A Winning Strategy: Ending Homelessness with a Rapid Results Model
Overview of the Allegheny County/City of Pittsburgh Veteran Boot Camp

- Started Fall 2014
- Case Conference & Leadership Committees
- Submitted claim to USICH in February 2017
- Announcement of “effectively” ending homelessness in November 2017
- Currently creating sustainability plan
November 8, 2017

The Honorable Rich Fitzgerald
Allegheny County Executive
101 County Courthouse
436 Grant Street
Pittsburgh, PA 15219

The Honorable William Peduto
Mayor, City of Pittsburgh
City-County Building
414 Grant Street, 5th Floor
Pittsburgh, PA 15219

Dear County Executive Fitzgerald and Mayor Peduto:

Thank you for your commitment to ending Veteran homelessness. Your leadership—and that of your colleague throughout Allegheny County—has been instrumental as we work together to ensure that every Veteran in our country has a home.

The United States Interagency Council on Homelessness, Department of Housing and Urban Development, and Department of Veterans Affairs are pleased to confirm that Allegheny County and the City of Pittsburgh have effectively ended homelessness among Veterans. We are confident that the infrastructure and systems you have built will ensure that any Veteran experiencing homelessness in the region will get the support they need to quickly obtain a permanent home.

On behalf of USICH and our federal partners, thank you for answering the call to action through the Mayors Challenge to End Veteran Homelessness. We recognize and appreciate your extraordinary team, and look forward to continuing our collaboration as we work to end homelessness for all Americans.

Sincerely,

Matthew Roherty
Executive Director

Cc: Norm Suchar, Director, Office of Special Needs Assistance Programs, HUD
Keith W. Harris, National Director of Clinical Operations, VHA Homeless Programs, VA
Creation of the By Name List

- Committed leadership to drive the direction of the group
- Case Conference and Leadership committee co-chairs
- Interns, volunteers in community to assist
- “Buy in” from community leaders is a must
- Political leaders, CoC, shelter staff, street outreach, RRH/GPD/PSH programs, CoC, service coordinators, etc.
- Master List Format- HMIS, Google sheets, locked spreadsheet, etc
- Ensure that data security can be maintained
Updating the By Name List

- Ensure that each agency has access to the by-name list
- Create points of contacts for each agency and distribute contact list for accountability
- Communicate when and how agencies should update their clients on the by-name list
- BNL policy or expectations
- Schedule master list “clean up” meetings with HMIS staff and committee leaders
  - Recommended: Once/quarter
Updating the By Name List (cont.)

Updating process:

- Agencies may directly update the list
- Agencies may provide updates at committee meetings
- Agencies may send their updates to a specified person to update list
- The desired updating process may not work for each agency due to security, staffing, etc
- Accommodations to the updating process will most likely need to be made for 2-3 agencies
Case Conference Meetings

- Pittsburgh meets biweekly to case conference the housing pathways for Veterans on the by-name list
- Some by-name lists may be too long to case conference in one meeting
- Create and print sub-lists for case conference meetings

Sub list types:
  - Length of time homeless
  - Individuals without housing pathway
  - Chronic (youth, families)
  - Street homeless
  - Shelter

- If possible, have by-name list projected on screen in meeting room
Lessons Learned

• The by-name list can be used as a tool rather than waiting list
• Coordination occurs when the right people are consistently case conferencing together
• Improvements in communication: oftentimes multiple agencies were working with one Veteran
• Coordinate services, adapt housing plan, and housing offers
• Continually look for ways to improve the process, include other vital services agencies and possibly refocus the goal
Lessons Learned (cont.)

• Co-enrollment processes were created through case conference:
  • SSVF RRH staff now have a co-enrollment process with GPD. The process occurs without the assistance of the case conference meeting
  • SSVF and HUDVASH

• Shelter prioritization with Allegheny County’s coordinated entry system, everyone is at the table to discuss best housing pathway

• The case conference meeting ensures the co-enrollment process is occurring

• Pittsburgh’s Veteran agencies went from competitors to partners through this process
When messaging the announcement

• Meetings, meetings, meetings!
  • County Executive, Mayor’s offices communications teams

• Repeat the message at Boot Camp meetings

• Veteran speakers, able to tell their story

• Stress the importance of sustainability
CHRONIC HOMELESSNESS
October 31, 2017

Jennifer Koppel
Executive Director, Lancaster County Coalition to End Homelessness
618 N. Duke Street
P.O. Box 3555
Lancaster, PA 17604

Dear Ms. Koppel,

Thank you for your commitment to ending chronic homelessness. Your leadership—and that of your colleagues throughout Lancaster County—has been instrumental as we work together to ensure that every individual experiencing chronic homelessness in our country has a home.

The U.S. Interagency Council on Homelessness and the Department of Housing and Urban Development are pleased to confirm that Lancaster County has ended chronic homelessness. We are confident that the infrastructure and systems you have built will sustain this remarkable achievement—so that chronic homelessness in Lancaster County is prevented whenever possible, and if any resident does experience chronic homelessness in the future, they will get the support they need to quickly obtain a permanent home.

Along with our federal partners, we recognize and appreciate your extraordinary efforts, and look forward to continuing our collaboration as we work to end homelessness for all Americans.

Sincerely,

Matthew DeBerry
Executive Director

Cc: Norman Suchar, Director, Special Needs Assistance Programs, HUD
Chronically homeless definition:

An individual (or a head of household in a family) who:

- Is homeless and lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and

- Has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years; and

- Can be* diagnosed with one or more of the following conditions: substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability. (*disability can be self reported and does not need to be documented until post program entry – refer to documentation policy)
CHRONICALLY HOMELESS DEFINITION

- Provides a way to prioritize people with longest histories of homelessness and most severe needs
- Seeks to ensure that persons with highest needs are prioritized for permanent supportive housing
- Programs using “first-come, first-serve” basis and/or based on tenant selection processes that screen-in those who are most likely to succeed have not been effective in reducing chronic homelessness.

Notice CPD-14-012 provides guidance to Continuums of Care (CoC) Program (24 CFR part 578) funding for permanent supportive housing (PSH) regarding the order in which eligible households should be served in all CoC Program-funded PSH.

To ensure that all PSH beds funded through the CoC Program are used as strategically and effectively as possible, PSH needs to be targeted to serve persons with the highest needs and greatest barriers towards obtaining and maintaining housing on their own.

**Strongly encourages the prioritization of non-dedicated PSH beds for use by persons experiencing chronic homelessness.**
• CoCs are also encouraged to include in their policies and procedures governing their Coordinated Entry system, a requirement that all CoC Program-funded PSH accept referrals only through a **single prioritized waiting list** that is created through the CoCs Coordinated Entry process.

• A Coordinated Entry process is intended to increase and streamline access to housing and services for households experiencing homelessness, matches appropriate levels of housing and services based on their needs, and prioritizes persons with severe service needs for the most intensive interventions.

• CoCs must utilize a standardized assessment tool, in accordance with 24 CFR 578.3 (VI-SPDAT, SPDAT)
“AT RISK” OF MEETING THE CHRONIC DEFINITION

Individuals who meet at least one of the following criteria are added to the “at risk” tab of the community’s By Name List.

- Individuals who have experienced homelessness for 365+ days but do not report having a disability.

- People who have a documented disability and have 200+ days homeless.

- People who have 3 episodes of homelessness in the past 3 years.

- People identified by outreach workers and shelter staff as having extraordinary difficulty navigating the housing system.

- People living unsheltered who, due to personal reasons, are currently unable to accept housing offers.
ENDING CHRONIC HOMELESSNESS: CRITERIA CHECKLIST

The last 5 slides are the questions you will need to be prepared to answer, in depth, and provide the correlating documents to be reviewed by the Technical Assistance agency and the Federal Partners.

Begin making sure that your CoC has the written policies and procedures that reflect the work you are doing in each of these areas.
1. **Has your CoC identified and provided outreach to all individuals experiencing or at risk for chronic homelessness, and prevented chronic homelessness wherever possible?**

   - Regular weekly outreach to know unsheltered hot spot locations and shelters, etc
   - Proactively seeking out people newly experiencing homelessness
   - Outreach enters data immediately into HMIS and/or BNL
   - HMIS data coverage includes unsheltered, emergency shelters, transitional shelters, institutional settings.
   - Data from above is reviewed at least monthly to make prioritization decisions.
   - Outreach covers entire CoC geography
   - All stakeholders are engaged in efforts
   - Identify and track those “at risk” of meeting the chronic definition criteria to prevent that from happening
2. Does your CoC have the ability to provide access to shelter or other temporary accommodations immediately to any person experiencing unsheltered chronic homelessness who wants it?

- Can all people experiencing chronic homelessness access low barrier shelter regardless of sobriety, income, criminal history, etc
- Continually engage those who refuse shelter
- Does your CoC use RRH and TH as bridges to permanent housing as needed?
3. Has your CoC implemented a community-wide Housing First orientation and response that also considers the preferences of the individuals being served?

- The majority of shelters, outreach, PSH, RRH, and the whole crisis response system are housing first and use harm reduction practices.
- Do program screening and selection practices encourage the acceptance of individuals regardless of their sobriety or use of substances, completion of treatment, or participation in services?
- Connecting people experiencing chronic homelessness to permanent housing is streamlined and user-friendly across your CoC.
4. Has your CoC assisted individuals experiencing chronic homelessness to move swiftly into permanent housing with the appropriate level of supportive services and effectively prioritized people for permanent housing?

- Your CoC can permanently house all people experiencing chronic homelessness within 90 days from identification.
- People experiencing chronic homelessness who have not yet accepted housing assistance are continually offered permanent housing at least every 2 weeks.
- Individuals experiencing chronic homelessness quickly connected to mainstream resources (SSI/SSDI benefits, health and behavioral health care, social supports, employment opportunities, etc.).
- Your CoC follows HUD’s prioritization guidance or other prioritization policies and procedures to ensure that permanent supportive housing is prioritized for households based on vulnerability factors such as length of time homeless and severity of needs.
- Your CoC uses RRH and other permanent housing assistance to quickly house individuals experiencing chronic homelessness.
ENDING CHRONIC HOMELESSNESS: CRITERIA CHECKLIST - Q5

5. Does your CoC have resources, plans, and system capacity in place to prevent chronic homelessness from occurring and to ensure that individuals who experienced chronic homelessness do not fall into homelessness again? Or, if they do, are quickly reconnected to permanent housing?

- The CoC have an adequate level of resources and the capacity to provide appropriate services that will, whenever possible, prevent chronic homelessness.
- The CoC has sufficient permanent housing assistance options available at least over the next twelve months to assure movement into permanent housing within an average of 90 days from identification.
- The CoC has adequate resources and services to promote long-term housing stability of all people formerly experiencing chronic homelessness.
- There is a system in place to quickly reconnect people to PH who have become homeless again.
- The CoC has partnerships with mainstream resources to support ongoing stability, wellness, and crisis intervention, when needed, for persons formerly experiencing chronic homelessness.
Philadelphia’s 100 Day Challenge to End Youth Homelessness:

Building collaborative partnerships to prevent & end youth homelessness

Jessica Sones, Youth System Coordinator
Philadelphia Office of Homeless Services
Lay of the Land Spring 2016: Why Launch 100 Day Challenge?

- Philly Vets Home initiative= success ending veterans homelessness
- New leadership in Office of Homeless Services= casting a vision
- City Council hearings on youth homelessness= commitment and momentum
How It Began- May/June 2016

- Contracted with **Rapid Results Institute** to address Chronic Homelessness, Non-Chronic Homelessness, and Youth Homelessness

- Convened system leaders in May/June 2016- **This is key!**

- June 2016- Launched “100 Day Challenges” with 2 Day Summits of diverse stakeholders
100 Day Challenge 1.0: June-September 2016

- Set and pursue bold goals to support youth facing homelessness
- Intensive collaboration and innovation
- No new funds...
The Stakeholders at the table

- Youth/young adults with experience with homelessness
- City government- Homeless Services, Behavioral Health, Department of Human Services (child welfare/juvenile justice), School District
- Homeless service providers
- Youth service providers: housing, health, mental health, education (schools & higher ed.), employment
- Legal/advocacy community

And the group grew and grew....
The first time many of these stakeholders sat in the room as allies not competitors.
100 Day Challenge 1.0 Goal

- Older Youth Team: “By the end of September, we will create a sustainable infrastructure wherein every 18-24 year old who seeks shelter can receive and be connected to a safe and stable place to stay.”

- By September 30th will create a list of all the “literally homeless” Youth ages 16-17, and connect 100% of them to a community advocate; and resolve the homelessness condition** for at least 50% of them (150 youth) and servicing at least 50% of them*(70 youth) (uninvolved with child welfare system)
Did we do it?

- Well... we encountered some deep systemic challenges and barriers
  - *Infrastructure challenges*: lack of “by-name list” and ability to track data
  - *System gaps specific to 18-24 year olds*
  - *Different needs for youth under 18 vs. youth over 18*
- ...And we evolved the work
A different approach... subcommittees to 1) tackle systemic/macro issues while also 2) working on concrete changes to support young people immediately.

Subcommittees:
- Child Welfare/Juvenile Justice
- Assessment/Data/Case Conferencing
- Shelter Engagement
- Expanding Housing Resources
- Education
Concrete successes in 100 Day Challenge 2.0

- **Child welfare/juvenile justice subcommittee drafted recommendations** for improved policy and practice for enhancing transition planning and services for youth as they prepare to exit systems.

- Launched a **pilot of TAY-VI-SPDAT tool** which will be used in coordinated entry to assess and prioritize youth experiencing homelessness for placement.

- **Youth Adult Leadership Committee launched** (youth advisory board for Continuum of Care and Office of Homeless Services).

- **Youth System Coordinator position created** within Homeless Services.

- 5 organizations (Housing for Youth Collaborative) submitted a **collaborative application for City Council/Homeless Services funds ($700,000)** to expand housing and supportive services for youth experiencing homelessness. This expansion would include 50 new youth beds and expanded supportive services.
And we evolved again...

- At this point over 30 public and private partners working together throughout the 100 Day Challenges
- Momentum and commitment around issues of youth homelessness
- Need for formal coalition structure and longer-term goal setting

- Creation of **Philly Homes 4 Youth Coalition**
  - Name created by Coalition members and young adult leaders
  - Creation of formal governance structure to sustain the work
  - Need for long-term vision setting
Philly Homes 4 Youth Coalition goals

- The 100 Day Challenge team/Coalition had set 15 goals over the 1st year - unable to focus well on all areas.

- Coalition Planning Task Force convened during summer 2017 for strategic goal setting process - **3 priority areas for 2017/2018:**
  - Improve transition planning for youth exiting child welfare and juvenile justice systems, and decrease exits or re-entries to housing instability from these systems
  - Implement youth-friendly coordinated entry system into the Homeless System
  - Enhance the continuum of housing options for youth, including emergency and long-term housing
Lessons Learned

- System leader buy-in is a make or break factor

- The process of building new collaborations between providers has been a game-changer for our community
  - *The building block to moving forward system change*

- Young adult voice must be elevated and at the forefront of decision-making

- Flexibility to evolve goals and change strategy based on lessons learned- being nimble is critical but hard with a large group of stakeholders.
  - *Creating the governance structure was critical and we are still learning*

- My role (Youth System Coordinator) has helped move forward the work- dedicated position to coordinate initiatives
What is Next for Us?

- Implementing actions to move forward our top 3 priorities
- Aligning our initiatives- all initiatives moving forward our youth system goals
- Data-driven decision-making and advocacy
- Continuing to elevate young adult voice
Questions?