

Engagement and Assessment

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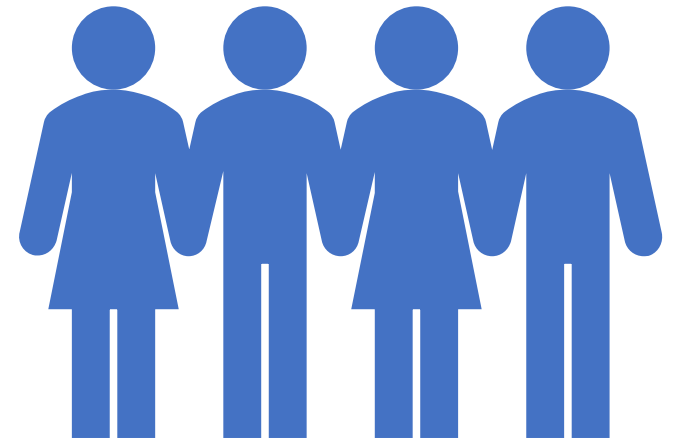
The Florida Housing Coalition, Inc., is a nonprofit, statewide membership organization whose mission is to **bring together housing advocates and resources so that all Floridians have a quality affordable home and suitable living environment.**



WE'RE PROUD TO OFFER PROFESSIONAL
CONSULTING SERVICES

In the areas of affordable housing, fair housing, ending homelessness, & related issues

**Quick Poll – Who
Are You?**





Must Haves



Trauma
Informed

Housing
Focused

Recovery
Oriented

Person
Centered

Must Haves



Trauma Informed

- Recognizes that individuals experiencing homelessness have a higher prevalence of trauma histories
- “What is wrong with you?” to “What happened to you?”

Recovery Oriented

- Recognizes the participant as the expert and their strengths are essential to their recovery
- Recovery looks different for everyone

Housing Focused

- Stable housing is always the goal
- Housing First philosophy

Person Centered

- Assessments are focused on strengths
- Offer choice in decisions (housing, treatment, programs)

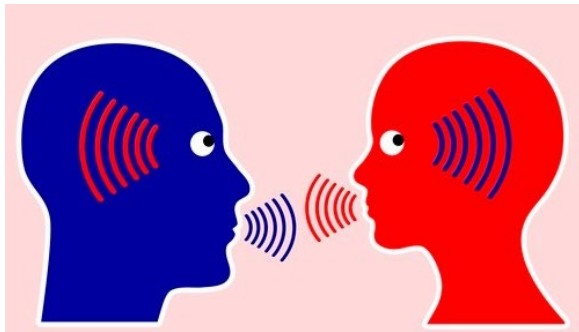


Assertive Engagement



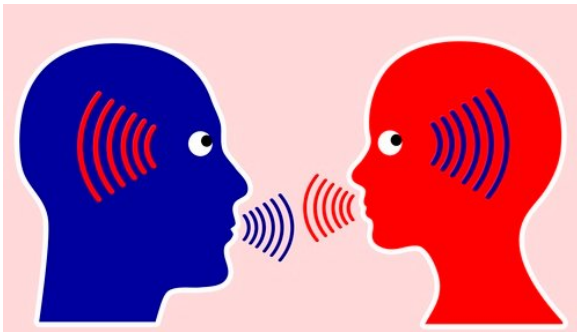
Remember! Voluntary Services

- **Participant has the choice to engage or not**
- **No “participate or else”**
- **Voluntary for participant; not voluntary for staff**
- **Housing is not tied to participation in services**



Why?

- Removes barriers to participants engaging
 - Missing appointments
 - Premature case closure
 - Power imbalances
- Really listens to participants' goals and works to accommodate those
- Rapport, rapport, rapport!



How?

- Throw away “one size fits all” approach
- Meet participant where they are at
- Be authentic
- Be flexible
 - Where does the participant feel comfortable meeting?
 - Should walk in hours be available?
- Be transparent
 - What are you able to offer? What is not a part of your service scope?
- Be persistent
 - Can I come back next week?
 - Is there a better time for you?
 - Is there anything I can do for you?

Case Management is NOT

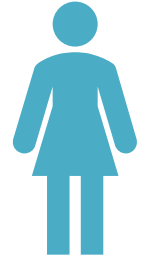
- Parenting
- Mentoring
- Fixing



Case Management IS

- Partnering
- Encouraging
- Solution-focused





Example – “Mary”

Challenges

- High utilizer with over 15 inpatient psychiatric admissions in the past 6 months
- Cycling through the system (jail, emergency room, psych hospital, shelters)
- Refusing housing options that have been recommended
- Misses appointments
- Recently evicted from PSH
- Argumentative with providers
- Banned from several social service providers

What Are
Your
Ideas?



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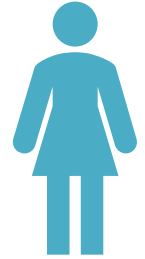


**Start with
Strengths!**



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Example – “Mary”

Strengths

- Engaging with the mental health system on some level
- Receptive to outreach worker
- Potential for Supplemental Security Income/Social Security Disability Insurance Outreach, Access and Recovery (SOAR) candidate
- Fewer admissions when housing was stable in the past
- Responds well to peer support



Assessment

**“Talk of problems
and you create
problems; talk of
possibilities and you
create possibilities.”**

-Kerstin Mahlberg and Maud Sjoblom

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~~Problems~~

Solutions





Solution-focused

- **Not-knowing stance**
 - **We make no assumptions**
- **Everyone is doing the best they can**
- **Actively listening to responses**
- **Client is the expert**



Assessments are Interventions

- Not just required paperwork – an opportunity to have a conversation

Simply, we are trying to find out:

- Why are they here? (Housing)
- What do they want?
- What are the solutions?

Using a Person- Centered Approach

- Assessments are based on participant's strengths, goals, risks, and protective factors
- Tools and assessment processes are easily understood
- Sensitive to participants' lived experience
- Offer choice in decisions about housing and services
- Participants are able to understand to which program they are being referred



Motivational Interviewing

Utilize Motivational Interviewing - OARS

Open ended questions

- How can I help you with ___?
- Help me understand ___?
- How would you like things to be different?
- What are the good things about ___ and what are the less good things about it?
- What have you tried before to _____? (ex. help you stay housed, stay sober, drink less, keep appointments, consistently take medication?)
- What do you want to do next?



Utilize Motivational Interviewing - OARS

Affirmations

- I appreciate that you are willing to meet with me today.
- I know it took you a lot of time to get here on the bus. I really appreciate you taking that time.
- You are clearly a very resourceful person.
- You handled yourself really well in that situation.
- That's a good suggestion, great idea, etc.
- If I were in your shoes, I don't know if I could have managed nearly so well.
- I've enjoyed talking with you today.



Utilize Motivational Interviewing - OARS

Reflective Listening

- **Repeating or rephrasing:** Listener repeats or substitutes synonyms or phrases, and stays close to what the speaker has said.
 - It sounds like you didn't like that program very much.
- **Paraphrasing:** Listener makes a restatement in which the speaker's meaning is inferred.
 - It seems like no one is really listening to what you're saying you need help with.
- **Reflection of feeling:** Listener emphasizes emotional aspects of communication through feeling statements. This is the deepest form of listening.
 - So you feel a bit hopeless and discouraged.



Utilize Motivational Interviewing - OARS

Summarize

- Let me see if I understand so far...
- Here is what I've heard. Tell me if I've missed anything.
- (If there's ambivalence) "On the one hand..., on the other hand..."



ARE YOU A DOCTOR?

- No need for comprehensive assessment if we are not treatment professionals
- Keep assessments focused on information that's needed

“If your services are meaningful to participants’ goals, they will choose engagement.”

Staff Observation from the HomeFree rapid re-housing program in Portland, OR

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Case Management Series

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