FAMILIES MOVING FORWARD: SAN FRANCISCO COUNTY'S HOUSING FIRST PROGRAM FOR CHILD WELFARE FAMILIES

Donna Broadbent

EXECUTIVE SUMMARY

Homelessness for children is highly correlated with significant mental, physical, developmental and emotional consequences for children. Homeless families are more likely to become involved with child welfare services, and homeless children are significantly more likely to have the outcome of that experience lead to their entry into foster care. Furthermore, homeless families take longer to reunify than their housed counterparts. Following the acquisition of a $4 million grant in 2013, San Francisco County has attempted to intervene in the downward spiral that homeless families experience when interfacing with the child welfare department by implementing Families Moving Forward. This innovative, Housing First program works to address the housing needs of a family without the prerequisite of case plan completion in acknowledgement of the difficulty for parents to create larger changes (i.e. sobriety, stabilizing mental health) when their basic needs are not being met. This case study explores the implementation of Families Moving Forward and a review of the preliminary findings of an interim report. Additionally, this case study looks at the area of need in Sonoma County and the resources available to families involved in the child welfare system and makes recommendations based on lessons learned from San Francisco County.

Donna Broadbent, Social Services Supervisor, Sonoma County Human Services Department

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Introduction:

One in forty five children in America will experience homelessness each year. Research over decades has consistently affirmed that homelessness is highly correlated with significant mental, physical, developmental and emotional consequences for children. Homeless families and children are very likely to interface with many public and non-profit agencies for the acquisition of immediate and long term services. Homelessness alone is not a reason for involvement in the child welfare system nor is it ever the sole reason for a child's placement in foster care. However, the inherent risks in homelessness and poverty make families more likely to have involvement with child welfare and research has shown clear links between poverty, homelessness or substandard housing, and involvement with child welfare (Courtney, McMurtry,& Zinn, 2004; Dhillon, 2005).

In a recent point in time homeless count (Applied Survey Research, 2015) San Francisco had 7,539 homeless individuals. Of this population, families comprised approximately 8.3%. Housing individuals and families in San Francisco presents particular challenges given the very high rental costs. For example, the average rental cost for a one bedroom home in San Francisco is $3,500.00 per month (www.sfgate.com).

In 2014 the San Francisco Human Services Agency (SF-HSA) found that between 2008 and 2012 50% of children who were identified as homeless and investigated for maltreatment

ultimately entered the foster care system while their non-homeless counterparts entered foster care at a rate of 13%. Furthermore, SF-HSA found that if the family had one additional risk factor such as mental illness, domestic violence, substance abuse or criminal history the likelihood of foster care entry following an investigation increased to 80%. Following the entry into foster care, the SF-HSA found that a child from a homeless family was less likely to reunify and when he or she did reunify, he or she did so at a rate slower than children from housed families. Additionally, homeless families receiving child welfare services generally do not receive specialized, focused housing services and resources.

Implementation of Families Moving Forward:

In response to a clearly identified need, the SF-HSA sought and was awarded one of five Partnerships to Demonstrate the Effectiveness of Supportive Housing for Families Involved in the Child Welfare System grants. The other four sites were Broward County, Florida, Cedar Rapids, Iowa, Memphis, Tennessee, and the State of Connecticut. This four million dollar, five-year grant is supported by the Child Welfare and Supportive Housing Resource Center. It is intended to look at the effectiveness of an intensive approach to serving families that interface with the child welfare system as a result of chronic homelessness, mental illness and substance abuse. The goals of implementation are to intervene in the downward spiral of homelessness for families working with the child welfare system by integrating community services (including housing and other critical services), customizing case management services and utilizing trauma-informed interventions as well as evidence-based mental health services. The expected outcome of this intervention system is a reduction in child maltreatment, a reduction in child removals and foster care placements and an overall reduction in child welfare system involvement. Families

Moving Forward (FMF) has an identified target to serve 160 families during the five-year grant period. In order to implement this innovative program, the SF-HSA partnered with the San Francisco Housing Authority, the University of California San Francisco Infant-Parent Program, The Department of Public Health Community Behavioral Health Services, a Public Consulting Group, Human Services Agency Workforce Development and the Homeless Prenatal Program. Chapin Hall at the University of Chicago is conducting the local evaluation and the Urban Institute is conducting the national evaluation across all five sites. In addition to the grant money, which cannot be used for housing, the County of San Francisco allocated additional realignment funds ($500,000 annually) for housing resources. These monies have primarily been utilized to support deeper rental subsidies given the high cost of housing and the competitive housing market in San Francisco as these were quickly identified as barriers to program success.

Participant Identification:

On October 1, 2013 FMF (originally named Rapid Support and Housing for Families) was launched. As with most grant funding, the SF-HSA was given a short window of time during which to develop their program. The SF-HSA utilized this time to implement a pilot group that consisted of twelve families (these families met criteria and were randomly selected). Then, when FMF officially launched, the implementation involved the creation of two additional groups created by random assignment, a control group and a treatment group. All three groups have continued to be followed for data analysis.

The SF-HSA utilized a lottery system to identify FMF participants. Families are identified by the SF-HSA Emergency Response Supervisor with their eligibility being determined by the

social worker's completion of the Structured Decision Making (SDM) risk assessment. Eligible families must meet the following criteria:

1. They must be considered homeless based on the City and County of San Francisco's established definition of homelessness which includes temporary housing, single room occupancy hotels, "doubled up" housing or in a shelter.

2. A child welfare case will be opened --- either family reunification (FR) or family maintenance (FM), court or non-court.

3. At least one child on the referral has no prior open child welfare case.

4. One or more of the following risk factors are present based on the Structured Decision Making (SDM) tool:

    a. Caregiver: domestic violence, substance abuse, criminal history, mental health problem.

    b. Child: medically fragile, developmental disability, physical disability, mental health problem.

When the family is determined to be eligible, the Emergency Response Supervisor then emails the FMF lottery within 2 days of case promotion. The family is then reviewed by the FMF Continuous Quality Improvement (CQI) group to verify that they meet the eligibility criteria. However, a family that meets the above criteria will be excluded if the child is a newborn removed within the first thirty days of life AND all prior maternal siblings have been permanently removed. Eligible families are then entered into a lottery system that is controlled by the Urban Institute and utilizes randomization software for selection. Families are then selected for either the treatment group (family will receive services from the FMF program) or

the control group (family will receive "business as usual" services). Both groups will be followed for data analysis purposes.

Families selected for the treatment group will participate in a Family Team Meeting that will include their SF-HSA child welfare case worker, Homeless Prenatal Program case manager and a facilitator (from Homeless Prenatal Program) within five days. The purpose of this meeting is to provide information to the family about the program, obtain voluntary consents from the family and obtain necessary releases of information. A second Family Team Meeting is then scheduled to occur after approximately thirty days in order to begin greater case coordination. Thereafter, Family Team Meetings will occur once monthly in order to coordinate and provide services and referrals. In the thirty days between the first and second Family Team Meetings all involved children will receive a Child and Adolescent Needs Services Assessment (CANS) and all involved parents will participate in an Adult Needs and Services Assessment (ANSA) (at inception and then every six months for the duration of their involvement in the program). Based on the ANSA, families are provided with an appropriate housing subsidy. The types of available subsidies are: 1. Shallow subsidy for below market rent, 2. Deep subsidy where rent is set at approximately 30% of income, 3. Family Unification Program vouchers (i.e. Section 8) that can be used for private market rental units that meet federal regulations, 4. Traditional Section 8 housing vouchers and 5. Local Operating Subsidy (LOSP) for permanent supportive housing.

Early in implementation FMF utilized hotel vouchers (for up to thirty days) to immediately house families. More recently FMF acquired a larger site, Holloway House, where individuals

and families (4-6 at any given time) can be temporarily housed. In addition to these resources, families can also access discretionary funds for incidentals such as security deposits and furniture.

Upon acquisition of permanent subsidized housing, the family's demonstration of an ability to pay their portion of the rent independently, the family's child welfare case being dismissed and no scores on the ASNA that indicate severe, unmet needs, the family is eligible to move into check-in status. The case manager and the family then discuss a reduction in services and support and if both parties feel it is appropriate then the family moves into check-in status. During check-in status the family receives periodic check-ins from the case manager with no further Family Team Meetings. After a six-month period in check-in status with no identified concerns, the family is eligible for graduation from the program.

Preliminary Outcomes/Results:

FMF is an innovative and new program; therefore, significant outcome data is not yet available to fully ascertain its success. However, the program does have a robust data collection component and much more information will continue to be gathered throughout the course of the five year program.

A semi-annual review of FMF was completed in October 2015. During two years of program implementation 136 families were found to be eligible and were referred to the FMF lottery. Utilizing randomized selection, 70 families were selected to participate in the program. The remaining 66 became the control group. The program's original goal of referring 32 families per

year has been exceeded. Additionally, FMF continues to serve eleven of the twelve families who comprised the pilot phase of the project.

In September 2015, four treatment group families had moved in to check-in status and were moving towards graduation. Seven pilot group families were in check-in status and one pilot group family had successfully graduated from the program. Five treatment group families and one pilot group family had met the criteria for check-in status but had not yet made the transition to check-in status. Seven treatment families and one pilot family had exited the program for reasons other than graduation (e.g., moved out of the area, Family Reunification services were terminated, lack of involvement despite staff having reached out) and an additional two treatment families were in the exit process.

Group	Families served	Meet check-in criteria	In check-in status	Graduated	Exited for other reasons
Treatment	70	5	4	0	7
Pilot	11	1	7	0	1

One identified core success of the FMF program is an active Continuous Quality Improvement (CQI) group. This multidisciplinary group is a cross system model that facilitates the delivery of effective services to families that have multiple needs. One of the important functions of this group is to recognize and address challenges and gaps in programming. This group meets once a month, which increases its ability to quickly hear about and respond to these challenges or gaps in a swift manner. As this program involves multiagency collaboration, a regular meeting group that addresses these issues quickly is likely a key component to ongoing functionality and success of the program.

Challenges:

The caseload originally identified for a case manager working in the FMF program was 12.5 to 1; however, families have not been exiting as quickly as originally anticipated and this has risen to 15 to 1. This is one of the issues that the CQI group is working to better understand and address.

The primary funding source for FMF is a five year grant that is set to expire in 2017. While the county has allocated an additional $500,000, this will likely not be enough funding to maintain the program at its current operating level. However, housing vouchers (FUP and traditional Section 8) are likely to still be available and so the program could continue in a modified way.

The cost of housing in San Francisco has been a significant challenge to the FMF program. While the cost of renting a home in San Francisco increased significantly in the last few years, with the current estimate of $3,500.00 per month for a one-bedroom apartment, Section 8 vouchers have not increased and only cover rent up to $1,800.00 per month. This means that even with a housing voucher, a family will likely struggle to find affordable, sustainable housing. Although families are finding housing, it is taking longer than originally anticipated.

FMF has many goals, some easier to measure in shorter timeframes than others. Whether a family obtains housing or not is a fairly straight forward process. The larger goals of FMF—a reduction in child maltreatment, a reduction in child removals and foster care placements, and an overall reduction in child welfare system involvement—will take longer to assess.

What is currently happening in Sonoma County?:

According to the Sonoma County Homeless Point-in-Time Census and Survey Comprehensive Report for 2015 there were 3,107 homeless (homelessness as defined by HUD) individuals living in Sonoma County. Of those, 33% were sheltered (emergency shelter or transitional housing) while 67% were unsheltered (on the street, abandoned buildings, cars/vans/rvs and encampment areas). This included 127 families. Furthermore, although they do not meet the HUD definition of homelessness, data from www.kidsdata.org indicates that there are 1,405 students living in "double-up" situations with friends and family in Sonoma County (Applied Survey Research, 2015). Similar to San Francisco, rental home affordability has been a significant issue for Sonoma County. Sonoma County rental costs have increased approximately 30% in the last three years and do not appear to be slowing or reducing. Helping individuals and families move out of homelessness has recently been an area of increased focus in Sonoma County and specifically for the Sonoma County Board of Supervisors who have set the goal of making Sonoma County the healthiest county by 2020. Sonoma County has implemented several programs that are not specific to child welfare including, but not limited to, Homeless Court, Sonoma County Task Force for the Homeless and the Safe Parking Program.

There are ten agencies in Sonoma County that provide housing and services for homeless families and children including: Social Advocates for Youth (SAY), Catholic Charities, Committee on the Shelter less (COTS) and Interfaith Shelter Network (IFSN). Eleven local agencies provide time-limited, subsidized transitional housing services for certain populations. Additionally, the county offers programs through SonomaWorks (CalWorks). However, despite

these resources, in June 2014 one Catholic Charities shelter had an active waitlist of 53 families suggesting that the current available resources are not sufficient to meet the community's needs.

In 2016, Family, Youth and Children's Services entered into a $390,000 contract with Interfaith Shelter Network to provide intensive housing assistance for families interfacing with the child welfare system. The Housing Assistance and Permanency Program (HAPP) was designed to help families involved in the child welfare system to secure and sustain housing. HAPP has the ability to immediately house an individual or family in supported transitional housing while they receive case management services for the specific purpose of securing stable housing. Families are referred by their case carrying social worker and a supervisor must also sign the referral form. The parent(s) then completes an intake and psychosocial assessment. HAPP is not a Housing First model in that the families being referred are being assessed for their readiness to work towards obtaining housing. However, Interfaith Shelter Network has committed to immediately housing (in temporary shelter or transitional housing) all families referred for whom there is an immediate need. So, from acceptance of the referral it becomes housing first experientially for the family. After completion of the assessment the family then works with its HAPP case manager to develop a housing case plan. The goal for all families is to obtain permanent housing in six months or less. Families who become ineligible during their work with the HAPP are provided with referral assistance to meet their housing needs utilizing other available programs.

Sonoma County has fifty Family Unification Program (FUP) vouchers available for families. However, the way these vouchers are provided is that fifty were released then as the vouchers are

either lost, a family becomes ineligible or a family has one for longer than one year they transition to a regular Section 8 voucher. These vouchers then cycle back for reuse. Unfortunately, the rate at which the vouchers cycle back for reuse is impossible to predict making reliance on their availability for families more difficult. This was also a difficulty in San Francisco. Additionally, like many other counties, the traditional Section 8 housing list is routinely more than five years long.

Recommendations/Lessons Learned:

Sonoma and San Francisco Counties have some similar challenges regarding homelessness and affordable housing. However, the two counties also have some stark differences. San Francisco County is urban, while Sonoma is rural. San Francisco County has a population of 837,442 while Sonoma County's population is 495,025. The housing costs in Sonoma County are high; however, those in San Francisco are much, much higher.

FMF is an impressive program and while the achievement of some of the longer term goals has yet to be determined, the initial data outcomes suggest very positive results for families. Unfortunately, it is also a costly program and without a grant it is unlikely that Sonoma County could allocate several million dollars for implementation of a program such as FMF. Furthermore, at this early stage, it would be prudent to wait for further information about the program's outcomes and successes before adopting/creating a program modeled after FMF. However, there are many lessons that could be learned from San Francisco's implementation that could facilitate the continued successful use and implementation of programs available in Sonoma County, particularly HAPP.

Firstly, there are some inherent qualities about Sonoma County that simply make collaboration easier. Primarily, Sonoma County is a smaller county. As such, there is only one primarily assigned employee at the Housing Authority that processes Family Unification Program (FUP) vouchers and he is easily accessible and collaborates with the Sonoma County Family, Youth and Children's Services Department. Sonoma County's smaller size also means that program implementation is somewhat easier in that the number of individuals to train is fewer and fewer supervisors are screening referrals, thereby, possibly increasing the consistency of practice.

Standardize the definition of homeless: Standardizing the homeless definition for social worker's that are providing referrals for homeless families may be of some benefit. All social workers may not agree on the definition of homelessness and this can impact the ability to collect accurate data as well as the completion of appropriate referrals. In San Francisco County not having a shared, understood definition initially led to some families not receiving a referral to FMF. Regardless of program, Sonoma County Family, Youth and Children's Services staff should have a clear, agreed upon understanding of what criteria are required in order to make a referral. Sonoma County, like San Francisco County utilizes Structured Decision-Making (SDM) tools for all families with whom they interact. In San Francisco County, training was utilized to ensure that all social workers were completing the SDM questions specific to homelessness using the same definition and criteria. This could be accomplished in unit trainings as well as in Sonoma County's SDM workgroup.

Implementation of a Continuous Quality Improvement Group (CQI): Currently a group comprised of Family, Youth and Children's Services staff (supervisors, planner analysts and

section managers), Interfaith Shelter Network Staff, and Housing Authority staff meet with some regularity to review the implementation of HAPP as well as to check in on the FUP voucher program. This group has not established an expectation about how often to meet and it could be helpful to do so. The CQI group was identified as one of the key components of FMF's success, in part, because of the ability to quickly address issues and gaps in service as they arise.

Robust data collection: The ability to clearly show the success, or lack thereof, of a program is incredibly important. Resources are limited and should be targeted to those programs that achieve the desired outcomes for as many individuals as possible. As HAPP is in its early stages, it will be important to collect comprehensive data on the overall performance and success of the program. If HAPP is achieving the goals established, such data would then clearly demonstrate the need for ongoing and perhaps greater funding, if deemed appropriate and necessary.

Continued collaboration and education: The Family, Youth and Children's Services Department already interfaces with all agencies in the county that provide assistance with housing to families. There may be some benefit to organizing a regular meeting for these agencies in order to ensure the best use of available resources in the community for the families interfacing with Family, Youth and Children's Services. Additionally, as Family, Youth and Children's Services has recently hired a great deal of new employees, education about the available resources would likely benefit social workers and the families with whom they work. This will help to ensure full utilization of available resources.

Acknowledgements:

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