Family Rehousing and Stabilization Program (FRSP) Task Force
Advocate Listening Session
December 2, 2019
DHS Headquarters
64 New York Ave, NE, Sixth Floor

Listening Session: 3:30PM-4:30PM
Attendees:
Kate Coventry DC fiscal Policy Institute
Rachel Rintelmann Legal Aid DC
Kathy Zeisel Children's Law Center
Amber Harding Washington Legal Clinic
Wes Heppler Washington Legal Clinic
Karen Malovrh Washington Legal Clinic
Darrell Cason DHS
Noah Abraham DHS
Christy Evans DHS
Nancy Blackwell DHS
Call in Attendees:
Dawn Dawson DC Coalition on Domestic Violence
Carolyn Perez Washington Legal Clinic
Cathy Zeisel Washington Legal Clinic
Barbara Poppe Facilitator

Welcome and introductions
Noah Abraham, Deputy Administrator for Family Services Administration, opened the meeting by welcoming everyone and addressing the purpose of the listening session. DHS held a meeting with advocates prior the launch of the task force. Since the launch of the task force, advocates provided feedback through participation at the task force meetings, webinars and through the provision of feedback on task force documents via email.
The listening session is scheduled per the request from advocates. The meeting is aimed at gathering additional feedback from advocates on the list of questions. Advocates indicated the importance of listening from customers including those who have exited the program. They believe their concerns have not been added into some of the task force discussions. Advocates confirmed that they represent families who have exited the program, especially those who have been evicted.

Barbara Poppe, Consultant and Facilitator, provided the following list of questions for discussion purposes:

1. From your perspective as advocate, what works best about the FRSP program?
   - Advocates indicated they would like to see the program designed to provide a realistic chance for families to be successful.
     ▪ There shouldn’t be a cliff. There needs to be enough of the permanent housing supply so that people are not dropped off.
     ▪ A combination of making sure that families are not falling off of a cliff and ensuring that families are screened properly for long term subsidy.
     ▪ A combination of no arbitrary cliff and families being able to succeed in the program.

A. What would you most like to see improved about the FRSP program?
   - Designed so that families have a realistic chance of success and families do not end up homeless or evicted.
   - Make sure the right families are in the program to prevent the cliff at the end of the subsidy. Only families who are able to succeed should be placed in RRH.
   - Placement into quality housing. Design ways to better protect the safety of families from substandard housing.
   - There should not be a cliff. There should be a permanent supportive housing supply for families who will not succeed in paying market rent.
   - The goal should not be faster exits from shelter into RRH.
   - Right services from the beginning. TAH is cheaper than RRH.

B. What types of improvements would help support:
   i. Faster exits from shelter to FRSP with services in place?
      - Screen consumers on the front end. Only place families who are able to succeed in FRSP into the program.
      - Families should be screened appropriately for housing affordability. Those who are not able to increase their income should be screened for permanent subsidy model
   ii. Faster transitions from FRSP to PSH and TAH as appropriate?
      - Families should be triaged into PSH and TAH.
      - Hiring effective housing navigators.
      - Filter consumers from the onset.
   iii. More efficient exits from FRSP with viable housing sustainability plans?
o There needs to be a system like progressive engagement and not a cliff. If families are not able to afford their rent at the end of the subsidy, we will continue to have a system that is failing.
o Support for paying rent at the end, families cannot afford to pay the high percentage of their rent 50% of income + utilities. Rent payment including utility should not exceed 30% of the family’s income.
o Faster exits from shelter, for customers with disability, etc.
o RRH was a response to a job loss when the economy went bad and not a housing solution to generations of poverty. Remember who the population is - homeless families are not this group.
o Clear TAH eligibility guideline.
o Customers are being forced into RRH even though they are eligible for PSH/TAH. It is inefficient when families go back to VW upon eviction and cycling back, shelter costs, and return to RRH.
o Better coordination with DCHA.
o Separate rule for DHS referral process with locally funded money to change to lower barrier.

C. What types of enhancements would improve?
- Customer experience and outcomes?
o Streamline the referral process to permanent housing opportunities.
o Customers are worried about paying 50% of income plus utilities which is slowing them down.
o Customers feel like they aren’t getting the support needed. It feels like families are being setup.
o Reluctance of families going into RRH, so families restrict what they look for because they are worried how they will afford their rent at the end of the program.
o Customers need community supports, connections/communication with case managers
o Create direct path on how people submit their documentation for TAH/PSH application.
o Institute escrow payment to provide a cushion upon program exit.

- Efficiency and effectiveness of program delivery?
o Better training and universal understanding of what they are screening for (FRSP or TAH/PSH).
o Better screening of case managers.
o Request documents needed for long-term housing subsidy application including medical and school records early.

- Oversight and accountability?
o Better coordination with DCHA.
o Cut down some of the levels the documents requirements from DCHA, especially if the documents have been provided before they should not be requested again like pay checks. In cases where DHS is able to pull the
documents from a given system, families should not be requested to submit the documents.
  o Case manager screening for long-term housing early on.
  o Families are being told to get back to VW to receive RRH again. Not financially sufficient.
    • DHS should assess the data to see the number of families who sought assistance from Virginia Williams Family Resource Center, while currently in FRSP.
    • We gathered feedback from families that they are advised to re-apply for FRSP. It doesn’t seem like an efficient way to provide assistance. 12 months is not a realistic amount of time for anyone to become stable. The homeless families are not the families who have lost their jobs.
  o Customers are having a hard time finding landlords that will rent to them through RRH.
  o DHS should track some of the bad landlords from getting into this program. Families are ending up in subpar units.
  o The units tend be in the sub market that may pass inspection but the landlord may stop doing repairs.
  o Landlord who have a history of no repairs, assaulting a client, unit inspections that pass initially and then fall apart within a month.
  o Families often go into sub market units far from public transportation not safe.
  o Landlords are up charging the rent because it’s a subsidy program. There is competition with section 8 and DCHA voucher problems.
  o Landlords do not want to pay for the cost of eviction.
  o Landlords feel social obligation to support clients
  o Landlords too don’t feel supported.

Discussion:

Ms. Poppe asked if advocates support the FRSP bridge model recommended by TF members (The proposed Bridge Model is for families who have a pathway to a TAH or PSH voucher. The Bridge Model will enable them to exit shelter to an apartment with initial determination for TAH or PSH eligibility. Families that meet eligibility determination and are prioritized will be matched to a long-term subsidy within the first 3-6 months in FRSP program if a voucher is available. This program will enable the highest need families to access a voucher and provide a faster determination than the current program.)

  • Advocates indicate that the recommendation would mirror the current TAH/PSH program and in concept it could work.

Discussion question: What program do you want for the customer that’s not PSH or TAH?

  o Advocates stated families, who are not eligible for PSH with documented disability and those who are not able to increase their income, should be offered TAH voucher.
    • Ideal system – at entry, 20% go to PSH/TAH from shelter, from 80% in RRH about 30% of 80% can afford their rent at the end of the program. For the
remainder majority of the families who are not able to afford rent on their own - they should be offered TAH.
  o The population that is not eligible for PSH should receive TAH vouchers this include families that cannot afford market rent in the District, no disability, and working but not enough to afford rent.
  o If 42% of families in FRSP are returning seeking services, since TAH is a third of the cost of RRH it will be cost effective to provide the families TAH.
  o No magical answer.
  o Tremendous set of factors need to be in place to have RRH succeed.

2. Closing
When should a family be exited from the FRSP program?
- When people can afford to pay 30% of their income towards rent.
- Never.
- The current FRSP model has families paying more in rent than the voucher program.
- The client has reasonable likelihood for stability or the client has a reasonable income to afford the unit without the FRSP subsidy.
- The 1 six month extension does not feel individualized enough
- Advocates ¹ also shared the following recommendations that were previously shared by the advocate community during the HSRA amendment process to reform the program and indicated interest to discuss further on program exits:

**Specific Language on Exits**
Language from July redline

d) If a client reaches or exceeds the time limitation for rapid re-housing assistance, as established by the regulations for the rapid re-housing program, a provider may terminate the client’s rapid re-housing assistance, provided that:

1) The client has received appropriate and consistent case management as part of their participation in the rapid re-housing program;

2) The provider documents that it has evaluated the client for permanent housing programs offered in the Continuum of Care, including permanent supportive housing and targeted affordable housing, and made referrals to those programs, as available and appropriate; and

3) The client is able to maintain stability in permanent housing without further assistance from the rapid re-housing program.

**Other possible language**

d) If a client reaches or exceeds the time limitation for rapid re-housing assistance, as established by the regulations for the rapid re-housing program, a provider may terminate the client’s rapid re-housing assistance, provided that:

¹ Recommendations to Reform Rapid Re-housing provided by Amber Harding, Washington Legal Clinic
1) The client has received appropriate\(^1\) and consistent\(^2\) services, as defined by the regulations for the rapid re-housing program, but including at a minimum, individualized case management, income supports, and employment and education support.

2) The client has been assessed for permanent housing programs and received referrals to those programs, in accordance with the District’s centralized or coordinated assessment system; and

3) The client…

   i) *Proposal 1:* …’s monthly market rent is no more than x% of the client’s gross monthly income, and the client’s income is expected to remain reasonably stable for at least x months.

   ii) *Proposal 2:* …has a reasonable likelihood of sustaining housing stability independently\(^3\) of the rapid re-housing program, based on the client’s rent burden at the time of program exit, the stability of the client’s income sources, and other potential barriers or circumstances that could result in the loss of the client’s housing.

   iii) *Proposal 3:* …has a reasonable likelihood of being able to pay the market rent for the unit while still meeting other critical needs such as food and clothing for at least x months after the end of rapid re-housing assistance.