



**Testimony to the New York City Council
Committee on General Welfare
Submitted by the Supportive Housing Network of New York
May 3, 2022**

Hello Chairperson Ayala, and members of the New York City Council General Welfare committee. My name is Tierra Labrada, and I am the Associate Director of Advocacy and Outreach at the Supportive Housing Network of NY. The Network is a membership organization representing a hundred nonprofits operating supportive housing in New York City. Our members provide housing and support services to people who are exiting shelter or street homelessness, and other systems, including foster care and incarceration. With the help of tens of thousands of city-contracted human services workers, our members provide housing and support to more than 35,000 formerly homeless individuals and families in the five boroughs.

In response to our members' concerns over the lag in referrals from the city's Human Resources Administration (HRA), the Network conducted an informal survey where respondents reported a 10% vacancy rate within their collective portfolio. Extrapolating across the portfolio, we determined that there were at least 2,500 units sitting empty. We took these findings and concerns to the City, and are grateful that the administration has worked collaboratively with us to address this issue. But there is still much work to do.

While we have been working to streamline procedures, the City also needs to invest the financial resources into the systems, human capital, and support services needed to create a fully functioning referral and placement system. We are encouraged by the \$3.5 million in FY 22 and \$5.8 million in FY 23 in the Executive Budget for expediting supportive housing placements at DSS, but additional action is needed to address the current crisis.

The City should do the following:

Match the federal investment into the Coordinated Assessment and Placement System (CAPS)

CAPS determines eligibility and makes recommendations for various housing options. It was created in response to a federal mandate to create a "coordinated entry" system of eligibility and prioritization for people experiencing homelessness and is now being used for several city-funded programs. Although the city has developed a robust and sophisticated software system, the majority of the work to move someone from shelter into supportive housing – including reporting and confirming the vacancy, matching eligibility, and scheduling the interview - is still being done manually. If the City invested in this system, by at least matching the federal investment, we could speed the process exponentially. Additionally, the City would need to conduct the testing and training necessary for DHS, HRA and supportive housing providers to utilize the system to its full capabilities.

Institute a Cost-of-Living Adjustment for Supportive Housing Staff

Chronic underfunding of our sector has led to a staggering 20% staff vacancy rate within the supportive housing workforce. We want to thank the Council for including a cost-of-living increase in your budget response, but unfortunately, the Mayor is continuing the trend of failing to recognize the work of the nonprofit human service sector. We are facing a recruitment and retention crisis, which is a primary factor impeding our ability to quickly move people from shelter or the street into

housing. The various initiatives to move unhoused people from encampments and the subway will be ineffective if there is not sufficient staffing at the nonprofits that are contracted to provide services and apply for housing. Recently, the Governor announced a 5.4% COLA increase for the sector. This means that state-contracted staff working directly alongside city-contracted staff will see an increase in their wages, while their colleagues get nothing. This is unconscionable. The City needs to at least match the state's 5.4% annual increase.

Invest in Mobile Treatment Teams for Supportive Housing Residents

The City has been contracting with nonprofits to provide supportive housing for more than 30 years. In most cases, these older contracts are underfunded, and rates have not kept up with the service needs of the population. Meanwhile, the State has been steadily disinvesting in community-based mental health housing that provides a higher level of care than supportive housing and includes services like medication management and psychiatric services. As a result of the pandemic, the mental health and substance use services that our community need have only intensified, and underfunded and understaffed supportive housing programs struggle to keep up. Investments in additional mobile treatment teams, which include medical and behavioral health professionals as well as peers, specifically targeted for supportive housing tenants are necessary. We would be happy to discuss this in more depth with the committee and the Council.

We are happy to answer any questions. Thank you for the opportunity to testify.