

The Community Partnership for the Prevention of Homelessness



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of Homelessness

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The Community Partnership

- ▶ Founded in 1989, The Community Partnership for the Prevention of Homelessness (TCP) was established to have a central entity address homelessness in the District of Columbia.
- ▶ In 1993, TCP became one of the country's first "Continuum of Care" (CoC) grantees following an award from the US Department Housing and Urban Development (HUD). Today, TCP serves as the Collaborative Applicant for CoC Program funding.
- ▶ TCP serves in a similar role with the District Government, as Prime Contractor for the District of Columbia Department of Human Services (DHS) for the Management and Oversight of the locally funded CoC.
- ▶ Additionally, TCP is the Administrator for the District's Homeless Management Information System (HMIS) and leads the CoC's Coordinated Entry efforts through the Coordinated Assessment and Housing Placement (CAHP) System. TCP has been the lead on HMIS since its inception in the District in 2001.
- ▶ More history is at: <https://community-partnership.org/about/history/>

What is the Continuum of Care?

System of Care:

- ▶ Prevention programs, outreach, drop-in centers, emergency shelters, transitional housing, and permanent housing are distinct programmatic responses to address the housing and service needs of the homeless population. Taken together, the range of services, programs, and housing available to serve the individuals and families experiencing homelessness and/or housing instability make up the CoC.

Strategic Planning Body:

- ▶ A CoC is a regional or local planning body that coordinates housing and services funding for homeless families and individuals. The District of Columbia Interagency Council on Homelessness is the strategic planning body for the DC CoC. The CoC's work is guided by Homeward DC and Solid Foundations DC, the two strategic plans for the system at large and youth subsystem.

Federal Funding Stream:

- ▶ The funding that TCP receives from HUD to support housing, case management, and program operations is also called the Continuum of Care (CoC) Program.

CoC Components

Primary Program Types:

- ▶ Prevention
- ▶ Outreach
- ▶ Coordinated Entry
- ▶ Emergency Shelter
- ▶ Transitional Housing
- ▶ Rapid Rehousing
- ▶ Joint Transitional-Rapid Rehousing
- ▶ Targeted Affordable Housing
- ▶ Permanent Supportive Housing

Populations Served:

- ▶ Unaccompanied Adults
- ▶ Families with Children
- ▶ Unaccompanied Youth
- ▶ Survivors of Domestic Violence
- ▶ Chronically Homeless
- ▶ Veterans
- ▶ LGBTQ+

What is the HMIS?

- ▶ The Homeless Management Information System (**HMIS**) is a web-based, information technology system used to collect person-level information from consumers of homeless services as well as data on the provision of those services at provider locations.
- ▶ TCP has administered the HMIS since 2001. The HMIS software (ServicePoint) is one of the most widely used throughout the United States, and our implementation in the District is one of the longest standing in the country.
- ▶ The District's HMIS is the primary source of information on the size, scope, and make-up of the population experiencing homelessness in the city.
- ▶ From HMIS, TCP produces numerous reports on the CoC and District residents, its providers, and the efficacy of the system.

What is CAHP?

The Coordinated Assessment and Housing Placement (CAHP) System process is the CoC's approach to coordination and management of a crisis response system's resources that allows users to make consistent decisions from available information to efficiently and effectively connect people to housing and service interventions that will rapidly end their homelessness. The CAHP System allows the CoC to ensure that the highest need, most vulnerable households in the community are prioritized for housing and services first. CAHP or Coordinated Entry Systems are a federal requirement of each community.

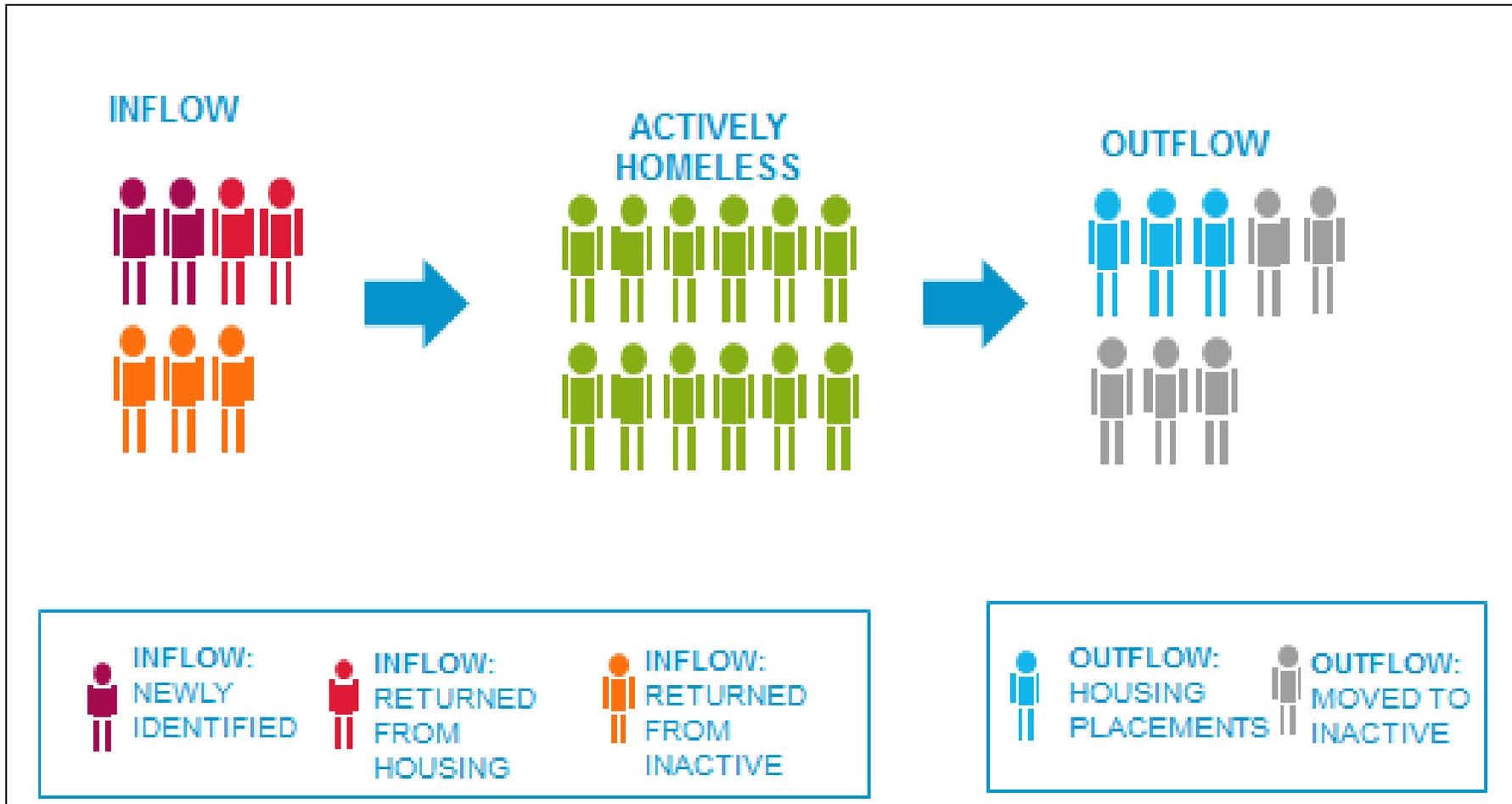
The CAHP process includes four core operational elements:

- ▶ *Access* - the initial engagement point (virtual or site-based, including multiple access sites) for persons experiencing a housing crisis.
- ▶ *Assessment* - process of documenting a participant's housing needs, preferences, and vulnerability.
- ▶ *Prioritization* - process of assigning level of need or vulnerability to persons seeking assistance so that housing and services can be allocated to those persons with the greatest need.
- ▶ *Referral* - matching persons to available community resources, housing and services.

TCP's Data and Reporting & Special Projects

- ▶ Point in Time
- ▶ Homeless Youth Census
- ▶ Longitudinal System Analysis & Report to Congress
- ▶ System Performance Monitoring & Quality Improvement
- ▶ HUD Youth Homeless Demonstration Program
- ▶ A Way Home America Grand Challenge
- ▶ Domestic Violence Strategic Housing Plan
- ▶ CAHP Racial Equity Analysis
- ▶ Kaiser Permanente Veterans Funding
- ▶ Regional Coordination

Understanding Movement in the System



Homelessness in The District

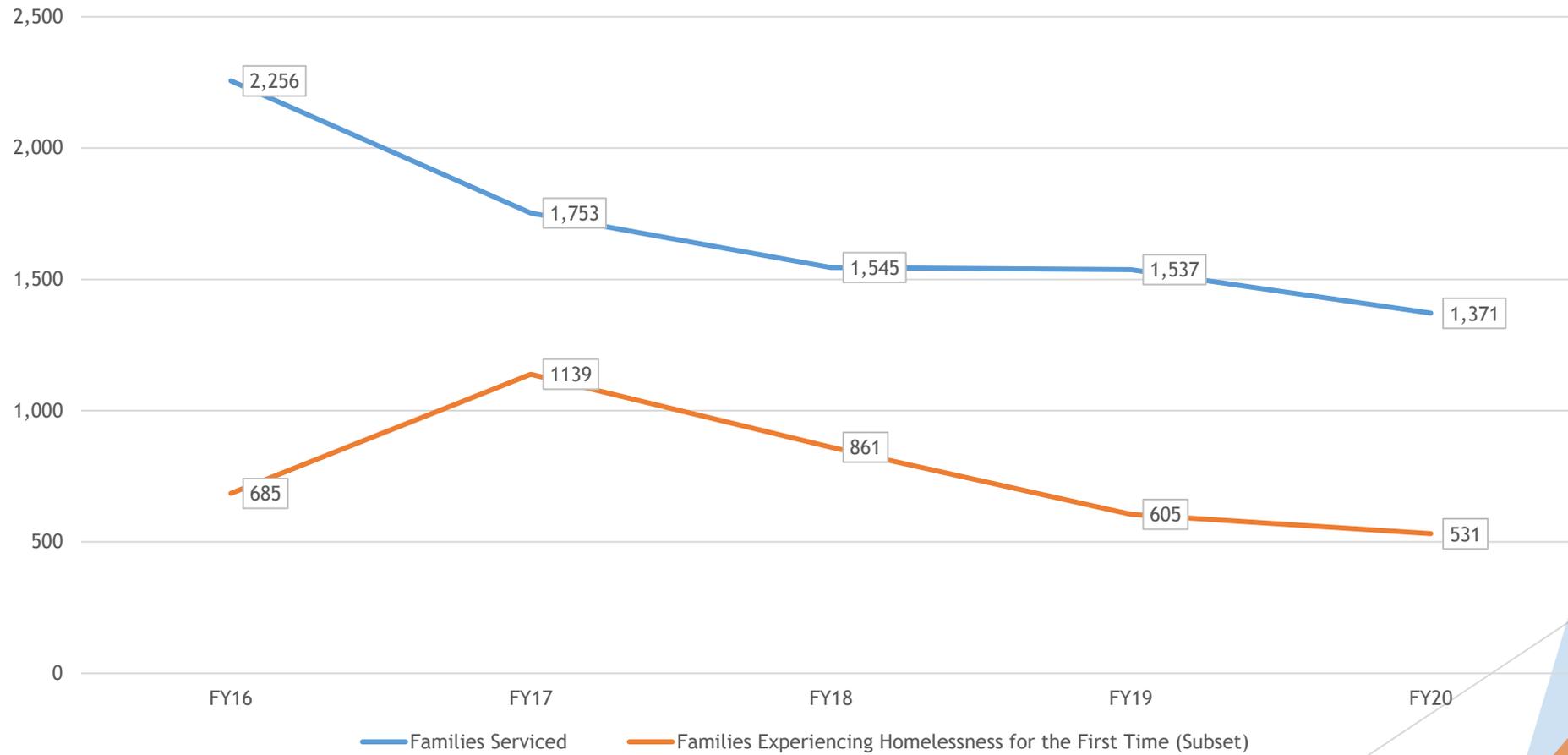
- On a given day in the District there are roughly 300 families with children and 4,000 unaccompanied persons who are experiencing homelessness.
- In FY2020, 1,371 families and 9,253 unaccompanied persons were served by the CoC's programs.
- Since the beginning of the public health emergency, homelessness in the District has decreased - largely due to the eviction moratoria and public prevention assistance which have helped to stave off "inflow" into the system. However, CAHP efforts have been ongoing through the last year and system exits have continued as well.
- Programmatic changes - such as the closure of DC General and congregate sites with a shift to Short Term Family Housing locations throughout the District - has helped create a more efficient system for families.

Homelessness in The District

- For the last several years, the family subsystem of the CoC has seen both decreasing inflow and expedited exits from the shelter system, though homelessness among unaccompanied individuals has been flat to increasing.
- There have been slight decreases among individuals experiencing “chronic homelessness” - repeated and lengthy episodes among persons with disabling conditions - inflow into the CoC has often outpaced exits from the singles subsystem.
- TCP, DHS, and the DCICH have worked to better understand the causes of inflow into the system and have developed prevention and diversion resources and have widened the scope of housing options to in hopes of mirroring the successes seen in the family subsystem.

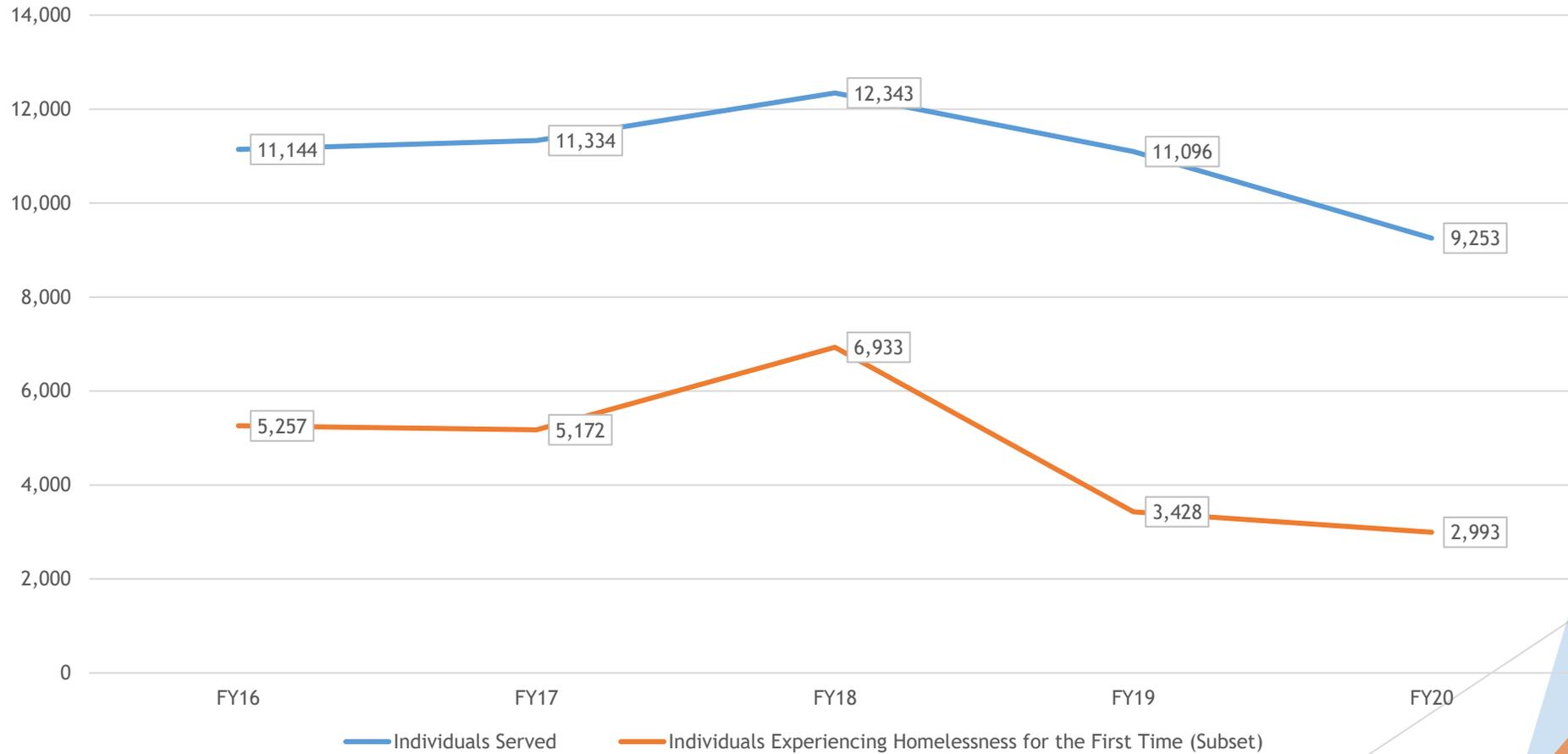
Families

Families Served by CoC Programs by Year



Unaccompanied Individuals

Individuals (Unaccompanied) Served by CoC Programs by Year



Housing Interventions

- ▶ Transitional Housing (TH)
 - ▶ Temporary program-based housing model with focus on case management, building income and connection to services
 - ▶ Goal to exit to permanent living situation without additional housing resources, though we now connect to RRH as needed
 - ▶ Generally phasing out these programs out for single adults to prioritize new PSH and Housing First
- ▶ Rapid Rehousing (RRH) - recommended for about 35% of those assessed
 - ▶ Time limited rental subsidy with housing search assistance and case management
 - ▶ Goal to build income and eventually take over full payment of the lease
- ▶ Permanent Supportive Housing (PSH) - recommended for 52% of those assessed
 - ▶ Permanent housing subsidy (leasing dollars or voucher) with case management
 - ▶ Two types:
 - ▶ Scattered Site - tenant based voucher/leasing dollars allowing for lease up in market rate units in the community
 - ▶ Project Based - PSH set aside units in a single building or whole building, voucher is tied to the unit, services may be available on site

Successful Approaches

▶ **Single Adults**

- ▶ Prevention/Diversion
- ▶ Prioritization of shelter long stayers
- ▶ During pandemic - additional targeting of medically vulnerable and previous housing refusers

▶ **Families**

- ▶ Expansive prevention/diversion
- ▶ FRSP as rapid shelter exit

▶ **Veterans**

- ▶ Investment in PSH by the VA has allowed for better targeting of subpopulations and prioritization of medically vulnerable and non chronic populations
- ▶ Additional investments from Community Solutions' partners have allowed for more prevention funding and expanded eligibility

▶ **Youth**

- ▶ Options are key - now have expanded TH/RRH for different subpopulations like LGBTQ+ identifying, scattered site PSH
- ▶ YHDP and Grand Challenge renew focus on data informed decisions

Monitoring for Progress

- ▶ TCP, DHS, and DCICH engage in ongoing monitoring of the system through reviews of information in HMIS
- ▶ In addition to the annual counts and understanding of demographics, we look at the system- and program-level efficiency metrics such as:
 - ▶ Utilization rate of programs to ensure that resources aren't used on programs that are no longer in demand
 - ▶ Length of program stay/length of time households experience homelessness
 - ▶ Rates at which households exit the system to permanent or positive destinations OR stability in housing (for programs that are designed to be permanent)
 - ▶ Rates of returns to the system following an exit
 - ▶ Rates of gaining employment or increasing income among households served
- ▶ Understanding each of these individually and as checks and balances on each other give the proper context to understanding whether or not the system is effective

Thank you!

