The Realities of Housing and Homelessness on the Healthcare System

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VT Department for Children and Families

http://dcf.vermont.gov
# Social Determinants of Health

<table>
<thead>
<tr>
<th>Economic Stability</th>
<th>Physical Environment</th>
<th>Education</th>
<th>Food</th>
<th>Social Supports</th>
<th>Health Care</th>
</tr>
</thead>
</table>

**HEALTH OUTCOMES**
Homelessness and Health

Homeless individuals have higher rates of acute and chronic illness when compared to non-homeless individuals.

- Pre-existing health conditions
- New health problems
- Behavioral health issues

(National Health Care for the Homeless Council)
Agency of Human Services’ Blueprint to End Family Homelessness by 2020

• Adopts the national “Family Connection” framework on homelessness.

• Brings together supportive services, housing and rental assistance to improve housing stability for families, landlords and communities.

• Constructs and rehabilitates affordable rental housing for households with extremely low incomes; accessible to families/individuals who have experienced homelessness.

DCF’s Emergency Housing Program

In Vermont, the homeless are served through the DCF General Assistance Program which provides emergency housing to the following individuals and families:

• Vulnerable Populations
• Catastrophic Situations including victims fleeing domestic violence
• Cold Weather Exception
DCF’s Emergency Housing Program

Vermont’s historical reliance on motels to provide emergency housing had many drawbacks:

• Limited access to case management and other support services
• Challenging living conditions for families and children
• Lack of food storage and preparation
DCF’s Emergency Housing Program

The number of Vermonters needing emergency shelter steadily rose from 2011 – 2015:

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th># of Unique Cases</th>
<th># of Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>1448</td>
<td>31,934</td>
</tr>
<tr>
<td>2012</td>
<td>1954</td>
<td>38,350</td>
</tr>
<tr>
<td>2013</td>
<td>2851</td>
<td>71,770</td>
</tr>
<tr>
<td>2014</td>
<td>2796</td>
<td>52,087</td>
</tr>
<tr>
<td>2015</td>
<td>2981</td>
<td>52,502</td>
</tr>
</tbody>
</table>
DCF’s Emergency Housing Program

The Harbor Place Transitional program opened on November 1, 2013 and provided the following:

• New 30 bed Facility
• Case management and support services
• Community partners engaged in program
• Cost effective alternative to motels - $38/night compared to $62 for motel
DCF’s Emergency Housing Program

DCF launched its Emergency Housing Initiative in April of 2015 transforming its *motel-centered* program to a *community-based* program.
DCF’s Emergency Housing Initiative

Key parameters of this community-based model include:

• Collaboration with local housing Continua of Care
• Reduced Reliance on Motels
• Evidence-based approaches of the Family Connection Framework
• Provides coordinated intake and assessments for homeless individuals and families
DCF’s Emergency Housing Initiative

DCF’s Housing Opportunity Program (HOP):

Strategically invested $790,000 from the General Assistance Emergency Housing program into new community-based programs designed to provide shelter, case management, homelessness prevention and rapid re-housing services.
DCF’s Emergency Housing Initiative

HOP’s funded proposals included:

- 4 seasonal warming shelters in Burlington, Barre, Newport and St. Johnsbury
- 16 additional spaces to provide emergency housing for families with children, year-round through master-leased apartments with services
- Innovative partnerships with Domestic Violence organizations to better deliver shelter and services to victims fleeing domestic and sexual violence
- Additional capacity to serve unaccompanied youth ages 18-24
2016 Outcomes

General Assistance Emergency Housing Program Utilization for 2016:

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th># Unduplicated Cases</th>
<th># of Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>2015</td>
<td>2981</td>
<td>52,502</td>
</tr>
<tr>
<td>2016</td>
<td>3834</td>
<td>39,953</td>
</tr>
</tbody>
</table>

Results:
• A 24% reduction in the number of motel nights from 2015
• Overall spending on emergency housing decreased from $4.3M in FY15 to $3M in FY16
2016 Outcomes

Second Year Decline in Homelessness in Vermont

Homelessness In Vermont: Five Year Trend

- **Balance of State**
  - 2012: 1,160
  - 2013: 971
  - 2014: 1,556
  - 2015: 1,052
  - 2016: 770

- **Chittenden County**
  - 2012: 384
  - 2013: 483
  - 2014: 537
  - 2015: 471
  - 2016: 332

- **VERMONT TOTAL**
  - 2012: 1,544
  - 2013: 1,454
  - 2014: 1,556
  - 2015: 1,523
  - 2016: 1,102
2016 Outcomes

DCF’s Housing Opportunity Program (HOP):

86% of households who were stabilized in transitional or permanent housing continued to be stably housed 90 days following assistance.

2016 Outcomes

Domestic Violence:

There has been a 10% increase in the number of individuals/households seeking emergency housing fleeing from domestic violence;

And a 42% increase in the number of children.
New Initiatives for FY 2017

Community Investments include:

• Bennington County Coalition for the Homeless: $80,000
  10-bed expansion of emergency shelter for single adults

• Rutland’s Open Door Mission: $230,000
  16-bed expansion of emergency shelter for single adults
New Initiatives for FY 2017

Domestic Violence Initiative

Expansion of partnership with domestic violence organizations to the Rutland and Bennington DV shelters: $256,875

• Victims have one-stop to receive shelter, and
• DV programs are able to engage families with essential services and support more quickly.
DCF Promising Practices

The Family Supportive Housing Program provides intensive case management and service coordination for 91 families with children.

Of these 91 families:

- 75 families (82%) were in permanent housing at end of first the year;
- 11 of 17 (65%) of adults in recovery maintained their sobriety after 12 months;
- 24 families (26%) had open cases with the Family Services Division;
- 8 of these cases (33%) were favorably resolved.

DCF Promising Practices

Vermont Rental Subsidy (VRS) Program is a rapid-rehousing intervention that allows households to pay 30% of their income toward monthly rent for 12 months.

Of these households:

- 33 households (25%) increased their earnings or found alternative housing
- 66 households (49%) bridged to longer-term federal rental assistance programs
- 35 households (26%) were removed from program for non-compliance
The Value of Stable Housing

AHS study of 134 VRS households found that over the two-year period from homelessness to housing stability, Medicaid costs for:

- Emergency, inpatient and observation status care among family members declined by $196,561 or 51% below baseline, and

- Preventive and primary care among family members declined by $55,257 or 11% below baseline.

Next Steps

- Accelerating Vermont’s Effort to End Homelessness
- Assessment of the state’s current systems and resources
- Development of a Comprehensive Roadmap
- Report to the Legislature with Recommendations

Final Report Due December 2016