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**Connecticut Supportive Housing Assessment and Acuity Index
Guidance and Manual**

May 31, 2013

Overview

Assessment Purpose

The supportive housing assessment provides information to assist tenants and service providers in planning actions that will help tenants strengthen housing stability, promote independence and improve their quality of life. It also notes the strengths, skills and supports a tenant has that may be helpful in achieving his or her vision of the future.

The assessment also provides information about a person's housing history, past and current mental health and substance use history, health needs and other information and experiences that may be useful to consider when developing service plan goals. It also notes current service providers, employment, medications and contact information all of which are needed to effectively provide supportive services.

Acuity Index Purpose

The supportive housing acuity index provides a systematic way to assess a person's level of independence and support needs in a variety of areas related to housing stability, income and benefits, health, and access to supportive services/resources. The purpose of the acuity index is to help guide the tenant and service staff in the development of service plan goals.

It can also be used to help identify tenants who might wish to consider other housing options with community-based supports outside of the supportive housing program. In addition, the acuity index can be used by supervisors to determine case load sizes, identify supervision needs, evaluate the distribution of work and other employee/agency needs.

Assessment Process

The initial assessment must be completed within 30 days of program entry. Program entry is defined as the day of initial intake and formal acceptance into the program. After the initial assessment, follow-up assessments must be completed at least every 6 months.

Both the initial and follow-up assessments must be signed and dated by the staff member who is directly working with the tenant and the supportive housing program supervisor. Although the Connecticut Supportive Housing Quality Standards do not require a tenant to sign the assessment, an individual agency can choose to have a tenant sign if the agency feels it is helpful.

Completing the Assessment and Acuity Index

The assessment and acuity index can be completed in multiple stages. The case manager must gather and examine all supporting documents that are available and accessible. If additional information is needed, the case manager should request this information from other providers after obtaining written consent from the tenant.

Supporting information is especially important to have for the initial assessment and can include assessments and discharge information from other agencies, the supportive housing application, and information from other providers. Completing a follow-up assessment and acuity index should also include examining progress notes from the previous 6 months.

After a case manager has incorporated information from other sources and progress notes, he or she must then meet with the tenant to gather additional information. These meetings should involve a series of conversations and can be done over time according to the preferences of the tenant.

Sometimes a tenant may refuse to participate in these conversations. If a tenant refuses, the case manager should rely on information from progress notes and supporting documents and should complete the assessment and acuity index as thoroughly as possible. Tenant refusal should be noted and the service plan should include a detailed outreach and engagement plan.

The most important purpose of the assessment is to provide an opportunity for a case manager to get to know the tenant and to examine the experiences, strengths and hopes of the tenant. This is done to assist the tenant in developing service plan goals that are meaningful to the tenant and that reflect his or her hopes and aspirations.

Example: A case manager has gathered information from other sources, has looked at progress notes and has met with the tenant once. The case manager had another meeting with the tenant scheduled, but the tenant now cannot make it. The assessment and acuity index must be completed by tomorrow.

Resolution: The case manager should move forward and complete the assessment noting any information that is still outstanding or missing. For the acuity index, the case manager should choose levels based upon the information that is available. Additional information from the tenant can be considered when developing service plan goals and can be noted in progress notes for incorporation in the next assessment and acuity index.

Finalizing the Assessment and Acuity Index

The assessment must be finalized once a case manager feels there is enough information to help a tenant develop meaningful service plan goals and within the timeframe established by quality assurance standards. Any information that is missing or not applicable must be noted on the assessment portion. If information is missing that relates to the acuity index, the case manager should complete the index as best as possible. No portion of the assessment should be left blank and that the acuity index must be fully completed.

The key to completing the assessment is to gather as much information as possible to inform service plan goals. Case managers should begin developing the six month assessment update to allow for plenty of time to conduct outreach, gather information and complete the assessment form. In some instances the case manager may not be able to get exact dates and details. In these situations, the case manager should move on and complete the assessment without these details.

Example: A case manager is missing the dates that a person was hospitalized, but he or she knows it occurred sometime in 2008. Despite attempts to get additional information from the hospital and from the tenant, the precise dates are not known.

Resolution: The case manager should note that the tenant was hospitalized in 2008 and should use this information to assist in assessing needs and to develop service plan goals.

Notes about the Acuity Index

It is important to recognize that the acuity index values will change over time – sometimes in a negative direction. If a tenant's score is high in one area, it may be lower at the next assessment. This does not necessarily point to an issue with the quality of services, but may simply reflect a change in the needs or experiences of the tenant.

The family portion of the acuity index is intended for use with family providers and for tenants in other programs who have children living with them. This section of the acuity index can also be used if a tenant often provides care for a child in his or her home, but this is not mandatory.

Assessment Sections

Tenant Information:

DDaP Periodic Assessment and DDaP Supportive Housing Assessment

This section includes information that providers are required to report to DMHAS every six months through DDaP.

HMIS Domestic Violence History

The history of domestic violence question is taken directly from the Homeless Management Information System (HMIS) and needs to be reported for all tenants entering supportive housing. If a program reports data through HMIS, other required data elements are collected through the standard application for supportive housing.

Members in household other than tenant (if applicable)

The listing of all persons in the household is necessary for service planning purposes. Supportive housing providers should look at the entire household when assessing service needs. This includes noting the name and address of schools and/or day care for children and noting any special service needs of family members.

Nearest relative or friend not living with tenant/others to contact for emergencies or to reach tenant

Listing a tenant's nearest relative or friend not living with the tenant provides the case manager with a contact to reach out to if there is an emergency. It also provides a point of contact if a case manager is unable to reach a tenant.

Current Medications

The current medications that a tenant is taking must be noted and updated during each assessment. Case managers may choose to update these between assessments as needed or update them on the chart face sheet. Medications are noted in order to give case managers background information to help tenants understand their medications and any possible side effects or interactions.

Sometimes medications can be adjusted to help minimize side effects that may prove to be a barrier to some actions a tenant may want to take. Case managers are not responsible for prescribing and must encourage tenants to take medications as prescribed. They should also encourage tenants to work with their prescribers to better understand each medication including the benefits and disadvantages of taking them and how medications can contribute to achieving their goals.

Specific questions a tenant might ask his or her prescriber include:

- Why is this medication being used?
- What is the name of the medication?
- What are the side effects that I might experience?
- Is there any additional information I can access?
- How might using this medication support my goals?
- Can dosages/times be adjusted to lessen any side effects?

In some cases a tenant may not wish to share information regarding medications with case managers. If a tenant refuses, the case manager should encourage the tenant to take his or her prescribed medications and continue to attempt engagement around medication issues.

Housing History and Information

History of housing/homelessness in the past 5 years (if first assessment):

In this section, case managers should note the tenant's history of housing and homelessness. Specifically, case managers should focus on the factors that contributed the tenant's past episodes of homelessness.

This history is useful in assisting newly housed tenants in focusing on housing stability. Some questions and information that may be useful include asking a tenant what factors, influences or experiences he or she believes contributed to his or her becoming homeless. With this information, case managers can work with the tenant to identify goals and actions that will strengthen the tenant's ability to maintain housing.

Some specific questions to think about include:

- How many episodes of homelessness did the tenant experience in the past five years?
- How long was the tenant homeless?
- When the tenant was homeless, did he or she stay in a shelter or on the streets?
- In the past five years, was the tenant a resident of an institution? Was he or she incarcerated?
- When the tenant was not homeless, did he or she have an apartment?
- If a tenant had his or her own apartment, was there a subsidy for the unit?
- Did the tenant ever stay with family or friends?
- Was the tenant ever evicted? If so for what reason?

Current landlord, and rental payment history:

This section of the assessment identifies the name and contact phone of the tenant's current landlord. It also identifies the length of time currently housed, the number of late rent payments for the past 12 months and the length of time the tenant has successfully maintained a lease.

The length of time a lease was maintained should include all leases with all landlords. For example, if a tenant in a scattered site program successfully moved to another unit after a year of holding a lease and he or she has successfully held a lease in the new apartment for 4 months, the length of time should be 16 months.

Sometimes a tenant may have a pattern of breaking leases with landlords. The case manager should look at the circumstances of ending these leases to determine if this pattern reflects circumstances or behaviors that may impact housing stability. The case manager should note his or her evaluation in the assessment.

Issues with landlord and/or neighbors:

In this section, the case manager should note any problems, complaints or damage that have occurred during the past 12 months. It should be noted if the tenant was evicted at any time in the past 12 months or if the tenant's landlord threatened eviction during this time period.

If this is the first assessment, the case manager can either note any information that he or she might have regarding the tenant's housing history or can indicate N/A. If the assessment is the first six month follow-up, the case manager should complete the information looking back over the prior six months.

Circumstances that impact ability to maintain housing:

The case manager should note any circumstances or problems that a tenant is facing that might make the tenant more vulnerable to losing his or her housing.

Some specific questions to think about include:

- Has the tenant recently stopped taking medications prescribed for a mental health disability?
- Has he or she stopped participating in any services that have been supportive in the past?
- Was there a recent job loss, a decrease in hours worked or another income loss/decrease?
- Has the tenant experienced significant health problems recently?
- Did a change in a relationship with a significant person who was supportive occur?
- If a tenant uses substances, has substance use increased?
- Has a tenant's financial obligations increased?
- Has the tenant been arrested?
- Are people who are not supportive of the tenant involved in his/her daily living?

Daily Living Skills Challenges

This section includes a checklist of daily living skills challenges that a tenant may be facing.

Employment and Education

In this section, the case manager notes the employment status of the tenant including the employer and number of hours worked per week. Participation in an education program should be also be described in this section.

This portion of the assessment also asks about the tenant's employment and education goals. Sometimes an individual has clear and concrete goals about employment. In this case, the goals can be recorded and the case manager can talk with the tenant about placing these goals in the service plan.

An individual may not have concrete or clear goals related to employment or education. In this situation, the case manager should take some time to ask the tenant what he or she might want to do regarding employment or education. This can also include volunteering.

Some of the questions a case manager might ask someone who is not working or involved in an educational program include:

- What type of work have you done in the past?
- Are you interested in returning to that line of work?
- If you were working, what type of job do you think you would like to have?
- What type of job(s) would you not want?
- What are some of your talents that would help you get a job or would be useful in a job?
- If you want to return to school, where would you like to go and what might you want to study?

People often have concerns about working and how working might impact the benefits they are receiving or how a disability might impact their ability to work. A tenant might also be concerned about how past involvement with the criminal justice system might be a barrier to getting a job. In all these scenarios, the case manager should offer to connect the tenant with an agency or individual who would be able to talk to him/her about these concerns.

Tenants who are working might be very happy with their job and/or employer. Others might want to explore other employment options. Some questions a case manager might ask those who are working include:

- Are you interested in looking at other types of jobs?
- Would you like another type of job or work in another field?
- Is there another job where you are working that you would like to have?
- What is your dream job?

Medical and Health

The medical and health section provides the case manager with information concerning the tenant's use of health care systems, current medical insurance and health problems he or she might be experiencing.

In the provider section, there are spaces to indicate a tenant's primary care provider, dental provider and any specialists the tenant may be working with. In some instances a tenant may see a specialist for both primary and specialty care. If this is the case, the specialist should also be identified as the primary care provider. The last appointment and next appointment must also be noted.

Current health challenges, medical problems and known allergies are also included in the section. Case managers should also provide a summary of any hospitalizations related to physical health that occurred in the past. They should also include a summary of any current medical treatments a tenant is undergoing.

In some cases a tenant may not wish to share medical information with case managers. If the tenant does not wish to share, the case manager should encourage the tenant to continue to work with his or her health care provider and continue to attempt engagement around health related issues.

Behavioral Health, Substance Use and Trauma

If the tenant participates in behavioral health services, this section includes contact information for clinicians, case managers and/or other behavioral health and/or substance use providers. Like the medical and health section, the behavioral health contact information section includes places to indicate the last and next appointment.

The case manager must indicate past and current mental health and substance use diagnoses in this section. In addition, there are sections to indicate behavioral health and substance use treatment history.

The trauma section includes an introduction that case managers can use when speaking with tenants. It was developed to assist staff in framing conversations and to let tenants know that they can talk about life experiences that may be very disturbing. At the same time, it reinforces that the power to talk about traumatic experiences rests solely with the tenant and that the level and nature of the information a tenant chooses to provide or discuss is up to the tenant.

Case managers should look for information regarding a tenant's history to see if there is any indication of experiences that might lead to trauma. Some areas to look for or some examples that case managers might want to talk to a tenant about include:

- Witnessing or experiencing something that put one's life or the life of another in danger or where the tenant or someone else was seriously hurt
- Witnessing or experiencing a bad accident, a fire, flood or other disaster

- Experiencing a life threatening illness
- Been in a war zone or experienced war
- Been attacked physically or with a weapon
- Verbal or emotional abuse
- Been forced to have sex and/or been touch inappropriately in a sexual manner
- Been discriminated against or harmed because of gender, culture, religion, skin color or sexual orientation
- Any other experience that was extraordinarily stressful or upsetting

It is very important that case managers emphasize that a tenant can always come and talk about traumatic experiences any time the tenant wants to. In addition, the case manager should also offer to help the tenant access resources and services in the community that may be helpful.

Financial Resources and Obligations

In this section, the case manager notes the income sources and outstanding debts for the tenant and all persons living in the tenant's household. There is also a section to list the name and contact information for the tenant's Conservator of Person and/or Finance and Representative Payee.

Legal Involvement

This section includes contact information for attorneys, legal services providers, and supervision officers for tenants who are involved in the legal and/or child welfare system. The section also provides a place to note a tenant's history of legal involvement. This would include convictions, history of incarceration, current status of pending charges and current involvement with the child welfare system.

Services

The services section provides a space to note the services or activities that the tenant would like to participate in and access. This can include services provided by behavioral health agencies, employment supports, parenting supports and any other resource in the community that the tenant would find helpful.

Since there are a wide variety of services and resources a person can access, the case manager should review the services and resources available in the community with the tenant. The case manager should emphasize the benefits that each service or resource could offer.

Natural Supports

Current supportive persons and or groups are noted in this section. The case manager should also note the ways that the tenant is involved in his or her community. This can include involvement with support groups, religious activities, community centers and activity groups that are not provided in the behavioral healthcare system.

Interests and Hobbies

This section provides a space for case managers to note a tenant's interests and activities. Case managers and tenants should explore how these interests can help with community connections and can support a tenant in achieving his or her goals.

Strengths and Barriers to Accessing Resources and/or Services

Positive and negative factors that influence a tenant's ability to access services and resources are noted in this section. This can include personal factors such as a tenant's motivation and community factors such as transportation and the availability of services and/or resources.

Additional Information and Summary Notes

In this section, the case manager can note additional information that is useful in assessing a tenant's needs and planning for services. Summary notes provide a space for summing up needs and findings from the assessment. Completion of these two sections is optional according to the preferences of the case manager and his or her supervisor. If these sections are not being used, the person completing the assessment should note that the section is not being used.

Acuity Index

The acuity index categorizes tenant self sufficiency and independence on a four point scale. The scale ranges from a 0, representing low self sufficiency and independence, to a 3, representing the highest level. The index is divided into the following three sections: 1) Housing, Income and Benefits; 2) Health, Supportive Services and Resources; and 3) Parenting and Child Services.

Housing

Rent Payment: The case manager looks at how often tenant or a tenant's rep payee has paid rent on time in the past 12 months. For newly housed people coming from homelessness, 0 level should be chosen since the tenant has not paid rent in the past six months.

Utility Bill Payment: The number of times a tenant has paid his or her major utility bills such as electricity and heat on time during the past year is assessed. If utilities are included in the tenant's rent, level 3 should be chosen.

Rent Arrears: In this section, the index examines any rent arrears that a tenant might have together with his or her willingness to participate in a payment plan. If there are no rent arrears, level 3 should be chosen.

Utility Arrears: Similar to rent arrears, this section looks at total utility arrears together with payment plan status. If there are no utility arrears, level 3 should be chosen.

Safe Living Environment: Safe Living Environment looks at how often unsafe or disruptive activities in the tenant's apartment have occurred. The case manager should indicate the number of times the police have been called or the landlord notified that unsafe conditions or situations are present.

Lease (include all leases if tenant moved): This section examines the total length of time a tenant has successfully held a lease. This should include leases with all landlords if the tenant has made a positive move to another apartment. A case manager should also use his or her judgment when considering how to rate a tenant who continually breaks his or her lease with landlords, even if landlords agrees. In these instances, a case manager should look at the circumstances to see if this pattern reflects circumstances or behaviors that may impact housing stability.

Income and Benefits

Stable/Consistent Source of Cash Income: This section evaluates the tenant's level of cash income including the length of time he or she has been receiving it.

Benefits: The receipt of benefits that a person is eligible for is the focus of this section. If a tenant does not qualify for benefits or is receiving everything that he or she is entitled to, the case manager should choose level 3.

Employment: The employment section measures the length of time employed and, for those not employed, the level of motivation to become employed. Level 3 should be selected for those who cannot work due to disability provided that disability benefits are received.

Debt: This section looks at the level of outstanding debt a tenant has as well his or her ability to meet debt payment obligations.

Health

Mental Health Care Use: For tenants who have an identified mental health care need, this section looks at how often he or she accesses services. The type of service will vary according to the specific needs of the tenant. For individuals who have no identified need for services or those who are very well connected to services, the case manager should choose level 3.

Primary/Specialty Health Care Use: This section evaluates how a tenant uses primary health care resources and the level to which he or she follows standard guidelines for treatment of chronic conditions (if applicable) and preventive health care.

Medication Adherence: For tenants who are taking medications, this section examines whether a tenant takes his or her medication as prescribed. This section relies on tenant self-reporting and includes all medications a tenant should be taking including those prescribed for chronic health conditions.

Harm Reduction (such as substance use, gambling, risky sexual and other behaviors): Harmful behaviors and the tenant's adoption of behaviors that will lessen risk are assessed in this section. For tenants that engage in behaviors that put them at risk of harm, the case manager is asked to indicate to what level the tenant is taking steps to reduce the risks and harm associated with specific behaviors.

Supportive Services and Resources

Connection to Community Supports: This section evaluates the level of community supports a tenant has outside of the supportive housing program. It also looks at the motivation of the tenant in accessing additional supports.

Crisis Intervention: In this section the number of crises a tenant has experienced in the past 12 months and his or her willingness to work with the case manager and/or other providers in addressing the crisis is examined.

Life Skills: The life skills section evaluates how independently a tenant can conduct standard activities of daily living.

Legal: This section examines any outstanding legal issues or obligations that a tenant might have and includes an evaluation of the level of compliance with any criminal justice supervision requirements.

Mobility & Transportation: Access and reliability of transportation is the focus of this section. The evaluation includes public transportation and private transportation if the tenant has access to a vehicle.

Parenting and Child Services

Childcare: This section looks at the level of childcare needs and the accessibility of childcare for children in the household.

Children's Education: The education section examines if children are enrolled in school and the level of attendance and participation.

Parenting: This section assesses the adequacy of parenting skills.

Child Welfare Involvement: For families who are involved with the child welfare system, this section examines the level of involvement with child welfare services including the level of participation in services.

Children with Special Needs: The special needs section examines the level of connection to and participation in support services for children in the household who have been identified as having special medical, educational or other unique service needs.

Acuity Index Use and Interpretation

The acuity index guides service planning through identifying the most pressing needs that a tenant has. Sections of the index that are rated a 0 or a 1 require a service plan goal. Sometimes a service plan goal will address multiple sections at the same time. These goals can be either active – something that a tenant is working on currently, or deferred – a goal that is identified as important but will be worked on later.

If a goal for a section rated 0 or 1 is deferred, a note should be included on the service plan or acuity index. The note should include a specific reason why a goal is being deferred and describe how the case manager will continue to engage the tenant.

In addition to addressing areas rated a 0 or 1, some tenants may choose to focus on an area that is rated higher. If this is the case, the case manager should assist the tenant in developing goals in these areas as well.

The index is also useful as a tool to identify individuals that might want to consider moving out of supportive housing with community supports and housing subsidies. In addition, supervisors may wish to use the acuity index to examine case manager case load size and characteristics.