

STRATEGY: COORDINATED INTAKE SYSTEM

Description: A coordinated intake or “front door” provides a single or coordinated method by which homeless people and those at risk find and access shelter, housing and/or services. Typically, the intake conducts outreach, assessment, initial system intake (including eligibility determinations such as income and housing status), and program referral or program placement/reservations (such as shelter bed reservations.)

Benefits:

- Clear entry point for homeless and at-risk people in the community
- Improved fit between clients and programs/services referred to/accepting
- Greater opportunity for up-front diversion from homeless entry at the front door
- Faster access to beds/services for clients (reduces turnover time)
- Reduction of duplication of effort for intake/data collection and administrative burden at participation agencies
- Better data/feedback to system about trends in demand, needs and gaps

Considerations:

- Different options, including single location, phone based (211) paired with secondary intake at a site, or multiple locations using common assessment and intake process.
- Decisions about placements into homeless assistance programs should be made through the intake process instead of by individual providers.
- Should use a common barrier assessment and targeting tool (see below)

Needed to implement:

- Funding for central functions and identified operator(s)
- agreement on basis for a referral or placement to each program participating
- common data system
- programs that meet people's needs

Sample communities with this strategy: Hennepin County, MN (Families), Sacramento, CA (HPRP and mental health housing/shelter), Richmond VA (Shelter), Columbus, OH (full system), Cincinnati, OH (full system), Utah Balance of State (full system), Dayton, OH (full system)

STRATEGY: COMMON BARRIER ASSESSMENT AND TARGETING TOOL

Description: A standardized tool and process for identifying client/household's resources and barriers to housing and for targeting interventions to meet their needs. Often used with a coordinated intake model, but can be used by agencies throughout a community.

Benefits:

- Better fit between clients and programs
- Common understanding among programs of relevant client barriers and issues important to assess
- Reduction of duplication for client having to give information repeatedly and/or different information to each agency
- Ability to base large portions of assessment on required/ recommended HMIS data

Considerations:

- Assessment tool that categorize clients into different levels based on barriers/needs and targets program, resources and/or staff time accordingly
- Tools with combination of quantitative assessment (a score) and qualitative assessment
- Collect only as much information as needed
- Focus on immediate barriers to obtaining housing

Needed to implement:

- Agreement on elements of assessment and targeting interventions
- common training
- ability to maintain/revise tool and process

Sample communities with this strategy: Hennepin County, MN (Families only), Alameda County, CA (HPRP only), Columbus, OH (families), Dayton OH

STRATEGY: PERFORMANCE IMPROVEMENT PROCESS

Description: A method for evaluating the performance of programs/projects within the Continuum of Care on a set of common measures, and utilizing that information for improving program performance and guiding funding decisions.

Benefits:

- Clear expectations for providers
- Better outcomes for clients as system-wide performance improves
- Ability to guide funding decisions based on impact/ ensure biggest bang for the buck

Considerations:

- Which programs will be covered (CoC funded only? HPRP? All programs?)
- Better to focus on fewer and higher priority measures
- If possible, align with HEARTH Act measures (length of episodes, repeat entries, new entries)
- Identify which measures will apply to which programs

Needed to implement:

- Common performance measures
- baseline data and benchmarks for each component of the system of care
- data collection system that produces performance reports
- contract language for how performance measures are used
- designated time frame for implementation and revisions
- corrective action process and technical assistance for agencies facing challenges
- willingness to reallocate funding if necessary

Sample communities with this strategy: Columbus, OH; New York, NY; Hennepin County, MN; Connecticut Balance of State.

Resources: The Columbus Model, What Gets Measured Gets Done

STRATEGY: TRANSITIONAL HOUSING CONVERSION

Description: A method for modifying transitional housing programs to provide other forms of assistance, including rapid-rehousing, transition- in-place, short-term/interim housing, emergency shelter, and/or permanent supportive housing.

Benefits:

- Shortens lengths of stay for programs and systems
- Increases numbers of households that can be served with existing resources
- Brings system into better alignment with goals of the HEARTH Act and Federal Strategic Plan to Prevent and End Homelessness

Considerations:

- Requires buy-in from stakeholders, including program staff, board, funders
- Contract amendments for CoC and other funding
- Possible changes to target population

Needed to implement:

- Staff training
- Restructuring plan

Sample communities with this strategy: Chicago, IL; Fairfax, VA; Lancaster, PA.

Resources: *Organizational Change: Adopting a Housing First Approach*

"Conversion from Family Transitional to Permanent Supportive Housing", chapter one in *Home Works: Solving Family Homelessness through Permanent Supportive Housing*, 2005, published by CSH

STRATEGY: EXPANDING RAPID-REHOUSING CAPACITY

Description: Developing or expanding programs that rapidly re-house families or individuals as quickly as possible when they become homeless, generally to market rate housing in the community.

Benefits:

- Shortens lengths of stay in homelessness/low cost per housing placement
- Reduces trauma
- Enables existing shelter beds to serve more people
- Provides support to households in their own housing

Considerations:

- Decision: Combine with shelter or operate as standalone programs?
- Identify funding for rental assistance and flexible resources for one-time costs
- How to best utilize existing service network

Needed to implement:

- new or redirected funding resources
- community housing capacity including strong landlord relationships
- support services once people are housed

Resources: Rapid Re-Housing: Creating Programs that Work

STRATEGY: CONVERTING SHELTER BEDS TO RAPID REHOUSING RESOURCES

Description: Shifting traditional shelter resources (such as ESG funds, state and private dollars) to fund/support rapid rehousing programs. This could result in fewer overall shelter beds. However, because people who become homeless receive rapid re-housing assistance, the reduced number of shelter beds can potentially serve the same number of people or possibly more.

Benefits:

- Moves clients from homelessness to housing faster/shortens lengths of stay
- Reduces need for shelter beds
- Possibly more community support because of reduced number of shelter facilities

Considerations:

- Challenge to convert fixed location costs to flexible costs
- Mobile services rather than site-based/shelter-based services
- Targeting rapid re-housing services to people who would have been medium to long term shelter users

Needed to implement:

- ability to redirect staffing and/or other shelter resources to RRH;
- community housing capacity including strong landlord relationships;
- mobile services capacity;
- quick access to (flexible) funds that will help with housing placement and upfront costs

Sample communities with this strategy: Fairfax, VA; Columbus, OH; Hennepin, MN; Grand Rapids, MI; Worcester, MA

STRATEGY: SHELTER DIVERSION

Description: Program/approach that provides rapid assessment and immediate assistance to prevent shelter entry. For example, relocation to family/friends, relocated people being discharged from institutions

Benefits:

- Prevents shelter/homeless entries
- Prevents disruptions to clients
- Preserves shelter beds for those who most need them
- Preserves housing situations which may be viable

Considerations:

- Central diversion vs. diversion practices by each shelter at its own front door

Needed to implement:

- Assessment and targeting capacity and tools
- services and assistance that can be provided decoupled from shelter entry
- landlord relationships
- flexible financial assistance

Sample communities with this strategy: Hennepin County, MN , Worcester, MA, Columbus, OH, Cleveland, OH

STRATEGY: TARGETED PREVENTION

Description: Improving prevention programs to better target people likely to become homeless by using system data, targeted outreach methods, screening and greater program flexibility. Targeted prevention directs prevention resources to households *most likely* to enter the homeless system, not all households in danger of eviction/housing loss.

Benefits:

- Targets limited resources to those most likely to benefit from them
- Reduces shelter/homeless entries
- Utilizes homelessness resources to be most closely aligned with actual homeless population
- Uses flexibility to provide right sized assistance instead of predetermined approach

Considerations:

- Prediction methods challenging
- Commitment to refine
- Stand alone programs versus links to other prevention and re-housing assistance

Needed to implement:

- data system to develop targeting information from
- common assessment
- flexible resources and/or ability to move to deeper services if needed
- willingness to experiment with and evaluate prevention assistance

Sample communities with this strategy: Columbus, OH; New York, NY, Cleveland, OH

Resources: *Homelessness Prevention: Creating Programs That Work (and Companion Guide)*

STRATEGY: EXITS FROM PERMANENT SUPPORTIVE HOUSING

Description: Programs/strategies that assist tenants of permanent supportive housing who no longer need intensive services to move to other affordable (frequently subsidized) housing and receive services in the community.

Benefits:

- Preserves scarce PSH resources for those that need them most
- Builds on recovery movement approach to helping clients/tenants continue to move forward and toward greater independence
- Creates turnover in PSH

Considerations:

- How will you identify PSH tenants ready and wanting to move to other housing

Needed to implement:

- Assessment process to identify and determine readiness for tenants to move on
- Available housing units that are affordable to PSH tenants

Sample communities with this strategy: Seattle, WA; Chicago, IL; New York, NY.

STRATEGY: MAINSTREAM EMPLOYMENT PARTNERSHIPS

Description: Create a partnership with Workforce Investments Boards (WIBs), employment programs, and mainstream income supports to help people who are homeless to quickly gain employment.

Benefits: Uses mainstream resources in lieu of scarce homeless targeted resources
Provides clients with broader range of employment options

Considerations: Mainstream employment programs are typically reluctant to serve homeless people. Employment strategies should focus on achieving employment as quickly as possible.

Needed to implement: Relationship with employment programs.

Sample communities with this strategy: Columbus, OH; Kalamazoo, MI; Whatcom/Clallam, WA

STRATEGY: PROGRESSIVE ENGAGEMENT

Description: Progressive engagement refers to a homeless assistance strategy that provides a small amount of assistance to everybody who enters the system, and then progressively increasing assistance until housing crises are resolved. For example every person who becomes homeless would receive a small amount of help to find housing. For those people who cannot exit homelessness with that level of assistance, a rapid re-housing intervention would be provided that includes short-term rental assistance. For people who are still not stably housed after the rapid re-housing assistance, a more intensive subsidy, like a housing voucher, or more intensive services, like intensive case management, would be applied. For cases where all these strategies fail, a referral to permanent supportive housing would be made.

Benefits:

- You don't have to be able to predict beforehand how much assistance a person will need to be re-housed.
- You can stretch your limited resources farther.
- It prevents disruption for the household. They are not literally moving from program to program, or even using different caseworkers. From their perspective, they stay a short period of time in shelter, then are assisted to move into permanent housing. Their level of assistance may be increased or decreased, but their living situation is stable.

Considerations: Assistance must fit around people being served. For example, you will have to figure out how to set aside permanent rental subsidies for only certain circumstances. You don't want to put everybody on the waiting list at the beginning of the process. Instead, you want to have a pool of vouchers waiting for those for whom smaller amounts of assistance didn't work. This also requires that the caseworkers are trained and can recognize when a person has achieved enough stability or when they will need further assistance.

Needed to implement: Buy in from providers. A process for knowing when somebody is stable in housing and when they need more assistance.

Sample community with this strategy: Salt Lake City, UT

