



Integrating Critical Time Intervention Strategies into Our Homeless Service System

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Background

Case management for varies widely; success in improving long-term outcomes

CTI originally shown to be effective in helping chronically homeless single adults maintain housing, used in PSH first

CT was the first attempt to formally adapt for Rapid Re-Housing (shorter term housing intervention)

Concept used in developing aspects of coordinated entry (Young Adults)

Main Objectives

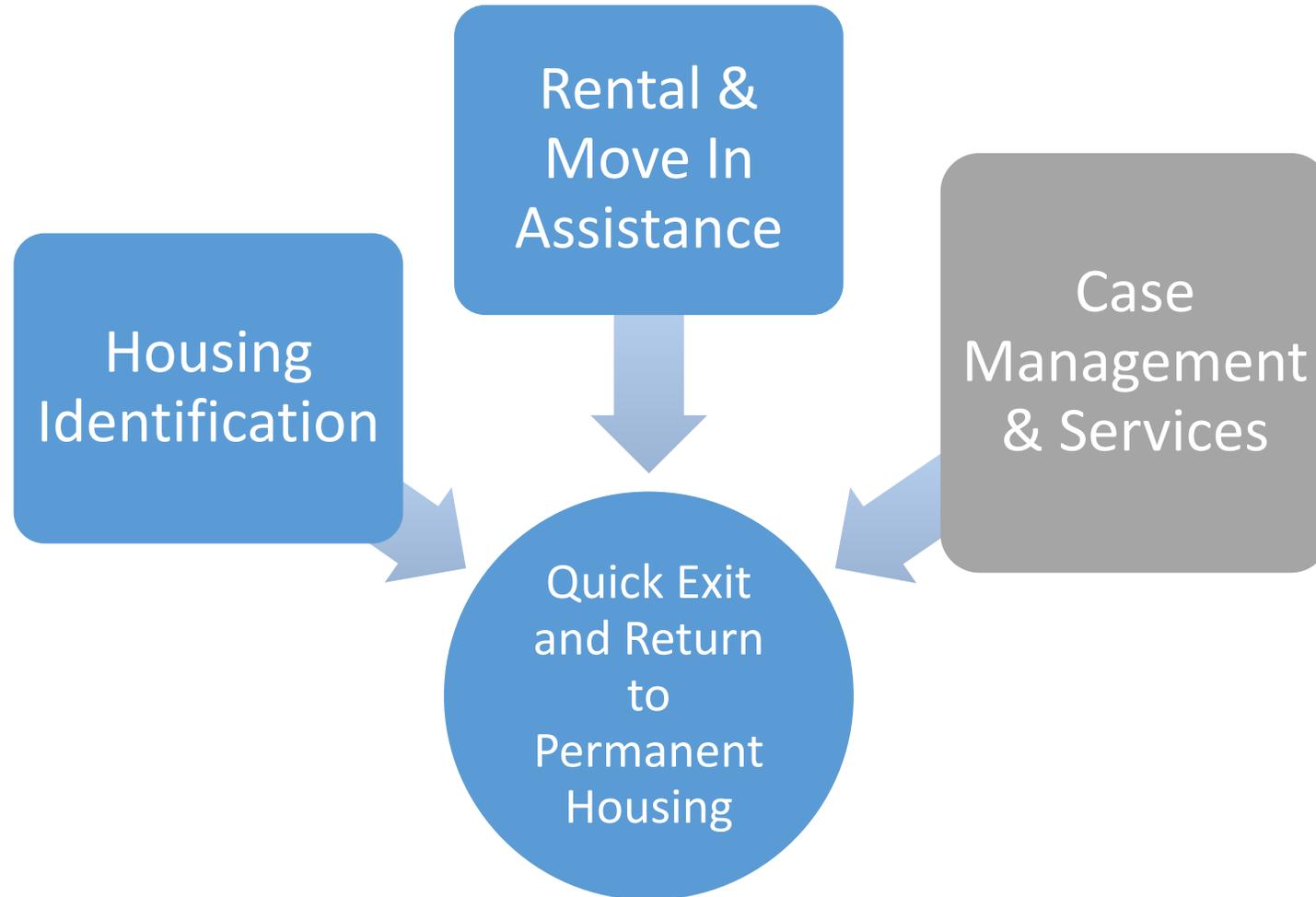
Obtaining and coordinating financial benefits and resources

Accessing services important to client and housing stability; health care, child care, employment and education services (formal supports)

Managing financial resources

Connecting clients to effective informal social and community supports that address barriers to stable housing

Core Components of Housing: Where does CTI fit?



Strengths-Based

- Identify and leverage client's own resources & capacities
- Honor client's right to self determination
 - Empowerment
 - View client as partner and collaborator
 - Shared decision making

Individualized

- Caseloads are diverse- some need very little assistance, some need more intense help
- Level of assistance should be evaluated and adjusted continuously

Culturally Sensitive

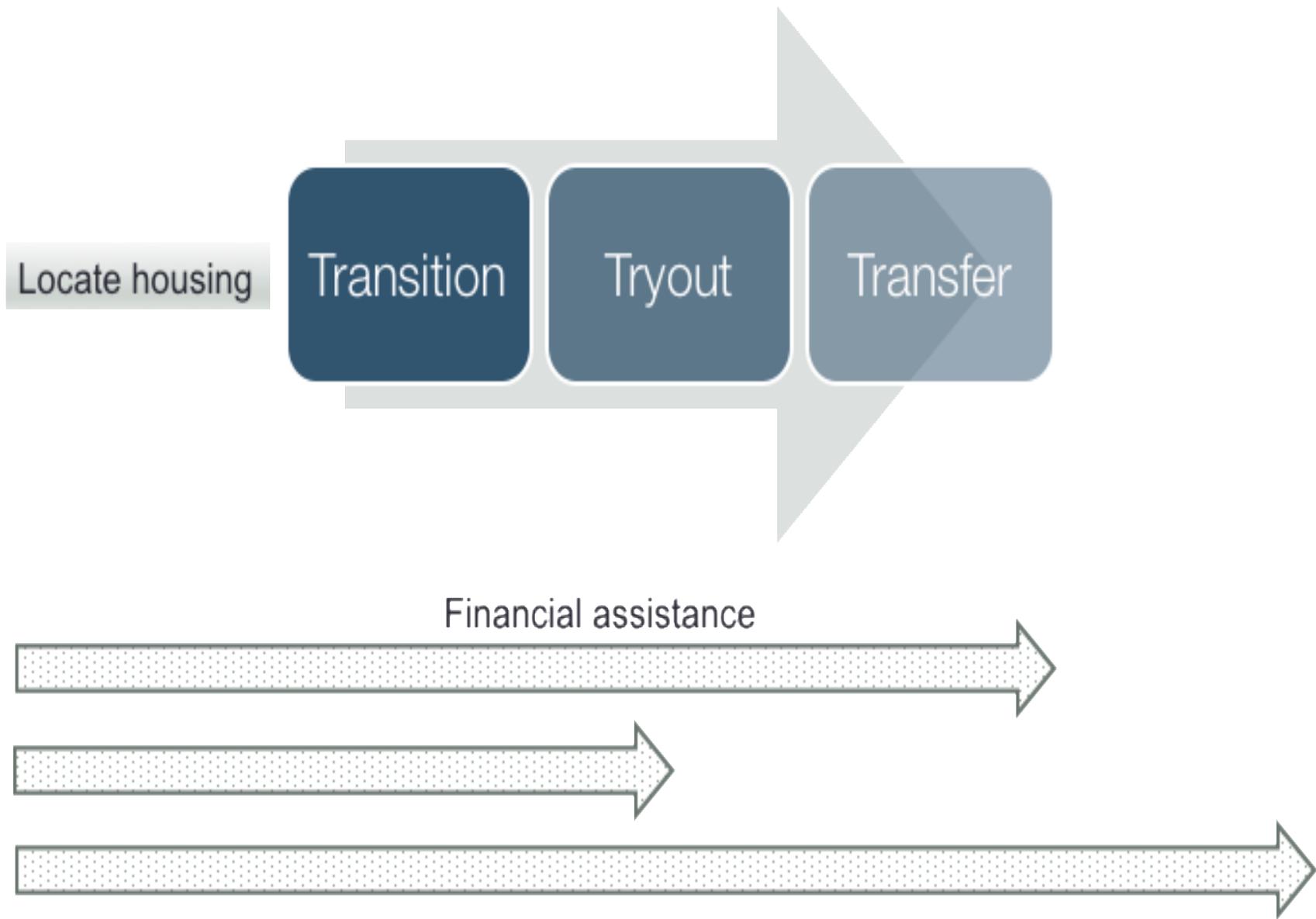
- Client views on how to solve a problem may differ from yours- important to balance respect for views with reality of situation
- Different views on money, the meaning of accepting “help”; especially from the government

Transparency

- Clients have a right to know nature and extent of assistance they are eligible to receive, including the duration of financial assistance and case management support
- Addressing motivation through Housing Plan- what is the reality of the situation, what can be done in the time available?

Trauma Informed

- Trauma histories are common among persons who become homeless
- Domestic violence is a common contributor to housing loss
- Emphasizing safety, establishing trust, and promoting opportunities for clients to rebuild a sense of control and empowerment are needed



	Pre-CTI	Phase 1: Transition	Phase 2: Try- Out	Phase 3: Transfer
Time frame/Intensity of Contact	Flexible	2 Months/Intense Weekly	2 Months Moderate Bi-weekly	2 Months/Low Monthly
Objective	Housing Location/Move in; Begin CM Assessment and Housing Plan	Complete Housing Plan; Identify Resources and connect client	Monitor resource impact and client access	Complete transfer of services to the community
Action Steps	Negotiate Lease Educate/Advocate Relationship Building	Accompany client to appointments, follow up to ensure connection	Make adjustments to plan in collaboration with client	Meet with new service providers or others in the support system; reflect on work with client
Potential Barriers	Housing placement may be delayed due to multiple challenges	Lack of resources; Client hesitant to engage	Client may not be ready to assume rent; resources may be inadequate	Both client and worker may have difficulty ending, especially if goals aren't met.
Strategies	Take opportunities to teach/model housing location process; present services as a resource, not an obligation	Do advance work of creating resource networks	Empower client to do what they can on their own; create alternative plans if necessary	Reduce involvement gradually and inform client early on about the length and nature of CM support

Phase 1: Transition

- High intensity- at least once a week direct contact; assessment, completion of Phase Specific Plan and connection to resources
- Brief assessment related to housing barriers, strengths and challenges
- One to three focus areas chosen from a “menu” of domains

Phase 1: Focus Area Domains

- Income generation
- Budget management
- Survival needs (food, clothing, furniture, etc.)
- Health & mental health
- Child care
- Transportation
- Education (child/adult)

Phase 1: Activities

- Complete Phase Plan documents
- Identifying appropriate services in the community that address needs and can continue beyond CTI
- Accompany clients to appointments
- Follow up with linkages- call, visit- is the resource delivering what you and the client expect? Do you need to advocate?

Phase 2: Try-out

- Moderate Intensity- Direct contact at least biweekly
- Main objective: Monitor the impact of resources on goal attainment and make adjustments as necessary. Empower client to maintain resources independently of the case manager.

Phase 2 Activities

- Monitoring to assess whether linkages are working and if resources are making an impact
- Revisit and adjust Phase Specific Plan to reflect the reality of resources now and in the future
- Emphasis on what is wrong with the **plan**, not what is wrong with the **person**.

Phase 3: Transfer

- Low Intensity- Direct contact 1-2X per month
- Final phase focuses on completing the transfer of primary case management responsibility to the community resources that will provide long- term support to the client
- Formal ending of Client-Case Manager relationship

Phase 3 Activities

- Meeting together with key people in the support network
- Reviewing the work, reflecting on what was accomplished, what is ahead
- Review plan for client if challenges to housing stability arise in the future
- Avoid temptation to end services too early if client appears to be doing well!

Benefits of CTI



Linking clients
to needed
services early

Structuring
community
supports



Client-led,
empowering

Maximize
Community and
State Resources



Thank you!

Any questions?

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