

CITY OF NEW HAVEN HOMELESS ADVISORY COMMISSION

February 14, 2019

Minutes

Attendance:

Members Present: C. Phillips Jr., J. Huettner, N. Hogan, E Robinson, C. Gormley

Ex-Officio: V. George, N. Torres,

Staff: V. George

Guests: B. Huang, K. Fitzgerald, E. Morris-Ferguson, M. Ferry, R. Ross, A. Haley, H. Sorenson, J. Arroyo, M. Castro, K. Dubois- Walton, Pas. G. Brown, C. Kidd

Members Excused Absent: A. Roth,

Members Absent: J. Hardy, V. Wilson, D. Ecton,

0.0 J. Huettner called the meeting to order and proceeded with introductions.

1.0 Approval of January 10, 2019 Meeting Minutes was unanimous.

NEW BUSINESS

2.0 J. Huettner opened the forum on Elderly Homelessness with a statement of format and focus. He shared the goal for this forum was to explore services available to the elderly, and to begin the conversation of providing a safety net for them.

K. Fitzgerald United Way shared data from Greater New Haven CAN which showed that the overall number of homeless had declined, while the number of elderly homeless was trending upward. The question was asked: How does CAN address seniors presenting for service. K. Fitzgerald shared that it depends on the severity of the case and if there is a bed available. There was a discussion on the long wait time on the phone for 211 and the long wait time to be matched with housing. There was also concerns that seniors were victimized in shelters.

R. Ross, a senior staying at ESMS shared that he had been at ESMS for a few weeks and he felt safe and had not witnessed any victimization. A. Haley of ESMS men shelter shared that by observation and review of agency data, he saw a rise in senior clients.

M. Ferry shared that data at YNHH showed the average age of patients presenting to the emergency department for service in 2013 was age 48, in 2019 the average age is now 50. He shared that housing is the biggest determinant of health. The average chronic homeless individual lives to 65 years old. He shared that the social work department at YNHH connects patients to services. They are responsible for safe discharges. They work closely with the Columbus House Medical Respite Program.

H. Sorenson of YNHH shared that skilled nursing home criteria and CAN criteria directly impact discharge plans for clients. She also shared that medical conditions do not necessarily give priority to placement.

K. Dubois-Walton of HANH shared that half of their affordable housing portfolio is designated for the elderly and disabled. As they systematically rehab units they pay attention to demographic trends. Subsequently, they are increasing elderly units in new developments. She also shared that homelessness is a priority, and to that end, HANH works closely with the CAN to prioritize clients. K. Dubois-Walton stated that there are no new vouchers available, but the senior waiting list remain open with a 12 month wait.

M. Castro of Elderly Services shared that her staff have been encountering seniors who have been scammed, or hoarders which at times lead to homelessness. She shared her experiences with the 211 system - with the long wait times on the phone and the lack of sufficient housing options for seniors. M. Castro also spoke of the Philip Marett Fund for which she is Co-Trustee. Through this fund, she can assist seniors with security deposits, mortgage payments, medical equipment etc. To be eligible, seniors must be at least 60 years old.

E. Morris-Ferguson works with the Department of Social Services, Protective Services Unit. This unit provides services to seniors age 60 and up who have experienced abandonment, neglect, financial exploitation, and domestic violence. This unit pays for in home support services, motel placements, boarding homes and assistance securing a conservator. She too shared her difficulty navigating the 211 system.

J. Arroyo of Cornell Scott Hill Heath Center Medical Street Team concurred that they too are seeing an increase in homeless seniors. She shared that her team see clients at shelters, on the New Haven Green and at campsites. They also offer housing case management and coordinate medical appointments.

J. Huettner summarized the meeting by stating that the circles of homelessness and the elderly converge, and this is a good starting point. He scheduled a second meeting for April 11, 2019 to develop a protocol / safety net for homeless or unstably housed seniors.

3.0 Meeting adjourned.