspections together with services.

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

LEARNING POINTS: Clarifying expectations and responsibilities for property management and social service staff can help reduce tensions that often arise, particularly around areas where responsibilities overlap, such as issues of safety, intake or dealing with emergency situations. For supportive housing programs, an effective working relationship between property management and social services staff is critical.

V: STRUCTURES TO SUPPORT SERVICE DELIVERY**V.A: COMMUNICATION STRUCTURES** (10–20 minutes)

TRAINER NOTE: See *HANDOUT #23: COMMUNICATION STRUCTURES*.

TRAINER STATES: Many newly developed supportive housing projects invite all staff to all meetings. Time spent deciding who needs what information, and how they might best receive this information, can be time well spent. It can be helpful to draw charts illustrating which groups will convene for which purposes. Careful consideration should be given to who must attend each meeting. If someone is working on something else, is it mandatory that they be interrupted, or is it more beneficial to relay information back to them?

TRAINER ELICITS: WHAT ARE SOME METHODS YOU'VE TRIED FOR KEEPING MEETING GROUPS SMALL OR LIMITED TO THOSE WHO NEED TO BE THERE? [Expected responses include:]

- Solicit input from some people in writing rather than requesting attendance
- Ask people to attend only as much of the meeting as is useful for their purposes
- Establish sub-committees to work on specific projects

TRAINER ELICITS: WHAT ARE OTHER WAYS TO COLLECT INFORMATION ABOUT TENANTS AND OPERATIONS ISSUES? [Expected responses include:]

- Log books
- Charts
- Supervision
- E-mail
- Voicemail
- Written memos

LEARNING POINTS: Meetings can get bogged down with “administrivia.” Much of this type of information can be communicated by written memos or e-mails, saving time in meetings for information that requires discussion. Careful consideration should be given to which types of information should be discussed in supervision, small groups or large group settings.

V.B: PARTNERSHIPS AND COMMUNITY RELATIONSHIPS (10–20 minutes)

TRAINER NOTE: See *HANDOUT #24: MAINTAINING COMMUNICATION BETWEEN PROPERTY MANAGEMENT AND SOCIAL SERVICES.*

TRAINER STATES: An integral part of maintaining a healthy relationship with a partner agency is communication. To this end, programs in partnerships should:

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

TRAINER STATES: Developing collaborative relationships with a tenant's community supports allows supportive housing projects to expand their resources and become involved in the wider community. This generally includes other social service and medical programs in the area, but may also involve tenant's family, friends, religious institutions and other supports. Outreach to these support systems should be done only with the tenant's consent. Programs must be mindful of confidentiality standards regarding sharing information with anyone outside of the program and secure "releases" prior to contacting anyone.

It is important to develop clear communication channels for dealing with outside agencies. Depending on the size of your program, this may mean assigning a point person to handle all calls from collaborating agencies or each case manager may handle

the calls related to his/her tenants. In order to have good working relationships with outside agencies, we must establish a trustworthy reputation.

TRAINER ELICITS: WHAT ARE SOME THINGS WE CAN DO TO ESTABLISH OURSELVES AS TRUSTWORTHY AND PROFESSIONAL IN THE EYES OF OTHER COMMUNITY AGENCIES? [Expected responses include:]

- Follow through with what you say you will do.
- Provide honest and complete information needed to make an appropriate referral. Consider what information the program needs in order to best serve your tenant.
- Establish a written structure, including a time frame, for dealing with referrals.
- Consider any policies, procedures or operations that obstruct communication or collaboration. Change or eliminate those that are in the way. [e.g., staff members have adequate time to work on interagency relationships? Are there overly restrictive policies regarding the sharing of information about tenants? Could this obstacle be overcome with the use of signed release/consent forms?]
- Convey an image. Using your program mission and history, decide what image you want to convey to the community and actively work to create this image and promote this message.
- Identify opportunities to bring diverse interests together. If your program has community space available, offer it to other agencies in the community. Host community barbecues or art shows. If there is a political issue affecting the community, invite people to talk about it and discuss possible strategies that will benefit the group.

LEARNING POINTS: Maintaining community relationships assists programs to expand their resources and integrate into the community. Mechanisms for communication between partners in supportive housing is necessary.

V.C: RECORD KEEPING AND CHARTING (20–30 minutes)

TRAINER NOTE: See *HANDOUT #25: MAINTAINING CASE RECORDS AND DOCUMENTATION*.

TRAINER STATES: A significant area service providers and funders must look at is how to document and maintain case records.

TRAINER ELICITS: WHY IS DOCUMENTATION AND RECORD KEEPING IMPORTANT?
[Expected response includes:]

- Provides quick access to salient information relevant to tenant in case of crisis. Often, a face sheet can provide crucial information for EMS, hospital or crisis staff.
- Assists with continuity of support service between all staff. When a tenant is provided services from more than one staff member, it's vital for each to have a current record to assist with optimal interventions.
- Allows for continuity of support when a worker is not present.
- Acts as an official record of progress and accomplishments or lack thereof. Maintaining case records is an excellent barometer of movement toward accomplishing goals and objectives.
- Can be used as a tool to tailor support services to the needs of a tenant. Over a period of time, a case manager may be able to see patterns of ineffective interventions and support and better assess services needed.
- Can be used as an accurate history of crisis patterns. Often, tenants experience crisis on anniversary dates, holidays and birthdays. Patterns can be easily detected if case records are maintained effectively.
- Enhances the quality of service delivery. With heavy caseloads, referencing case records can assist case managers in the delivery of service.
- Ensures that compliance with audit standards is followed. Funding sources audit case records regularly to ensure that guidelines are being followed and that the quality of service delivery is optimal.
- Encourages follow through with goals and objectives. Well-documented case records will indicate past accomplishment that may assist the tenant with issues of self-efficacy and motivation to achieving current goals.

TRAINER STATES: Case records must be stored in central location, in lockable file cabinets or rooms and accessible only to designated staff. All information must be legible and clearly dated.

TRAINER NOTE: See *HANDOUT #26: WHAT TO INCLUDE IN A CHART*.

WHAT TO INCLUDE IN A CHART

TENANT IDENTIFYING INFORMATION

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

CONSENT FORMS/RELEASE OF INFORMATION

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

PSYCHOSOCIAL ASSESSMENT

- Initial Psychosocial Assessment and updates

SERVICE PLAN

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

PROGRESS NOTES (WEEKLY)

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

DOCUMENT OF PARTICIPATION

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

MEDICAL DOCUMENTATION

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

MEDICATION

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

VOCATIONAL/EDUCATIONAL

- Vocational Assessment
- Career Plans
- Employment History

ENTITLEMENTS

- Current Benefits Verification (update annually)

MISCELLANEOUS

- Incident Reports, Discharge Summaries, Correspondence

BRIEF LECTURE:

Maintaining case records with information from the tenant and on-site staff can be difficult enough. When you are also using community agencies, documentation takes on an added dimension. There are some important considerations when documenting tenant information.

- Consent Forms (a.k.a. Release of Information Forms) must be signed by the tenant authorizing contact between your program and the community agency.
- Request any important documents from the community agency for your records once the release is signed. Consent forms can be used for both verbal and written contact.
- Normalize the consent form process by introducing it during the intake and orientation process. Tenants are more willing to comply if it's perceived as a normal part of the support system in place.
- Consent forms are usually time-limited. Be aware of renewal dates in your case records and have new consents signed consistently.
- A tenant may be unwilling to sign a consent form. This is their right. Workers should document the attempts to ensure that a request was made.
- Consult an attorney to ensure that your consent and release of information processes are in compliance with all applicable federal, state and local laws and regulations.

LEARNING POINT: Case records are an integral component of support services and enhance the quality of service delivery. Documenting off-site service information is an important part of the case records. Consent forms are key to ensuring communication between programs.

V.D: DEVELOPING POLICIES AND PROCEDURES (20–30 minutes)**BRIEF LECTURE:**

Every supportive housing program should have well-documented policies and procedures which are clearly written and understandable to all levels of staff. While policies are reviewed and revised throughout the course of operating supportive housing, it is essential that critical policies and procedures such as on-call systems, fire safety procedures and incident documentation be in place from the start. Policies and Procedures should describe the following: who does what, when or how often is it done, how it is done (in writing, in a meeting, etc.) and what resources are available (staff on call, logbooks). Forms should also be constantly updated and included in any program manuals.

Most programs collect these policies and procedures in a manual form, which, ideally should be accessible to staff. Generally, supportive services programs develop two manuals:

- A SUPPORTIVE SERVICE PROGRAM POLICY AND PROCEDURES MANUAL, which describes in detail the operations of the supportive housing program. Property management's policies and procedures may be included or may be separate.
- A RESIDENT/TENANT HANDBOOK/ORIENTATION GUIDE, which explains the program and its operations to tenants and can be included in an orientation packet

While each program will organize their manuals in their own way, the following categories are commonly included.

TRAINER NOTE: See *HANDOUT #27: DEVELOPING POLICIES AND PROCEDURES: A GUIDELINE FOR SUPPORTIVE HOUSING PROVIDERS.*

WHAT TO INCLUDE IN A PROGRAM POLICIES AND PROCEDURES MANUAL

INTRODUCTION

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

ORGANIZATIONAL CHART

- Organizational Chart; Job Descriptions

ADMISSION AND DISCHARGE POLICIES

- Tenant Selection Processes; Eviction Processes

SOCIAL SERVICE POLICIES

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

BUILDING MANAGEMENT POLICIES

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

EMERGENCY POLICIES AND PROCEDURES

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

FIRE SAFETY POLICY

- Fire Prevention and Inspection Policy

CHILD ABUSE AND NEGLECT REPORTING

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

GRIEVANCE POLICIES

- Formal Tenant Grievance Policy

INCIDENT REVIEW

- Investigating an Incident; Writing and Filing Incident Reports

MEDICAL POLICIES

- Medication Storage; Monitoring Medications

WHAT TO INCLUDE IN A TENANT HANDBOOK/ORIENTATION GUIDE

INTRODUCTION

- Agency Overview; Program Description and Goals; Organizational Chart and Job Descriptions; Hours of Program Operations

BUILDING PROCEDURES

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

HOUSE RULES AND CONSEQUENCES

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

RENT COLLECTION

- Notices and procedures for collection; Rent arrears and payment plans

FACILITIES

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

GRIEVANCE PROCEDURES

- Formal Grievances; Dispute-Resolution Services

SECURITY

- Visitor/guest Policies; Security Rounds

SOCIAL SERVICES

- Description of Services Available; Hours of Program; How to Access Services

TENANT COUNCIL

- Purpose and Goals; How to Become Involved

LEARNING POINTS: Having clear policies and procedures in place helps supportive housing projects run smoothly. A policy manual provides support and guidance for staff so they know what to do as well as where and when to call for support.

V.E: ONGOING PROGRAM DEVELOPMENT (10–20 minutes)

TRAINER ELICITS: WHAT ARE SOME OF THE PURPOSES OF EVALUATING A PROGRAM? [Expected responses include:]

- Reveals whether the program is effective in meeting its goals
- Allows for creative sharing of ideas about ways to get things done and improvements to the program
- Identifies other ways (than the stated goals) that the program impacts tenants or the community-at-large
- Promotes communication about the program and expectations of community members
- Measures consumer satisfaction
- Reflects the value of the services to the funders and the community by documenting outcomes
- Improves delivery of service mechanisms
- Improves cost-effectiveness

TRAINER STATES: Ideally, programs should evaluate their services on a regular basis and incorporate changes based on the information gathered. Realistically, however, it is not always possible to devote the time and energy to program evaluation. The following three circumstances, however, indicate that evaluation may be indicated:

- Changes in tenants' needs
- Changes in tenant's use of services
- Changes in funding and regulations
- Frequent crisis
- High staff turnover

STEPS TO EVALUATE THE PROGRAM

STEP #1: DETERMINE WHAT YOU WANT TO EVALUATE: The first step in the process of evaluation is deciding what you want to measure and/or evaluate and what type of resources you have to dedicate to the process. Most housing providers do not have a great deal of resources to devote to program evaluations, but program development need not be complicated or expensive. Time frame and cost should be considered when looking at your method and process of evaluation.

STEP #2: CHOOSE AND IMPLEMENT METHODS TO GATHER INFORMATION: There are a variety of ways to gather information and each of them have pros and cons in terms of depth of information obtained and ease of implementation. All of the methods

mentioned below are simple ways to obtain and document information. Sources can include staff, tenants and/or community members.

- Individual interviews
- Periodic questionnaires and surveys
- Focus groups
- Regular tenant input meetings
- Documentation review
- Observation (may be conducted by a third party)
- Goals and indicators that are measurable

STEP #3: ANALYZE INFORMATION GATHERED: When analyzing data, always start from review of your organization's goals, that is the reason you undertook the evaluation in the first place. For example, if you wanted to improve your program's strengths and minimize weak areas, you could organize data by those categories and then make suggestions about how to improve the program. If you wanted to fully understand how your program works, you could organize data in the chronological order in which tenants go through your program. If you are conducting an outcome evaluation, you could categorize data according to the indicators for each outcome.

STEP #4: DEVELOP A PLAN TO MAKE MODIFICATIONS: Be sure program staff have a chance to carefully review and discuss the information gathered. Decide what will be changed as a result of the information gathered and develop action plans, including who is going to do what and by when.

TRAINER NOTE: SMALL GROUP EXERCISE ON CONDUCTING A TENANT SATISFACTION SURVEY. See **HANDOUT #28: SAMPLE TENANT SATISFACTION SURVEY**. Break the trainees into small groups and ask them to review the tenant satisfaction survey and then process the following questions

- Do you think that this survey or a similar one would be a valuable tool in your organization?
- What information would you be most interested in obtaining in your program?
- How would you implement such a survey?
- If this was your program how would you use the information gathered?

LEARNING POINTS: Program evaluation is a necessary way to obtain information about how the program is doing and where changes need to be made. Often, providers are reluctant to take on program evaluation, fearing that it is too scientific and that they lack expertise. The point of this section is to illustrate that program evaluation need not be overly complicated or onerous and can actually be extremely simple.

VI: CONCLUSION (10–20 minutes)

TRAINER NOTE: Bring closure to the training by reviewing the highlights of the day. Ask for questions and comments about the content.

TRAINER ELICITS: WHAT ARE SOME OF THE PRINCIPLES OF SUPPORTIVE HOUSING WE DISCUSSED TODAY? [Expected responses include:]

- Affordability
- Safety and Comfort
- Desired and Flexible Services
- Promoting Independence

TRAINER ELICITS: WHAT ARE SOME OF THE AREAS PROGRAMS MUST CONSIDER IN THE DEVELOPMENT OF A SERVICE PROGRAM? [Expected responses include:]

- Be able to identify a philosophical approach to services
- Understand the importance of clarifying program goals and be able to translate these goals into services
- Understand the impact of service design choices, including population served, whether services are offered on- or off-site and the effects of physical design
- Be able to develop a service menu appropriate to their tenant's needs and choices
- Understand how to involve tenants in the design and operation of the service program
- Be able to develop effective program policies and procedures
- Understand staffing considerations in designing a services program
- Be able to implement effective structures to support the delivery of services, such as communication and reporting structures and a system for maintaining collateral relationships
- Understand the importance of evaluating the service program and learn evaluation methods

LEARNING POINT: Trainer will review significant points of the training and clarify any remaining questions.

Developing the Supportive Housing Program

participant materials
supportive housing training series



DEVELOPING A SUPPORTIVE HOUSING PROGRAM

AGENDA

- I. INTRODUCTION**
- II. PROGRAM CONSIDERATIONS**
 - A. Principles of Supportive Housing
 - B. Philosophy of Service Delivery
 - C. Tenant Population
 - D. Project Goals
 - E. Physical Design Effects on Service Delivery
 - F. Resources
- III. DEVELOPING A SERVICE PROGRAM**
 - A. General Service Guidelines
 - B. Deciding What Services to Provide
 - C. Types of Services
 - D. Service Delivery Approach
 - E. On-site Services Versus Referrals to Community Based Services
- IV. STAFFING CONSIDERATIONS**
 - A. Staff to Tenant Ratio
 - B. Roles, Job Descriptions and Staffing Patterns
 - C. Supervision and Training
 - D. Working With Building Management
- V. STRUCTURES TO SUPPORT SERVICE DELIVERY**
 - A. Communication Structures
 - B. Partnerships and Collateral Relationships
 - C. Record Keeping and Charting
 - D. Developing Policies and Procedures
 - E. Ongoing Program Development
- VI. CONCLUSION**

THE PRINCIPLES OF SUPPORTIVE HOUSING

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

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

Affordability

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

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

Safety and Comfort

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

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

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

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

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

Support Services are Accessible, Flexible, and Target Residential Stability

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

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

Empowerment and Independence

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

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

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

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

SUPPORTIVE SERVICES IN HOUSING

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

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

Services critical in achieving residential stability and maximizing independence.

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

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

PHILOSOPHICAL APPROACHES TO SERVICES

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

A. Housing First, Voluntary Services

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

B. Consumer Driven

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

C. Supportive Approach

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

D. Harm Reduction

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

E. Therapeutic Community

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

SMALL GROUP EXERCISE ON CLARIFYING PHILOSOPHICAL APPROACH

Choose a reporter for your group. Discuss the following topics and report back to the larger group after 20 minutes. The trainer will alert you when the discussion time has ended.

Refer to handout #4, "Philosophical Approaches to Services," for information on general categories.

- Do any of the approaches we discussed reflect your program's philosophical approach to services? If so, how? If not, describe your approach.

- Is this approach presented to new staff? If so, in what way?

- What forums exist, or would you like to see in place, for discussing the approach to services? How is the approach linked to the program goals?

- Choose one area, such as disruptive behaviors, program participation or substance abuse, and talk about your programs' approach toward dealing with it.

CONSIDERATIONS WHEN CHOOSING A TENANT POPULATION

PROGRAM CAPACITY TO MEET THE SERVICE NEEDS OF TENANTS

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

TENANT MIX CONSIDERATIONS

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

TIPS FOR DEVELOPING EFFECTIVE PROGRAM GOALS

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

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

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

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

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

SUPPORTIVE SERVICES PLANNING WORKSHEET: PROJECT GOALS

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

Projections

Planning Worksheet – Goals and Conditions of Residency

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

Planning Worksheet – Goals and Conditions of Residency

Projections

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

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

DIRECTIONS:

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

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

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

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

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

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

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

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

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

PHYSICAL DESIGN CONSIDERATIONS

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

OFFICE SPACE & LOCATION OF SERVICES

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

COMMON SPACES

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

SECURITY FEATURES

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

GENERAL BUILDING DESIGN

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

UNIT DESIGN

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

PARTNER SELECTION CRITERIA

THE ORGANIZATION'S MISSION AND GOALS

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

THE ORGANIZATION'S VALUES AND PHILOSOPHY

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

THE ORGANIZATION'S EXPERIENCE WITH SIMILAR PROJECTS

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

THE ORGANIZATION'S EXPECTATIONS FOR TENANT BEHAVIOR

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

THE ORGANIZATION'S MANAGEMENT STYLE/ORGANIZATIONAL CULTURE

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

THE ORGANIZATION'S VISION FOR COLLABORATION

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

THE PROCESS FOR CREATING PARTNERSHIPS

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

TENANT INVOLVEMENT

BENEFITS OF INVOLVING TENANTS IN PROGRAM & PROJECT DESIGN

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

INVOLVE TENANTS IN DECISION-MAKING PROCESSES

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

SERVICE DELIVERY APPROACH

APPROACHES

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

GROUP VS. INDIVIDUAL WORK CONSIDERATIONS

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

USING REFERRAL SERVICES

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

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

SAMPLE JOB DESCRIPTIONS FOR SUPPORTIVE HOUSING STAFF

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

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

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

STAFFING CONSIDERATIONS IN SUPPORTIVE HOUSING

STAFF TO TENANT RATIO

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

STAFF CAPACITY

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

HOURS OF PROGRAM/STAFF COVERAGE

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

STAFFING PATTERN

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

STRUCTURING PARTNERSHIPS

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

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

A. SERVICE DELIVERY APPROACH

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

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

2. Indicate how tenants will access services.

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

B. STAFFING PATTERNS

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

Social Service Titles

1. **Case Managers:** _____

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

2. Residential Aides: _____

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

3. Vocational Counselors: _____

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

4. Job Developers: _____

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

5. Substance Abuse/MICA Specialists: _____

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

6. Recreation Specialists: _____

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

7. ADL Specialists: _____

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

8. Peer Counselors: _____

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

9. Supervisors/Team Leaders: _____

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

10. Other (_____): _____

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

11. Other (_____): _____

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

12. Other (_____): _____

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

Property Management Titles

1. Property/Tenant Manager: _____

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

2. Assistant Manager: _____

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

3. Superintendent: _____

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

4. Porters: _____

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

5. Housekeepers: _____

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

6. Janitors: _____

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

7. Intake/Compliance Specialist: _____

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

8. Other (_____): _____

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

9. Other (_____): _____

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

10. Other (_____): _____

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

Additional requirements for staff:

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

GROUP EXERCISE ON STAFF ROLES

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

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

1. SERVICE STAFF ROLES AND JOB DESCRIPTIONS

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

2. PROPERTY MANAGEMENT STAFF ROLES AND JOB DESCRIPTIONS

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

SUPERVISION AND TRAINING

PURPOSE OF SUPERVISION AND TRAINING

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

IMPORTANCE OF PROVIDING REGULAR ONGOING SUPERVISION AND TRAINING

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

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

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

Intake: Tenant Selection and Interviewing

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

Orientation of Incoming Tenants

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

Rent Payment and Arrears

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

Dealing with Nuisance and Disruptive Behaviors

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

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

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

Tenant Grievance Procedures

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

Community Building

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

Dealing with Health and Safety Issues

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

COMMUNICATION STRUCTURES

CONSIDER WHO NEEDS WHAT INFORMATION

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

Tips for keeping the group small:

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

CONSIDER OPTIONS FOR CONVEYING INFORMATION

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

ESTABLISH AN AGENDA

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

TIPS FOR RUNNING AN EFFICIENT MEETING

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

MAINTAINING COMMUNICATION BETWEEN PROPERTY MANAGEMENT AND SOCIAL SERVICE STAFF

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

MAINTAINING CASE RECORDS AND DOCUMENTATION

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

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

WHAT TO INCLUDE IN A CHART

TENANT IDENTIFYING INFORMATION

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

CONSENT FORMS/RELEASE OF INFORMATION

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

PSYCHOSOCIAL ASSESSMENT

- Initial Psychosocial Assessment and updates

SERVICE PLAN

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

PROGRESS NOTES (WEEKLY)

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

DOCUMENT OF PARTICIPATION

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

MEDICAL DOCUMENTATION

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

MEDICATION

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

VOCATIONAL/EDUCATIONAL

- Vocational Assessment and Career Plans
- Employment History

ENTITLEMENTS

- Current Benefits Verification (update annually)

MISCELLANEOUS

- Incident Reports, Discharge Summaries, Correspondence

DEVELOPING POLICIES AND PROCEDURES: A GUIDELINE FOR SUPPORTIVE HOUSING PROVIDERS

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

AN OPERATIONS POLICIES AND PROCEDURES MANUAL SHOULD INCLUDE:

INTRODUCTION

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

ORGANIZATIONAL CHART

- ❑ Organizational Chart
- ❑ Job Descriptions

ADMISSION AND DISCHARGE POLICIES

- ❑ Tenant Selection Processes
- ❑ Eviction Processes

BUILDING MANAGEMENT POLICIES

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

SOCIAL SERVICE POLICIES

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

EMERGENCY POLICIES AND PROCEDURES

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

FIRE SAFETY POLICY

- ❑ Fire Prevention and Inspection Policy

GRIEVANCE POLICIES

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

CHILD ABUSE AND NEGLECT REPORTING

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

INCIDENT REVIEW POLICIES

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

MEDICAL POLICIES

- ❑ Medication Storage
- ❑ Monitoring Medications

WHAT TO INCLUDE IN A TENANT-WELCOME/ORIENTATION GUIDE

INTRODUCTION

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

BUILDING PROCEDURES

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

HOUSE RULES AND CONSEQUENCES

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

RENT COLLECTION

- ❑ Procedures for Collection
- ❑ Rent Arrears and Payment

FACILITIES

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

GRIEVANCE PROCEDURES

- ❑ Formal Grievances
- ❑ Dispute-Resolution Services

SECURITY

- ❑ Visitor/Guest Policies

SOCIAL SERVICES

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

TENANT COUNCIL

- ❑ Purpose and Goals
- ❑ How to Become Involved

SAMPLE TENANT SATISFACTION SURVEY

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

Demographic Information

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

Service Utilization

8. How often do you see or speak with your ABC HOUSING representative or Case Manager?

- Usually every day
- Few times per month
- About once every couple of months
- Never
- Few times per week
- About once per month
- Couple of times per year

9. Has your ABC HOUSING representative or Case Manager been (check one):

- Extremely helpful
- Usually helpful
- Not very helpful _____

10. Check all that apply:

- I don't know who my ABC HOUSING representative or Case Manager is
- I would like help from ABC HOUSING Case Manager
- I would not like/don't need any help from ABC HOUSING Case Manager

11. Since you have lived in the building, how many ABC HOUSING representatives or Case Managers have you worked with (circle one):

- 1 2 3 4 5 6 7 8 9 10 10+

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

13. In what ways has your ABC HOUSING representative been helpful (check all that apply)?

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

Sample Tenant Satisfaction Survey

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

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

Other: _____

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

Level of Comfort

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

- Very Comfortable Somewhat comfortable
 Not very comfortable Very uncomfortable

Why or why not?: _____

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

- Very Comfortable Somewhat comfortable
 Not very comfortable Very uncomfortable

Why or why not?: _____

Quality of Services

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

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

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

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

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

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

Level of Satisfaction

Check the response that best indicates your opinion.

20. I like the services I receive here.

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

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

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

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

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

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

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

24. Staff return my phone calls within 24 hours.

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

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

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

Sample Tenant Satisfaction Survey

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

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

- Strongly Agree Agree No Opinion
 Strongly Disagree Disagree Not Applicable

DEVELOPING A SUPPORTIVE HOUSING PROGRAM: ADDITIONAL READINGS

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Internet Sites

Bazelon Center for Mental Health Law

<http://www.bazelon.org>

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

Center for Urban Community Services

<http://www.cucs.org>

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

Corporation for Supportive Housing

<http://www.csh.org>

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

National Alliance to End Homelessness (NAEH)

<http://www.naeh.org>

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

National Resource Center on Homelessness and Mental Illness

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

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

Wilder Foundation

<http://www.wilder.org>

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