**2015 Continuum of Care Community Survey Findings**

In the winter of 2015 Howard County Department of Community Resources and Services administered surveys to executive directors, community leaders, direct service providers, and consumers of the Coordinated System of Homeless Services and Continuum of Care.

**Summary:**

51 consumers, 45 community leaders and executive directors, and 16 direct service providers participated in the surveys. Consumers repeatedly identified rental assistance, other financial assistance, and case management as the top resources and services needed to obtain and maintain permanent housing, as well as prevent a homelessness episode. Help finding a job, help finding housing, mental health supports and healthcare were also identified by consumers as deeply needed resources for ending homelessness. The majority of consumers were satisfied with the services they received but did not necessarily find it easy to access services when they became homeless. They were just as likely to think they would not have another homelessness episode in the future, as they were to feel unsure if they would have another homelessness episode in the future.

The majority of community leaders and executive directors believed their organization was committed to the community plan to end homelessness. They agreed with the statement that “Various systems of care participate in the planning and coordination of services to end homelessness.” Most disagreed or strongly disagreed with the statement “Our system is set up so that service providers and programs with the best performance are rewarded and praised.” They agreed that services are focused on helping consumers maintain housing but some were unclear on how this was enacted. They were generally unsure of the level of choice and support consumers received in finding and maintaining housing.

The majority of community leaders, executive directors and direct service providers believed the community does not have sufficient rapid re-housing to re-house consumers in 45 days or less. Both these groups were also unsure on the engagement and success of landlord recruitment efforts. Both these groups agreed that our system is responsive to community feedback. While direct service providers strongly agreed that they are held accountable for helping consumers and their organization outcomes, community leaders felt organizations are only sometimes held responsible from their outcomes. The majority of direct service providers agreed with the statement “Our organization supports and participates in joint meetings/case conferences regarding specific consumers to coordinate our efforts with other service providers in our community.”

**Consumer results (51 participants)**

*Not all participants responded to each question, the number or respondents is noted for any question that was not answered by all.*

**Are you currently living in permanent housing?**

84% Yes

16% No
What resources do you need to keep you housed?
69% Rent subsidy
34% Other financial assistance
34% Case management
29% Mental health supports
29% Health care

Are you employed?
Of the 47 respondents:
45% Yes
55% No

If employed are you, is your job full time or part time?
Of 21 respondents
29% Part time
71% Full time

What did or do you need most to get you permanently housed?
83% Rent assistance
41% Other financial assistance
34% Help finding housing
27% Case management
24% Health care

What could prevent homelessness episode?
Of 31 respondents
55% Rent assistance
35% Case management
32% Other financial assistance
29% Help finding a job
19% Help finding an apartment

Do you think you may become homeless in the future?
Of 42 respondents
2% Yes
43% No
7% Maybe
49% Unsure

42%, the majority of 36 respondents disagreed or strongly disagreed with the statement “It was easy for me to find services to help me when I became homeless.”

72% of 32 respondents agreed or strongly agreed with the statement “I am satisfied with the quality of services I received while being homeless.”

76% of 34 respondents agreed or strongly agreed with the statement “I am satisfied with how I was treated by service providers in my community while being homeless.”

57% of 41 respondents agreed or strongly agreed with the statement “My community has all the services needed to help someone find and keep good housing.”

65% of 34 respondents agreed or strongly agreed with the statement “I felt that the services I received while homeless were focused on helping me get into permanent housing as quickly as possible.”

63% of 40 respondents agreed or strongly agreed with the statement “The different agencies/organizations in my community work well together.”

58% of 40 respondents disagreed or strongly disagreed with the statement “To get help, I was sometimes asked to do things that I didn't want to do.”

37% of 38 respondents neither disagreed or agreed, while 34% either disagreed or strongly disagreed with the statement “I felt that I got to "call the shots" about when and how I received services.”

45% the majority of 38 respondents disagreed or strongly disagreed with the statement “Homelessness in this community can be ended sometime within the next 10 years.”

**Community Leaders & Executive Directors Results (45 Participants)**

95% either agreed or strongly agreed with the statement “I believe my organization is committed to the community plan to end homelessness”

64% either agreed or strongly agreed with the statement “Funding and service decisions in our community are prioritized to focus on permanent solutions to homelessness.”

82% of 44 respondents, either agreed or strongly agreed with the statement “Various systems of care participate in the planning and coordination of services to end homelessness.”

61% of 44 respondents, either agreed or strongly agreed with the statement “All of the essential partners to end homelessness are around the table and share the vision of ending homelessness.”
Most identified essential organizations missing from the table: Hospitals, Department of Housing and Community Development, Department of Social Services, Mental health Authority, and Faith communities.

65% of 43 respondents, either agreed or strongly agreed with the statement “All providers of shelter and other homelessness assistance participate in data collection and planning.”

42% of 43 respondents, either disagreed or strongly disagreed with the statement “There is one or more organizations in our community—a governmental body, health care provider, service provider, landlord, faith group, etc.—that is a barrier to ending homelessness in our community.” while 21% either agreed or strongly agreed and 19% were unsure.

74% of 43 respondents, either agreed or strongly agreed with the statement “Our community planning process and discussions result in tangible actions to end homelessness through new programs, program amendments, pilot projects, refined/improved policies, new funding, etc.”

40% of 43 respondents, neither agreed or disagreed or were unsure given the statement “The community has a comprehensive discharge plan that is being used and monitored for success on a regular basis.” while 30% either agreed or strongly agreed and the remaining 30% disagreed or strongly disagreed.

47% of 43 respondents, the majority, either disagreed or strongly disagreed with the statement “Our system is set up so that service providers and programs with the best performance are rewarded and praised.”

60% of 43 respondents either agreed or strongly agreed with the statement “Staff and volunteers in our community are qualified and trained to provide the services they deliver.”

35% of respondents either agreed or strongly agreed with the statement “Providers are held accountable for their outcomes.” while 33% disagreed or strongly disagreed, and 32% neither agreed or disagreed or were unsure.

Does the community use a standardized process and/or tool for intake/assessment that helps us determine the most appropriate resources based for the consumer based on his/her needs? Of 38 respondents:

61% Yes

18% Unsure

13% Sometimes

8% No

45% of 42 respondents, the majority, either agreed or strongly agreed with the statement “In my opinion, the intake process is standard and consistent for all organizations in my community serving the same type of consumer.”

71% of 42 respondents either agreed or strongly agreed with the statement “Consumers are prioritized for housing, financial assistance, and services based on need.”
67% of 42 respondents either agreed or strongly agreed with the statement **“Whenever possible, our community employs strategies that prevent people from losing their housing and diverts them away from needing shelter or other housing assistance.”**

62% of 42 respondents either disagreed or strongly disagreed with the statement **“The community has sufficient rapid re-housing resources in place that assist consumers to be rehoused quickly (<45 days) should they become homeless.”**

Does the community have a periodic review process to evaluate its targeting strategy as well as the overall assessment and resource allocation process? Of 42 respondents:

- 52% Yes
- 21% Sometimes
- 14% No
- 13% Unsure

Are choices are provided to consumers about where they can be housed based on their preferences and income? Of 42 respondents:

- 38% Unsure
- 31% Yes
- 24% Sometimes
- 7% No

Are housing needs assessed within 24 hours of entry into any community shelter? Of 41 respondents:

- 59% Unsure
- 20% Yes
- 17% Sometimes
- 5% No

Are most consumers served in the community successfully supported in keeping their housing? Of 42 respondents:

- 40% Sometimes
- 31% Unsure
- 17% Yes
- 12% No

Does the community have staff dedicated to providing housing location services to consumers? Of 41 respondents:

- 71% Yes
15% Sometimes

12% Unsure

2% No

38% of 42 respondents, the majority, either agreed or strongly agreed with the statement “The community has been successful engaging landlords and finding new ones that are amenable to housing formerly homeless persons.” 40% neither agreed or disagreed or were unsure.

60% of 42 respondents were unsure if “Landlords are actively supported through regular communication and checking in to ensure that rent is paid in full and on time each month.”

33% of 42 respondents, the majority, either disagreed or strongly disagreed with the statement “Homelessness assistance programs have appropriate staff to consumer ratios for the type of work delivered to homeless and recently housed people.” While 29% were unsure.

50% of 42 respondents, the majority, either agreed or strongly agreed with the statement “Our community routinely reflects on data from either our HMIS or other case management software to understand who we are serving and not serving well and makes adjustments to our service delivery accordingly.”

71% of 42 respondents agreed with the statement “The community implements system-wide data collection on HMIS.”

74% of 42 respondents agreed or strongly agreed with the statement “Our community strives to eliminate the unnecessary duplication of services.”

48% of 42 respondents agreed or strongly agreed with the statement “The community has a data driven approach to targeting prevention resources.”

62% of 42 respondents either agree or strongly agreed with the statement “The community successfully leverages resources and funds from the public and private sectors.”

36% of 42 respondents, the majority, were unsure of the statement “Service benchmarks are in place throughout all organizations that are part of our community's response to homelessness.”

38% of 42 respondents agreed while another 38% were unsure of the statement “Services are monitored against the predetermined service benchmarks at least once per quarter.”

36% of 42 respondents agreed while another 36% were unsure of the statement “We encourage third parties to provide assessment and coaching regarding our services and operations.”

57% of 42 respondents agreed with the statement “Organizations promote the continuous improvement of services, programs, processes and skills.”

40% of 42 respondents, the majority, agreed with the statement “We use a methodological approach to collect information from our consumers regarding their impressions of our program’s specific services.”
36% of 42 respondents agreed while another 36% were unsure if “Consumers are satisfied with the services that they are receiving.”

45% of 42 respondents, the majority, agreed “Our system is responsive to feedback from consumers.”

64% of 42 respondents agreed “Services are focused on the stabilization of consumers in housing.”

**Direct Service Providers Results** *(16 participants)*

56% agreed “Our community has a plan to end homelessness within a defined period of time.”

78% agreed “Our plan is consistent with or can be aligned with the HEARTH Act and the Federal Strategic Plan to Prevent and End Homelessness.”

60% agreed “My community has a comprehensive and effective discharge plan.”

78% agreed “Our community uses a universal process and/or tool at intake that helps us assess the most appropriate resources for the consumer’s needs.”

60% agreed “Our community has a periodic review process to evaluate our targeting strategy as well as the overall assessment and resource allocation process.”

47% the majority agreed “Consumers are prioritized for housing, financial assistance, and services based on their needs.”

40%, the majority, indicated yes “Choices are provided to consumers about where they can be housed based on their preferences and income.”

47%, the majority, indicated sometimes “Most consumers are successfully supported in keeping their housing.”

33%, the majority, was unsure if “The community has an updated listing of available affordable housing units within its boundaries.”

73%, the majority, indicated yes “The community has staff dedicated specifically to providing housing location services to consumers.”

47%, the majority, were unsure if “Consumers receive thorough orientation to their new building and neighborhood.”

80% agreed or strongly agreed with the statement “Consumers are helped to find housing that is acceptable to them and suitable for their needs.”

80% agreed or strongly agreed with the statement “Whenever possible, our community employs strategies that prevent people from losing their housing and diverts them away from needing shelter or other housing assistance.”

60% disagreed or strongly disagreed with the statement “The community has sufficient rapid rehousing resources in place that assist consumers in being rehoused quickly (<45 days) should they become homeless.”
33% were unsure, while 27% disagreed or strongly disagreed, and another 27% agreed or strongly agreed with the statement “The community has been successful engaging landlords and finding new ones who are amenable to housing formerly homeless people.”

73% disagreed or strongly disagreed with the statement “We have an adequate supply of affordable permanent and permanent supportive housing in our community that can accommodate each person’s place in the life cycle with the needed level of support.”

33% disagreed or strongly disagreed, 27% were unsure, 20% agreed and 20% neither agreed nor disagreed with the statement “Community wide, landlords are actively supported through regular communication and checking to ensure rent is paid on time and in full each month.”

33% disagreed or strongly disagreed, while 33% agreed or strongly agreed with the statement “Newly housed consumers have access to suitable furniture in good and functional condition.”

40%, the majority, agreed or strongly agree with the statement “Newly housed consumers have access to other daily living essential such as bedding, dishes, cleaning supplies, food staples, shower curtains, etc.”

79% agreed or strongly agreed with the statement “I am knowledgeable of the essential elements of diversion/prevention programs.”

60% agreed or strongly agreed with the statement “I am knowledgeable of the essential elements of rapid re-housing programs.”

60% agreed or strongly agreed with the statement “I am knowledgeable of the essential elements of permanent supportive housing programs.”

47%, the majority, agreed or strongly agreed with the statement “I understand “Stages of Change” on addressing Chronic Substance Use Disorders and how the various stages apply to my work with consumers.”

73% agreed or strongly agreed with the statement “I comprehensively understand strength-based support strategies.”

73% agreed or strongly agreed with the statement “I am comprehensively trained in conflict resolution and de-escalation.”

93% agreed or strongly agreed with the statement “I am comprehensively trained in active listening.”

53% agreed or strongly agreed with the statement “I am comprehensively trained in Motivational Interviewing.”

80% agreed or strongly agreed with the statement “I am comprehensively trained in data storage and rules of disclosure including legal requirements pertaining to confidentiality and privacy.”

67% agreed or strongly agreed with the statement “I am comprehensively trained and/or have experience to address life changes, including: new partner, return of children, relationship break up, etc.”
53% agreed or strongly agreed with the statement “I have an understanding of cognitive impairments such as brain injuries, Fetal Alcohol Spectrum Disorders, severe and persistent mental illness, etc.”

80% agreed or strongly agreed with the statement “I have a strong understanding of the effects of trauma.”

67% agreed or strongly agreed with the statement “I have a strong understanding of the impact and behaviors associated with sexual abuse.”

60% agreed or strongly agreed with the statement “I have expertise in how to access and navigate income supports and benefits systems.”

87% agreed or strongly agreed with the statement “I have expertise in other community services available to the consumers with whom I work.”

87% agreed or strongly agreed with the statement “I have a strong understanding of poverty, social stigmatization, discrimination and social justice.”

73% agreed or strongly agreed with the statement “I have received appropriate cultural competency training.”

53% agreed or strongly agreed with the statement “The need and practice of self-care is understood and practiced by all team members with whom I work.”

60% indicated no, while 33% indicated sometimes “I attempt to provide services that I am unqualified or untrained to deliver.”

71% indicated yes, “Our community uses HMIS to assist with case planning.”

67% indicated yes, “Services are distributed across the community so consumers can effectively access services in different locations.”

40%, the majority, neither agreed or disagreed with the statement “There are appropriate staff to consumer ratios in my organization for the type of work that we deliver.”

73% agreed or strongly agreed with the statement “Our organization supports and participates in joint meetings/case conferences regarding specific consumers to coordinate our efforts with other service providers in our community.”

93% agreed or strongly agreed with the statement “I strive to help consumers connect with other resources, services and organizations to best meet their needs.”

60% agreed or strongly agreed with the statement “As a community, we routinely reflect on data from either our HMIS or other case management software to understand who we are serving and not serving well and make adjustments to our service delivery.”

60% agreed or strongly agreed with the statement “In our community, consumers who are entering or already engaged in a crisis are quickly identified and assisted.”

73% agreed or strongly agreed with the statement “Our community separates crisis responses from longer term support or case management responses.”
67% agreed or strongly agreed with the statement “Programs and services have been implemented that respect and serve the needs of identified sub populations, including: survivors of domestic violence, veterans, youth, seniors, immigrants, etc.”

Participants indicated the most offered services in the community by their own organizations or others are: rental assistance, funding for security deposits, utilities, rental application fee or other financial assistance—not including rent, budgeting support, employment and educational services, case management, food, and transportation information and assistance.

80% agreed or strongly agreed with the statement “My community has an effective, integrated network of practice and I am an active part of it.”

87% indicated yes, “Service outcomes are in place throughout our organization.”

80% indicated yes, “Service outcomes are monitored at least once per quarter.”

87% indicated yes, “I am held accountable for helping consumers and my organization achieve their outcomes.”

47%, the majority, indicated yes, “We use a methodological approach to collect information from consumers regarding their impressions of our programs and services.”

73% indicated yes, “Our system is responsive to feedback from consumers.”