



Session #: 704

Getting the Right Community Services for your Tenants

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Presentation Overview:

- Background of the Integrated Supported Housing Initiative (ISHI)
- Needs Assessment Rationale
- CRICH Involvement and Application
- The ISHI Community Needs Assessment
 - Methodology
 - Findings
- Service Planning & Delivery using the Needs Assessment Findings

Background of the Integrated Supported Housing Initiative (ISHI)



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A Successful Project

21° Toronto | thestar.com | GTA

News / GTA

Making social housing work: a TCHC success story

Once, nobody wanted to live at troubled 291 George St.; today it's a model for community renewal.

By Ben Spier Staff Reporter. Published on Tue Aug 11 2015.

George St. is an unlikely place for a success story. The stretch of road on the downtown east side is better known for its rampant drug trade, densit properties and crowds of homeless men congregating outside the Detroit House shelter.

But at one George St. address, the tide has been turning for the better. Over the past



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Overview

- Health invests in social housing
- Target high need buildings
- Onsite multifunctional team



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Support Model



- Eviction prevention for tenants at risk
- Individual support focusing on Mental Health and Addictions
- Link tenants with complex care needs to health care & long-term supports
- Develop service partnerships
- Build a culture of recovery through community development



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Eviction Prevention + Mental Health & Addiction Support



Balcony – before



Balcony - after



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Community Garden



Before



After community
landscaping



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Black History Month Celebration



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Holiday Celebration hosted by TPS



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From a Pilot Project to ISHI



- Support tenants at 2 more housing developments
- Single people and families
- Same geographical neighbourhood



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Needs Assessment Rationale



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Why We Did the Needs Assessment

- Experience with pilot site defied expectations
 - Many tenants with capacity to live independently, without service involvement
- Wanted a baseline of needs to focus initial service and community development efforts
- Ongoing interest in reducing duplication, finding opportunities for cluster care
- Tool to advocate with funders and service providers to increase access to services
- No other source for this particular data



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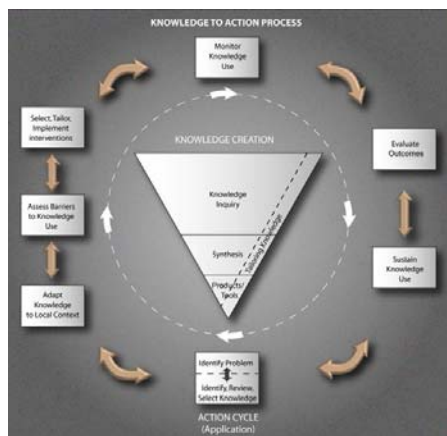
CRICH Involvement and Application



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Integrated Knowledge Translation



CIHR IRSC

Accessed online September 20, 2015
<http://www.cihr-irsc.gc.ca/e/39033.html#Two-Types-2>



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Community Based Participatory Research (CBPR)

- Guided by the core principles of collaboration and partnership where research brings together community and academic expertise to explore and create opportunities for social action and social change.

Wellesley Institute, accessed September 20, 2015



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How it happened?

- A health equity issue/problem that mattered to inform practice.
 - What are the needs of the tenants?
- Natural experiment
 - Key partners came together through funding and through CRICH's connections with the community.
- Design
 - A tailored needs assessment with expert input from community practice and research.



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Harrington Post - Natalia Kalin: What Are We Waiting For?
Posted: 02/26/2015 3:50 pm EST

Things to Consider



- Research Ethics Approval (time/thought)
 - Recruitment procedure
 - Safety procedure for peer interviewers and participants
 - Training for peer interviewers
- Time to develop a polished instrument
 - Decide on key elements
 - Focus on assessing needs that partners can manage

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Things to Consider



- Data sharing agreements
 - If data will be shared with research partner
- Analysis and interpretation of data
 - Ideally should be collaborative
 - Houselink & Fred Victor interpreted data in the context of the community and used their knowledge of practice to maximize understanding of the data

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Expect the unexpected

- Duration of data collection
- Hard to reach people - isolated
- New research-community-based partnerships
- Community capacity to conduct research



Deviant Art, accessed on September 20, 2015.
<http://www.deviantart.com/tag/streetdance>



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Value of CBPR

- Co-create knowledge, learn together and stimulate practical ideas
- Use research process as a community engagement process with tenants
- Needs assessment performed as a community engagement tool.



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The ISHI Community Needs Assessment

Methodology & Findings



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Methods

Study
Participants

- 174 Interview participants
- Mostly single adults who receive income from social assistance
- 35% response rate

Sampling
Strategy

- Tenants self-selected to participate
- Participants given a \$20 grocery gift card
- Only one tenant per household



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Methods: Recruitment

Community Meetings

Peer interviewers

Confidentiality

Flyers

Flexible Interview Times

Challenges



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Methods: Data Collection

4 Interviewers who identify as having mental health issues and have interviewing experience

1 on 1 interviews in private common areas of the buildings

Peer Interviewers

Able to establish quicker rapport

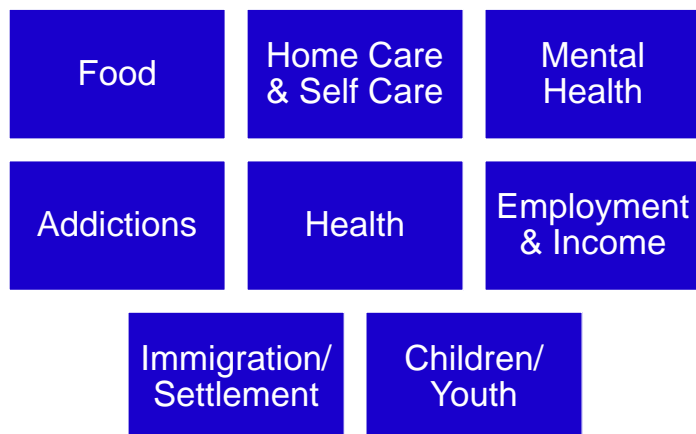
Knowledge and lived experience in the subject area



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Methods: Needs Assessment Domains



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Findings: Tenant Capacities

Food	Home/Self Care	Accessing Help	Employment
<ul style="list-style-type: none"> Majority prepare and shop for their own food 69% report having enough to eat 	<ul style="list-style-type: none"> Majority report no help needed with house-keeping or personal hygiene 	<ul style="list-style-type: none"> Over half have a contact in case of mental health crisis 81% have a doctor 	<ul style="list-style-type: none"> 11% employed 41% interested in working



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Findings: Service Needs

Do you need/want support with...	Yes	Already Have	No
Food			
Accessing Food	45%	16%	39%
Accessing Meal Programs	27%	22%	52%
Preparing Food	15%	6%	79%
Grocery Shopping	16%	6%	79%
Home Care and Self Care			
Housekeeping	22%	8%	70%
Personal Hygiene	8%	7%	85%



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Findings: Service Needs

Do you need/want support with...	Yes	Already Have	No
Mental Health			
Mental Health Issues (generally)	22%	22%	56%
Individual Support/Counseling	29%	12%	56%
Support Groups	25%	12%	56%
Therapist/Psychiatrist	22%	19%	60%
Addictions			
Addictions (generally)	16%	15%	68%
Individual Support/Counseling	21%	19%	60%
Non Residential (Community)	18%	12%	70%



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Findings: Service Needs

Do you want/need support with...	Yes	Already Have	No
Health			
Physical Health Services (generally)	32%	15%	54%
Physical Disability	27%	12%	61%
Diabetes or other Chronic Illness	17%	18%	66%
Dental Care	47%	15%	38%
Eye Health	43%	16%	41%
Employment and Income			
Obtain Employment	34%	4%	62%
Upgrade Education	39%	6%	56%
Accessing Entitlements	34%	48%	18%



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Most Needed Services Ranked

Do you need/want support with...	# of responses	# Yes	% Yes
Dental Care	165	77	47%
Accessing Food	165	75	45%
Eye Health	164	70	43%
Upgrade Education	160	62	39%
Obtain Employment	160	54	34%
Accessing Income Entitlements	153	52	34%
Physical Health Services (generally)	164	52	32%
Accessing Meal Programs	147	39	27%
Physical Disability	163	45	27%
Mental Health Support Groups	169	42	25%



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Findings: Service Organizations

130 unique organizations and/or Services

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Multiple Domains of Service Need

Number of Domains	# of Participants	% of Participants
No domains	4	2%
1 domain	14	8%
2 domains	28	16%
3 domains	34	20%
4 domains	39	22%
5 domains	33	19%
6 domains	22	13%
	174	100%

Domains: Mental Health, Health (general), Food, Chronic Health, Self-Help, Addictions

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Multiple Domains of Service Need: Chronic Health, Mental Health and Addictions

Number of Domains	# of Participants	% of Participants
No domains	15	9%
1 domain	59	34%
2 domains	64	37%
3 domains	36	21%
	174	101%



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Service Planning & Delivery using the Needs Assessment Findings



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Implementation - Overview

- Referral to relevant services and coordinate care for tenants with complex needs
- Identify the high service need areas to fill service gaps
- Identify the “top” service providers for resource matching and service coordination



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Referral to Relevant Services and Coordinate Care



Refer to the most mentioned service providers to reduce duplication and foster clustered care



Prioritize Health Link led Coordinated Care to meet complex client needs



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Identify the High Service Need Areas to Fill Service Gaps

- Dental**
 - Identified systematic issues, referrals, and planned advocacy
- Food**
 - Direct service and referrals
- Education & Employment**
 - Information and referrals
- Income**
 - Assist tenants to apply for benefits/assistance they may be entitled to
- Mental Health**
 - WRAP (Wellness & Recovery Action Plan) groups



Service Coordination with “Top” Service Providers

- Priority primary care referrals to Inner City and St. Michael’s Academic Family Health Teams
- Coordinate service from Street Health – nurse clinic and harm reduction peer support
- Outreached to or invited speakers from service providers
- Plan to coordinate clustered service with “top” service providers



Thank you

- Questions



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Getting the Report

- You can find the report at the Houselink website at www.houselink.on.ca under the resources tab

- For further information

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