

STATE OF CONNECTICUT JUDICIAL BRANCH

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Testimony of the Judicial Branch Housing Committee Public Hearing March 4, 2021

S.B. 875, An Act Concerning the Risk of Homelessness for Those Released from the Custody of the Department of Correction

Thank you for the opportunity to submit written testimony on behalf of the Judicial Branch concerning **S.B. 875**, *An Act Concerning the Risk of Homelessness for Those**Released from the Custody of the Department of Correction.* The Judicial Branch supports the goal that this bill seeks to achieve, however, if the Committee decides to act favorably on this proposal, we would like to request several changes.

Section 1 of the bill as drafted requires the Department of Correction (DOC), the Board of Pardons and Paroles, and the Judicial Branch's Court Support Services Division to develop a risk assessment tool that accurately rates an offender's likelihood of becoming homeless upon release from DOC. Currently, CSSD does not use a risk assessment tool that predicts homelessness and is not familiar with any such instrument. However, CSSD employs an instrument that was developed in concert with the Connecticut Coalition to End Homelessness and the Partnership for Strong Communities that identifies persons who are currently homeless or unstably housed. The instrument also provides guidance in making appropriate referrals to address the person's housing needs. This tool can identify an individual's housing status with six or less questions, negating the need to obtain an extensive housing history. Consequently, we would propose revising the bill from requiring the development and use of a new risk assessment tool to instead, using

the homelessness screener already employed by the Judicial Branch to determine the discharging individual's housing needs. We have included a copy of this screening instrument with our testimony.

Additionally, in Section 2 of the bill, we would request that the Court Support Services Division of the Judicial Branch be included in any collaboration with the Department of Correction and the Department of Housing in screening returning persons for housing needs, including contracting with any private entities to provide housing assistance.

Finally, we would request that the bill's effective dates be pushed from October 1, 2022 to January 1, 2022 to allow for additional time for planning and implementation.

Thank you for your time and attention to this matter. We would be happy to discuss our suggestions further with the bill's proponents.

CSSD Adult Probation Version

This document provides a proposed screening tool and protocol to be administered by the Judicial Branch, Court Support Services Division, Adult Probation Services, staff. The purpose of this screener is to understand both the housing status of adult individuals at the time of entry into and exit from CSSD supervision, which can be recorded into CSSD's case management information system, as well as to inform case planning and referrals.

Screening Question		Skip Pattern / Actions
1.	Is the individual currently incarcerated or under the custody of the Department of Correction? a. Yes b. No	If <i>Yes</i> , move to Question 5. If <i>No</i> , move to Question 2.
2.	During the past month, where has the individual lived the most? (select one) a. Shelter b. Transitional housing c. Anywhere outside (e.g. street, vehicle, abandoned building, etc.) d. With family/relatives/friends e. A home or apartment that the individual owns or rents f. Hospital, rehabilitation center/drug treatment program g. Incarcerated or under the custody of the Department of Correction	Move to question 3.
3.	Where is the individual currently staying? (select one) a. Shelter b. Transitional Housing c. Anywhere outside (e.g. street, vehicle, abandoned building, etc.) d. With family/relatives/friends e. A home or apartment that the individual owns or rents f. Hospital, rehabilitation center/drug treatment program	If response is <i>a</i> , <i>b</i> , or <i>c</i> , the individual is <i>homeless</i> . If response is <i>a</i> or <i>b</i> , confirm where the individual is receiving assistance. Contact Coordinated Access Network (CAN) in relevant region to coordinate care or call 2-1-1 provider line with the individual present and select Option 8 for shelter diversion or a potential CAN appointment. Conclude questionnaire. If response is <i>c</i> , administer the shelter diversion protocol. If unable to divert, call 2-1-1 provider line with the individual present and select Option 8 for a potential CAN appointment. Conclude questionnaire. If response is either <i>d</i> or <i>e</i> , move to Question 4. If response is <i>f</i> , skip to Question 5.
4.	Does the individual feel safe where the individual is currently staying? (select one) a. Yes b. No	If response is <i>No</i> , ask if the individual would like assistance with safety. Call 2-1-1 provider line with the individual present and select Option 8. Conclude questionnaire.
5.	Does the individual have a safe place to live after the individual leaves the hospital/rehabilitation center/drug treatment program/custody of the Department of Correction? a. Yes b. No	If response is <i>Yes</i> , skip to Question 6. If response is <i>Yes</i> , the individual is <i>stably housed</i> . Move to question 6. If response is <i>No</i> , administer the shelter diversion protocol, if unable to divert, call 2-1-1 provider line with the individual present and

NOTE: "Yes" means the individual has a place to live and that place is safe. "No" may mean that the individual has a place to live that is not safe or that the individual does not have a place to live.	select Option 8 for a potential CAN appointment. Conclude questionnaire.
 6. How long does the individual feel that the individual can stay where the individual is currently staying or is going to stay? (select one) a. The individual cannot stay any longer b. Up to two weeks c. 15 or more nights, but not forever d. As long as the individual needs 	If response is <i>a or b, a</i> dminister the shelter diversion protocol. If unable to divert, call 2-1-1 provider line with the individual present and select Option 8 for a potential CAN appointment. Conclude questionnaire. If response is <i>c,</i> connect the individual to 2-1-1 provider line for any potential resources and referrals. Conclude questionnaire. If response is <i>d,</i> the individual is <i>stably housed.</i> Conclude questionnaire.