

Criteria and Benchmark for Achieving the Goal of Ending Chronic Homelessness

July 26, 2016

2:00 – 3:30 p.m.





Sharing the Vision

Criteria and benchmarks work together to provide a complete picture of a community's response to homelessness.



- ☐ **End chronic homelessness**
- ☐ **End Veteran homelessness**
- ☐ **End homelessness among families, youth and children**
- ☐ **Set a path to ending all types of homelessness**



Things to Consider

- Goal for ending chronic homelessness: 2017
- The criteria and benchmark for ending chronic homelessness is the vision for where we're headed – not where we currently are
- Homelessness response system alone will not be sufficient—mainstream services and housing will be key
- New resource investments are critical for achieving the goal nationally



Criteria

1. The community has identified and provided outreach to all individuals experiencing or at risk for chronic homelessness, and prevents chronic homelessness whenever possible.
2. The community provides access to shelter or other temporary accommodations immediately to any person experiencing unsheltered chronic homelessness who wants it.
3. The community has implemented a community-wide Housing First orientation and response that also considers the preferences of the individuals being served.



Criteria

4. The community assists individuals experiencing chronic homelessness to move swiftly into permanent housing with the appropriate level of supportive services and effectively prioritizes people for permanent supportive housing.
5. The community has 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.



Benchmark

All individuals known to be experiencing chronic homelessness have obtained permanent housing with appropriate services (e.g. permanent supportive housing)

Or, if not all...

The number of individuals that remain chronically homeless does not exceed 0.1% of the total number of homeless individuals reported in the most recent point-in-time count or 3 persons, whichever is greater.

Note: For the purposes of the benchmark, formerly chronically homeless persons that are in transitional housing must continue to be counted as chronically homeless until they have been connected to permanent housing.



Determining When the Goal is Reached

Specifications released this week

- How to measure progress against benchmark
- Claims to be made at the CoC level
- Universe includes persons currently experiencing chronic homelessness and persons previously identified as chronically homeless who are now living in transitional housing

Questions to Assess Against Criteria

- Close-ended questions to determine if a CoC has met each of the specified criteria
- A CoC meeting the goal should be able to answer affirmatively to each question
- Should be considered in conjunction with calculation of benchmark



Review and Confirmation

- Limited roll-out of Federal review process for remainder of calendar year 2016 with emphasis on CoCs engaged in HUD-TA efforts such as Zero: 2016 and Priority Community TA
- Stages of Federal review will involve a CoC self-assessment (including sign off from CoC membership), TA provider review and recommendation, Federal confirmation or denial for CoCs who choose it
- Seeking to refine and clarify what is needed from CoC to demonstrate achievement of the goal, with broader roll out in 2017



Next Steps and Resources

Next Steps

In the coming months, HUD and USICH will release additional guidance and tools

Existing Resources

- [Criteria and Benchmark for Achieving an End to Chronic Homelessness](#)
- [10 Strategies to End Chronic Homelessness](#)
- [HEARTH: Defining “Chronically Homeless” Final Rule Webinar Slides](#)
- [HUD Notice on Prioritizing Persons Experiencing Chronic Homelessness](#)
- [Ending Long-Term Homelessness for People with Complex Needs](#)
- [Supportive Housing Opportunities Planner \(SHOP\) Tool](#)

THE BERGEN COUNTY HOUSING, HEALTH AND HUMAN SERVICES CENTER



A SHARED PROJECT BETWEEN THE
COUNTY OF BERGEN
AND THE HOUSING AUTHORITY OF BERGEN COUNTY

*"A COLLABORATIVE APPROACH
TO MEETING HUMAN SERVICES NEEDS"*



What Does It Mean to End Chronic Homelessness In Your Community?

NAEH Conference 2016



OPENED
October 1, 2009

Bergen County Ten Year Plan to End Homelessness 2008

SHELTER DESIGN CONTRAST

BERGEN COUNTY, NJ

Old System (prior 2009)

- 4 temporary shelters (some sub-standard)
- Limited Outreach
- Seasonal, sit-up
- EA only, hard to access, SU banned
- 4 different intakes
- Housing access limited
- 8 beds for women

New System (after 2009)

- One new, clean, safe, easy access shelter
- Coordinated Outreach
- Year-round, 24-hour
- Housing First
- Coordinated entry
- Housing access prioritized and immediate
- Plan to sustain & RRH
- 45+ beds for women



MISSION



- **Permanent housing with support services**
- **One-stop location and single point of entry**
- **Prevent homelessness / rapidly re-house individuals**

Bergen County Housing, Health and Human Services Center



KEY DESIGN CONCEPTS

- **Objectives:**
End chronic homelessness,
prevent homelessness & successful re-entry
- **Approach:**
The **Housing First** Model
- **Process:**
Engagement, Collaboration, Integration



GETTING TO ZERO*

- Ending chronic homelessness takes *political will, leadership, collaboration* and *coordination* among multiple state and local programs to *align resources* for housing and supportive services

* Adapted from USICH 10 Strategies to End Chronic Homelessness



TRANSITIONS TO HOME

- **Transitioning** to stable housing
 - Identifying client strengths and needs
 - Identifying community resources
- **Sustaining** permanent housing
 - Consistency with case management (face to face follow-up)
 - Making sure the client is **accountable**
- Healthy and **robust** connections with landlords who would overlook background checks and poor credit
 - Create relationships, establish rapport and respect preferences (vouchers, etc)
 - Start with less difficult cases with new landlords
 - Make sure they can reach you, and address issues **directly** with the client
- **Collaboration** very helpful and **Communication** is key



IT TAKES A VILLAGE:

CASE STUDY: Ms. M

Ms. M

- Very long hx of psychiatric inpatient (state hospital), past group homes and long homelessness.
- Significant issue with immigration documents
- Very visible presence
- Nomadic
- Sporadic contact

Process (7 Years)

- Take a knee/negotiation
- Collaboration-Senator M
- Low barrier-no barrier
- Bad day vs. good day
- Whose your BFF?
- Length of stay-plan
- Transparency and constant communication
- Incentives
- Fight isolation-safety net-touchstone

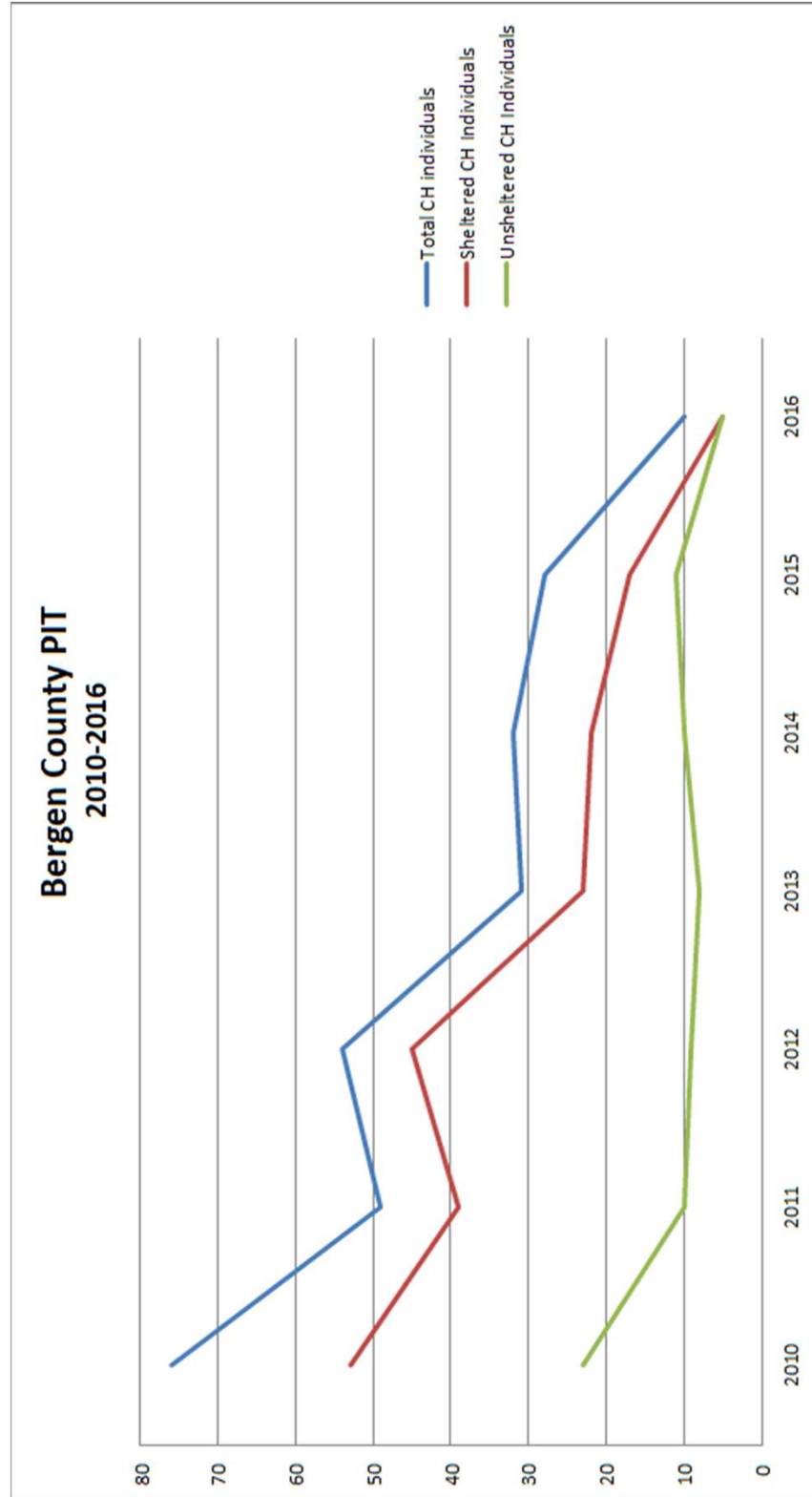


PIT OUTCOMES 2010-2016

- Unsheltered homeless decreased by 84.7% **85%**
 - Chronic homelessness decreased by 86.8% **87%**
 - All-Star participants in 100k campaign **All-Stars**
 - Only NJ Community participating in Zero 2016 **ZERO**
 - On track to end Veteran homelessness
- 

PIT DATA CHRONIC HOMELESSNESS 2010-2016

Bergen County Housing, Health and
Humans Services Center



BERGEN COUNTY HOUSES LAST CHRONIC HOMELESS PERSON ON BNL 7/6/16

Bergen County Housing, Health and
Humans Services Center



AT-RISK LIST

- Homeless individuals who have been identified by either shelter staff or outreach/advocates as having great difficulty identifying or accessing housing (this includes individuals who have failed other housing options and have returned to homelessness multiple times).
- Individuals who have been homeless for more than a year without a documented disability.
- Individuals with a documented disability and significant homeless history (currently 180+ days).



Contact me:

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Ending Chronic Homelessness in CT

NAEH Conference Workshop
2016

“What Does it mean to End Chronic Homelessness in Your Community?”

Homelessness in CT

10,932 persons used shelter in 2015, including:



7,606
Individuals

- **46%** between 31 and 50
- **26%** women
- **38%** African-American
- **25%** Hispanic
- **74%** report some disability

1,125
Families

- **22%** headed by someone <25
- **44%** headed by someone 25-34
- **3,317** people
 - **49%** African-American
 - **41%** Hispanic

2,022
Children

- **86%** of homeless children in CT are under 12
- **43%** under the age of 5
- **42%** between 5 and 12

Source: CT Homeless Management Information System, Annual FFY15

2015 Youth Count found an estimated 3,000 CT youth (<25) are experiencing homelessness:

- 33% w/DCF involvement
- 22% criminal justice system involved
- 35% attend school regularly
- 25% identify as LGBTQI
- Biggest needs: education, employment, food, stable housing
- 32% African-American, 23% Multiple Races, 36% Hispanic

Opening Doors CT

Connecticut's state level planning effort

- Follows the federal *Opening Doors* model, setting a path to achieve HEARTH goals
- Implemented through statewide campaign to end homelessness in Connecticut: *Reaching Home*
- Unifies efforts of federal, state, local and non-profit partners
- Emphasizes coordination of efforts across communities; prioritizing and targeting resources
- Part of Zero 2016 national initiative to accelerate pace

Reaching Home Structure

Reaching Home Campaign

Campaign to end homelessness in CT

Opening Doors – Connecticut

Framework being implemented by Reaching Home Campaign

Reaching Home Steering Committee

A broad coalition crossing boundaries and systems; informs direction, advances policy change, oversees work groups, makes connections; 40-50 people; meets 4x year

Reaching Home Coordinating Committee

Coordinates campaign; integrates strategies and provides guidance to work groups; supports and updates Steering Committee; 10-20 people, meets monthly

Opening Doors- CT Work Groups

Work groups develop, recommend, advance Opening Doors-CT strategies; 12-20 people

Affordable &
Supportive
Housing
WG

Family
Economic
Security
WG

Health &
Housing
Stability
WG

Homeless
Youth
WG

Retooling
Crisis
Response
WG

Veterans
WG



Getting to Zero Data Progress Report July 2016

Number of People Active on
the By-Name List

402



The number of Verified/Potentially Chronically Homeless individuals who are active on the by-name list as of July 1, 2016 and not yet matched to a housing resource. This number fluctuates as people get housed, become inactive, or become homeless.

Number Housed
Last Month



Number of Chronically Homeless people housed statewide in June 2016, as reported by CANs to CSH.

Number Housed Since
October 2015



Number of Chronically Homeless people housed statewide since October 1, 2015, as reported by CANs to CSH.

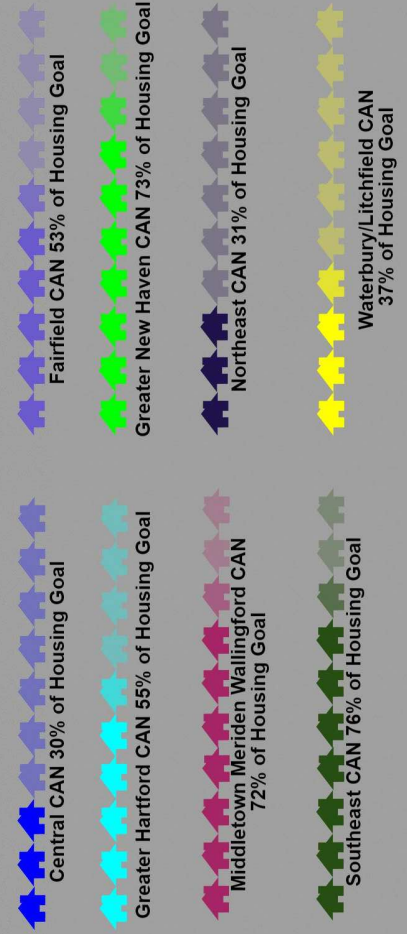
Statewide Progress Towards Zero: 2016 Housing Goal



88 individuals need to be housed monthly to reach our goal.

The Statewide Zero: 2016 housing goal is based on a count of active verified and potentially chronically homeless individuals on the By-Name List, and adjusted to include anticipated inflow through the end of 2016.

CAN Progress Towards Zero: 2016 Housing Goal



Housing Works

Federal and State Investments

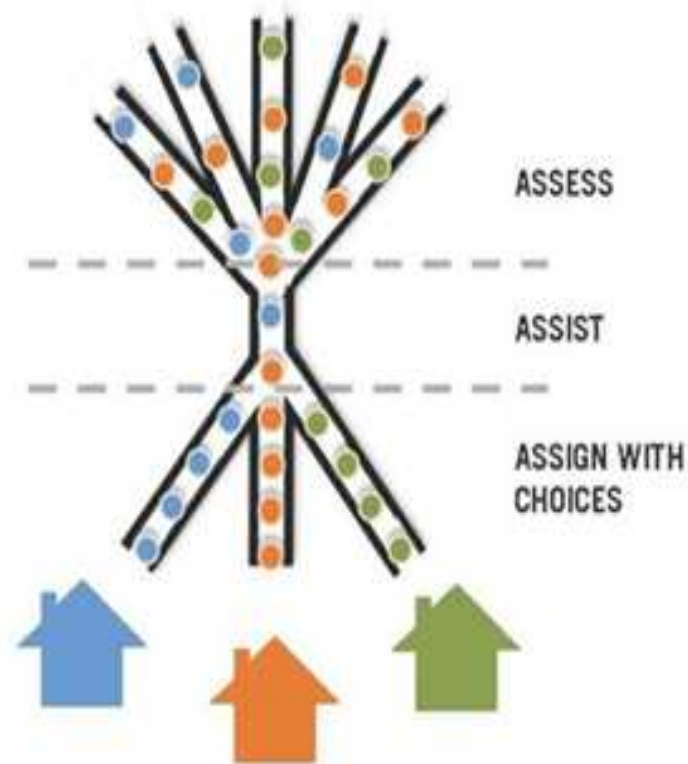
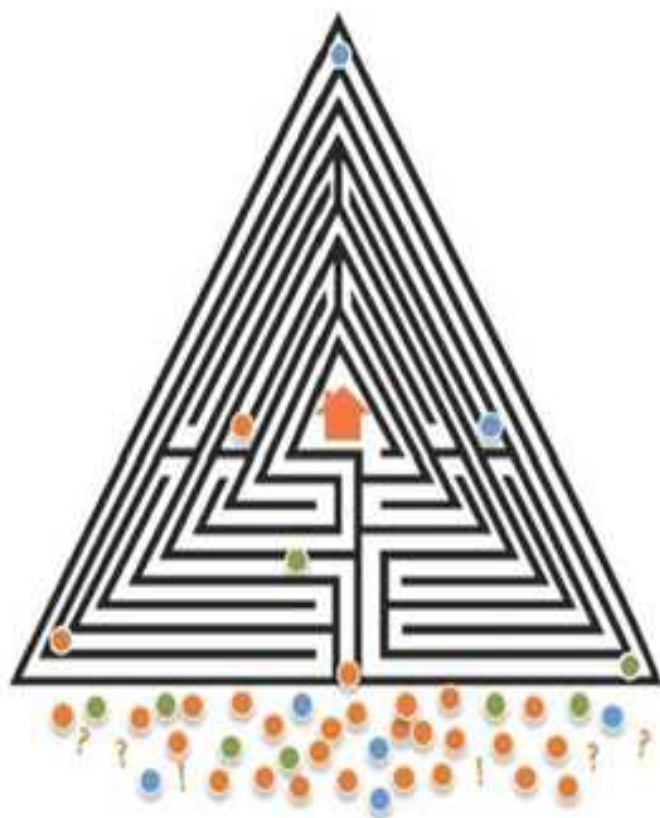
Ending Chronic homelessness saves lives, saves public funds



**Permanent
Supportive Housing**
(housing + services)
can cut system costs by up to
70%

By Name Registries and Coordinated Access

Critical Tools to Identify, Prioritize, and Target Resources



Source: Home For Good, 2014

Major Milestones

August, 2015: CT ends chronic homelessness among Veterans
(long-term homelessness with disability)

February, 2016: CT ends homelessness among all Veterans
(Any Veteran identified as homeless is housed within 90 days)

December, 2016: CT is on track to end all chronic homelessness
– saving lives and saving public dollars

Contact information



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