

Path Forward Best Practices Barbara Poppe and Associates

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1. A System to End Homelessness
 - a. Ending homelessness means building systems that
 - i. Divert people from entering homelessness
 - ii. Quickly engages and provides a suitable intervention for every households' homelessness
 - iii. Have short lengths of stay in programs
 - iv. Have high rates of permanent housing exits
 - v. Use data to achieve continuous improvement
2. Person-Centered System
 - a. Best practices interventions
 - b. Funder driven
 - c. Coordinated entry
 - d. HMIS * (*Homeless Management Information Systems (HMIS)/U.S. Department of Housing and Urban Development (HUD))
 - e. Action oriented leadership
3. Best Practices
 - a. Focus on goals in opening doors
 - b. Effective coordinated entry process
 - i. Prioritize persons with the longest histories of homelessness and the most extensive needs
 - ii. Lower barriers to entering programs or receiving assistance
 - iii. Ensure that persons receive assistance and are housed as quickly as possible
 - iv. Promote participant choice
4. HUD: Best Practices and Requirements
 - a. Housing First to remove barriers to housing
 - i. Remove service participation requirements or preconditions to program participation
 - ii. Prioritize rapid placement and stabilization in permanent housing
 - iii. Use data to more quickly and stably house homeless persons
 - b. Strategically allocate resources
 - i. Review project quality, performance, and cost effectiveness
 - ii. Take actions towards poor performing projects
 - iii. Maximize use of mainstream and other community-based resources
 - iv. Review transitional housing projects

Benchmark Cities

	2010-2015	\$ co-funding
Houston	28% reduction in homelessness	\$23 million
Portland, OR	10% reduction	\$15 million
Las Vegas	25% reduction	\$12.5million
New Orleans	80% reduction	\$16 million
Seattle	12% increase homelessness 2010-2015	\$28 million

Benchmark Cities what actions to reduce homelessness?

Houston (28% reduction homelessness)

- City and county elected officials identified a broken system and developed a strategic action plan to align resources toward a common goal
- Priorities and benchmarks were established and all funding aligned with those ideals
- Credit, coordinated funding, shared data and measurement standards and continuous communication as essential elements of their success
- A robust system of coordinated entry is the backbone of the system
- Using a system of housing locators and housing navigators private landlords have been effectively engaged to access market rate units
- Strong funder-driven implementation management across multiple entities (project manager)
- Results for Houston:
 - Veterans 99% reduction homelessness (housing placements)
 - Chronic 70% reduction
 - Downtown 60% reduction
 - Midtown 72% reduction

Las Vegas (25% reduction)

- Identified all individuals experiencing homelessness in the community and places them on a “by-name list” and reviews and updates the list weekly
- Barriers for entry into all forms of housing were eliminated
- All decisions are data driven. “If it isn’t in HMIS, it didn’t happen.”
Established a data sharing process to allow better coordinated between agencies.
- Uses scan cards to reduce costs and increase capacity to help people.
- Ongoing monitoring against benchmarks at least every 90 days to ensure the outcomes are continuously maintained and improving.

Salt Lake City (11% increase...?)

- Increased capacity to shelter every person experiencing homelessness by housing chronic long term shelter stayers
- Programs must demonstrate efficacy to be considered for future funding
- Ending homelessness is not connected to antipoverty efforts
- Identified 14 strategically linked outcomes to help redesign the homeless service system and align funding

Hennepin County Project

- Had access to 20 years of data on shelter stayers
- Identified that 51 chronically homeless long term shelter stayers were continuously using 8% of total shelter capacity
- Developed a 2.5 year pilot project to case-manage and house all 51 identified people
- Utilized phased engagement approach
- After being housed utilization of all systems decreased
- Now, this program is an on-going program that continually identifies those with the longest length of stay and focuses on re-housing.

Leadership Required

- Community leaders (elected, senior government, philanthropy, civic, and business) are engaged and hold the CoC* (*Continuance of Care – thinking this is all the services providers who have contracts with the city) accountable to meet measurable outcomes and make wise investment decisions that align with the community plan
- Local governments are driving strategy and have key role in making funding decisions
- Provider's primary role is to inform strategy and participate in execution of the strategies. (strict awareness of conflict of interest)
- Continuance of Care is structured with clear roles, authority and responsibility for the CoC (paid) leadership to exercise a greater level of control and accountability. Roles, authority and responsibility of volunteer leaders (e.g. committee chairs) are clear

Keys to Success

- Funder-driven systems approach that is client-centered
 - Governance structures build to ACT not primarily seek input
 - Government exercising greater authority and leadership for decisions and actions
 - Clearly identified authority and decision making responsibilities established
 - Funders directly engage providers to support cross program accountability
 - Funders hold agencies accountable for performance outcomes and implementing high quality programs and services
 - Laser focus on results for homeless people.
 - Reduce disparities

Relentless focus on housing placement

- Diversion is primary tool for those at imminent risk of becoming unsheltered
- Seamless and integrated approach to outreach, rapidly engaging with unsheltered to ensure placement is critical to reducing unsheltered homelessness
- Emergency shelter reserved only for those who are truly unsheltered
- Shelters focus on housing placement not just survival needs (Navigation Center or Comprehensive Emergency Shelters are more successful than overnight shelter)

Require Housing First practices

- Increase capacity of all homeless assistance organizations to implement housing first placement practices
 - Remove admission barriers on all publicly funded homeless housing options
 - Utilize progressive engagement to right size interventions to match needs of individuals experiencing homelessness
- Those using the most shelter resources must be housed first in order to increase capacity to serve unsheltered
- Successful approaches such as PSH and Rapid Re-housing must be implemented with fidelity to best practices and at sufficient scale (?)
- Households who have stabilized in permanent supportive housing and no longer require the intensive supportive services embedded in PSH should “move on” to other appropriate permanent housing options

Use Data for Planning and Funding

- HMIS is the cornerstone of effective system management
 - All people who receive homeless services must be entered into HMIS to achieve comprehensive system data
 - Routine, competitive funding processes are data informed
 - Funders drive results

Disciplined use of “By Name Lists”

- Use data for planning and funding – drive for results
- Break down silos – reduce fragmentation
- Aligned funding and actions (collaborative, cross-sector)

Aligned Funding and Actions

- Funders are actively engaged in managing the system...not just passive conduits for funding
- Funders and programs must be supported with the capacity to shift culture to implement evidenced based, best, and promising practices
- Mainstream services are mobilized to provide critical services rather than relying on homeless system to fund supportive services (?)
- Supportive innovation through piloting new solutions with strong evaluation to build the evidence of what works