



# Best Practices for Emergency Shelter Providers

# Introductions

---



HomeBase has been working with Continuums of Care and homeless service providers throughout the country for three decades on eradicating homelessness.



**We help CoCs** design and implement Housing First, Coordinated Entry, and other major system changes.

# Agenda

---

- Permanent Housing: The Solution to Homelessness
- Problem-Solving Techniques
- Case Management Tools to Help Get Clients into Housing

# What is the Solution to Homelessness?

# The Solution to Homelessness

---

- Getting people into housing.
- As emergency shelter providers this should be the primary goal.



# HUD Definition of Housing First

---

---

*Housing First is an approach where homeless persons are provided **immediate access** to housing and then **offered the supportive services** that may be needed to foster long-term stability and prevent a return to homelessness. This approach **removes unnecessary barriers** and assumes that supportive services are more effective in addressing needs when the individual or family is housed – when the daily stress of being homeless is taken out of the equation.*

---

Ann Marie Oliva  
Director, Office of Special Needs Assistance Programs  
August 21, 2016

# Housing First: What does a Housing First System Look Like?

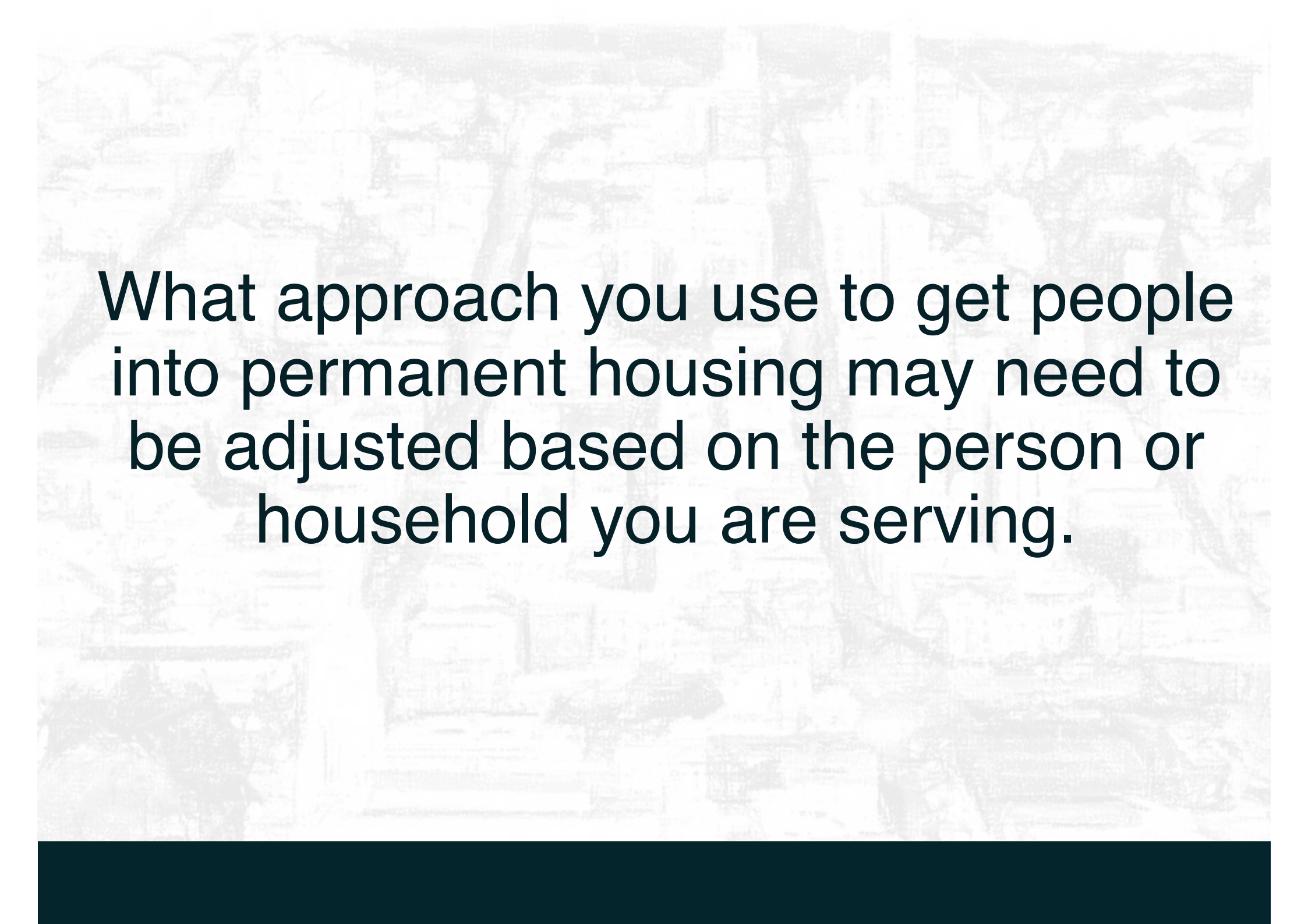
---

- **All programs** lower barriers – shelter, services, and housing
- Most vulnerable – **including those with complex service needs, disabilities, mental health and active substance abuse issues** – prioritized for and admitted to shelter and housing programs
- **Housing-focused** services and engagement begin immediately – on the street and in shelters
- Services are **client-focused and voluntary and targeted to individual needs**
- Programs engage in **evidence-based practices**: harm-reduction, trauma-informed care, motivational interviewing, and other evidence-based approaches
- **Client choice and voice** are engaged and respected

# Housing First Programs Get People into Housing

Aligning your program with Housing First principles will help eliminate barriers get people into housing as quickly as possible





**What approach you use to get people into permanent housing may need to be adjusted based on the person or household you are serving.**

# Who is Experiencing Homelessness

---

- National data shows that a majority of people experiencing homelessness are transitionally homeless.
- Transitionally homeless means that they are homeless once in their lives for a week or two and are never homeless again.
- Monterey 2019 PIT Count Showed:
  - 2,422 (people experiencing homelessness)
  - 1,830 (unsheltered)
  - 562 (chronically homeless) – 483 unsheltered

# Can the 'System' House Everyone?

---

- There are too few housing resources for everyone experiencing homelessness – and they are primarily aimed at high-acuity people through coordinated entry
- For people who are low-acuity and/or transitionally homeless waiting for a unit (that may never come) through coordinated entry is not the most effective strategy
- It is vital to identify housing resources outside of the system of care/coordinated entry that people can access before they enter homelessness or to quickly exit from homelessness

# Problem Solving

Problem solving is essentially a conversational technique and resource identification process that helps providers work with the client to identify alternatives to entering homelessness or rapid exits from the homelessness system of care.

# The Problem-Solving Conversation: Where, When, Who and How Long?

- **Where:** Begins at the “front door” to homeless services - Coordinated Entry intake; Emergency shelter; Street Outreach; Implemented *anywhere* someone is seeking assistance related to a housing crisis
- **When:** At *any* point in that crisis
- **Who:** Offered to *all households* at point of entry into homeless services system, regardless of perceived needs and barriers. No pre-screening or pre-determination.
- **How Long:** Strategies continue until the household is safely and permanently housed – not a one-time conversation.

# Problem Solving for Prevention, Diversion, or Rapid Exit

---

- **When a Person is Still Housed – Prevention:** Activities that target assistance to prevent housing crises that do occur from escalating further and resulting in homelessness.
- **Before Entering Shelter - Diversion:** Diversion strategies and practices assist people to resolve their immediate housing crisis by accessing alternatives to entering emergency shelter or the experience of unsheltered living.
- **After Entering Shelter - Rapid Exit:** Rapid exit strategies are appropriate after a household has entered emergency shelter or stayed in an unsheltered setting and serves to help them move as quickly as possible back into housing with the support of services and a minimal level of financial assistance. Providers should initiate problem-solving conversations to identify housing opportunities that clients may already have access to.

# Desired Outcomes

---

Permanently  
back with family  
or friends

Return to their  
own residence

Temporarily  
diverted while  
they seek new  
housing

Relocating  
permanently to  
a safe place  
out of town

Reconnecting  
to supports who  
can provide  
care

# Basic Concept

Have supportive conversations with people to help them identify housing resources that already exist. Most people will not get housing through coordinated entry and some people do not need those resources.



# Problem-Solving Conversations

---

- **Start at Front Door:** Offer problem solving to all households without pre-screening using staff trained in available local supports
- **Introduce Goals:** Clearly explain role and goal to help identify a safe space to stay, either temporarily or permanently, and community connections that will help avoid or exit homelessness
- **Explore Needs and Options:** Have a realistic conversation about household's strengths, supports, and possibilities
- **Listen Actively:** Validate and acknowledge household's ideas, feelings and efforts and support them in finding solutions

# How to Start the Conversation

---

- Engage with the Person
  - Introduce yourself
  - Check-in (how are you doing?)
  - Connect
- *Then* start collecting information

# How to Start the Conversation

---

- What is your name and what brings you here?
- Where did you sleep last night?
- When was the last time you were stably housed?
- What issues exist with you previous or most recent housing situations. Can those be resolved with financial assistance? Other assistance? (Case management, mediation, legal counseling etc.)
- What other housing options do you have for the next few days or weeks?
- Do you have family or friends who you could stay with? What resources could this become a permanent solution? (Financial assistance, case management, mediation, legal counseling etc.)

# Core Knowledge for Staff Problem Solvers

---

## Skill Building Training

- Motivational Interviewing
- Cultural Humility and Curiosity
- Diversion and Prevention
- Conflict Resolution
- Restorative Justice models
- Trauma-Informed Care, including understanding poverty and homelessness as trauma
- Domestic Violence

## Public Systems Navigation Training

- Public Benefits
- Mental Health Services
- Employment Services
- Legal Advocacy Groups
- Education
- Senior Services
- Affordable Housing

# Training Staff to Problem-Solve

---

- No short-cut tool – the tool is the conversation
- Conversation based on the belief that you can assist household to find a better alternative to shelter / homelessness
- Focus on techniques of effective, strengths-focused communication:
  - Respect for client choice
  - Recognition of safety
  - Active listening
  - Awareness of communication roadblocks
  - Practice personal and cultural humility
  - Seek to balance power dynamics

# Training Staff to Problem-Solve

---

## Active Listening Skills

- Encouraging
- Clarifying
- Restating
- Reflecting
- Summarizing
- Validating
- Reframing / paraphrase and summarize



# Training Staff to Problem-Solve

---

## Active Listening Skills (cont.)

- Take time to listen
- Tune in to nonverbal cues & body language
- Build rapport, understanding and trust
- Open ended questions
- Relaxed and open

# Training Staff to Problem-Solve

---

## Awareness of Roadblocks to Communication

- Analyzing
- Lecturing\*
- Interrogating
- Provoking Rebuttal
- Asking Yes or No Questions
- Judging
- Being aware of the space you are in and how that might change the dynamic and depth of conversation
- If you are taking notes understanding how that may impact client



# Training Staff to Problem-Solve

---

## Practice Personal and Cultural Humility/Curiosity

- Recognize similarities, differences & biases
- Acknowledge mutual humanity
- Excuse ourselves and others from unrealistic responsibility of needing to be “right” all the time
- Remain impartial
- Be sincere and genuine
- Be respectful
- Ask open-ended questions
- Do not Ass-u-me
- Don't be afraid to speak directly about cultural differences

# Creative Problem-Solving Solutions

---

- Assisting someone locate a family member or friend who can help
- Acting as a mediator in the current housing situation to develop a resolution that can allow the household to stay
- Resolving disputes with landlords or previous landlords
- One-time or short-term financial assistance for housing related costs such as:
  - support with move-in costs
  - resolving past due utility bills
  - paying for household basic needs such as groceries
- Getting credit reports and identifying ways to clear debt / communicate the situation to landlords
- Begin expungement process if possible
- Connect with tenant legal services

# Let's Practice

---

- Lily presents at your shelter seeking assistance. She is 27 years old and has mental health and substance abuse issues.
- What should shelter staff do first?
- Ask Questions!!!!
  - What is your name and what brings you here?
  - Where did you stay last night/I understand you were staying at \_\_\_\_\_?
  - Can you stay there tonight?
  - Are there other places you have stayed in the past?
  - Could you stay there tonight?
  - What do you think it would take to be stably housed – what does that look like for you?

# Let's Practice

---

- After talking to Lily you identify that she was staying with an Aunt. The Aunt kicked her out because Lily was “using drugs and not contributing to the household” (not buying food, not cleaning etc.)
- What are some strategies or types of assistance that might help get Lily back into her Aunt's house?

# Let's Practice

---

- Are there flex funds available?
- Could these funds be used to help Lily contribute to groceries for a few months and help her Aunt pay for a house cleaner?
- Would Lily qualify for IHSS? Could this help provide some ongoing support in the home?
- Can you connect Lily with other benefits that could help her assist with household payments (SSI?).
- Could you do some mediation between Lily and her Aunt to help her stay? (e.g. can you come up with a plan where Lily agrees for example not to do drugs in the home (only outside the home)?)
- Could you offer *optional* services to assist Lily in staying sober if that is what she wants?

# Let's Practice

---

- Is this an example of Diversion or Rapid Exit?
- It is an example of Diversion.
- Is this an important question?
- NO! Whether the client is entering the shelter or already staying there it is important to have problem solving conversations with everyone to facilitate identification of housing.

# The Goal for Everyone is Housing

---

When problem solving is not initially successful, staff should continue to follow up on these conversations and ensure that the household is assessed with the community's assessment tool (VI-SPDAT) and entered into the community queue for housing through coordinated entry.

**Break  
Time!!!**





# Using Case Management Tools to Get Clients into Housing



# Case Management Tools

---

- Trauma Informed Care
- Motivational Interviewing
- Strengths-Based Approach





**Providers should leverage these strategies to get people into permanent housing**

# Trauma- Informed Care



# What is Trauma

Trauma is a deeply distressing or disturbing event that overwhelms an individual's ability to cope, causes feelings of helplessness, diminishes their sense of self and their ability to feel the full range of emotions and experiences.

# Trauma-Informed Care

---

- Trauma-Informed Care (TIC) is an overarching structure and treatment attitude that emphasizes understanding, compassion, and responding to the effects of all types of trauma.
- Becoming “trauma-informed” means recognizing that people have many different traumatic experiences which often intersect in their lives.
- Well-meaning services providers can often unintentionally re-traumatize clients who need understanding, support, and individually conscious care.

# Core Components Trauma-Informed Care

---

**Understanding Trauma and Its Impact**

**Promoting Safety**

**Ensuring Cultural Humility**

**Supporting Consumer Control, Choice and  
Autonomy**

# Core Components Trauma Informed Care

---

**Sharing Power and Governance**

**Integrating Care**

**Healing Happens in Relationships**

**Recovery is Possible**



# What Does this Mean for You?

---

- When you meet with a client, consider trauma
- Don't ask "*What's wrong with you?*," ask "***What's your story what brings you here, how can I help?***"
- If a client becomes distressed or is resistant, don't take it personally. Consider that perhaps the reaction is the result of past or current trauma
- Make shelter environment safe and welcoming
- Make provider responses predictable and respectful

# What Does this Mean for You?

---

- Understanding how cultural context influences one's perception of and response to traumatic events and the recovery process
- Empower participants by evoking information as opposed to providing information to them. Assist in filling in gaps in knowledge/information
- Understand that building positive relationships with clients is a core component of recovery

# Making Shelters Trauma Informed

---



<https://www.youtube.com/watch?v=5hauwKR-KIM>

# Motivational Interviewing



# Motivational Interviewing

---

- Motivational interviewing is a patient-centered collaborative conversation style. Not a clinical method, anyone can use it.
- Motivation to change varies from person to person, from one situation to another, and over time.
- It is based on the premise that for a person to “grow,” we need an environment that provides us with genuine openness that enables self-disclosure, acceptance that includes being seen with **unconditional positive regard**, and empathy where we feel like we are being listened to and understood.
- People are better persuaded by the reasons they themselves discovered than those that come into the minds of others (Blaise Pascal).

# Motivational Interviewing

---

- Motivational interviewing encourages people to think and talk about their reasons to change.
- Motivational interviewing accepts that ambivalence about change is a normal human experience and often a necessary step in the process of change.
- Motivational interviewing aims to encourage a person's autonomy in decision making where the provider acts as a guide, clarifying a person's strengths and aspirations, listening to their concerns, boosting their confidence in their ability to change, and eventually collaborating with them on a plan for change.

# Spirit of Motivational Interviewing

---

- **The spirit** is the intention and foundation of your actions, questions, without it your words fall flat.
  - **Partnership:** Demonstrating profound respect for the other; recognizing both parties' expertise; “dancing” rather than “wrestling.”
  - **Acceptance:** Prizing the other's inherent worth and potential; providing accurate empathy; supporting autonomy; affirming strengths.
  - **Compassion:** Coming alongside in a person's suffering; actively promoting the other's welfare; giving priority to the other's needs.
  - **Evocation:** Eliciting the person's own knowledge, wisdom, strengths, and motivation.

# The Flow of a Motivation Interview Conversation

---

- **Engaging** the process of establishing a mutually trusting and respectful helping relationship
- **Focusing** clarifying a particular goal or direction for change
- **Evoking** eliciting the person's own motivation for a particular change
- **Planning** developing a specific change plan that the client is willing to implement



# Motivational Interviewing Techniques

---

- **Open-ended questions:** Allows us to find out more about the client's perspective and ideas about change
- **Affirming:** Commenting on client's strengths and abilities
- **Reflective listening:** Summarizing what the client has said as a statement

# Motivational Interviewing Techniques

---

- **Rolling with Resistance:** Adjusting to client resistance rather than opposing it directly
- **Informing and Advising:** A process of providing information to a person in ways consistent with the spirit of MI; promotes the mutually productive, effective, and respectful exchange of information between practitioner and the client

# Motivational Interviewing Techniques

---

- All of these can elicit “change talk”
- Change talk is the client making statements that are in favor of change
- Case manager goal is to elicit change talk from the client in a collaborative fashion and avoid opposing it
- Goal is to help the client identify and resolve ambivalence so they can move forward

# Examples of “Change Talk”

---

- I'll stop someday. (reflection: So, sounds like you might be interested in stopping and think you might be able to someday)
- I don't have a problem with therapy, just don't make me take pills. (reflection: Therapy has been helpful for you in the past, if conditions were right, you might even go back)
- I don't want to be here. (Reflection: You want a place of your own)
- I miss my shower, I used to listen to music in there every morning, drink coffee on the porch. (Reflection: getting a place of your own is very important to you so you can do the things you enjoy)

# Rolling with Resistance

---

- One view of resistance is that a person is behaving defiantly.
- Another, perhaps more constructive, viewpoint is that resistance is a signal that the person views the situation differently.
- This requires you to understand the other person's perspective and proceed from there.
- Resistance is a signal to you to change direction or listen more carefully. Resistance actually offers you an opportunity to respond in a new, perhaps surprising, way and to take advantage of the situation without being confrontational.

# Rolling with Resistance Roleplay

---

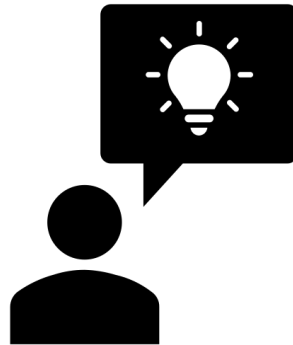


<https://www.youtube.com/watch?v=rgqrusY2MJI>

# What Did You Think?

---

- What did the provider do well?
- What could she have done better?



# Motivational Interviewing

---

*The curious paradox is that when I accept myself just as I am, then I can change.*

*- Carl Rodgers*





# Strengths-Based Approach



# What do You See When You Look At this Picture?

---



# Does Anything Change When You Look for Her Strengths?

---



# Strengths-Based Approach

---

- Determined, strong
- Able to communicate what she wants
- She is well-taken care of (hair done, outfit, her picture is being taken)
- She is expressing developmentally appropriate emotions
- Feels safe enough to express her feelings

# What is Strengths-Based Approach?

---

- The strengths-based philosophy holds the core belief that all individuals have strengths and resources
- The focus of the practice is on a person's skills, interests, and support systems. Its simple premise is to identify what is going well, to do more of it, and to build on it

# Principles of Strength-Based Approach



- Everyone possesses a uniqueness that helps them evolve and move along their journey. These unique characteristics can be potential strengths or capabilities
- What receives attention or focus becomes what we (or the client) strive(s) for and eventually becomes a reality
- Be careful with your words and language. Our language creates our (and our client's) reality

# Principles of Strength-Based Approach

---



- Support others as authentically as you can
- The person or client is the story-teller of their own story
- Be collaborative. Be adaptive and value differences (Hammond, 2010)

**Remember:** People are trying to get their needs met.





# Activity!!

---

- We will be putting you in break out groups of 5.
- One person should volunteer to discuss a particularly challenging client or person in their lives. Describe the client or person and your interactions with them.
- Have other folks in the group identify strengths that the client or person has and discuss how you could leverage those strengths to see progress towards housing.

**Thank You!!!**

Questions? Please Email:

**HousingFirstHCDTA@homebaseccc.org**

