A Framework for COVID-19 Homelessness Response

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Nan Roman, President & CEO, National Alliance to End Homelessness

Richard Cho, PhD., CEO, Connecticut Coalition to End Homelessness (CCEH)

Nichele J. Carver, Associate Director, Homeless & Special Needs Housing, Department of Housing & Community Development, State of Virginia
Housekeeping & Announcements

• All attendees are on mute, and video options are turned off.
• The Zoom chat function has been disabled. Please enter your questions in the Zoom Q&A box.
• Follow our COVID-19 Webinar Series here: https://endhomelessness.org/resource/covid-19-webinar-series/
• Upcoming webinars:
  • Data Collection & COVID-19: Learning from the Field – Thursday, May 28th, 3:00pm EST
• Join the Ending Homelessness Forum - https://forum.endhomelessness.org/login
Housekeeping & Announcements

NAEH & NHCHC self-paced online courses on:

- Understanding Homelessness
- COVID Overview/CDC Guidance
- Cultural Humility
- Case Management 101
- Trauma Informed Care
- Trauma Informed Supervision
- Harm Reduction

Audience: hotel/motel and congregate shelter staff, new hires w/o prior experience of working with individuals experiencing homelessness, health care, medical, mental and behavioral health staff working with hotel/motel guests and staff.

Enroll now: https://endhomelessness.org/covidlearning/
WELCOME & OPENING REMARKS
## Overview

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<th>States and localities will receive significant ESG, CDBG and other funds</th>
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<tr>
<td>☐</td>
<td>Funds should be used strategically to maximize impact</td>
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<td>Homelessness could grow or shrink depending on your approach</td>
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<td>Funds should address both the public health and economic impacts – also an opportunity to create a better system moving forward</td>
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Overview – con’t.

- Homelessness and pandemic disproportionately affect persons of color and marginalized communities -- identify and remediate disparities
- Address highest needs first
- Get people into housing – prevention after immediate concerns are addressed
- Create partnerships
Action Areas

Strategies and activities in these areas:

• Unsheltered people
• Shelter
• Housing
• Prevention and diversion
• Strengthening systems for the future
A Framework for COVID-19 Homelessness Response

Visit the Alliance’s Coronavirus and Homelessness Resources:
Unsheltered

- Engage people with lived experience in planning, implementation, outreach and services
- Testing and screening
- Transfer into appropriate shelter/housing
- Provide hygiene and health services for those outside; peers
- Move all to appropriate rooms, medical services, housing
- Create acceptable alternatives for those who reject shelter
Shelter

- Testing, screening and social distancing
- Move people to quarantine and isolation as appropriate
- Use peers and people with lived experiences
- Go to scale on congregate and non-congregate shelter as needed
- Examine data for inequities
- Provide housing services for exit
- Plan to replace all congregate with non-congregate shelter
- Eliminate congregate shelter
Housing

• Assess need for various models
• Intensive landlord engagement and speed lease-up
• Plan to-scale exits from shelter to homes
• Partners and resources for re-housing to scale
• Connection to services, employment
Diversion & Prevention

- Rapid re-housing and PSH checks
- Scale-up
- Examine for equity
- When other needs met, begin scaling prevention for <30%AMI, targeting marginalized communities
- Get partners to support previously homeless to prevent recidivism
- If all <30%AMI are housed, move to higher incomes for prevention
Improving Systems for the Future

- Establish partnerships (public health, CoC, etc.)
- Enter and analyze data; document disparities, analyze, remediate
- Engage people with lived experience
- Establish equity-based decision making
- Establish links to employment
- Plan response to income/rent cuts
- Evaluate response to COVID and document equity best practices
Framework Next Steps

- Distributing to industry groups
- Revised @ 2 weeks
- Tools, protocols, guidance, documents, etc. will be added
- More assistance to implement
Funding Sources

- FEMA
- ESG
- CDBG
- Coronavirus Relief Fund
- Federal funding to States/localities (TANF, Medicaid, etc.)
- Family Violence Prevention and Services Act
- RHYA/HYDP
- HOME – TBRA
- HOPWA
- Section 8, 202, 811
- Philanthropic funds
- State/local discretionary funds
Q&A
RICHARD CHO, PhD
CEO
Connecticut Coalition to End Homelessness
Connecticut Homeless System’s Evolving Response to the COVID-19 Pandemic

Pre-COVID (Pre-March 2020)

- Steady reductions in homelessness through diversion and re-housing efforts.
- Preparing for major push to end family and youth homelessness.

Basic Infectious Disease Controls (March – April 2020)

- 3/7 - 1st COVID-19 case arrives in CT.
- Homeless services providers shift focus on outbreak prevention through cleaning, social distancing, relocation of high-risk persons out of congregate shelter.

Shelter Decompression (April – June 2020)

- Mid-/late-March realization that most shelters could not comply with CDC guidelines for bed spacing and social distancing.
- State issues order and FEMA approval to move 60% of congregate shelter residents into state-contracted hotels.

Containment & Census Reduction (June 2020 - ?)

- Shelter decompression ending July 2.
- New strategy involving systematic COVID-19 testing and cohorting (isolation), along with reduced shelter census through scaled-up re-housing and diversion/prevention efforts.
Q&A
NICHELE J. CARVER
Associate Director, Homeless & Special Needs Housing
Department of Housing & Community Development
State of Virginia
Virginia is going to functionally end homelessness!
Cheerleaders in high places

• State leadership championed the idea from the start to focus on our most vulnerable citizens

• Agency leadership saw the vision and shared the message

• The entire Homeless and Special Needs Housing team worked 10+ hours daily and on weekends that first few weeks because we knew what would happen to persons experiencing homelessness if we didn’t (in the crisis morale was high)
The Virginia Plan

• Address our most vulnerable populations first
  • Created a funding formula for how much it would cost to house everyone who was identified as unsheltered in our 2020 PIT, persons in shelters that were not 24/7, and a percentage of the population that were in large shelters

• DHCD had conversations with each CoC/LPG to discuss the goal of mitigating the public health crisis by ensuring that no one had to be outside during the shelter in place order and made it clear from the start that we did not want anyone returning to homelessness

• DHCD in some cases provided additional funding for communities that said “we have assessed the need and it is greater than your formula”

• Initial Wave 1 of funding was 2.5 million
Using Resources Wisely

• We held meetings with Virginia Dept. of Health, Virginia Housing (the state housing finance agency), the Department of Behavioral Health and Developmental Services, the Department of Social Services, and the Department of Medical Assistance Services, along with MCOs and the Community Development side of our agency to assess what resources were available
  • Remember this is a public health crisis, it is in everyone’s best interest to help figure out solutions – this is not just a homeless system problem

• We looked at how to braid the different funding resources to maximize impact (ex. connected small business restaurants from our main street program with homeless services agencies to provide meals to those in need)

• We are also looking at what resources need to be used by which date – It’s one big life changing puzzle that we can not afford to mess up
Believe the goal is achievable

- We had a second round of calls with every CoC/LPG to discuss their Virginia Homeless Solutions Program funding and then asked them: **WHAT WOULD IT TAKE TO END HOMELESSNESS IN YOUR COMMUNITY**

After a few minutes of shock, surprise, disbelief...we asked the question again and said – think about if you could end homelessness in your community what do you need? Money, staff, housing, and the belief that it can and will be done, right?

Communities have been asked to assess and tell us exactly what it will take
Challenges - that we need to will overcome

• Keeping everyone on message and on task

• Building a strong Rental and Mortgage Protection Program that is not part of but works with the homeless services system – they are not the same!

• Tackling the lack of affordable housing issue
  • Bridging funding for PSH
  • Home sharing
  • Partnering Older Adults (BigMamas) with Parenting Youth creating natural supports
  • Strengthening our housing stabilization to ensure households stay housed
  • Working with housing production and preservation – helping them see non-traditional housing options (old schools, office buildings)

• Helping everyone understand what functionally ending homelessness means.
System Transformation

- Engaging stakeholders outside of the homeless services system
- Engaging organizations that primarily work with underserved populations but have not been part of the funding in the past
- Ensuring that every aspect of this work is through a racial equity and public health lens
- An acceptance that we won’t be needed in the same way and that is okay – REMEMBER WE WERE ALL SUPPOSED TO WORK OUR WAY OUT OF A JOB!
Nichele Johnson Carver
Associate Director
Homeless and Special Needs Housing

Virginia Department of Housing and Community Development

nichelle.carver@dhcd.virginia.gov
804-371-7113
Q&A
THANK YOU