

Community Spotlight: Homeless Prevention

The Ohio Department of Development Family Homelessness Prevention Pilot Project (OFHPP)

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This case study explores the unique homeless prevention aspect of providing families with direct client assistance and intensive case management services for up to six months. As of December 2008, 421 families successfully obtained permanent housing and received supportive services in support of self-sufficiency and leveraging community resources.

PROGRAM DESCRIPTION

The Ohio Family Homeless Prevention Pilot (Pilot) provides direct client assistance (rent assistance) and intensive, home-based case management to Ohio households facing literal homelessness. It is administered by the Ohio Department of Development's (ODOD) Office of Housing and Community Partnerships, in partnership with the Ohio Department of Job and Family Services' Office of Family Stability. Funding is provided by the state of Ohio through Temporary Assistance for Needy Families (TANF) and the Ohio Trust Fund.

The Pilot program began in January 2008 and will continue through September 2009 with the participation of five nonprofit organization serving six counties:

Organization	County
Community Action Commission of Fayette County (CAC) and Pickaway County Commission Action Organization (PICCA)	Fayette and Pickaway
Communities in Schools/Community Shelter Board (CIS/CSB)	Franklin
Family Outreach Community United Services	Lucas
Salvation Army of Cincinnati	Hamilton
YWCA Dayton	Montgomery

Each nonprofit receives a grant from the Pilot to assess, enroll and provide eligible households with homeless prevention assistance (eg. case management, budgeting assistance and education/training). Since inception, 421 families have enrolled in the program and 277 of them exited the Pilot as of December 2008.

CHALLENGES

Assessed households facing the greatest risk of homelessness can point to five main factors: 1) The lack of employment, 2) The lack of income, 3) Receiving an eviction notice, 4) Experiencing a medical emergency, or 5) Living in substandard housing. These causes are very similar to characteristics of households that end up in emergency shelters, and are therefore appropriate measures of threats to homelessness.

SOLUTION

To address these homeless risk factors, the Pilot program provides prevention assistance in the form of direct client assistance and intensive case management services to enrolled families for up to six months. Direct Client Assistance (DCA), also known as financial assistance, is provided to enrollees to pay for rent, utilities and other non-housing related expenses. Intensive case management is provided to households by resolving immediate housing crisis, conducting home visits, designing individualized case management plans, connecting households to mainstream community resources and assisting with skills-building. Each enrolled household receives one or both types of interventions based on their particular needs.

IMPLEMENTATION

Implementation of the Pilot occurs in three steps. During Step 1, each household is assessed to ensure that they need homeless prevention assistance. During Step 2, eligible families enroll in the program and are matched up with a case manager who develops an individualized case management plan. During Step 3, the family receives direct client assistance. Additional details about each step are provided below.

Step 1: Intake and Assessment. Families at risk of losing housing are typically referred to Pilot by landlords, housing authorities and word of mouth. These referrals create a large number of families interested in participating in Pilot, however funding for the program is limited. Each grantee targets households most in need of homeless prevention by performing comprehensive assessments that involve collecting demographic information and homeless risk factor data. At a minimum, families must meet basic eligibility criteria that ask: 1) Does the household have one or more dependent children? 2) Does the household have income at or below 200% of the federal poverty level and are TANF eligible? and 3) Does the household live in or need subsidized housing and be at risk of homelessness? Families must also meet grantee-specific eligibility requirements to enroll in the Pilot.

Step 2: Enrollment. Enrolled families are assigned to a case manager that works hand-in-hand with each household to identify their particular needs. The case manager will also develop an individualized case management plan to address those needs.

Step 3: Direct Client Assistance. Once a case management plan is in place, direct client assistance is typically offered to alleviate immediate pressures related to household expenses. Most other needs are addressed through resources the case manager may 1) offer in-house, 2) refer to the family from other organizations, or 3) offer after developing partnerships with other organizations needed to address the families' needs. Families are eligible for direct client assistance through the Pilot program for up to six months.

RESULTS

Efficiency and Effectiveness. The average length of time to assess, enroll and provide direct client assistance to families across all grantees is approximately 40 days, or 6 weeks and a total of 277 families exited the Pilot as of December 2008.

Self-Sufficiency. Grantees administered a standardized Self Sufficiency Matrix (SSM) to each household at enrollment, exit, three months post exit and six months post exit. Families' self-sufficiency is assessed in several areas including: Economic, Social-Emotional, and Parenting. In general, families increase self-

sufficiency by participating in Pilot and Economic Self-Sufficiency had the highest improvement across all grantee sites.

Leveraging Community Resources. Each grantee receives leveraged funds, in addition to Pilot funds, to cover each household's expenses. On average, leveraged dollars account for \$453 toward rental expenses and \$458 toward other expenses. Total direct client assistance per household ranges from \$236 to \$1,878.

INSIGHTS/LESSONS LEARNED

The most important lessons learned throughout the Pilot apply to case management services. Families were very pleased that case managers treated them with respect and did not judge them for their circumstances. They also learned that money management is a primary tool in maintaining housing stability and were appreciative of services provided by case managers.

Case managers learned that a good, working relationship with landlords and housing authorities is critical to resolving housing problems in a timely fashion. They also learned that case management plans are achievable only when families are responsible for setting their own goals.

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