

**GOVERNMENT OF THE DISTRICT OF COLUMBIA**  
**The Department of Human Services**



**Responses to Fiscal Year 2015-2016 Performance Oversight Questions**

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Submission to

Committee on Health and Human Services

Chairwoman Yvette M. Alexander

Councilmember, Ward 7

February 18, 2016

Committee on Health and Human Services

John A. Wilson Building

1350 Pennsylvania Ave., NW, Suite 115

Washington, DC 20004

**Please provide all responses for FY 2015 and FY 2016 to date unless otherwise specified.**

**1. Please provide a current organizational chart for DHS.**

**RESPONSE:** Please see attachment #1

**a. Please identify the number of full time equivalents (FTEs) at each organizational level and the employee responsible for the management of each program and activity.**

**RESPONSE:** The Department of Human Services (DHS) has a total of 1014 FTEs across the Economic Security Administration, Family Services Administration, and the Office of the Director (also known as Agency Management Programs (AMP)).

<b>Administration</b>	<b>Director</b>	<b>FTEs</b>	<b>FTEs On-Board</b>
Economic Security Administration	Administrator Anthea Seymour	742 FTEs	712 FTEs
Family Services Administration	Interim Administrator Kristy Greenwalt	142 FTEs	123 FTEs
Office of the Director	Chief Operating Officer Sharon Kershbaum	83 FTEs	77 FTEs
Office of the Director -- Office of Program Monitoring and Investigation	Chief Accountability Officer Christa Phillips	47 FTEs	44 FTEs
<b>TOTAL</b>		1014	956 FTEs

**b. If applicable, please provide a narrative explanation of any organizational changes made during FY15 and to date in FY16.**

**RESPONSE:** DHS made a few key changes in the reorganization of the Family Services Administration (FSA). Two (2) new divisions were created (total of four (4) reflected in the organizational chart); the first was the addition of a Family Homeless Services Deputy Administrator to focus on coordinating services to families experiencing homelessness, complementing the agency's services to individuals and veterans. The second was the addition of

a Youth Services Deputy Administrator who focuses on coordinating services provided to youth including the Alternatives to Court Experience Diversion Program (ACE), and Parent and Adolescent Support Services (PASS) Program, and programs that support youth experiencing homelessness. The new organizational structure better positions the agency to promote a more effective system of care.

Additionally, the Office of Shelter Monitoring was changed to the Homeless Services Monitoring Unit (HSMU), per a January 13, 2015 DHS Organization Order.

2. **Please provide the following budget information for DHS, including the amount budgeted and actually spent for FY15 and to date in FY16. In addition, please describe any variance between the amount budgeted and actually spent for FY15 and to date in FY16:**
  - a. **At the agency level, please provide a breakdown by source of funds; Comptroller Source Group; and Comptroller Object.**
  - b. **At the program level, please provide a breakdown by source of funds; Comptroller Source Group; and Comptroller Object.**
  - c. **At the activity level, please provide a breakdown by source of funds and Comptroller Source.**

**RESPONSE:** Please see attachment #2 DHS Budget Information.

3. **Please provide a complete accounting of all reprogrammings received by or transferred from DHS in FY15 and to date in FY16. For each reprogramming, please provide a narrative description as to the purpose of the transfer and which programs, activities, and services within DHS the reprogramming impacted.**

**RESPONSE:** See chart below for FY15. DHS has not completed any reprogrammings in FY16 to date.

<b>Reprogrammings in DHS</b>					
<b>Transfers</b>	<b>Amount</b>	<b>Program</b>	<b>Purpose</b>	<b>Done By</b>	<b>Fiscal Year</b>
Transfer to DHS	\$469,428.00	Homeless Services	Food Storage equipment for Homeless Shelters	Mayor's Budget Office	FY15
Transfer to DHS	\$480,000.00	Homeless Services	Annualization of Housing Navigators	Mayor's Budget Office	FY15
Transfer from DHS	\$864,000.00	Multiple	Closing Measure	Mayor's Budget Office	FY15
Transfer from DHS	\$600,000.00	FSA	Closing Measure	Mayor's Budget Office	FY15

**4. Please provide a complete accounting of all of DHS's Special Purpose Revenue Funds for FY15 and to date in FY16. Please include the following:**

- a. Revenue source and code; fraudulent
- b. Source of the revenue for each special purpose revenue fund (*i.e. license fee, civil fine*);
- c. Total amount of funds generated by each source or program in FY14 and to date in FY15;
- d. DHS activity that the revenue in each special purpose revenue source fund supports; and,
- e. The FY15 and to date FY16 expenditure of funds, including purpose of expenditure.

**RESPONSE:** Please see attachment #4 Special Purpose Revenue Funds.

**5. Please provide DHS's fixed cost budget and actual dollars spent for FY14, FY15 and to date in FY16. Include the source of funding and the percentage of these costs assigned to each DHS administration. Please provide the percentage change between DHS' fixed costs budget for these years and a narrative explanation for any changes.**

**RESPONSE:** Please see attachment #5 Fixed Cost Budget.

**6. Please provide a current list of all properties supported by DHS's budget. Please indicate whether the property is owned by the District or leased and which DHS program utilizes the space. If the property is leased, please provide the lease term. For all properties, please provide an accounting of annual costs (*i.e., rent, security, janitor services*).**

**RESPONSE:** Please see attachment #6 List of Properties Supported by DHS.

**7. Please provide a list of any properties vacated by DHS during FY15 and to date in FY16. Please provide an explanation for why the property was vacated and an accounting of any associated costs or savings.**

**RESPONSE:** The Harriet Tubman Shelter (unaccompanied adult women's facility) moved from Building 9, an older building on the DC General Campus to Building 27 in February 2015. Instead of investing additional resources into the aging building, DHS determined it was in the best interest of consumers to move the program.

Additionally, DHS expanded the H Street Service Center and extended the terms of the lease at 609 H Street. The total term of the lease in FY16 for this location will be \$2.6 million. In FY15, DHS leased this site for \$2.3 million.

**8. Please provide a list of all FY15 and to date in FY16 full-time equivalent (FTE) positions for DHS, broken down by program and activity. In addition, for each position, please note**

**whether the position is filled (and, if filled, the name of the employee) or whether it is vacant.**

**RESPONSE:** Please see attachment #8 FY15 and FY16 FTEs and Vacancies.

**9. How many vacancies were posted during FY15 and to date in FY 16?**

**RESPONSE:**

<b>Vacancies Posted During FY15 and FY16</b>	
FY15	119
FY16 to date*	137

\* As of January 31, 2016

**a. Please indicate which positions were posted and provide a position description.**

**RESPONSE:** There are fifty-nine (59) unique position titles. Please see attachment #9 Vacancies at DHS Unique Positions.

**b. Please indicate how long the position was vacant; whether or not the position has been filled; and where the vacancies were posted (i.e., press release, internet, newspaper, etc.).**

**RESPONSE:** The average length of time a position is vacant at DHS is approximately 108 days. The agency posts all vacant positions on DCHR's careers website for potential candidates to view as well as emailing all staff at the agency.

On November 12, 2015, DHS, in coordination with the District of Columbia Human Resources Office (DCHR) and the Department of Employment Services (DOES), and with the help of Councilmember Yvette Alexander of Ward 7, held a hiring event at the Deanwood Recreation Center in Ward 7. The hiring event drew over 800 applicants, of which 560 of them pre-registered and 240 completed on-site registration. DHS made forty-four (44) contingent job offers for sixty-two (62) vacancies.

**10. Please provide the following information for all grants and sub-grants awarded to DHS during FY15 and to date in FY16, broken down by DHS program and activity:**

- a. Grant Number/Title;**
- b. Approved Budget Authority;**
- c. Funding source;**
- d. Expenditures (including encumbrances and pre-encumbrances);**
- e. Purpose of the grant;**
- f. Grant deliverables;**

- g. Grant outcomes, including grantee performance;**
- h. Any corrective actions taken or technical assistance provided;**
- i. DHS program and activity supported by the grant; and,**
- j. DHS employee responsible for grant deliverables.**

**RESPONSE:** Please see attachment #10 Grants, which contains standard grant reporting information.

- 11. Please provide the following information for all contracts awarded by DHS during FY15 and to date in FY16, broken out by DHS program and activity:**
- a. Contract number;**
  - b. Approved Budget Authority;**
  - c. Funding source;**
  - d. Whether it was competitively bid or sole sourced;**
  - e. Expenditures (including encumbrances and pre-encumbrances);**
  - f. Purpose of the contract;**
  - g. Name of the vendor;**
  - h. Contract deliverables;**
  - i. Contract outcomes;**
  - j. Any corrective action taken or technical assistance provided;**
  - k. DHS employee/s responsible for overseeing the contract; and**
  - l. Oversight/Monitoring plan for the contract.**

**RESPONSE:** Please see attachments #11 and #12 Contract Information, which contain standard contract reporting information.

- 12. Please provide the following information for all contract modifications made by DHS during FY15 and to date in FY16, broken out by DHS program and activity:**
- a. Name of the vendor;**
  - b. Purpose and reason of the contract modification;**
  - c. DHS employee/s responsible for overseeing the contract;**
  - d. Modification cost, including the budgeted amount and the amount actually spent; and**
  - e. Funding source.**

**RESPONSE:** Please see attachments #11 and #12 Contract Information, which contain standard contract modification reporting information.

- 13. Please provide an update on the status of each of the following programs/initiatives to include: (1) FY15 and FY16 budget for each program/initiative, by funding source; (2) funding used in FY16 to date; (3) number of people served in FY15 and FY16 to date; (4) timeline for issuing an RFP; (5) target date for funding to be distributed; and (6) identified service providers.**

**a. Rapid Rehousing (singles and families);**

**RESPONSE:** In FY15, DHS served a total of 1,359 households in rapid rehousing, including 1,214 families, and 145 unaccompanied adults. DHS expects to serve more than 400 individuals and more than 1,100 families in rapid rehousing this year.

<b>Rapid Rehousing (Singles &amp; Families)</b>			
<b>Funding Source</b>	<b>FY15 Budget</b>	<b>FY16 Budget</b>	<b>FY16 YTD Expenditures</b>
Local	\$13,711,001.00	\$25,609,831.00	\$5,377,351.53
Federal	\$1,903,845.00	\$150,000.00	-
<b>Total</b>	<b>\$15,614,846.00</b>	<b>\$25,759,831.00</b>	<b>\$5,377,351.53</b>

**b. Targeted Affordable Housing (singles and families);**

**RESPONSE:** Targeted affordable housing is a new program in FY16, funded through the District of Columbia Housing Authority (DCHA). In FY16, DHS was allotted 197 vouchers from DCHA for targeted affordable housing.

**c. SSI/SSDI Outreach, Access, and Recovery (SOAR);**

**RESPONSE:** *See also 13f.* SOAR funding, in the amount of \$100,000, is included in the Coordinated Outreach initiative, and provides outreach to help people experiencing homelessness, connecting them to appropriate services and supports and helping individuals to apply for and receive SSI/SSDI benefits.

**d. Adam’s Place Daytime Service Center;**

**RESPONSE:** The Daytime Center opened in FY15, and has FY16 local budget of \$800,000. As of January 2016, DHS spent \$270,000. The Daytime Center serves between 40 - 100 individuals a day.

**e. Downtown Service Center;**

**RESPONSE:** *See 13d.* The Daytime Center is currently operating at Adams Place, NE. DHS is working with the Department of General Services and other partners to identify a location downtown, as outlined in HomewardDC.

**f. Coordinated Entry;**

**RESPONSE:** The FY16 budget includes \$250,000 for coordinated entry for single adults. This supports 2.5 FTEs who comprise a project management, data analysis and project coordination team that works with homeless outreach providers to support the connection of individuals to the appropriate housing resources and mainstream assistance such as SSI/SSDI.

**g. Homeless Prevention Program; and**

**RESPONSE:** As of February 11, 2016, DHS has referred 924 families to community-based prevention providers, and have helped to prevent homelessness for approximately 700 families since launching the program in September 2015.

<b>Homeless Prevention Program</b>			
<b>Funding Source</b>	<b>FY15 Budget</b>	<b>FY16 Budget</b>	<b>FY16 YTD Expenditures</b>
Local	\$2,000,000.00	\$1,976,700.00	\$164,505.67
Federal	\$421,249.25	\$634,634.25	-
<b>Total</b>	<b>\$2,421,249.25</b>	<b>\$2,611,334.25</b>	<b>\$164,505.67</b>

\*As of December 31, 2015

**h. Shelter for seniors.**

**RESPONSE:** Unaccompanied adults are served in low-barrier shelter and transitional housing programs and are connected to permanent housing assistance through the coordinated entry process.

**14. What is the total budget for emergency shelter for homeless families in FY 15 and FY 16 to date, by funding source? Please provide a breakdown by emergency placement location.**

**RESPONSE:**

<b>Emergency Shelter (Families)</b>			
<b>Funding Source</b>	<b>FY15 Budget</b>	<b>FY16 Budget</b>	<b>FY16 YTD Expenditures</b>
Local	\$11,729,676.00	\$17,581,000.00	\$3,494,178.14
Federal	\$1,145,512.00	\$604,656.00	\$595,060.00
<b>Total</b>	<b>\$12,875,188.00</b>	<b>\$18,185,656.00</b>	<b>\$4,089,238.14</b>



**15. Please provide the total expenditures for the homeless services budget, by population, for FY14, FY15, and FY16 to date. Please indicate the budgeted amount versus the actual amount spent for each fiscal year 15 - Please explain any funding increase or decrease.**

**RESPONSE:** Please see attachment #15 Expenditures for Homeless Services Budget.

**16. Does DHS anticipate a spending pressure within homeless services for FY16? If yes, please indicate what areas within the homeless services continuum will be impacted. If no, can DHS verify that there is adequate funding to continue to provide shelter and support services, without reductions, throughout FY16?**

**RESPONSE:** At present, DHS does not anticipate any spending pressures within homeless services in FY16.

**Family Services Administration (FSA)**

**17. Please provide the FY15 (approved and actual) and FY16 budgets for all FSA programs. Please indicate and explain any variance. How many clients were served in each program?**

**RESPONSE:** Please see attachment #17 FSA FY15 and FY16 Budget and Programs.

**Youth Homelessness**

**18. What is the budget for homeless youth (18-24) and minors (under age 18) for FY16? Please indicate and explain any variance from FY15.**

**a. Please identify funding sources.**

**RESPONSE:**

<b>Budget for Homeless Youth and Minors Services</b>			
FY15	FY16	Variance	Explanation of variance
\$7,147,000	\$7,544,000	\$397,000	The variance is due to the additional funds added to support pregnant/parenting youth experiencing homelessness.

The FY16 budget for homeless minors and youth up to age 24 is \$7.6 million. The majority of the funds support crisis and transitional housing beds for transition-aged youth (18-24). The funds

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also support drop-in centers, street outreach, crisis beds for minor youth and a youth census. Funding for FY16 is in-line with FY15, plus additional funds to support pregnant/parenting youth experiencing homelessness. Funding for youth services is comprised of local funds and federal Social Services Block Grant funds.

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**b. Please indicate how funding is allocated among service providers?**

**RESPONSE:**

<b>PROVIDER</b>	<b>FY 2016 BUDGET</b>	<b>FUNDING SOURCE</b>	<b>TARGET</b>
Casa Ruby	\$285,000	DHS funding via management contract	Transitional housing for LGBTQ youth
Casa Ruby	\$165,000	DHS issued grants	Crisis beds for LGBTQ youth
Casa Ruby	\$25,000	DHS issued grants	Hypothermia beds for LGBTQ youth
Catholic Charities	\$273,000	DHS funding via management contract	Transitional housing for male youth
Covenant House	\$288,000	DHS funding via management contract	Youth headed families and single youth
Covenant House	\$240,000	DHS issued grants	Transitional housing for youth
Covenant House	\$50,000	DHS issued grants	Street outreach for youth
Community Family Life Services	\$230,000	DHS funding via management contract	Youth Rapid Rehousing and Stabilization Program for youth headed families
Friendship Place	\$50,000	DHS issued grants	Street outreach for youth
Latin American Youth Center	\$393,000	DHS funding via management contract	Extended Living Program for single youth and youth headed families
Latin American Youth Center	\$270,000	DHS issued grants	Transitional housing for youth
Latin American Youth Center	\$ 145,000	DHS issued grants	Drop in center for youth
Echelon Community Services	\$2,507,000	DHS funding via management contract	Youth Rapid Rehousing and Stabilization Program for youth families
Sasha Bruce Youthwork	\$1,137,000	DHS funding via management contract	Crisis beds for minor children, permanent supportive housing for youth headed families, independent living for single youth, transitional living program for unaccompanied minors and single youth, transitional housing for youth headed families
Sasha Bruce Youthwork	\$140,000	DHS issued grants	Transitional housing for single youth
Sasha Bruce Youthwork	\$125,000	DHS issued grants	Drop in center for youth
So Others Might Eat	\$456,000	DHS funding via management contract	Rapid rehousing and stabilization for youth headed families
Wanda Alston House	\$265,000	DHS funding via management contract	Transitional housing for unaccompanied LGBTQ minors and youth 16-24
TBD	\$500,000	DHS funding	Transitional housing for unaccompanied LGBTQ minors and youth 16-24

**19. How many homeless youth (18-24) and minors (under age 18) were served in FY15 and FY16, to date? Please indicate the number placed in shelter. Of this number how many identified as LGBTQ?**

**a. How many youth under 18 without children were served? Please indicate the services received. Please indicate the number placed in shelter.**

**RESPONSE:** The goal for all minors served through the homeless continuum of care is to return to their family. As such, all families with minors placed in temporary shelter are offered reunification services to facilitate the youth’s return home. In the event that reunification is not successful or is not in the best interest of the youth, families must be referred to CFSA.

<b>Youth Under 18 Without Children Served</b>			
FY15		FY 16- YTD	
Minors served	Identified as LGBTQ	Minors served	Identified as LGBTQ
135	10	41	3

**b. How many youth 19 to 24 without children were served? Please indicate the services received. Please indicate the number placed in shelter.**

**RESPONSE:**

<b>Youth 18 – 24 Without Children Served</b>					
FY15			FY 16 - YTD		
Received supports and shelter at youth specific facilities	Received supports and shelter at adult facilities	Youth identified as LGBTQ	Received transitional housing supports at youth facility	Received supports and shelter at adult facilities	Youth identified as LGBTQ
171	415	33	125	173	30

**c. How many youth under 18 with children were served? Please indicate the services received. Please indicate the number placed in shelter.**

**RESPONSE:** There were no youth in this category.

**d. How many youth 18 to 24 with children were served? Please indicate the services received. Please indicate the number placed in shelter.**

**RESPONSE:**

SERVICES	FY15	FY16
Served in Housing Programs (Transitional, RRH, PSH)	161	219
Served in Emergency Family Shelter	535	496
Identified as LGBTQ	4	5

**20. How many shelter beds have been reserved for homeless youth (18-24); minors (under age 18); and minors and youth who identify as LGBTQ? How homeless minors or youth were turned away from shelter because of lack of capacity or other reasons in FY15 and FY16, to date? Please identify the reasons.**

**RESPONSE:** There are approximately 165 crisis and transitional housing beds for unaccompanied youth. Of those, 20 are specifically for young people who identify as LGBTQ. Eighteen (18) beds are available for minor children. DHS and its service providers do not turn away any minor child for homeless services. All providers are required to report any suspicion of abuse and neglect to Child and Family Services Agency. For transition aged youth (18 - 24), if capacity is reached at youth specific facilities; they are served in adult programs. The vast majority of transitional age youth seeking services are not literally homeless; they are most often staying with a friend or couch surfing. These youth are housing insecure, and DHS works to connect them to services that will support greater housing stability.

All providers in the homeless continuum of care must provide culturally competent services to all families and individuals that seek services without regard to gender, sexual orientation or identity, as well as other legally protected characteristics.

**21. Please provide a status update on the following initiatives (including funding amount invested) toward the services mandated by the \$1.3 million Ending Youth Homelessness Amendment Act of 2014:**

**a. Youth drop-in center;**

**RESPONSE:** In the summer of FY15, DHS awarded \$125,000 to Sasha Bruce and \$175,000 to the Latin American Youth Center (LAYC) to establish new drop-in centers. Both centers became fully operational in December 2015. Sasha Bruce is eligible for up to \$125,000 in additional funds in FY16, and LAYC is eligible for up to \$175,000 this year.

**b. Coordinated entry initiative among providers (to ensure that there is no “wrong door” for youth seeking support);**

**RESPONSE:** DHS initiated a formal coordinated entry system in the fall of 2015 alongside the new youth-specific housing vulnerability assessment tool called the TAY-SPDAT. All youth-serving housing providers participate in the twice-monthly meetings to match young people to appropriate housing slots across the city. This collaboration ensures youths are matched to appropriate housing supports. The coordinated entry system guarantees that young people are considered for housing openings, based on their level of vulnerability and need. DHS has made great strides systemizing the process and collaborating with providers to gain buy-in and participation across the city. Having both the assessing agencies and housing providers collaborate ensures that needs identified through the TAY-SPDAT are addressed.

Please see attachment #21b TAY-SPDAT.

**c. Fifteen new beds for youth in crisis;**

**RESPONSE:** DHS exceeded this goal by creating ten (10) new transitional housing beds at Covenant House, ten (10) new beds at LAYC, and 5 new beds at Casa Ruby. There are also five (5) beds at Sasha Bruce for young parents and their children as well as 16 hypothermia beds at Casa Ruby.

**d. Street outreach program; and**

**RESPONSE:** As of September 2015, DHS funded new street outreach teams at Friendship Place and Covenant House. Both entities received \$50,000 and are eligible for an additional \$50,000 in FY16. DHS has also spearheaded a collaboration among all of the District’s street outreach teams (including those funded by other sources). This will ensure a broad outreach and coverage of hot-spots for homeless youth at specific times.

**e. Homeless youth census report.**

**RESPONSE:** DHS, with the Community Partnership for the Prevention of Homelessness (TCP), conducted the 2015 Youth Census. The team engaged homeless services providers, homeless outreach teams, the Office of the State Superintendent of Education (OSSE), youth working in OSSE’s Re-engagement Center, and other providers who serve youth who are experiencing homeless and housing insecure youth by requesting these agencies survey any persons under 24 years old served by their program or agency. Data collection took place between August 17 through 24, 2015, and included counting youth experiencing homelessness up to age 24, as well as housing insecure (couch surfing, etc.,) youths. The census captured numbers as well as characteristics of the young people, such as whether they identify as LGBTQ, the reasons for their homelessness, etc.

Please see attachment # 21 Youth Homeless Census Report Fact Sheet

**2015 Youth Census report results:**

<b>The Literally Homeless</b>	
Literally homeless, unaccompanied persons under age 18	12
Literally homeless, unaccompanied persons age 18 to 24	318
Literally homeless, heads of family households under age 18	0
Literally homeless, heads of family households age 18 to 24	353

<b>Housing Insecure</b>	
Housing insecure, unaccompanied persons under age 18	46
Housing insecure, unaccompanied persons age 18 to 24	169
Housing insecure, heads of family households up to age 18 to 24	652

**22. The FY16 budget included \$500,000 to support services provided to homeless families headed by minors. Please provide a detailed plan regarding how the agency will utilize this funding to support this population? Has funding been allocated to a provider?**

**RESPONSE:** Through a competitive process, DHS will issue a Human Care Agreement in FY16 to support beds for homeless minor parents and young adult parents up to the age of 21 years old. The request for qualifications will be issued in February of 2016 and a selection will be made in late February or in early March. DHS is hopeful that the program will be operational within the next few months and will continue to update the committee.

The youth census conducted by DHS in August of 2015 found no minor parenting youths who are either in shelter or in need of shelter. DHS will continue to offer these emergency shelter beds to parenting youth up to the age of 21 and their children, with preference given to those who are minor parents. Services will include housing, intensive reunification programming, and up to six (6) months after care.

**23. How many youth are currently being served under Parent Adolescent Support Services (PASS) program?**

**RESPONSE:**

<b>PASS and ACE FY16</b>	
Program	Currently Serving
PASS	125
ACE	287

**a. How many youth were served in FY15?**

**RESPONSE:**

<b>Youth Served in PASS and ACE FY15</b>	
<b>Program</b>	<b>Total Served</b>
PASS	255
ACE	454

**b. What is the scope, depth and timeframe of services? Please describe.**

**RESPONSE:** The Parent Adolescent Support Services (PASS) program is a voluntary, early intervention/prevention program for youths aged 17 and under committing status offenses (truancy, running away, curfew violations, and/or extreme disobedience). The program aims to decrease the risk of youths becoming involved with the juvenile justice system.

The program offers intensive case management (including Transition to Independence Process (TIP)) or in home counseling services (Functional Family Therapy) to youth and their families, and refers out for other behavioral health and community-based services. PASS helps youths/families address underlying issues that might be contributing to status offense behaviors. PASS program is often the last resort before youths get referred to the juvenile justice entities.

Since the program's inception, in October 2010, PASS has provided services to over 700 clients and worked with approximately 200 youths (families) per year, with an average referral rate of fifteen (15) clients per month. Youths are engaged in the program for six (6) months, with the possibility to extend participation for a few months, or close early if merited.

Alternative to Court Experience (ACE) is an inter-agency initiative housed at the Department of Human Services (DHS) and operated in collaboration with the Department of Behavioral Health (DBH), the juvenile justice entities, the DC Trust, and community-based service providers.

This is the only diversion program in the District for pre-petition status offenders diverted by the Office of the Attorney General (OAG), pre-arrest delinquency offenders diverted by the Metropolitan Police Department (MPD), and post-arrest delinquency offenders diverted by Court Social Services (CSS).

The overall goal of the initiative is to reduce the number of Court-involved youth by linking them with clinically appropriate behavioral health services and community supports in place of prosecution. In the long run, the initiative seeks to reduce recidivism, re-engage youth in school, improve youth's functioning at home and in the community, and strengthen the family unit. ACE



is a six (6) month program. Services assigned to participating youth depend on their individual needs, ranging from low-level monitoring to intensive behavioral health services.

Since the program's inception in June 2014, the program served over 850 clients; serving an average of 600+ clients/year, with an average referral rate of fifty-one (51) clients/month in FY15.

Recidivism data provided by the Office of the Attorney General found that of the 390 youth who completed ACE diversion through December 31, 2015, only seven percent have been arrested and only three percent (which includes those who were arrested) have been prosecuted. This data demonstrates the overwhelming effectiveness of the ACE program to date.

Both PASS and ACE use the Child and Adolescent Functional Assessment Scale (CAFAS) to quantify participants' change in overall functioning during the program.

**c. Is there a waitlist for services at this time?**

**RESPONSE:** Parent Adolescent Support Services (PASS) program typically has a waiting list of 15-30 families at any given time. Case carrying-staff work with 12-15 youths at any given time. Alternative to Court Experience (ACE) does not have a waiting list and all diversions are assigned immediately. ACE assigns all cases, even if it exceeds capacity, because if the program denies a diversion, the youth is automatically arrested or prosecuted.

**24. What coordinated efforts are made to assess and connect homeless minors and youth to substance abuse and mental health services?**

**RESPONSE:** The TAY-SPDAT, covers four (4) domains: history of housing and homelessness; risks; socialization; and daily functions and wellness. It is used by all of the youth homeless services providers in the District and identifies areas of concern, including substance use and mental health issues. It is up to individual providers (typically the assessors) to act on identified service needs by referring the youths to appropriate support services if the assessor's own agency is not equipped to address the issues. Note that many of the providers have mental health supports on-site, and some also have substance abuse services. DHS is a key player in the Interagency Council on Homelessness (ICH) Youth Subcommittee, a forum where resources are shared across agencies and providers to ensure all direct-service staff are aware of the resources. In addition, as discussed above, DHS leads the coordinated entry process for housing services for youth, and a portion of each of the bi-monthly meetings includes discussions about resources needed for individual youths. Representatives from DBH attend both the ICH and the coordinated entry meetings.

**a. How many referrals for substance abuse and mental health services were made for homeless minors and youth in FY15 and FY16, to date?**

**RESPONSE:** DHS is working to adopt coordinated data collection protocols with government-funded homeless youth service providers, which will enable us to report this data going forward. Some of the homeless youth housing providers (i.e. Latin American Youth Center (LAYC)) are Core Service Agencies or have other in-house supports to directly provide behavioral health services. Other providers have strong partnerships with the Core Service Agencies and work closely with them on providing mental health and substance abuse referrals for homeless youth, as needed. Additionally, coordinated entry meetings where providers share resources occur twice a month and a representative from DBH attends.

**b. Please provide the outcomes of these referrals.**

**RESPONSE:** DHS is developing a tracking mechanism that can be provided to the Committee once complete.

**25. Please provide the procedure and practices for responding to homeless minors in instances where current youth providers are at capacity during hypothermia and non-hypothermia seasons. Please indicate and explain any change in procedure or practice from FY15.**

**RESPONSE:** DHS is not aware of any homeless minors that were turned away from shelter during either hypothermia or non-hypothermia season. Sasha Bruce has ten (10) beds available for minor youths in need of shelter; census counts show availability for these beds year-round.

Sasha Bruce, the provider for shelter beds for minors, reported in FY15 and to date in FY16, which they have not turned away any minors presenting for shelter.

**Domestic Violence**

**26. How many individuals served through the continuum of care identified domestic violence as a housing barrier and/or contributing factor to homelessness in FY15? What housing and/or shelter placements were made for these identified individuals?**

**RESPONSE:** In FY15, 22 individuals served in shelter reported domestic violence as a housing barrier. In FY16 YTD, that number is 28.

**27. How many families served through the continuum of care identified domestic violence as a housing barrier and/or contributing factor to homelessness during in FY15? What housing and/or shelter placements were made for these identified families?**

**RESPONSE:** In FY15, Eighteen percent (or 288) of families placed in shelter reported some sort of domestic violence experience or history. Two percent (37) reported domestic violence as the primary reason for homelessness.

**28. Please provide details on the grants made for domestic violence housing and services programming by DHS in FY15, including performance of grantees.**

**RESPONSE:** In FY15, through a competitive process, DHS awarded funding to three (3) domestic violence service providers to provide residents who are survivors of domestic violence with emergency shelter services and individualized support services, including counseling, support groups, safety planning, advocacy services, licensed child care, and employment services. The providers offer a holistic, person-centered approach to service with a focus on achieving permanent housing.

**29. What domestic violence housing and services grants have been awarded for FY16? Have these funds reached grantees at this time?**

**RESPONSE:** Of the \$704,000 Federal funding allocated, \$559,000 went to support three (3) emergency shelters that provide critical services for survivors and their families. The remaining \$145,000 supports grantees that provide counseling and case management as well as education and outreach services. These grantees are both nonresidential and residential providers.

**30. How does DHS assess the needs of the population of victims of domestic violence in D.C. to determine how to prioritize their discretionary grant funding?**

**RESPONSE:** To effectively prioritize funding for domestic violence services, DHS examines data from VWFRC and emergency shelter and housing providers that report on domestic violence history and housing barriers.

**31. The Council allocated additional funds (\$719,000) to the FY16 DHS budget specifically to fill a gap in DV shelter funding left by the end of Freddie Mac Foundation funds—have these funds been granted in FY16 in order to meet these needs?**

**RESPONSE:** With the additional FY16 funding from Council of \$719,000, DHS allocated \$350,000 to DASH, the onsite domestic violence service provider at Virginia Williams Family Resource Center (VWFRC) and DC General. DASH assesses the needs and develops technical assistance and training plans for emergency shelter staff and family homelessness service eligibility staff at VWFRC. The technical assistance resources increase staff awareness on the dynamics of domestic violence and survivor safety; enhance staff skill and ability to advocate for survivor housing rights and protections; and provide housing counseling to families seeking support through DASH's Housing Resource Center.

The remaining \$369,000 is projected to be used in existing FSA services, which support survivors of domestic violence.

**32. How many families assessed at Virginia Williams Family Resource Center (VWFRC) in FY15 were identified as, or disclosed being, survivors of domestic violence/having experienced domestic violence?**

**RESPONSE:** Please refer to question 27.

**33. What specific training procedures/materials are used to educate case managers and other administrative employees on meeting the needs of domestic violence survivors, including appropriate classification (e.g. category of housing need) and referrals?**

**RESPONSE:** DASH currently partners with DHS to provide onsite staff VWFRC and DC General. DASH staff is able to assess the needs, develop technical assistance and training plans for staff at DC General and VWFRC, as well as facilitate training seminars for staff. Training includes information about the unique housing barriers survivors' encounter, domestic violence resources in the community, trauma-informed techniques for working with survivors, and the importance of self-care for staff while working with survivors. The technical assistance provided increases staff awareness on the dynamics of domestic violence and victim safety; and enhances staff skills and their ability to advocate for survivors' housing rights and protections. DASH develops training for VWFRC and DC General staff, drawing on the extensive work done in this area, including the training DASH previously developed for DHS-funded family shelter providers in 2010 and the current support provided to advocates and housing providers throughout DC and beyond. DASH staff also offers case-by-case support to assist staff in addressing housing specific needs of the families experiencing domestic violence and homelessness.

**34. Describe the extent and nature of DHS/TCP collaboration with domestic violence service providers to better serve domestic violence survivors at VWFRC and DC General, respectively. How does DHS plan to continue or expand these collaborations in FY16 and beyond?**

**RESPONSE:** *See also Question 33.* DASH is onsite at DC General and VWFRC to provide support to the survivors with resources for those who are in need of services. DHS has expanded domestic violence services in FY16.

**Operation of the Virginia Williams Family Resource Center (VWFRC)**

**35. How many family intakes were conducted at the VWFRC in FY15 and to date in FY16?**

**RESPONSE:**

<b>VWFRC Family Intakes</b>	
FY15	FY16 - YTD
Duplicated Applicants - 5628	Duplicated Applicants - 2152
First Time Applicants - 2225	First Time Applicants - 1006

**36. When will the manual outlining application and placement procedures at the VWFRC be completed? Will you be sharing these materials to the community for feedback?**

**RESPONSE:** DHS continues to rework the approach to intake based on lessons learned. We do not have a specific target date for the release of a manual at this time. DHS is working diligently and improving our processes and service to families' every day.

**37. What specific training procedures/materials are used to educate case managers and other administrative employees on meeting the needs of domestic violence survivors, including appropriate classification (e.g. category of housing need) and referrals?**

**RESPONSE:** Please refer to questions 26 - 35.

**38. Please describe and provide the procedures, including all communications and outreach protocols, that have been used in FY15 and FY16 to date to ensure the health and safety of families in the following situations:**

**a. Where families who have applied for shelter have to leave the VWFRC to pick up their children or for other reasons before an alert has been called; and**

**RESPONSE:** During FY15 and FY16 to date, families are directed to contact the Shelter Hotline where they can receive a brief assessment and referral for placement. Also, DHS has implemented a year-round access to family shelter policy for families who are eligible for emergency shelter-- regardless of the weather.

**b. Where families arrive at VWFRC to apply for shelter but unexpectedly cannot apply due to snow days or other unannounced closings.**

**RESPONSE:** Families are directed to contact the Shelter Hotline where they can receive a brief assessment and referral for placement.

**39. Is there outreach done at VWFRC on unannounced closing days to alert families who show up there that they should call the hotline instead?**

**RESPONSE:** Outreach is conducted during unannounced closing days as well as through social media, news releases and signage throughout the District. Families are directed to contact the Shelter Hotline where they can receive a brief assessment and referral for placement.

**40. If there is an alert on during the day, are families who are homeless and would normally be inside the VWFRC while they apply for shelter given a safe, warm place to wait while the hotline determines their eligibility? Are these families provided transportation to motels/shelter?**

**RESPONSE:** Families who are experiencing homelessness during the day regardless of an alert are able to visit the VWFRC for services. If a family is in need of shelter, they can contact the Shelter Hotline for assistance and transportation. In the event that a family is in a location that is not safe or warm, they can contact the Shelter Hotline for additional assistance regarding placement.

**Year-Round Emergency Family Shelter Access**

**41. Please identify the number of families who applied for or requested a placement in shelter each month from October 1, 2015-January 31, 2016.**

**a. Please indicate how many families were completely new, unduplicated applications?**

**RESPONSE:** There were a total of 2152 families who applied for or requested a shelter placement from during October 1, 2015 through January 21, 2016.

<b>FY16 to Date</b>		
Month	Number of Applications	First Time Applications/ Unduplicated
October 2015	559	265
November 2015	530	241
December 2015	622	298
January 2016	441	202
Total	2,152	1,006

**b. Please indicate how many unduplicated Priority One families applied for shelter in FY 15 and to date in FY16.**

**RESPONSE:** In FY15 there were 2225 applications; in FY16 to date there have been 1006 applications.

**c. Of the unduplicated Priority One families, how many received a placement referral?**

**RESPONSE:** In FY15, 1424 priority one determinations resulted in a placement referral; in FY16 to date there have been 786 placement referrals.

**d. Of the unduplicated Priority One families, how many did not receive a shelter placement or were denied a shelter referral?**

**RESPONSE:** In FY15 801 families with priority one determinations did not immediately receive a shelter referral. In FY16 YTD that number is 220.

**e. For any denials, please specify the reason for the denial how many of these denials were on hypothermic and non-hypothermic nights.**

**RESPONSE:** Families must meet eligibility requirements for family placements. On hypothermic alert nights, families who are eligible for emergency shelter are entitled to receive it. DHS provides services in accordance with the law.

**f. For non-shelter placements or diversions from shelter, please identify the non-shelter placement and the length of time the family was able to stay there.**

**RESPONSE:** The length of time in a diversion placement varies based on the individual family circumstances. If a diversion placement is made for families in an Interim Eligibility placement, the diversion, to the best of knowledge of DHS, must be able to extend for 14 days or longer.

**42. Please identify the criteria, if any, that are used to determine whether families are placed at DC General or at overflow capacity units/motels.**

**RESPONSE:** DC General and overflow shelter placements are contingent upon unit availability, family size and composition, and reasonable accommodation requests.

**43. How much is the District is paying per night to shelter families at:**

- a. DC General; The cost per night.**
- b. Overflow Capacity Units/Motels; and**
- c. Temporary Shelters.**

**RESPONSE:** Please see the above below

Cost per Night at DC General	Approximately \$134 per family*
Cost per Night at Overflow Capacity Units/Motels	Between \$92 - \$179 per family
Cost per Night at Temporary Shelters	Approximately \$120 per family**

\*Does not include all maintenance and facility costs to keep DC General operational.  
\*\*Only includes contracting costs; does not include cost to maintain and/or rehabilitate apartments

**44. What is the service plan for families in each of the motels? Specify if the plan includes case management and meals for all families regardless of motel placement.**

**RESPONSE:** All families receive case management, assessment of need and housing search assistance. Families also receive case coordination, and connection to housing resources including rapid rehousing. As much as possible, families in overflow emergency shelter receive meals. In contracted motels, meals are provided similar to DC General.

**45. How many families have been placed in non-communal or other special units due to a disability? Please specify the locations of such placements. Please identify the costs associated with such placements.**

**RESPONSE:** *[DHS does not shelter families in communal settings. All families receive shelter placements in private room units or in apartment style units. DHS is understanding “non-communal” in this question to mean units that share restroom facilities with other units.]* In FY15, there were fifty-two (52) completed requests for a private bathroom. Requestors receiving private bathroom accommodations are typically transferred to motel units, apartment style shelter, or to a unit in DC General with a private bathroom. Please refer to Question 43 on the cost associated for each placement.

**46. Does DHS plan to shelter Priority One families during non-hypothermia season? If yes, will all families be placed? If only some families will be placed, how will placement determinations be made?**

**RESPONSE:** DHS plans to continue to make year-round placements. Families who are eligible for shelter should receive it, regardless of the temperature outside. DHS is revisiting the priority determination process as it is no longer consistent with revised program models and policies.

**47. What are DHS’ plans regarding the operation of the family shelter system after the end of the 2015-2016 hypothermia season?**



**RESPONSE:** DHS plans to continue to offer shelter placements to families who are eligible for shelter, year-round. DHS will also continue to provide robust prevention services year-round to keep families in stable housing and avoid the need for shelter.

**48. How many families have been placed in Maryland motels? What are the costs for these motel rooms per night?**

**RESPONSE:** At the end of January, there were 246 families placed in Maryland hotels with the average cost of \$99.00 per night.

**49. Regarding families placed in Maryland motels with children attending DC schools:**

**a. Are parents offered transportation to get their children to and from school in a timely manner?**

**RESPONSE:** Parents and students access resources from the Office of the State Superintendent of Education (OSSE) to assist with transporting their children to and from school, in accordance with federal law.

**b. Who is providing this transportation for this population?**

**RESPONSE:** Transportation to schools is provided in accordance with the federal McKinney-Vento Act. Transportation for students is coordinated through OSSE and the school's homeless student liaison. Additionally, families are provided with additional transportation resources as needed such as gas cards, taxi fare and or fare cards to assist with transportation.

In 2013, the District of Columbia Council established the Kids Ride Free program allowing all DC students to travel to and from school and educational activities. Students are able to use this service when they are dismissed from school early, or when a half day occurs during the week when traveling in the District. If a student is located outside the District, additional transportation assistance can be provided through each LEA's homeless liaison or their respective school-based homeless liaison. If homeless students or parents are unaware of their school's homeless liaison, OSSE can assist them with connecting with services within their school liaison.

**c. Please identify the costs associated with school-related transportation.**

**RESPONSE:** OSSE tracks the costs associated with school transportation.

**d. Are parents offered assistance with transportation to work, job training, TANF activities and other services? If yes, please specify the assistance offered?**

**RESPONSE:** Families who receive TANF assistance and who are actively participating with their TEP provider are given a weekly stipend of \$75.00 to assist with transportation from their provider.

**Shelter Operations**

**50. What is the median length of stay in emergency shelter by shelter placement (motel, overflow shelter, temporary shelter, and DC General) among families served in FY15? In FY16 to date?**

**RESPONSE:**

	FY15 Median LOS	FY15 Longest LOS	FY16 YTD Median LOS	FY16 YTD Longest LOS
DC General	137 days	1427 days	206 days	1506 days
Motels	140 days	830 days	110 days	533 days
Apartment Style	521 days	2635 days	521 days	2635 days

**51. What is the longest stay for families served in FY 2015? For families served in FY16 to date?**

**RESPONSE:** Please refer to question 50.

**52. Please provide an update on the efforts made regarding shelter development for low-barrier shelters for individuals, including the transition to smaller shelters.**

**RESPONSE:** The District is working to develop a strategy that addresses the low-barrier system for unaccompanied adults, including New York Avenue, Harriet Tubman and 801 East. As outlined in HomewardDC, we want planning to start with reimagining the New York Avenue shelter as a best in class facility that is smaller in scale and service enriched, consistent with our short-term family housing facilities. We are working to identify a space where we would serve the current population of New York Ave program while we renovate it.

Additionally, the new Patricia Handy Place for Women (810 5<sup>th</sup> Street NW) will be operational in March 2016. This site will replace two current low barrier shelters for women, John Young and Open Door located at 425 2<sup>nd</sup> Street NW, which are outdated.

**53. On March 14, 2015, B20-0897, the “Plan for Comprehensive Services for Homeless Individuals at 425 2nd Street, N.W., Amendment Act of 2014” became law. Please provide an update on the implementation of the provisions of this legislation.**

**RESPONSE:** DHS and DGS have been meeting regularly with CCNV representatives to discuss the future of the CCNV site. Those discussions are in preliminary stages.

**Rapid Re-Housing Program (Singles and Families)**

**54. Please identify how many individuals and families are currently participating in the Rapid Rehousing (RRH) program.**

**RESPONSE:** See also Question 13A and 59. Currently, DHS serves 1088 families and 120 individuals in RRH.

**a. What is the total funding for the RRH program?**

**RESPONSE:**

<b>Rapid Rehousing Singles and Families</b>			
<b>Funding Source</b>	<b>FY15 Budget</b>	<b>FY16 Budget</b>	<b>FY16 YTD Expenditures</b>
Local	13,711,001.00	25,609,831.00	5,377,351.53
Federal	1,903,845.00	150,000.00	-
<b>Total</b>	<b>15,614,846.00</b>	<b>25,759,831.00</b>	<b>5,377,351.53</b>

**b. What are the maximum and average subsidy terms for this program?**

**RESPONSE:** See Question 65.

**c. Please identify the average rents of the apartments rented by RRH participants by bedroom size.**

**RESPONSE:** See chart below.

<b>Unit Size</b>	<b>Average Price</b>
Room	\$677.42
Efficiency	\$888.00
1-Bedroom	\$1,003.50
2-Bedroom	\$1,166.00
3-Bedroom	\$1,462.00

**d. Is there outreach to landlords and/or negotiations to bring down rental costs?**

**RESPONSE:** DHS conducts outreach to landlords and partners with them in order to lower the cost of rentals. Most landlords are hesitant to lower their stated rental costs, but they will occasionally negotiate a reduction and or elimination of rental application fees as well as rental application requirements.

**55. How many providers are DHS/TCP working with to implement the RRH program? Please identify each provider.**

**RESPONSE:** Currently, there is only one provider for singles (Friendship Place Home Now Rapid Rehousing Program) and eleven (11) providers for families, plus the DHS Office of Work Opportunity.

**a. For each RRH provider, please identify the amount of their contract, number of individuals/families contracted to serve; number of families currently being served; and the ratio of case managers to families.**

**RESPONSE:** FY16 Friendship Place Contract is \$1.5M. More than 400 individuals will be served in FY16. See below for contracted FRSP providers. DHS is working to expand contract capacity and increase services within OWO to meet current demand.

<b>FRSP Provider</b>	<b>Contract Amount</b>	<b>Contracted Capacity</b>	<b>Client to Case-Manager Ratio</b>
Catholic Charities	\$ 400,545.00	86	29 to 1
Community Family Life Services	\$ 229,778.00	17	8 to 1
Community of Hope	\$ 897,705.00	174	19 to 1
East River Collaborative	\$ 139,725.00	30	15 to 1
Echelon	\$ 551,270.99	50	13 to 1
Edgewood Brookland Collaborative	\$ 102,492.00	22	22 to 1
Far Southeast Collaborative	\$ 189,091.00	25	13 to 1
Georgia Avenue Collaborative	\$ 116,438.00	25	25 to 1
North Capitol Collaborative	\$ 774,124.00	90	18 to 1
So Others Might Eat (SOME)	\$ 366,750.00	21	11 to 1
Transitional Housing Corp.	\$ 736,516.00	100	25 to 1

**b. What training and support is offered to providers?**

**RESPONSE:** Please see below for a list and description of trainings provided to RRH provider staff.

Homeless Services Reform Act (2005) Regulation Overview Training Attendees are provided with information about the rights and responsibilities of clients of homeless services providers, and the standards by which the District of Columbia and homeless services providers must deliver services to clients. Attendees also receive instruction on the procedures for resolving disputes between clients and providers of homeless services.

Customer Service and Language Access Training In this training, attendees are provided with information on identification of various types of behaviors and general tools and strategies for managing and meeting the needs of clients, including language access. The Language Access Act of 2004 mandates that District agencies make interpretation services available to all LEP/NEP customers seeking services. Training participants will discuss concepts of culture, identity and language; discover the District's Foreign-born & LEP/NEP Communities; review Laws Governing "Language Access;" and receive resources in working with LEP/NEP populations.

Unusual Incident Reporting In this training, attendees are provided information on how and when incidents should be reported.

Americans with Disabilities Act (2010) and Reasonable Accommodations Training This training details the Americans with Disabilities Act and how to assist clients who are seeking reasonable accommodations within their program.

Housing Based Case Management This training offers strategies, based on various evidence-based practices, to ensure that housing-based case managers are focusing on tenants' most important skills, are timing interventions effectively, and are making use of appropriate resources. Attendees learn about the related concepts of Critical Time Intervention, Harm Reduction, Supported Employment, Housing First, Recovery and Wellness, and Motivational Interviewing--all of which can help case managers and their property management partners to increase housing retention rates and create sustainable tenant-staff relationships. At the end of this training, case managers will have a greater understanding of how to support tenants in supportive housing, allowing them to maintain their housing and more easily move towards personal recovery.

Cultural Competency 101 This training focuses on skill-building based on four (4) of the National Association of Social Workers (NASW) Standards on Cultural Competency: Ethics and Values, Self-Awareness, Service Delivery, and Language Diversity. Experiential exercises are used to illustrate the concept of culturally-bound frames of reference and how to

use awareness of these frames to heighten cultural sensitivity. Although the NASW Standards are used, this training is useful for all staff in human service settings, regardless of role. At the end of this training, attendees will be better equipped to offer culturally-sensitive services to a wide range of persons.

Understanding Special Needs This training provides an overview of the experiences of people living with special needs, including mental illness, substance abuse, and HIV/AIDS. It also offers information on how co-occurring disorders interact with one another and impact how persons respond to services. Special emphasis is placed on understanding staff roles in supporting persons with special needs and managing everyday problematic situations. Well-trained clinical staff matched with well-trained non-clinical staff makes for an ideal team that work collaboratively to provide optimal services.

Non-Coercive Approaches to Conflict Management This training offers participants the skills to intervene in the early stages of conflict as a way to prevent violence, and looks at person-centered approaches to establish relationships that help prevent tense situations from intensifying. This training also describes the different stages of conflict escalation and ways to respond to each stage. At the end of the training, attendees will have a better understanding of conflict and greater confidence in responding to conflicts.

Working With Transitional Aged Youth The training places special emphasis on employment and wellness, as well as youth development and the impact of loss and trauma. Strategies for engaging young persons and helping them develop support systems are discussed, and the unique motivations of youth are reviewed. This training also provides an introduction to Motivational Interviewing techniques designed to help youth move towards recovery. Attendees will leave the training with a more comprehensive understanding of how to work with persons during this critical transition age, and a greater appreciation of this population's needs.

**c. Does DHS collect data on provider performance? If so, what does that data show?**

**RESPONSE:** Yes. DHS collects data on families and individuals served, program exits, and household income data, among other measures. See future responses for details.

**56. Do the RRH services vary by provider? Is there a common set of services that each provider is required to provide? If yes, please identify these services.**

**RESPONSE:** Currently, the District has one (1) RRH provider for unaccompanied adults. For the Family Rental Subsidy Program, all providers administer services based on the same rules and regulations, and all families receive case management services, connection to employment and education services and life skills training.

**57. Upon placement in housing, do all individuals/families immediately receive the case management that comes with RRH? If no, what is the average time between placement and connection to case management?**

**RESPONSE:** Capacity for service provision within the RRH program has not kept pace with the demand for RRH assistance. With the primary focus on supporting families out of shelter and into housing, services may follow the housing assistance by up to three (3) months. DHS is aware of the issue and is actively working to build and increase capacity for services. DHS is focused on eliminating the wait times for services in RRH and providing tailored services that meet the unique needs of each family.

**58. Has the city seen a drop in the number of landlords willing to rent to individuals/families with RRH subsidies?**

**RESPONSE:** Effective landlord engagement is always a challenge. DHS has launched a housing navigation team to better work with landlords, address their concerns, and build lasting relationships. DHS is actively engaging landlords to partner with DHS and give families and individuals experiencing homelessness a new lease on life.

**59. Please provide the number of individuals/families DHS expects to serve with RRH at any given time in FY16.**

**RESPONSE:** *See also Question 13A.* DHS expects to serve more than 400 individuals in rapid rehousing, and more than 1,100 families.

**60. Please provide the number and percentage of individuals/families that have accepted RRH since October 1, 2015 that have moved into housing.**

**RESPONSE:** IN FY16 YTD, 49 individuals and 190 families have achieved permanent housing with RRH.

**61. Please provide the number of individuals/families that applied for RRH but were determined to be ineligible in FY15 and FY16. Please provide the reasons they were determined to be ineligible.**

**RESPONSE:** All families who are eligible for emergency shelter are eligible for RRH. Eligibility requirements can be found in the HSRA.

In FY15 when RRH for individuals was a pilot program, 89 individuals were determined not eligible for RRH because they were not literally homeless, earned more than 50 percent (50%) of AMI, were unable to contact, had enrolled with another provider, or they received a longer-term

subsidy or it was determined by the case manager that RRH was not the appropriate housing intervention. In FY16 YTD, the number is 73.

**62. Please provide the number of “housing locators” that have been hired on a full-time basis for the RRH program. Please provide the number of clients that have been served by these locators and the overall percentage that this represents of clients identified for the program.**

**RESPONSE:** The RRH program for individuals, operated by Friendship Place, maintains one (1) Housing Specialist for the program. The Housing Specialist serves as a “housing locator” supplement to the team and program. Each case manager also identifies available units individually. One- Hundred percent (100%) of participants (127) have been served by the Housing Specialist for FY16.

Four (4) Housing Navigators are currently on staff at DHS to lead the housing searches. DHS is in the process of hiring a supervisor for the team. In FY15, the Housing Navigators were charged with identifying available housing units. The housing navigators serve all RRH clients, as they solicit available units across the District. Beginning in February 2016, Housing Navigators now each carry a caseload of approximately 20 families at a time and are charged with finding units quickly based on the family’s specific housing needs.

**63. Please provide the standards that are used to evaluate whether an apartment unit is of acceptable quality for RRH.**

**RESPONSE:** All units are required to be rent reasonable as determined by the District of Columbia Housing Authority (DCHA) payment standards.

In addition, landlords are required to submit a landlord leasing packet verifying property ownership in addition to other supporting documentation. The following is a list of required landlord documentation.

- Recorded Deed for the property or recorded Deed receipt;
- Current Basic Business License for the property;
- The Certificate of Occupancy for the property;
- W-9 (Tax Identification Number);
- Landlord Payment/Payee Information Form;
- ACH Enrollment/Change Form;
- Utility Information Form;
- Property Insurance Verification Form;
- Management Agreement (If different from landlord);
- Landlord Pre- Inspection Checklist (verify that all areas are correctly addressed prior to checking);
- Lead Based Paint Disclosure Form;
- Security Deposit Return Agreement; and
- Payment Reconciliation Agreement.



Lastly, each unit must pass a Department of Housing and Urban Development - Housing Quality Standards (HQS) inspection as determined by a certified HQS Inspector.

**64. Please provide the number of times that the RRH provider portion, as opposed to the participant portion, of the rental subsidy was paid late in FY15 and FY16, to date. Please provide the reasons for these late payments.**

**RESPONSE:**

<b>RRH Provider Portion</b>	
<u>FY15: 5 total</u>	<u>FY16: 6 total</u>
Postal Service Issues: 3	Postal Issues: 0
Staff Capacity Issues: 2	Staff Capacity Issues: 6

**65. Please provide the minimum and maximum allowable subsidy terms under the RRH program.**

**RESPONSE:** For Individuals, the RRH program currently operates as a minimum of 120 days (4 month) program with a maximum of 12 months of assistance from intake date. After the new RRH for Singles Guidelines are accepted and implemented in the District, Home Now will operate as a minimum 90 day program with a maximum of 12 months of assistance from housed date.

The family program operates as a minimum of 120 days (4 month) program, with a twelve month surety for families, with the ability to extend the subsidy for longer if warranted.

**66. Please provide the following information about families participating in RRH in FY15 and FY16, to date:**

**a. The number and percentage that is on the DCHA waiting list for subsidized housing;**

**RESPONSE:** DHS does not receive any DCHA listing regarding subsidized housing wait lists.

**b. The number and percentage with a head of household that receives TANF; and FY15:**

**RESPONSE:** In FY15, 960 families (79%) participating in FRSP also received TANF. In FY16 YTD, 849 families (78%) participating in FRSP also receive TANF.

**c. The number and percentage with a head of household that receives SSI or SSDI.**

**RESPONSE:** In FY15, 53 families (4%) participating in FRSP also received benefits from SSI or SSDI. In FY16 YTD, 40 families (4%) participating in FRSP also receive benefits from SSI or SSDI.

**67. Please provide the following outcome measurements for families participating in RRH in FY15 and FY16, to date:**

**a. The average number of months of assistance;**

**RESPONSE:** Currently, families receive assistance from FRSP for an average of 14 months; individuals receive RRH assistance for an average of six (6) months.

**b. The average number of months between a family being determined eligible for the program and actually moving into a unit;**

**RESPONSE:** Refer to Question 50. The data on length of stay in emergency shelter correlates to the time eligible for RRH services and exiting shelter to a permanent destination.

**c. The average increase in or maintenance of income over the course of the program; and**

**RESPONSE:** The average increase in income for families served in RRH in FY15 was \$47.60. The average increase in income for families served in FY16 YTD is \$12.85.

**d. The average rent burden at the time of program exit.**

**RESPONSE:** Please refer to Question 54C for average unit rental costs.

**68. Please provide the number of individuals/families that exited from RRH in FY15 and FY16, to date. Please provide:**

**RESPONSE:** In FY15, the number of individuals who exited RRH is 74; the number of families who exited RRH is 264. In FY16 YTD, 40 individuals and 74 families have exited RRH.

**a. The number and percent of exits as the result of no longer requiring assistance.**

**RESPONSE:** The majority of both individuals and families who exit RRH do so without additional housing subsidies.

**b. The number and percent of exits to permanent housing.**

**RESPONSE:** In FY15, seventy-two percent (72%) of individuals (53) who exited RRH did so to permanent housing. In FY16 YTD, seventy-three percent (73%) of individuals (29) who exited RRH did so to permanent housing.

For Families in FY15, approximately 225 families have exited RRH to permanent destinations, or 85 percent of families who exit RRH. Data for FY16 is not currently available.

**c. The number and percent of exits to a long-term subsidy program (e.g. LRSP, HCVP).**

**RESPONSE:** Very few individuals exit RRH to a longer-term subsidy--only two (2), and both occurred in FY16 YTD. For families, the percentage is much higher as most families exit homelessness from shelter with RRH assistance at first and are then connected to longer term support if needed as part of the Progressive Engagement Model. Roughly 20 percent of families who exit RRH do so to a longer term subsidy.

**d. The number and percent of exits that resulted from the expiration of the subsidy.**

**RESPONSE:** According to records, no individual has yet to exit RRH due solely because of the expiration of the subsidy. For families, records indicate that 17 families exited homelessness due to the expiration of the subsidy or from non-compliance with program rules. It has not been the practice to exit families from RRH who otherwise would end up back in the homelessness system--which would be more costly.

**e. The number and percent of exits that resulted from termination from the program as well as the reasons for the termination.**

**RESPONSE:** According to records only one (1) individual has exited RRH due to non-compliance with program rules. This occurred in FY16 YTD. According to records, seventeen (17) families exited homelessness due to the expiration of the subsidy or from non-compliance with program rules over the same period.

**f. The number and percent of exits that resulted from any other cause. Please identify the cause.**

**RESPONSE:** In FY15, twenty (20) individuals exited RRH for reasons other than detailed above, these reasons include lack of participant engagement, participant not interested in continuing housing, and participant relocated to justice or court-ordered treatment facility. In FY16 YTD, nine (9) individuals exited RRH for similar reasons.

**g. The number and percent that avoid subsequent returns to homelessness at 12, 18, and 24 months after exiting the program over the course of RRH program. Please provide a description of how this figure was calculated.**

**RESPONSE:** In FY15, only six percent (6%) of individuals returned to seek homeless services after exiting RRH to permanent destination. In FY16 YTD the rate is at three percent (3%). For families in FY15, FRSP achieved an 85 percent success rate with only fifteen percent (15%) of

families who exited housing to a permanent destination returning for homeless services. In FY16 YTD that rate for families returning for service is currently two percent (2%). DHS calculates this rate by tracking all program participants who return to seek homeless services who have previously exited a homeless service to a permanent destination.

**69. How many individuals/families were offered RRH but declined in FY15 and FY16, to date.**

**RESPONSE:** In FY15, five (5) individuals declined participation in the RRH Program. In FY16 YTD, twelve (12) individuals have declined the program. All families who are eligible for shelter are eligible for RRH, and in accordance with the Progressive Engagement Model, families who exit shelter for the most part do so with RRH.

**Permanent Supportive Housing Program (Singles and Families)**

**70. What is the budget for the DHS' Permanent Supportive Housing (PSH) program from 2008 to the present for individuals? For families?**

**RESPONSE:**

Permanent Supportive Housing									
Category	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016
General	-	-	-	28,141,485.12	26,072,684.91	25,025,403.75	-		301,788.00
Singles	-	-	-	-			18,451,080.12	23,087,984.94	25,617,783.08
Families	-	-	-	-			9,925,569.85	11,893,304.08	14,469,489.00
<b>Total</b>	-	-	-	<b>28,141,485.12</b>	<b>26,072,684.91</b>	<b>25,025,403.75</b>	<b>28,376,649.97</b>	<b>34,981,289.02</b>	<b>40,389,060.08</b>

**71. List the number of available PSH slots in the DHS PSH program from 2008 to the present for individuals? For families?**

**RESPONSE:**

Funding Source	FY08	FY09	FY10	FY11	FY12	FY13	FY14	FY15	FY16
Local Scattered-Site (Individuals)	300	400	400	400	360	415	415	415	665
Local Scattered-Site (Families)	0	0	104	140	140	140	140	140	250
Local Site-Based (Individuals)	0	0	0	5	36	36	76	76	75*
Local Site-Based (Families)	0	0	0	27	27	27	27	27	27
Local Seniors	0	0	0	0	0	0	20	20	20
LRSP Sponsor-Based	0	50	50	50	50	50	50	50	50
HCVP (Individuals)	0	270	270	270	300	300	300	300	300
HCVP (Families)	0	80	80	110	260	260	260	260	260
HCVP MFP(DCOA)	0	25	25	25	25	25	23	23	22
HCVP NED (DMH)	0	0	0	0	77	77	75	70	62
HUD-VASH	0	0	105	205	205	205	205	205	205
Local Veterans	0	0	0	0	0	0	0	150	150
<b>Total</b>	<b>300</b>	<b>825</b>	<b>1,034</b>	<b>1,232</b>	<b>1,480</b>	<b>1,535</b>	<b>1,591</b>	<b>1,736</b>	<b>2,011</b>

\*One of the units for women at Erna's House located 1107 11<sup>th</sup> Street NW has been permanently taken off-line due to recurring issues with sewage back-up in the unit.

**72. What percentage of DHS PSH units for individuals and families are being filled through the coordinated entry system for individuals? For families?**

**RESPONSE:** DHS fills approximately 70 percent of PSH units for individuals through our coordinated entry system while 90 percent of the PSH units for families are filled through Coordinated Entry.

**73. How many PSH units became available due to turnover in FY15 for individuals? For families?**

**RESPONSE:** There were a total of 70 PSH units that became available due to turnover in FY15 for individuals and eight (8) PSH units that became available for families.

**74. For FY15 and FY16 to date, when a unit became available due to turnover, what was the average time necessary to fill the unit for an individual? For families? What was the shortest time? The longest time?**

**RESPONSE:** When a subsidy becomes available due to the death of the receiving resident, the subsidy is then turned over immediately, however if the subsidy becomes available due to

termination, the subsidy becomes available within six (6) months. This applies to both singles and families.

**75. What is the average cost of the DHS PSH program annually per individual? Per family?**

**RESPONSE:** The average cost of the DHS PSH program annually per individual is \$22,160 and per family \$27,080; this includes housing and wrap-around services.

**76. What is the breakdown of funding sources for PSH rental subsidies in FY15 and FY16, to date? How many and what type of federal and local vouchers are used for the program?**

**RESPONSE:**

<b>Funding Source</b>	<b>FY15</b>	<b>FY16</b>
Local Scattered-Site (Individuals)	415	665
Local Scattered-Site (Families)	140	250
Local Scattered-Site Seniors	20	20
Local Site-Based (Individuals)	76	75
Local Site-Based (Families)	27	27
Local LRSP Sponsor-Based Pathways to Housing (Individuals)	50	50
Federal HCVP (Individuals)	300	300
Federal HCVP (Families)	260	260
Federal HCVP MFP (DCOA) (Individual Seniors)	23	22
Federal HCVP NED (DMH) (Individuals)	70	62
Federal HUD-VASH (Veterans)	205	205
Local Veterans Program	150	150
<b>Total</b>	<b>1,736</b>	<b>2,086</b>

**77. How many of the PSH slots funded in the FY16 budget have been filled for individuals? For families?**

**RESPONSE:**

<b>PSH Slots Funded in FY16</b>	
Individuals	72
Families	32

**a. How many of the slots do you anticipate filling each month from March to September?**

**RESPONSE:** DHS anticipates filling approximately 50 slots each month from March to September for singles.

**b. Have there been delays in filling these PSH slots? If so, what are they?**

**RESPONSE:** Delays in filling PSH slots can occur for many reasons, including a lack of affordable units, application criteria that is out of reach for clients, and delays in securing documentation needed to lease-up. Delays can also occur in the unit inspection process.

**78. What is the average length of time from when a client is identified as needing PSH to their placement in PSH housing for individuals? For families?**

**RESPONSE:** The average length of time from when a client is identified as needing PSH to their placement in PSH housing for individuals is six (6) weeks from the date of initial engagement to having a lease for a unit. The average time for a family depends on the composition of the family. Smaller families average sixty (60) days from initial engagement by the PSH provider. Finding large units is more difficult and usually takes a longer period of time.

**79. Please provide an update on the Veterans NOW initiative to end Veterans homelessness in the District of Columbia.**

**RESPONSE:** During the 2015 calendar year, 764 Veterans were housed. This translates to an average of sixty-four (64) Veterans housed per month, relative to the goal of housing sixty-eight (68) Veterans per month. However, despite meeting the mark on the monthly goals for housing Veterans, the number of Veterans in low barrier shelters and Transitional Housing has held steady for the year.

The fact that the number of Veterans experiencing homelessness is not increasing is a significant accomplishment because it demonstrates that the system is functioning at a steady state and

keeping up with inflow. It demonstrates that the initiative has established a system approach that can maintain a functional zero and keep up with inflow. However, the goal is to significantly decrease the number of Veterans experiencing homelessness to less than 160 at any point in time.

This original goal was based on an analysis of inflow, so the Veterans NOW! initiative updated the analysis in December and has since established that inflow is approximately 150 Veterans per month. We know that some of this inflow is related to cross jurisdictional movement, especially into VA-funded Grant and Per Diem (GPD) beds. As such, the Veterans NOW! initiative is focused on leveraging relationships with Montgomery and PG counties to appropriately connect Veterans to the resources and services available through the initiatives to end Veteran Homelessness in Montgomery and PG counties.

Also noteworthy, of the 764 Veterans housed in 2015, 489 (69%) were experiencing chronic homelessness. This figure is indicative of both the vulnerability of Veterans experiencing homelessness in the District, as well as the challenges faced by the Veterans NOW! initiative: that of reaching and engaging Veterans who have experienced chronic homelessness. The Veterans NOW! team is working to ensure that the outreach teams are consistently and creatively working to engage Veterans. In addition to consistent street outreach and shelter-in reach, Veterans NOW! team has established shelter mini-teams focused on creatively engaging with Veterans, shelter by shelter.

Finally, due to the tight housing market, finding units that meet the needs of Veterans and are also rent reasonable has been very challenging. Veterans need ADA compliant units, units that are accessible to employment opportunities, health care and established social networks, etc. The Veterans NOW! initiative continues to work with the DCHA to creatively address this issue: hosting Meet and Lease events, expediting inspections, hiring staff focused on developing and expanding relationships with landlords, leveraging technology to create and manage an inventory of units, etc.

### **Interim Eligibility Placement**

#### **80. How many families have been placed in an Interim Eligibility (“IE”) Placement to date in FY16? What is the average length of stay in an IE placement?**

**RESPONSE:** In FY16 YTD, there have been a total of 260 families placed in Interim Eligibility. Currently, the average length of stay in an IE placement is seven (7) days.



**81. Please list by number and percent of families who:**

- a. Were found eligible following an IE placement**
- b. Were found ineligible following an IE placement;**
- c. Were placed in IE due to uncertainty around residency;**
- d. Were placed in IE due to uncertainty around family composition; and**
- e. Were placed in IE due to uncertainty around other safe housing arrangements.**

**RESPONSE:** The chart below details the number and percentage of IE placement between October 1, 2015 through January 27, 2016, and the description of each IE determination or placement.

<b>Interim Eligibility Data</b>	
Placement	Number and Percentage
Retained Placement occurs when a family enters as an IEP and was determined eligible for shelter	122/ 47%
At the time the data was pulled, these families were in an Interim Eligibility Placement and whose eligibility had not yet been determined.	70 /27%
Ineligible determination occurs when a family is determined not to be eligible for shelter or other homeless services because they do not meet the definition of homeless (safe housing), family or resident.	39 / 15%
Diverted Placement occurs when a family who was deemed ineligible for shelter because they have other safe housing and have been referred to a Homeless Prevention Program site for further support with maintaining their housing or finding other permanent housing solutions.	29 / 11%

**82. Please attach a copy of the following IE notices:**

- a. Notice of Interim Eligibility Placement that is given to clients by Virginia Williams prior to an IE placement**
- b. Notice of Denial of Eligibility following IE placement**
- c. Notice of Eligibility following IE placement**

**RESPONSE:** Please see attachments #82 IE Placement Notice.

**83. How many families have filed appeals regarding an IE placement or a denial of eligibility following an IE placement?**

**RESPONSE:** As of January 31, 2016, there were two (2) appeals filed regarding an IE placement or denial of eligibility following an IE placement.

**DC General Shelter Replacement**

**84. When will an announcement be made of sites, designs, or construction plans for the identified family shelter replacement buildings?**

**RESPONSE:** The announcement was made at the Mayor-Council Breakfast on Tuesday, February 9, 2016. Please refer to <http://dc.gov/homewardDC> for more information.

**85. What is the timeline for the new family shelter replacement units and the closure of DC General?**

**RESPONSE:** Please refer to <http://dc.gov/homewardDC> for more information.

**Office of Shelter Monitoring**

**86. How many complaints did DHS' Office of Shelter Monitoring receive in FY15? In FY16, to date?**

**RESPONSE:** Please see response to question number #87.

**87. How many complaints did DHS' Homeless Shelter Monitoring Unit receive in FY15 and FY16, to date?**

**RESPONSE:** In FY 2015, DHS' HSMU received 84 complaints. In FY 2016 YTD, DHS' HSMU has received 21 complaints.

a. **Provide a breakdown of the number and types of complaints received.**

Type of Complaint	FY 2015 Number Received	FY 2016 Number Received
Americans with Disabilities Act (ADA)	5	1
Case Management	4	0
Customer Service	2	0
Discrimination	2	1
Food	1	1
Health and Environmental	27	4
Housing	4	0
Issues/Violations	36	11
Maintenance	1	2
Program Rules	2	1
<b>Total</b>	<b>84</b>	<b>21</b>

b. **Provide a breakdown of the types and numbers of HSRA violations.**

**RESPONSE:** Of the eighty-four (84) complaints received in FY15, six (6) complaints were found to be substantiated violations of the HSRA and were complaints regarding health and environmental issues. Three (3) complaints were related to a lack of heat, one (1) complaint was related to dust in the facility due to construction, and two (2) complaints were related to flooding. The health and environmental complaints were substantiated and subsequently referred to the DHS Office of Capital Operations to be remedied and were addressed.

c. **Identify the specific facility or program identified in the complaint/HSRA violation.**

**RESPONSE:** Please see attachments #87 DHS FY15 Complaints and DHS FY16 Complaints.

**d. Provide the outcomes or corrective actions to address each complaint/HSRA violation.**

**RESPONSE:** Please see attachments #87 DHS FY15 Complaints and DHS FY16 Complaints.

**e. Provide the median response time of responding to complaints and the longest response time.**

**RESPONSE:** The median response time for FY15 was eleven (11) business days; the longest response time was one hundred eighty-nine (189) business days. The median response time for FY16 is four (4) business days; the longest response time is thirty-four (34) business days.

**88. Has DHS issued an annual report regarding the Office of Shelter Monitoring for FY15? If not, when will it be released?**

**RESPONSE:** The DHS annual report for the Homeless Services Monitoring Unit (HSMU) for FY15 will be released on February 22, 2016 and a copy will be provided to the Committee.

**89. Please provide a copy of the shelter monitoring report conducted in FY15 for Community for Creative Non-Violence (CCNV) Shelter.**

**RESPONSE:** The Community for Creative Non-Violence (CCNV) annual monitoring review is conducted during the hypothermia season (November 2015 – March of 2016.)

Please see attachment Question #89 CCNV Hypothermia FY Monitoring Report.

A copy of the FY15 report for the Community for Creative Non-Violence Shelter is not yet completed. Once it is completed DHS will submit a copy to the Committee.

**Accessible Units of Shelter/Housing**

**90. How many wheelchair accessible units are in DHS' inventory for use as emergency shelter or supportive housing? Please break the numbers down by continuum level and population.**

**RESPONSE:** There are approximately:

- 1337 wheelchair accessible units in DHS' inventory for use as emergency shelter for singles,
- 628 units in transitional housing for singles,
- 305 units for emergency family (includes DCG and contracted hotels), and
- Approximately 112 for transitional housing for families.

Overflow shelter is procured based on need. If a family presents with a need for an accessible unit, placement staff works directly with the overflow placement location to accommodate the need.

**91. How many non-communal style emergency shelter units are in DHS' inventory during hypothermia season and year-round for individuals? For families? Where are they located? Who provides case management to families in these units?**

**RESPONSE:** Please see attachment #91 Shelters and list of hypothermia sites. Case management is provided by DHS, TCP, and TCP contracted community providers.

**Encampments**

**92. How many homeless encampments were cleared in FY16, by month? Please indicate the locations of these encampments.**

**a. What is the total cost for these encampment cleanups, by location, including staff time, contracting cost, storage costs, and services provided?**

**RESPONSE:** See attachment #92 - encampment activities.

**b. From which part of the budget were these resources allocated?**

**RESPONSE:** See attachment #92 - encampment activities.

**c. How many individuals were relocated from encampments in FY16 to date? Please identify where these individuals were placed or relocated?**

**RESPONSE:** See attachment #92 - encampment activities.

**d. Is there a protocol in place for the clearing of encampments that includes the process for matching individuals to shelter or housing? If no, when will one be developed?**

**RESPONSE:** The 2012 Protocol for the Disposition of Property Found on Public Space and Outreach to Displaced Persons states that:

DHS will coordinate outreach efforts at any location assessed to be an encampment to be cleaned. Other agencies will participate in the outreach efforts as necessary and offer relevant services to the individuals experiencing homelessness.

The purpose of the outreach is to attempt to address the needs of individuals occupying the identified site and to track the impact of cleanup efforts on their well-being. This includes completing a Service Prioritization Decision Assistance Tool (SPDAT) with any individuals at an

encampment site who has not yet completed one. If a housing placement is not secured prior to a site cleanup, outreach teams make every effort to bring people into shelter.

**Adult Protective Services (APS)**

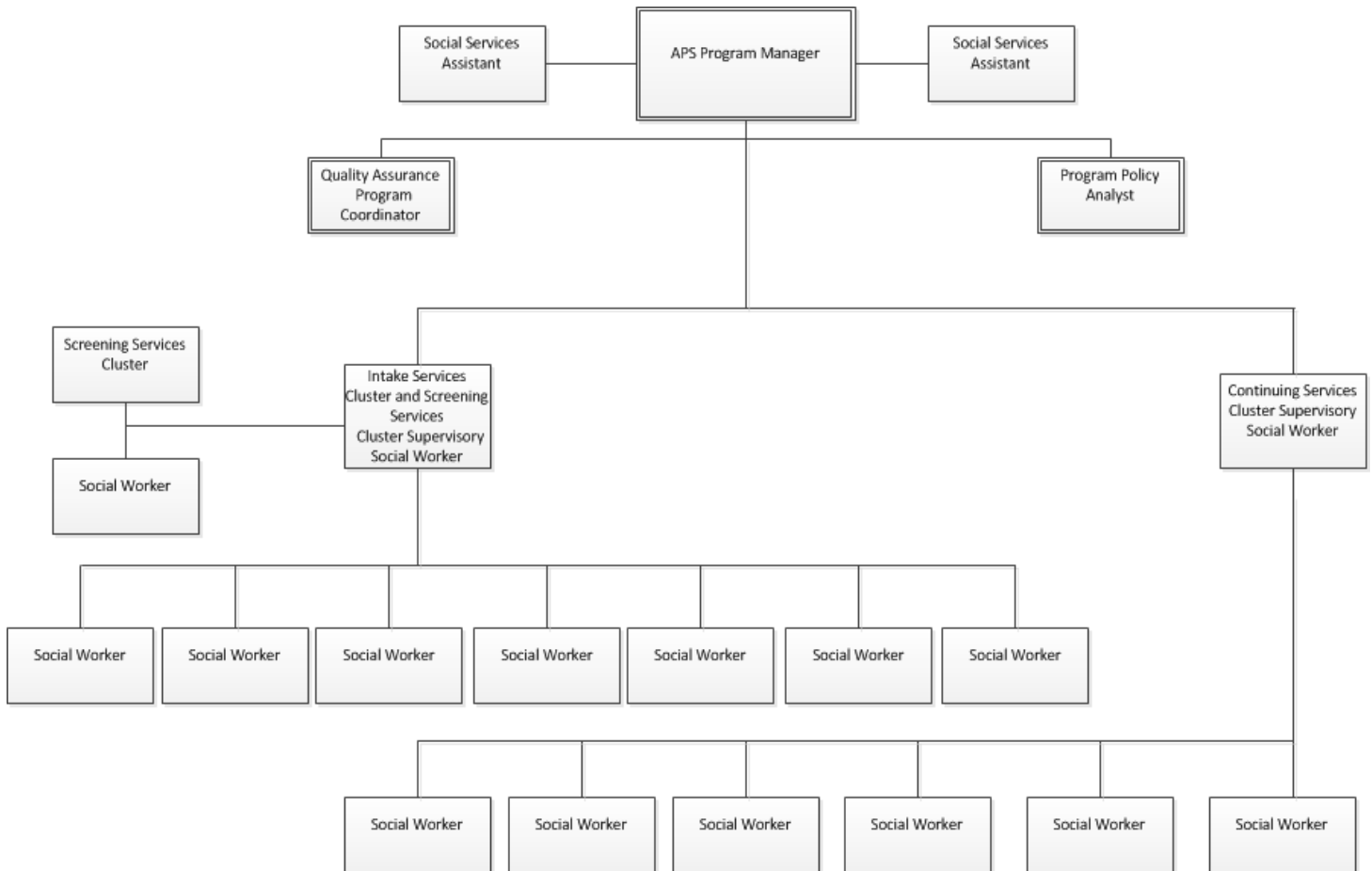
**93. Please provide a copy of the FY15 Adult Protective Services Annual Report.**

**RESPONSE:** DHS will submit a copy of this report to the Committee by March 1, 2016.

**94. Please provide a complete, up-to-date organizational chart for each division within APS including an explanation of the roles and responsibilities for each division and subdivision. Please provide an explanation of any organizational changes made.**

**RESPONSE:**

**Adult Protective Services  
Organizational Chart**



During FY15, APS continued to operate through the use of three service clusters: screening, intake and continuing services.

### **Screening Services Cluster**

The Screening Services Cluster is staffed by a licensed clinical social worker who receives referrals and makes a determination based on uniform criteria the extent to which the information provided by the referrer can be investigated as one of the four allegation types (i.e., abuse, neglect, self-neglect or exploitation).

### **Intake Services Cluster**

The primary purpose of the Intake Services Cluster (ISC) is to explore with the referrer the allegations being made, and determine whether abuse, neglect, self-neglect, or exploitation is occurring or has occurred, or if an emergency exists. Sufficient information is gathered to evaluate the concerns of the person making the report and to judge whether the report is valid. The intake social worker obtains as much of the following information as is known by the person making the report:

- The name and location of the adult and directions to the adult's place of residence;
- The names and relationships of other members in the household;
- The age of the adult;
- The alleged incapacity of the adult, if warranted;
- The name and address of the caregiver, if any;
- The circumstances surrounding the abuse, neglect, exploitation, or self-neglect and/or the reason(s) the reporter suspects the adult is at risk of abuse, neglect, exploitation, or self-neglect;
- Whether an emergency exists;
- The name of witnesses, including their telephone number(s) and addresses;
- Any information about previous abuse, neglect, exploitation, or self-neglect;
- The name, address, and relationship of any other person(s) or agencies that might be concerned or have knowledge of the adult;
- The living arrangement of the adult (e.g., they live alone, with their spouse, with the alleged perpetrator, etc.);
- The name, address, and telephone number of the person reporting if the reporter is willing to give this information;
- Source of the reporter's information;
- Any other information that might be helpful in establishing the cause of the suspected abuse, neglect, self-neglect, or exploitation or the risk of abuse, neglect, self-neglect, or exploitation;
- Permission to give the reporter's name and telephone number to the appropriate regulatory authority; and
- The adult's income and other resources, if known.

**Continuing Services Cluster**

The Continuing Services Cluster (CSC) investigates cases received from ISC that require additional attention. These cases remain within this cluster until the risks to the vulnerable adult have been mitigated or remedied.

To achieve this goal in the best interest of the client, CSC social workers may link the client with community agencies for assistance, provide homemaker services, place a client in a safe place, as well as provide food if the client is in need and/or lacks the ability to obtain food on their own. Social workers in this cluster are required to conduct follow-up assessments until the case is closed.

**95. Please include a list of the employees for each subdivision, by title. Please indicate the number of vacant positions. For vacant positions please identify how long the position has been vacant and the agency's plan to fill the position.**



**Department of Human Services**  
Responses to Fiscal Year 2015-2016 Performance Oversight Questions

**RESPONSE:** During FY15, APS had one (1) vacancy in the Intake Services Cluster for a Social Worker, DS 12 position.

<b>Vacant Positions</b>			
<b>Title of Position</b>	<b>Grade</b>	<b>Length of Vacancy</b>	<b>Plan to Fill Position</b>
<i>Office of the Chief</i>			
Chief, Ph.D., MBA	DS 14	Filled	N/A
Program/Policy Analyst	DS 12	Filled	N/A
Quality Assurance Program Coordinator (QPAC), Social Worker, LGSW	DS 12	Filled	N/A
Social Services Assistant	DS 8	Filled	N/A
Social Services Assistant	DS 8	Filled	N/A
<i>APS Intake Services and Screening Services</i>			
Supervisory Social Worker, LICSW	DS 13	Filled	N/A
Social Worker, LICSW	DS 12	Vacant – One Year	Working with HR to fill position asap.
Social Worker, LICSW	DS 12	Filled	N/A
Social Worker, LICSW	DS 12	Filled	N/A
Social Worker, LICSW	DS 12	Filled	N/A
Social Worker, LICSW	DS 12	Filled	N/A
Social Worker, LGSW	DS 11	Filled	N/A
Social Worker, LGSW	DS 11	Filled	N/A
Social Worker, LGSW	DS 11	Filled	N/A
<i>APS Continuing Services</i>			
Supervisory Social Worker, LICSW	DS 13	Filled	N/A
Social Worker, LICSW	DS 12	Filled	N/A
Social Worker, LICSW	DS 12	Filled	N/A
Social Worker, LICSW	DS 12	Filled	N/A
Social Worker, LICSW	DS 12	Filled	N/A
Social Worker, LGSW	DS11	Filled	N/A
Social Worker, LGSW	DS 11	Filled	N/A

**96. Please provide a chart showing APS’ approved budget and actual spending, by program, for FY15 and FY16, to date. Please explain any variance.**

**RESPONSE:**

**FY15 and FY 16 YTD Budget and Expenditures**

<b>Funding Source</b>	<b>FY15 Budget</b>	<b>FY15 Actual</b>	<b>FY16 Budget</b>	<b>FY16 YTD Expenditures</b>
Local	1,153,823.78	1,748,236.89	1,281,587.25	255,926.23
Federal	2,190,993.35	1,449,631.07	1,679,210.86	313,041.79
<b>Total</b>	<b>3,344,817.13</b>	<b>3,197,867.96</b>	<b>2,960,798.11</b>	<b>568,968.02</b>

The variance between FY15 and FY16 budgets is \$384,000. This reflects a salary increase of \$128,000, a \$408,000 decrease due to aligning FTEs to their functions and programs, and \$6,000 increase in fleet. Additionally, there was a \$110k reduction in federal carryover funds.

**97. Please provide a list and description of all services provided by APS? Please indicate the funding allocated to for each service in FY15 and FY 16. Please explain any variance.**

**RESPONSE:** APS provides service provision and legal intervention to residents who are in need, in accordance with the law.

*Service Provision*

When a referral made to APS is investigated and is substantiated, protective services are provided to the resident to help remediate risk and to assist clients with developing a safe long-term care plan. In those cases where the risk can be alleviated quickly with short-term case management or counseling services, APS will provide direct services to the client. Cases that are more complex and require longer-term intervention are referred to the APS Continuing Services Cluster (CSC).

While in CSC, social workers provide home visits, complete assessments to develop a case plan, determine what actions are necessary to protect the client, and provide case management and support services. A range of protective services are provided, including:

Direct Counseling: Direct counseling, both for the client and his or her family, was the service most often utilized in FY 15. Counseling includes:

- Financial counseling to help clients identify and protect resources;
- Counseling to help clients work through the decision-making process when facing placement in a long-term care facility;
- Family counseling to help clients and family members assume new roles; and
- Individual support counseling to help clients understand the options available for reducing the risk of abuse, neglect, exploitation, and self-neglect.

Home Visits/Case Management Services: A significant portion of the social work services provided directly for clients is conducted in the field during home and collateral visits. The purpose of these visits is to further investigate cases and provide case management and support services to remediate risk. Services are provided primarily by CSC social workers and include gathering information to assist clients in accessing services, providing counseling, meeting with family members, assessing the client's capacity, arranging for services, responding to emergency needs, assisting with medical appointments, making referrals, and monitoring the status of cases.

Homemaker Services: Homemaker services consist of personal care aides to assist clients with activities of daily living which can include bathing, dressing, cooking, and feeding. Homemaker services embrace the objective of protecting clients while maintaining them in the least restrictive environment. Every effort is made to keep clients in their homes. This service assist primary caretakers on a short-term basis while more permanent solutions are developed such as services provided through the Medicaid Waiver Program, arrangements with family members to assume additional responsibility for a family member, and/or long-term placement. In FY15, \$100,000 was appropriated for this service. However, because of need, APS spent \$494,755 for homemaker services. For FY16, \$500,000 has been allocated for this service.

Direct Emergency Services: When clients are at risk and without basic necessities, social workers provide direct services by providing or arranging for emergency food, medication, clothing, transportation, etc. These services are provided to address and mitigate any emergent needs or risks.

Psychological Assessments: For APS clients whose judgment appears to be impaired to the point where their decision-making capacity is hindered, psychological assessments are used as part of the documentation needed when APS petitions the court for guardianship and/or conservatorship for clients. In both FY15 and FY16, \$30,000 was allocated for these services.

Nurse Practitioner/Physician Assessments: In FY15, APS continued to use the services of nurse practitioners to conduct medical assessments in the homes of clients who were unable or unwilling to go to the doctor. These assessments assisted APS staff in assessing risk and obtaining testing such as the Purified Protein Derivative (PPD), a skin test to determine if an individual has ever come into contact with the bacteria that causes Tuberculosis, which is required for nursing home placement. In FY15, \$1,900 was allocated for this service. In FY16, level funding was appropriated for this service provision.

### **Legal Intervention**

Cases referred to court, reasons for referral, outcome, and associated costs.

Number of court cases: In FY15, there were a total of forty-two (42) petitions filed for guardianship or conservatorship for clients active in APS. Of that number, there were eight (8) emergency hearings.

Reasons for Referral:

- Clients who are referred to APS because they were potentially subjected to or at risk of abuse, neglect, or exploitation.
- Guardians were sought when clients lacked the capacity to make decisions about their own care, specifically as it relates to medical care.
- Conservators were sought when the clients had assets and/or property and were unable to manage their finances related to their lack of decision-making capacity.
- Cases were referred to the Probate Division of the Superior Court for the District of Columbia (Probate Court) for purposes of obtaining the appointment of a guardian or conservator primarily for clients with dementia or Alzheimer's disease who needed someone to make decisions for them.

Prior to scheduling a hearing, the Probate Court requires certain documentation to be included in each petition that is filed. The petition must include assessments completed by the APS social worker, a clinical psychologist, and the client's physician or medical staff at a hospital. The petition must also include the names and contact information for all interested parties.

Outcomes: All forty (40) of the petitions resulted in the appointment of a guardian and/or conservator by the Probate Court. The remaining two cases had different outcomes. One case was dismissed and the remaining case, the client passed away prior to the court hearing.

Associated Costs:

Costs associated with petitioning the court for a guardian or a conservator include:

- APS staff time to investigate the client's situation, obtain medical reports, consult with OAG, and prepare the petition. The costs associated with APS case management services are a part of the APS operating budget.
- Psychological evaluations at an average cost of \$300 per case when services are purchased.
- DHS renewed its Memorandum of Understanding (MOU) with the OAG for the representation of APS in all court cases seeking guardianship or conservatorship. The funding for the MOU was \$60,000 for FY15.
- A court-appointed examiner can cost \$75 per hour.
- A court-appointed visitor can cost \$85 per hour.
- The cost of a court-appointed guardian ad litem and attorney for the client is \$85 per hour for each.

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If a family member is appointed as the guardian, the family member is not paid. Guardians appointed from the District of Columbia Fiduciary Panel of the D.C. Bar are paid \$95 per hour by the court unless the client has the ability to pay. The fee could be higher if the client has sufficient assets which would allow him or her to pay the guardian, conservator or court appointed counsel.

On rare occasions, family members are appointed as conservators, but they must be bonded and most family members are unable to pay for bonding. In addition, there are conflict of interest concerns when family members are appointed to manage the client’s assets. Thus, family members are rarely appointed as the conservator.

**98. How many clients did you serve in FY15 and FY16, to date? Please provide a breakdown by age, ward, presenting issues, and services provided.**

**RESPONSE:** In FY15, APS conducted 921 case investigations. In FY16 YTD, APS has investigated 405 cases.

<b>FY16 YTD APS Case Investigation Data</b>							
Ward/Age	Unknown	18-59	60-69	70-79	80-89	90 and over	Totals
Unknown		5	2		1	1	9
1	2	7	7	7	5	1	29
2	2	3	5	8	6	5	29
3	3	2	3	8	11	4	31
4	3	9	11	18	23	8	72
5	5	20	11	11	25	9	81
6	3	10	5	9	11	4	42
7	1	16	12	4	11		44
8	7	25	12	13	11		68
<b>Total</b>	<b>26</b>	<b>97</b>	<b>68</b>	<b>78</b>	<b>104</b>	<b>32</b>	<b>405</b>

*\*\*\* APS data base --26 cases that appear in the "Unknown" column reflect those cases without age reported. This can occur for cases where APS is unable to see the client or there is a refusal to provide the age information.*

**Age Category by Ward**

<b>Ward/Age</b>	<b>18-59</b>	<b>60-69</b>	<b>70-79</b>	<b>80-89</b>	<b>90 and over</b>	<b>Totals</b>
<b>1</b>	8	18	9	13	20	68
<b>2</b>	9	14	18	11	9	61
<b>3</b>	23	19	15	2	4	63
<b>4</b>	19	44	29	16	24	132
<b>5</b>	11	43	29	33	29	145
<b>6</b>	14	16	16	17	12	75
<b>7</b>	4	25	24	26	37	116
<b>8</b>	0	27	27	28	30	112
<b>Total</b>	<b>88</b>	<b>206</b>	<b>167</b>	<b>146</b>	<b>165</b>	<b>772</b>

**99. Are workers within Adult Protective Services designated as “officer/agents” under the mental health laws, with the authority to submit an FD-12, requesting emergency detention of the person?**

**RESPONSE:** APS maintains one Clinical Social Worker who is trained as an officer/agent with the authority to submit an FD-12.

**100. Please describe your typical course of action once someone makes contact with your office about an adult who may be in need of hoarding services.**

**a. What services are provided to address this issue?**

**RESPONSE:** APS collaborates with the DC Office on Aging, Senior Service Network, and other external partners to assess the severity and relate resources to address the situation(s), which may include bedbug and vermin extermination. Further, in an effort to assist clients in maintaining their residence, after the hoarding has been abated, APS will make a referral for case management by a social worker in the community.

DHS will also coordinate with DBH if there is a known or suspected mental or behavioral health issues based on the psychological assessment.

**b. Is there a written protocol in place? If yes, please provide a copy of the protocol.**

**RESPONSE:** APS does not have an established protocol for addressing hoarding cases, however, the Department is developing a protocol to amend the Policy and Procedures Manual with regard to hoarding cases.

**Economic Security Administration (ESA)**

**101. Please provide the FY15 (approved and actual) and FY16 budgets for all ESA programs. Please indicate and explain any variance. How many clients were served in each program?**

**RESPONSE:** Please see attachment #101 Budget vs. Actual for ESA.

**Temporary Assistance for Needy Families (TANF)**

**102. Please provide a breakdown of the amount budgeted in FY15 and FY 16 budgets for TANF. Please indicate and explain any variance. Please identify funding sources.**

**RESPONSE:**

FUND	FY15 TANF BUDGET	FY16 TANF BUDGET	VARIANCE	EXPLANATION OF VARIANCE
LOCAL	61,271,285	53,164,590	(8,106,695)	The net effect of the removal of one time funds provided in FY 16 (\$6.7M) reduction for customers over 60Month. \$5M was restored. (\$2.3M) shifted to cover fixed costs.
FEDERAL	113,199,764	125,278,926	12,278,162	Projected TANF Carryover
INTRA-DISTRICT	10,000,000	1,300,000	(8,700,000)	Net decrease due to the elimination of the MOU between DHS and CFSA
<b>TANF Budget:</b>	<b>184,471,049</b>	<b>179,743,516</b>	<b>(4,727,533)</b>	

**103. For FY16, \$42 million has been allocated for the TANF Employment Program (TEP). Please provide a breakdown of how this funding will be utilized.**

**RESPONSE:**

<b>FY16 Breakdown of \$42 Million -- TANF Employment Program (TEP)</b>	
TANF Employment Contracts (Option Years 3 and 4)	\$35M
OCTO Support and Technical Support	\$213K
DBH-MOU - Addiction & Prevention Services	\$650K
DBH-MOU - Co-location of staff	\$39K
DBH-MOU-12 Cities	\$1M
DOES-MOU - LEAP	\$1M
Capital Area Asset Builders Grant (CABB)	\$250K
Other TANF Expansion/Capacity Availability	\$3.5M
Total	\$42M

**104. For each TEP provider please provide, by service category: caseload size; contract amount; and the actual number of customers being served.**

**RESPONSE:** Please see attachment #104 TEP Providers

**105. How many families have been on the TANF caseload for 60 months or more and are slated to be cut off of benefits in October 2016?**

**RESPONSE:** As of January 2016, there were a total of 6,595 families whose TANF participation will be 60 months or greater on October 1, 2016.



- a. Please identify the number of children that will be affected, by age within this population.**

**RESPONSE:**

<b>Number of Children in Households whose TANF participation will be greater than 60 months on October 1, 2016.</b>	
Age	Number of Children
0-3	2,206
4-9	6,199
10-13	2,806
14-18	2,397
<b>TOTAL</b>	<b>13,608</b>

- b. Please identify the number of families in this population that are employed; employed and making a living wage; fully participating, partially participating, and not participating in meeting the goals of their IRP.**

**RESPONSE:** Currently, the number of families in this population includes customers who have been on TANF for 60 months or more or will reach 60 months by October 1, 2016. Additionally, this population includes customers served by the employment vendors, DHS Office of Work Opportunity (OWO), and the University of the District of Columbia Paving Access Trails For Higher Security (PATHS). The total caseload size varies each month.

Engagement level is based on the customer's required work hours (20, 30, or 35 hours) which vary depending on household factors. Fully participating means customer is working the full number of required work hours.

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<b>Participation and Employment Information for 60 + month TANF Participants</b>		
Status	Quarter 4 FY15	Percentage
Employed	438	7%
Of those Employed Earning a Living Wage	113	26%
Fully Participating*	453	33%
Participating*	223	17%
Not Participating*	670	50%
<b>Total</b>	<b>1,351</b>	<b>100%</b>

\*Total does not incorporate Employed or Earning a Living Wage.

- c. **Please identify the number of families in this population that have been referred to a job placement vendor; a work readiness vendor; enrolled into POWER; referred to a barrier removal and work support provider; and enrolled in an education/training program.**

**RESPONSE:**

<b>TEP Family Data (Effective January, 2016)</b>	
Job Placement	1,030
Work Readiness	2,014
Power	555
Barrier Removal/ Work Support Provider	957
Education/Training Program	225
<b>Total</b>	<b>4,781</b>

**106. Please respond to the following questions regarding the Home Visitor Program for FY15 and FY16, to date.**

**a. Please provide the list of grantees for the program and funding allocated for each.**

**RESPONSE:**

<b>Home Visitor Program – Grantees and Funding</b>			
<b>FY15</b>		<b>FY16</b>	
Catholic Charities	\$350,000	Catholic Charities	\$350,000
East River Family	\$200,000	East River Family	\$250,000
Southeast Children’s	\$250,000	Southeast Children’s	\$250,000
Union Temple Aya Program	\$400,000	Union Temple Aya Program	\$375,000
		Community Connections	\$125,000
<b>Total:</b>	<b>\$1,200,000</b>	<b>Total:</b>	<b>\$1,350,000</b>

**Please identify the funding source.**

**RESPONSE:** The funding source is Federal TANF Grant.

**b. How many customers have been referred to each grantee?**

**RESPONSE:**

<b>Home Visitor Program – Customer Referred</b>			
<b>FY15</b>		<b>FY16 YTD</b>	
Catholic Charities	727	Catholic Charities	243
East River Family	726	Community Connections	65
Southeast Children’s	781	East River Family	135
Union Temple Aya Program	603	Southeast Children’s	243
		Union Temple Aya Program	175
<b>Total</b>	<b>2,837</b>	<b>Total</b>	<b>861</b>

**c. How many 60 months+ customers have been referred to each grantee?**

**RESPONSE:**

<b>FY15 -- 60+ Month Customers Referred to Each Grantee</b>	
Grantee	Number of Referrals
Catholic Charities – Failed to Participate	378
East River Family Collab. – Failed to Participate	63
Southeast Children’s Fund – Failed to Participate	57
Union Temple – Failed to Participate	325
<b>Total</b>	<b>823</b>

<b>FY16 YTD -- 60+ Month Customers Referred to Each Grantee</b>	
Grantee	Number of Referrals
Catholic Charities – Failed to Participate	243
East River Family Collab. – Failed to Participate	134
Southeast Children’s Fund – Failed to Participate	243
Union Temple – Failed to Participate	175
Community Connections	65
<b>Total</b>	<b>860</b>

**d. What have been the outcomes for this effort to engage customers? Please indicate outcomes specifically for 60 months+ customers.**

**RESPONSE:** The Home Visitor program, one of several initiatives to engage 60+ month TANF participants in employment and education services, successfully reengaged 50 percent (50%) of its caseload with Office of Work Opportunity (OWO) services. Other initiatives that are part of this targeted efforts, include:

- 1) Office of Work Opportunity Staff conducted a comprehensive case review of 2,693 60 month TANF participants on September.
- 2) Frequent formal communication with 60+ month TANF participants, which has included mailings, TANF Opportunity Open Houses at Service Centers, and outreach to family emergency housing programs and other residential facilities where 60+ month TANF participants live and/or spend time.
- 3) Door to door outreach effort to all affected families.

All of these efforts are in addition to the significant investment and enhancements to the TANF program over the last four (4) years. Already, each family has received a personalized assessment and orientation – as well as referrals to TEP providers and in many cases home visits. Each family has been afforded multiple meaningful opportunities to engage.

**107. Please provide the TANF Employment Program 3<sup>rd</sup> Quarter Report.**

**RESPONSE:** Please see attachment #107 TANF Quarterly Report.

**108. How many families are waiting to receive services from a Work Readiness vendor? For a Job Placement Vendor? What is the average wait time?**

**RESPONSE:** There are zero (0) families waiting to receive services. In FY15, DHS worked diligently to eliminate wait times of all TEP provider assignments.

**109. How many referrals were made to the domestic violence vendor for family violence option screening during FY15? For FY16, to date?**

**RESPONSE:** In FY15, 400 referrals were made to a domestic violence service provider; in FY16 year to date, there have been 42 referrals.

**a. How many households received the Family Violence Option for FY15 and FY16, to date?**

**RESPONSE:** In FY15, 369 households received the Family Violence Option. In FY16 year to date, 42 families received the Family Violence Option.

**b. Please indicate how many families applied for but were denied the Family Violence Option. Please indicate the reasons for denial.**

**RESPONSE:** There were no denials for service in FY16.

**110. Please respond to the following by POWER qualification category, for FY15 and FY16, to date.**

**a. How many households were referred to POWER?**

**RESPONSE:** In FY15, 506 households were referred to POWER; 183 families have been referred to POWER in FY16 year to date.

**b. How many POWER applications are pending?**

**RESPONSE:** There are currently 37 POWER applications pending.

**c. How many households applied for but were denied POWER? Please indicate the reasons for denial.**

**RESPONSE:** In FY15, 112 applications were found not eligible for POWER. In FY16 YTD, thirteen (13) applications have been determined not eligible for POWER.

**d. What is the average length of time for POWER participation?**

**RESPONSE:** The average length of time for POWER participation is four (4) years.

**e. How many of these households have received TANF for 60 months or more?**

**RESPONSE:** There are 539 POWER customers who have received 60 months or more of TANF benefits. A household's time in POWER does not count against their time on TANF.

**111. Has anyone been removed from POWER for failure to recertify? If yes, how many of them have been reinstated?**

**RESPONSE:** In FY15, 178 customers did not recertify but were later reinstated; In FY16 year to date, thirty-seven (37) customers did not recertify and have since been reinstated.

**112. What percentage of POWER recipients have pending SSI and/or SSDI applications? How many have been referred to SOAR for assistance?**

**RESPONSE:** Sixty-six percent (66%) of POWER customers have pending SSI and or SSDI applications. 150 customers have submitted applications using SOAR in the course of the process.

**Interim Disability Assistance (IDA)**

**113. Please provide breakdown for FY15 and FY16, to date, of the following:**

- a. Number of clients receiving IDA;
- b. Number of IDA applications received;
- c. Number of applications approved; and
- d. Number of applications denied and the reasons for denial.

**RESPONSE:**

<b>Interim Disability Assistance -- Breakdown</b>		
Data Point	FY15	FY16 - YTD
Average number of clients receiving IDA	1074	1076
Total number of IDA applications received	2472	550
Total number of applications approved	672	120
Total number of applications denied	2208	605

*\*Information as of December 2015*

There are many reasons why households may not be found eligible for Interim Disability Assistance (IDA), including: No Active Claim from the Social Security Administration (SSA), no residence (not a DC resident or unable to verify residence), and Cannot Determine Disable by MRT. Additionally, eligibility can change based on new information and documentation. IDA caseload is also capped by funding (*see Question 114*).

**114. Is there a waiting list for IDA assistance? If yes, how many individuals are on the waiting list? How long has each individual been on the waiting list?**

**RESPONSE:** There are currently 277 customers on the waitlist, and the average wait time is four (4) to six (6) months. Customers are approved off the waitlist as a spot opens up. The caseload is capped based upon funding.

**115. Provide the amount of funding allocated to IDA in FY15 and FY16, to date, by funding source. Please explain any variance.**

**RESPONSE:**

<b>IDA – FY15 and FY16 Funding Allocations</b>								
FY15				FY16 - Effective January 2016			Local Variance	Explanation of Local Variance
Local	O-Type	Total		Local	O-Type	Total		
\$2,540,457	\$1,000,000	\$3,540,457		\$2,520,003	\$1,000,000	\$3,520,003	-20,454	A vacancy savings applied

**ESA Service Centers**

**116. What is the average amount of time individuals must wait to be seen at each ESA service center? How has this time changed from FY14?**

**RESPONSE:**

Service	FY14	FY15	FY16 -Effective December, 2015	Change
645 H St	60	70	68	+8
Anacostia	55	43	43	-12
Congress Heights	40	33	49	+9
Fort Davis	59	39	42	-17
Taylor St	66	43	32	-34
Average	56	44	44	-12

*\*Time denoted in minutes*

**117. Please provide a status update on the initiatives DHS has and plans to implement in FY16 to improve the customer service experience in service centers. Please provide a timeline for implementation of each initiative. How do you plan to measure the effectiveness of these initiatives once implemented?**

**RESPONSE:** DHS is working on several initiatives to improve the customer experience while at our service centers. The Business Process Re-engineering initiative, which we expect to have a significant positive impact on customer experience, is detailed in *Question 118*.

DHS is providing a clear avenue for customers to file complaints and raise concerns at ESA Service Centers. DHS created signage for every Service Center with clear information on how to file a complaint or raise concerns. Additionally, the main number for the Economic Security Administration is (202) 698-3900.

DHS is improving customer service through staff training. DHS continues to provide customer service training which includes a scenario based training curriculum. The customer service training will be modified to include improvement of interviewing techniques by making customers feel more comfortable during a time when they are in need of services. DHS expanded our secret shopper program to test our systems and identify areas of improvement.

DHS is expanding the number of self-help stations. Some service centers now have self-help areas where customers can access DC Health Link and apply for Medicaid. The self-help area also has a scanner, printer a roaming staff to assist customers as needed.



DHS is improving Service Center Management and Accountability. Each service center has one manager who is responsible for the operation of that service center. DHS has implemented a new, rigorous management pipeline to foster more effective communication between the administration and the service centers, improve collaboration and team problem solving across service centers, and achieve consistency and standards of service.

There is currently a self-registration pilot at each service center which includes a kiosk and allows customers to self-register their name and purpose of visit. After self-registering, the customer is assigned a number and a ticket is printed. This process allows customers to skip the long line to the front desk for check in. The call center queuing system pilot was launched in November 2015 with great initial results, and reduced wait times for service. The Interactive Voice Response (IVR) system is currently offered in English, with Spanish and Amharic set to be added during IVR's official launch in Spring 2016. The IVR system will reduce the amount of customers who would normally visit a service center for simple information regarding their case.

**118. DHS has indicated plans to engage a contractor to review, analyze, and recommend business process changes to improve customer experience at the service centers, minimize wait times, and improve program integrity and performance.**

**a. Where is the agency in the process of completing this business process analysis and redesign?**

**RESPONSE:** Change & Innovation Agency was awarded the Business Process Reengineering Services contract on November 24, 2015. The Contractor will use evidence based solutions in order to improve efficiencies in the service centers with a specific focus on improving customer access, increasing timeliness, and reducing error rates. The contractor will coach and mentor staff in using new methodologies, policies, reports and tools to improve service delivery. DHS expects the reengineering project to be fully implemented by October 2016.

**b. Please identify the contractor who is conducting the analysis; the total amount of the contract; and term period of the contract.**

**RESPONSE:** The Contractor selected was Change & Innovation Agency (CIA). The total amount for the contract awarded to Change & Innovation Agency is \$975,000. The term of the contract is for a period of three months, with one seven-month option year.

**c. Will recommendations made by the contractor be shared with the Committee?**

**RESPONSE:** Yes, DHS will provide a copy of the recommendation to the Committee.

**Supplemental Nutrition Assistance Program (SNAP)**

**119. Please provide the following characteristics for SNAP households for FY15 and FY16, year to date:**

**a. Number of SNAP households;**

**RESPONSE:**

<b>SNAP Households</b>	
Fiscal Year	Household
FY 15	77,081
FY16*	76,980

*\*FY16 reflects data retrieved in November of 2015*

**b. Average size of SNAP households;**

**RESPONSE:** The average size of SNAP households is 1.7 individuals. There are 76,980 households with 134,275 recipients.

**c. Number of individual seniors receiving SNAP;**

**RESPONSE:**

<b>Individual Seniors Receiving SNAP</b>	
Fiscal Year	Seniors
FY15	14,721
FY16*	15,251

*\*FY16 reflects data retrieved in November of 2015*

**d. Number of individual children in SNAP households; and**

**RESPONSE:**

<b>Individual Children in SNAP</b>	
Fiscal Year	Children in Households
FY15	48,821
FY16*	48,769

*\*FY16 reflects data retrieved in November of 2015*

**e. Number of SNAP households by ward.**

**RESPONSE:**

<b>SNAP Households by Ward</b>		
<b>Ward</b>	<b>FY15</b>	<b>FY16*</b>
1	5,939	5,857
2	8,676	8,463
3	532	548
4	8,485	8,217
5	10,418	10,165
6	9,830	9,658
7	15,864	15,602
8	17,670	17,407

*\*FY16 reflects data retrieved in December of 2015*

**120. Please provide a status update on implementation of the SNAP Expansion Act. Please include a timeline for implementation.**

**RESPONSE:** The SNAP Expansion Act was fully implemented in October of 2015. A copy of the Act is attached as Question #120.