

Staff Briefing

# Mixing Populations in State Elderly Housing Projects

September 23, 2004

Legislative Program Review  
& Investigations Committee

# Introduction

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## Overview

The federal government, as well as a few states including Connecticut, have established programs to develop affordable rental housing for low-income elderly persons. Like other types of public housing programs, they are intended to provide decent, safe, and sanitary dwelling accommodations at below market rates. Connecticut's first state-funded elderly housing projects were authorized in 1959 and targeted initially for persons over age 65 who were unable to afford suitable housing without financial assistance. Legislation enacted in 1961 amended the definition of elderly for the state elderly housing program to include low-income persons certified by the federal Social Security Administration as being totally disabled.

While younger disabled individuals have been eligible to reside in state elderly housing for over 40 years, the projects were occupied primarily by elderly persons until the mid-1980s. Several factors converged at this time to change the tenant make-up in many projects. One factor was the growth in assisted living services and other programs to help seniors remain in their own homes that reduced demand for state housing among elderly persons. In addition, local housing authorities began to experience persistent vacancies as wait lists for elderly public housing became short or nonexistent in some communities. Another factor, deinstitutionalization, combined with the impact of new antidiscrimination laws, increased the number of young disabled persons seeking affordable housing. In general, the acute shortage of affordable housing in Connecticut makes elderly projects, which typically contain low cost, handicapped accessible efficiency and one-bedroom units, one of the few resources available for meeting the housing needs of low-income individuals with physical or mental disabilities.

As the number of younger persons with disabilities living in state and federal elderly housing projects has grown, the problems associated with mixing tenant populations with different styles of living also have occurred with more frequency. Many housing officials, policymakers, and tenants and their families are concerned over reports of conflicts between the two groups of residents and allegations of disruptive behavior on the part of younger disabled tenants. A variety of policy changes and management practices have been instituted over the past few years aimed at addressing issues related to mixing populations in elderly housing, from stricter standards about drug and alcohol use to hiring of staff to help resolve conflicts and coordinate services.

Despite these efforts, problems between the tenant groups have persisted. In addition, there are new worries about the possible gradual displacement of elderly tenants by younger disabled persons and the potential negative financial impact of this situation for the operators of state elderly housing.

Earlier this year, the Legislative Program Review and Investigations Committee was asked by more than 60 members of the General Assembly to review the state policy of non-elderly disabled individuals residing in state-funded elderly housing projects. In March 2004, the committee authorized a study focused on examining the problems arising from this state housing policy and exploring options and alternatives for resolving them. The study will also attempt to document the types and extent of problems attributed to policy, since most of the evidence cited

to date is anecdotal. Approaches tried in other states and used in Connecticut in the past will be examined to try to assess what works, what is ineffective, and why.

## **Report Format**

This report contains six sections. Section I provides background information on the administration of public housing and the relevant antidiscrimination laws. Section II gives an overview of the existing state-funded elderly housing inventory including the percentage of units occupied by elderly and non-elderly disabled tenants and waiting lists. A description of the eligibility requirements, screening criteria, and eviction policies used in state-funded housing follows in Section III. Section IV summarizes the management issues presented by this policy. A discussion of the policies and approaches used by the federal government and Massachusetts compared with efforts in Connecticut is presented in Section V. The last section outlines the areas of further review planned by committee staff.

## **Methodology**

In preparing this report, program review staff met with a variety of government agencies including: the Department of Economic and Community Development (DECD), Connecticut Housing Finance Authority (CHFA), Department of Social Services (DSS), Department of Mental Health and Addiction Services (DMHAS), Department of Mental Retardation (DMR), and the federal Department of Housing and Urban Development (HUD). In addition, committee staff met with staff from the Office of Protection and Advocacy for Persons with Disabilities and the Commission on Aging as well as various advocacy and interest groups involved in housing matters. Program review staff interviewed representatives from the Connecticut association of local housing authorities and mental health and social service providers. Committee staff is visiting elderly housing developments and holding group discussions with residents.

Information from the state's current public housing portfolio and state housing plans was examined to compile a profile of available housing and both the elderly and non-elderly disabled populations. This information continues to be compiled and analyzed. A literature review was conducted on models and approaches used by the federal government and other states.

Program review staff developed a survey (Appendix E) that was mailed to all local housing authorities operating state-funded elderly projects. The survey solicited both information and opinion from the housing project managers. Specifically, they were asked to provide information on: 1) the nature and extent of negative incidents occurring in their projects in the last six months, 2) the policies and procedures used to screen applicants and handle problem tenants, and 3) the number, reason, cost, outcome, and length of time associated with eviction proceedings initiated in the last five years.

The survey also asked housing officials to: 1) gauge the level of social conflict and financial impact experienced at their developments due to this policy, 2) rate the effectiveness of the management tools and support services available to them, and 3) suggest changes, if any, they would make to the policy. Follow-up was necessary for a number of responses. Therefore, only preliminary information is included in this report. Full analysis will be provided in the findings and recommendations report.

## Section I: Background

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To better understand this study topic, it is necessary to discuss a few background notes. This section provides a brief overview of the legislative history, relevant state and federal laws, and agencies involved in the administration of this program and the services provided to residents.

### Legislative History

In the late 1950s, Connecticut recognized the need for decent, safe and sanitary housing for low-income elderly individuals and established a program to create subsidized rental housing for the elderly in 1958. Under the program, which parallels federal public housing programs, state grants or loans are provided to a variety of entities – local housing authorities as well as municipal, nonprofit, and for-profit developers – to construct and operate units that can be rented to eligible tenants at below market rates. Construction of state housing developments for elderly persons began in 1959. At that time, the law defined an elderly person of low income as one aged 65 or older who lacked the income necessary to live in decent, safe, and sanitary housing. (March, 1958, P.A. 26, S.2) (The age threshold changed and has been 62 since 1963.)

Three years later in 1961, the legislature revised the definition of elderly persons to include “*persons who have been certified by the social security board as being totally disabled under the federal social security act.*”<sup>1</sup> A review of the legislative record reveals no discussion about this change, including any controversy or opposition to the inclusion of the totally disabled to the definition of elderly persons. (A full legislative history is provided in Appendix A.) The statutory language was broadened in 1991 to include disability certification by “*any other federal board or agency*”. Although the related legislative history does not explain the rationale for the change, the only federal agency in addition to the social security administration that determines disability is the veteran’s affairs administration.

In 1995, amid public concerns raised at various committee hearings, the legislature excluded from eligibility persons currently using illegal drugs, abusing alcohol and/or having a recent history of disruptive or dangerous behavior that would constitute a direct threat to the health and safety of another individual or result in substantial physical damage to the property of another. In 1998, the legislature also excluded persons convicted of the illegal sale or possession of a controlled substance.

### Administration of State Housing

In Connecticut, public subsidized housing is financed and overseen by three main agencies: the state Department of Economic and Community Development (DECD), the Connecticut Housing Finance Authority (CHFA), and the federal Department of Housing and Urban Development (HUD).

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<sup>1</sup>Disability was defined in the Social Security Amendments of 1956 as a person who is, “...unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which must be expected to result in death or to be of long-continued and indefinite duration.”

Over the years there have been several organizational changes in the administration of state-funded housing. Most recently, responsibility for overseeing existing state elderly housing projects was transferred from DECD, the state's lead housing agency, to the Connecticut Housing Finance Authority. The transfer of responsibility occurred as part of the sale of the state's entire portfolio of subsidized housing to the quasi-public housing authority in 2003.<sup>2</sup> (The portfolio is discussed in more detail in Section II.)

**Department of Economic and Community Development (DECD).** As the state's lead housing agency, DECD is responsible for planning and coordinating the activities and programs of state agencies that have a major impact on the cost, production, or availability of housing. Specifically, DECD examines both the private and public sector ability to meet the state's housing needs and coordinates with municipalities, housing authorities, and other agencies on housing policy and activities. This information is used to prepare both state and federally mandated reports. The department works closely with the federal government in administering federally funded housing programs. DECD also continues to administer a number of programs including a state-funded rent subsidy program for elderly projects also known as the elderly rental assistance program or elderly RAP (described in the following section).

**Connecticut Housing Finance Authority (CHFA).** Established as a quasi-public agency in 1969, CHFA's primary responsibility is to promote housing for low- and moderate-income individuals. CHFA creates financing for construction and rehabilitation of housing and provides low-interest financing available to low- and moderate-income families. As described previously, CHFA now oversees the state's housing portfolio including the approval of its management plans.

Each year developers, local housing authorities or other entities that manage state-assisted housing must submit a management plan to the state for approval. Each plan, which is actually the operating budget for the projects being managed by the entity, contains the rents charged, the total revenues generated, and total expenditures for each project. From these budgets, which CHFA now must approve, CHFA staff evaluates how the project is doing financially, whether rents need to be increased, or further reserves established. CHFA is currently in the process of completing its initial review of the financial condition of these projects.

**Department of Housing and Urban Development (HUD).** The federal Department of Housing and Urban Development is the agency that administers all major federally subsidized housing programs. HUD works with state and local agencies to administer its programs and to support efforts for the creation of affordable housing projects. HUD provides financing to construct and rehabilitate public housing developments. In addition, it provides rental assistance in the form of subsidies. The subsidies may be either tenant or project-based. Project-based subsidies are tied to units. Federal law and policies govern all federally subsidized housing. HUD has no direct involvement with state-funded elderly projects.

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<sup>2</sup> The transfer was made in exchange for \$85 million (P.A. 02-1 and P.A. 02-5 of the May 9 Special Session).

**Local housing authorities (LHAs).** Local housing authorities manage the day-to-day operation of public housing developments. LHAs frequently operate both federal and state public housing projects.

- Currently, there are 107 local housing authorities in the state.
- Ninety-three LHAs operate state elderly housing projects.
- LHAs vary significantly in size. Larger LHAs may manage hundreds of units with a large staff while LHAs in smaller towns may have one or two employees with fewer units.
- LHA staff produce operating plans and budgets, set rents, qualify and select tenants, and inspect, repair, and maintain the housing units. Typically, there is an executive director managing daily operations with oversight by a commission appointed by the town's chief executive officer.
- In addition to their commission, LHAs are also subject to oversight by the state. This function, previously performed by DECD, is now CHFA's responsibility.

### **Legal Framework**

In administering public housing programs, housing agencies must comply with both federal and state prohibitions against discriminatory practices. As discussed above, Connecticut law related to eligibility for state-funded elderly housing projects has included both elderly and non-elderly disabled has for quite some time. Thus, on its face, Connecticut law does not permit discrimination against persons in either group in that housing.

**State law.** The state Discriminatory Practices Act prohibits discrimination in the sale or rental of housing similar to federal law. (C.G.S. §46a-64c). Discrimination in the sale or rental of housing is prohibited on the basis of race, color, religion, sex, national origin, martial status, handicap, age, or lawful source of income. The law specifies a number of various discriminatory activities that are prohibited, including but not limited to:

- falsely representing that certain housing is not available;
- attempting to restrict the housing choices of a buyer or renter;
- imposing different terms and conditions for the sale or rental of housing; and
- refusing to allow reasonable modifications to accommodate a disability.

State law applies to all rental property, except two-family houses where the owner lives in one of the dwelling units, or rooms rented in a house occupied by the owner.

**Reasonable modifications/accommodations.** Similar to federal law, state law permits reasonable physical modifications or accommodations to rules or policies. Some residents may have difficulty adhering to certain housing rules due to their disabilities. Both state and federal law require that housing providers make reasonable physical changes or accommodations to their rules, policies, practices or services in order to give residents with disabilities equal opportunity to use and enjoy the communities in which they live. Residents must ask management for accommodations when they are needed. Management must work with any resident making such a request in order to determine reasonable changes for both the housing provider and resident.

Accommodations are generally considered reasonable if they are practical and feasible and do not create administrative or fiscal burdens.

**Federal law.** In addition to state law, federal law can also apply to state-funded elderly housing projects. Three main federal statutes that protect against housing discrimination are the Fair Housing Amendments Act of 1988 (FHAA), the Rehabilitation Act of 1973 (section 504), and to a certain degree, the Americans with Disabilities Act of 1990 (ADA).

**Fair Housing Amendments Act (FHAA).** The major federal housing discrimination law is the Fair Housing Act that is part of the Civil Rights Act of 1968. In 1968, the act prohibited discrimination in the sale or rental of housing on the basis of race, color, religion, sex, or national origin. In 1988, through the Fair Housing Amendments Act of 1988, handicap and familial status was added to the list. In addition, landlords are required to make reasonable physical modifications or accommodations to rules, policies, or services for tenants with disabilities. This law applies, with some exceptions, to publically and privately owned housing as well as housing subsidized by federal funds; thus, it applies to state-funded elderly projects.

**Rehabilitation Act of 1973.** Section 504 of the Rehabilitation Act of 1973, along with its subsequent amendments, prohibits discrimination on the basis of handicap in all programs or activities that the federal government helps to fund or operate. This statute covers residents in public and federally subsidized housing programs but does not cover residents in private housing.

**Americans with Disabilities Act.** The Americans with Disabilities Act prohibits anyone from discriminating against the disabled in employment, public services, and public accommodations and services operated by private entities. The ADA does not apply specifically to housing but prohibits any discrimination on the basis of disability.

## Support Services

There are a number of state agencies and groups that provide support services to elderly and non-elderly disabled persons. The three primary service agencies are the Department of Social Services (DSS), Department of Mental Health and Addiction Services (DMHAS), and Department of Mental Retardation (DMR).

**Department of Social Services (DSS).** DSS provides a broad range of services to the elderly, persons with disabilities, families, and individuals who need assistance in maintaining or achieving basic needs including income assistance for food and housing. Within DSS, the Elderly Services Division is responsible for planning, developing, and administering a comprehensive and integrated service delivery system for elderly persons in Connecticut. The division collaborates with other agencies to provide outreach, social, housing, transportation, health, educational, cultural and nutritional programs that help elderly residents.

DSS also funds the state's five Area Agencies on Aging (AAAs), which are private, nonprofit elderly planning and service agencies that plan, coordinate, evaluate, and act as brokers for elderly services. They award funds to regional agencies, which in turn provide meals and related social services at local sites.

Within the department's Bureau of Rehabilitation Services, the Disability Determination Services (DDS) unit is responsible for deciding eligibility for the Social Security Disability Insurance (SSDI) and Supplemental Security Insurance (SSI) programs. DSS also administers the State Supplement program.

DSS supports services specifically for persons with disabilities including vocational rehabilitation and centers of independent living. Independent living centers provide peer support, information and referral services, advocacy, and independent living skills training. Services for persons who are blind or hearing impaired are also provided by the Board of Education and Services to the Blind (BESB) and the Commission on the Deaf and Hearing Impaired. Both entities are within the DSS structure for administrative purposes only.

**Department of Mental Health and Addiction Services (DMHAS).** DMHAS is responsible for providing a wide range of treatment services to adults. These include: comprehensive, community-based mental health treatment and support services; inpatient hospitalization; outpatient clinical services; 24-hour emergency care; day treatment; psychosocial and vocational rehabilitation; and outreach services for persons with serious mental illness who are homeless. DMHAS also works with 15 Local Mental Health Authorities (six state-operated and nine operated by private, non-profit agencies) that provide treatment and support at the community level.

Program review committee staff has asked DMHAS to determine the total number of DMHAS clients served in state-funded elderly housing.

**Department of Mental Retardation (DMR).** DMR provides a wide range of supports and services for individuals with mental retardation. The supports and services DMR administers or purchases include: residential services; day programs; employment supports; family supports; case management; and clinical services. The majority of DMR's services are provided by private non-profit organizations in local communities.

Although the majority of DMR clients live at home with their family, the department administers or contracts for residential services from independent living, supported living arrangements, community living arrangements, community training homes, and residential center settings. According to DMR, some individuals with mental retardation in an independent living setting do not need staff support to manage a household on their own. Some require staff support to live independently. This staff support may be in the form of assistance with budgets, shopping and/or leisure activities. Staff support may range from a few hours a day to only a few hours a month, depending on the needs of the person.

Program review committee staff has asked DMR to determine the total number of DMR clients served in state-funded elderly housing.



## Section II: Housing and Population Profile

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### Overview of the State Elderly Housing Portfolio

In 2003, the General Assembly transferred the state's existing housing portfolio to the Connecticut Housing Finance Authority. The portfolio, which contains over 16,000 units, includes moderate-income rental/family housing, elderly, and congregate housing projects.<sup>3</sup>

CHFA has gathered a variety of data on state elderly projects, some at the request of program review staff, including current occupant profiles and waiting lists, as well as policy and procedure information. Other operational information, such as vacancies, tenant tenure, and eviction outcomes, is still being collected. CHFA is also in the process of collecting similar data for its own projects and for federally subsidized housing for elderly and disabled tenants that will be made available for analysis by the program review committee staff. A profile of the state elderly housing portfolio based on project data collected to date is presented below.

### Current Portfolio

At present, there are 200 state elderly housing projects located throughout the state in a little more than half (95) of the towns in Connecticut. The majority of towns (68 percent) have just one (37 towns) or two (28 towns) state elderly projects; another 18 towns have three, while one municipality (Enfield) has six, three have five, and eight have four state elderly housing projects. In addition, many towns have other types of state and/or federal public housing in their communities (e.g., federal elderly, state and federal elderly congregate, low- and moderate-income family, and various special needs housing).

All but seven of the 200 state elderly housing projects are operated by local housing authorities. One project is operated by a municipal developer (in Marlborough), three are operated by nonprofit developers (two in Hartford and one in Stamford), one is jointly managed by a nonprofit entity and a housing authority (in Greenwich), one is operated by a for-profit developer (in Old Lyme), and one (in New Britain) has been taken over by CHFA.

The total number of state elderly housing units is 7,256. The number of units in each town with state elderly housing projects ranges from 20 to 240. Figure II-1 shows the towns where state-funded elderly housing projects are located. Appendix B presents information on the number of units and projects in each town as well as information on tenants and waiting lists for each town's state elderly housing.

**Occupancy.** As of August 2004, 1,275 units, almost 18 percent of the total number of state elderly housing units, were occupied by non-elderly persons with disabilities. The portion of units occupied by young disabled tenants varies among the towns that have state elderly housing projects, as Appendix B shows. In all but three cases (East Hartford, Manchester, and Windham), the majority of the tenants (50 percent or greater) occupying the town's state elderly housing units are persons over age 62.

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<sup>3</sup> Congregate housing also serves elderly persons but provides other amenities such as one meal day.



In 22 towns, the proportion of non-elderly disabled persons living in state elderly housing units is 25 percent or greater. Table II-1 summarizes tenant occupancy information for each of these 22 towns. The highest percentage of tenants who are persons with disabilities under age 62, 83 percent, is in East Hartford's 30-unit state elderly housing project. Approximately 41 percent of the towns (9) have five or fewer young disabled persons occupying state elderly housing units in their communities. There are eight towns that have no non-elderly disabled tenants in their state elderly housing projects.

<b>Table II-1. State Elderly Housing Unit Occupancy 25% and over Non-Elderly Disabled Tenants (August 2004)</b>					
<b>Municipality</b>	<b>Number Projects</b>	<b>Total Number Units</b>	<b>Number Elderly Tenants</b>	<b>Number Non-Elderly Disabled Tenants</b>	<b>% Units Occupied by Non-Elderly Disabled Tenants</b>
East Hartford	1	30	5	25	83.3%
Manchester	2	80	38	42	52.5%
Windham	2	90	43	47	52.2%
Wethersfield	4	112	63	49	43.8%
Waterbury	3	154	89	65	42.2%
Windsor	3	112	69	43	38.4%
Danbury	3	150	97	53	35.3%
Bristol	1	40	26	14	35.0%
Colchester	3	64	43	21	32.8%
Mansfield	2	40	27	13	32.5%
Naugatuck	5	194	132	62	32.0%
Norwich	4	183	125	58	31.7%
Hamden	4	190	131	59	31.1%
Portland	2	70	50	20	28.6%
Griswold	2	60	43	17	28.3%
Greenwich	1	51	37	14	27.5%
Stamford	2	78	57	21	26.9%
Norwalk	1	30	22	8	26.7%
Groton	4	175	130	45	25.7%
Putnam	3	67	50	17	25.4%
Ansonia	1	40	30	10	25.0%
Plymouth	2	60	45	15	25.0%
Source of Data: CHFA					

**Waiting lists.** Information on waiting lists for state elderly housing units gathered by CHFA indicates strong demand from both elderly and non-elderly disabled tenant populations. Based on data CHFA received from 90 towns (data were missing or require follow up in five cases), the total number of applicants on state elderly housing waiting lists was 5,616 as of August 2004. Almost 60 percent of the wait list applicants were persons over age 62 (3,311) and 41 percent were non-elderly disabled persons (2,305).

The size and composition of waiting lists differ among individual towns as the data summarized in Appendix B indicates. Reported waiting lists are as small as one person in two communities and as large as several hundred in other towns. Persons over age 62 make up at least half of the applicants on waiting lists in all but 20 towns. In these towns, non-elderly disabled persons account for between 53 and 95 percent of waiting list applicants. In contrast, there are 10 towns with waiting lists that do not include any non-elderly disabled persons.

The CHFA waiting list information should be considered only a rough estimate of the number of persons seeking state elderly housing. No standard procedures for developing and maintaining waiting lists are in place and policies vary from town to town. For example, some towns close their lists and accept no further applications at a set number while others have no limits. There also can be duplication among the lists as eligible persons can apply for state elderly housing in multiple towns.

**Rent structure.** In its new management role, CHFA is now responsible for reviewing and approving the rent schedules and budgets of all state elderly housing projects. By law, tenants must pay 30 percent of their income or a base rent amount, whichever is greater. Base rent, also by statute, is the lowest possible rent the project requires to meet operating expenses. The state provides no operating subsidies to its housing operators but a number of elderly projects receive state funds for tenant rental assistance. The elderly rental assistance program (Elderly RAP) is described in more detail below. In addition, about a dozen state elderly projects receive federal Section 8 housing assistance funding that subsidizes their rents.

Rents for state elderly projects vary widely depending several factors including:

- the project's financial condition;
- how and when the project received state funding (e.g., projects financed with grants and early projects that received the lowest interest loans generally have the lowest capital costs); and
- the types of services included in the monthly rental charge, which can range from water only to all utilities.

At present, CHFA is conducting its first comprehensive review of the financial condition of each project in the state subsidized housing portfolio and will be sharing its findings concerning state elderly projects with program review staff in about a month. Program review staff is also compiling data on rent schedules, services included, and any subsidies provided, for all state elderly housing projects.

## Tenant Income

The primary source of income for both the elderly and non-elderly disabled tenants of state-funded elderly housing is from the Social Security Administration.

**Social Security benefits.** The Social Security program provides monthly benefits to workers and their families when the worker retires, dies, or becomes disabled. Monthly benefits are payable to retired workers at age 62 or to disabled workers at any age. The amount of the worker's retirement or disability benefit is based on the worker's level of earnings in employment or self-employment covered by the Social Security program.

According to the Social Security website<sup>4</sup>, retired workers in Connecticut received an average of \$981 per month while disabled workers received \$864. In addition to their Social Security benefits, retired individuals may also receive pensions from their former employers.

**Determining disability benefits.** As mentioned previously, non-elderly individuals are eligible for state-funded housing if they are certified as totally disabled by the Social Security Administration. Receipt of social security benefits is considered disability verification. The Social Security Administration disburses disability benefits under two programs: Social Security Disability (SSD) and Supplemental Security Income (SSI).

The Social Security Administration defines "disability" as having a physical or mental impairment that prevents substantial work and that lasts, or is expected to last, at least 12 months or result in death. The rules for determining whether someone is disabled are the same under both programs. Both programs define medical disability the same way.<sup>5</sup>

While eligibility for SSD is based on prior work history, SSI disability payments are made on the basis of financial need. SSD is provided to disabled persons who have earned enough social security credits through their own work records. Conversely, disabled persons receiving SSI have not worked enough to earn the needed social security credits.

Supplemental Security Income is a federal cash assistance program that provides monthly payments to low-income aged, blind, and disabled persons. The program is based on nationally uniform eligibility standards and payment levels. The federal SSI payment is determined by the recipient's countable income, living arrangement, and marital status. A state may supplement the payment levels of all or selected categories of recipients. The state or the Social Security Administration may administer these supplemental payments.

The Social Security Administration reports the 2004 SSI payment rate (not including any state supplement) is \$564 for an individual. The average state supplement for individuals living independently in the community in April 2004 was \$150. Due to their disability and financial situation, persons in the SSI group are more likely to seek residence in an elderly state housing project.

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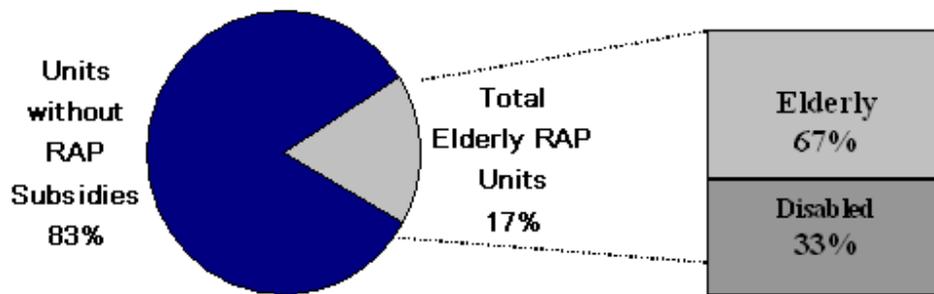
<sup>4</sup> Social Security Administration, <http://www.ssa.gov>, accessed July 28, 2004.

<sup>5</sup> In 1995, federal law eliminated drug addiction and alcoholism as a basis for disability in both the Social Security Disability and SSI programs.

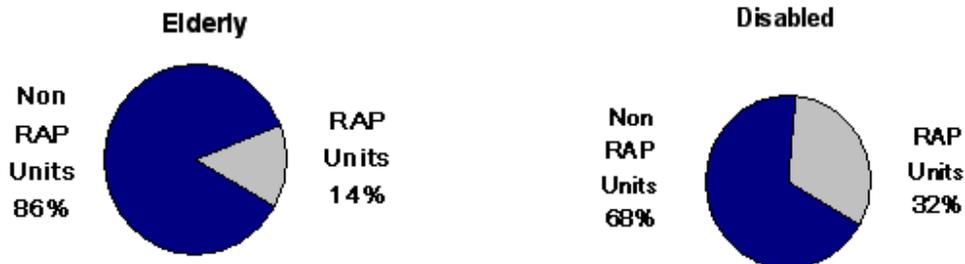
**Elderly RAP.** The Elderly Rental Assistance Program (elderly RAP), administered by the state's Department Economic and Community Development, provides rental assistance for residents of state-funded elderly housing projects. Participants must spend more than 30 percent of their income on rent and utilities in order to qualify. The amount of assistance is the difference between 30 percent of the individual's adjusted gross income, minus a utility allowance, and the base rent. Housing authorities that operate state-assisted housing determine which of their tenants are eligible based on annual certifications of tenants' income.

In FY04, DECD provided approximately \$1 million in elderly RAP subsidies to 1,238 units, which represents 17 percent of all state-funded elderly units and are administered by 41 different housing authorities. A full breakdown of elderly RAP subsidies by town and type of tenant is provided in Appendix C. As Figure II-1 shows, 33 percent of these units (403) were occupied by non-elderly disabled persons while 67 percent (835 units) were occupied by elderly tenants. However, as Figure II-2 shows, the portion of total elderly tenants receiving RAP subsidies is smaller (14%) than the portion of younger disabled who receive this type of rental assistance (32 percent).

**Figure II-1. Elderly RAP Subsidies in State Funded Elderly Housing**



**Figure II-2. RAP Subsidy by Tenant Group**



## Section III: Eligibility, Screening and Eviction

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### Eligibility Requirements

An individual interested in residing in an elderly housing project applies directly to the housing authority managing the complex. Non-elderly disabled applicants of state-assisted elderly housing are subject to the same rules for admission as elderly people. An applicant is eligible if he/she: 1) has an annual income at or below the housing authority's income limit, and 2) meets the statutory definition of elderly. In addition to these criteria, an applicant must pass the housing authority's screening process (described in more detail below).

**Income eligibility.** An applicant's annual income is used both to determine income eligibility and to calculate rent. To determine income eligibility, housing authorities use the annually adjusted federal Department of Housing and Urban Development (HUD) limits for federally assisted housing. These federal limits are based on percentages of median family income estimates, adjusted for family size.

Applicants for state elderly public housing must have an annual income that is no more than 80 percent of the area median income. The HUD limits generally refer to people at 80 percent of the area median income as "low income." The current income limits are presented in Table III-1. As seen in the table, 80 percent of the area median income levels differs by region.

**Definition of elderly.** As mentioned above, the statutes governing state-funded elderly projects define "elderly persons" as individuals age 62 and over who need financial housing assistance or people who have been certified as totally disabled by a federal board or agency.

Federal antidiscrimination laws, discussed earlier, prohibit housing authorities from inquiring about the nature or extent of a person's disability, or about diagnosis or details of treatment. To verify that an applicant meets the statutory definition, a housing authority may confirm an individual's age and whether the applicant receives either Social Security disability or Supplemental Security Income (SSI). Receipt of such income is all the verification needed that an individual qualifies as a person with a disability.

### Tenant Screening

After determining an applicant's eligibility to live in elderly public housing, the housing authority determines, like any landlord, whether the applicant is suitable for tenancy. State-funded housing, similar to rentals in the private market, operate with written lease requirements. As such, LHAs have a responsibility and an opportunity to screen applicants so those selected will abide by the lease provisions including paying their rent, maintaining their units, and not behaving in a disruptive manner.

Unlike eligibility determination, under which an applicant is either eligible or not, applicant suitability is subject to a wide range of interpretation and judgment by housing authority staff. The state's operating manual for subsidized housing outlines the eligibility requirements; however, it does not address tenant screening. According to housing authorities interviewed by

program review staff, most LHAs follow the HUD guidelines issued for the federal projects they manage. Those guidelines allow screening, provided it does not violate antidiscrimination laws. Many housing authorities believe their ability to screen applicants is limited due to these guidelines.

<b>Table III-1. 2004 HUD Low-Income Limits</b>		
	1 PERSON	2 PERSON
Bridgeport, CT PMSA FY 2004 MFI: 75,800	\$40,250	\$46,000
Danbury, CT PMSA FY 2004 MFI: 96,500	\$40,250	\$46,000
Hartford, CT MSA FY 2004 MFI: 73,900	\$40,250	\$46,000
New Haven-Meriden, CT PMSA FY 2004 MFI: 71,600	\$40,100	\$45,800
New London-Norwich, CT-RI MSA FY 2004 MFI: 66,700	\$39,050	\$44,600
Stamford-Norwalk, CT PMSA FY 2004 MFI: 111,600	\$48,700	\$55,700
Waterbury, CT PMSA FY2004 MFI: 64,900	\$39,050	\$44,600
Worcester, MA-CT PMSA FY 2004 MFI: 69,300	\$38,800	\$44,350
Hartford County FY 2004 MFI: 77,600	\$40,250	\$46,000
Litchfield County FY 2004 MFI: 67,700	\$39,050	\$44,600
Middlesex County FY 2004 MFI: 87,700	\$40,250	\$46,000
New London County FY 2004 MFI: 79,200	\$40,250	\$46,000
Tolland County FY 2004 MFI: 76,000	\$40,250	\$46,000
Windham County FY 2004 MFI: 66,100	\$39,050	\$44,600
<p>A Metropolitan Statistical Areas (MSA) contains (1) a city with a population of at least 50,000 or (2) an urbanized area with a population of 50,000 or more and has a total metropolitan population of at least 75,000 in New England. A Primary Metropolitan Statistical Areas (PMSA) is an area with a population of more than one million. If a location is not part of an MSA or PMSA, then separate county limits apply. Certain adjustments are made for areas that have unusually high or low income compared to housing costs.</p>		

Antidiscrimination laws prohibit housing authorities from applying different or stricter screening standards to applicants with disabilities than it applies to other applicants. Questions and information requested during admissions screening must be based upon an applicant's

abilities to meet the demands of tenancy and satisfy eligibility requirements. Applicant evaluations must be made on individual behavior history and not on assumed behavior or unfounded perceptions.

According to federal law, the application process cannot solicit information about the nature or severity of an applicant's disabilities. The law prohibits inquiries regarding an applicant's health or ability to live independently. Applicants cannot be asked to prove they are capable of independent living and cannot be required to provide confidential medical records to support claims they can live independently.

To screen tenants, the LHA typically asks for information such as the applicant's income, the number of people who need accommodation, references from past landlords, and if applicable, work history. LHAs may use this information to examine an applicant's history of meeting financial obligations, caring for a rental unit, or involvement in disruptive or criminal activity.

Local housing authorities use different methods and combinations of information to screen applicants. Most conduct criminal background histories through a state or local police database. Others rely on information provided by previous landlords or references. Some housing authorities in the state use a private service based in Massachusetts, the INFO CENTER, that provides information on a person's credit history, criminal records, and any court-ordered evictions. Even with these mechanisms, housing authorities report difficulty in screening applicants in certain situations.

**Lack of rental history.** A housing authority typically examines the housing history of an applicant for the past three to five years to assess whether the applicant would be a successful tenant. However, determining suitability of applicants may be a problem if no rental history exists. Some persons with disabilities may not have a rental history because they have never lived on their own or have spent extended time in medical or treatment facilities. The LHAs may not inquire into the nature of the condition, medication, or treatment including the name of the medical treatment facility. Without rental history, LHAs may seek alternative references that the applicant may choose to supply, such as physicians, caseworkers, or relatives to find out whether the applicant has a history of disturbing neighbors, destroying property, or failing to pay debts. However, LHAs find this information could be unreliable if the party contacted is motivated to help the person find housing, regardless of the applicant's true ability to uphold a lease agreement.

**Substance abusers.** State law specifically makes people ineligible for elderly housing if they: (1) currently use illegal drugs; (2) abuse alcohol with a recent history of disruptive or dangerous behavior which would constitute a direct threat to the health, safety, or property of another; (3) have a recent history of disruptive or dangerous behavior which would constitute a direct threat to the health, safety, or property of another; or (4) have been convicted of selling or possessing illegal drugs in the past two years (CGS Sec. 8-116c).

Due to changes in federal law, substance abuse alone is no longer a basis to determine disability. However, the co-occurrence of a physical or mental disability and substance abuse

renders some persons with disabilities to be considered dually diagnosed. Housing authorities raise this as another difficult screening issue for applicants whose histories suggests that they may be substance abusers but who claim to be in recovery or rehabilitated.

Screening for alcohol abuse is slightly different than for illegal drug use. Although alcohol is a legal drug, abuse with a recent history of disruptive behavior is grounds for rejecting an applicant. However, LHAs are required by state law to consider any mitigating circumstances for alcohol abuse. Specifically, state law requires that a housing authority give consideration to the time, nature, and extent of the applicant's conduct and to factors which might indicate a "reasonable probability of favorable future conduct," such as evidence of rehabilitation and of a willingness to attend counseling (CGS § 8-45a).

**History of disruptive behavior.** LHAs are allowed to investigate an applicant's history in order to avoid admitting applicants who might engage in disruptive behaviors. Housing authorities may ask if the applicant:

- kept a unit clean, safe and sanitary;
- violated health or safety codes;
- caused any damage to a current or previous unit; or
- was involved in any disturbances resulting in neighbor complaints or calls to the police.

LHAs typically use former landlord references to confirm applicants' past behavior regarding financial obligations, disturbances with neighbors, destruction of property, upkeep of apartments or criminal activity, which would adversely affect other residents. However, housing authorities interviewed by committee staff indicated previous landlords may not be forthcoming with such information because they would like to unload a problem tenant.

**Independent living.** Residing in state elderly housing is considered independent living. Residents are expected to have the health and physical mobility to enable them to live on their own with minimal assistance. Support services may be used by residents to maintain independent lifestyles. However, federal policy guidelines clearly indicate that it is a federal law violation to inquire whether a individual is capable of "living independently."<sup>6</sup> Housing authorities may ask all applicants whether a unit with special features or some other accommodation is needed. However, they may not question the type of support services applicants may need to live independently.

Federal regulations also require housing authorities to consider "reasonable accommodations" so persons with disabilities can live in public housing. These accommodations may be adjustments in the rules, policies, practices, or services governing occupancy. Adjustments are not required if they create an undue financial and administrative burden.

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<sup>6</sup> HUD changed its policies after a 1990 federal lawsuit (Cason v. Rochester Housing Authority) found that a housing authority had discriminated illegally against three women with disabilities in rejecting their applications for housing on the grounds that they could not live independently. The federal court found the "independent living" standard to be intrinsically discriminatory against people with disabilities.

## State Eviction Law

Under state law, public housing tenants, like other tenants, may be evicted on any one of five legally sufficient grounds (CGS § 47a-23) listed below.

**1. Expiration of the Lease.** With one exception (discussed below), a landlord is under no obligation to renew a lease once it expires.

**2. Nonpayment of Rent.** If a tenant does not pay his or her rent, a landlord may evict after a nine day grace period. If the rent is paid during the grace period, the tenant cannot be evicted for non-payment.

**3. Breach of Tenant's Statutory Duties.** Tenants are statutorily required to refrain from creating a nuisance or defacing the premises, adhere to the health and fire codes, and maintain the premises clean and safe. Violation of these duties is a ground for eviction. However, a tenant cannot be evicted on this ground if the tenant corrects the problem within 15 days and has not caused the same problem within the past six months.

**4. Breach of Lease Terms.** Landlords may impose additional lease terms beyond rental payments. The terms must apply to everyone and pertain to rational things such as the welfare of others or property damage prevention. Breach of these terms is a ground for eviction. Similar to the breach of statutory duties, the ground is nullified if the tenant cures the breach within 15 days and has not caused the same problem within the past six months.

**5. Illegal Conduct or Serious Nuisance.** Assaulting the landlord or other tenants, using the premises for gambling, prostitution, or to sell drugs, are grounds for eviction. A tenant cannot correct or cure an eviction based on illegal conduct or serious nuisance (CGS §§ 47a-15 and 31).

**Summary process.** State law sets the procedure for eviction called "summary process". The process begins when a landlord serves a tenant with a notice to quit the premises. If the tenant fails to respond to this notice by refusing to move from the rented premises, the landlord may initiate proceedings in court by filing a summons and complaint. The tenant then has an opportunity to respond to the complaint. If the tenant contests the action, the court hears the case. However, not all housing cases go to trial. Court personnel, known as housing specialists, are responsible for the initial screening and evaluation of all contested housing matters. A housing specialist attempts to mediate housing disputes and work out settlements. The process ends when the court either accepts or rejects the settlement or renders a trial judgment. If the court decides in the landlord's favor, the tenant may request a stay of execution to secure more time before being ordered to leave the apartment.

The length of time it takes to evict a tenant after proceedings have been initiated depends on whether the tenant has a defense he or she intends to pursue and the landlord's diligence in wanting the tenant out. Program review committee staff is in the process of collecting time, cost, and eviction outcome data for all state-funded elderly projects.

**Eviction exception for certain tenants.** If non-elderly disabled individuals violate the law, their lease, or the rules of the complex, they can generally be subject to the state's normal eviction procedures, depending on the lease provisions, the same as anyone else living there. However, federal and state fair housing laws require that they not be discriminated against on account of their disability. In addition, general landlord tenant laws give both the elderly and certain disabled people some additional protection against eviction.

State law does provide exceptions in the eviction of certain tenants. While most tenants can be evicted for lapse of time (i.e., upon the expiration of their lease), the law prohibits tenants who are: a) aged 62 years of age or older; b) blind; or c) physically disabled from being evicted for this reason if they reside in buildings with five or more separate dwelling units. (C.G.S. § 47a-23c)

These tenants cannot be evicted except for good cause, that is, for one or more of the following reasons:

- nonpayment of rent;
- refusal to agree to a fair and equitable rent increase;
- material noncompliance with tenants' statutory responsibilities that materially affect other tenants' health and safety or the premises' physical condition such as the condition of the apartment, trash removal, and causing disturbances or nuisance to neighbors;
- tenant conviction of using the premises for prostitution or illegal gambling, or other use in material noncompliance with the rental agreement; or
- other material noncompliance with the landlord's rules and regulations authorized by statute.

A tenant is physically disabled under the statute if he or she relies on a wheelchair or other remedial appliance or device or has a chronic physical handicap, infirmity, or has an impairment that is congenital or resulting from a bodily injury, organic process or change, or has an illness, including epilepsy, deafness, or hearing impairment. The disability must be expected to result in death or to last for a continuous period of at least 12 months.

Tenants who do not meet this definition of “disabled” are subject to the five general grounds of eviction: lapse of time; failure to pay rent; noncompliance with a landlord’s rules or regulations; breach of statutory duties; or engaging in illegal conduct or conduct that constitutes a serious nuisance. State law also allows housing authorities to evict any resident convicted of selling or possessing illegal drugs anywhere while living in the project. (CGS § 8-116c (b)).

## Section IV: Management Issues

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### Policy Implications

Based on committee staff interviews and concerns raised by the various interested parties, two distinct policy implications become apparent. There is both a social and an economic impact resulting from the policy of mixing non-elderly disabled with elderly residents.

**Social impact.** Conflicts among non-elderly disabled and elderly people living in the same state public housing projects have been cited as a problem for years in Connecticut. What is not clear is the extent and pervasiveness of the problem, as concerns are based largely on anecdotal accounts. A few highly publicized incidents have raised concern in at least a few housing authorities.

Advocates for the disabled generally agree conflicts exist but don't view the problem as widespread and argue that mixed housing can work given adequate support services. Some point out that in some communities elderly and non-elderly disabled residents co-exist successfully and provide support for each other. In addition, it is important to note that neither group is immune to mental illness, physical limitations, or substance abuse.

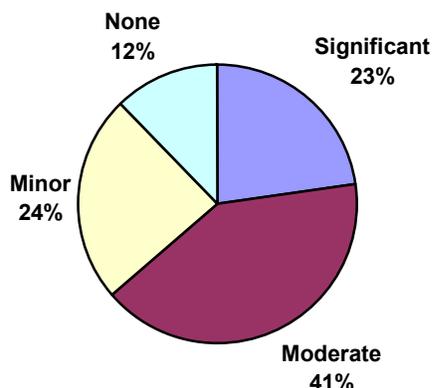
Comprehensive data on the nature and extent of the problems between elderly and non-elderly disabled people residing in state-funded elderly housing projects do not exist. Even if incident data were available, though, the perceived concerns of elderly residents might not be adequately expressed by that information.

To develop a sense of the concerns, program review staff conducted a survey of housing authority management and examined recent public hearing testimony. The more common concern appears to be the generational differences that are often referred to as the "different lifestyles" of the two groups. It is generally acknowledged that both groups have different preferences and viewpoints that sometimes result in conflicts. For example, younger residents tend to have more visitors, keep different hours, and have different tastes in music, dress, and social and recreational activities. These preferences alone can cause friction with elderly neighbors.

However, anecdotal accounts about projects in Connecticut suggest specific concerns with non-elderly mentally ill tenants. The problems range from fears based on elderly people's perception of mentally ill people to actual instances of physical harm by mentally ill tenants. Program review staff is currently in the process of compiling actual incident reports from all state-funded elderly housing managers.

In its survey, program review staff asked housing authority officials to what extent, if any, conflicts exist between non-elderly disabled and elderly tenants living in their particular state-funded elderly housing projects. The results, shown in Figure IV-1, reveal that more than 60 percent of the respondents indicated significant (23%) to moderate (41%) conflicts. Committee staff will continue to examine the nature and extent of the conflicts as more complete information becomes available.

**Figure IV-1. Extent of Tenant Conflict  
(Reported by Project Officials)**



Source: LPR&IC Survey

### **Prior Efforts to Document Problem**

As mentioned earlier, the management issues associated with mixed populations are long-standing. Several studies conducted in recent years that have attempted to document tenant problems in public housing are summarized below.

**1992 GAO Report.** In 1992, a national study of federally funded elderly housing projects, attempting to quantify and describe the problem, gave some insight into the issue in Connecticut.<sup>7</sup> The study found, for example, that at that time non-elderly disabled people occupied 9 percent of the elderly units and that problems were worse in large housing authorities, which had the highest concentrations of these tenants. Housing authorities of all sizes reported that poor housekeeping, disruptive visitors, and alcohol abuse were the most common problems associated with non-elderly disabled tenants. At the time, the Danbury Housing Authority was recognized as successfully addressing the problems by working with local mental health organizations on providing services to the mentally ill tenants.

The study also found large housing authorities (500 or more units) attributed a greater share of the problems associated with elderly projects to mentally disabled tenants. Managers of large housing authorities attributed 35 percent of the problems in these projects to non-elderly mentally ill tenants while those in medium (between 100 and 499 units) and small housing

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<sup>7</sup> The General Accounting Office (GAO) surveyed over 1,000 housing authorities nationwide managing over 300,000 federally funded elderly housing units. (*Housing Persons with Mental Disabilities with the Elderly*, GAO, August 1992).

authorities (fewer than 100 units) attributed 21 percent and 6 percent respectively to these tenants.

**1996 UConn Study.** In 1996, the legislature's Select Committee on Housing requested the University of Connecticut to develop and conduct a survey designed specifically on the issue of mixed population.<sup>8</sup> The 1996 survey made an attempt to measure the extent of negative incidents in state-subsidized elderly housing. It found that non-elderly disabled tenants were more likely as a group to violate the terms of their lease including engaging in disruptive behavior. The areas that presented the most problems were nonpayment of rent, failure to maintain unit, and disruption of peace. However, the 1996 survey also found "little evidence to support the conclusion that the majority of non-elderly disabled tenants pose management problems."<sup>9</sup> According to its analysis, serious, recurrent problems involving younger disabled residents were concentrated in a small group of housing authorities. However, limitations of the data were acknowledged including examining the issue from only the management's perspective and potential differences in categorizing and reporting negative incidents.

**Housing and Aging working group.** The results of the 1996 survey were provided to the Select Committees on Housing and Aging who had convened a working group of committee members to address the mix population issue. The working group was to determine and document the source and magnitude of the problem between elderly and non-elderly disabled tenants residing in state assisted public housing and develop options for resolving the problem.

The committees held four hearings around the state (Hartford, Norwich, Danbury, and Hamden) to receive information from both elderly and disabled people living in public housing. At that time, the working group concluded that conflict exists in public housing facilities shared by the elderly and non-elderly disabled, but the problem was not widespread and could be resolved without capping the number of disabled units.

Among its recommendations, the group supported:

- the authorization of resident service coordinators;
- a registry of accessible housing for disabled people; and
- co-operative agreements between the Department of Mental Health and Addiction Services (DMHAS), the Department of Social Services (DSS), and housing authorities.

The implementation of these recommendations is further discussed in the Section V.

## **Economic Impact**

Another policy implication of mixing non-elderly disabled tenants with elderly tenants cited by local housing authorities is the financial impact on an authority. When rental housing is constructed, developers must ensure that sufficient funding is available to operate the housing (e.g., insurance, maintenance/repairs, reserves, property management costs, utilities) and to pay

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<sup>8</sup> *The Mixed-Population Issue in State-Subsidized Elderly Housing: Management Problems Posed by Nonelderly and Elderly Tenants*, Nancy W. Sheehan PhD and Charles Stelle MS, University of Connecticut (1998)

<sup>9</sup> Sheenan, p. 38.

back any debts incurred in financing the project. For most elderly housing developments funded by the state, tenant rents and, in some cases, DECD rent supplements, are used to cover these operating costs.

Unlike federal housing, funds are not provided by the state for operations. Each project is expected to operate based on the rents of the tenants. Each housing authority, with the approval of the state, sets a rent called a base rent. Base rent is the minimum rent that must be charged to meet all of the complex's operating expenses. Tenants must pay the base rent or a percentage of their adjusted gross income, not to exceed 30 percent, whichever is greater.

The amount of the rent paid by a tenant above the base rent is called excess of base. For tenants who cannot afford the base rent, 41 housing authorities currently receive a limited rental subsidy known as elderly RAP administered by DECD to pay the difference between what a tenant can afford and the base rent. For example, if a tenant could only afford \$70 of a \$100 base rent, the state would make up the difference of \$30. The subsidy goes directly to the housing authority.

According to many of the housing authorities interviewed by program review staff, the increasing admissions of younger disabled tenants have a significant financial impact on the operations of these developments. Specifically, they cite as a concern the lower income of the non-elderly disabled tenants and their tenure at projects.

The housing authorities claim elderly tenants typically have worked during their lifetime and receive social security benefits as well as pensions. Conversely, most non-elderly disabled tenants have had relatively few, if any, work years. Therefore, as a group the young disabled may be receiving considerably lower benefits. Many young disabled residents only receive an SSI payment and are more likely to be paying higher amounts of medical expenses that affect their ability to pay a higher rent.<sup>10</sup>

In addition, the elderly turnover rate tends to be higher than the younger disabled because of death or progressive need to transfer to more assisted living as they age. Housing authorities warn that as elderly vacancies open and are replaced by the growing number of disabled tenants on wait lists the projects will eventually have a higher disabled occupancy rate. This increased occupancy rate coupled with the longer tenure of non-elderly disabled tenants and growing presence on waiting lists leads housing authorities to believe their financial condition will be compromised.

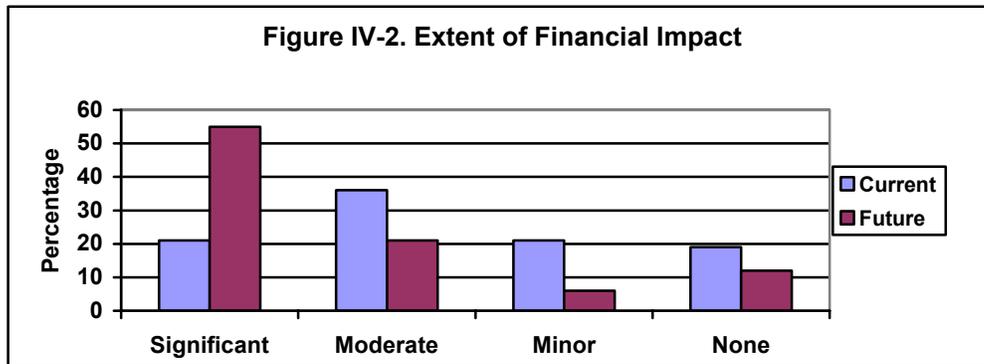
Without the higher rental income from seniors, housing authorities argue that operations will not be able to be sustained without large increases in the base rent. The result, they claim, will be accelerated and eventual deterioration of the property resulting in unsuitable housing for anyone.

The program review survey asked housing authorities to rate the extent of this financial problem. Figure IV-2 illustrates the survey response. Approximately 20 percent of the housing authorities reported a current significant financial problem. More than 50 percent anticipate a

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<sup>10</sup> Usually, if an individual receives SSI they can also qualify for Medicaid.

significant financial impact in the next five years. As a follow-up, committee staff submitted data requests to all housing authorities that reported a current financial impact or an anticipated one in the next five years. Program review staff is in the process of compiling information on the rent structure and wait lists to test the housing authorities' theories.



**Prior attempts to document occupancy and wait lists.** No requirement exists for housing authorities to track the number of non-elderly disabled individuals and elderly persons in their projects or on their wait lists. A number of attempts to collect this information have been tried in the past. The first attempt reported by the University of Connecticut (UConn) in 1996 was a request of the legislature's Select Committee on Housing. The UConn survey was sent to all local housing authorities with state-assisted housing. Over 50 percent of the 90 housing authorities surveyed responded. Based on their figures, approximately 3,381 units (88%) of the units were occupied by elderly tenants while younger disabled occupied 456 units or 12 percent.

In 2002, the Office of Legislative Research (OLR) was asked to conduct a housing authority survey to determine occupancy rates and wait list information. With a fifty percent response rate, OLR reported non-elderly disabled individuals resided in 518 units or 14 percent of the units. Of the 1,801 applicants on wait lists, 36 percent were non-elderly disabled. Eleven of the housing authorities reported their wait lists were at or over 50 percent non-elderly disabled. OLR also asked housing officials to check their records of five years earlier to determine growth in their non-senior population in state-funded housing. The response showed a tremendous percentage increase; however, the actual numerical increase was not as dramatic. For example, one housing authority experienced a 400 percent increase over the five years because its numbers went from one to five non-elderly individuals.

In the winter of 2003, the Connecticut Chapter of the National Association of Housing and Redevelopment Officials (CONN NAHRO) conducted its own survey of housing authorities administering state funded elderly projects. With less than a 40 percent response rate, CONN NAHRO reported non-elderly disabled tenants occupied 806 units or 23 percent. The CONN NAHRO survey found the number on wait lists had grown to 3,169 applicants, of which 1,665 (53 percent) were non-elderly disabled.

In February 2004, OLR was asked to follow-up on the housing authorities that did not respond to CONN NAHRO's survey. OLR received 16 additional responses from the 40 housing authorities that did not complete CONN NAHRO's survey. These responses represented an

additional 1,668 units with approximately 158 non-elderly occupants with disabilities. OLR was not able to get more specific data on wait lists or changes over the past five years.

Table IV-1 summarizes the results of the various survey responses including the 2004 program review survey. Differences in the way the numbers were collected may render these figures as basic estimates. Based on these estimates, the occupancy rate of non-elderly disabled residents in state-funded housing has grown over the last few years. In addition, numbers on wait lists have also increased for both elderly and non-elderly with a substantial rise in the percentage of young disabled. It is important to note that individuals may place their names on more than one LHA's wait list so duplication of numbers must be considered.

<b>Table IV-1. Summary of Prior Survey Efforts</b>					
Survey	LHAs Responding	Occupancy %		Wait List %	
		Disabled	Elderly	Disabled	Elderly
UCONN (1996)	52	456 (12%)	3,381 (88%)	N/A	N/A
OLR (2002)	48	518 (14%)	3,156 (86%)	642 (36%)	1,159 (64%)
CT-NAHRO (2003) & OLR Follow-up (2004)	34	806 (23%)	2,732 (74%)	1,665 (53%)	1,504 (47%)
	<u>16</u>	<u>158 (9%)</u>	<u>1,510 (91%)</u>	N/A	N/A
	50	964(19%)	4,242(81%)		
LPR&IC (2004)	90	1,275(18%)	5,981(82%)	2,305(41%)	3,311(59%)
Source: LPR&IC analysis					

## Section V: Models and Approaches

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### Policies

This section examines the approaches taken on the federal level and in Massachusetts to address the management issues raised in Section IV. According to the federal Department of Housing and Urban Development (HUD), three states operate state-funded elderly housing projects (Connecticut, New York, and Massachusetts). Of the three, only Massachusetts has significantly revised its policy approach.

#### Federal policy

Under federal law, non-elderly disabled people are entitled to live in elderly public housing built with federal funds. All federally subsidized senior housing complexes must comply with federal and state laws.

**Designation plans.** In 1992, after years of requiring equal access to federally subsidized units to both elderly individuals and non-elderly persons with disabilities, federal law was enacted to permit housing authorities to designate projects or portions of public housing projects (buildings, floors or units) for occupancy by elderly only or disabled only.<sup>11</sup> According to federal reports, the change was the result of an increase in the number of tenants with disabilities in elderly housing and the resultant complaints.

A housing authority must get HUD's approval before it designates units. To apply for designation, the housing agency must develop and submit a plan consistent with HUD guidelines. Federal regulation lays out the criteria for the contents of allocation plans and standards used to approve the plans. Housing authorities that do not have approved plans must continue to treat persons with disabilities and the elderly equally on a first come, first serve basis.

The original designation plan is valid for five years. HUD may extend the designation at two-year intervals, if the housing agency submits an updated plan (24 CFR § 945. 203). Below are the elements required for a designated housing plan.

*Justification for the designation* – Housing authorities must show that the plan supports the housing goals laid out in the state housing plan for the jurisdiction. The submission should include information on vacancies, wait lists, unit turnover, and admissions based on past experience in the projects to be designated.

*Project description* – The plan must describe all sites to be designated including the type of residents to which the designation will apply, any supportive services to be provided, and how the design and related facilities of the property accommodate the special environmental needs of the intended occupants.

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<sup>11</sup> This federal policy affects two types of HUD subsidized rental housing: 1) HUD public housing that are elderly/disabled public buildings operated by housing authorities, and 2) privately owned federally assisted housing financed through various HUD housing production programs (i.e. Section 236, Section 211(d)(3), Section 8 New Construction and Substantial Rehabilitation). The two types have different requirements for designation.

*Alternative resources* – The plan must describe other available resources (existing or proposed) for the residents and any applicants currently on the waiting list affected by the designation. Resources may include: voluntary transfers to other units; use of Section 8 vouchers; application for additional vouchers targeted to the population affected by the designation; or a combination of resources. The plan must also describe the notification process to residents and applicants of available alternative resources once the designation is approved.

*Treatment of current residents because of designation* – A statement must be included that lease compliant residents will not be evicted or be required to vacate to implement designation. The regulations specify that the choice to live in designated housing is voluntary. Elderly or disabled people cannot be forced to live in designated housing and a decision not to live there cannot be held against them with respect to moving to another project. The housing authority may offer cash incentives or other relocation benefits but may not harass tenants.

HUD reviews the plan’s statutory requirements and must notify the housing authority of its decision within 60 days after receiving the plan. If HUD does not make a determination within 60 days, the plan is approved by default. According to HUD, a Connecticut designation plan has never been disapproved.

HUD records through July 2004 indicate a total of 2,125 federal units in 15 Connecticut housing authorities have been designated as elderly only. Table V-1 lists the Connecticut housing authorities that currently have designation plans. As the table shows, all Connecticut designation plans have been for elderly only and include housing authorities of various sizes.

<b>Housing Authority</b>	<b>Number of Units Designated Elderly Only</b>	<b>Approval Date*</b>
Danbury	152	9/3/99
Greenwich	150	8/17/00
Manchester	100	8/21/00
Middletown	126	8/6/99
Milford	108	7/16/02
Naugatuck	104	8/14/00
New Haven	322	7/31/00
Norwalk	263	1/12/98
Seymour	80	7/16/02
Stratford	171	7/8/99
Torrington	198	7/19/01
Vernon	136	8/17/00
Waterbury	76	7/16/02
Winchester	79	6/19/01
Windsor Locks	60	8/14/00
<b>TOTAL</b>	<b>2,125</b>	
<i>* This indicates the date of the most recent HUD approval.</i>		

## Massachusetts

Like Connecticut, Massachusetts allows non-elderly disabled people to reside in state-funded elderly housing projects. In 1995, Massachusetts adopted legislation, commonly referred to as the "mixed population" law, setting limits on the number of disabled persons allowed in senior housing. According to state officials, the legislature enacted the law to address the tension between the two groups. For several years, there was concern over the growing number of non-elderly disabled residents moving into elderly housing. At the time the legislation was passed, non-elderly persons with disabilities occupied up to 60 percent of the units in some projects.

In addition to restricting admission, the law provided funds for:

- on-site coordinators to help resolve problems and better access services;
- rental subsidies to assist individuals with disabilities afford accessible units in the private market; and
- a statewide registry of accessible units for people seeking housing.

The law also: 1) gave housing authorities access to the state criminal database; 2) eliminated substance abuse as a qualifying disability for admission to elderly housing; and 3) revised the eviction process to enable housing authorities to initiate court proceedings more quickly under certain circumstances.

**Percentage cap.** The 1995 Massachusetts legislation requires housing authorities to give elderly households priority in 86.5 percent of their units and disabled non-elderly households the remaining 13.5 percent of the units. (Mass. Gen. Laws Ann. Ch. 121B § 39). However, if the authority does not have enough non-elderly disabled applicants to fill this percentage, it can place elderly people in the units. If the authority finds there are insufficient elderly to fulfill the 86.5 percentage, it must give priority to disabled individuals between the ages of 50 and 60. If units are still available, then the authority may offer them to younger non-elderly disabled people.

Within both populations, housing authorities may give a preference to residents of the municipality who are veterans. In addition, housing authorities may give disabled people, regardless of age, preference in handicapped-accessible units. These goals can only be achieved as housing authorities fill vacant units. The law forbids evicting any lawful residents in order to reach these goals.

According to Massachusetts officials, the state settled on these percentages after extensive negotiations between the legislature, the state Department of Housing and Community Development (DHCD), and advocacy groups. Housing officials indicate the percentage caps have slowed what had been a sharply increasing rate of non-elderly admissions and reduced a relatively high percentage of non-elderly disabled tenants in certain projects.

**Massachusetts service coordinators.** The 1995 act also appropriated \$600,000 to fund service coordinators to help elderly and non-elderly disabled residents resolve conflicts and obtain social and medical services. State officials report that most of the 22 service coordinators

are working in projects where younger disabled people comprise 25 to 30 percent of the residents.

A 2002 study, conducted by the McCormack Institute of Public Affairs at the University of Massachusetts, found the housing service coordinators have reduced tensions in the projects while helping elderly and young disabled residents obtain the services they need. Among its findings, the study reported coordinators allowed housing operators more time to manage their properties and in several instances coordinator intervention prevented problem situations from escalating into evictions.

**Massachusetts vouchers.** Upon the advice of the state's attorney general, the 1995 legislature also funded \$1.5 million in transitional rental assistance vouchers for disabled people who were eligible to live in elderly housing or who were living in such housing as of March 1, 1995. The act specifically stated that the appropriation did not create an entitlement.

The state's attorney general believed the legislation's set-aside goals could be legally challenged on the grounds that they deny housing for people with disabilities unless the state offered vouchers or other assistance. The law created 800 new rent vouchers. However, disability advocates claim the vouchers are not helpful in certain parts of the state such as Boston where housing market is limited.

**Massachusetts registry.** Another initiative funded by the 1995 legislation was the creation of a registry listing available subsidized and handicapped accessible units. A nonprofit agency, Citizens' Housing and Planning Association (CHAPA), created the registry prior to 1995 but maintains it with an annual \$100,000 appropriation. The statewide registry contains accessible units in both the public and private market and has a searchable web page. CHAPA has no data on the degree to which the registry has helped young disabled residents move out of elderly housing or reduce the number of younger disabled people on waiting list for this housing.

**Massachusetts eviction process.** The eviction process was also revised by the 1995 act. Usually, a housing authority must provide a tenant a hearing before it can seek an eviction action in court. However, the 1995 law allows the hearing to be waived if the tenant is believed to have: 1) caused serious physical harm to someone, 2) illegally possessed a firearm, or 3) engaged in criminal activity that seriously threatened the health or safety of other tenants. If an eviction action is brought due to one of the conditions it, also receives expedited treatment in court.

## Connecticut

Connecticut has also adopted provisions similar to the 1995 Massachusetts law. As mentioned earlier, a working group consisting of members of the Select Committees on Housing and Aging examined the issue of integrating elderly and disabled people who reside in senior housing in 1997. The groups' efforts resulted in 1998 legislation establishing resident service coordinators and creating a housing registry.

**Resident service coordinators (RSCs).** The 1998 legislation authorized DECD to give grants to housing authorities, municipal developers, and nonprofit corporations operating elderly housing to employ resident service coordinators. The grants were to be used to: assess residents'

individual needs; maintain regular contact with the residents; monitor support services delivery; advocate changes in services; and provide mediation and conflict resolution.

Resident service coordinators perform an array of functions. Their primary function is to help residents receive the supportive services they may need to live independently in their apartments. This is accomplished mainly by identifying needs of residents and coordinating and monitoring service delivery. In addition to assisting individual residents with supportive services, service coordinators may address broader concerns that affect entire housing communities. They serve as resident advocates and may organize social activities.

It is important to note that RSCs are not case managers and do not provide direct services. RSCs are typically the bridge to bring residents to case management when needed. In addition to the DECD grants, housing authorities with federal housing may employ RSCs with federal dollars or their own funds. The roles and functions of RSCs may vary depending upon the programs that fund them and upon housing facilities need and philosophies regarding service coordination.

Resident service coordinators' work schedules also vary. They may work full-time or part-time. Developments with more than 150 units are entitled to a full-time resident services coordinator. Those with fewer units may have a part-time coordinator. RSCs may work exclusively for one community or provide service coordination for multiple housing sites.

RSC positions funded with DECD grants are required to have either a BS/BA degree in a human services or related discipline or five years relevant experience in a position involving direct contact with elderly persons. The job qualifications also call for superior interpersonal skills, effective written and verbal communication skills, organizational ability, crisis intervention skills, and mediation/conflict resolution skills.

Grantees are required to provide DECD quarterly and annual reports on the activities of resident service coordinators. The report provides information on the number of clients served and type of services provided.

Under the original grant authorization, 29 resident coordinators were hired (four of these RSCs were already working at LHAs but had their duties expanded). According to DECD, many authorities did not initially apply for various reasons. Some found no need for the additional staff and others did not want to commit themselves because the funding was only guaranteed for one year. Currently, there are 35 housing authorities grantees servicing about 2,500 residents at a cost of approximately \$600,000. DECD reports that almost all the original grantees have continued to receive grants. (One housing authority gave up its grant.) However, new grantees have not been possible because of budget cuts.

**Accessible housing registry.** The 1998 legislation also called for the creation of a registry of handicap accessible housing. DECD, in consultation with the Department of Social Services, state building inspector, Office of Protection and Advocacy, Department of Information Technology, and Office of Policy and Management, was to establish a statewide electronic database on the availability of handicapped accessible or adaptable housing units.

The database is statutorily required to include the:

- location of each unit, the number of bedrooms, and the rent;
- type of housing and neighborhood in which the units are located;
- vacancy status of each unit;
- date each occupied unit is expected to become available; and
- features that make the unit accessible or adaptable.

Currently, Coop Initiatives Incorporated manages the database at a cost of approximately \$40,000.

**Collaboration and partnership with service agencies.** Some advocates suggest that mixing non-elderly disabled persons into senior housing is possible with proper support services and cooperative agreements between health service providers and housing authorities. One example often mentioned as a successful program is the Danbury Housing Authority. Danbury was cited in two national studies as an example of a housing authority that integrated mental health ventures. It has collaborated with area social service agencies to assess and identify resident needs and link residents to services.

In 1993, the commissioner of the former Department of Aging believed better collaboration with local social services would help reduce tensions and alleviate some of the management problems. He convened a meeting of the commissioners of various agencies to produce a cooperative agreement. The result was a memorandum of understanding between the former Departments of Mental Health and Housing and the Department of Social Services and the Connecticut Housing Finance Authority. The document was signed in December 1994 and was to continue indefinitely. A copy is included in Appendix D.

It is important to note, of course, that the use of services is a matter of individual choice and therefore, the success of service efforts, however sufficient, depends upon an individual's willingness and ability to use them.

## Section VI: Areas for Further Review

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Program review staff has identified a number of areas that it will continue to consider and examine for the remainder of the study. The following outlines the activities and analyses already in progress or anticipated for the staff findings and recommendations report.

**Resident input.** Committee staff acknowledges the need to receive input from the parties most affected by this policy – the residents. Formal public hearings, open forum meetings, and smaller group discussions are planned for several communities around the state. To date, an open forum meeting and group discussion has been held in Manchester. Formal public hearings are scheduled for Hartford, Hamden, Norwich, and Danbury. In addition to these venues, residents will also be offered the opportunity to contact committee staff by mail, email, or telephone.

**Negative incidents.** As discussed earlier, reports regarding the social conflicts occurring in these projects have been primarily anecdotal. Committee staff has asked housing authority management to provide information on the number and nature of negative incidents taking place within the last six months.

**Eviction.** Program review staff will compile statistics on eviction proceedings initiated by housing authorities. Housing authorities have commented on the prohibitive nature of eviction proceedings. The items collected and analyzed will include cost, length of time, and outcome of eviction proceedings over the last five years.

**Resident service coordinators.** The use and effectiveness of resident service coordinators will also be examined. In particular, committee staff will review the activity reports submitted by coordinators to DECD and compare the qualifications and services provided by coordinators funded by other sources.

**Support services.** Program review staff will continue to assess the opinion of housing officials, tenants, and resident service coordinators regarding the availability, effectiveness, and success of support services provided by state and local agencies. (It is important to note this study is not an evaluation of support services.)

**Screening.** Committee staff will prepare a description of the client placement guidelines, if any, used by DMHAS and DMR in identifying individuals who can live independently.

**Housing options and alternatives.** Committee staff will provide an overview of the housing alternatives available to low-income elderly and non-elderly disabled populations. Specifically, staff will provide a summary of Connecticut's federal and other state financed housing inventory as well as rental assistance programs. However, this is not intended to be a needs assessment for affordable housing.

**Legislative proposals.** A chronology and description of legislative proposals considered in recent years including potential advantages and disadvantages will also be provided in the findings and recommendations report.



# **APPENDICES**



## Legislative History

Enacted during the March 1958 Special Session of the Connecticut General Assembly, Public Act 26 established the state's role in providing funds (\$4 million) for construction of homes for elderly persons of low income. Entitled, "AN ACT AUTHORIZING HOUSING PROJECTS FOR ELDERLY PERSONS OF LOW INCOME," *elderly persons of low income* was defined in Section 2 as those aged 65 or older who lacked the income necessary to live in decent, safe and sanitary housing (The lack of necessary income was determined by the Commission on Services for the Elderly).

In 1959, the issue was revisited because no one had accessed the \$4 million due to the following barriers:

- No process in place for application and approval of projects;
- Mandatory provisions that the municipalities provide roads, sidewalks, sewage and utility connections, etc.;
- Due to the way the bonds were structured, there was an extremely high debt service, which made the projected rent too expensive for the elderly poor; and
- Strict age limitation of 65 or older for women, more stringent than the social security requirement of 62 or older.

Senate Bill 1172 (passed May 22, 1959) was drafted to address these concerns. Entitled, "AN ACT CONCERNING DEVELOPMENT OF RENTAL HOMES FOR ELDERLY CITIZENS OF THE STATE," Public Act 600 (approved June 16, 1959) contained the following administrative revisions under section 2, subsection (m):

- Transferred the processing of applications and approval from the *Committee for the Elderly Citizens* to the *Department of Public Works* (which also oversaw the *State Housing Authority*);
- Loosening of mandatory provisions for municipalities;
- Added \$2 million in funding, restructured/subsidized debt service to make projected rent more affordable for the elderly poor; and
- Revised definition of "elderly persons" to mean women 62 or older, and men 65 or older.

In 1961, the definition of "elderly persons" was revised yet again. During the February 7, 1961 General Law Committee hearing of Senate Bill 527, "elderly persons" was expanded to include those persons certified by the Social Security Act as being *totally disabled*. "Disability" was defined in the Social Security Amendments of 1956 as a person who is, "...unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which must be expected to result in death or to be of long-continued and indefinite duration." Determination of disability was made by state agencies administering plans approved under the Vocational Rehabilitation Act. In 1957, the Social Security Administration outlined the

factors to be used in evaluating impairment, including “*the individual’s education, training, and work experience.*” The minimum age of 50 for eligibility for disability benefits was eliminated in the Social Security Amendments of 1960 (Public Law 86-778).

There appeared to be no controversy or opposition to the inclusion of the totally disabled to the definition of elderly persons. The only person who testified at the General Law Committee hearing (February 7, 1961) was the senator who introduced S.B. 527. The bill passed uneventfully through the Senate (April 18, 1961) and House (April 25, 1961). Entitled, “AN ACT CONCERNING ELIGIBILITY FOR HOUSING FOR ELDERLY PERSONS,” Public Act 110 (approved during the 1961 Session) contained the following addition to the definition of “elderly persons” under subsection (m) of section 8-113a: “...*or persons who have been certified by the social security board as being totally disabled under the federal social security act.*”

In 1963, the definition of “elderly persons” was modified slightly so that the age minimum for men was decreased from 65 years old to 62 years old. Entitled, “AN ACT CONCERNING ELIGIBILITY FOR HOUSING FOR THE ELDERLY,” Public Act 430 (approved during the January 1963 Session) eliminated gender differences in the following age aspect of the definition of “elderly persons” under subsection (m) of section 8-113a: “*Elderly persons*” means persons sixty-two years of age and over...”

Twenty years later, the definition of “elderly persons” was revisited once more. Entitled, “AN ACT REESTABLISHING THE INVESTMENT ADVISORY COUNCIL, THE DEPARTMENT OF HOUSING AND THE ARCHITECTURAL LICENSING BOARD,” Public Act 83-574 (approved during the January 1983 Session) expanded the entities able to determine which elderly persons lack the amount of income necessary, to include nonprofit corporations under subsection (m) of section 8-113a: “*Elderly persons*” means persons sixty-two years of age and over who lack the amount of income which is necessary, as determined by the authority or nonprofit corporation, subject to approval by the commissioner of housing, to enable them to live in decent, safe and sanitary dwellings without financial assistance as provided under this part, or persons who have been certified by the Social Security Board as being totally disabled under the Federal Social Security Act.

Changes to the definition of “elderly persons” next occurred in 1991. Entitled, “AN ACT CONCERNING LOANS FOR MODIFICATIONS TO HOUSING TO MAKE DWELLINGS ACCESSIBLE TO THE DISABLED,” Public Act 91-149 expanded the entities able to certify a person as totally disabled under subsection (m) of section 8-113a to include *any other federal board or agency*. The rationale for including any other federal board or agency in certifying a person as totally disabled was not explained. Testimony from the February 11, 1991 Select Committee on Housing hearing, however, described a Department of Housing low interest rate loan program for making dwellings accessible to those with physical handicaps (i.e. wheelchair-bound). Perhaps this certification expansion was made to encompass the federal boards or agencies that were distributing these loans.

A significant change occurred in 1995 with Senate Bill 449, “AN ACT CONCERNING ALCOHOL AND DRUG USERS IN SENIOR HOUSING.” During the February 7, 1995 Human Services Committee hearing for the bill, the following issues/concerns were raised:

- AARP mentioned the national problem of seniors living in senior housing with non-seniors classified as disabled. “Disruptive, even sometimes violent, behavior and drug dealing within the residence have terrorized many seniors.”
- Housing Authority staff reported an increased number of problems, including fires, evictions, homicides, prostitution, drug trafficking, and other safety and security issues, they believed were often directly related to the use and misuse of substances.
- Older persons themselves are often alcoholics/substance abusers. Change the wording to drug *abuse* rather than drug *use* as medications could be interpreted as drugs; similarly, alcohol *use* would “infringe on clients who enjoy an occasional imbibement.”

During the May 9, 1995 Senate Session on S.B. 449, Senator Lovegrove, one of the legislators who had introduced the bill, summarized the amendment as excluding those who: “...currently use illegal drugs; are currently alcohol abusers and that abuse causes them to be disruptive and/or dangerous to others around them; and those who have a recent history of being disruptive or dangerous to people around them.”

During the May 24, 1995 House Session on S.B. 449, it was clarified that the federal law, while not protecting those who are using drugs illegally, will protect those who have successfully completed a drug addiction recovery program or are using prescription drugs at a doctor’s direction.

Public Act 95-197, entitled, “AN ACT CONCERNING SENIOR HOUSING AND TEMPORARY OCCUPANCY OF DWELLING UNITS OPERATED BY HOUSING AUTHORITIES,” (approved June 28, 1995) included the aforementioned exceptions to determining which persons may live in such housing under subsection (m) of section 8-113a: “...except persons (1) currently using illegal drugs, (2) currently abusing alcohol and who have a recent history of disruptive or dangerous behavior whose tenancy constitutes a direct threat to the health and safety of another individual or whose tenancy would result in substantial physical damage to the property of another or (3) with a recent history of disruptive or dangerous behavior whose tenancy would constitute a direct threat to the health and safety of another individual or whose tenancy would result in substantial physical damage to the property of another.”

On April 8, 1998, the House proposed amendment LCO 3340, designated as House “B,” which barred elderly and disabled people from moving into state assisted housing if they had been convicted of selling or possessing illegal drugs in the past two years. The amendment also allowed state assisted housing projects to evict tenants if they were convicted of selling or possessing illegal drugs.

LCO 3340 was withdrawn during the April 22, 1998 House Session. The language was tightened and designated as amendment LCO 3813, House “C.” Adopted on April 22, 1998, this amendment made a person who had been convicted of the sale or possession of a controlled substance ineligible to live in housing for elderly and disabled persons during the 24-month

period following that conviction. Additionally, it would allow a housing authority to evict a person from elderly housing if they were convicted of selling or using an illegal substance. The barring and eviction of such persons is contained in Public Act 98-114, entitled, "AN ACT CONCERNING AN INCOME EXCLUSION FOR CERTAIN HOUSING TENANTS AND EVICTIONS FROM HOUSING PROJECTS FOR THE ELDERLY," (approved May 22, 1998, effective October 1, 1998). The earlier references to illegal drugs, alcohol abuse, and disruptive or dangerous behavior, was removed from the definition of "elderly persons" in subsection (m) of section 8-113a and placed in a new section 8-116c. Subsection (a) of section 8-116c describes those who would be ineligible to live in housing for elderly and disabled persons (i.e. illegal drugs, alcohol abuse, disruptive/dangerous behavior, conviction for sale or possession), and subsection (b) of section 8-116c describes eviction of tenants who are convicted of selling or possessing illegal substances:

*Subsection (a)* "An elderly person, as defined in subsection (m) of section 8-113a, shall not be eligible to move into a housing project, as defined in subsection (f) of section 8-113a, if the person (1) is currently using illegal drugs, (2) is currently abusing alcohol and has a recent history of disruptive or dangerous behavior and whose tenancy (A) would constitute a direct threat to the health or safety of another individual or (B) would result in substantial physical damage to the property of another, (3) has a recent history of disruptive or dangerous behavior and whose tenancy (A) would constitute a direct threat to the health and safety of another individual or (B) would result in substantial physical damage to the property of another, or (4) was convicted of the illegal sale or possession of a controlled substance, as defined in section 21a-240, within the prior twenty-four month period."

*Subsection (b)* "Any authority, municipal developer, nonprofit corporation or other lessor may evict any individual from such housing project who is convicted of the illegal sale or possession of a controlled substance, as defined in section 21a-240, during the period of time the individual is residing in such housing. Such eviction shall be in accordance with the provisions of chapter 832. Nothing in this section shall be construed to limit the remedies of any such authority, municipal developer, nonprofit corporation or lessor under chapter 832."

**Summary.** This legislative history of the mixing of the elderly with the non-elderly disabled in State elderly housing projects is current through 2003. To summarize, the addition of non-elderly disabled into the definition of elderly persons occurred quite early in the history of this legislation (1961). Concerns regarding the mixing of these two populations are reflected in the 1995 legislation that addressed the barring of primarily non-elderly disabled who currently abuse drugs or alcohol, or exhibit disruptive or dangerous behavior. Subsequent 1998 legislation expanded further on these concerns by also barring persons convicted of sale or possession of an illegal controlled substance from residing in state assisted housing projects, as well as evicting those convicted who currently reside in such housing.

**APPENDIX B**  
**Connecticut State Elderly Housing: Locations, Occupants and Waiting Lists, August 2004**

<b>Municipality</b>	<b>No. State Elderly Projects</b>	<b>Total No. Units</b>	<b>No. Elderly Tenants</b>	<b>No. Non-Elderly Disabled Tenants</b>	<b>% Units Occ. By Non-Elderly Disabled Tenants</b>	<b>Total Waiting List</b>	<b>No. Elderly Persons on List</b>	<b>No. Non-Elderly Disabled Persons on List</b>	<b>% Wait List Non-Elderly Disabled Persons</b>
Ansonia	1	40	30	10	25.0%	17	8	9	52.9%
Ashford	1	32	28	4	12.5%	21	14	7	33.3%
Berlin	2	70	63	7	10.0%	45	33	12	26.7%
Bethel	2	80	76	4	5.0%	65	57	8	12.3%
Branford	2	90	80	10	11.1%	3	2	1	33.3%
Bridgeport	1	24	20	4	16.7%	496	188	308	62.1%
Bristol	1	40	26	14	35.0%	32	10	22	68.8%
Brookfield	1	35	31	4	11.4%	29	25	4	13.8%
Canton	1	40	32	8	20.0%	13	6	7	53.8%
Cheshire	1	48	37	11	22.9%				
Clinton	1	30	29	1	3.3%	49	37	12	24.5%
Colchester	3	64	43	21	32.8%	22	18	4	18.2%
Coventry	2	80	61	19	23.8%	66	47	19	28.8%
Danbury	3	150	97	53	35.3%	216	22	194	89.8%
Darien	1	30	30	0	0.0%	53	46	7	13.2%
Deep River	1	26	22	4	15.4%	62	45	17	27.4%
Derby	3	106	95	11	10.4%	68	39	29	42.6%
East Hampton	2	70	67	3	4.3%	14	12	2	14.3%
East Hartford	1	30	5	25	83.3%				
East Windsor	3	84	70	14	16.7%	20	13	7	35.0%
Ellington	2	42	35	7	16.7%	19	12	7	36.8%
Enfield	6	240	196	44	18.3%	83	57	26	31.3%
Essex	1	36	34	2	5.6%	14	11	3	21.4%
Fairfield	3	68	65	3	4.4%				
Farmington	1	40	38	2	5.0%	37	31	6	16.2%
Glastonbury	3	140	126	14	10.0%	43	27	16	37.2%
Greenwich	1	51	37	14	27.5%	165	105	60	36.4%
Griswold	2	60	43	17	28.3%	41	33	8	19.5%
Groton	4	175	130	45	25.7%	9	7	2	22.2%
Guilford	3	90	69	21	23.3%	89	64	25	28.1%
Hamden	4	190	131	59	31.1%	37	37	0	0.0%
Hartford	2	76	71	5	6.6%	27	17	10	37.0%
Hebron	1	25	23	2	8.0%	10	10	0	0.0%

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Killingly	3	120	98	22	18.3%	30	20	10	33.3%
Ledyard	1	30	28	2	6.7%	62	28	34	54.8%
Litchfield	2	66	60	6	9.1%	43	37	6	14.0%
Manchester	2	80	38	42	52.5%	382	253	129	33.8%
Mansfield	2	40	27	13	32.5%	7	3	4	57.1%
Marlborough	1	24	22	2	8.3%	33	30	3	9.1%
Middlefield	1	30	27	3	10.0%	15	10	5	33.3%
Middletown	1	40	36	4	10.0%	16	15	1	6.3%
Milford	4	135	122	13	9.6%	101	35	66	65.3%
Monroe	1	30	26	4	13.3%	39	34	5	12.8%
Montville	2	80	72	8	10.0%	20	18	2	10.0%
Morris	1	20	20	0	0.0%	52	52	0	0.0%
Naugatuck	5	194	132	62	32.0%	54	36	18	33.3%
New Britain	1	50	44	6	12.0%				
New London	2	210	169	41	19.5%	88	34	54	61.4%
Newington	3	106	81	25	23.6%	146	95	51	34.9%
North Branford	2	60	53	7	11.7%	14	11	3	21.4%
North Canaan	1	40	40	0	0.0%	8	8	0	0.0%
North Haven	2	70	68	2	2.9%	112	88	24	21.4%
Norwalk	1	30	22	8	26.7%	38	23	15	39.5%
Norwich	4	183	125	58	31.7%	38	21	17	44.7%
Old Lyme	1	39	39	0	0.0%	35	28	7	20.0%
Oxford	1	34	33	1	2.9%	20	20	0	0.0%
Plainfield	1	40	32	8	20.0%	12	2	10	83.3%
Plainville	3	120	119	1	0.8%	63	61	2	3.2%
Plymouth	2	60	45	15	25.0%	1	1	0	0.0%
Portland	2	70	50	20	28.6%	10	4	6	60.0%
Preston	2	40	40	0	0.0%	1	1	0	0.0%
Putnam	3	67	50	17	25.4%	37	14	23	62.2%
Ridgefield	2	60	54	6	10.0%	16	15	1	6.3%
Rocky Hill	2	70	62	8	11.4%	59	50	9	15.3%
Seymour	1	40	38	2	5.0%	12	9	3	25.0%
Shelton	3	120	110	10	8.3%	14	12	2	14.3%

**APPENDIX B**  
**Connecticut State Elderly Housing: Locations, Occupants and Waiting Lists, August 2004**

<b>Municipality</b>	<b>No. State Elderly Projects</b>	<b>Total No. Units</b>	<b>No. Elderly Tenants</b>	<b>No. Non-Elderly Disabled Tenants</b>	<b>% Units Occ. By Non-Elderly Disabled Tenants</b>	<b>Total Waiting List</b>	<b>No. Elderly Persons on List</b>	<b>No. Non-Elderly Disabled Persons on List</b>	<b>% Wait List Non-Elderly Disabled Persons</b>
Simsbury	2	70	61	9	12.9%	3	3	0	0.0%
Somers	2	54	52	2	3.7%	14	12	2	14.3%
South Windsor	2	70	61	9	12.9%	30	20	10	33.3%
Southington	5	180	165	15	8.3%	58	52	6	10.3%
Sprague	1	20	17	3	15.0%	5	5	0	0.0%
Stafford	3	110	104	6	5.5%	14	10	4	28.6%
Stamford	2	78	57	21	26.9%	62	33	29	46.8%
Stonington	2	60	59	1	1.7%	14	12	2	14.3%
Stratford	3	113	105	8	7.1%	522	263	259	49.6%
Suffield	3	70	68	2	2.9%	8	5	3	37.5%
Thomaston	2	62	61	1	1.6%	33	29	4	12.1%
Thompson	2	70	60	10	14.3%	24	19	5	20.8%
Tolland	1	30	26	4	13.3%	71	58	13	18.3%
Torrington	4	130	104	26	20.0%	55	14	41	74.5%
Trumbull	4	186	170	16	8.6%	127	82	45	35.4%
Vernon	4	134	134	0	0.0%	55	32	23	41.8%
Voluntown	1	20	17	3	15.0%				
Wallingford	5	185	156	29	15.7%	72	33	39	54.2%
Waterbury	3	154	89	65	42.2%	284	62	222	78.2%
Watertown	3	120	112	8	6.7%	196	160	36	18.4%
West Hartford	1	40	33	7	17.5%	22	17	5	22.7%
Westbrook	1	32	28	4	12.5%	7	7	0	0.0%
Westport	1	50	46	4	8.0%	159	144	15	9.4%
Wethersfield	4	112	63	49	43.8%	62	28	34	54.8%
Winchester	1	40	40	0	0.0%	59	25	34	57.6%
Windham	2	90	43	47	52.2%	92	5	87	94.6%
Windsor	3	112	69	43	38.4%	35	14	21	60.0%
Windsor Locks	1	40	35	5	12.5%	85	62	23	27.1%
Woodstock	1	24	24	0	0.0%	5	4	1	20.0%
<b>Total</b>	<b>200</b>	<b>7,256</b>	<b>5,981</b>	<b>1,275</b>	<b>17.6%</b>	<b>5,616</b>	<b>3,311</b>	<b>2,305</b>	<b>41.0%</b>

Source of Data: CHFA

# Appendix C

## Elderly Rental Assistance Program

Elderly RAP FY 03-2004			
Municipality w/Elderly RAP	RAP Subsidy	# of RAP Units	# of Disabled Units
Ashford	\$ 15,300	17	1
Branford	\$ 19,692	34	4
Bridgeport	\$ 48,780	22	5
Brookfield	\$ 3,012	7	1
Colchester	\$ 62,952	50	19
Danbury	\$ 93,096	94	35
Deep River	\$ 20,340	14	3
Enfield	\$ 24,870	63	20
Guilford	\$ 10,432	22	4
Hamden	\$ 3,768	17	3
Hebron	\$ 25,248	22	0
Killingly	\$ 14,498	39	13
Manchester	\$ 14,640	38	28
Mansfield	\$ 6,891	11	3
Marlborough	\$ 29,844	18	1
Milford	\$ 5,440	9	3
Monroe	\$ 3,384	7	2
Montville	\$ 9,516	28	6
New Britain	\$ 60,180	38	17
New London	\$ 167,122	84	40
North Branford	\$ 15,372	24	3
Norwalk	\$ 5,784	14	3
Norwich	\$ 35,832	78	36
Oxford	\$ 18,048	17	2
Plymouth	\$ 660	2	0
Portland	\$ 31,751	40	16
Preston	\$ 8,090	13	2
Putnam	\$ 17,635	27	12
Ridgefield	\$ 15,912	26	2
Seymour	\$ 12,642	19	0
Simsbury	\$ 2,844	10	2
Stamford	\$ 82,080	43	14
Stratford	\$ 13,947	32	6
Tolland	\$ 468	1	0
Torrington	\$ 937	2	1
Vernon	\$ 992	2	0
Wallingford	\$ 27,384	92	6
Waterbury	\$ 4,730	14	6
Wethersfield	\$ 102,072	78	38
Windham	\$ 37,380	60	43
Windsor Locks	\$ 4,592	10	3
<b>Grand Total</b>	<b>\$ 1,078,157</b>	<b>1,238</b>	<b>403</b>

## **APPENDIX D**

# MEMORANDUM OF UNDERSTANDING

AMONG

THE DEPARTMENT OF SOCIAL SERVICES

AND

THE DEPARTMENT OF MENTAL HEALTH

AND

THE DEPARTMENT OF HOUSING

AND

THE CONNECTICUT HOUSING AND FINANCE AUTHORITY

This Memorandum of Understanding (MOU) is made and entered into on this 22<sup>nd</sup> day of December, 1994, by and between the State of Connecticut Departments of Social Services (DSS), Mental Health (DMH), Housing (DOH), and the Connecticut Housing and Finance Authority (CHFA).

## I. PURPOSE STATEMENT

State and assisted housing programs face a daunting array of problems that reach far beyond "bricks and mortar". Increased crime, growing numbers of persons who are homeless, economic and social trends that have swelled the ranks of individuals and families needing assistance and growing numbers of applicants and residents who do not have the skills or supports to help them meet essential lease requirements, all add up to what seem like insurmountable problems in housing programs.

To confront these problems innovative programs and efforts have sprung up across Connecticut to promote quality communities in public and assisted housing. Housing providers and supportive service agencies are entering into collaborative agreements to help residents who want and need services obtain assistance.

It is against this background that this state partnership seeks to collaborate in the pursuit of a multi-functional holistic approach to address these issues through a Memorandum of Understanding.

This MOU attests to and supports the fact that ALL residents have the inalienable right and privilege of choice of residence, access to required support services and a quality of life whereby their health, safety and well being are optimally preserved. Further, the MOU supports the goal to facilitate, foster and ensure the fulfillment of stated residents' rights through mutual collaboration, consultation, cooperation, optimization of shared resources, and advocacy for new resources.

## II. GUIDING PRINCIPLES

As pro-active partners and participants of this MOU, each party acknowledges and is committed to guiding principles that balance and assert residents' and owners' rights relative to **admission, occupancy and supportive services** issues in state and assisted housing in Connecticut. Accordingly all partners agree to the adoption and implementation of these guiding principles, as follows:

### A. Admission

1. That the essential commandment of anti-discrimination laws is for each individual to be treated on his/her merits, without presumption of abilities based on race, color, religion, sex, age, national origin, disability, or familial status, recognizing that specific program requirements may limit participation under the law;

2. That, at the time of initial application, housing providers properly confirm the presence of an applicant's disability as a condition of statutory eligibility relative to rent computation, qualifying for specific developments, units, and/or reasonable accommodations;

3. That housing providers require all residents to meet performance-based standards for subsidy eligibility and for the occupancy of an assisted unit as stated in the "obligations" sections of the lease agreement and project rules and regulations where applicable;

4. That housing providers employ such "performance and behavior" admission requirements as defined in the provider's lease. Admission requirements cannot be defined by the resident's presumed needs nor by the biases of other residents. Specifically, as currently required by the Section 504 and Fair Housing rules, a housing provider may not consider "... ability to live independently...";

5. That screening methods be targeted toward determining the likelihood that any applicant will be able to meet the essential requirements of tenancy as expressed in the lease. These five (5) essential requirements are summarized as follow:

- i. pay rent and other charges under the lease in a timely manner;

- ii. care for and avoid damage to one's unit and common areas, use facilities and equipment in a reasonable way, create no health or safety hazards and report maintenance needs;
  - iii. respect the rights and enjoyment of others, and not damage the property of others;
  - iv. signatories to the lease are responsible for the conduct of all family members and also their guests;
  - v. refrain from criminal activity that threatens the health, safety and/or right to peaceful enjoyment of other residents or staff and not to engage in drug-related criminal activity on or near the premises;
  - vi. comply with necessary rules and program requirements of the housing providers and building health and safety codes.
6. That any initial evaluation of an applicant be disability-neutral, seeking no information beyond the minimum required to clarify specific eligibility and screening issues, and not based on disability-related presumptions about the applicant's ability to meet essential obligations of the lease;
7. That if any applicant with a disability cannot satisfy the requirements of tenancy because of previous rental history, housing providers must, if requested by the applicant:
- i. consider whether any mitigating circumstances related to the disability could be verified;
  - ii. make a reasonable accommodation, to the extent feasible, to allow the applicant to meet the requirements.

B. Occupancy

- 1. That State housing programs are based on the mutual obligation of all parties involved in the process. These obligations are spelled out in laws, regulations, leases, regulatory contracts, and in generally accepted principles of mutual respect between and among individuals;
- 2. That lease terms, house rules and other policies governing behavioral-based tenancy standards be reasonable and applied uniformly to all residents;

3. That housing providers comply with three (3) essential obligations, as follow:
  - i. provide decent, safe and sanitary housing;
  - ii. comply with applicable state and federal occupancy standards as well as all other legal/regulatory requirements; and
  - iii. comply with the requirements of its lease with each resident. If housing providers fail to adhere to these requirements, residents may avail themselves of appropriate remedies for redress, such as grievance procedures contained in the lease and/or as provided under law.
4. That housing providers have the right to enforce essential, performance-based lease requirements and seek appropriate remedies up to and including evictions;
5. That housing providers make reasonable accommodation in lease and other policy requirements, when requested by qualified residents with disabilities;
6. That housing providers provide timely, effective and adequate notice and appropriate opportunity for review of their decisions affecting residents including responses to their requests for reasonable accommodations;
7. That housing providers are permitted to seek information necessary to meet program requirements in the least possible intrusive manner and are encouraged, in some cases, obligated, to protect confidentiality of information and respect individual privacy.

C. Supportive Services

1. That housing providers fund service coordinators from operating budgets, residual receipts, and/or any other source as long as funding obligations are not compromised;
2. That, in addition to service coordinators, housing and service providers establish and maintain a listing of State and/or local resources for residents to locate and access a broad array of support service needs. Information could be gathered from State or local government agencies which provide services to families, children, individuals who are elderly, persons with disabilities, or in need of emergency assistance, etc. In many cases, state and local governments can also provide a listing of non-profit agencies with which they contract for services;

3. That housing and service providers enter into collaborative agreements offering the residents, in need of support services, a direct link to service providers;

4. That housing providers, with or without assistance from service agencies, help residents learn how to fulfill essential lease requirements and about programs and services offered through the housing provider, community-based programs and other related issues;

5. That by providing accommodations for residents' associations and other forms of self-help groups, housing providers can help foster a sense of community and empower residents to support and assist each other;

6. It is envisioned that support services be provided through existing state, local or client reserves.

### III. OUTCOMES

The following positive benefits and outcomes would eventuate if the aforementioned purpose, guiding principles, and recommendations are respectively established:

- Clearer role for the inclusion of housing providers in the human services delivery system and greater opportunities for the residential property managers to participate as active partners in the voluntary site coordination and referral processes;
- Clearer communication on housing eligibility requirements, lease provisions, service eligibility requirements, service-provider funding streams, and service-provider priorities and constraints;
- Clearer lines of accountability;
- More effective channels for resolution of problems;
- Clearer contact procedures, both for day-to-day and for emergencies including named coordinators in the housing provider and service-provider organizations;
- Greater number of mutual housing/service-provider agreements for reciprocal education programming;
- More service providers' agreements providing outreach, tenancy support and crisis intervention to any resident or applicant who meets the service provider's eligibility criteria and desires services, resources permitting;

- More housing providers' agreements making community space available, from time to time, to facilitate service delivery;
- Service provider agreements to maintain services as long as the resident/client wants them and resources permit.

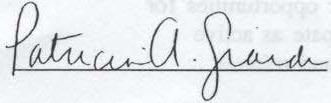
**IV. PERIOD OF AGREEMENT**

This agreement is effective upon parties' signatures and shall continue indefinitely.

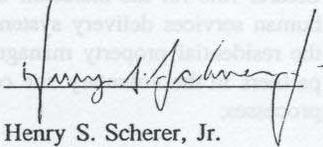
**V. MODIFICATION OR CANCELLATION PROVISION**

This agreement may be modified or amended by mutual consent of all the signatory parties. Requests for modification and amendments may be initiated by any party through written notification to all other parties.

**VI. ACCEPTANCE AND SIGNATURE**



Patricia A. Giardi  
Acting Commissioner  
Department of Social Services



Henry S. Scherer, Jr.  
Commissioner  
Department of Housing  
Board Chairperson  
Connecticut Housing and  
Finance Authority



Albert J. Solnit, M.D.  
Commissioner  
Department of Mental Health

# **APPENDIX E**

**Connecticut  
General Assembly**



**SENATOR**  
JOSEPH J. CRISCO  
*Co-Chair*

**REPRESENTATIVE**  
JULIA B. WASSERMAN  
*Co-Chair*

**SENATE MEMBERS**  
JOSEPH J. CRISCO  
JOHN W. FONFARA  
ROBERT L. GENUARIO  
TONI NATHANIEL HARP  
ANDREW W. RORABACK  
WIN SMITH, JR.

**HOUSE MEMBERS**  
BOB CONGDON  
JOHN W. HETHERINGTON  
MICHAEL P. LAWLOR  
ROGER B. MICHELE  
J. BRENDAN SHARKEY  
JULIA B. WASSERMAN

—  
CARRIE E. VIBERT  
DIRECTOR

**LEGISLATIVE PROGRAM REVIEW AND  
INVESTIGATIONS COMMITTEE**

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July 6, 2004

Dear Housing Authority Director:

The Legislative Program Review and Investigations Committee of the Connecticut General Assembly is conducting a study of the policy of mixing young disabled and elderly persons in state funded senior housing. The study is examining the extent and nature of problems arising between elderly and disabled non-elderly tenants as well as exploring options and alternatives.

As part of the study, each housing authority director is asked to complete the enclosed questionnaire and return it in the envelope provided by *July 26, 2004*. Some of the questions seek general information and others ask for opinion. The survey results will be compiled so that identification of any responding individual will be impossible.

*Again, we wish to emphasize this survey applies only to state elderly housing operated by housing authorities. It does not apply to federal complexes.*

Although you may have heard about issues in other housing authorities, we are interested in knowing of *your* actual experience in managing *this* particular housing authority. If you have any questions about the survey or the study, or would like to provide additional information, do not hesitate to contact Michelle Castillo or Jill Jensen, the committee staff assigned to this project, at (860) 240-0300.

The information you provide will help the committee better understand the extent of any concerns you may have and identify possible solutions. Thank you for your cooperation.

Sincerely,

Carrie Vibert  
Director

Enc.

**LEGISLATIVE PROGRAM REVIEW AND INVESTIGATIONS COMMITTEE  
HOUSING AUTHORITY SURVEY JULY 2004**

Housing Authority: \_\_\_\_\_ Title/Position: \_\_\_\_\_  
 Person Completing Survey: \_\_\_\_\_ Years in current position: \_\_\_\_\_

**For this confidential survey, housing refers to STATE funded elderly/disabled housing projects your authority administers. It does not refer to any federally assisted housing.**

1) Please indicate to what extent, if any, conflicts exist between non-elderly disabled and elderly tenants living in your state elderly housing project(s):  Significant  Moderate  Minor  None

2) In your opinion, what are the advantages and disadvantages of non-elderly disabled and elderly tenants living together in state elderly housing projects? \_\_\_\_\_

3) In general, do you favor or oppose the policy of integrating non-elderly disabled persons with elderly persons in public housing?  Strongly Favor  Favor  Oppose  Strongly Oppose

4) How effective are the following management tools in preventing or addressing conflicts between non-elderly disabled and elderly tenants at your state elderly housing project(s)? Please indicate which tools you employ.

*(Please circle a number from 1 to 4, where 1 = not at all effective, and 4 = very effective)*

Management Tools	Not at all Effective				Very Effective	Comments	Do you employ this tool? (Circle Yes or No)	
	1	2	3	4			Yes	No
Resident Services Coordinator	1	2	3	4			Yes	No
Housing certificates/vouchers	1	2	3	4			Yes	No
Applicant background check	1	2	3	4			Yes	No
Eviction process	1	2	3	4			Yes	No
Other: _____	1	2	3	4			Yes	No

5) Please rate how helpful intervention by each of the following has been in preventing or addressing conflicts between non-elderly disabled and elderly tenants at your state elderly housing project(s).

*(Please circle a number from 1 to 4, where 1 = not at all helpful, and 4 = very helpful)*

Intervention by....	Not at all Helpful			Very Helpful	No Experience	Comments
	1	2	3			
State agency for mental health services (DMHAS)	1	2	3	4	0	
State agency for mental retardation services (DMR)	1	2	3	4	0	
State Area Agencies on Aging (DSS)	1	2	3	4	0	
Community-based mental health service agency	1	2	3	4	0	
Other local social service providers	1	2	3	4	0	

6) For the following questions, a “negative incident” refers to a specific occurrence that disrupts the safe and secure enjoyment of home and/or personal property.

a) Does your housing authority have a policy to address negative incidents when they occur?  Yes  No

If yes, please briefly describe the policy (attach copy if available) \_\_\_\_\_

b) Does your housing authority have a system to track negative incidents?  Yes  No

If yes, please describe \_\_\_\_\_

c) In the *last 6 months*, how many tenants in your state elderly housing project(s) have been involved in a negative incident who were: under age 62: \_\_\_\_\_ age 62 and older: \_\_\_\_\_

d) Please indicate the type of negative incidents occurring over *the last 6 months* involving:

Type of incident	Tenants Under Age 62 with Disabilities		Tenants Over Age 62	
	Number of incidents	Number of Tenants	Number of incidents	Number of Tenants
Physical altercation				
Verbal altercation				
Excessive noise				
Poor housekeeping				
Destruction of property				
Disruptive guests				
Illegal drug use				
Drug dealing				
Prostitution				
Inappropriate social behavior (Please list, e.g. public nudity, profanity, etc....)				
1)				
2)				
3)				
Other: _____				
How many of these incidents required police intervention?				

7) Are there limitations to the effectiveness of your current applicant screening process in identifying problem tenants?

No  Yes If yes, what are the limitations? \_\_\_\_\_

8) What services, if any, do you use to screen applicants for your state elderly housing project(s)? (*check all that apply*)

NCIC database  State/local police database  InfoCenter (credit)  Other: \_\_\_\_\_  None

9) Some housing officials have expressed concern about potential financial problems if increasing percentages of tenants residing in state elderly housing projects are very low-income non-elderly disabled individuals who typically generate less rent than most elderly tenants.

How much of a financial problem does this situation present for your authority now and over the next five years?

Currently:  Significant problem  Moderate problem  Minor problem  Not a problem

In 5 years:  Significant problem  Moderate problem  Minor problem  Not a problem

10) Would you favor or oppose a policy of setting limits (e.g. a percentage cap) on the number of non-elderly disabled and elderly tenants within state elderly housing projects?  Strongly Favor  Favor  Oppose  Strongly Oppose

If in favor, indicate what you feel the percentages should be: \_\_\_\_\_% Elderly \_\_\_\_\_% Non-elderly disabled

11) In the last five years, how many eviction proceedings have been initiated against tenants in your state elderly project(s):

Against...	Non-Payment Of Rent	Illegal Drug Activity	Disruptive Behavior	Other (Please specify)
Tenants age 62 and over				
Tenants under age 62 with disabilities				
<b>TOTAL</b>				

For these eviction proceedings:	Non-Payment of Rent	Illegal Drug Activity	Disruptive Behavior	Other (Please specify)
What is the average length of time to complete (in months)?				
What is average cost per proceeding?				
<b>What number resulted in:</b>				
Eviction of tenant				
Mediation/other negotiation				
Other (e.g., tenant moves) _____				

12) Does your housing authority employ a resident services coordinator who is assigned to help tenants of your state elderly housing project(s)?  Yes  No

If Yes:

a) Do the duties of the coordinator include mediating conflicts between tenants?  Yes  No

b) Is the position funded by:  State DECD grant  Federal funds  Other: \_\_\_\_\_

c) Is this position:  Full-time  Part-time If part-time, hours per week provided on average \_\_\_\_\_

d) Is this amount of time adequate :  Yes  No If no, what amount would be adequate: \_\_\_\_\_ hours per week

If No:

- a) Do you have any staff other than a resident services coordinator assigned to mediate conflicts between tenants of your state elderly housing project(s)?  No  Yes (title of staff person \_\_\_\_\_)
- b) Do you have any staff other than a resident services coordinator assigned to assist tenants of your state elderly housing project(s) access social services?  No  Yes (title of staff person \_\_\_\_\_)
- c) How helpful would employing a resident services coordinator be to your housing authority?  
 Very helpful       Helpful       Somewhat Helpful       Not Helpful  
Why? \_\_\_\_\_

13) Are there any changes in state policies or programs you would suggest to address problems related to mixing non-elderly disabled and elderly tenants in state elderly housing projects ? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Thank you for taking the time to complete the survey.  
If you have any questions please call the committee staff at (860) 240-0300.*

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Please Return In The Enclosed Prepaid Envelope By July 26, 2004.