Strategizing Shelter Solutions: A Conversation to Optimize Emergency Housing Access, Efficiency and Growth

INNOVATIONS & SOLUTIONS
for Ending Unsheltered Homelessness

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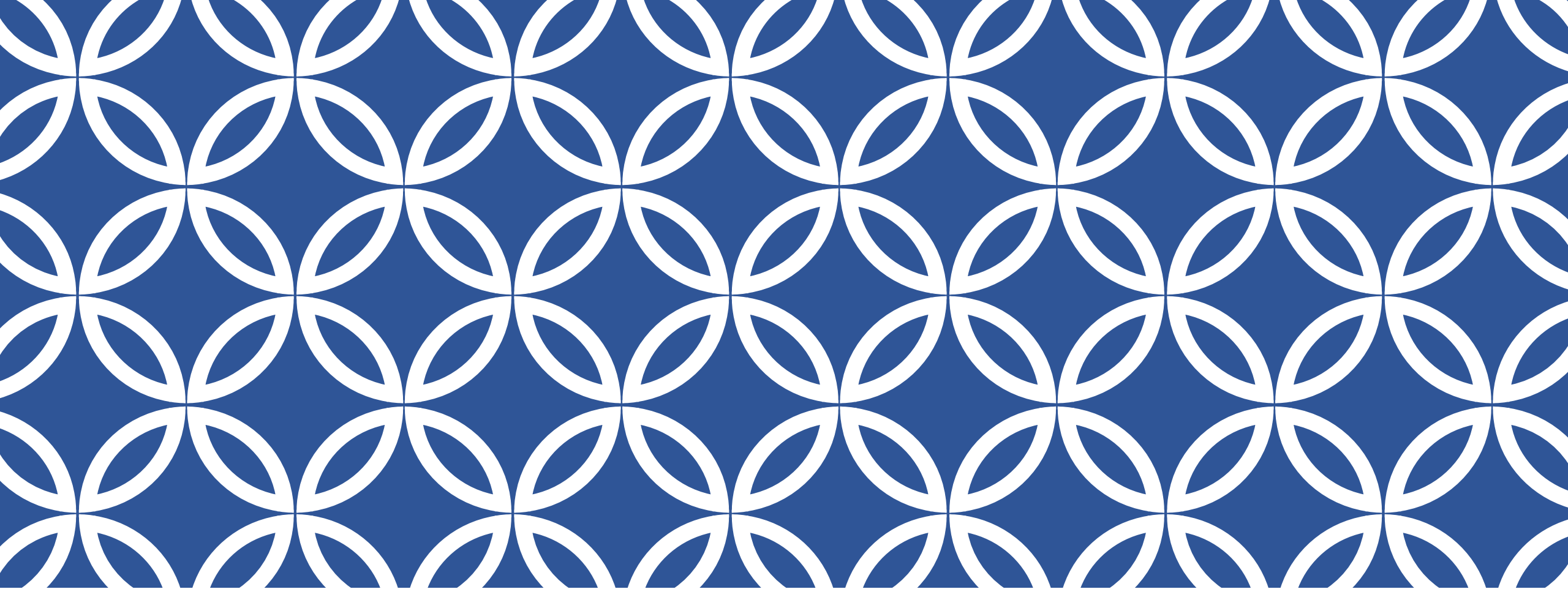*Linked In: https://www.linkedin.com/in/jenna-bolyarde/*
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What We Know: There is an urgent and growing need to connect people experiencing unsheltered homelessness with temporary and permanent shelter.

What We Want to Know: How can our communities create more efficient and effective response systems? Is it sometimes necessary to pause, reflect and evaluate your community's approach *before* building out more bed capacity? Is your system leveraging its resources to the best of its ability?

Lets use research, data, lived experience and critical thinking to maximize your system's impact and efficiency.

Using Data and Research to Support Homelessness System Reform

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Auckland University of Technology & Social Data Analytics, LLC

understanding homeless systems using data

- 1. Understanding **FLOWS** in and out of shelter

- 2. **RISK STRATIFYING** clients to understand risk profile

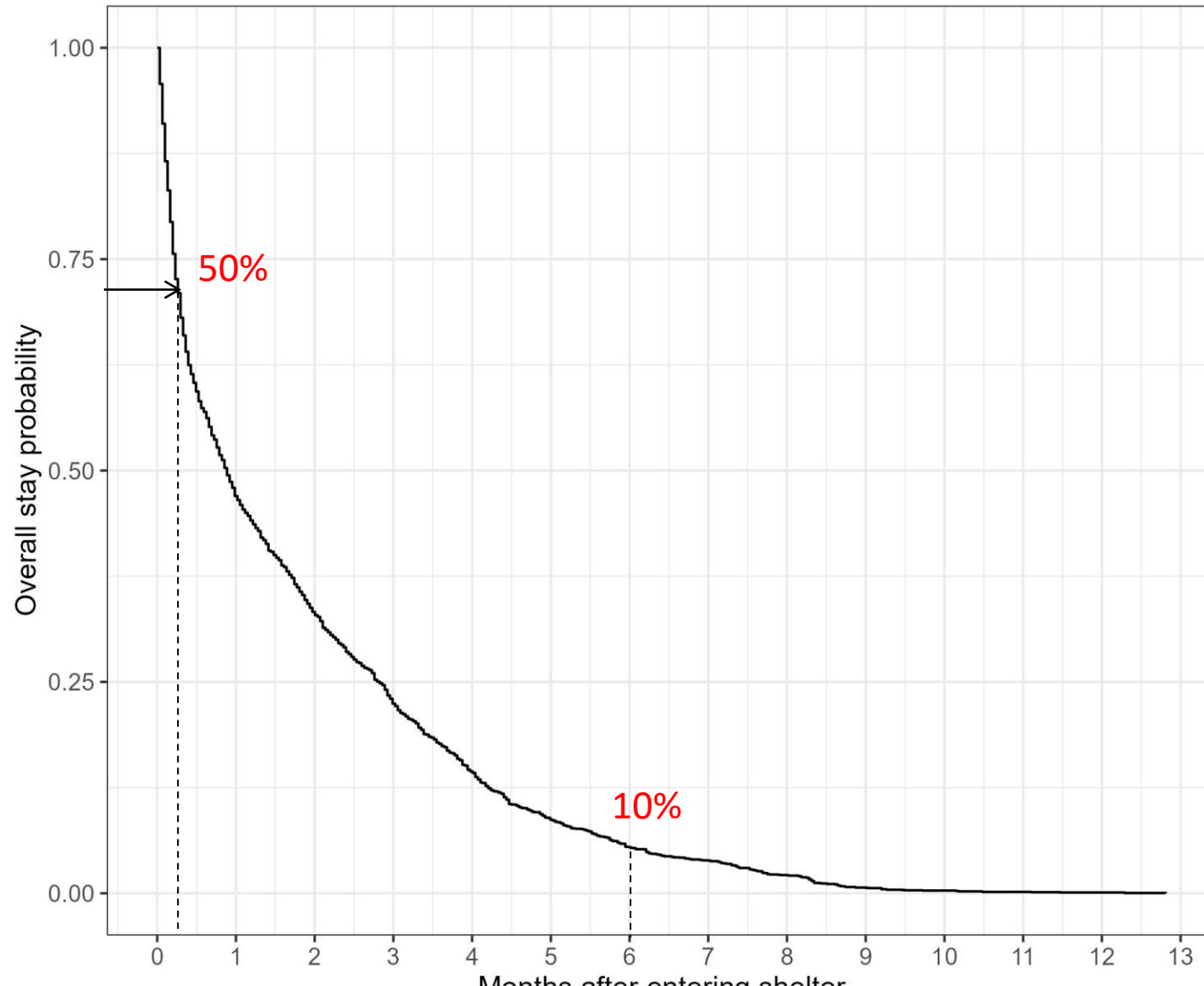# Flow into and out of shelter are very high

For around 60% of people shelter on any day – it's their **first time staying** in shelter.

Around **52% of shelter users** don't have another shelter stay.
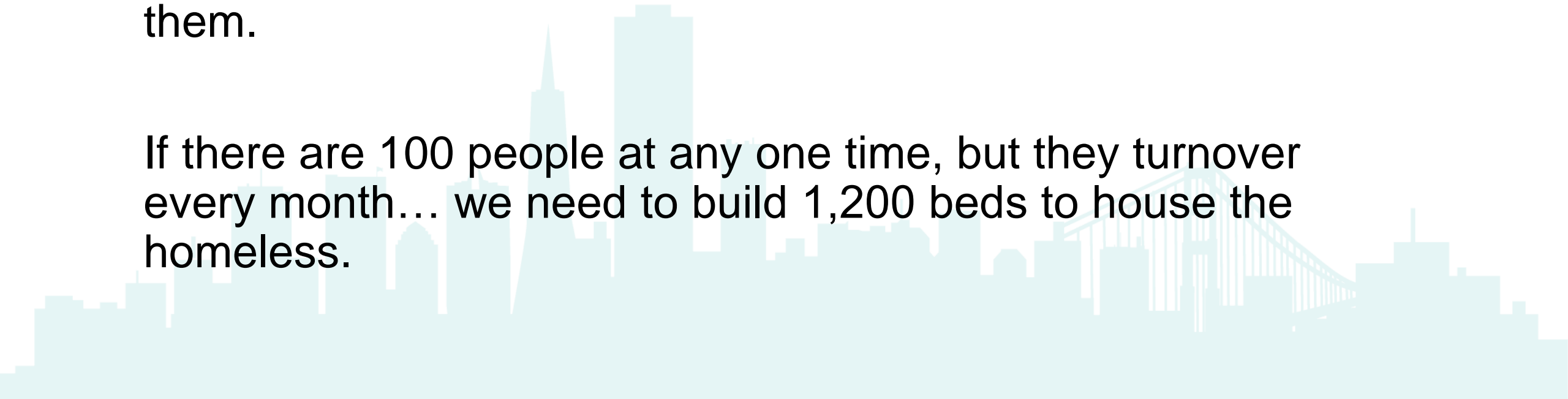
Shelter stay probability analysis

50% of people exited shelter within 10 days of entering shelters.

10% were there longer than 6 months.

Understanding flow is crucial

If there are 100 people living rough - and it's the same people for the year, we need to build 100 beds to house them.

If there are 100 people at any one time, but they turnover every month… we need to build 1,200 beds to house the homeless.
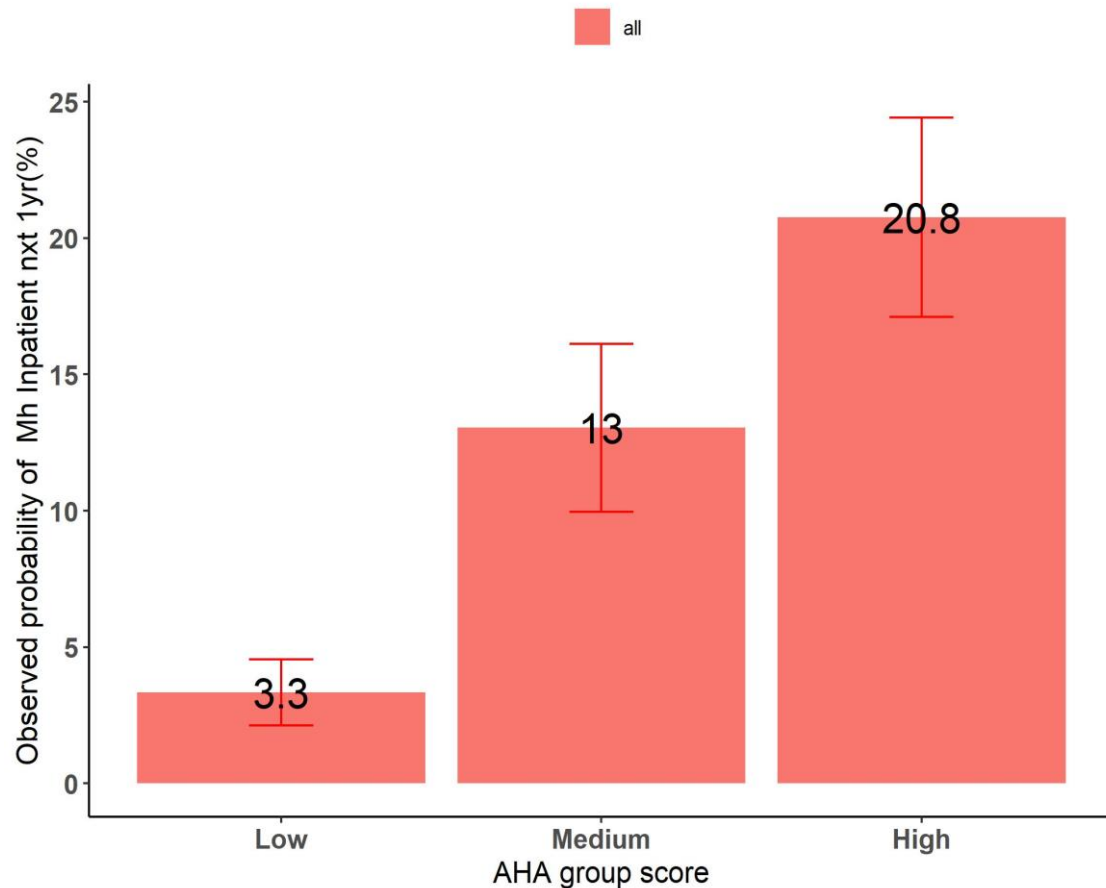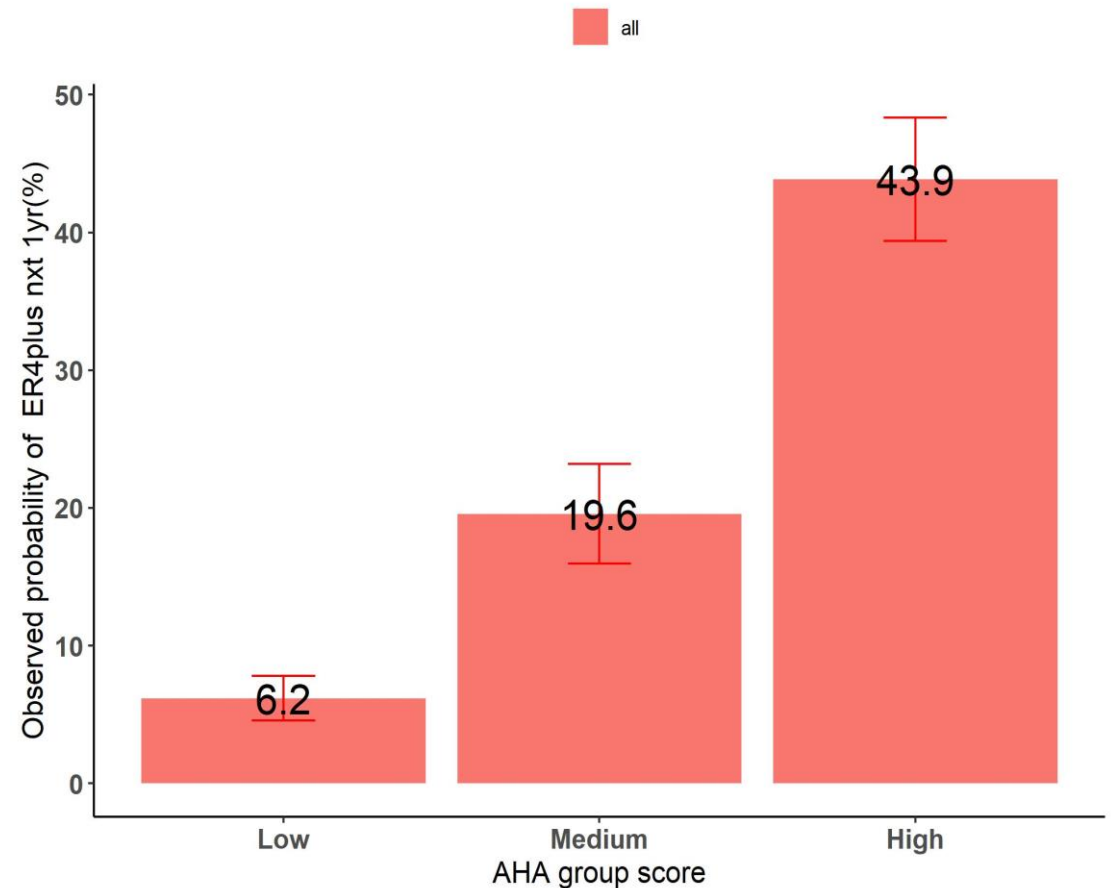
Risk stratification

- Using data to generate and classify people according to their risk of adverse future outcomes

- In Allegheny, they use the AHA (Allegheny Homelessness Assessment) score – a predictive risk model that uses data about a person to generate a risk score

- It's used instead of the VI-SPDAT, but it's also useful in understanding our shelter population

outcomes following a shelter stay for high AHA score clients are much worse
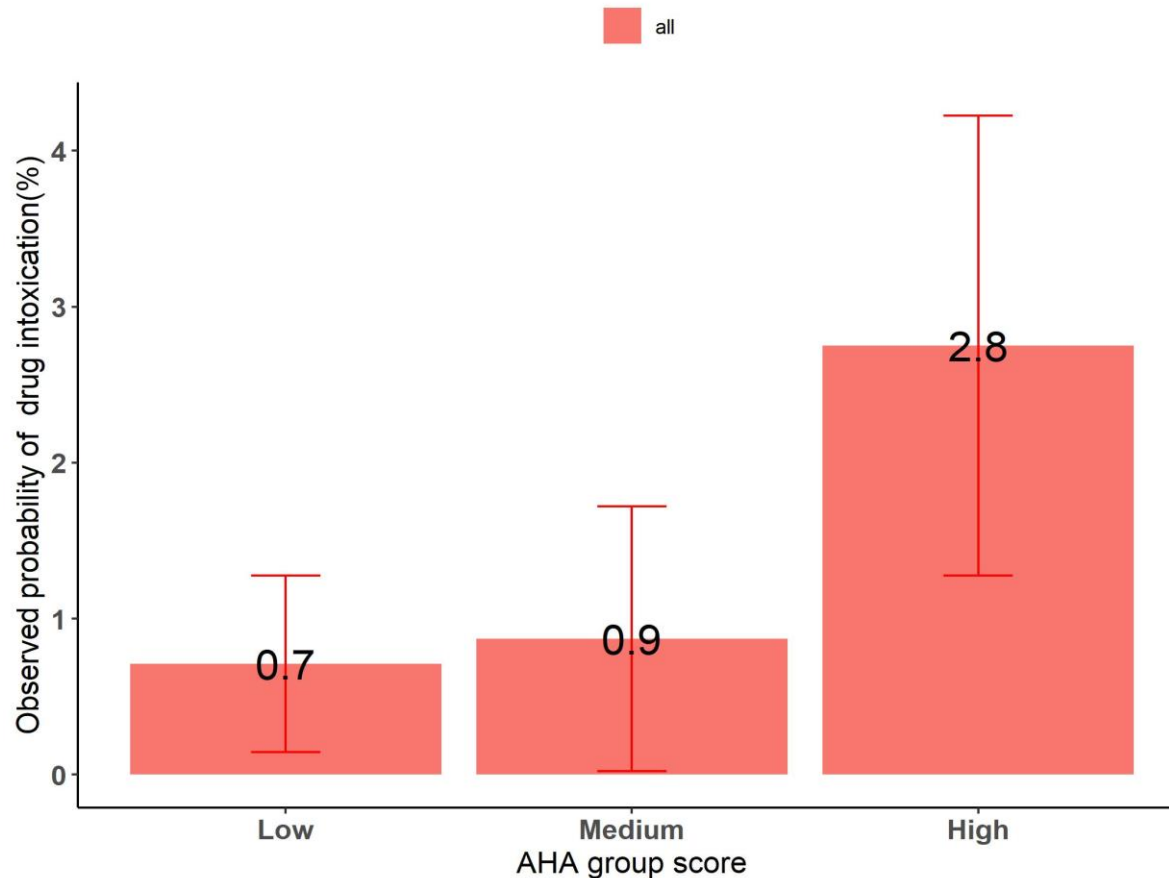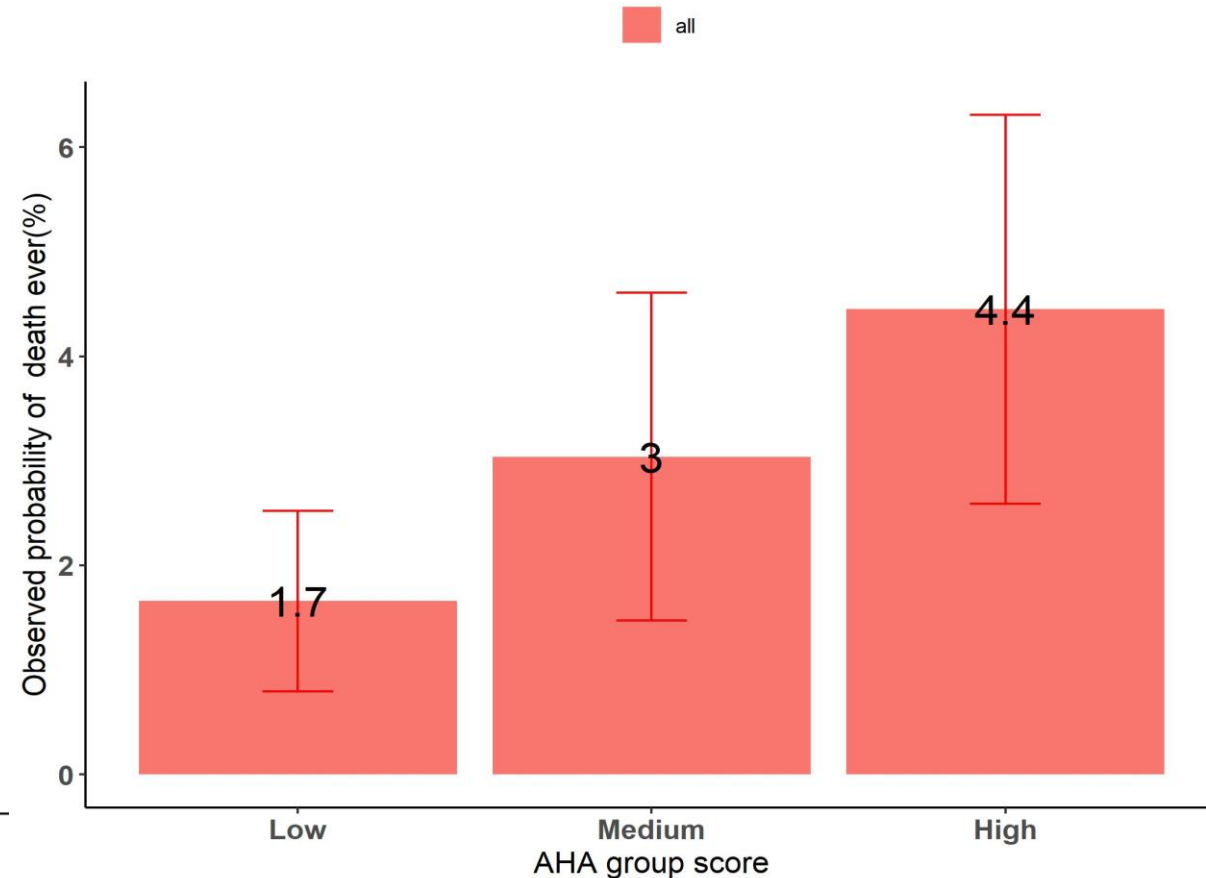
Those who are in shelter and have a high aha score are at high risk of mortality
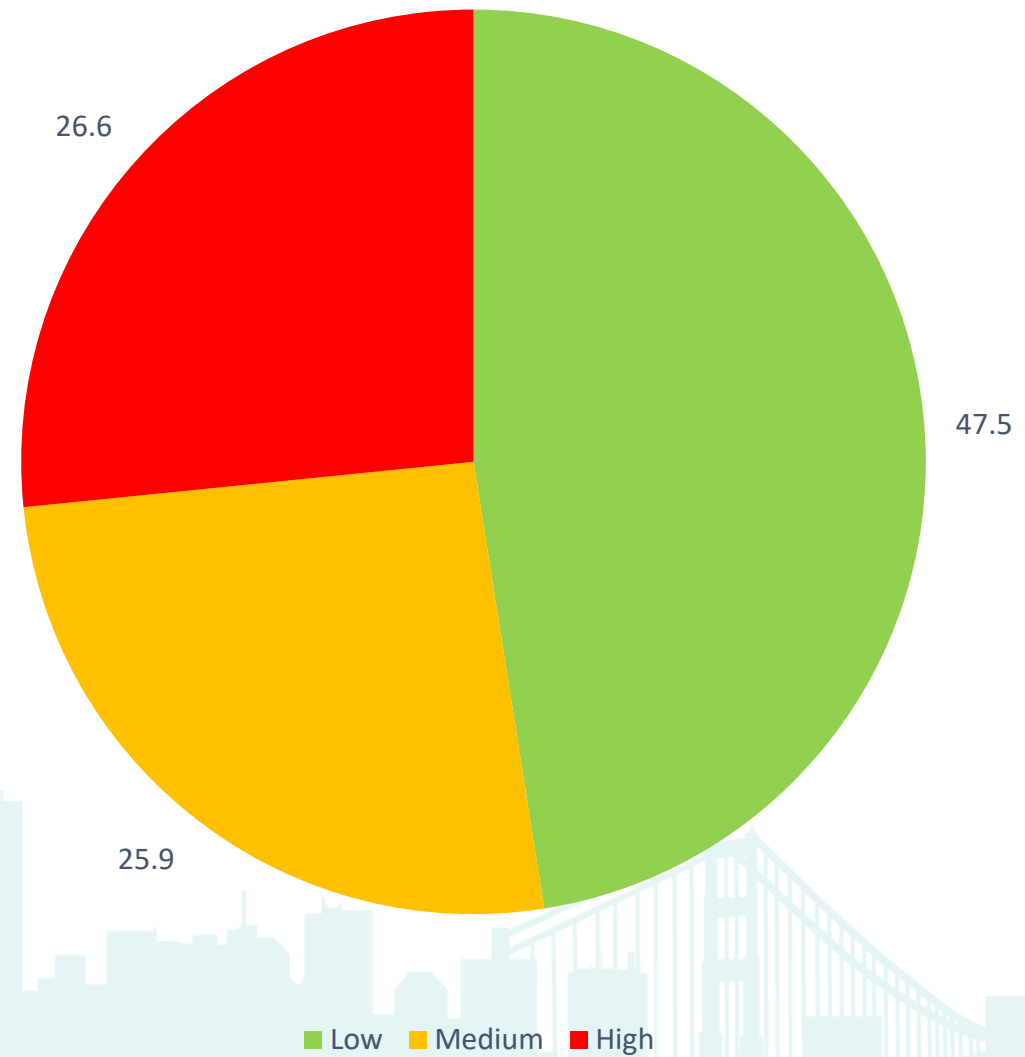

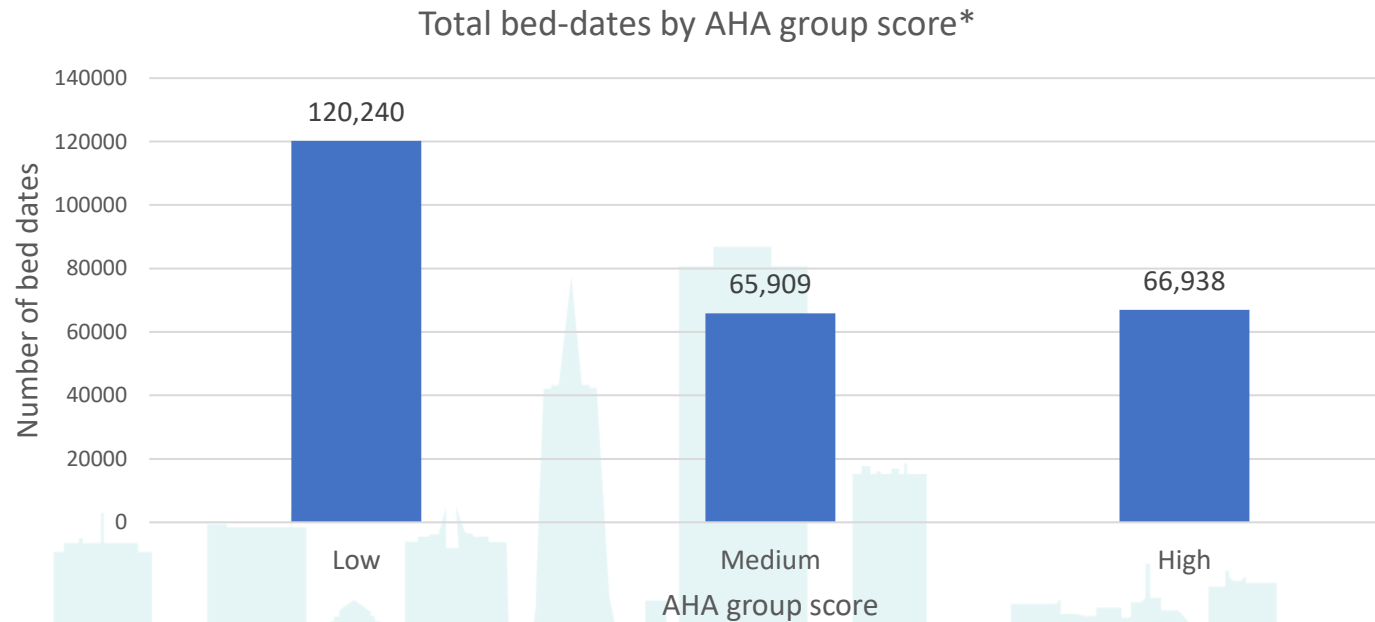**Drug intoxication deaths and AHA score**

Mortality and AHA score

- What proportion of people in the shelter do you think would be low score?

HALF OF THOSE IN SHELTER ARE LOW RISK

26.6

47.5

25.9

Low   Medium   High

The majority of shelter bed days are allocated to low risk people

Total bed-dates by AHA group score*

120,240

65,909

66,938

Number of bed dates

140000
120000
100000
80000
60000
40000
20000
0

Low   Medium   High
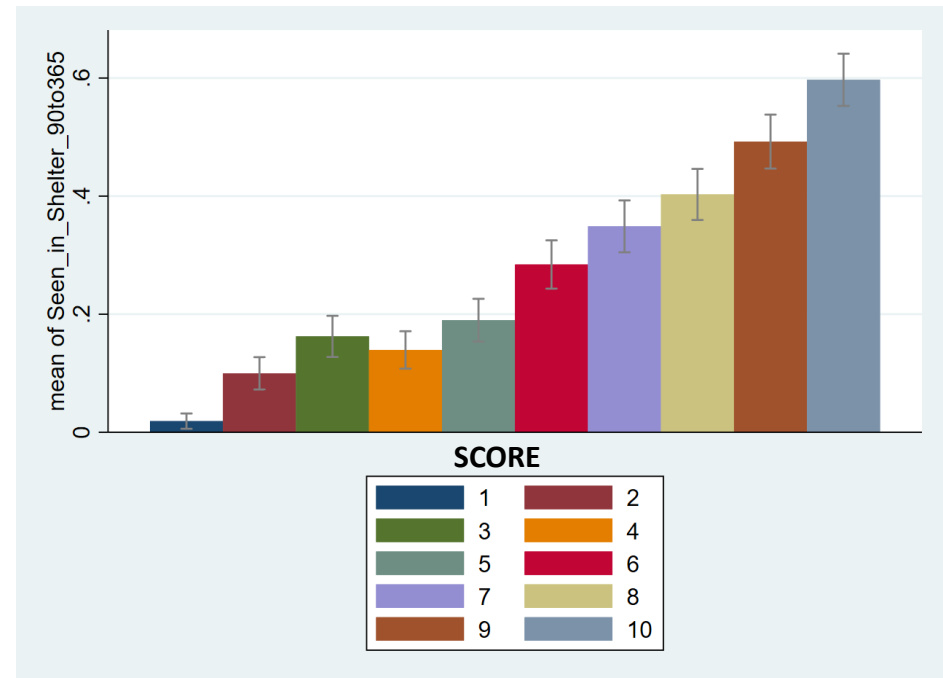
AHA group score

Predicting being seen in Street or Shelter 90-365 days after being served

- We built a tool for Utah to see if we can predict if the client will be seen in Shelter or Street Outreach between 90 and 365 days of the assessment

We score each assessment 1 -10 and each group has around 10% of assessments in each score group

- This graph shows the proportion of Single adults by score who are seen in Shelter or Street Outreach
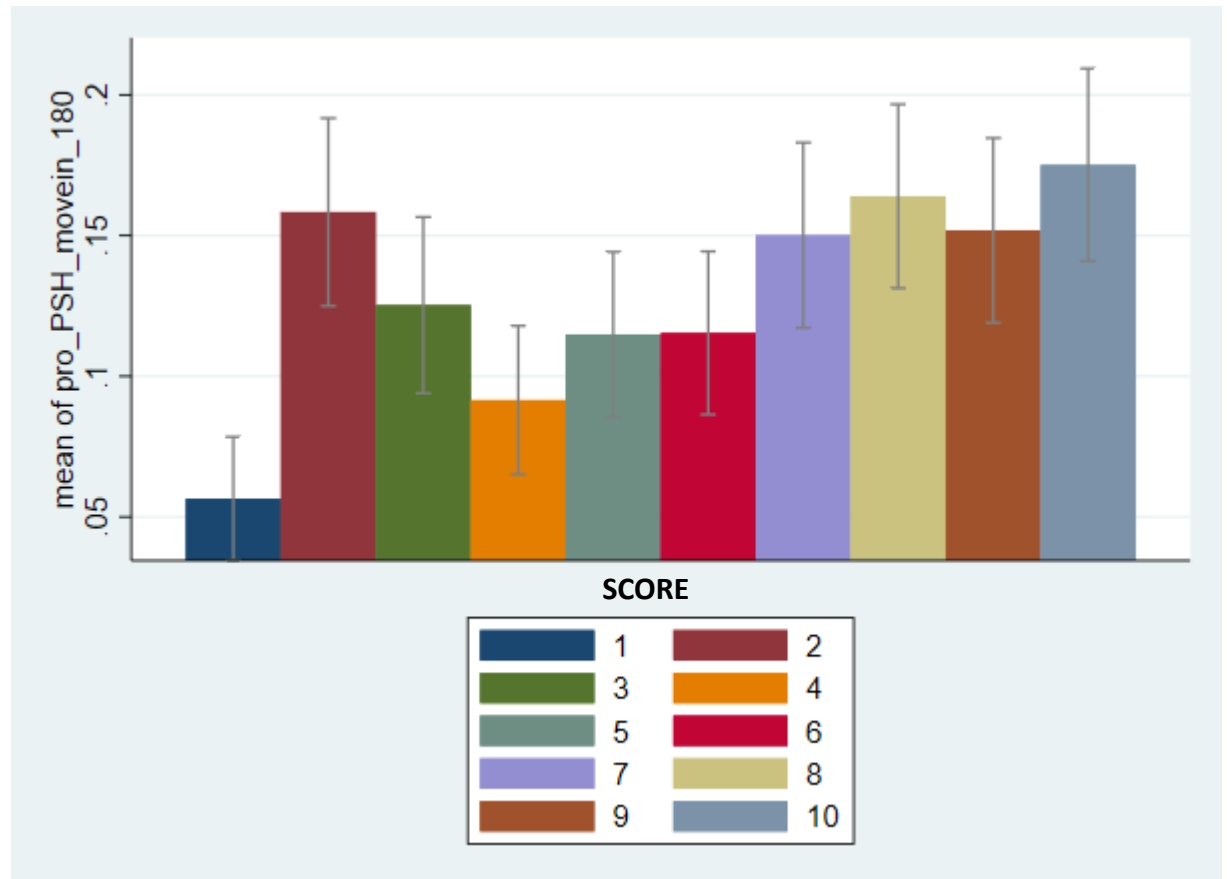- Our model is reasonably good at predicting those who will end up in SO or Shelter

Street and Shelter of Single Adults between 90 days and 365 days and PRM score

The majority of clients who received PSH in UtAH Were low risk

- We went back and scored all our clients and put them into risk score buckets

- This graph shows the share of people in each bucket who moved into PSH within 180 days of the assessment

- It shows that we are not targeting our PH program by risk of being in Street-outreach or Shelter

- Clients with *low* risk are as likely to be given permanent housing as clients with high risk

Proportion of Single Adults who moved into PH housing with 180 days and PRM score
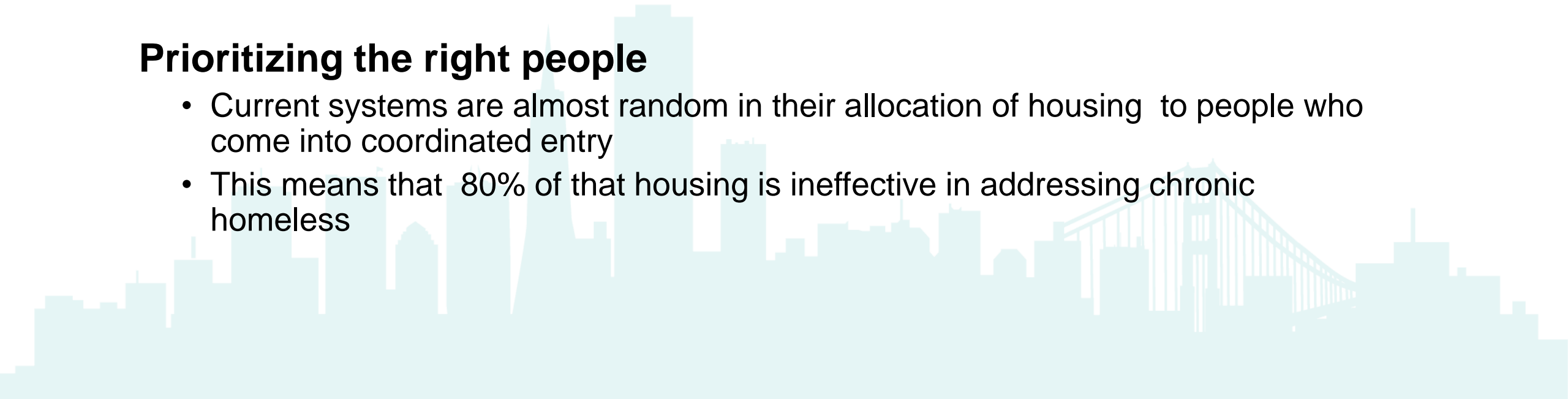
A Data Driven Approach to Homelessness

- **Understanding flows**
  - Managing homelessness systems is similar to the challenges of managing other complex service systems such as hospital bed management.
  - The homeless population is not a single static population
  - Real time status of flows in and out of homelessness is a basic building block

Prioritizing the right people
  - Current systems are almost random in their allocation of housing to people who come into coordinated entry
  - This means that 80% of that housing is ineffective in addressing chronic homeless
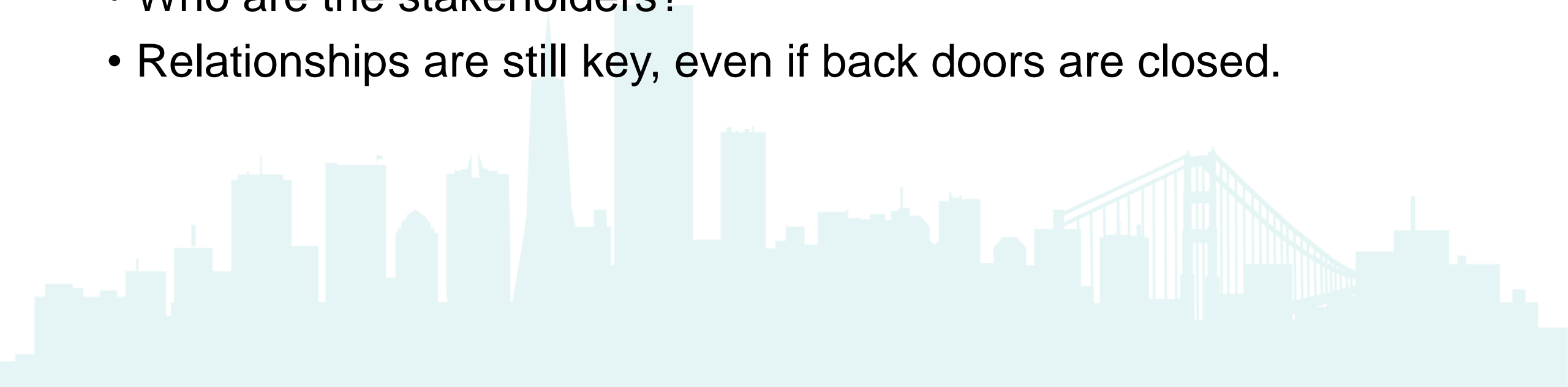
HUMAN CENTERED DESIGN

- CES is directive, not prescriptive.

- Identify who are the most vulnerable in your community, get consensus, and create your assessment to be geared toward that population.

- Having a CES oversight committee is required to be able to do this.

- Understanding regs is also necessary for this.

- What are the HUD regs? What are the CoC Written Standards, and what is organizational policy & procedure? Where can you poke?

GET CURIOUS, BE CREATIVE

- Why do we have to do rent reasonableness?
- Emergency Housing Voucher connection to bridge housing.
- Who is going to audit me?
- How are other people doing this?
- Who are the stakeholders?
- Relationships are still key, even if back doors are closed.

READ BETWEEN THE LINES

- While targeting the most vulnerable in a community is key – we cannot force people into housing when we think they should be housed.

- Proving your efforts and case are what funders are looking for. Don't hold an open unit for a month while trying to convince someone to sign a lease. Documentation is vital to operating a flowing CES.

- Your data matters – we are so caught up in looking good that we forget to track what isn't working.