



Housing Support Services

A program of AIDS Connecticut, Inc.
Hartford TGA, Connecticut

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Learning Objectives

After the presentation participants will:

1. Be familiar with the Housing Support Services Program Model
2. Understand how the Housing Support Services Model increases medical outcomes
3. Comprehend the representative payee concept and how to develop a relationship with the Social Security Administration

What is “Housing Support Services”

- Housing Support Services or HSS is a supportive service program of AIDS Connecticut that offers Ryan White eligible participants with a history of housing instability living in the Hartford TGA a variety of client centered services including: advocacy around tenants’ rights, referrals for housing related services and services for budgeting and representative payee using an interdisciplinary approach which aims at increasing health outcomes of the participants.



Program History

- Program started in 1999 as the Hartford TGA's Planning Council response to curtail clients repeatedly accessing RW funds for housing (1st month rent & arrearage).
- The original program objective was “to obtain stable and affordable housing for Ryan White clients.”
- The program was designed to bring in clients, help them get stabilized and “graduate” then to independence
- In 2000 that the representative payee (rep-payee) component was introduced
- The program had two specialists and one assistant



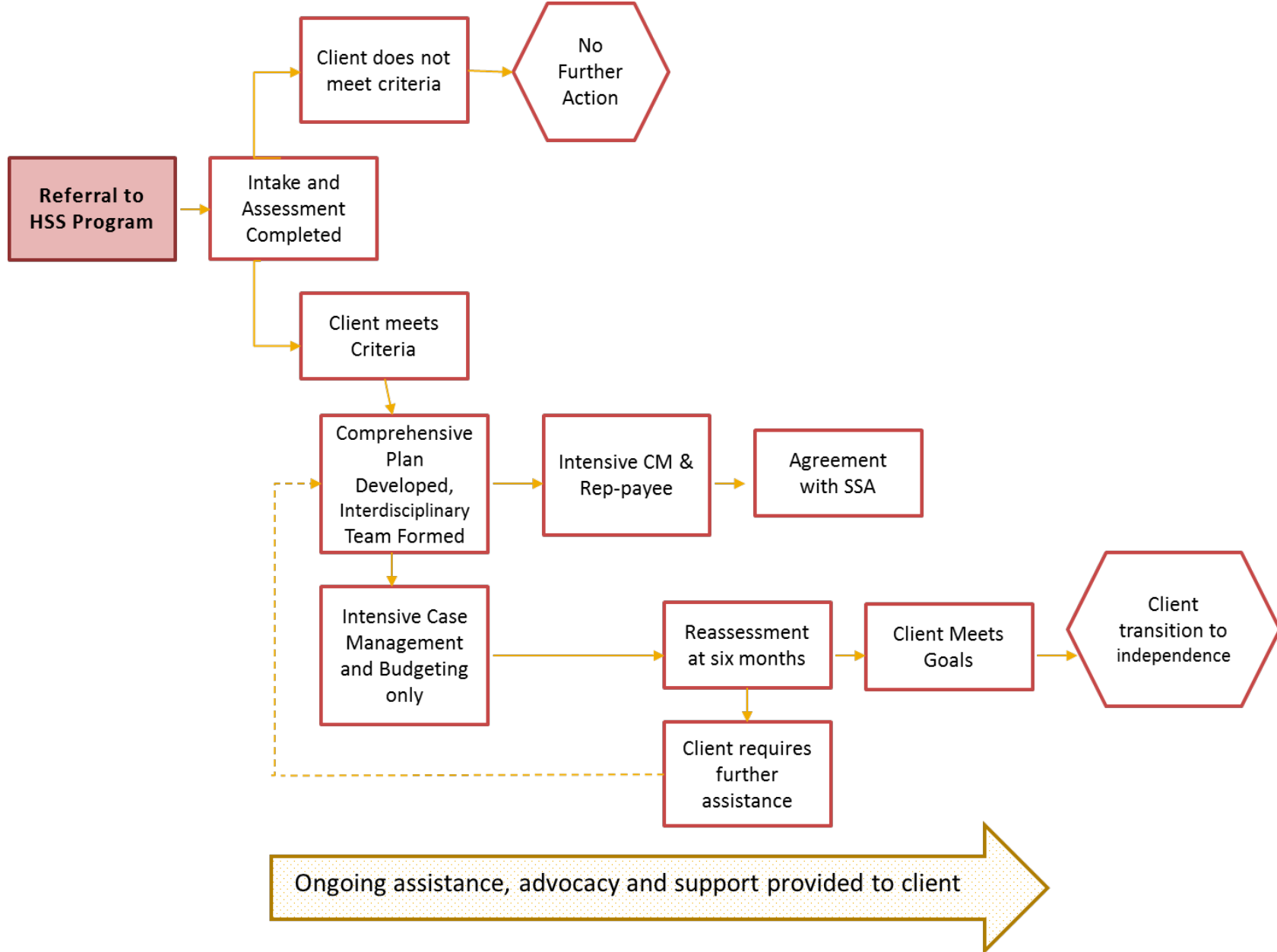
Program Evolution

- Due to the representative payee component proving to be such a vital piece, a relationship with Social Security administration had to be formed
- Funding cuts has resulted in lower staff and therefore a reduction in the number of individuals the program has the capacity to service. Current case load is 26 with a waiting list of 3.
- Interdisciplinary approach was developed in order to facilitate communication among providers and has been successful in tying the program to medical outcomes.



Program Requirements

- Clients must:
 - Be living in Hartford, Tolland or Middlesex counties
 - Meet Ryan White Eligibility criteria – living below 300% of the FPL
 - Have documented at least two evictions and/or history of chronic homelessness (HUDD definition)
 - Referral by care coordinator, medical case manager, or AIDS housing program case manager



What is Representative Payee?

- A representative payee (rep-payee) is a person or organization that is responsible for managing the funds from Social Security Administration benefits for an individual who cannot feasibly handle directing funds independently. It is NOT the same as a Power of Attorney
- For adults, this can be voluntary or as directed by a medical professional. SSA can also make determinations based on certain criteria
- The SSA must approve all rep-payees and requires strict record keeping of funds, how they were spent, and reports of any savings. Yearly random audits are customary.

How to become a rep-payee

- Individuals and organizations need to complete form SSA-11 and provide identifying information (SS# if individual; EIN if organization)

Representative Payee

- Clients must authorize organization (ACT) and designate organization as a representative payee
- The Social Security Administration (SSA) will confirm that the request is acceptable
- Client signs statement authorizing ACT to manage monies and pay specified bills – have to commit to Rent and Utilities as a minimum
- Monthly SSA checks are deposited directly into ACT HSS Funds Account.
- Internally, ACT creates a separate line item for each client using SSN to identify the client and reconciles expenses monthly

Budgeting Component

- Enrolled participants receive monthly one on one budgeting assistance in order to manage finances and be able to meet financial obligations; particular emphasis is placed on housing and utility expenses
- Expenses are itemized and submitted to the finance department via disbursement sheets
- The Housing Support Specialist conducts four yearly budgeting education seminars in the community for providers and clients



Intensive Case Management

- The HSS Specialist acts a team lead using an interdisciplinary approach to coordinate services and address client needs and goals
- The interdisciplinary team meets monthly at minimum or more often if needed
- The HSS Specialist addresses all housing and financial concerns
- Each team member is delegated responsibility according to client assessment of needs and care plan



Tying it to Health

- To the extent possible the interdisciplinary team includes medical providers, medical case managers, and other medical professionals such as adherence nurses and dieticians.
- At each monthly meeting, the health of the client is a priority and unmet medical needs are addressed and plans are put in place in order for the client to achieve goals.
- It is customary for HSS personnel to meet clients at their medical appointments or accompany clients to have lab work performed

Health Outcomes

- All HSS clients meet HRSA “in care” definition
- Client case studies demonstrate repeated increase in CD4/VL decrease and adherence to medical appointments
- HAB measures are collected and tracked via CAREWare and medical evaluations
- Housing = Health: current data shows increased level of medical compliance and VL suppression as compared to when clients enter program



Why HSS?

- Many clients choose HSS because we do not charge for services whereas other organizations (lawyer offices, etc.) do
- Clients have had other rep-payees in the past who have misappropriated their funds or stolen from them
- Stability, support and advocacy that they receive
- Trust and word of mouth from other consumers



How long do clients stay?

- Our goal is always to transition clients to independence however, due to the complex nature of the client mental and medical situations, the clients who have been able to successfully transition to independence is grimly non-existent
- Clients can voluntarily leave the program anytime, provided they are able to have a new rep-payee approved by SSA if applicable. In many cases, the clients return within months or weeks.
- In rare circumstances, clients may be discharged for violating program policies
- Clients stay as long as they need to in order to be successful.



Conclusions

- The HSS program has evolved over time
- Program intervention reduces access of Emergency Client Assistance funds through Ryan White and ensures that when funds are accessed, that it is true payer of last resort by assisting clients in prioritizing their monies
- Despite efforts to transition clients to independence, many participants return or are unsuccessful due to many complex issues
- The HSS program has assisted in keeping chronically homeless HIV+ individuals housed and assisted in improving health outcomes



Thank you for your interest!

- For further information on AIDS Connecticut or our programs, please visit our website:

www.aids-ct.org

or contact me:

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