## **Request for Information:**

# **Questions Regarding the Emergency Assistance Family Homeless Shelter System**

Stakeholders are encouraged to respond to as many questions as they feel equipped to answer. Please enter your answers into the expanding boxes and use bullet points as needed to be clear and concise.

- A. Respondent's Background Information
- B. Prevention and Diversion
- C. System Connections for Families in Shelter
  - Mental Health and Other Disabilities
  - Employment
  - Length of Stay
- D. Portfolio Mix and Size
- E. Housing
- F. Post-Shelter Stabilization
- G. Data and Finance
- H. Other
- I. Instructions for Submission

All responses must be submitted via COMMBUYS. This is a Request for Information (RFI), not a request for bids. No funding decisions will be made based on responses to this RFI.

Please note: Respondents to this Request for Information (RFI) are invited to respond to any or all of the questions in this document. Responses to this RFI shall serve solely to assist the Commonwealth in understanding the current state of the marketplace with regards to the solicited information. This RFI does not in any way obligate the Commonwealth to include any of the RFI provisions or responses in any solicitation. Responding to this RFI is entirely voluntary, and will in no way affect the Commonwealth's consideration of any proposal submitted in response to any subsequent solicitation, nor will it serve as an advantage or disadvantage to the respondent in the course of any RFR or RFQ that may be subsequently issued or amended.

## A. Respondent's Background Information

1	Describe your organization or affiliation (if applicable), your knowledge and expertise in homelessness, and your experience working with the Massachusetts EA system.

### **B.** Prevention and Diversion

Homelessness is a traumatic and destabilizing event for children and families. To avoid homelessness, DHCD funds prevention work through the Rental Assistance for Families in Transition (RAFT) program<sup>1</sup> and the EA Strategic Prevention Initiative, and provides diversion/rapid re-housing assistance through HomeBASE funds.<sup>2</sup> The agency is interested in how these efforts can be supplemented, strengthened, or otherwise better coordinated with the EA shelter system.

families currently in shelter of However, identifying those fa What do you see as the most	entions—including cash funds and/or services—some could have avoided the destabilizing effects of homelessness amilies <i>before</i> they become homeless can be challenging. promising ways to identify families at risk of becoming y direct experience you may have identifying at-risk
3. Once those families are ident avoid entry into shelter, inclu	ified, what resources would help them to stay housed and ding:
Resources that currently exist that are effective and should be maintained:	
Resources that currently exist and specifically how they should be expanded and/or changed; and	
Resources that are not currently available but should be created.	

<sup>&</sup>lt;sup>1</sup> https://www.mass.gov/service-details/learn-about-residential-assistance-for-families-in-transition-raft

<sup>&</sup>lt;sup>2</sup> https://www.mass.gov/service-details/homebase

## C. System Connections for Families in Shelter

System Connections: Mental Health and Other Disabilities

During the recently held listening sessions, DHCD heard about the challenges families and providers face regarding treatment for mental health issues, substance use disorder, chronic physical disability and other conditions requiring medical treatment. DHCD is interested to learn more about how providers respond to families with these needs, how these families can be better served, and how connections to healthcare providers can be best leveraged.

mental agency	, behavioral or physical h	nen families present with behaviors that may indicate nealth needs, how do you assess and/or treat within your rganizations and/or state agencies to secure assessment
some f	orm of health treatment, overs? What percentage of the entreject the offer? Please	proximately what percentage of families do you refer to either from clinicians in your shelter or outside treatment the families you offer to help make a connection to e cite the source of your response (e.g. internal data,
	Referred	Referred/Recommended & Family Declines
Percentage		
Source		
Additional Commentary (Optional):		
6. What challenges do you or your families face when seeking treatment, and how could those challenges be addressed? Please list up to five, in order of how frequently they hinder treatment.		

to improve coordination?

7. If you are an EA provider, how do you coordinate with accountable care organizations (ACOs), community health clinics, private healthcare providers and/or MassHealth services to connect EA families with care? What could DHCD or other state agencies do

to people present health challenge information rega approaches and	A provider, what guidance is given to case managers about how to respond ting with symptoms that may indicate a mental, behavioral or physical e (e.g. written protocols for escalating to internal clinicians, lists of arding outside resources, informal/word-of-mouth guidance on available resources)? What additional guidance, training, or resources for ak would be useful?
Current Guidance:	
Opportunities for Additional Guidance	
homeless famili	nce-based approaches to mental, behavioral or physical healthcare for es you would be interested in piloting? If so, what would these r? What resources/supports would be necessary for implementation?
mental, behavio do you assess ar	a provider, when a family member presents with a form of disability (e.g. ral or intellectual disability, mobility impairment, vision, hearing, etc.), ad/or accommodate within your agency and/or connect with other es to secure assessment and treatment? If so, how?
11. What could DHe and coordination	CD or other state agencies (e.g. EOHHS) do to improve communication n?

12. If you are <i>not</i> an EA provider, what challenges, if any, do you face when connecting with the EA system to address family health needs? How could connections or coordination with the EA system be improved?
System Connections: Employment
Insufficient income is a leading driver of family homelessness. While some EA shelters can provide job training and placement services, many are not equipped or funded to offer those services. DHCD is interested in how shelters can build partnerships with existing job training entities to connect families with the services they need.
13. Drawing on your first-hand experience and/or data, what do you see as head-of-households' primary barriers to stable, gainful employment? Please list up to five, in order of how frequently you see the barrier hinder employment. What data do you have to support these observations?
14. How can EA shelters best partner with Commonwealth and non-profit job training programs to meet their education/employment needs? How can DHCD and/or job training organizations improve connections between EA shelters and employment and training services?

## System Connections: Length of Stay

Although shelter may be a necessary and unavoidable temporary stop for some families, DHCD believes that families can best address their needs when they are in their own stable housing. Securing stable housing, and staying housed, can require supports beyond those any individual shelter offers. DHCD is interested in how it can support providers in making the community partnerships necessary to help families—particularly those with shelter stays over 18 months—find and retain permanent housing.

15. Do long-staying families (over 18 months in shelter) share any defining characteristics? Please cite data when possible.

16. What are the characteristics of short-stayers (less than six months)? Among those who exited into stable housing, what helped them to successfully exit shelter quickly? Please cite data when possible.	<b>;</b>
17. What additional resources or partnerships with community organizations would help long-staying families find permanent housing? How could DHCD help forge these connections?	

### D. Portfolio Mix and Size

DHCD seeks to ensure providers' portfolios both meet the needs of families and can be reasonably managed by providers. The procurement offers an opportunity to adjust the number of units and mix that providers manage.

18. If you are a shelter provider, would you be interested in adjusting the number or mix of units you operate (i.e., shift some units from scattered sites to congregate or vice versa, or increase/reduce your total number of units)? If so, what changes would you be interested in making and why? Non-binding, for informational purposes only.

<b>Unit Type</b>	<b>Current Number of Units</b>	<b>Desired Number of Units</b>
Congregate		
Co-shelter		
Scattered Site		

19. Of the roughly 3,700 units in the EA system, approximately 37% are congregate, 22% are co-shelters, and 41% are scattered sites. Do you believe this mix is appropriate (please check the appropriate box)?

Yes	
No	

If you believe changes are warranted, what changes would you recommend and why?

Unit Type	Ideal Percentage	Reasoning
Congregate		
Co-shelter		
Scattered Site		

20. Providers achieve some economies of scale as they grow, increasing efficiency by optimizing staff-to-family ratios. What do you believe to be the maximum number and

optimal number of units an EA provider should operate? Why are those numbers the most appropriate?

Optimal Number of Units	
Maximum Number of Units	
Reasoning	

## E. Housing

DHCD's listening sessions and daily work reaffirm that the current Massachusetts housing market, and more acutely the Greater Boston market, poses an immense challenge. Increasing affordable and low-income housing remains a priority for the agency, though this work will continue to occur outside of the EA shelter procurement. Beyond the creation of housing or allocation of new vouchers, DHCD welcomes ways to improve the housing search process.

allocation of new vouchers,	DHCD welcomes ways to improve the housing search process.
-	of the greatest challenges families and providers face in finding these challenges be overcome?
•	lter provider, who provides housing search services for your agency ng search workers, case workers, outside agents) and what services
23. What training do hou would be beneficial,	using search workers typically receive? What additional training and why?
Current Training	
Additional Training	
facilitate the search f units, an estimated po of-mouth/direct conta applications, 25% the	In identifying one or more online technological tools that could for available units. Please share where you typically find available ercentage of how often each method is used (e.g. 50% through wordact with landlords, 25% through state or local public housing rough internet searches/databases of private units), and generally formation about available units in the community could be helpful.
Sources & Percentage:	
Would better online inform about available units be hel Why or why not?	

25. DHCD recognizes that housing search requires a unique skillset that is distinct from case
management. How would you view shifting some housing search responsibilities to non-
shelter entities? Do you believe this could improve rehousing outcomes? What
challenges might it present?

### F. Post-Shelter Stabilization

Approximately 20 percent of families return to shelter after leaving. Stabilization—the financial and case-management supports some families receive post-shelter—remains an essential step toward meeting the goal of keeping families sustainably housed. DHCD is interested in how stabilization can be strengthened and expanded so more services can be delivered to families in the community instead of solely while they are in shelter.

26. If you currently provide post-shelter stabilization services, what is the frequency and nature of your stabilization support for the following groups?

Family Type	Typical Stabilization Support
a. Families leaving shelter and entering	
subsidized housing	
b. Families leaving shelter and entering	
market rate units with HomeBASE	
c. Families leaving shelter and entering	
market rate units without HomeBASE	
d. Families leaving shelter and entering	
units where they are not the primary	
leaseholder (i.e. shared housing or	
doubling up)	

If you prefer to describe current stabilization supports in a different way, you may respond		
ow:		

27. What do you believe is the optimal frequency and type of stabilization support for the following groups?

Family Type	Typical Stabilization Support
a. Families leaving shelter and entering	
subsidized housing	
b. Families leaving shelter and entering	
market rate units with HomeBASE	
c. Families leaving shelter and entering	
market rate units without HomeBASE	
d. Families leaving shelter and entering	
units where they are not the primary	
leaseholder (i.e. shared housing or	
doubling up)	

If you prefer to describe ideal stabilization supports in a different way, you may instead respond below:		
28. What new or updated stabilization models or e families stably housed? What would these new data or evidence-based programming when pos	models or approaches help achieve? Cite	
29. Some stakeholders have recommended separat stabilization to be funded and provided by non challenges would this change represent?		

## G. Data and Finance

DHCD is interested in ensuring contracts and funding are aligned with the department's overall goals. Stakeholder input on the following questions will help the agency guide the creation of new contracts and payment mechanisms.

30. DHCD is interested in how it can more regularly use performance data—like placements into housing, reentries to shelter, or successful/unsuccessful referrals to external providers—to improve service delivery and outcomes for families. Have you ever used data to improve performance before, either internally or with other organizations? If so, what did you find effective, which metrics did you use, and what practices would you recommend? If not, where do you see value in examining data in this manner?
31. DHCD is currently reviewing rates to move toward a more systematic rate-setting system. What factors should DHCD consider when working with providers to set rates, and why?

## H. Other

The questions in this RFI were limited out of respect for stakeholders' time. However, DHCD recognizes many topics were not covered which respondents may have expertise in or insights into. These final questions provide a space for additional information on challenges and opportunities for change.

32. Please share any additi opportunities, and relat	onal thoughts on EA system challenges, procurement ted policy issues.
•	l above, are there any pilots or approaches you would be interested procurement? If so, what challenges would they seek to address?
families if eligibility re flexible. For each, plea	ICD-funded programs that could be more useful tools for EA equirements were adjusted or if the program were made more use identify which program requirements or eligibility criterial how that change would aid EA families in securing stable

#### I. Instructions for Submission

This RFI is issued solely for the purpose of obtaining information. Nothing in this RFI shall be interpreted as a commitment on the part of DHCD to enter a contract with any respondent or to make any procurement.

This RFI has been posted on Massachusetts' procurement and solicitation system, COMMBUYS (<a href="http://www.commbuys.com">http://www.commbuys.com</a>), on January 4, 2019. The instructions for responding to this RFI are as follows:

- Response Submissions All responses to this RFI are due no later than 5:00pm on February 15, 2019. Respondents must submit responses through COMMBUYS. All responses must be written in this document in the boxes provided.
- Vendor Questions Potential respondents who have questions regarding this RFI may email them to the contact listed below by February 1, 2019. Respondents may only make inquiries and request clarification concerning this RFI by written questions via e-mail with the subject line "DHCD2019-16 EA RFI Question." Responses to inquiries and clarification questions will be provided electronically to all interested parties via a posting on COMMBUYS.
- DHCD Contact Information Please direct all questions via email with the subject line "DHCD2019-16 EA RFI Question" to the following contact:

Jane Banks

Department of Housing and Community Development Division of Housing Stabilization 100 Cambridge Street, Suite 400 Boston, MA 02114

Email: ocd-dl-pgs@massmail.state.ma.us

Additional Information: DHCD retains the right to request additional information from
respondents. DHCD may, at its sole discretion, elect to request formal presentations from
certain vendors and/or create an RFR or RFQ, which will include the detailed
requirements and key success criteria for the procurement, which are based, at least in
part, on the responses received from this RFI. DHCD may request further explanation or
clarification from any or all respondents during the review process.

#### **Costs**

By submitting a response, respondents agree that any cost incurred in responding to this RFI, or in support of activities associated with this RFI, shall be the sole responsibility of respondent. DHCD shall not be held responsible for any costs incurred by respondents in preparing their respective responses to this RFI.

#### **Review Rights**

Responses to this RFI may be reviewed and evaluated by any person(s) at the discretion of DHCD, including independent consultants retained by DHCD now or in the future.

#### **Public Record**

All responses to this RFI will be public record under the Commonwealth's Public Records Law, Mass. Gen. L. ch. 66 s. 10, regardless of confidentiality notices set forth on such writings to the contrary.