

Family Supportive Housing Program

Annual Report: State Fiscal Year 2021



VERMONT

DEPARTMENT FOR CHILDREN & FAMILIES
OFFICE OF ECONOMIC OPPORTUNITY

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Program Overview

The Family Supportive Housing (FSH) Program provides intensive case management and service coordination to homeless families with children, following evidence-based practice for housing families with complex needs and multiple-systems involvement¹. The program's goal is to reduce the incidence and duration of homelessness through supports for families as they transition to and sustain permanent housing over time. Service coordination and case management focus on the root causes of a family's homelessness; promote resiliency for parents and their children; and help households build financial capability. FSH staff take a holistic, two-generation approach using non-judgmental, positive, and trauma-informed communication and engagement in their support of families. The FSH program² is a key component of ending family homelessness in Vermont by strengthening and supporting families with complex needs, increasing housing stability and reinforcing accountability.

The Department for Children and Families (DCF) Office of Economic Opportunity (OEO) administered Family Supportive Housing funding at nine community-based providers in FY 2021:

- Winston Prouty Center in Brattleboro
- Committee on Temporary Shelter (COTS) & Howard Center in Burlington
- Homeless Prevention Center in Rutland
- Upper Valley Haven in Hartford
- Northeast Kingdom Community Action (NEKCA) in St. Johnsbury and Newport
- Family Center of Washington County in Barre
- Sunrise Family Resource Center in Bennington
- Springfield Area Parent Child Center (SAPCC) in Springfield
- Pathways Vermont in St. Albans

These community-based service providers employed 19 Service Coordinators (18 FTEs), who provided customized home-based case management; financial empowerment

¹ *A Practice Framework for Delivering Services to Families in Supportive Housing*, <https://www.csh.org/wp-content/uploads/2013/11/Practice-Framework.pdf>.

² For more detail about program design and eligibility see the [Family Supportive Housing Provider Manual](#).

coaching; life skills support and referrals; tenant education; parent and child resiliency support; and support recovery and treatment. FSH Service Coordinators align and coordinate services with existing Agency of Human Services programs and initiatives. FSH Service Coordinators support enrolled families for a duration of time that is appropriate for each family, usually at least two years, and have the flexibility to exit families and/or continue necessary support as appropriate. Each Service Coordinator maintains a caseload of 12 to 15 families. In State Fiscal Year 2021, the Family Supportive Housing program expanded to new communities and by adding capacity at some existing sites.

State Fiscal Year 2021 Highlights

In FY 2021, FSH expanded, adding two new providers and serving three new Agency of Human Service (AHS) districts. New providers Pathways Vermont and Springfield Area Parent Child Center came onboard to serve the St. Albans and Springfield districts respectively, while existing grantee Northeast Kingdom Community Action expanded to serve the Newport district. In addition to this district expansion, five existing FSH providers added staff in order to serve additional families. Family Supportive Housing is now active in 10 of the 12 AHS Districts. The below table shows the current provider and staffing level in each region served:

AHS District	Provider Organization	2020 Service Coordinator FTEs	2021 Service Coordinator FTEs	FTE Change
Barre	Family Center of Washington County	1	3	+2
Bennington	Sunrise Family Resource Center	1	2	+1
Brattleboro	Winston Prouty Center	2	2	--
Burlington	COTS / Howard Center	1	2	+1
Hartford	Upper Valley Haven	1.8	2	+0.2
Newport	Northeast Kingdom Community Action	0	1	+1

Rutland	Homeless Prevention Center	2	3	+1
Springfield	Springfield Area Parent Child Center	0	1	+1
St. Albans	Pathways Vermont	0	2	+2
St. Johnsbury	Northeast Kingdom Community Action	1	1	--
Total FTES		9.8	19	+9.2

Family Supportive Housing is now able to serve 90% more families than in the prior year. The below table shows maximum caseload for each provider and the program as a whole.

AHS District	Provider Organization	2020 Max Caseload Capacity	2021 Max Caseload Capacity	Capacity Change
Barre	Family Center of Washington County	15	45	+30
Bennington	Sunrise Family Resource Center	15	30	+15
Brattleboro	Winston Prouty Center	30	30	--
Burlington	COTS / Howard Center	15	30	+15
Hartford	Upper Valley Haven	30	30	--
Newport	Northeast Kingdom Community Action	--	15	+15
Rutland	Homeless Prevention Center	30	45	+15
Springfield	Springfield Area Parent Child Center	--	15	+15
St. Albans	Pathways Vermont	--	30	+30

St. Johnsbury	Northeast Kingdom Community Action	15	15	--
Total Caseload Capacity		150	285	+135

As it did in FY 2020, COVID-19 continued to impact Family Supportive Housing in a variety of ways and many of the results in this report can be understood through the lens of the pandemic. This year, the availability of a vaccine for adults, along with a more developed understanding of virus transmission allowed for a return to delivery of in-person services for FSH participants. Training and technical assistance activities continued and included: safe provision of services during COVID-19; orientation for new service coordinators; information about the expanded child tax credit; motivational interviewing; racial equity in social work; and sessions exploring financial and employment resources available to families³. In SFY 2021, the Family Supportive Housing Community of Practice also launched dedicated case conferencing time and a regular meeting for supervisors.

³ Examples include [Rapid Resolution Housing Initiative](#), [VocRehab Vermont](#), [VITA](#), and [ESG CARES](#)

SFY 2021 Results at a Glance⁴

Family Demographics

- Total Families enrolled during the SFY 2021 Year: **327**
- Total Adults enrolled during the year: **438**
- Total Children enrolled during the year: **608**
- Total Families exiting the program during the year: **71**
- Total Families active in the program at year end: **256**

Housing Stability

- 58% (15) of active families who exited FSH, did so successfully into stable housing⁵
- 66% of active families stably housed
 - 87% of stably housed⁶ families are in good standing with their landlords

Child Safety

- 84% of active families have children placed in-home
- 91% (445) of enrolled children are up to date with pediatric visits

Engagement

- 91% of active families participated regularly in case management

Financial Empowerment

- 50% of active families increased their Financial Capability Score
- 32% of active families had savings at year end

⁴ All percentages in this report based on 256 families active at year end, unless otherwise stated.

⁵ Calculation based on the 26 total exits that occurred in Q4 of FY 2021.

⁶ In 2021 the calculation changed from “% of families active end of quarter” to “% of housed families”. This change represents the results more accurately as the previous method included homeless families for whom quality of landlord relationship was not applicable.

Analysis of 2021 Results

The FSH program measures performance in several key areas including:

- Housing stability, including program exits
- Family engagement
- Financial wellness
- Child safety
- Adult health and wellness

The FSH performance measures were revised during SFY 2020 with SFY 2021 marking the first year providers reported on the updated measures. These updates aim to improve the accuracy of information gathered around social connections, adult health, child safety and employment. Many of the new performance measures will not appear in the FSH annual report until FY 2022 after there has been sufficient time to gather trend data and test for accuracy.

Housing Stability



At the end of FY 2021, 66% (168) of active families were stably housed. 27% (70) of families were homeless and searching for housing, and 7% (18) of families were housed but considered at risk of homelessness. 87% (162) of housed families were reported as being in good standing with landlord, compared with 97% (103) of housed families in SFY 2020.

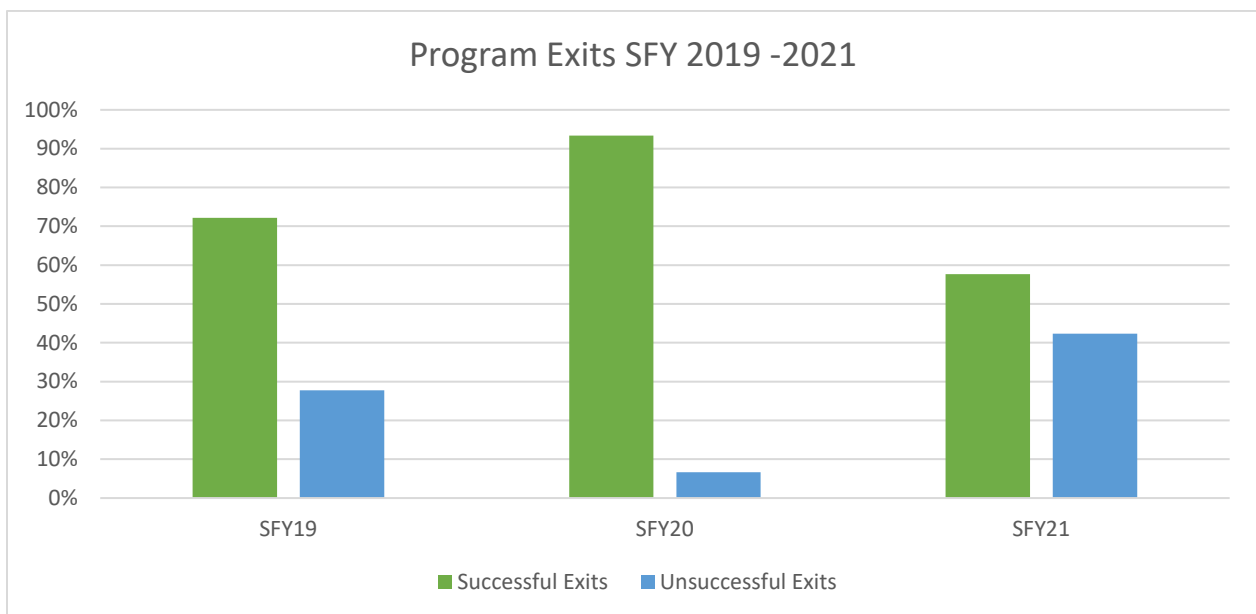
FSH saw a significant decrease in the percentage of active quarter four families who were stably housed from FY 2020 to 2021 and a corresponding increase in the share of families experiencing homelessness. A significant contributing factor here is the impact of the COVID-19 pandemic on the housing market. Lack of apartment turnover due to the COVID eviction moratorium and an uptick in demand for Vermont real estate have led to historically low apartment vacancy rates throughout the state, making it more challenging to move from homelessness to housed.

It's undeniable how intricately linked housing stability and family stability are and we are grateful every day to support households in this project towards both those goals. That said, it is perhaps even more salient when housing stability comes just in time to start a new life and generation off on the foot towards stability. Pathways was recently able to support a mother to access permanent housing prior to the birth of her daughter.

Pathways began working with this household at the end of February and were able to quickly identify housing utilizing a CARES subsidy, with move in in early April. This stability allowed for the return of visitation with the households' existing children, as well as a safe place for her newborn daughter to come home.

-from Pathways Vermont Narrative Report, Q4 FY 2021

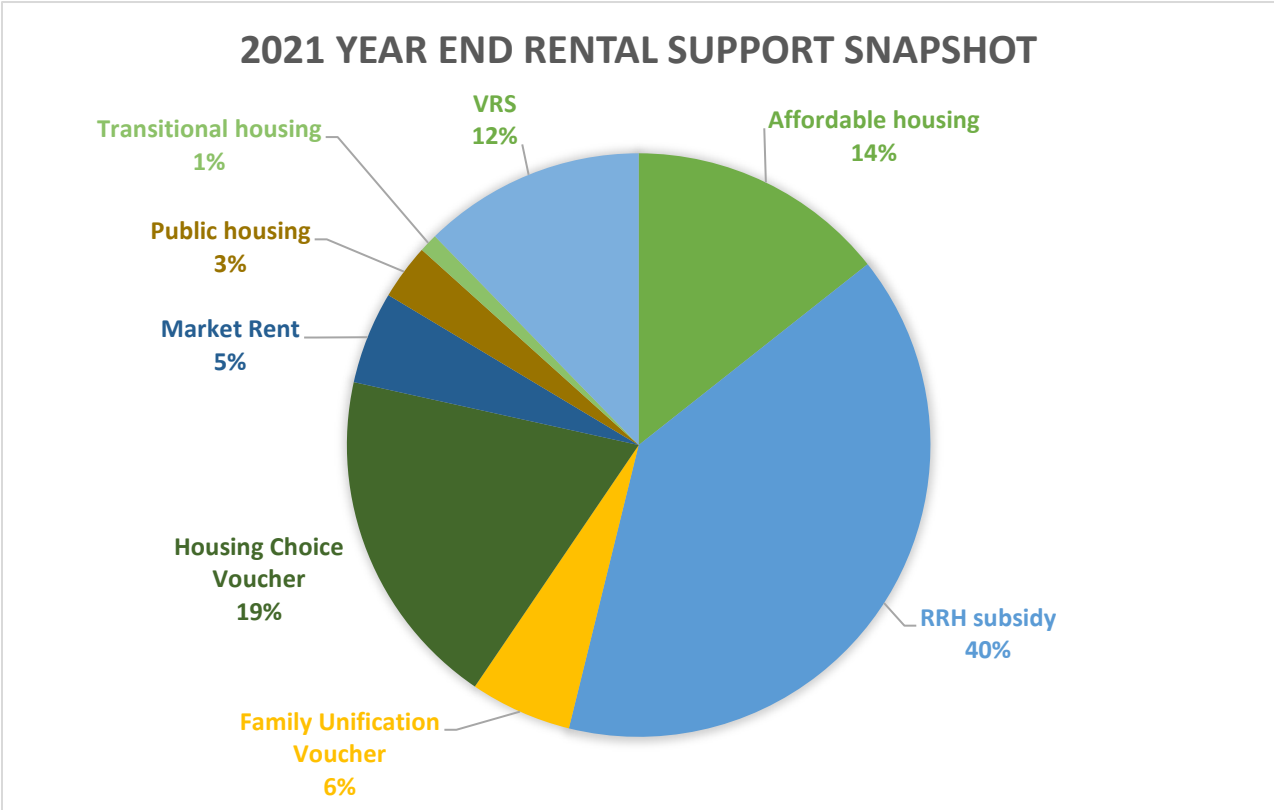
Exits



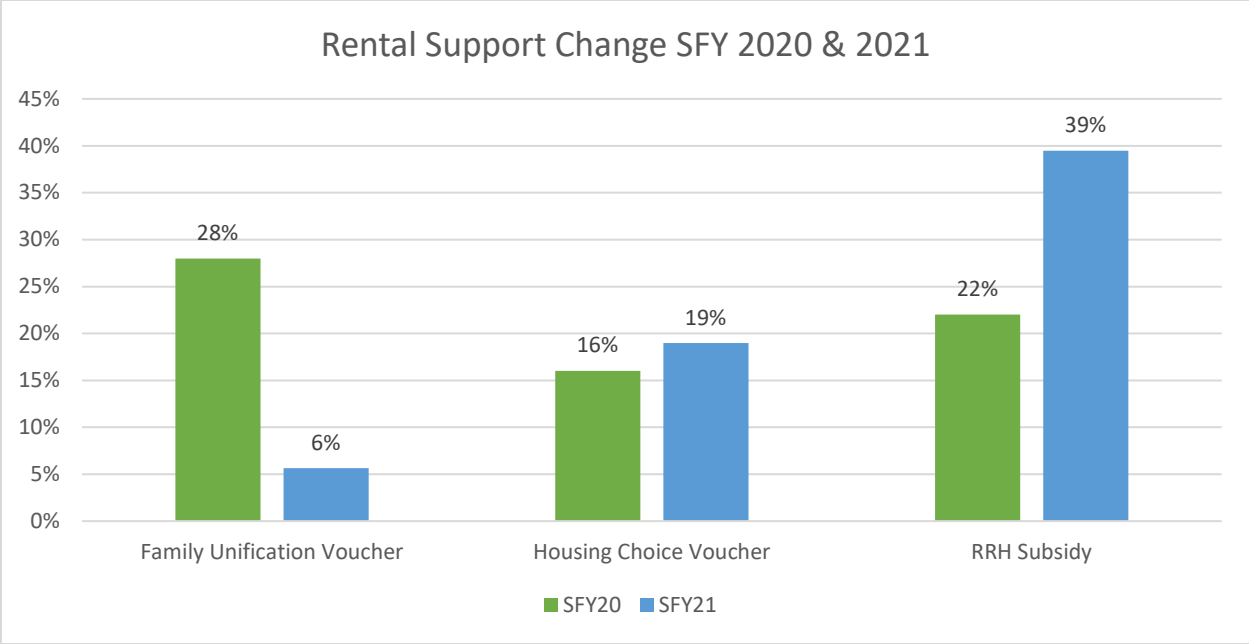
In the fourth quarter of SFY 2021 26 families exited FSH. Of these families 58% (15) exited successfully while 42% (11) exited unsuccessfully. In Q4 of SFY 2020 93% (14) of exits were successful and 7% (1) were unsuccessful. Supporting successful program exits will be an area of focus with the FSH Supervisor Community of Practice in the coming year.

Rental Support

FSH providers use a wide range of financial supports to help families find and retain stable housing. 195 families⁷ active at the end of the fiscal year were matched with vouchers or housing units as shown in the chart below.



⁷ Total includes homeless families who have a voucher but are searching for housing.



FY 2021 saw a marked increase in the use of a rapid rehousing vouchers and a steep decline in Family Unification Voucher (FUV) utilization. The increase in rapid rehousing support is explained by the availability of ESG Cares vouchers, funded via federal COVID relief funds. ESG Cares recipients are expected to have the opportunity to transition on to Housing Choice Vouchers in SFY 2022. FUV turnover slowed dramatically during the pandemic as the Vermont State Housing Authority relaxed voucher cancellation standards in an effort to support housing stability, reducing the number of FUVs available. Collaborating with VSHA to find ways to make FUVs available on a regular basis will be a focus in the coming year.

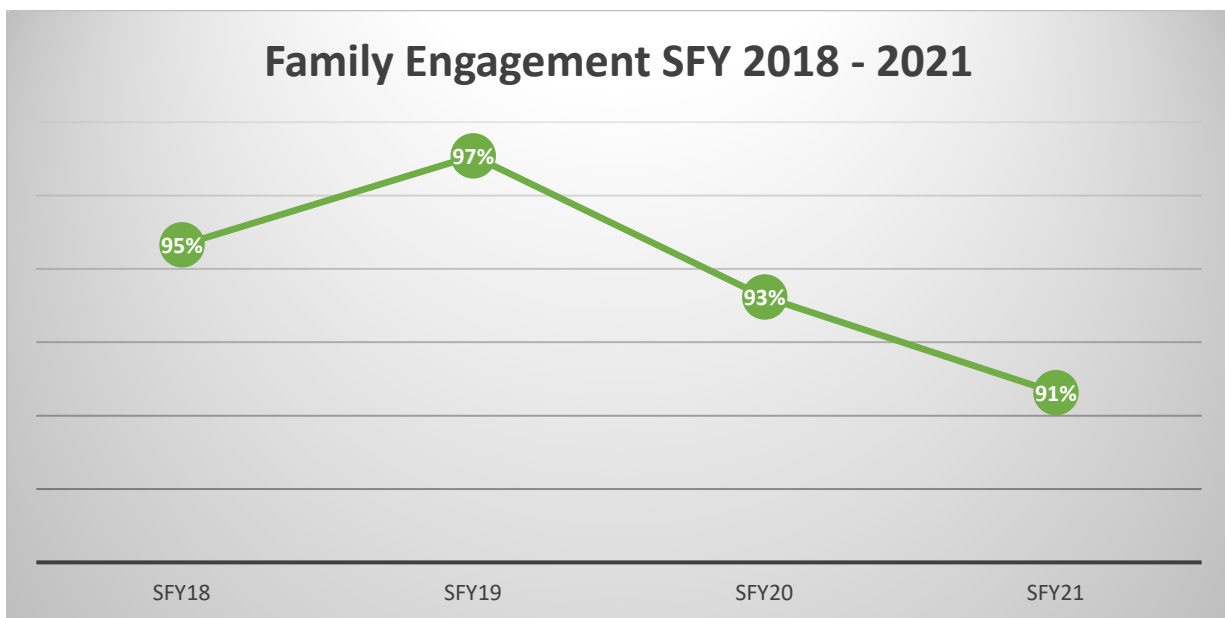
In the past two years I have worked closely with a single mother in keeping her and her family stable and safe. She spent a year building rapport with community partners, developing tenant skills, and searching for a landlord who would give her a chance. Her lack of positive housing references and debt were a huge barrier to overcome in our community. After supporting her through two appeals with the local housing trust, they finally overturned her appeal at the highest level. She was able to move into her first apartment of her own in November 2020 with a CARES voucher. The housing trust, which was initially skeptical of her ability to be a good tenant, has nothing but glowing feedback about her tenancy.

-from a service coordinator at Homeless Prevention Center in Rutland.

Family Engagement

In Q4 FY 2021 91% (232) of active families participated regularly in case management compared with 93% (124) in FY 2020. 97% (248) of active families actively engaged with service providers during the fiscal year⁸.

During the revision of the FSH performance measures in FY 2020, a new “social supports score” measure was added. This measure, based on the [Protective Factors Survey](#), provides whole population data about the quality of family social connections and will be used in future reports as trend data becomes available.



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It is encouraging to see that engagement numbers have held steady during both years of the pandemic, indicating that providers are finding ways to engage clients, even when in-person contact is disrupted by COVID-19. Additionally, these high engagement numbers support anecdotal reports that in home visits had largely resumed by the second half of SFY 2021.

⁸ This measure, added in the SFY 2020 revision, captures engagement with supports outside of FSH.

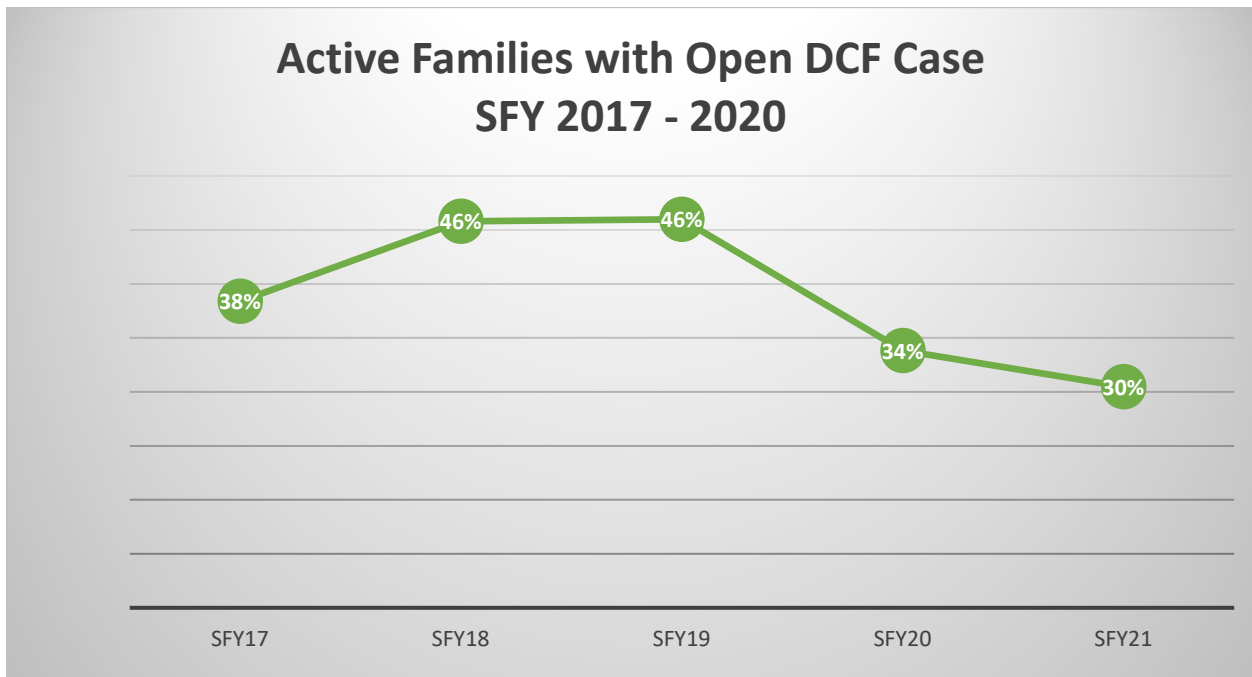
⁹ Graph based on measure “Families regularly participating in case management and program meetings active Q4”

Child Health and Safety

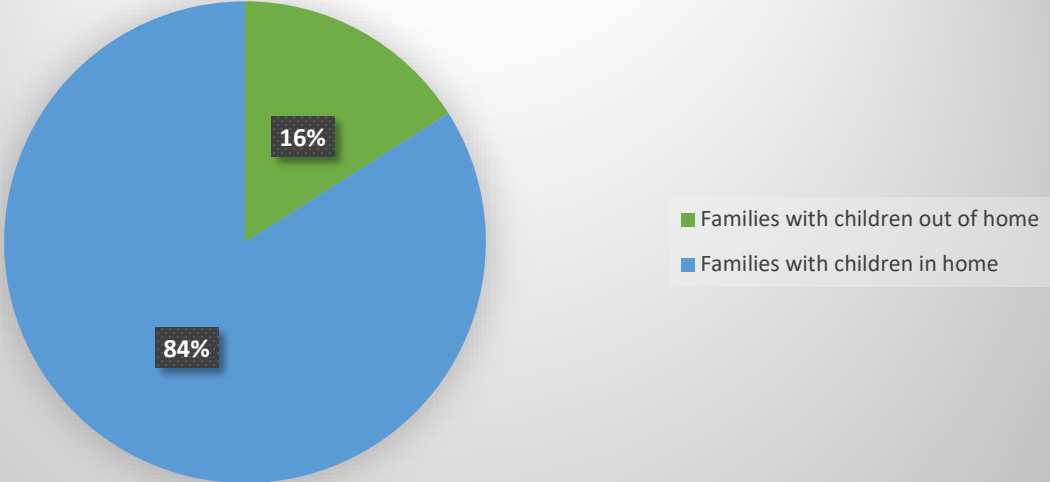
In FY 2021, 84% (215) of families had children placed in the home. 30% (78) of active families had an open DCF case at year end, a figure in which there is an overall downward trend since FY 2017. 91% (445) of children active at year end were up to date with pediatric well visits compared with the same percentage, 91% (264) in SFY 2020. 66% (169) of families active at year end reported experiencing food insecurity compared with 56% (75) in SFY 2020.

During the FY 2020 FSH report revision, OEO added measures tracking enrollment in licensed childcare programs. These measures will be included in future years as trend data becomes available.

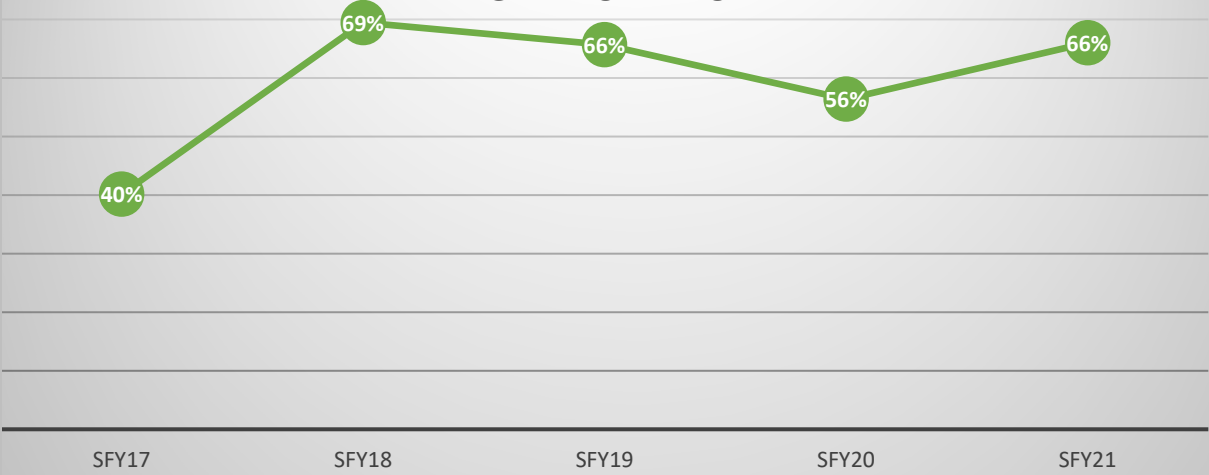
DCF Family Services child placement results held steady from FY 2020 to 2021, as did the pediatric well visit results, indicating that FSH services continue to be associated with supporting child wellbeing, even amidst the challenges presented by pandemic. A large proportion of enrolled families experience food insecurity, a figure that has grown over time. The decline in open DCF cases in SFY 2020 and 2021 may have been impacted in part by the pandemic as child welfare offices nationwide saw declines in reports and caseloads as a result of school closures and court delays.



Home Placement Status SFY 2021



Families Reporting Food Insecurity SFY 2017-2021

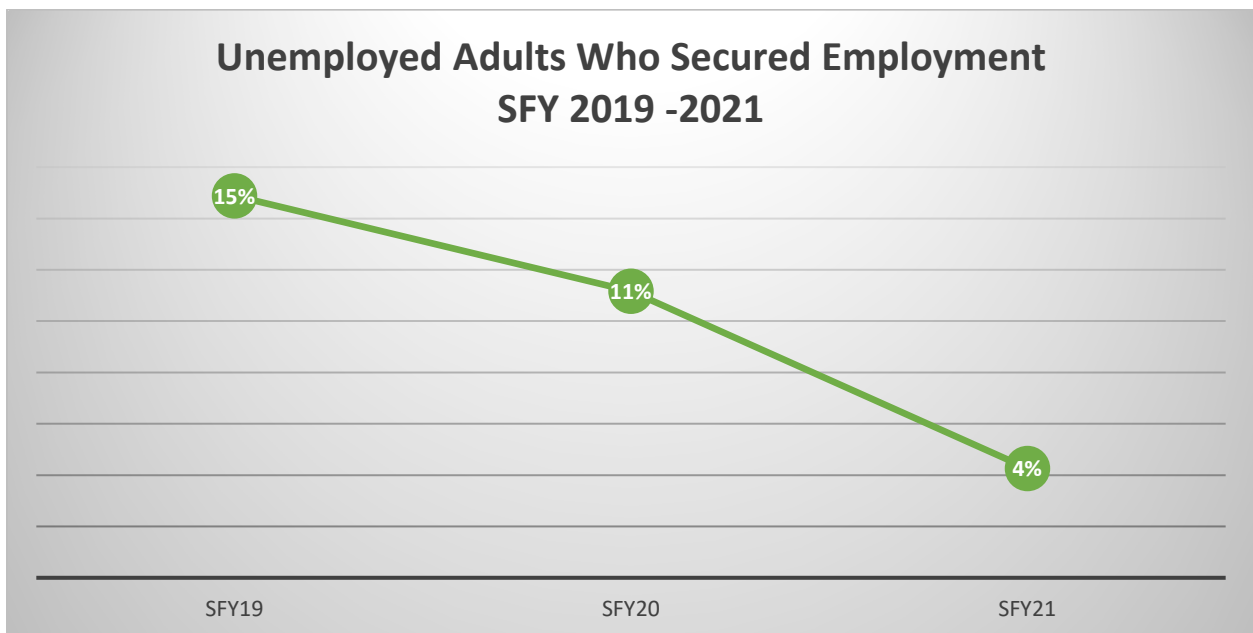
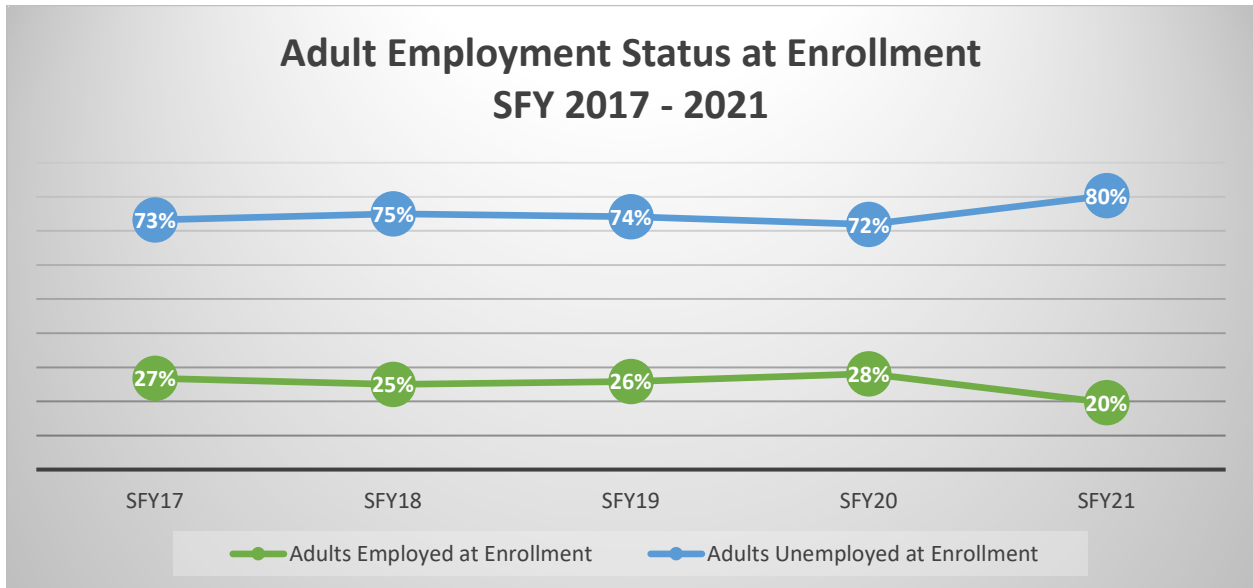


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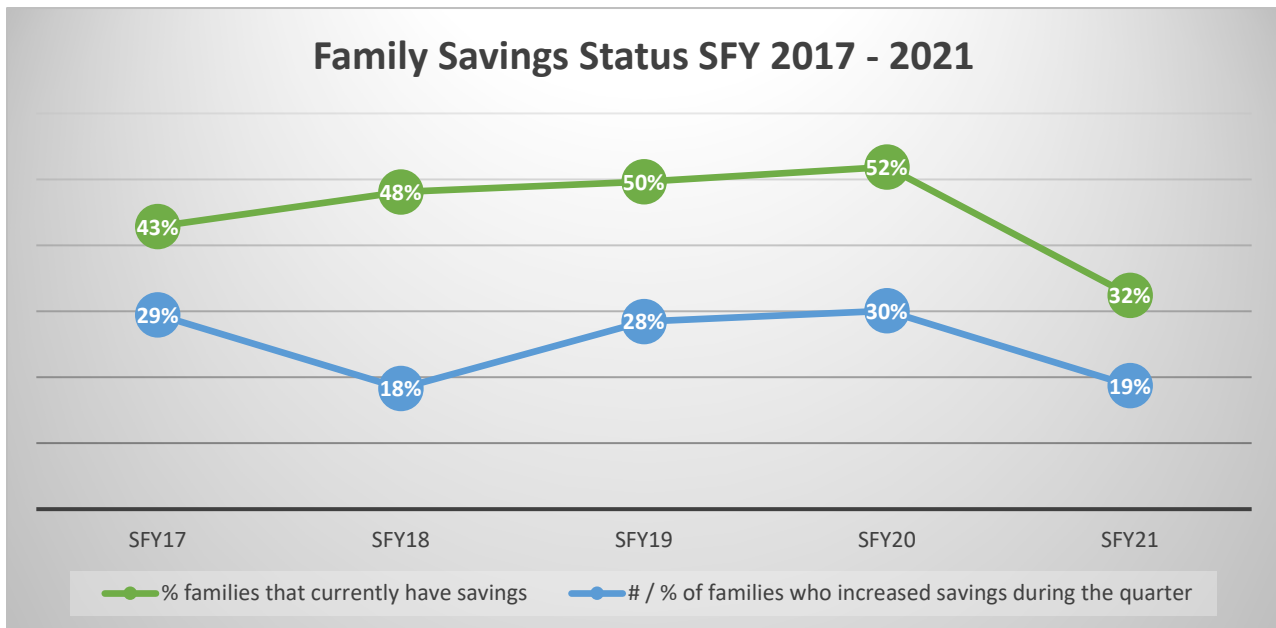
¹⁰ As measured by the Hunger Vital Sign. [The Hunger Vital Sign™ - Children's HealthWatch \(childrenshealthwatch.org\)](http://childrenshealthwatch.org)

Financial Wellness

In FY 2021, a total of 438 adults enrolled in FSH. 80% (352) of those adults were unemployed at enrollment and 20% (86) were employed at enrollment. Of the 352 adults who were unemployed at program entry 4% (15) had secured employment, 9% (30) had entered a job training or education program and 42% (149) had secured other income by year end. 14% (50) of active adults maintained employment for 6 or more months during the fiscal year.



In FY 2021 32% (83) of active families reported having savings at year end and 19% (48) of families reported increasing savings during Q4 compared with 30% (40) of families who increased savings last year. 53% (135) of active families had access to mainstream banking¹¹ services at year end. 50% (127) of active families reported an increased financial capability score¹².



¹¹ Defined as access to a FDIC or NCUA insured account.

¹² The financial capability score measures financial knowledge and wellbeing from the perspective of the family. [Financial Capability Scale \(FCS\) – Financial Coaching Strategies \(wisc.edu\)](https://www.wisc.edu/financial-coaching-strategies/)

Many of the employment and financial capability results presented above can be understood as consequences of the pandemic. During the early part of FY 2021, families were still feeling the impacts of the mass employment disruption caused by COVID-19. Some employers shut down due to the pandemic, leaving workers out of jobs. In other cases, workers had to make difficult decisions to leave work, due to factors like personal health or the need to support a child with remote learning. These factors, along with the reduced number of jobs available in the early part of FY 2021 explain the decline in the number of adults entering FSH employed. Given the present recovery of the job market, it is expected that more participants will secure employment in the coming year. Employment will remain a topic of focus in the Community of Practice in FY 2022.

The declines in savings shown above can be understood as an outgrowth of the employment complications discussed above as well as a higher percentage of homeless families served by FSH in 2021. With fewer families working, there was simply less money available to save. Families who are experiencing homelessness may not yet have the stability or income needed to establish or increase savings. During late SFY 2021 and early SFY 2022 a number of financial resources—such as the expanded child tax credit and Vermont Rental Assistance Program—became more widely available to families served by FSH. Providing FSH staff with tools, information and resources to help families receiving these new forms of financial assistance set aside money is a current focus that will continue to be a priority in the coming year.

A single mother in our program found employment within a couple of weeks of moving into an emergency apartment and has maintain that employment since May 2021. I helped her prepare for her job interview by teaching her some strategies for interviewing well. I also assisted her with onboarding paperwork once she was hired. During this time, she has been able to buy a used car with money she saved from her tax refund and stimulus payment. This allowed her to have reliable transportation to get back and forth to work and have visits with her kids. She recently graduated from treatment court for substance abuse and is maintaining her sobriety.

-from a service coordinator at Northeast Kingdom Community Action in St. Johnsbury

Acknowledgements

The Vermont Office of Economic Opportunity thanks the FSH program staff who, for a second year in a row, rose to the challenge of serving our most vulnerable in the midst of a public health emergency. Your perseverance in the face of continued uncertainty and your adaptability in finding ways to deliver these critical services is so appreciated. We also wish to thank the staff at the Vermont Department of Health for their training and support in helping FSH find safe ways to serve clients during the pandemic.