Implementing Critical Time Intervention (CTI) RRH and PSH Programs Miami Dade County

Session 1 May 2022

Matt White

mwhite@housinginnovations.us

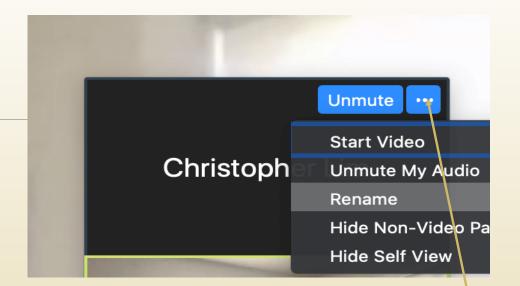
Andrea White

awhite@housinginnovations.us



Welcome

- Housing Innovations
 - Andrea White
 - Matt White
- Goals for the Training Series
- Housekeeping
 - PLEASE TURN YOUR CAMERAS ON AS MUCH AS YOU CAN
 - Please put your name as you would like to be addressed as your screen name
 - We will upload the slides to the chat box momentarily
 - We love interaction please raise hand, use emojis, type comments in the chat box or just unmute and talk!



Agenda



Introductions

Overview of the CTI Model

CTI and Housing Stability

Assessment Domains for CTI and Risk Factors for Housing Instability

Wrap-up and Questions

Introductions

- TURN ON YOUR CAMERAS PLEASE
- AND TYPE IN THE CHAT BOX
 - Name
 - Role
 - Agency
 - How long working with people who have experienced homelessness?
 - Favorite ice cream flavor?



What is Critical Time Intervention (CTI)?

Evidence-based practice (EBP) designed to:

- Support people through TRANSITIONS
- Build skills and networks of support

Helps people with high needs live successfully in the community and reduce returns to homelessness, use of institutions



Incorporates "Supporting EBP's"

- Harm Reduction, Housing First, Person Centered Planning, Family Psychoeducation, Motivational Interviewing, Stages of Change
- Assumes staff have basic engagement, assessment and counseling skills

Transitions



New start

Require support

*

Trigger fears of failure

Require a new daily schedule

Unknown/uncertainty increases anxiety

Opportunity for change

Involve both loss and gain

Often stressful

Can increase symptoms

Core Components of CTI

Focused on housing stability and achieving life goals

• Person-centered recovery orientation

Pre-CTI Phase

Planning and preparing for the transition

• Important phase before move-in

Three 3-month phases of decreasing intensity starting at move in

• Phase 1: Transition to the community

• Phase 2: Try out

• Phase 3: Transfer of care or termination

Time-limited

(6-9 months post move-in to housing)

 Although other services may continue post CTI intervention





Core Components of CTI – 2

Limited Focus

• 1-3 goals in identified assessment domains

Interventions focused on preventing and addressing threats to housing stability and achieving personal goals

- Meeting obligations such as rent and bill payment and maintaining housing
- Following standard community norms and expectations
- Having sufficient money for basic needs
- Relief from disturbing symptoms and connecting to effective treatment

Establishes Linkages to Community
Resources

- Develop network of supports/linkages and adjust
- Connect to natural supports

Poll: CTI Experience

Case Management and CTI









Case managers must have adequate time and resources

Access and sustainability of services and supports is critical

Lease and landlord provide the expectations and structure

Goal/Recovery
based
intervention /
not crisis or
problem based

Housing Perspective



The expectations of a lease or the community do not change and apply to everyone



Conditions of the lease must be clear and consistently enforced



Lease violation issues will often be a reason to seek services



Workers focus on BEHAVIORS that interfere with functioning as a tenant and as a member of the community and connect housing stability to personal goals.

Collaboration for Long Term Community Stability



CTI promotes collaborations based on:

- Common goals
- Common understanding of eligibility, needs and resources
- Commitment to achieving participant goals
- Effective outreach to high need people on behalf of the system, identifying the right resource for each person
- Clear roles and responsibilities for staff
- Clear expectations for participants
- Good communication and ensuring all experience with participants within the system is shared
- Cross team collaboration and warm handoffs to ensure the continuity of care

CTI Measures of Success

Maintaining a base in the community

Increase income

Network of supports

Less emergency interventions

Structure, purpose and valued role(s)

POLL: CTI Implementation



Discussion Breakouts

- PLEASE TURN ON YOUR CAMERAS AND "JOIN" YOUR GROUP
- Reactions to the CTI model
- Previous or current experience with CTI
- Elements of CTI you are already implementing
- Questions or comments



Evidence for CTI



Original research at Columbia University on work with homeless single adults with serious mental illness in a large shelter in NYC. Based on housing focused clinical case management approach. Developed from the "ground up".

Applied and researched in a variety of settings with different populations. Reduces returns to homelessness, use of emergency interventions and institutions. See www.criticaltime.org

Outcomes of critical time intervention case management on homeless veterans after psychiatric hospitalization.

- Using nonrandomized pre-post cohort design with a one-year quarterly follow-up, evaluated CTI for homeless Veterans leaving VA inpatient care.
- CTI cohort had 19% more days housed, 14% fewer days in institutional settings, and reported lower alcohol use, drug use, and psychiatric problems.
 - 19% lower Addiction Severity Index (ASI) alcohol use scores.
 - 14% lower ASI drug use scores.
 - 8% lower ASI psychiatric problem scores.

How is CTI Different?

- Structured and time limited intervention
- Goal focused not symptom based
- Transition is the focus of the work
- Depends on community connections to services and supports for sustainability (including landlord)
- Community and home-based service
- Staff must step back and adjust their roles with each phase
- Adjust documentation to reflect areas of assessment and no more than 3 goals in service plan



CTI Requires Organizational Supports

- Buy-in at all levels of the organization
- Hiring the Right People
- Structured Supports: Supervision, Team Meetings, Case Reviews/Conferencing
- Clinical Consultation
- Workload Management
- Staff Education and Training ongoing
- Resources
- Policies and Procedures esp. for home visits, confidentiality
- Program Design/Modification process



CTI Implementation Self-Assessment Tool

- Tool to assess progress on implementing CTI practices
- 40 domains scored on scale of 1 to 5
- Score is an average w/max 5
- Conduct post-implementation as check
 in

Reviews the following Areas:

- CTI Main Components
- Engagement
- Initial Assessment
- Linking Process
- CTI Worker Role
- Clinical Supervision
- Fieldwork Coordination
- Documentation

Why Focus on Housing Stabilization



- Housing is the base for people to stabilize in the community
- Housing provides a structure and expectations
- Housing provides a vehicle to move to proactive role: Tenant
- Housing requires an assertive landlord that will flag any lease violations and give an opportunity to correct the violations
- Housing requires the support of workers to maintain tenancy
- Housing provides an early warning system and can be a trigger to accept services

The Assessment and Plan Forms

Documentation can help guide and structure staff's work

Examples are "CTI Informed" Assessment and Plan

Can adapt forms currently in use

Modify to incorporate CTI-informed domains and elements

Recommended Frequency

- Update assessment and plans within a couple of weeks after move-in and at each new phase
- See: CTI Informed Service Plan and Assessment Forms



Assessment and Planning Domains

Areas of Focus for Assessment and Planning

- Housing and homelessness history and barriers to stability
- Income and financial literacy, education/training and employment
- Life skills
- Family, friends, and other supports
- Psychiatric and substance abuse issues
- Health and medical issues



Assessment looks at history, current, strengths, barriers, motivation and GOALS

Service plans reflect the participant's goals and connect housing success to personal goals

Understand Housing and Homeless History and Goals

Housing History –

- Places lived, with whom (last 5 years)
- Experience as a leaseholder
- Roles and responsibilities
- What worked/what didn't
- Satisfaction with current housing
- Housing goal(s)





Homelessness History -

- Cause of initial episode
- Length of time homeless
- Places stayed
- Routine
- Supports



Discussion Breakouts

PLEASE TURN ON YOUR CAMERAS

- What kind of housing and homelessness histories are you seeing?
- Do the families/individuals you work with have experience as leaseholders before?
- Are the tenants you are working with happy in their housing and motivated to maintain it?
- How is housing success connected to people's personal goals?



Use Stages of Change to Assess Motivation for Housing

| Stage | Relationship to Problem | Staff Tasks |
|-------------------|---|--|
| Pre-Contemplation | No awareness/interest in addressing problem/housing issue | Ask q's/ raise awareness of obstacles to goals |
| Contemplation | Aware of problem & considering housing | Pros & cons of changing/not |
| Preparation | Making plans for how/when to change | Options: strategies, supports & services |
| Action | Changing behavior (pursuing housing) | Support/eviction prevention |
| Maintenance | Change sustained for 3-6 months | New goals/continue eviction prevention |
| Relapse | Return to problem behavior/ homelessness | Assess stage and intervene accordingly |

Goals Breakout Discussions

- PLEASE TURN ON YOUR CAMERAS
- Share examples of goals peoples are setting.
- What are the reasons behind these goals? "So that" what?
- In other words, I want to so that



Closing

- CTI Case Management is focused on the transition to housing
 - Longer term goals require connections to sustainable resources
- Focus is on establishing and maintaining a base in the community
 - Attention to immediate needs that affect housing retention
 - Assist people to increase income
- Assess barriers and strengths to maintaining housing
 Get info from previous workers and person you are serving
 Transfer engagement
- Work the plan
 Use the plan to create structure and expectation
- Establish a resource list
 - Ensure resources are sustainable and committed
- PLEASE TURN ON YOUR CAMERAS TO WAVE GOOD BYE. See you next week!



Citations

de Vet, R., Beijersbergen, M., Jonker, I., Lako, D., van Hemert, A., Herman, D., and Wolf, J. (2017). Critical Time Intervention for Homeless People Making the Transition to Community Living: A Randomized Controlled Trial. American Journal of Community Psychology, 60(1-2), 175–186

Herman, D., Opler, L., Felix, A., Valencia, E., Wyatt, R.J., & Susser, E. (2000). A critical time intervention with mentally ill homeless men: impact on psychiatric symptoms. Journal of Mental and Nervous Disorders, 188(3), 135-140.

Herman, D., Mandiberg, J. (2010). Critical Time Intervention: model description and implications for the significance of timing social work interventions.. Research on Social Work Practice, 20(5), 502-508.

Kasprow, W. J., & Rosenheck, R. A. (2007). Outcomes of critical time intervention case management of homeless veterans after psychiatric hospitalization. Psychiatric Services, 58(7), 929-935.

Susser, E., Valencia, E., Conover, S., Felix, A., Tsai, W.Y., & Wyatt, R.J. (1997). Preventing recurrent homelessness among mentally ill men: a "critical time" intervention after discharge from a shelter. American Journal of Public Health, 87(2), 256-262.

Resources for CTI

- Center for the Advancement of CTI: www.criticaltime.org
- CTI Global Network: https://www.criticaltime.org/global-network/join/
- CTI Implementation Manual
- Facebook : Critical Time Intervention (CTI) Global Network

