

Need for Housing Among Individuals with Access and Functional Needs in Hawai'i 2019 - 2020

July 2020

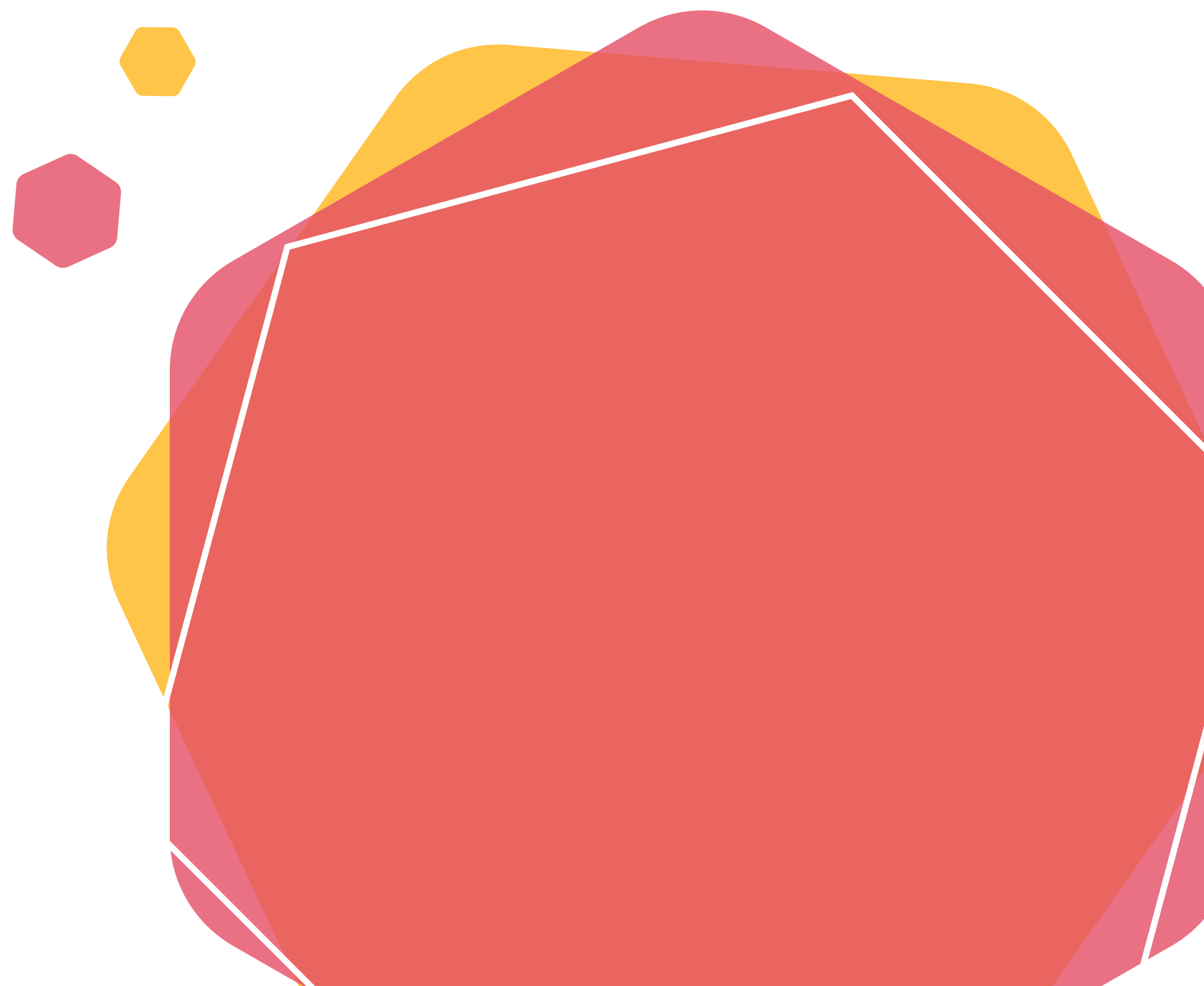


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Report Highlights

Findings

- 51% of agencies contacted (37 of 72) participated in the study, either by providing housing needs data or information on how housing need is tracked by their agency
- 37,031 individuals with access and functional needs were reported to be in need of housing, based on information received from 30 agencies
- The majority in need of housing were individuals under 62 years of age (89%), on the island of Oahu (81%), currently homeless or in an emergency shelter (55%)
- Individuals who were homeless were reported most frequently as the population in need of housing (56%), followed by individuals with physical or severe mental disabilities (28%)
- Agencies have varying data systems and capacity to track housing need information
- Agency collaborations and uniform tracking systems exist for some target populations

Limitations & Lessons Learned

- Many agencies do not collect or track housing need data or at the level of detail that was requested by UH
- The ability to contribute to a common housing need monitoring and forecasting system may differ across agencies and Act 039 (2018) target populations
- Lessons learned focus on working effectively with agencies to guide future implementation of Act 039.

Policy Recommendations

- Provide clarity on the purpose and practicality of developing a new monitoring and forecasting system
- Convene a work group with representatives from key sectors
- Look beyond our state and seek best practices from other states or cities
- Expand target population groups and craft specific definitions and approaches

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Background & Approach

background
background
background

In response to Act 039 (2018), the Hawai'i Housing Finance and Development Corporation (HHFDC) contracted with the University of Hawai'i at Mānoa's Center on Disability Studies (UH) to conduct a study of current housing waitlists in the state and counties and develop a housing report to quantify the need for housing among individuals with access and functional needs. See Appendix A for Act 039 (2018).

The Act requested information on 4 areas for people in need of housing who have access and functional needs:

1. Information on **target populations**, including frail elderly individuals, individuals with physical or severe mental disabilities, individuals transitioning from incarceration, emancipated foster youth, individuals with an alcohol or drug addiction, individuals with HIV/AIDS, and victims of domestic violence, who are in need of housing;
2. Identify and inventory the **support services**;
3. Develop an **informational system** to forecast and monitor the number of individuals seeking affordable housing;
4. Develop **effective strategies** for individuals to access and retain affordable housing in independent settings.

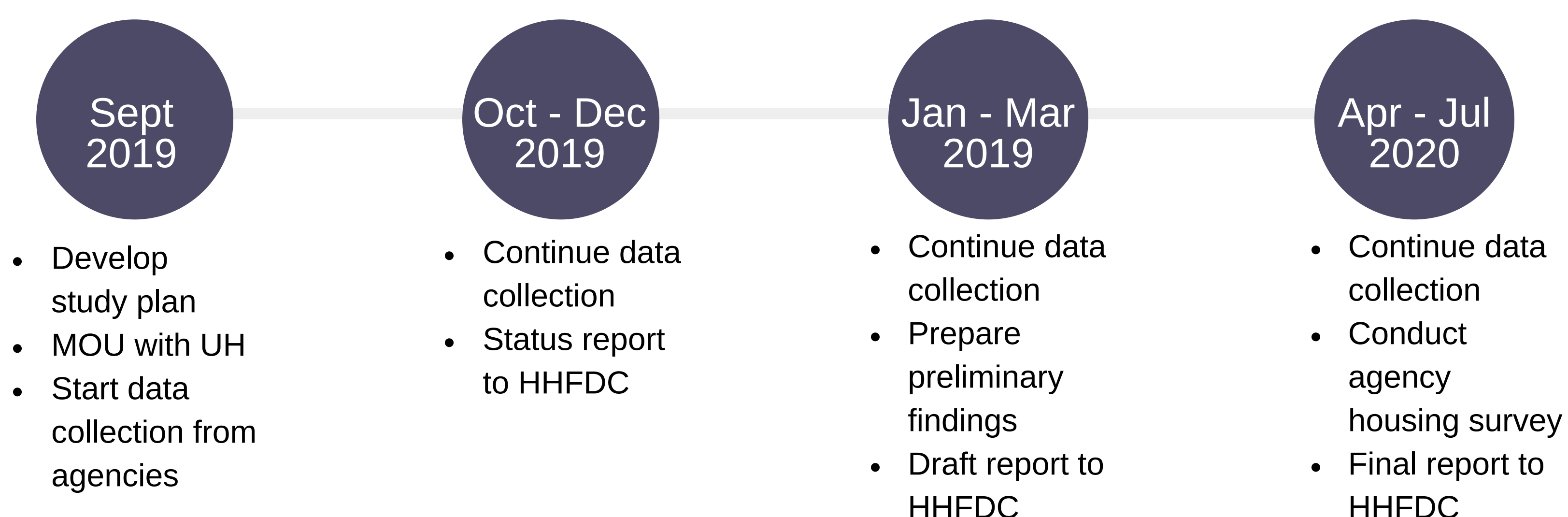
THIS DOCUMENT

This report summarizes a September 2019 - June 2020 study conducted by UH for HHFDC. The report is intended to assist HHFDC in their collaborations with agencies working with the target populations described in Act 039. In agreement with HHFDC, this report focuses on two specific areas of the Act: 1. information on target populations and 2. recommendations on information system development.

TIMELINE

An MOU between HHFDC and UH was executed on September 12, 2019, and a plan of action was developed to better understand the housing needs of the target populations identified by the Act and agency level ability to contribute to a common monitoring and forecasting system. UH sent a round of emails to an initial list of agencies. From September through December 2019, UH collected housing need tracking sheets and feedback from agencies, followed up with agencies by sending another round of emails, and made phone calls to agencies. A status report was sent to HHFDC in December. In January and February 2020, UH conducted additional follow up with agencies. Preliminary study findings were summarized, and recommendations were developed for a March draft report to HHFDC. After HHFDC provided feedback to CDS on the draft report, in April a second round of data requests were initiated to an additional list of agencies. An agency housing survey was also conducted. In May and June, follow up emails and phone calls were made to capture as much housing needs information as possible for inclusion in this report. Final findings and recommendations are presented in this July report to HHFDC. More details on methods are provided in the next section.

Timeline



Background & Approach

METHODS

A comprehensive list of agencies was developed to represent the target populations identified in the Act. "Homeless" was added as a target population group based on state housing initiatives with a priority to identify and serve the homeless population. Agencies were identified using the snowball sampling method. An initial agency list was developed, then the initial agencies helped to identify additions to the agency list until the responses were redundant with the current updated list. See Appendix D for the final list of agencies contacted during the study.



HOUSING NEED TRACKING SHEET

Target population data

Geography

Specific housing needs

Barriers

Housing supports



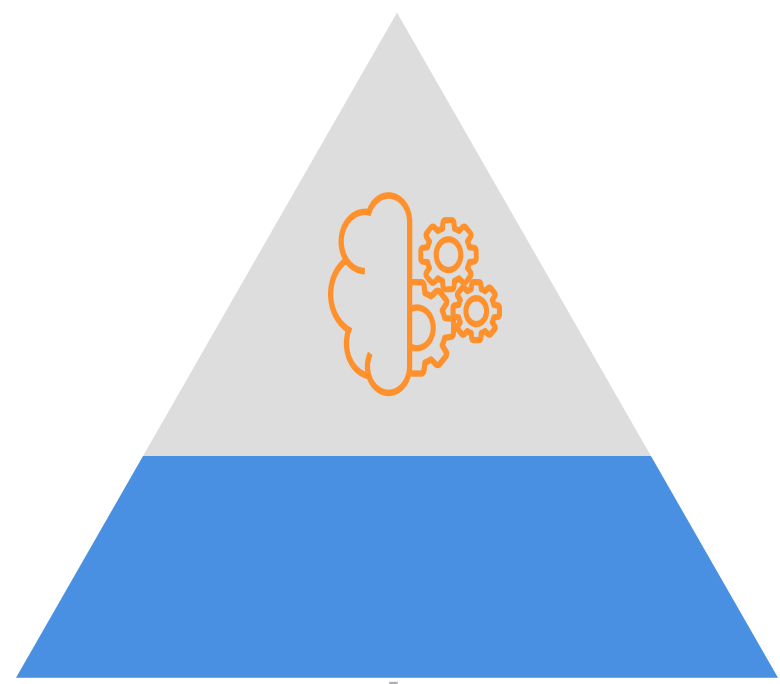
AGENCY HOUSING SURVEY

How agencies track housing needs

Specific housing programs

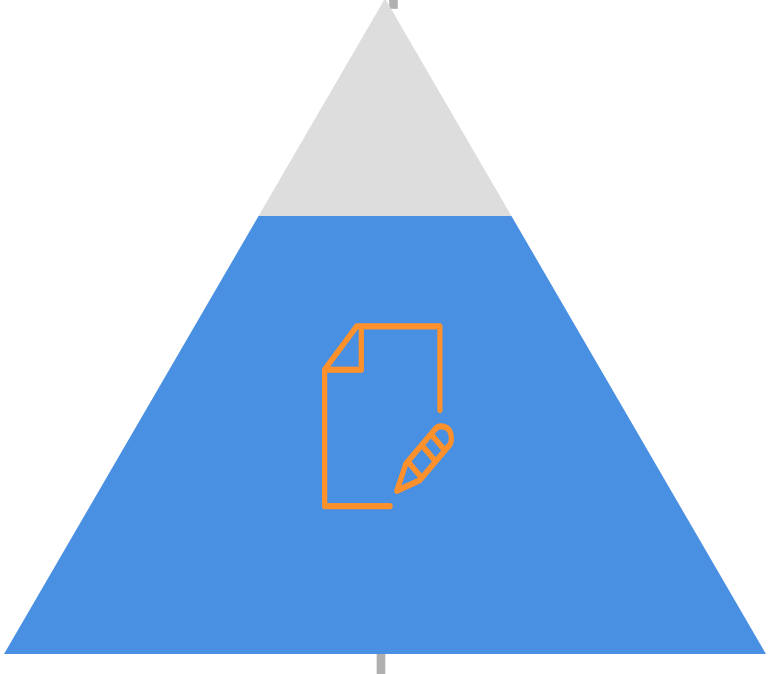
Interagency groups or collaborations

Internal protocols were developed to standardize data collection and provide consistent information to the agencies about the study. A housing tracking sheet was developed by UH to collect information about housing needs of individuals served by the agencies contacted. This tracking sheet was reviewed by a cross section of agency key stakeholders for feedback before sending out to all the agencies in an email request. Data tracking instruments were also developed to log responses. An initial email was sent to the agencies with information about Act 039, instructions on how to complete the tracking sheet, time frames for providing the data requested, and definitions of the target population groups. Each agency was asked to complete a tracking sheet about individuals they serve who needed housing in 2019 and who were not included in the Vulnerability Index Service Prioritization Decision Assistance Tool (VISPDAT), a triage tool designed to be used by community providers to quickly assess the health and social needs of individuals who are homeless and match them with the appropriate housing intervention. This omission of VISPDAT data was to reduce the duplication of data for homeless individuals. Follow up contacts were made to gather as much information as possible. See Appendix B for email templates used, data requested through the tracking sheet and agency survey, and target population definitions.



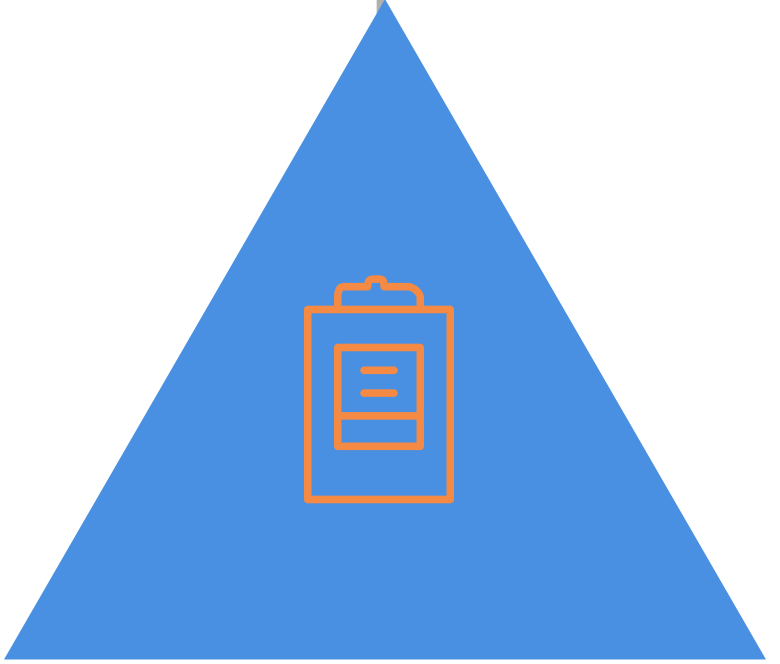
PLAN PLAN TO CONDUCT STUDY

- Collect information from agencies to determine:
 - What can be provided on short notice?
 - What estimates can be derived?
- Identify agency point persons to assist with:
 - Future outreach
 - Future implementation of Act 039



PLAN IDENTIFY AGENCIES USING SNOWBALL SAMPLING

- Develop initial agency list
- Initial agencies help to identify additions to the list
- Additional agencies help to identify more agencies to add
- Continue until responses are redundant with current list



PLAN DEVELOP PROTOCOLS

- Standardize data collection
 - Develop tracking sheet
 - Develop tracking instruments
- Provide consistent information to agencies
 - Email templates
 - Regular follow up

Background & Approach

51% of agencies contacted (37 of 72) participated in the study, either by providing housing needs data or information on how housing need is tracked by their agency

IMPLEMENTATION

The first part of study implementation was completed between September 2019 and February 2020 and focused on understanding the statewide housing needs of the target populations identified under the study. Information on individuals in need of housing was requested from 32 agencies. Using 3 rounds of inquiry to agencies, 70 emails and 33 calls were made in an attempt to gather as much housing needs data as possible on the target populations. The returned data from agencies included completed housing needs tracking sheets, with comprehensive individual information, or summarized aggregate information provided by alternate methods (over phone or email) when person-level data was not provided. Other data recorded included reactions and explanations from the responding agencies.

The second part of study implementation was completed between April and June 2020. These activities included requesting housing needs information from an additional 40 agencies and requesting completion of an agency housing survey from from all 72 agencies contacted. The agency housing survey focused on the Act 039 area of information systems. Data collection methods for the second part of the study were consistent with previous methods and consisted of 112 emails and 14 calls being made to agencies in order to gather as much housing needs information as possible from agencies.

In total, over the two parts of this study, 72 agencies were contacted and 37 (51%) participated. More than half of the participating agencies (20 of 37, 54%) participated in both data collection activities by providing data on the need for housing of individuals served by the agency and completing the agency housing survey (Appendix D). Data collected from the 37 participating agencies was coded and analyzed. Study findings are presented in the next section.

IMPLEMENTATION





Findings

The findings of this report are divided into two parts. The first part presents findings from the housing need tracking sheet. The second part presents findings from the agency housing survey.

Using the housing need tracking sheet or other method, 30 agencies provided housing needs data to UH. Agencies reported housing need information either by de-identified person-level entries in the housing need tracking sheet or by aggregate counts. As mentioned earlier, UH requested agencies omit reporting data for individuals already entered in the VISPDAT system to reduce duplicate counts. However, the same individual may still be represented in multiple instances of reported need for two main reasons: (1) the same individual may have been reported by more than one agency, and (2) many agencies reported summary data for each study topic which likely resulted in the same individual being counted multiple times overall. An unduplicated estimate was not calculated due to limited information on the extent of the overlap.

Main Finding
Agencies reported 37,031 persons with access and functional needs in need of housing

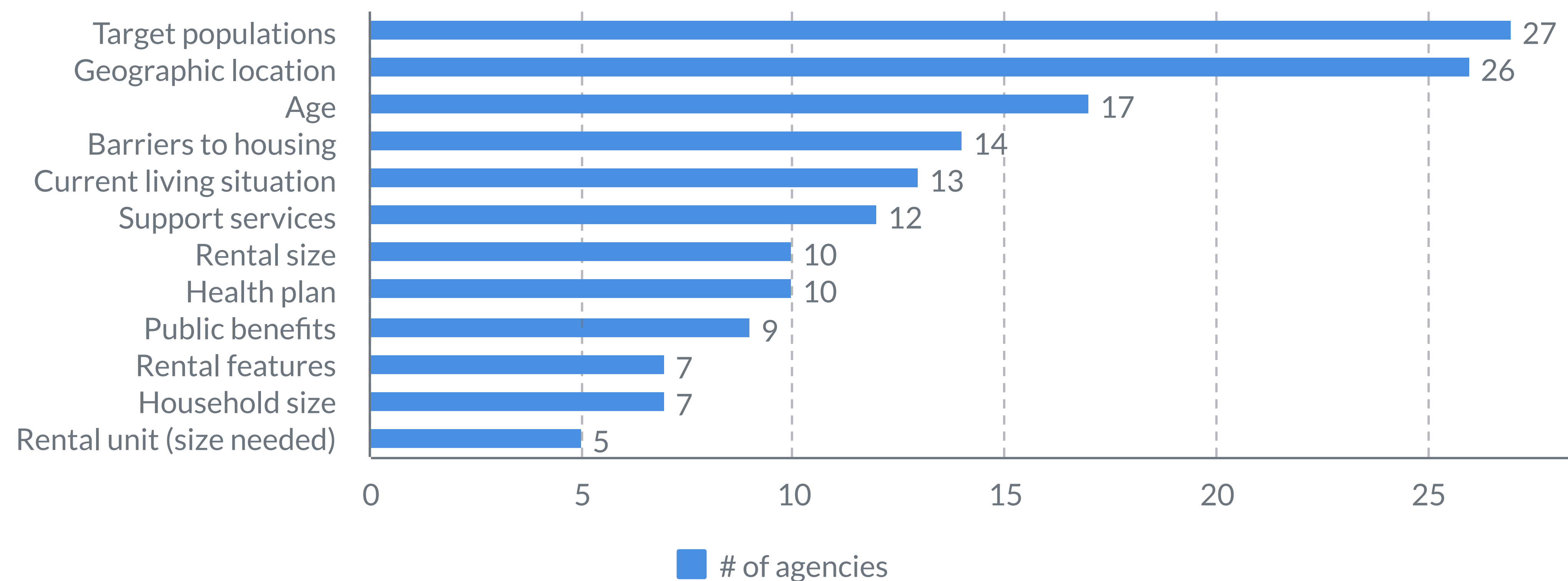
Target Populations

- Frail elderly individuals
- Individuals with physical or severe mental disabilities
- Individuals transitioning from incarceration
- Emancipated foster youth
- Individuals with an alcohol or drug addiction
- Individuals with HIV/AIDS
- Victims of domestic violence,
- Individuals who are homeless

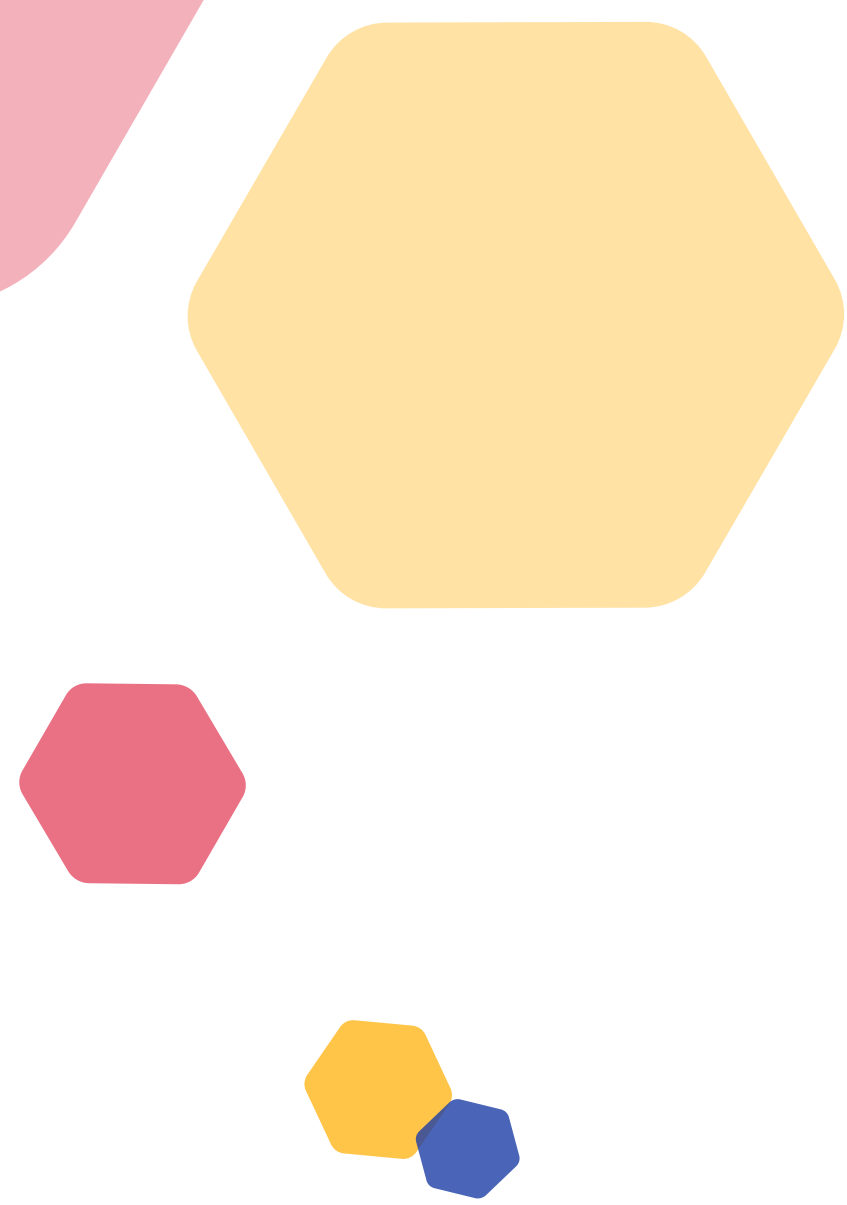
Among the 30 agencies, almost all (n=27, 90%) were able to provide housing need data in relation to at least one target population (Appendix D). Most agencies (n=26, 87%) were able to provide information about the geographic location of need. Over half of agencies (n=17, 57%) were able to provide information on the age of the individuals in need of housing. The number of agencies providing data under each housing need tracking sheet topic is provided in the chart below. Reasons complete information may not have been provided include (a) the agency does not collect the information in a standardized field or at all, and (b) confidentiality concerns. See Appendix B for a list of housing need information requested.

A one-page summary for each of the housing need tracking sheet topics shown in the chart below follows this main findings page.

Number of Agencies Providing Requested Data by Topic



Findings



TARGET POPULATIONS

- Includes data from 27 of 30 agencies
- 41,025 reports of individuals by target population group

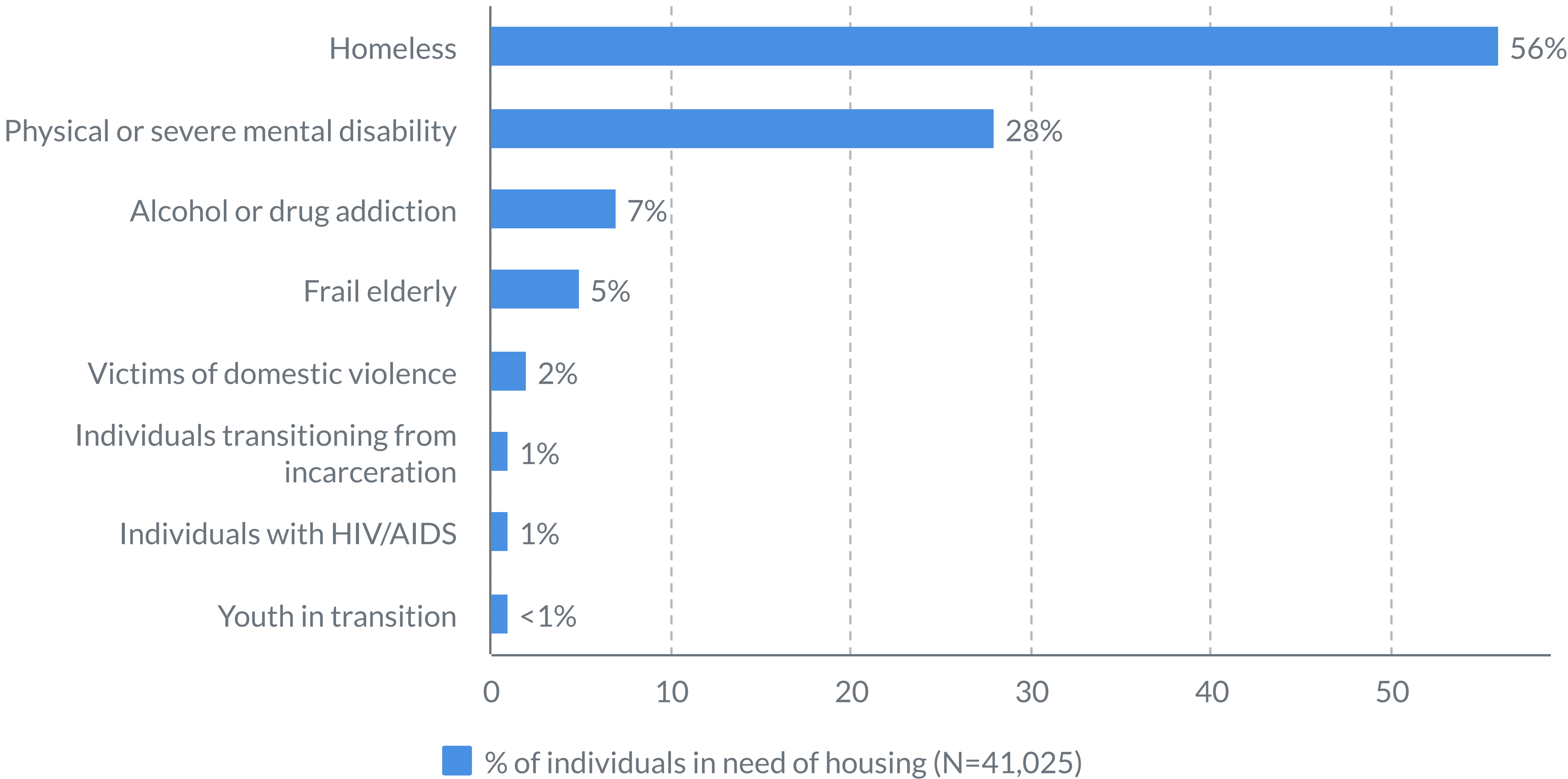
Note: An individual may be counted in more than one target population group

— Act 039 covers 7 target populations. An additional category, homeless, was added during study planning for a total of 8 populations covered under data collection.

Target Populations
Individuals who are homeless were reported most frequently

Individuals who were homeless were reported most frequently as the population in need of housing, with **56% of the 41,025 reports by target population (n=23,021) falling in this category.** Individuals with physical or severe mental disability were reported as the second largest target population in need of housing accounting for 28% of the housing need reported (n=11,397). Those with alcohol or drug addiction accounted for 7% of the reports (n=2,974), frail elderly 5% (n=1,932), victims of domestic violence 2% (n=736), individuals transitioning from incarceration (n=499) and individuals with HIV/AIDS (n=383) 1%, and youth in transition <1% (n=83).

Housing Need by Target Population



Findings



Geographic Distribution of Housing Need

The majority of need (81%) is on O‘ahu

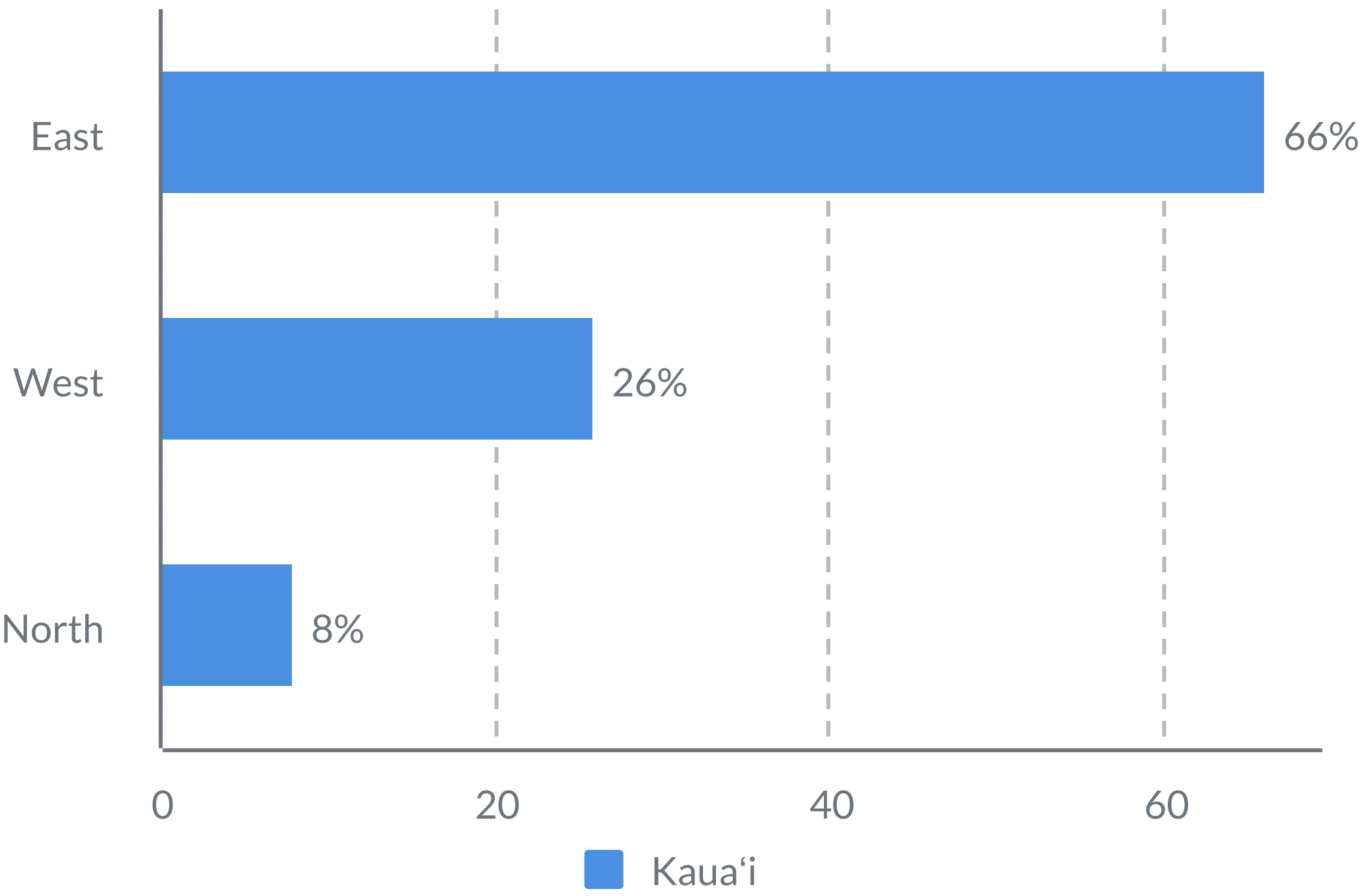
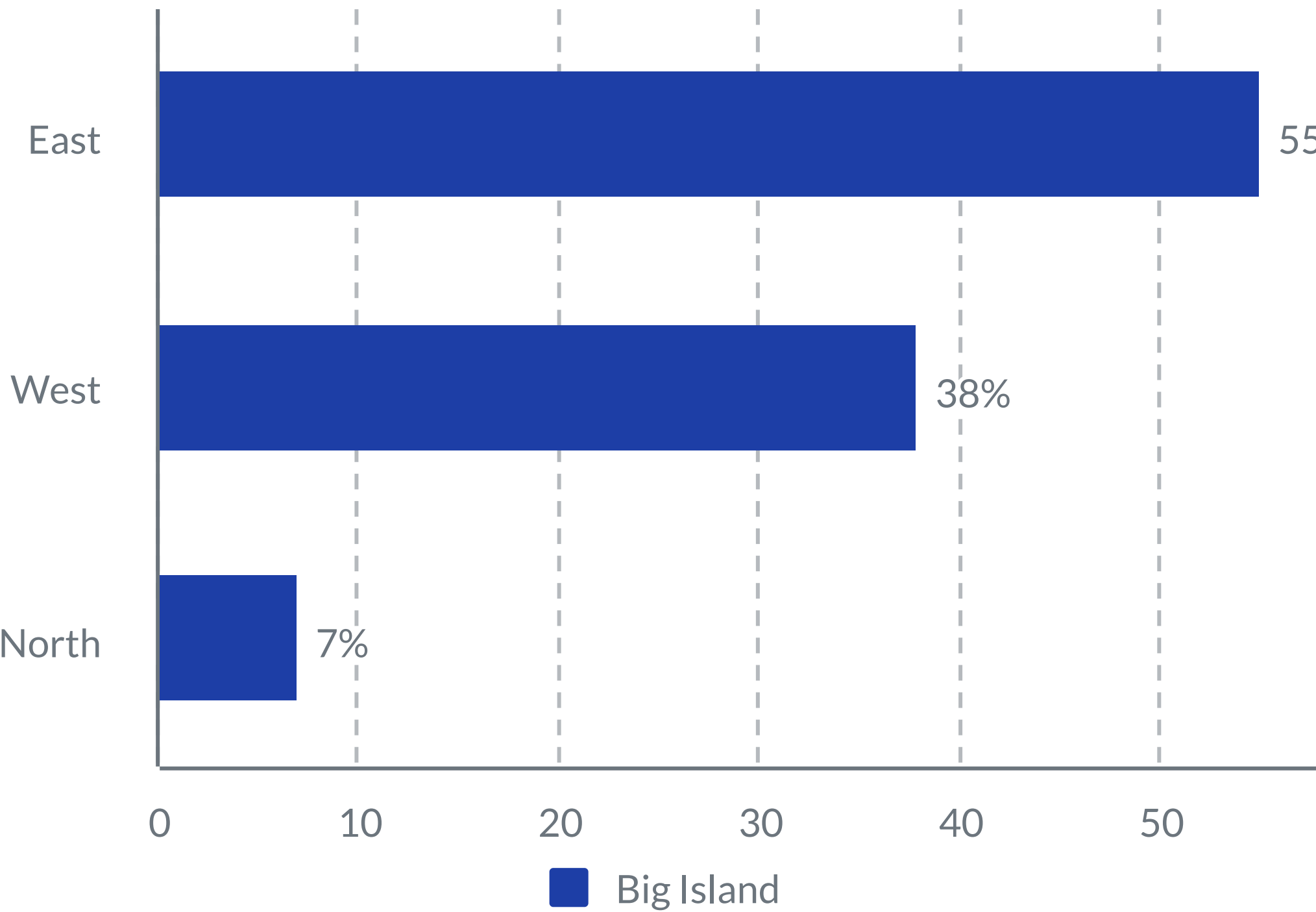
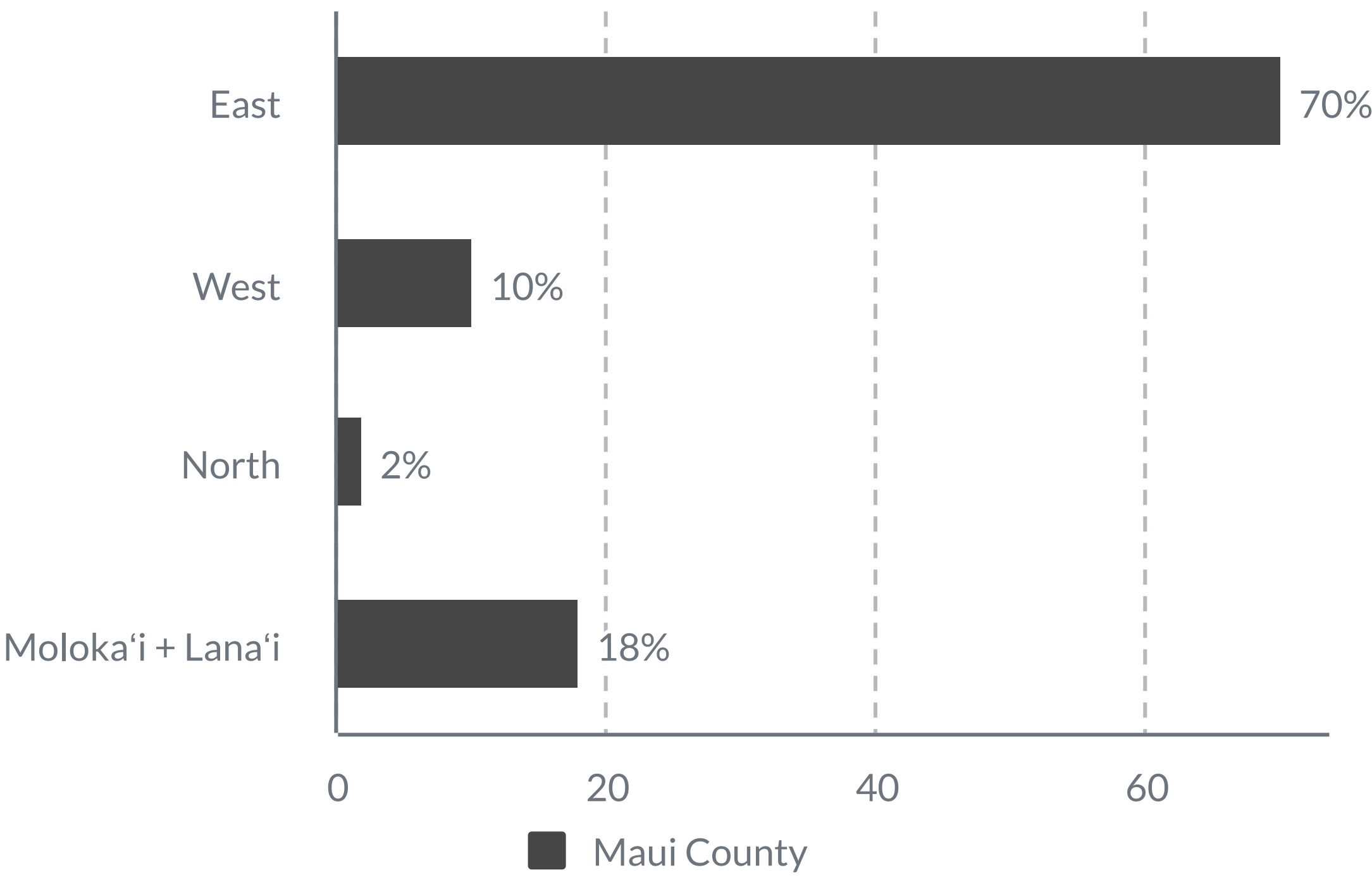
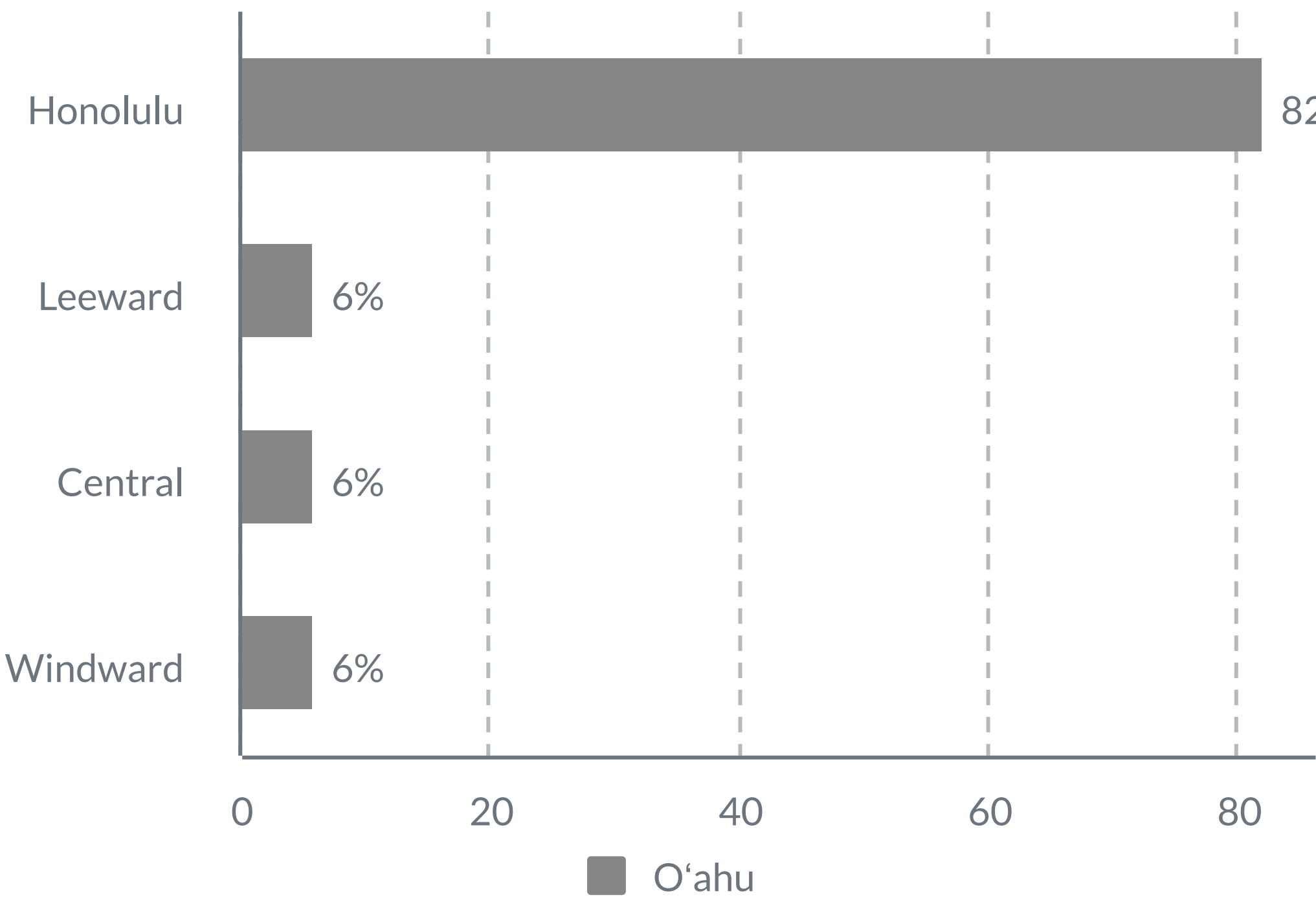
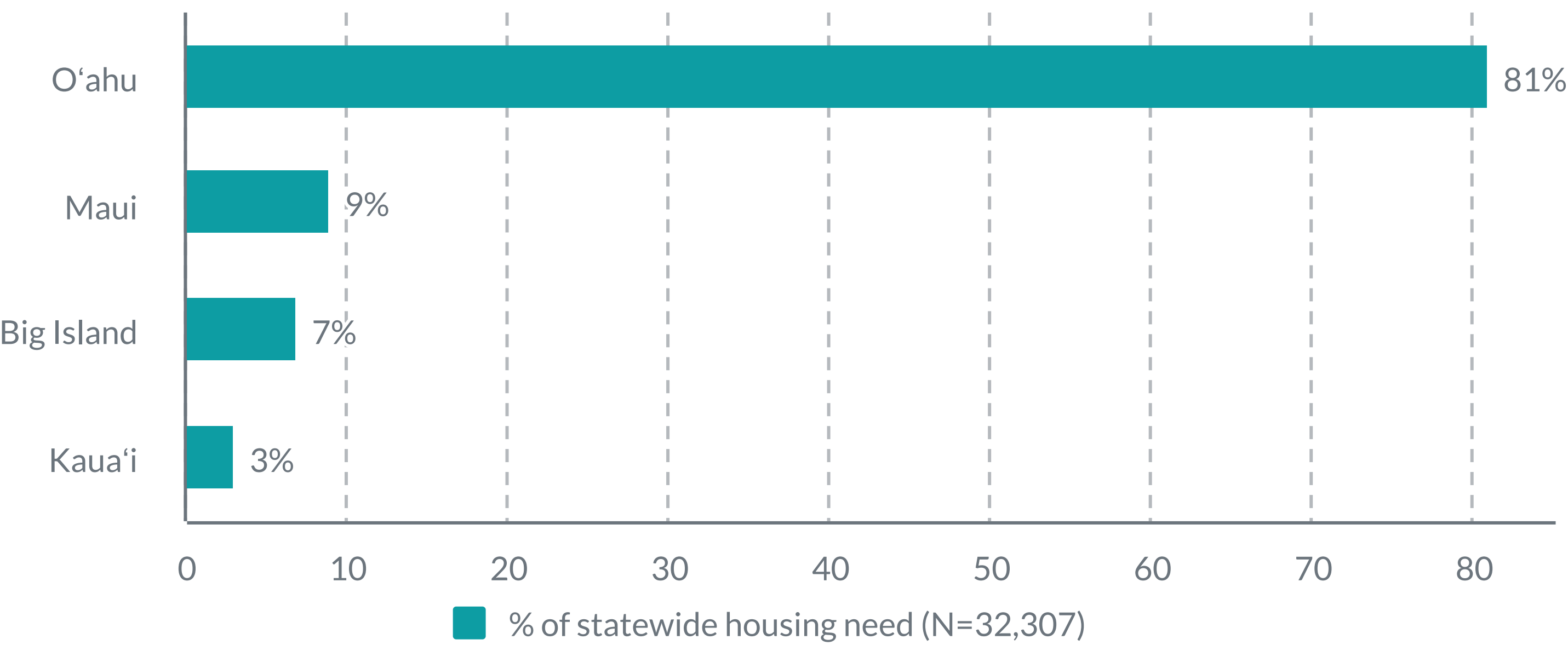
GEOGRAPHIC DISTRIBUTION

- Includes data from 26 of 30 agencies
- 32,307 reports of individuals by geographic location of need

Note: An individual may be counted in more than one geographic location of need

The statewide distribution of housing need demonstrates **O‘ahu has the largest need, with 81% of the 32,307 reports of need by geography (n=26,217) falling in this category.** Maui County accounted for 9% of reports (n=2,807), the Big Island 7% (n=2,213), and Kaua‘i 3% (n=1,069).

Statewide Distribution of Housing Need



Findings



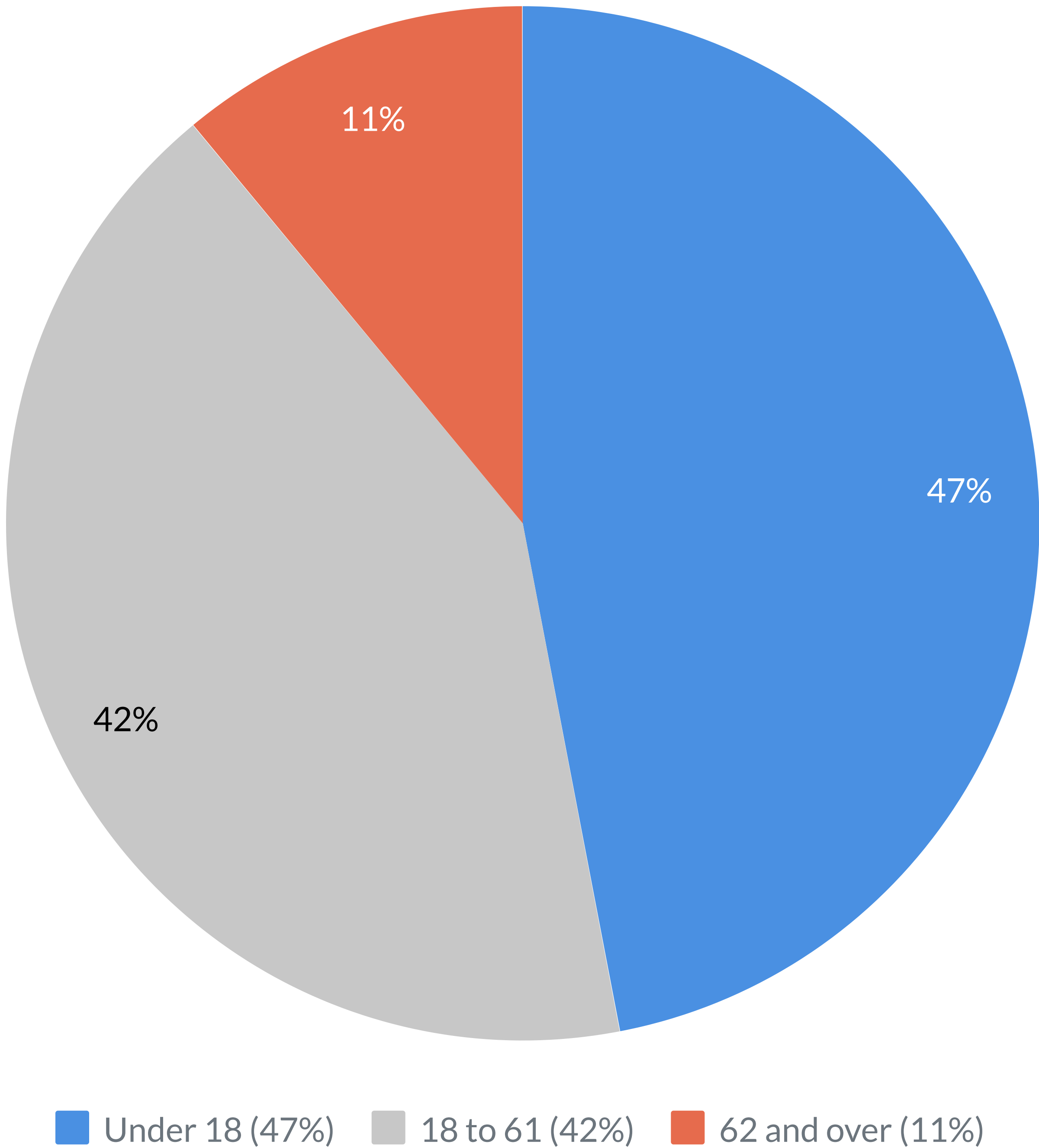
AGE

- Includes data from 17 of 30 agencies
- 10,314 reports of individuals by age

Age
Most people in need of housing are under the age of 62 (89%)*

The **majority of individuals in need of housing were under 62 years of age (89%)**. Many individuals in need of housing were reported as under age 18, with 47% of the 10,314 reports by age (n=4,852) falling in this category. Individuals age 18 to 61 accounted for 42% of reports (n=4,312). Individuals age 62 or older accounted for 11% of reports (n=1,150).

Age Distribution of Individuals in Need of Housing



*Aggregate data cut offs for adult ages ranged from age 60 to 65. The younger adult age group provided by an agency is represented by “18 to 61” and the older adult age group is represented by “62 and over”

Findings



BARRIERS TO HOUSING

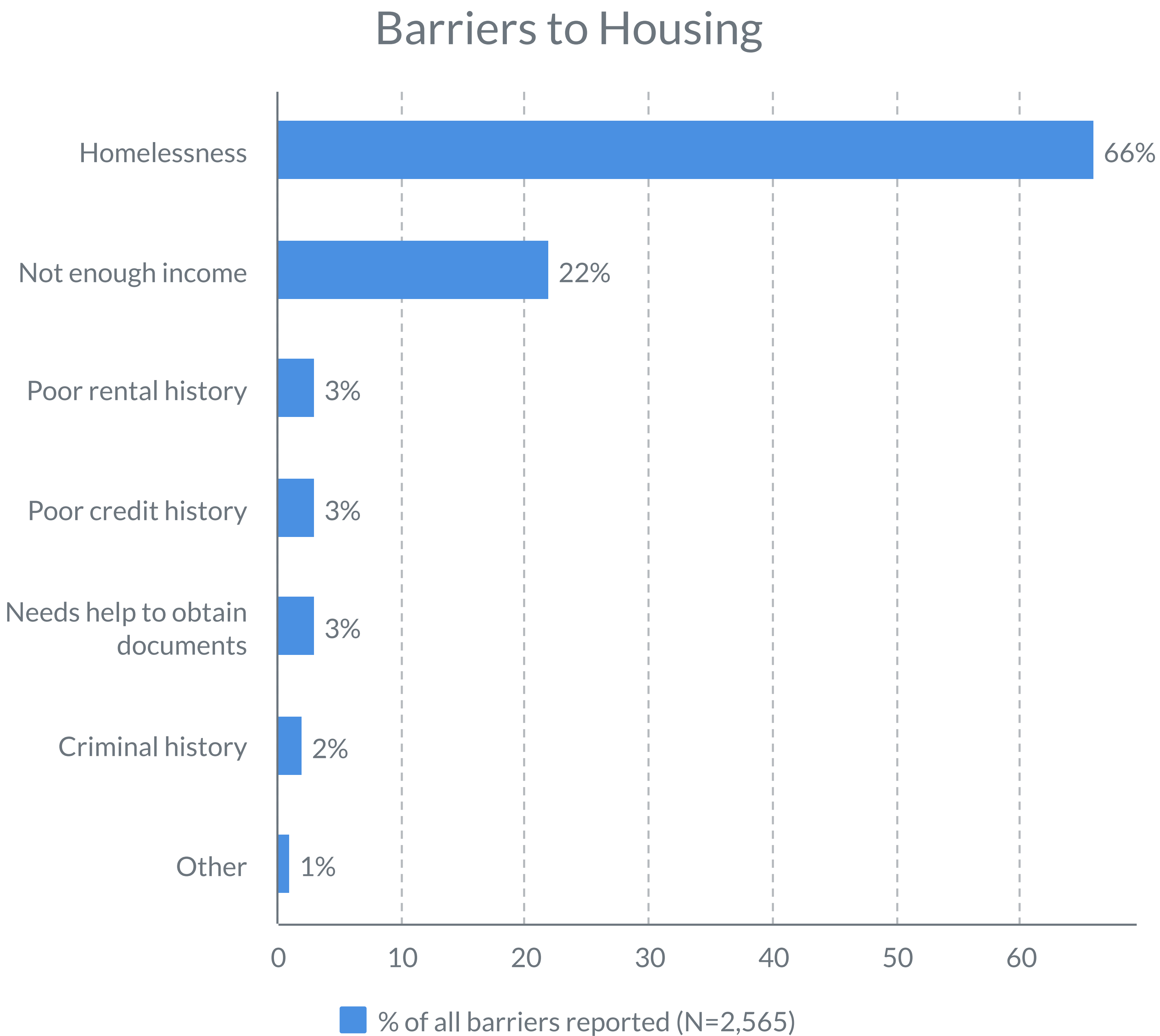
- Includes data from 14 of 30 agencies
- 2,565 reports of individuals with a housing barrier

Note: An individual may be counted in more than one housing barrier category

Barriers

Being homeless was the largest barrier reported

Being homeless was reported as the largest barrier to housing, with 66% of the 2,565 reported barriers (n=1,688) falling in this category. Not having enough income accounted for 22% of reports (n=574), poor rental history 3% (n=79), poor credit history 3% (n=78), needing help to obtain documents 3% (n=72), criminal history 2% (n=60). Other barriers accounted for 1% of reports (n=14) and included dialysis, family court, and non-US citizen.



Findings

Current Living Arrangement

Many in need of housing were homeless

CURRENT LIVING ARRANGEMENT

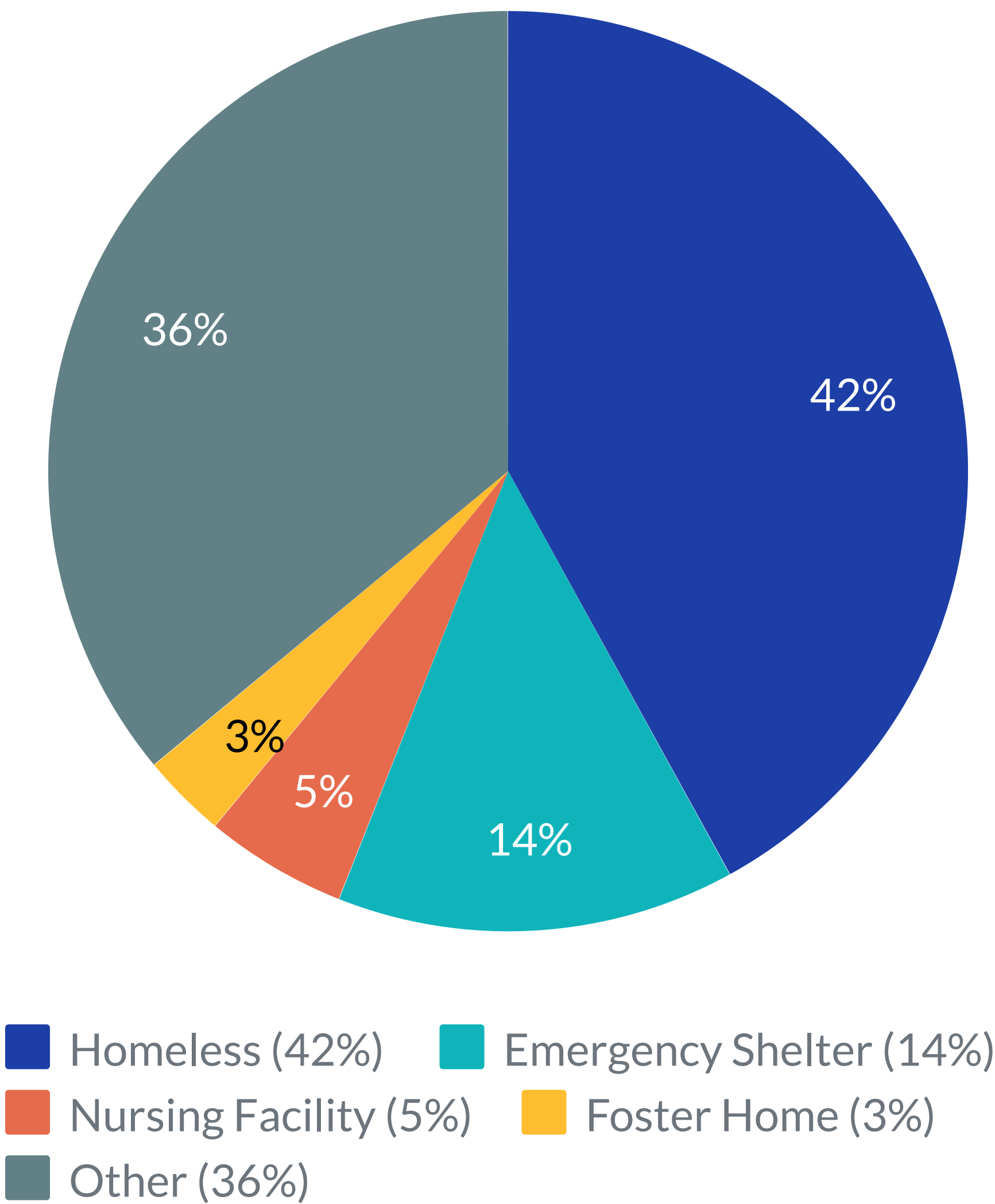
- Includes data from 13 of 30 agencies
- 6,096 reports of individuals by current living arrangement

The housing need tracking sheet used the same terminology as Medicaid/Medicare to identify living arrangements (Appendix C). Agencies reporting this item may have used different definitions.

Many in need of housing were currently homeless, with 42% of the 6,096 reports (n=2,533) identifying homeless as the current living arrangement. Living in an emergency shelter accounted for 14% of reports (n=833); nursing facility 5% (n=287); foster home 3% (n=184); and incarcerated (n=27), care home (n=8), assisted living facility (n=7), behavior treatment (n=7), and adult residential care home (n=5) combined reported 1% of the time as the current living arrangement of the individual in need of housing. An additional 36% of the time the living arrangement was reported as "Other" (n=2,205), with living arrangement descriptions including: Staying with friends or family, on the street or beach, housed but needs to move out (foreclosure, eviction, lease is up, or home is sold), in a vehicle, group or boarding home, in a facility (treatment, rehabilitation, acute care).

A review of the comments provided by agencies shows overlapping living arrangement descriptions under the Homeless and Other categories. Staying with friends or family, doubling up or couch surfing, living on the street or beach, in a vehicle, or in a group or boarding home were described under both Homeless and Other.

Living Arrangements of Persons in Need of Housing



Findings



Based on HUD definitions

many of those in need of housing were considered literally homeless



Literally homeless was mostly described as living in a shelter, on the street or beach, in a vehicle, or in a group home

LIVING ARRANGEMENT
Detailed descriptions of the most frequently reported categories (Homeless, Emergency Shelter, Other)

- Includes data from 7 of 13 agencies reporting living arrangement information
- 363 living arrangement detailed descriptions provided

Living arrangement descriptions provided under the categories **Homeless, Emergency Shelter, and Other (N=363)** were examined and grouped using the US Department of Housing and Urban Development (HUD) categorization of homelessness. The HUD categories are as follows: Literally Homeless, Imminent Risk of Homelessness, Homeless Under Other Federal Statutes, and Fleeing/ Attempting to Flee Domestic Violence. Category definitions can be found in Appendix C.

Literally homeless was the most frequent HUD category described, with 64% of the comments (n=191) falling in this category. Fleeing/Attempting to Flee Domestic Violence accounted for 23% of the comments (n=69), and Imminent Risk of Homelessness 11% (n=32).

Among the 191 Literally Homeless comments, living in a shelter was described most frequently (n=108, 57%), followed by living on the street or on the beach (n=23, 12%) living in a vehicle (n=23, 12%), living in a group home (n=21, 11%), and doubling up or couch surfing (n=14, 7%).

Findings



HOUSING SUPPORTS

- Includes data from 12 of 30 agencies
- 3,463 reports of individuals in need of housing supports

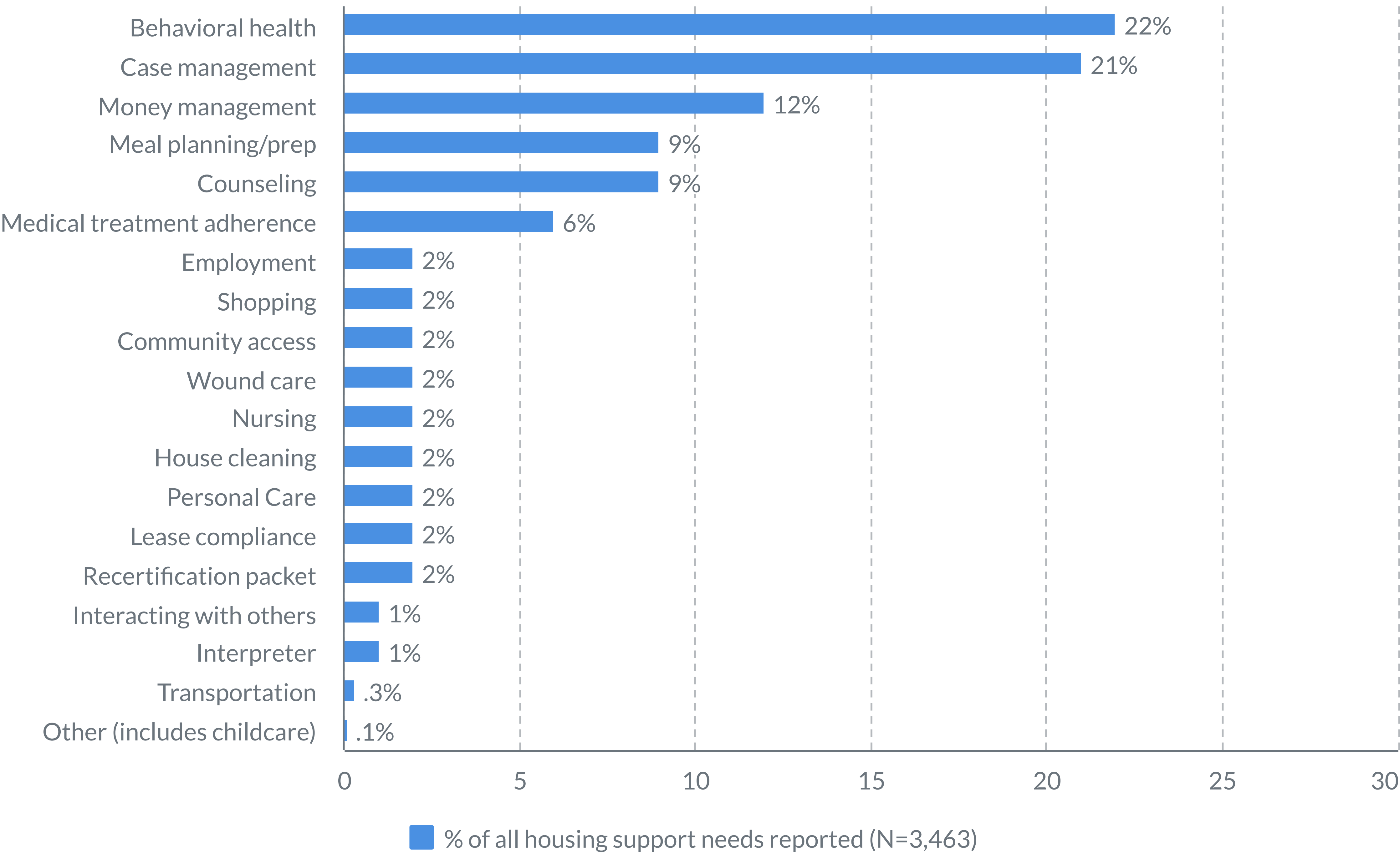
Note: An individual may be counted in more than one housing support category

*Housing Supports
Behavioral health and
case management
were the most
frequent supports
reported*

Housing stability is important because after an individual applies for housing and gets housed, wrap around supports are helpful in providing housing stabilization and preventing eviction. The housing need tracking sheet used the same terminology as Medicaid to identify support services (Appendix C). Agencies reporting this item may have used different definitions.

The most frequent housing support needs reported were behavioral health and case management, accounting for 22% (n=774) and 21% (n=721) of the 3,463 housing support needs reported. Money management accounted for 12% of reports (n=425), meal planning and prep 9% (n=309), counseling 9% (n=308), and medical treatment adherence 6% (n=222). See the chart below for additional housing supports, each accounting for at most 2% of all housing supports needed.

Housing Supports Needed

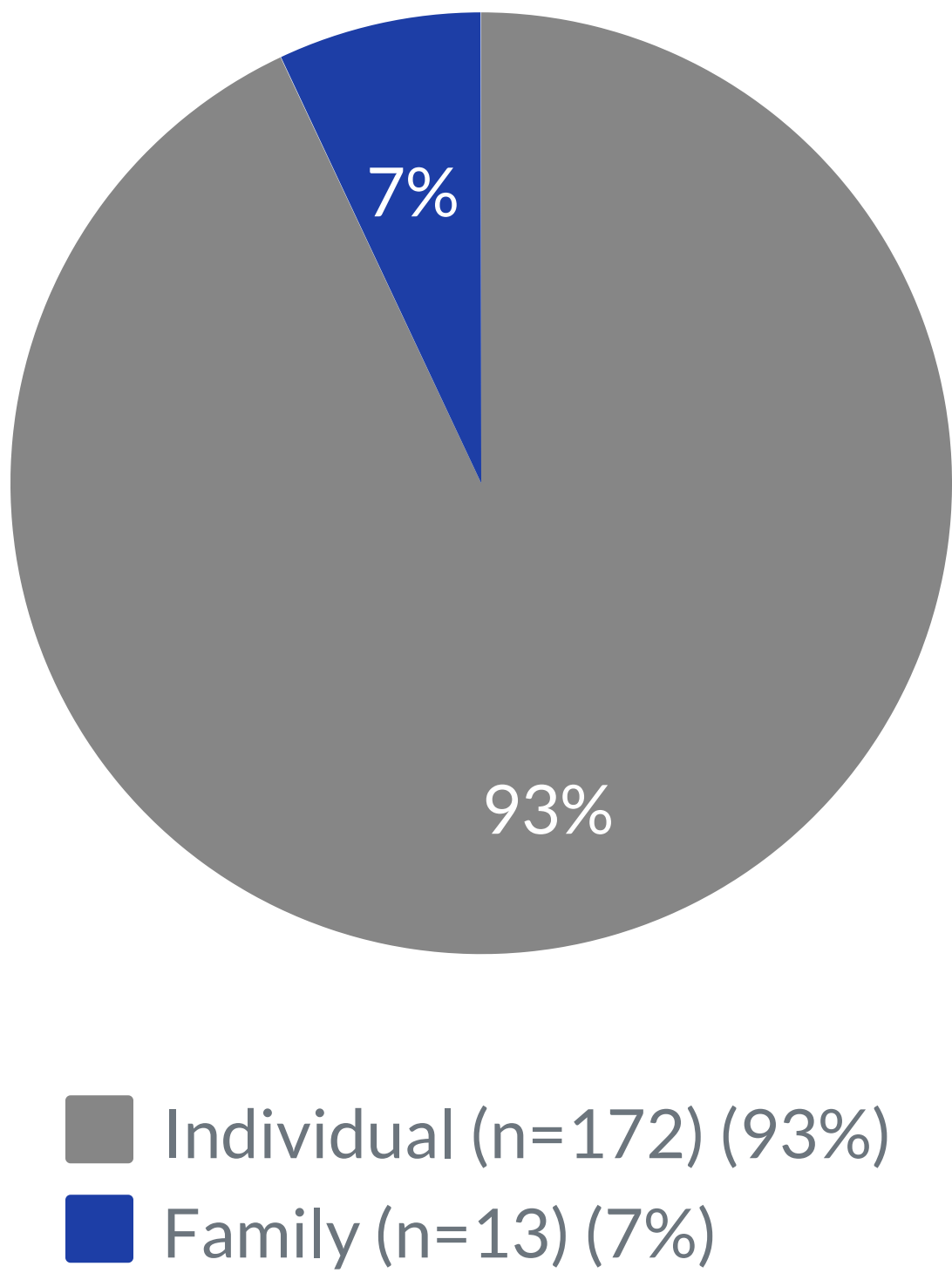


Findings

Rental Size

The majority reported in need of housing were individuals and requesting a studio or 1 BR

Distribution of Individual and Family Need for Housing



RENTAL SIZE

- Includes data from 5 of 30 agencies
- 245 reports of individuals by rental size needs

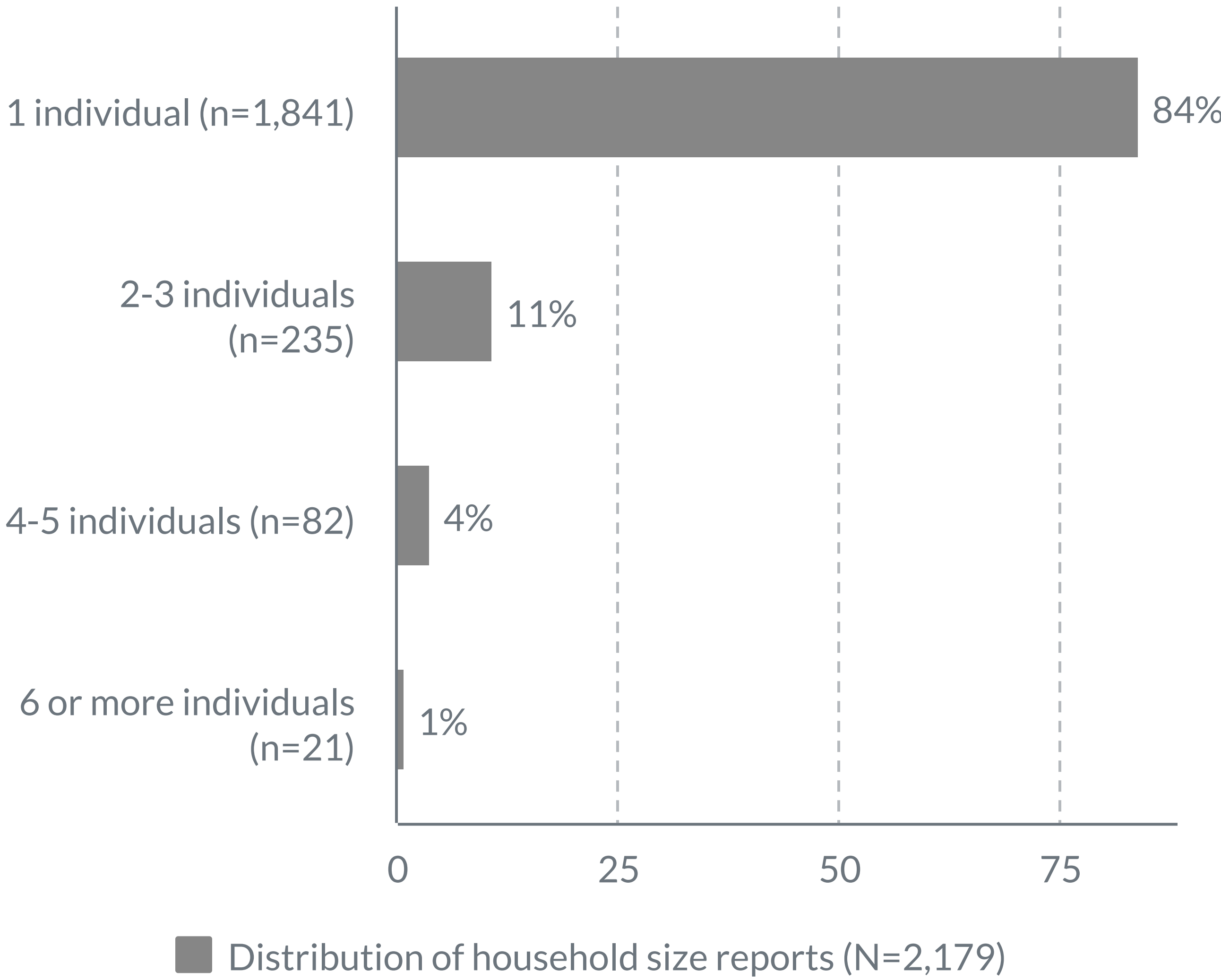
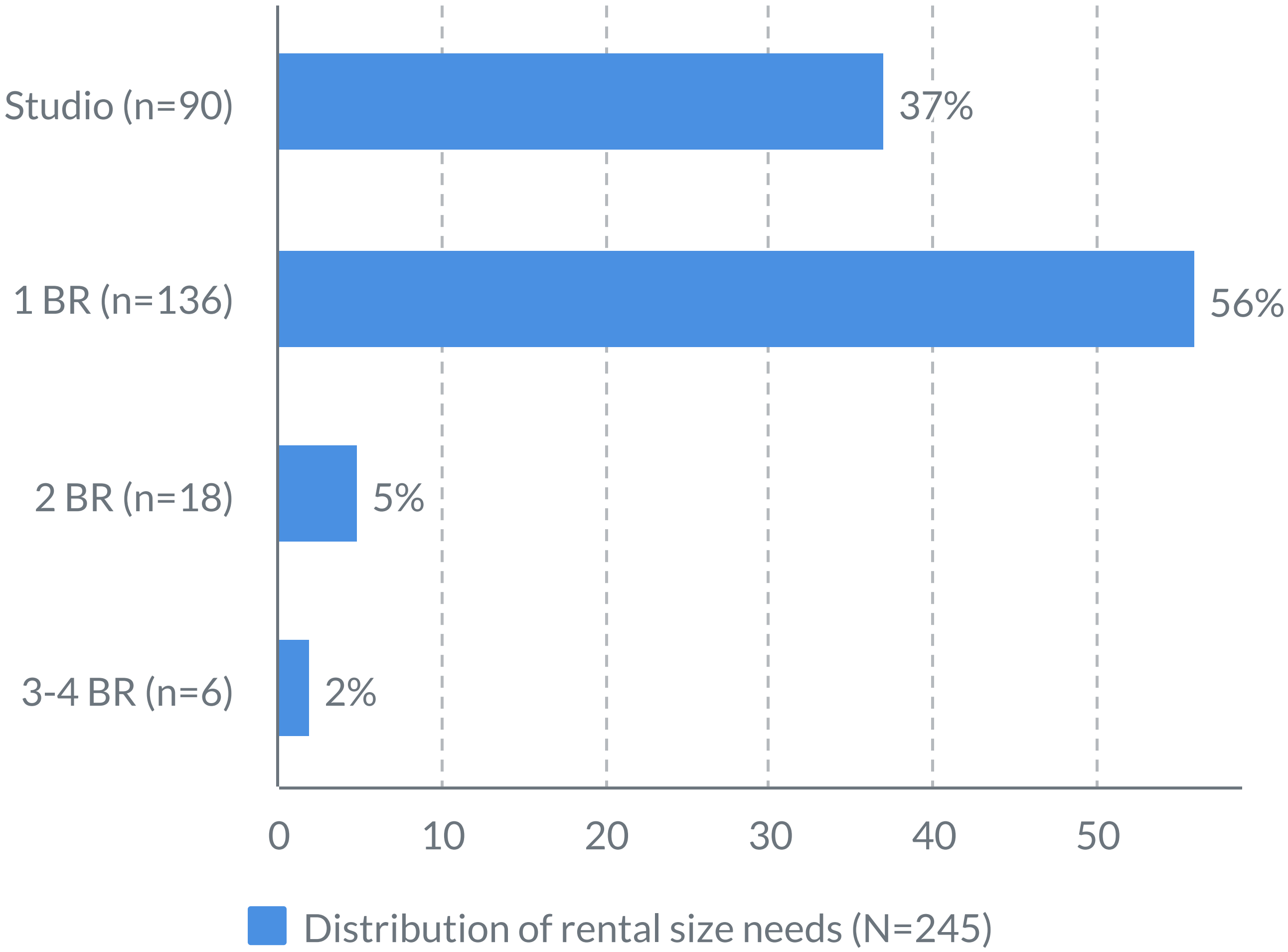
FAMILY or INDIVIDUAL

- Includes data from 10 of 30 agencies
- 185 reports of family or individual need

HOUSEHOLD SIZE

- Includes data from 5 of 30 agencies
- 2,179 reports of individuals by household size

The majority reported in need of housing were individuals (93%) and requesting a studio (37%) or 1 bedroom unit (56%). Single households (84%) were the highest reported household size, followed by 2-3 people (11%), 4-5 people (4%) and 6 plus people in the household (1%). The most desired unit was a 1 bedroom (56%), followed by a studio (37%), 2 bedroom (5%) and 3-4 bedroom (2%).



Findings

RENTAL FEATURES

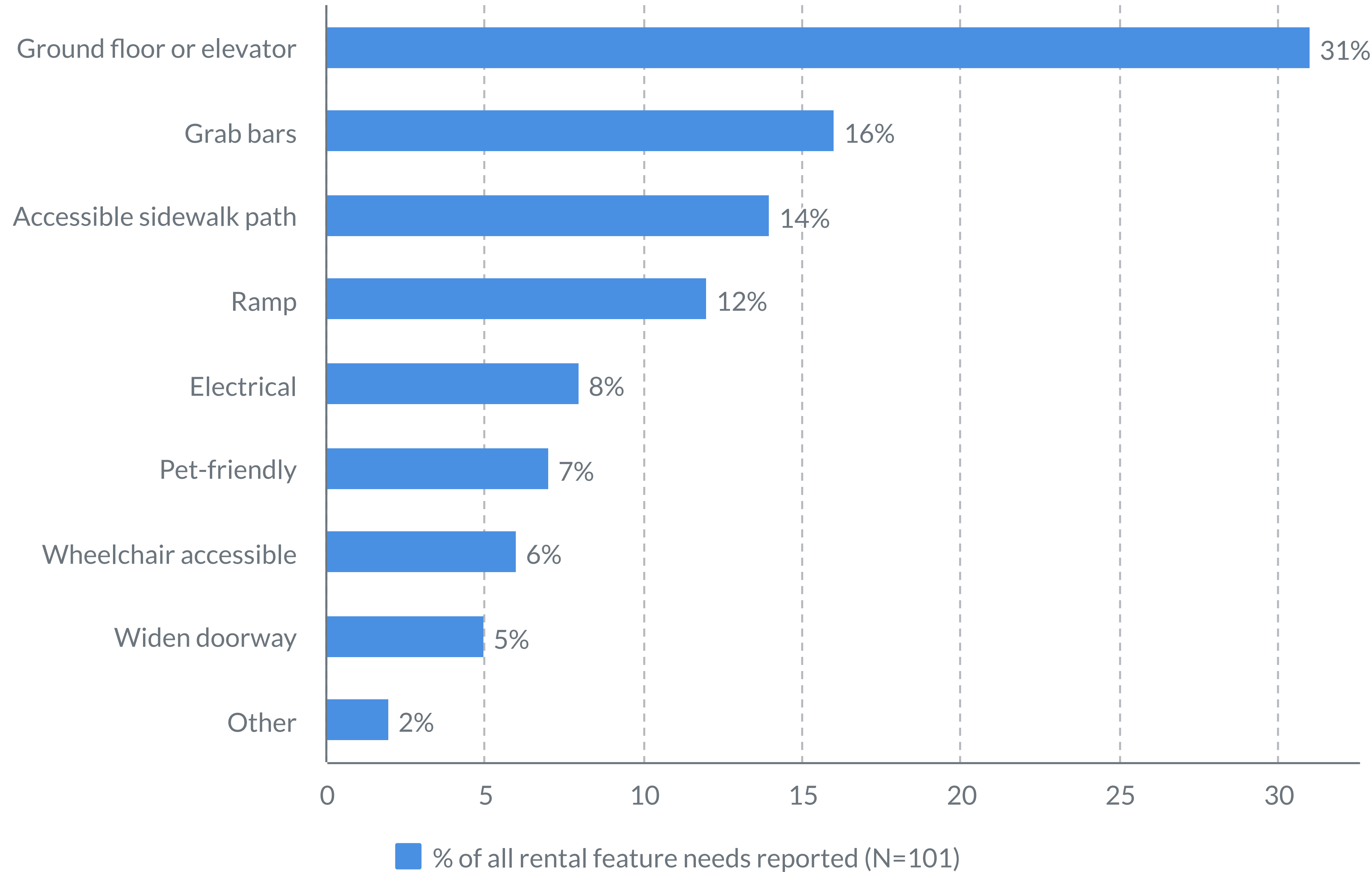
- Includes data from 7 of 30 agencies
- 101 reports of individuals by rental feature needed

Note: An individual may be counted in more than one rental feature category

Rental Features
Ground floor units or
elevators were the
most frequently
reported rental need
(31%)

A ground floor unit or elevator the most frequent rental feature need reported, with 31% of the 101 reports (n=31) falling in this category. Grab bars accounted for 16% of reports (n=16), accessible sidewalk paths 14% (n=14), ramps 12% (n=12), electrical upgrades 8% (n=8), pet friendly 7% (n=7), wheelchair accessible 6% (n=6), and wider doorways 5% (n=5). Other rental feature needs were reported 2% of the time (n=2) and included children friendly and refusal to live with others.

Rental Features Needed



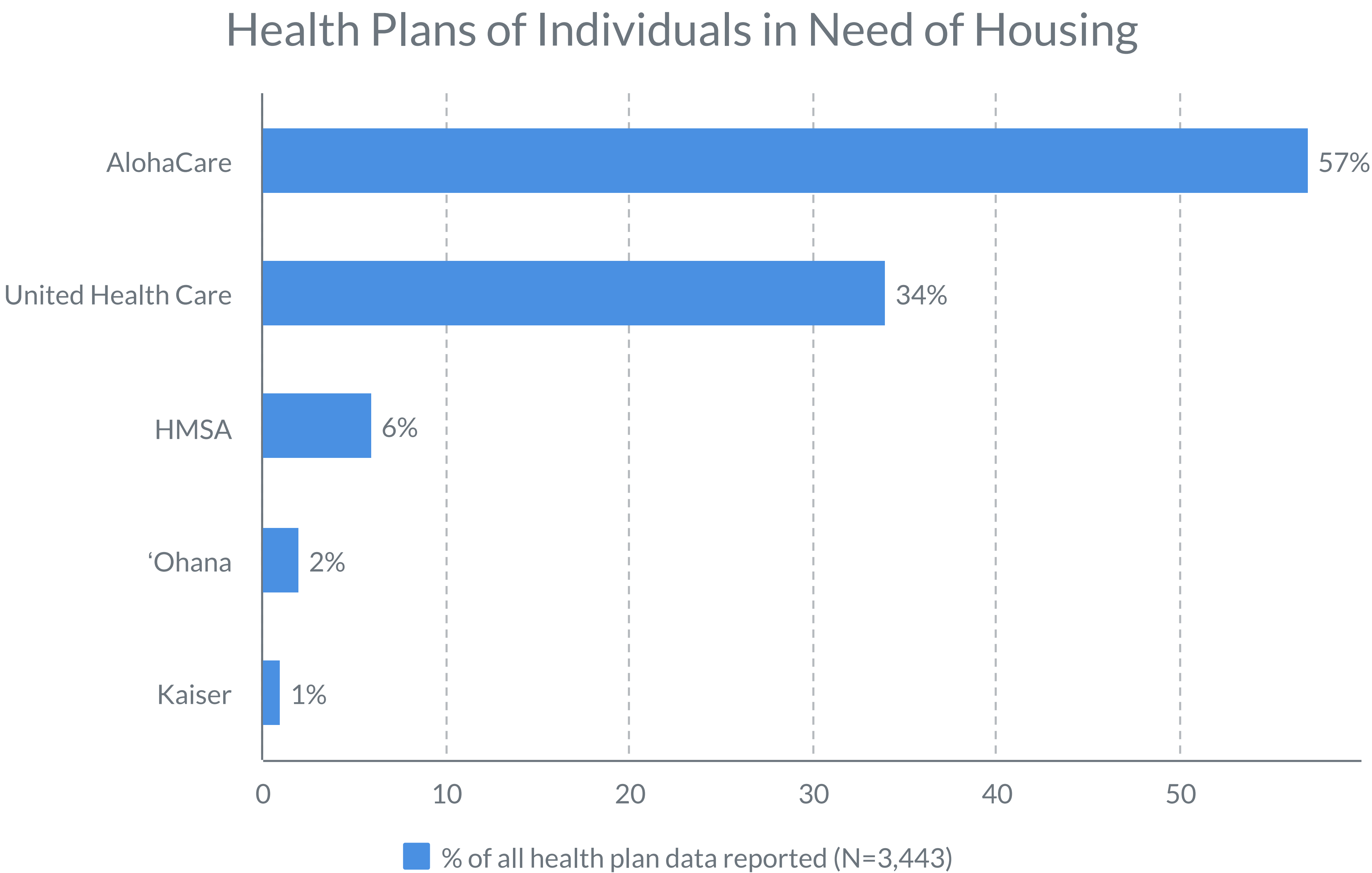
Findings

- HEALTH PLAN
- Includes data from 10 of 30 agencies
 - 3,443 reports of individuals by health plan

Health Plan

Over 90% of health plan information provided was reported as either AlohaCare or United Health Care

Two health plans accounted for 90% of health plan data reported. The most frequently reported health plan was AlohaCare, with 57% of the 3,443 reports (n=1,945) indicating this as the health plan of the individual in need of housing. United Health Care accounted for 34% of reports (n=1,182), HMSA 6% (n=217), ‘Ohana 2% (n=52), and Kaiser 1% (n=47). This report combines reports directly from these 4 health plans with data from 6 other agencies that knew health plan membership of clients. This may have increased the risk of duplication of data reported.



Findings

PUBLIC BENEFITS

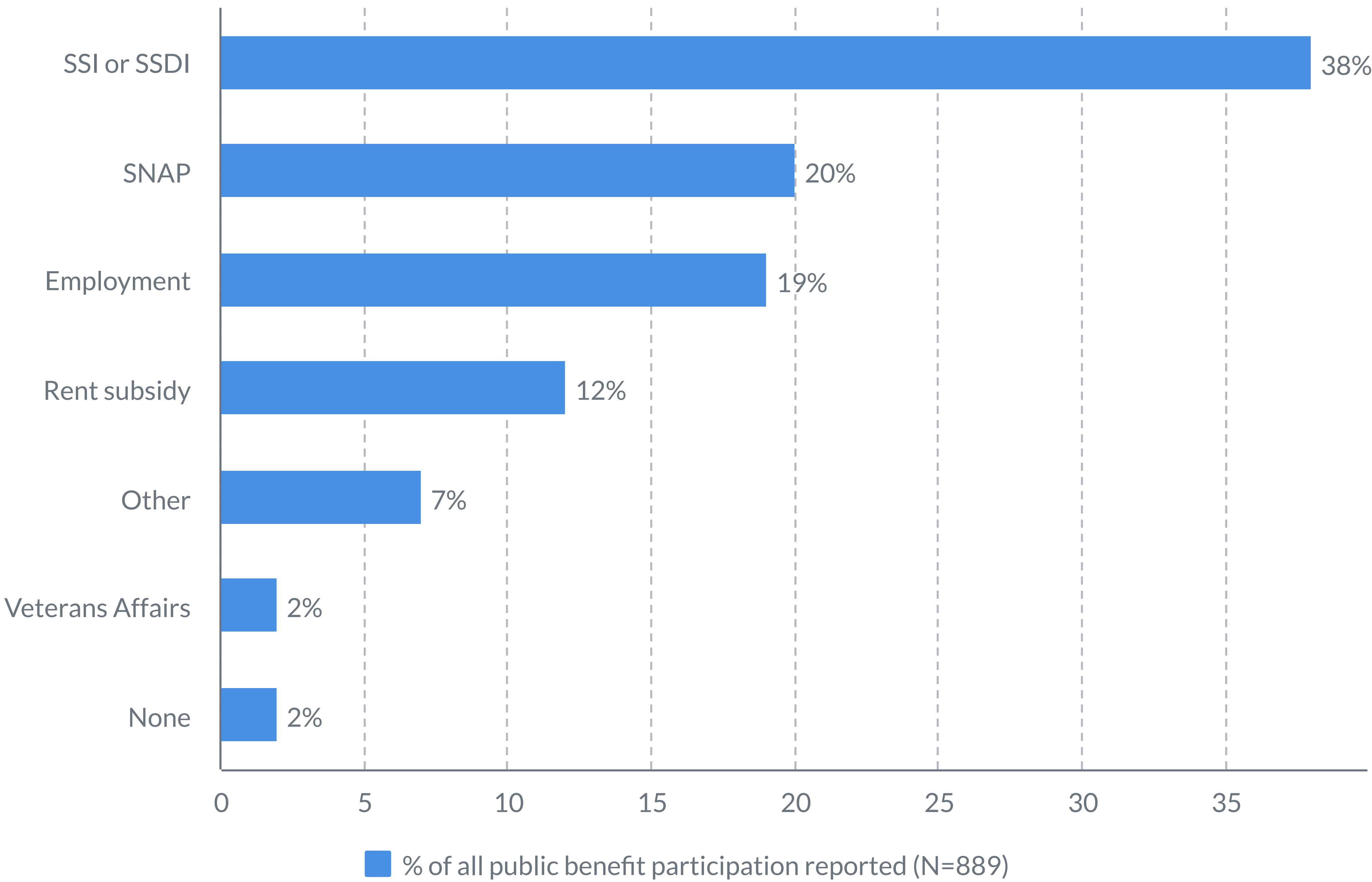
- Includes data from 9 of 30 agencies
- 889 reports of individuals by public benefit

Note: An individual may be counted in more than one public benefit category

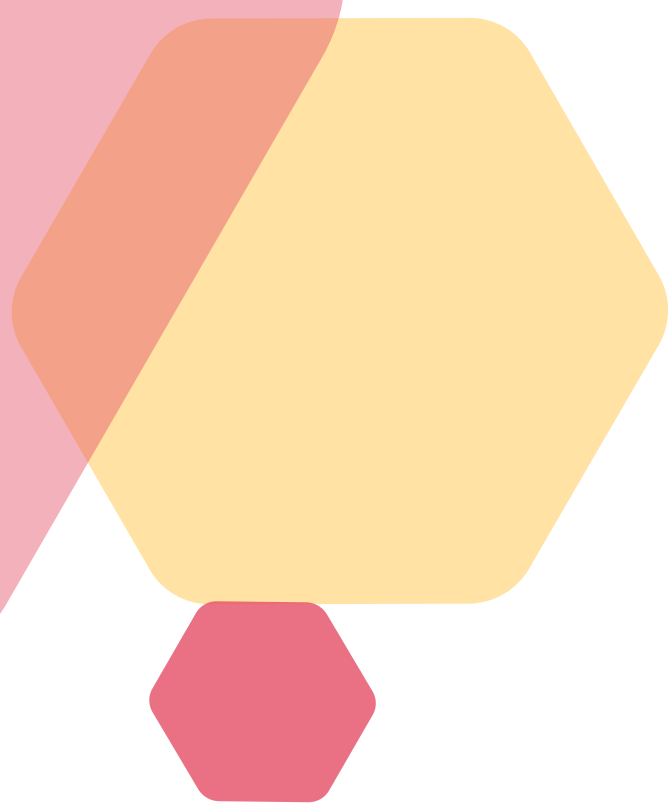
Public Benefits
The most frequently reported public benefit was SSI or SSDI (38%)

Public benefits support housing stability by helping individuals stay housed and prevent eviction. The housing needs tracking sheet used in this study asked about participation in the following public benefit programs: Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI), Supplemental Nutrition Assistance Program (SNAP), employment benefits, rent subsidy, and assistance from Veterans Affairs (VA). **The most frequently reported public benefit was SSI or SSDI, with 38% of the 889 reports (n=335) falling in these categories.** SNAP accounted for 20% of public benefit reports (n=174), employment benefits 19% (n=169), rent subsidies 12% (n=108), and Veterans Affairs benefits 2% (n=21). Other public benefits accounted for 7% of reports (n=64) but were not specifically named. Individuals being on no public benefits (None) accounted for 2% of public benefit participation reports (n=18).

Public Benefits Participation of Individuals in Need of Housing



Findings of the Agency Housing Survey



Findings Part 2 Information Systems

- Includes data from 27 of 72 agencies asked to participate in the agency housing survey
- 20 of these 27 agencies also provided housing needs information (See Appendix D)

Information Systems

Agencies have varying data systems and capacity

to track housing need information

The second part of this study collected housing program and tracking information from 27 agencies through an online Agency Housing Survey. This was done to assist with future development of an information system to forecast and monitor housing need, as described in Act 039. The survey collected information on the various **information systems that monitor and forecast housing needs for target populations**. See Appendix B for survey items. Responses indicate that **agencies have varying data systems and capacity** to track housing need information. The ability to contribute to a common portal or data dashboard may differ across agencies and Act 039 target populations, and agencies may need resources and technical assistance in complying with data requests moving forward.

Most agencies (81%, 22 of 27) shared that they track housing data. Among the agencies that track information, demographics were mentioned most frequently as an item being tracked, followed by service needs or other agency specific needs. Some agencies (19%, 5 of 27) mentioned they track goals/plans and status/outcomes. Several agencies (15%, 4 of 27) were able to describe in detail the variety of items they track, including items related to VISPDAT, employment, and supervision needs.

Agencies are using a variety of data sources, data systems*, and software packages to track housing needs

The Homeless Management Information System (HMIS) and Coordinated Entry System (CES) were specifically mentioned by a third of the agencies (33%, 9 of 27). Other data sources/systems described were Center for Independent Living (CIL) related (Net CIL, CIL Suite), agency specific portals, agency internal tracking, and case notes. Agency responses indicate varying data systems and current capacity to track housing need information. As a result, the ability to contribute to a common portal or data dashboard differs across agencies and Act 039 target populations.

*see footnote on next page

Findings of the Agency Housing Survey



Information Systems, continued

- Includes data from 27 of 72 agencies asked to participate in the agency housing survey
- 20 of these 27 agencies also provided housing needs information (See Appendix D)

Information Systems

Agency collaborations and uniform tracking systems exist for some target populations

A variety of assessment tools are used and with varying degrees of consistency. VISPDAT was mentioned by most of the agencies (83%, 5 of 6) that included HMIS in their data tracking response. Besides tools, assessment methods included self report, referral from another agency, touch point screenings (clinic, ED, hospital), consultations with clients, interagency sharing and treatment team meetings, and document review (court documents or other reports submitted with housing referral packet).

An agency having a housing waitlist may be relatively well positioned to share data because tracking is built into their housing program. However, although a majority of agencies (67%, 18 of 27) reported having a housing program, fewer (29%, 8 of 27) maintain a formal waitlist, and waitlist criteria differ agency to agency. At minimum, agencies may need resources and assistance to comply with additional Act 039 data sharing initiatives.

Act 039 information system development may overlap with existing collaborations/tracking initiatives.** Partners in Care (‘Oahu), Bridging the Gap (neighbor islands), and a variety of State and County entities were frequently identified (85%, 23 of 27) as tracking collaborations already in place. Membership and MOUs were in place for some of the collaborations.

The overlap of Act 039 with existing initiatives may indicate potential for uniformity among some agencies and for specific data elements. On the other hand, overlap may indicate there is not a need for another layer of monitoring and forecasting. One agency asked "*Why are we duplicating HMIS and CES?*" Another agency stated "*We need to have discussion internally on what we need to do to cooperate with the housing need dashboard, and understand better the intent and stipulations of the Act.*" Several agencies articulated privacy, confidentiality, and HIPAA concerns.

* DATA SYSTEMS

- HMIS - A system into which service providers enter data on the people they serve.
- CES - Facilitates the coordination and management of resources to responds to housing crises. It connects the highest need, most vulnerable persons in the community to available housing and supportive services.
- VISPDAT - A pre-screen or triage tool that looks to confirm or deny the presence of acute issues or vulnerabilities

** COLLABORATIONS (See Appendix D)

- Partners in Care - Coalition on ‘Oahu composed of representatives of organizations from nonprofit homeless providers, government stakeholders, private businesses, community advocates, public housing agencies, hospitals, universities, affordable housing developers, law enforcement, and persons experiencing homeless and formerly homeless persons. PIC develops recommendations for programs and services to meet the needs of homeless individuals and families on ‘Oahu.
- Bridging the Gap - Neighbor island coalition responsible for coordinating the implementation of housing and services system within its geographic area that meets the needs of the homeless individual and families.



Limitations & Lessons Learned

Study Limitations

limitations
lessons
limitations
lessons

1. Limited study scope.

This **study focused on (calendar year) 2019 housing need**. The current economic climate of high unemployment, primarily influenced by COVID-19, is one reason these study results may not reflect current housing need. In addition, the **study's scope did not include the extent agencies have capacity to help individuals get on a waitlist, apply for housing, or whether the agency has housing specialists on staff**. The study's housing need tracking sheet asked whether an individual was already on a Hawai'i Public Housing Authority waitlist, which would indicate that steps were taken to address an individual's housing need. But this field was largely blank. Although agency capacity was not part of Act 039, it is important to better understand how to strengthen statewide capacity for agencies to provide housing coordination and support.

2. Limited representation.

A challenge noted is the **limited representation** for some of the Act 039 target populations. Agencies working with homeless individuals were the most responsive and there is a need to find representation from all target populations. Study findings are influenced by which agencies were contacted, which provided information, and may not accurately reflect housing needs of individuals working with agencies that were not contacted or that did not participate in the study. UH conducted a second round of data collection with additional identified agencies to capture missed agency participation but also target group organizations with low representation in the first round.

3. Data completeness.

Data completeness was another challenge to the study. Many agencies only track some of the requested data elements and in various formats. In other words, there may be additional significant housing needs data that is not captured by the study tracking sheet, agency survey, and the two rounds of data requests.

4. Duplication of data.

Duplication of data was a challenge. Despite best efforts to tease out duplicate counts of individuals in need of housing, duplicate counts occurred because we did not collect personally identifying information. Some overlap occurred when data was collected from different agencies serving the same individuals. For example, if an individual was reported by a health plan and by a non-profit program, that individual may have been counted twice. At best, this allows for estimate percentages but not accurate counts.

5. Concerns with data requests.

Some **agencies had not previously received this type of request** and were unsure of how to respond and provide data. **Confidentiality concerns** were also cited as reason for not being able to provide data. The tracking sheet requested listing individual data rather than aggregate data, which brought up confidentiality concerns. The request for data on individuals also brought up time and resource constraints.

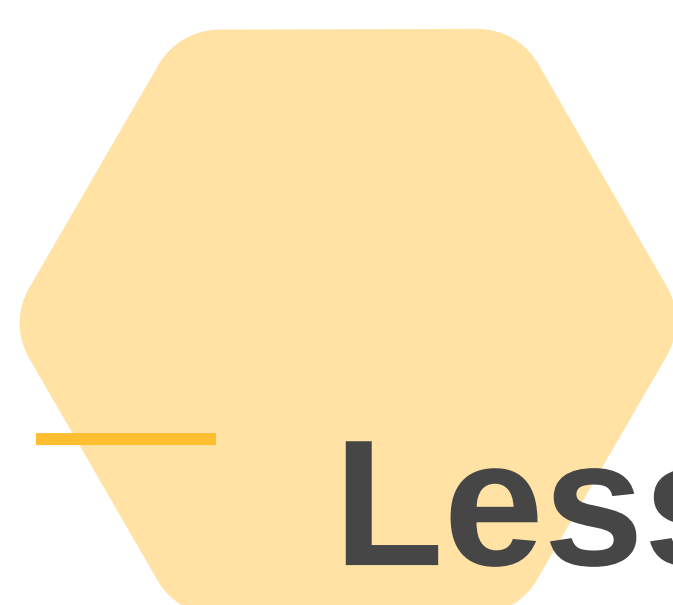
6. Standardization of data filtering procedures.

Capacity to fulfill data request posed another challenge. Each agency used their own procedure to process data and the definitions and protocols used were not standard across agencies. Some agencies may have only provided formal waitlist information and omitted other individuals in need of housing. Some needed to get buy-in from supervisor or leadership in order to respond to our request.

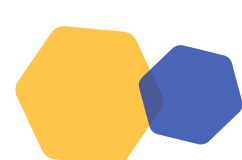
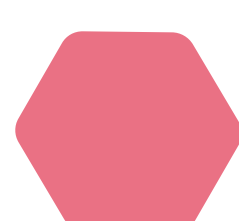
7. Turn-around time.

A **short turn-around time** for the data request was a noted challenge. We provided little time for agencies to prepare their housing need data and respond to our request. Our second round of agency requests occurred during the COVID-19 pandemic and may have additionally impacted the ability of agencies to respond. This short turn-around time, as well as the **timing of the request**, may have led to incomplete data, errors, or irregularities in what was provided.

Limitations & Lessons Learned



Lessons Learned



These lessons learned focus on working effectively with agencies to guide future implementation of Act 039.

1

DEFINITIONS

Provide **agreed upon or common definitions** of the legislative language, with examples. Examples of ambiguous language in the Act and data requested include “homeless”, “frail elderly”, “access and functional needs”, different living arrangements and geographic definitions.

2

EXPECTATIONS

Have **clear expectations** of what role agencies play moving forward in implementing Act 039 and what data will be required to report. Agencies may need guidance and technical assistance for future implementation of Act 039.

3

DATA SYSTEMS

Understand agencies have **varying data systems**. The ability to contribute to a common portal or data dashboard may differ across agencies and Act 039 target populations and agencies may need resources and assistance in complying with Act 039 data requests.

4

REPRESENTATION

Adequate **representation** is needed to reflect housing needs of all target population groups. In this report there is an over emphasis on the homeless population given the agencies that track housing need data and responded to our request.

Policy Recommendations

Given our findings, we propose the following policy recommendations to implement the Act's requirement to **monitor and forecast** housing waitlists among individuals with access and functional needs.

1 *Provide clarity on the purpose and practicality of developing a new monitoring and forecasting system*

RECOMMENDATIONS

1. The first recommendation is to **provide clarity on the purpose and practicality** of a new monitoring and forecasting information system. In addition, clarity and direction is needed to understand how the monitoring and forecasting system will be integrating into existing data systems. It is also important to understand how the monitoring and forecasting data will be used in planning and decision making. For example, the data could be used by affordable housing developers and government agencies to determine supportive housing features and services.

Key areas to explore include:

- Potential for the system to do more than detail statewide housing needs. For example, consider maintaining an up-to-date statewide housing inventory to assist agencies in matching clients with housing options
- Feasibility of implementing a new forecasting and monitoring system
- Expected return on investment

- **Build on existing systems and structures**

- Consider existing systems such as the Coordinated Entry System (homeless) and systems maintained by agencies working with other target populations
- Focus on practicality by reviewing existing information to be certain requesting new information is needed
- Collaborate with existing initiatives where key stakeholders may already be working together to meet the comprehensive needs of consumers, and plan and implement data sharing (for example, No Wrong Door, 'Ohana Nui initiative)
- Integrate future Act 039 funding within existing state initiatives

- **Provide capacity for change**

- Link the information system with decision making
- Provide agencies with resources for IT infrastructure, staffing, training, other capacity needs to develop and maintain a new system

- **Implement data sharing agreements**

- Identify advantages of agencies sharing data (develop examples of policy changes that will assist target populations in obtaining housing & other advantages that can only take place with a new information system)
- Address client confidentiality (if summary data from agencies does not suffice)

Policy Recommendations

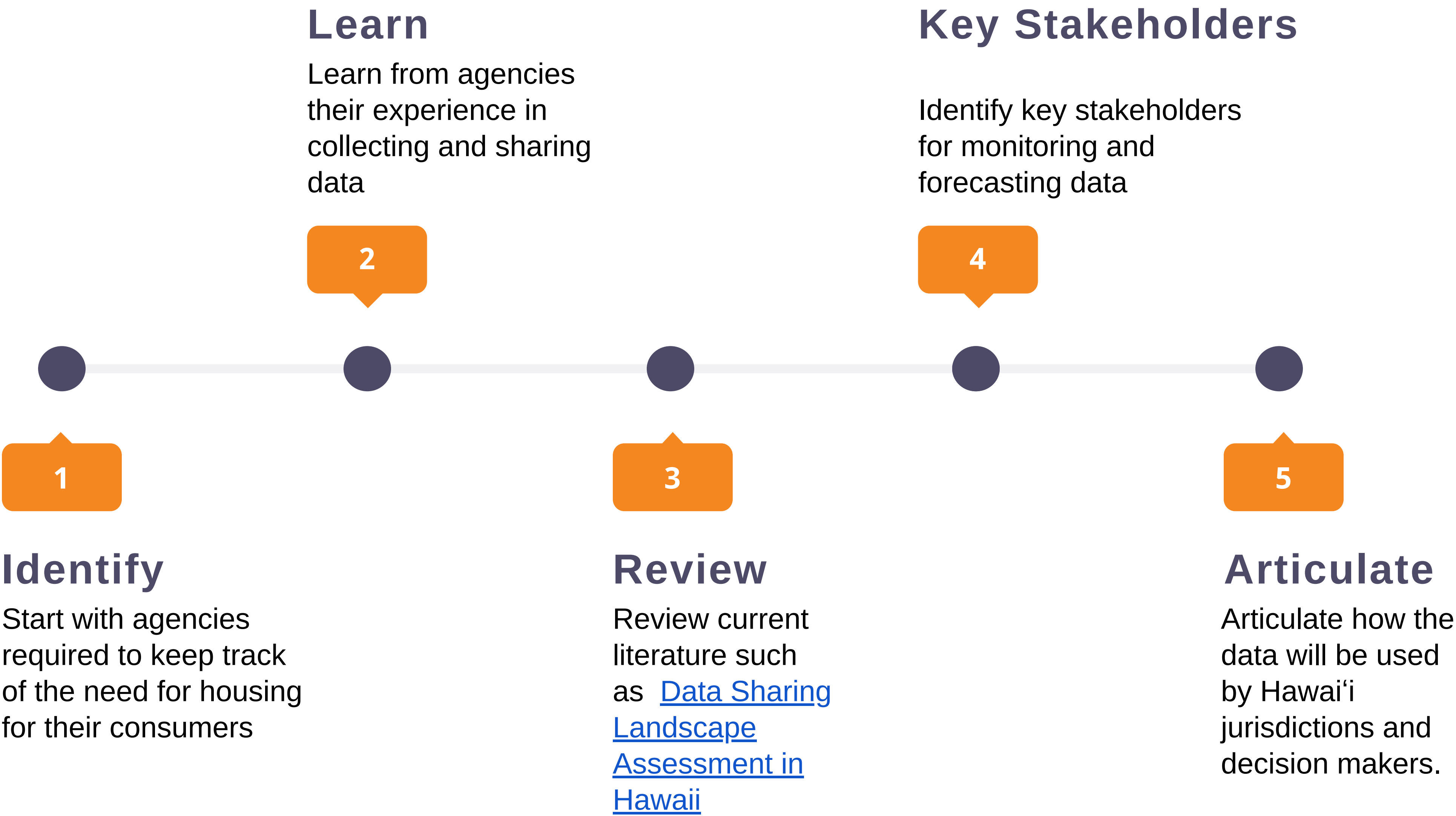
2 Convene a work group with representatives from key sectors

2. The second recommendation is to **convene a work group with representatives from key target populations, policy makers, property managers, and housing developers to develop a practical plan of action** for monitoring and forecasting the need for housing.

Key action steps include:

- Identify agencies and lead persons who are currently tracking housing needs within each target population
- Document the methods and processes used from these agencies to identify housing need
- Understand the infrastructure and systems in place to support the data tracking
- Examine the capability of existing data systems (e.g., HMIS) to extract/report information to a centralized dashboard for monitoring and forecasting

RECOMMENDATIONS





Policy Recommendations

3 *Look beyond our state and seek best practices from other states or cities*

3. The third recommendation is to task the work group with **surveying other states and cities for best practices** in monitoring and forecasting the need for housing.

Key action steps include:

- Identify ways other jurisdictions are monitoring and forecasting housing needs
- Indicate the impact monitoring efforts have on decision making, policymaking and improved support to consumers
- Identify policymaking and practice in other states and assess feasibility of application within Hawai'i systems

RECOMMENDATIONS

- Conduct survey of housing data tracking best practices nationwide
- Conduct key informant interviews with each state
- Consult national housing experts, including Corporation for Supportive Housing, for recommendations for strengthening Hawai'i's data forecasting and monitoring approaches
- Identify states with housing monitoring and forecasting systems that are effective and feasible in Hawai'i
- Prepare policy proposal with funding and resources needed to develop a housing monitoring and forecasting system to identify persons with access and functional needs who need housing



Policy Recommendations

4 *Expand target population groups and craft specific definitions and approaches*

4. The fourth recommendation is to expand the Act to **include additional target populations groups** and craft **target population specific definitions and approaches** to a monitoring and forecasting system. Some critical target population groups with distinct housing needs were not included in this report.

Identified populations have specific needs that will require additional exploration. For example, an individual experiencing domestic violence may have different housing needs (security system) than an individual in a wheelchair needing an accessible unit. In addition, the term "access and functional needs" is a Federal Emergency Management Agency term which was unfamiliar to some agencies and therefore created challenges in providing data.

Key information to gather include:

- Local knowledge and experience from community experts in each target population
- Clear definitions on Act 039 terminology for each target population

RECOMMENDATIONS

- Create target population specific work groups to ensure adequate representation and understanding of housing needs within each target group
- Include other target populations with specific housing needs. For example, include agencies who serve youth; intellectual and developmental disabilities (I/DD), whose caregivers have been actively advocating for more independent and group living options; individuals with neurotrauma, traumatic brain injuries, and other cognitive challenges; and other vulnerable groups in need of stable housing.



appendix
appendix
appendix
appendix

Appendix

26—	APPENDIX A - ACT 039
28—	APPENDIX B - STUDY RESOURCES
33—	APPENDIX C - DEFINITIONS
36—	APPENDIX D - AGENCY INFORMATION

Act 039 (2018)

HOUSE OF REPRESENTATIVES
TWENTY-NINTH LEGISLATURE, 2018
STATE OF HAWAII

H.B. NO. 2748
H.D. 2
S.D. 2
C.D. 1

A BILL FOR AN ACT

RELATING TO HOUSING.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 PART I

2 SECTION 1. (a) The Hawaii housing finance and development

3 corporation shall conduct a study of the housing waitlists in

4 the State and in each county to:

5 (1) Estimate the number of individuals with access and

6 functional needs in Hawaii, including but not limited

7 to frail elderly individuals, individuals with

8 physical or severe mental disabilities, individuals

9 transitioning from incarceration, emancipated foster

10 youth, individuals with an alcohol or drug addiction,

11 individuals with HIV/AIDS, and victims of domestic

12 violence, who are in need of housing;

13 (2) Identify the supportive services that individuals with

14 access and functional needs require, and inventory the

15 number of providers of supportive services in each

16 county;



Appendix A

Act 039 (2018)

Page 2

H.B. NO. 2748
H.D. 2
S.D. 2
C.D. 1

1 (3) Develop an information system to forecast and monitor
2 the number of individuals with access and functional
3 needs who are seeking affordable housing; and

4 (4) Develop effective strategies to assist individuals
5 with access and functional needs in accessing and
6 retaining affordable housing in independent settings.

7 The Hawaii housing finance and development corporation
8 shall consult with community stakeholders to identify any other
9 issues that should be included in the study's scope of work.

10 (b) The Hawaii housing finance and development corporation
11 shall submit a written report of its findings and
12 recommendations, including any proposed legislation, to the
13 legislature no later than twenty days prior to the convening of
14 the regular session of 2019.

15 SECTION 2. There is appropriated out of the general
16 revenues of the State of Hawaii the sum of \$50,000 or so much
17 thereof as may be necessary for fiscal year 2018-2019 for the
18 purposes of this part.

19 The sum appropriated shall be expended by the Hawaii
20 housing finance and development corporation for the purposes of
21 this part.



Appendix B

Email Template for First Round of Contact to Agencies in Fall 2019

Dear _____,

Last June, Act 039 was passed by the legislature requesting that Hawaii Housing Finance Development Corporation (HHFDC) conduct a study of the housing wait lists in the state and county to identify the number of individuals with access and functional needs in Hawaii. Hawaii Housing Finance and Development Corporation (HHFDC) has contracted with the University of Hawaii Center on Disability Studies to develop a housing report that attempts to quantify this need.

In response to Act 039, we are requesting your assistance in identifying the number of individuals with disabilities who need housing. As outlined in Act 039, the following information will be needed:

- 1) *Estimate the number of individuals with access and functional needs in Hawaii. Populations may include but not limited to frail elderly individuals, individuals with physical or severe mental disabilities, transitioning from incarceration, emancipated youth, individuals with alcohol or drug addictions, individuals with HIV/AIDS, and victims of domestic violence.*
- 2) *Identify supportive services needed as well as the inventory of the number of providers of supportive services in each county.*
- 3) *Develop an information system to forecast and monitor the number of individuals with access and functional needs that need housing. (This will happen in a later phase of the project.)*

We request your assistance with #1 above, in identifying and completing the spreadsheet with individuals who currently need housing (from January 2019 to present). Please take a look at the attached spreadsheet and reply via email with any questions or confirm receipt by COB Monday 9/30. Then please complete the spreadsheet and return to Lisa Maetani via email by 10/28/19.

To avoid duplications of individuals, we are requesting that you are the point person for your agency in identifying these individuals. Also, please enter only individuals that did NOT receive a VI-SPDAT assessment that was entered into the Coordinated Entry System.

To preserve confidentiality, we are requesting that you use two letters to represent your organization and a four digit number in sequential order (0001, 0002, etc) for each individual identified in need of housing.

Ultimately, data from this spreadsheet and larger study will be aggregated and shared at the upcoming legislative session.

Thank you again for your support and assisting your members in identifying the need for housing.

Appendix B

Data Requested on Individuals with Housing Needs - Tracking Sheet Items

[Link to tracking sheet template](#)

Agency contact for this entry

Staff person
Email

Individual in need of housing information

ID
Current age
Health plan
Current living arrangement
Living arrangement (comments)
Currently on HPHA waitlist?

Target population (indicate all that apply)

Frail elderly
Physical/mental disability
Incarceration
Homeless
Youth in transition
Alcohol/drug addiction
HIV/AIDS
Domestic violence

Income/Benefits (indicate all that apply)

SSI
SSDI
VA
SNAP
Employment
Rent subsidy (Section 8, Public housing)
None
Other

Location preferences (indicate all that apply)

‘Oahu (Windward, Leeward, Central, Honolulu)
Big Island (East, West, North)
Kaua‘i (East, West, North)
Maui (East, West, North)
Lana‘i
Moloka‘i

Rental size

of household members
Individual or family?
of bedrooms (Studio, 1, 2, 3, ...)

Rental needs (indicate all that apply)

Accessible sidewalk path
Ground floor/elevator
Grab bars
Wheelchair accessible
Widen doorways
Ramp
Electric upgrade
Pets
Other

Barriers (indicate all that apply)

Need help to obtain documents
Homeless
Poor rental history
Poor credit history
Criminal history
Income
Other

Support services needed (indicate all that apply)

Case management
Money management
Meal planning/prep
Shopping
Counseling
Behavioral health
Interpreter
Interacting w/ others
Assistance w/ re-certification packet
Lease compliance
Personal care
House cleaning
Nursing
Wound care
Employment
Community access
Other

Appendix B

Information Provided to Agencies Asked to Complete Housing Needs Tracking Sheet

Access and Functional Needs (AFN): includes individuals who are or have physical, developmental, intellectual disabilities, chronic conditions or injuries and need assistance due to any condition (temporary or permanent) that limits their ability to take action. ... Many individuals within the whole community will have access and functional needs during an emergency. (FEMA)

Frail Elderly: Older adult is unable to perform at least (2) Activities of Daily Living includes eating, dressing, bathing, toileting, transferring in/out of bed or chair, and walking within the home without substantial human assistance including verbal reminding, physical cueing or supervision. (Older Americans Act) Due to a cognitive or other mental impairment, requires substantial supervision because the older adult behaves in a manner that poses a serious health or safety hazard to the older adult or someone else. (Older Americans Act)

IADL: eight (8) Instrumental Activities of Daily Living including preparing meals, shopping, taking medications, managing money, using a telephone, doing heavy housework, doing light housework (laundry), and using public transportation.

Developmental Disabilities: is a severe, long term disability that can affect cognitive ability, physical functioning, or both. These disabilities appear before age 22 and are likely to be life long. The term “developmental disability” encompasses intellectual disability but also includes physical disabilities. Some developmental disabilities may be solely physical, such as blindness from birth. Others involve both physical and intellectual disabilities stemming from genetic or other causes, such as Down syndrome and fetal alcohol syndrome. (NIH)

Intellectual Disabilities: refers to a group of disorders characterized by a limited mental capacity and difficulty with adaptive behaviors such as managing money, schedules and routines, or social interactions. Intellectual disability originates before the age of 18 and may result from physical causes, such as autism or cerebral palsy, or from nonphysical causes, such as lack of stimulation

Neurotrauma: is a head or spine injury caused by a sudden injury. It includes concussions, traumatic brain injuries (TBI), skull fractures, spinal column fractures, and spinal cord injuries (SCI).

Incarceration: confinement in a jail or prison; the act of imprisoning someone or the state of being imprisoned

Emancipated Youth: You're considered a child and under the legal custody of a parent or guardian until you turn 18 (in most states) and granted adult status, also called the "age of majority." ... When a minor is emancipated, through court order or other means, the minor legally becomes an adult.

Alcohol and drug addiction: refer to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. Psychoactive substance use can lead to dependence syndrome - a cluster of behavioral, cognitive, and physiological phenomena that develop after repeated substance use and that typically include a strong desire to take the drug, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state. (WHO)

HIV/AIDS: Acquired Immunodeficiency Syndrome (AIDS) is a chronic, potentially life-threatening condition caused by the Human Immunodeficiency Virus (HIV). By damaging your immune system, HIV interferes with your body's ability to fight the organisms that cause disease. HIV is a sexually transmitted infection (STI). (Mayo Clinic)

Domestic Violence: also called domestic abuse or relationship abuse, is a pattern of behaviors used by one partner to maintain power and control over another partner in an intimate relationship. (The National Domestic Violence)

Appendix B

Email Template to Second Round of Contact to Agencies in Spring 2020

Agency provided spreadsheet data already/or did not previously respond

I am writing a follow up email to gently remind you about our request to complete a short online survey. We have extended the deadlines. Please let us know if you need additional time to complete the items requested.

As you may recall, in Fall 2019, I requested housing data from your agency/organization. This was done in response to Act 039, which was passed by the legislature to conduct a study on housing needs.

As a follow-up, we would like to request completion of an online survey. The purpose of the survey is to understand how your agency/organization tracks housing information. I know this email comes at a challenging time, but there is a benefit to completing this survey. Act 039 recommends the creation of a standardized dashboard to consistently collect and forecast housing needs. With your input, we (at UH Center on Disability Studies) can develop sound policy recommendations to create a feasible system for agencies/organizations to track and report data.

Please click on this link to complete this survey: <https://forms.gle/q3AW4JoHcKsDTarU6>

Again, we appreciate your response during this challenging time. If at all possible, please complete by May 15, 2020.

New agencies/orgs- sending out both spreadsheet and survey

I am writing a follow up email to gently remind you about our request to complete a short online survey and return a spreadsheet via email. We have extended the deadlines. Please let us know if you need additional time to complete the items requested.

Last June, Act 039 was passed by the legislature requesting that Hawaii Housing Finance Development Corporation (HHFDC) conduct a study of the housing wait lists in the state and county to identify the number of individuals with access and functional needs in Hawaii. Hawaii Housing Finance and Development Corporation (HHFDC) has contracted with the University of Hawaii Center on Disability Studies to develop a housing report that attempts to quantify this need.

In response to Act 039, we are requesting your assistance in identifying the number of individuals with disabilities who need housing. Please help with the following:

1. Complete the attached spreadsheet with individuals who currently need housing (from January 2019 to present). Please take a look at the attached spreadsheet and reply via email with any questions.

To avoid duplications of individuals, we are requesting that you are the point person for your agency in identifying these individuals. Also, please enter only individuals that did NOT receive a VI-SPDAT assessment that was entered into the Coordinated Entry System.

To preserve confidentiality, we are requesting that you use two letters to represent your organization and a four digit number in sequential order (AC0001, AC0002, etc) for each individual identified in need of housing.

Ultimately, data from this spreadsheet and larger study will be aggregated and shared at the upcoming legislative session.

2. We would like to request completion of an online survey. The purpose of the survey is to understand how your agency/organization tracks housing information. I know this email comes at a challenging time, but there is a benefit to completing this survey. Act 039 recommends the creation of a standardized dashboard to consistently collect and forecast housing needs. With your input, we (at UH Center on Disability Studies) can develop sound policy recommendations to create a feasible system for agencies/organizations to track and report data.

Please click on this link to complete this survey: <https://forms.gle/q3AW4JoHcKsDTarU6>

Please let me know if you have any questions. Otherwise, we appreciate your response during this challenging time. If at all possible, please complete by May 15, 2020.

Appendix B

Agency Information Requested Through Agency Housing Survey

Agency or Organization Name

TRACKING HOUSING NEEDS

- Does your organization/agency have a specific housing program?
- If yes, what is the name of your housing program?
- What data source(s) does your agency use to track housing needs of your members/clients/consumers?
- What housing need items are tracked?
- What assessment tools are used by your organization to determine a need for housing?
- Besides an assessment tool, what other methods are used by your organization to determine a need for housing among your members/clients/consumers?
- Which islands are covered by your tracking system or database? What is the scope, geographically speaking?
- Does your organization maintain a housing waitlist?
- If a housing waitlist is maintained, what process or criteria are used to get on the waitlist?
- The purpose of Act 39 (2018) is to provide housing need information on an ongoing or periodic basis through a centralized dashboard. In the space below, please describe the steps your agency would need to go through in order to provide housing need information on a regular basis.
- What challenges do you foresee in your organization consistently providing housing needs data through a standardized platform, as proposed by Act 039?

INTER-AGENCY GROUPS OR COLLABORATIONS

- Please identify the housing collaborations/initiatives your agency works with to track and understand housing needs or create opportunities for housing options.
- Describe how your agency typically works with the organization(s) identified above.

CONTACT INFORMATION

- Name
- Email
- Phone

Appendix C

Medicaid/Medicare Living Arrangement Descriptions

Assisted living facility: provides residents personal care and other assistance as needed with Activities of Daily Living and Instrumental Activities of Daily Living but does not provide round-the-clock skilled nursing services. Assisted living facilities generally provide less intensive care than nursing facilities and emphasize resident privacy and choice.

Adult Residential Care Home (ARCH): means a facility providing 24-hour living accommodations to adults, unrelated to the provider, who require at least minimal assistance in activities of daily living (ADLs).

Emergency Shelter : “any facility with overnight sleeping accommodations, the primary purpose of which is to provide temporary shelter for the homeless in general or for specific populations of the homeless.” (HUD)

Foster Home: program provides an alternative to traditional long-term care for members who are unable to care for themselves. The program provides nursing home-level care in a home environment for those who are eligible for Medicaid and SSI.

Homeless: Unsheltered Homeless – Means families or individuals who have a primary nighttime residence that is a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings, including beaches, parks, automobiles, and streets.

Sheltered Homeless – Means families or individuals who lack a fixed, regular, and adequate nighttime residence and have a primary nighttime residence that is a supervised publicly or privately operated shelter designed to provide temporary living accommodations (e.g., emergency or transitional shelter or church) or that is an institution that provides temporary residence for individuals intended to be institutionalized.

At-Risk Homeless – Means families or individuals who are being evicted within forty-five (45) days from private dwelling units or are being discharged within forty-five (45) days from institutions in which they have been residents for more than 30 consecutive days; and (1) no subsequent residences have been identified; and (2) they lack the resources and support networks needed to obtain access to housing.

Chronically Homeless - Means (1) an individual who: (i) Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and (ii) Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years; and (iii) Can be diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability; (2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or (3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

Nursing facility: are institutions that primarily provide: Skilled nursing care and related services for residents who require medical or nursing care; Rehabilitation services for the rehabilitation of injured, disabled or sick persons; and/or Health-related care and services, on a regular basis, to individuals who because of their mental or physical condition require care and services, above the level of room and board, which can be made available to them only through institutional facilities.

Appendix C

HUD Homeless Categories

Category 1: Literally Homeless

- (1) Individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning:
- (i) Has a primary nighttime residence that is a public or private place not meant for human habitation;
 - (ii) Is living in a publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state and local government programs); or
 - (iii) Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution

Category 2: Imminent Risk of Homelessness

- (2) Individual or family who will imminently lose their primary nighttime residence, provided that:
- (i) Residence will be lost within 14 days of the date of application for homeless assistance;
 - (ii) No subsequent residence has been identified; and
 - (iii) The individual or family lacks the resources or support networks needed to obtain other permanent housing

Category 3: Homeless under other Federal statutes

- (3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
- (i) Are defined as homeless under the other listed federal statutes;
 - (ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing during the 60 days prior to the homeless assistance application;
 - (iii) Have experienced persistent instability as measured by two moves or more during in the preceding 60 days; and
 - (iv) Can be expected to continue in such status for an extended period of time due to special needs or barriers

Category 4: Fleeing/Attempting to Flee DV

- (4) Any individual or family who:
- (i) Is fleeing, or is attempting to flee, domestic violence;
 - (ii) Has no other residence; and
 - (iii) Lacks the resources or support networks to obtain other permanent housing

https://files.hudexchange.info/resources/documents/HomelessDefinition_RecordkeepingRequirementsandCriteria.pdf

Appendix C

Medicaid/Medicare Services Descriptions

Behavioral Health Services: supports are provided to meet the health, behavioral health and long term services and support needs of individuals with mental health or substance use disorders.

Case Management: a set of activities to ensure that the individual receives appropriate and necessary services. These activities may include (but are not necessarily limited to) assessment, service plan development, service plan implementation and service monitoring as well as assistance in accessing waiver, State plan, and other non-Medicaid services and resources. Case management sometimes is referred to as “care management,” “service coordination,” or “support coordination.”

Community Access: include services and supports that are identified by the child/parent and the multidisciplinary team as necessary to support a child and family within a community setting based on their strengths and needs.

Counseling: is a collaborative process that involves the development of a confidential professional relationship that focuses on personal problems. The objective of counseling is to help clarify issues, gain insight into individual's feelings and thoughts and deal effectively with problems. Services are often delivered by a clinical mental health counselor, social worker, physician, psychologist, or community support paraprofessional in an office, outpatient clinic, or community setting.

Employment: may be offered to any target group for whom the provision of these services would be beneficial in helping them to realize their goals of obtaining and maintaining integrated community employment.

House Cleaning (Chore Services): assistance with household tasks such as home repairs, yard work, and heavy housecleaning to maintain the individual in the home.

Interacting with Others: adapting efficiently including the ability to read the hidden social rules and then regulate our eye contact, language, emotions, and reactions during while making contact with others.

Interpreter Services: provide language services to those with Limited English Proficiency to assist the individual in understanding and making decisions in accepting or declining services or activities.

Lease Agreement Compliance: A lease is a legally binding contract, laying out the rules agreed upon between the landlord/property owner and the tenant. A lease defines exactly how long you'll be renting the apartment and exactly how much money you'll pay in rent each month (and on what day). Other major points often found include security deposits, first-and-last-months' rent requirement, pet rules, who pays for what utilities, and who is responsible for maintenance and repairs. Even things like overnight guests, pool privileges and parking lot access might get a mention. The individual is expected to follow the rules of the lease agreement to remain in the rental.

Meal Planning/Preparation: means safely planning and preparing food that meets the nutritional needs of the individual.

Money Management: is a financial education program relating to the basics of personal finance, such as opening a checking account and practicing household budgeting.

Nursing Services: services that are reasonable and necessary for the treatment of the individual's illness or injury. Skilled nursing and therapy services are covered when a personalized assessment of your clinical condition shows that the specialized judgment, knowledge, and skills of a nurse or therapist are necessary for the services to be safely and effectively provided.

Personal Care Services: a range of human assistance provided to persons with disabilities and chronic conditions of all ages to enable them to accomplish tasks that they would normally do for themselves if they did not have a disability. Assistance may take the form of hands-on assistance or as cueing so that the person performs the task by him/herself. Such assistance most often relates to performance of activities of daily living (ADLs) and instrumental activities of daily living (IADLs), which includes assistance with daily activities such as eating, bathing, dressing, toileting, transferring, personal hygiene, light housework, medication management, etc. Personal care may be furnished in the home or outside the home. Also known as “personal assistance” or “attendant care.” Such services shall be designed to increase the individual's control in life and the individual's ability to perform activities.

Re-certification housing packet: Annual Re-certification describes the program requirements and procedures for performing the yearly verification and re-certification of family composition and income for continued housing assistance eligibility.

Shopping services: infrequent absences for non-medical reasons, including an occasional trip to the obtain things needed such as household essential items or food products.

Wound Care: access to surgical dressings, topical wound care products, and services to treat, correct, or reduce skin breakdown and health concerns.

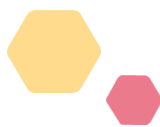
Appendix D



Agencies Contacted

BTG	PIC	UH	Agency/Organization Name	Contact Person	Phone	Email Address
	PIC	1	Access to Independence	Alfonis Sound	369-9521	asound@accesstoindpendence.org
	PIC	2	Alea Bridge	Nicole Winter	694-0311	nwinter@aleabridge.org
	PIC	3	Aloha Care	Val Gourley	973-0573	vgourley@alohacare.org
	PIC	4	Aloha Independent Living Hawai'i	Roxanne Bolden	497-2350	rbolden@alohailhawaii.org
		5	ARC of Hawai'i	Christine Melendes	737-7995	christinem@thearcinhawaii.org
	PIC	6	Block by Block	Jennifer Nakayama	923-9243	mail@waikikibid.org
BTG		7	Bridging the Gap	Brandee Menino	933-6013	bmenino@hopeserviceshawaii.org
	PIC	8	Care Hawai'i, Inc		533-3936	info@carehawaii.info
BTG	PIC	9	Catholic Charities Hawai'i	Jillian Okamoto	527-4752	jillian.okamoto@catholiccharitieshawaii.org
	PIC	10	Child and Family Services	Karen Tan	681-1460	development@cfs-hawaii.org
	PIC	11	City and County of Honolulu, Office of Housing	Jayne Lee	768-7379	jlee2@honolulu.gov
	PIC	12	Community Empowerment Resources		942-7884	info@cerhawaii.org
		13	Department of Public Safety	Jason Kim	587-1365	jason.a.kim@hawaii.gov
		14	Department of Education	Toby Portner		toby.portner@k12.hi.us
		15	DOH Adult Mental Health Division	Erin Snyder	453-6772	erin.snyder@doh.hawaii.gov
		16	DOH Alcohol and Drug Abuse Division	John Valera	692-7506	john.valera@doh.hawaii.gov
		17	DOH Developmental Disabilities Division	Chelsea Ko	733-2150	Chelsea.ko@doh.hawaii.gov
		18	DOH Harm Reduction Center Gregory House	Ray Higa	733-8396	ray.higa@doh.hawaii.gov
	PIC	19	Domestic Violence Action Center	Sydney Proctor	531-3771	sydneypp@stoptheviolence.org
	PIC	20	EPIC 'Ohana	Mitchell Odo	748-7055	modo@epicohana.org
		21	Executive Office on Aging	Caroline Cadirao	586-7273	caroline.cadirao@doh.hawaii.gov
	PIC	22	Family Promise Hawai'i	Samantha Church	548-7478	info@familypromiseshawaii.org
		23	Hale 'Opio	Rhye Daub	977-8213	ptayal@haleopio.org
	PIC	24	Hale Kipa	Patricia Baroody	754-9189	pbaroody@halekipa.org
		25	Hawai'i County Housing Agency	Desiree Moore	959-4642	desiree.moore@hawaiicounty.gov
		26	Hawai'i Disability Rights Center	Verna Waikiki	275-4020	verna@hawaiidisabilityrights.org
BTG		27	Hawai'i Island Home for Recovery		934-7852	hihr@hawaii.rr.com
	PIC	28	Hawai'i Kai Homeless Task Force	Mike Goodman	428-9779	mikegoodman72@outlook.com
		29	Hawai'i Public Housing Authority	Sarah Beamer	832-4693	Sarah.E.Beamer@hawaii.gov
BTG		30	Hawai'i Rise			contact@hawaiirisefoundation.com
		31	Hawai'i Youth Correctional Facility	Richard Mello		RMello@dhs.hawaii.gov
	PIC	32	Hawai'i Youth Services Network	Judith Clark	489-9549	jclark@hysn.org
		33	Hina Mauka	Alan Johnson	236-2600	moreinfo@hinamauka.org
	PIC	34	HMSA	Christine Jamila	948-5384	chris_jamila@hmsa.com
	PIC	35	Honolulu Community Action Program	Robert N.E. Piper	521-4531	hcap@hcapweb.org
BTG		36	HOPE Services Hawai'i	Brandee Menino		bmenino@hopeserviceshawaii.org

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Agencies Contacted

BTG	PIC	UH	Agency/Organization Name	Contact Person	Phone	Email Address
	PIC	37	Housing Solutions, Inc.	Terry Brooks	973-0050	contact@hsiservices.net
	PIC	38	Institute for Human Services	Connie Mitchell	447-2800	conniem@IHShawaii.org
		39	Judiciary	Calvin Ching		Calvin.c.ching@courts.hawaii.gov
	PIC	40	Kaiser Foundation Health Plan	Jolaine Hao		Jolaine.LI.Hao@kp.org
	PIC	41	Kalihi Palama Health Center	Emmanuel Kintu	791-6346	
		42	Kaua'i County Housing Agency	Jennifer Toguchi	241-4440	jtoguchi@kauai.gov
BTG		43	Kaua'i Economic Opportunity		245-4077	
	PIC	44	Kealoha West O'ahu		782-4232	
	PIC	45	Kinai'Eha		489-4003	admin@kinaieha.org
	PIC	46	Ko'olauloa Health Cente	Harry Waa	233-9231	hwaa@koolauloachc.org
		47	Maui County Housing Agency	Gail Rumbaoa	270-7751	gail.rumbaoa@comau.hi.us
		48	Maui Youth and Family Services	Jennifer Slaughter	579-8414	jslaughter@myfs.org
	PIC	49	Mediation Center of the Pacific	Tracey Wiltgen	521-6767	Tracey@mediatehawaii.org
BTG	PIC	50	Mental Health Kōkua	Jim Carter	737-2823	Jcarter@MHKawaii.org
BTG		51	Neighborhood Place of Puna		965-5550	
	PIC	52	North Shore Mental Health	Dr. Dan Kehoe	638-8700	nsmh@northshoremmentalhealth.com
	PIC	53	'Ohana Health Plan	Carene Chrash		carene.chrash@wellcare.org
	PIC	54	Parents & Children Together	Darlene Pires	585-7944	DPires@pacthawaii.org
	PIC	55	Partners In Care	Laura Thielen	543-2282	lthielen@auw.org
	PIC	56	People Attentive to Children Hawai'i	Brandi Oshiro	550-3862	BOshiro@PATCH-HI.org
	PIC	57	Project Vision Hawai'i	Darrah Kauhane	201-3937	admin@projectvisionhawaii.org
	PIC	58	Queens Medical Center - Navigation Program	Tiffany Mukai	691-4522	Tmukai@queens.org
	PIC	59	Residential Youth Services & Empowerment	Carla Houser	498-5180	info@rysehawaii.org
	PIC	60	Revive & Refresh	Craig Shoji	779-6738	
	PIC	61	River of Life Mission	Bob Marchant	524-7656	info@riveroflifemission.org
BTG	PIC	62	Salvation Army	Eloisa Martin	732-2802	Eloisa.martin@usw.salvationarmy.org
		63	Salvation Army - Family Intervention Services	Kristi Kekoa	323-8081	kristi.kekoa@usw.salvationarmy.org
	PIC	64	Shelter of Wisdom	Carolina	383-9498	shelterofwisdom@gmail.com
	PIC	65	Steadfast Housing Development Corporation	Linda Ahue	599-4309	lahue@steadfast-hawaii.org
BTG	PIC	66	U.S. Veterans	Kimberley Cook	630-0771	Kcook@usvetsinc.org
	PIC	67	United Health Care	David Heywood	535-1010	david_w_heywood@uhc.com
	PIC	68	Veteran's Affairs	Andrew Dahlburg	433-0335	andrew.dahlburg2@va.gov
	PIC	69	Waianae Comprehensive Health Center	Leina/Kawai	697-3300	kcalarruda-nunes@wccchc.com
	PIC	70	Waikiki Health Center	Tooa Liki	922-4787	Tliki@waikikihealth.org
BTG	PIC	71	Women In Need	Kim	486-1996	Kim.P.Winhi@gmail.com
	PIC	72	YWCA O'ahu	Noriko Namiki	941-2231	fernhurst@ywcaoahu.org

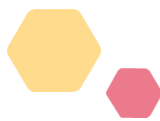
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Target Population Data Provided by Agency

UH	Agency/Organization Name	Frail elderly	Physical/sexual/mental disability	Transition from incarceration	Emancipated foster youth	Alcohol/drug addiction	HIV/AIDS	Domestic violence	Homeless
1	Access to Independence	x	x						
3	Aloha Care	x	x			x	x		x
4	Aloha Independent Living Hawai'i	x	x						
5	ARC of Hawai'i	x	x						
7	Bridging the Gap	x	x	x		x	x	x	x
9	Catholic Charities Hawai'i	x	x						x
11	City and County of Honolulu, Office of Housing								
14	Department of Education								x
16	DOH Alcohol and Drug Abuse Division					x			
18	DOH Harm Reduction Center Gregory House		x	x		x	x		
19	Domestic Violence Action Center							x	
21	Executive Office on Aging	x							x
24	Hale Kipa				x				x
25	Hawai'i County Housing Agency	x							x
29	Hawai'i Public Housing Authority	x	x						
31	Hawai'i Youth Correctional Facility			x	x	x		x	
34	HMSA	x	x	x	x	x	x	x	x
39	Judiciary								
40	Kaiser Foundation Health Plan		x		x	x		x	x
42	Kaua'i County Housing Agency	x							x
47	Maui County Housing Agency	x							x
48	Maui Youth and Family Services		x		x			x	
49	Mediation Center of the Pacific								
52	North Shore Mental Health								x
53	'Ohana Health Plan	x	x	x					x
54	Parents & Children Together							x	
55	Partners In Care		x	x		x	x	x	x
63	Salvation Army - Family Intervention Services		x		x				x
65	Steadfast Housing Development Corporation	x	x			x		x	
67	United Health Care	x	x	x		x	x		

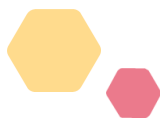
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Type of Information Provided by Agency

UH	Agency/Organization Name	Survey	Estimate	Format	Geographic coverage	Data source
55	Partners In Care	Y	13851	Aggregate	O'ahu	Based on Data entered into standardized Coordinated Entry System by partner agencies
29	Hawai'i Public Housing Authority		7682	Aggregate	Statewide	Housing Choices Voucher Program, Public Housing Waitlist records
7	Bridging the Gap		3802	Aggregate	Neighbor islands	Catholic Charities Hawai'i, Family Life Center, Hawai'i Rise, Hawai'i Island Home for Recovery, HOPE Services, Kaua'i Economic Opportunity, Ka Hale A Ke Ola, Mental Health Kōkua, Neighborhood Place of Puna, Salvation Army, USVETS, Women in Need
14	Department of Education	Y	3604	Aggregate	Statewide	McKinney Vento Act definition and based on student registration form completed by guardian/parent
11	City and County of Honolulu, Office of Housing	Y	1500	Aggregate	O'ahu	HUD Housing Choice Voucher Program waitlist
67	United Health Care	Y	1177	Aggregate	Statewide	United Health Care records, Community Housing Supports Unit (HI Community Integration Pgm)
16	DOH Alcohol and Drug Abuse Division	Y	895	Aggregate	Statewide	ADAD records (FY 2018), currently just the Clean and Sober Home Registry
65	Steadfast Housing Development Corporation	Y	826	Aggregate	Statewide	Permanent Supportive Housing, Semi-Independent Living, 8-16/24 Hour Group Homes
4	Aloha Independent Living Hawai'i	Y	238	Aggregate	Statewide	Aloha Independent Living Hawai'i records
1	Access to Independence	Y	114	Aggregate	O'ahu	Kauhale (Housing) Program
24	Hale Kipa	Y	80	Aggregate	O'ahu	Imua Kakou and Independent Living Program records
49	Mediation Center of the Pacific		73	Aggregate	Statewide	Mediation Center of the Pacific records
39	Judiciary		73	Aggregate	O'ahu	Makana O Ke Akua and Women in Need programs
52	North Shore Mental Health	Y	15	Aggregate	O'ahu	NSMH records
3	Aloha Care		1944	Listing	Statewide	Aloha Care records
18	DOH Harm Reduction Center Gregory House	Y	321	Listing	O'ahu	Gregory House, Community Residential Program, GH Programs, Housing Assistance Programs
34	HMSA	Y	206	Listing	Statewide	HMSA Health Plan records, Community Integration Services
5	ARC of Hawai'i		72	Listing	O'ahu	Individuals who are currently on their waitlist for housing
54	Parents & Children Together	Y	67	Listing	O'ahu	Domestic Violence Emergency and Transitional Shelters
21	Executive Office on Aging	Y	49	Listing	Statewide	Kaua'i, Maui, and Hawai'i County Housing Office records shared w/ EOA for this study
40	Kaiser Foundation Health Plan	Y	40	Listing	Statewide	Kaiser Health Plan records, Community Integration Services
53	'Ohana Health Plan	Y	34	Listing	Statewide	'Ohana Health Plan records, Community Integration Services
31	Hawai'i Youth Correctional Facility	Y	28	Listing	O'ahu	Contracted Independent Living Programs
63	Salvation Army - Family Intervention Services	Y	5	Listing	Big Island	Imua Kakou, Independent Living Program, Higher Ed in West Hawai'i (IHI provider) records
48	Maui Youth and Family Services	Y	4	Listing	Maui (island)	Intervention Services (IHI provider) records, Transitional Living Program
47	Maui County Housing Agency			Listing	Maui (county)	Maui County Housing records

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Type of Information Provided by Agency

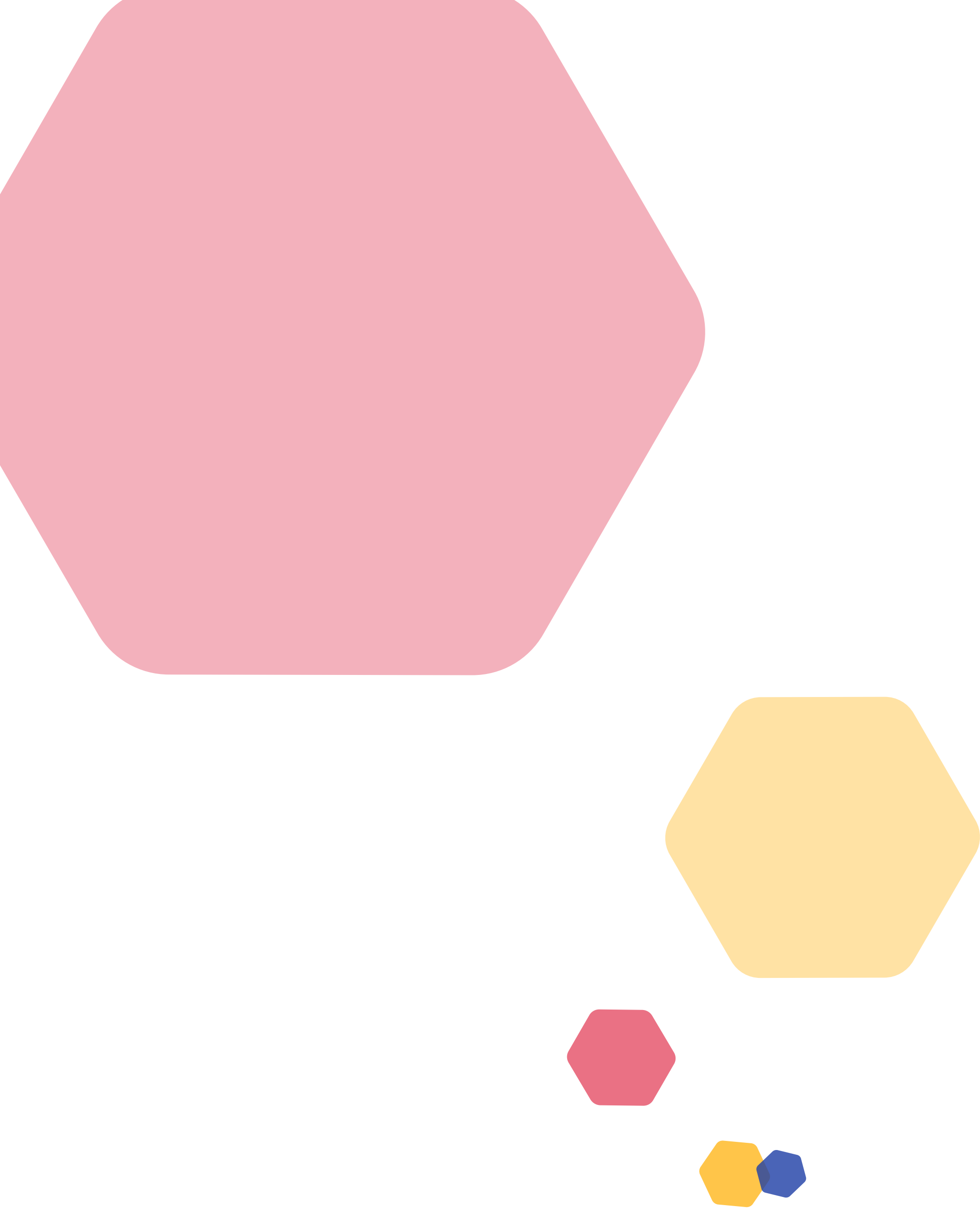
UH	Agency/Organization Name	Survey	Estimate	Format	Geographic coverage	Data source
42	Kaua'i County Housing Agency			Listing	Kaua'i	Kaua'i County Housing records
25	Hawai'i County Housing Agency			Listing	Big Island	Hawai'i County Housing records
19	Domestic Violence Action Center		192	Listing (partial)	O'ahu	Advocacy Program records (long term case management, does not include legal clients)
9	Catholic Charities Hawai'i	Y	139	Listing (partial)	O'ahu	Housing Assistance and Referral Programs (HARP) Division
15	DOH Adult Mental Health Division	Y			Statewide	Does not track housing needs
17	DOH Developmental Disabilities Division	Y			Statewide	Does not track housing need data (NCI consumer survey is the closest info)
2	Alea Bridge	Y			O'ahu	The Haleiwa Project, RRH, PSH, TH, TBRA, ESG
33	Hina Mauka	Y			O'ahu	Hina Mauka records
62	Salvation Army	Y			O'ahu	Rapid Rehousing
64	Shelter of Wisdom	Y			O'ahu	No additional data to report b/c already entered in HMIS, VISPDAT, CES
72	YWCA O'ahu	Y			O'ahu	Homebase and Work Furlough
8	Care Hawai'i, Inc				Statewide	No response
10	Child and Family Services				Statewide	No response
12	Community Empowerment Resources				Statewide	No response
13	Department of Public Safety				Statewide	Does not track housing need data
26	Hawai'i Disability Rights Center				Statewide	No response
32	Hawai'i Youth Services Network				Statewide	Not a direct service provider
38	Institute for Human Services				Statewide	No response
50	Mental Health Kōkua				Statewide	No response
56	People Attentive to Children Hawai'i				Statewide	No response
57	Project Vision Hawai'i				Statewide	No response
66	U.S. Veterans				Statewide	No response
68	Veteran's Affairs				Statewide	Unable to provide estimate
20	EPIC 'Ohana				O'ahu, Big Island	Unable to provide estimate
6	Block by Block				O'ahu	No response
22	Family Promise Hawai'i				O'ahu	No response
28	Hawai'i Kai Homeless Task Force				O'ahu	Policy organization, not a direct service provider
35	Honolulu Community Action Program				O'ahu	No response
37	Housing Solutions, Inc.				O'ahu	No response
41	Kalihi Palama Health Center				O'ahu	No response
44	Kealoha West O'ahu				O'ahu	No response
45	Kinai'Eha				O'ahu	No response
46	Ko'olauloa Health Cente				O'ahu	No response
58	Queens Medical Center - Navigation Program				O'ahu	No response
59	Residential Youth Services & Empowerment				O'ahu	No response
60	Revive & Refresh				O'ahu	No response
61	River of Life Mission				O'ahu	No response
69	Waianae Comprehensive Health Center				O'ahu	No response
70	Waikiki Health Center				O'ahu	No response
71	Women In Need				O'ahu	No response
23	Hale 'Opio				Kaua'i	No response
43	Kaua'i Economic Opportunity				Kaua'i	No response
27	Hawai'i Island Home for Recovery				Big Island	No response
30	Hawai'i Rise				Big Island	No response
36	HOPE Services Hawai'i				Big Island	No response
51	Neighborhood Place of Puna				Big Island	No response



Acknowledgments

The ability to conduct this study was made possible by the participation and responsiveness of the 37 agencies that provided housing need data or agency tracking information.

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