



ACTION PLAN TO REDUCE HOMELESSNESS IN PASCO COUNTY, FL

October 2018

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Executive Summary

In this report, we offer a roadmap to building a system that will effectively end homelessness in Pasco County. The Action Plan recommendations are based on decades of research, proven best practices, and professional expertise specific to homelessness. The most effective solutions to homelessness are well-documented. This report applies those proven solutions to the local environment in Pasco County.

If the roadmap is implemented completely and quickly, incredible results will be realized in Pasco.

- Sheltered and unsheltered homelessness will be reduced 40% between the 2019 Point in Time Count and the 2021 Point in Time Count.
- Unsheltered homelessness will be reduced 50% between the 2019 Point in Time Count and the 2021 Point in Time Count.

Below is an overview of the Action Plan recommendations, which are explained more fully in the following sections. We should note that this report serves as a working document, and as circumstances and resources shift, some recommendations should be re-evaluated on an annual basis by CHPC leadership, including its Board of Directors. Constant evaluation of outcomes and review of recommendations in this report will be essential to community support for the plan.

- A. Improve Continuum of Care (CoC) structure
 - A.1 Approve a revised CoC Charter establishing a CoC Homeless Leadership Council
 - A.2 Separate the CHPC (Coalition for the Homeless of Pasco County) Board of Directors from the CoC Board (i.e., Homeless Leadership Council)
- B. Build capacity of CoC Lead Agency
 - B.1 CHPC discontinues direct services operations and replace with subcontracts with other agencies
 - B.2 Provide additional funding to CHPC to build its capacity as the CoC Lead Agency in pursuit of improved system coordination, intake, triage, and reporting and monitoring.
- C. Need to improve Coordinated Entry System (CES)
 - C.1 Conduct regular CoC-wide CES training
 - C.2 Increase number of staff responsible for managing the CES, to include: training, documenting procedures, and monitoring agency performance
 - C.3 Produce a CES Procedures Manual and distribute to all provider agencies in the CoC
 - C.4 Hold By-Name-List meetings twice monthly to prioritize households for housing interventions and require provider agencies to serve/house according to established priorities
- D. Need for better trained agencies and staff on HMIS

- D.1 Hire a new staff person to help manage HMIS, provide training
- D.2 Improve data quality in HMIS
- D.3 Require all agencies that provide homeless services or housing to participate in HMIS and CES
- D.4 Ensure submission of valid and accurate System Performance Measures, Housing Inventory Chart, Point in Time Count, and AHAR to HUD
- E. Need for coordinated housing-focused outreach
 - E.1 Ensure all outreach workers, across all outreach programs, are regularly trained on HMIS
 - E.2 Seek programmatic funding for additional outreach workers, staffed by CHPC or other provider agencies
 - E.3 Coordinate all outreach efforts through CHPC
 - E.4 Execute effective PIT Count in 2019 and conduct after action review
- F. Need for formal diversion process
 - F.1 Develop formal diversion processes and training for all provider agencies
 - F.2 Expand opportunities to access diversion training
- G. Need to reduce emphasis on charity-style interventions
 - G.1 Provide formal housing-focused outreach training to all individuals involved in charity-style interventions
 - G.2 Reduce funding allocation to agencies exclusively offering charity-style interventions
 - G.3 Host a public event to discuss and endorse best practices in ending homelessness
 - G.4 Conduct outreach and education efforts within the faith-based and philanthropic community
- H. Need for low-barrier housing-focused emergency shelter
 - H.1 Host a workshop composed of the business community, philanthropy, and CoC agencies, to identify possible sites for a housing-focused low-barrier emergency shelter
 - H.2 Develop a housing-focused low-barrier emergency shelter for single adults
 - H.3 Identify a proven service provider to manage shelter based on proven past performance in short term shelter stays and permanent housing placements
- I. Need to build capacity in Rapid ReHousing (RRH)
 - I.1 Develop and staff a monitoring program to ensure RRH programs follow best practices

- I.2 Develop operating guidelines for agencies funded with RRH-specific moneys based on best practices
- I.3 Identify and contract with proven RRH providers that operate low-barrier, housing first RRH programs with solid housing outcomes
- I.4 Reduce reliance on, and funding for, transitional housing programs; redirecting those resources to both emergency shelter and RRH
- J. Need to build capacity in Permanent Supportive Housing (PSH)
 - J.1 Establish a working group to actively monitor and pursue PSH funding opportunities at Florida Housing Finance Corporation (FHFC)
 - J.2 Submit a response to a FHFC PSH Request for Applications
 - J.3 Evaluate performance metrics and program policies and procedures for existing PSH providers; reallocate if appropriate
- K. Need to reduce fragmentation among funders and providers
 - K.1 Facilitate dialogue between County and CHPC on new entities
 - K.2 The County should ensure funds ultimately disbursed with the purpose of addressing homelessness are monitored to ensure housing first best practices
 - K.3 Extensive training in best practices, along with regular monitoring and contractual requirements, for all services/housing providers should be instituted to ensure a maximum return on investment of all funding across the system
- L. Need to address geography and transportation barriers
 - L.1 Establish a mobility task force, in coordination with the County's Homeless Advisory Board and/or reconstituted CoC Leadership Council, to identify alternative options for expanding public transportation
 - L.2 Increase availability of free bus passes for service providers
- M. Need to address housing and employment barriers
 - M.1 Establish and fund employment and workforce development program with a preference for persons referred through the CES
 - M.2 Host a county-wide housing forum to discuss options for promoting development of and access to affordable housing
 - M.3 Ensure new homeless services and housing providers locate their units near public transportation

Prioritization

The Florida Housing Coalition recommends implementation of each of the recommendations detailed in this report. At the same time, we also recognize the immensity of the work in the years ahead, and

so we include a suggested timeline and prioritization of our recommendations below. The staging of recommendations is based on the two criteria: 1) the urgency of need for the recommendation, and 2) the feasibility of completing the recommendation in the prescribed time frame.

Year 1

1. A.1 Approve a revised CoC Charter establishing a CoC Homeless Leadership Council
2. A.2 Separate the CHPC (Coalition for the Homeless of Pasco County) Board of Directors from the CoC Board (i.e., Homeless Leadership Council)
3. C.1 Conduct regular CoC-wide CES training
4. C.3 Produce a CES Procedures Manual and distribute to all provider agencies in the CoC
5. C.4 Hold By-Name-List meetings twice monthly to prioritize households for housing interventions and require provider agencies to serve/house according to established priorities
6. D.1 Hire a new staff person to help manage HMIS, provide training
7. E.2 Seek programmatic funding for additional outreach workers, staffed by CHPC or other provider agencies
8. E.3 Coordinate all outreach efforts through CHPC
9. E.4 Execute effective PIT Count in 2019 and conduct after action review
10. G.1 Provide formal housing-focused outreach training to all individuals involved in charity-style interventions
11. G.4 Conduct outreach and education efforts within the faith-based and philanthropic community
12. H.1 Host a workshop composed of the business community, philanthropy, and CoC agencies, to identify possible sites for a housing-focused low-barrier emergency shelter
13. J.1 Establish a working group to actively monitor and pursue PSH funding opportunities at Florida Housing Finance Corporation (FHFC)
14. J.2 Submit a response to a FHFC PSH Request for Applications
15. J.3 Evaluate performance metrics and program policies and procedures for existing PSH providers; reallocate if appropriate
16. K.1 Facilitate dialogue between County and CHPC on new entities
17. L.2 Increase availability of free bus passes for service providers

Year 2

1. B.1 CHPC discontinues direct services operations and replace with subcontracts with other agencies

2. B.2 Provide additional funding to CHPC to build its capacity as the CoC Lead Agency in pursuit of improved system coordination, intake, triage, and reporting and monitoring.
3. C.2 Increase number of staff responsible for managing the CES, to include: training, documenting procedures, and monitoring agency performance
4. D.2 Improve data quality in HMIS
5. D.3 Require all agencies that provide homeless services or housing to participate in HMIS and CES
6. E.1 Ensure all outreach workers, across all outreach programs, are regularly trained on HMIS
7. F.1 Develop formal diversion processes and training for all provider agencies
8. F.2 Expand opportunities to access diversion training
9. G.3 Host a public event to discuss and endorse best practices in ending homelessness
10. I.1 Develop and staff a monitoring program to ensure RRH programs follow best practices
11. I.2 Develop operating guidelines for agencies funded with RRH-specific moneys based on best practices
12. I.3 Identify and contract with proven RRH providers that operate low-barrier, housing first RRH programs with solid housing outcomes
13. I.4 Reduce reliance on, and funding for, transitional housing programs; redirecting those resources to both emergency shelter and RRH
14. K.2 The County should ensure funds ultimately disbursed with the purpose of addressing homelessness are monitored to ensure housing first best practices
15. K.3 Extensive training in best practices, along with regular monitoring and contractual requirements, for all services/housing providers should be instituted
16. L.1 Establish a mobility task force, in coordination with the County's Homeless Advisory Board and/or reconstituted CoC Leadership Council, to identify alternative options for expanding public transportation
17. M.2 Host a county-wide housing forum to discuss options for promoting development of and access to affordable housing

Year 3 and on

1. D.4 Ensure submission of valid and accurate System Performance Measures, Housing Inventory Chart, Point in Time Count, and AHAR to HUD
2. G.2 Reduce funding allocation to agencies exclusively offering charity-style interventions
3. H.2 Develop a housing-focused low-barrier emergency shelter for single adults
4. H.3 Identify a proven service provider to manage shelter based on proven past performance in short term shelter stays and permanent housing placements

5. M.1 Establish and fund employment and workforce development program with a preference for persons referred through the CES
6. M.3 Ensure new homeless services and housing providers locate their units near public transportation

The Future of Pasco

This report provides a roadmap to work toward effectively ending homelessness in Pasco. To “effectively end homelessness” means that the community has in place a system that ensures homelessness is prevented whenever possible or, if it can’t be prevented, it is a rare, brief, and nonrecurring experience. Of course, homelessness will sometimes occur; effectively addressing homelessness does not mean that no one will ever be homeless in Pasco. It does mean that Pasco will see measurable significant reductions in homelessness over the next three years.

An effective homeless assistance system is designed to:

1. quickly identify and engage people at risk of or experiencing homelessness;
2. intervene to prevent the loss of housing and divert people from entering the homelessness services system; and
3. when homelessness does occur, provide access to shelter and crisis services while permanent housing and appropriate supports are being identified, and then quickly connect people to housing assistance *and* services to help them achieve and maintain stable housing.

With a systems view, all actions related to homelessness must be coordinated, silos must come down, and desired outcomes must be tracked.

An effective system has five key components:

1. outreach and coordinated entry,
2. diversion,
3. short-term emergency shelter,
4. rapid rehousing, and
5. permanent supportive housing.

Referring to the homelessness response as a “system” is intentional. The community must adopt a systems view of responding to homelessness. With a systems view, all actions related to homelessness must be coordinated, silos must come down, and desired outcomes must be tracked.

Building an Outcomes-Focused System

The homeless assistance system recommended in this report is grounded in best practices that are proven to significantly reduce homelessness. For such a system to work effectively and efficiently there must be agreed upon outcomes-based performance metrics. Those measures must be tracked on a timely and regular basis, allowing for a feedback system to identify and quickly address problem areas.

It is important the metrics be focused on appropriate outcomes. Many nonprofit organizations have systems in place to track activities and outputs (e.g., number of outreach contracts, number of shelter

bed nights) and it is appropriate to track that data for internal management purposes. However, it must be emphasized that those measures are more of a reflection of activity rather than outcomes.

Below we identify a few specific program performance metrics that are common measurements in an outcome-focused system. Local community leadership will identify benchmarks for each of these measurements; we offer guidance here based on other communities.

Examples of outcome-focused performance measures for programs include the following.

- **Permanent housing success rates.** People who move into their own apartments are no longer homeless, so one of the best measures of success in reducing homelessness is to measure housing placement rates. The community can establish a system-wide goal, as well as program-specific goals. The system goal might be an overall combined housing placement rate of 70%. The housing placement benchmark for an outreach program could be lower, say 50%, while the housing placement benchmark for rapid rehousing programs would be higher, such as 80%.

People who move into their own apartments are no longer homeless, so one of the best measures of success in reducing homelessness is to measure housing placement rates.

- **Returns to homelessness.** Helping people move into housing is not enough – the system must provide ongoing support services and assistance to help them remain stably housed. The system, and any individual program, is not effective if people are housed but then cycle back in and out of homelessness. It must be recognized, however, that returns to homelessness will occur in any system. A system-wide returns to homelessness benchmark might be 15%, while the benchmark for a specific permanent supportive housing program might be pegged at 10%.
- **Average length of time in shelter/transitional programs before moving into permanent housing.** The federal goal is that, on average, length of time between a person's entry into a program and moving into housing should be less than 30 days. The community can establish a system-wide goal, as well as program-specific goals. For example, the system-wide goal may be an average length of stay of less than 60 days combining all programs, while the goal for a specific emergency shelter might be 30 days.
- **Increase in household income.** Along with helping people move into housing, our systems must also address long-term sustainability. The system, and specific programs, should measure the percentage that increased household income over the period of time the household is served and housed.

The performance measures mentioned above, as well as other important metrics, can be drawn from the CoC's Homeless Management Information System (HMIS). To maximize consistency, reliability, and comparability across time and programs, it is essential that outcome measures be drawn primarily from HMIS, rather than from agency reports using other systems.

Above, we described metrics for tracking outcomes of individual programs. Consistent with the “systems approach” advocated here, additional measures must be tracked to measure the effectiveness of the system as a whole.

HUD has recently begun requiring CoCs to report certain “System Performance Measures.” System Performance Measures (Sys PM) were first reported by CoCs in 2016 and those 2016 measures will serve as the “benchmark” year measures against which future changes will be measured. Unfortunately, the Sys PM that have been reported by the Pasco CoC are not usable. However, implementing our recommendations will remedy past problems with the data.

The Sys PM include the following measures, based on data drawn from the local Homeless Management Information System (HMIS):

1. length of time persons remain homeless in the community;
2. percentage of people who exited homelessness to permanent housing and later return to homelessness (i.e., returns to homelessness within a specified period of time);
3. changes in number of total people homeless and those in specific homeless subpopulations, such as veterans, chronically homeless, families with children, unaccompanied homeless youth;
4. employment and income growth for persons in HUD CoC funded programs;
5. number of persons who become homeless for the first time in the community; and
6. percentage of people successfully moved from street outreach into, and retaining, permanent housing.

System Performance Measures are important for two reasons. First, the CoC’s reported performance on these metrics will affect directly future federal and state funding. Higher performing CoCs will be rewarded, while lower performing CoCs will lose funding. Second, these measures provide useful data for the local community to improve the system. For instance, seeing increasing numbers of first-time homeless is an indication that the Diversion component of the system should be improved. Similarly, if few people are moving directly from the street to an apartment, then the Outreach and Rapid ReHousing components of the system must be enhanced.

It is important to note that these System Performance Measures depend on having an effective homeless assistance system, as described in this report...

It is important to note that these System Performance Measures depend on having an effective homeless assistance system, as described in this report, with a solid foundation in: (1) strong leadership at the CoC level; (2) an emphasis on the “system” rather than individual agencies or programs; (3) a comprehensive and high-quality Homeless Management Information System (HMIS); and (4) a commitment to making decisions based on data and outcome measures.

Additional metrics related to community costs may also be tracked by the local community. Below is a non-exhaustive list of such measures, which will decrease over time once the system is implemented.

1. EMS (Emergency Medical Services) calls related to homelessness;

2. costs related to homeless individuals accessing CSU or ER (Crisis Stabilization Unit or Emergency Room) resources;
3. arrests or warrants for minor offenses correlated with homelessness (e.g., life-sustaining activities outdoors, loitering); and
4. Marchman Act and Baker Act admissions of people who are homeless.

Goals for Pasco

With the implementation of the recommendations in this report, from its experience working in similar communities in Florida, the Coalition reasonably expects Pasco to realize the following successes within the next three years.

Big Picture: Between 2019 and 2021

1. Sheltered and unsheltered homelessness will drop 40% between the 2019 Point in Time Count and the 2021 Point in Time Count.
2. Unsheltered homelessness will drop 50% between the 2019 Point in Time Count and the 2021 Point in Time Count.

Smaller Picture: By 2021

3. 30% of households seeking homeless services will be diverted from the homeless assistance system and will self-correct, independent of direct assistance, case management, or housing assistance from the system.
4. Median length of time homeless will decrease to 45 days.
5. 95% of Rapid ReHousing placements will be drawn from the Coordinated Entry System By-Name-List and 100% of Permanent Supportive Housing placements will be drawn from the Coordinated Entry System By-Name-List.
6. 90% of nonprofits with the primary mission of serving homeless households will participate in HMIS and the Coordinated Entry System.
7. Exits to permanent housing will be 80% for Rapid ReHousing (RRH) and Permanent Supportive Housing (PSH) programs overall.
8. Exits to permanent housing will be 70% for shelter and 50% for street/camp outreach.
9. Returns to homelessness after housing will be 15% for RRH and PSH programs overall.



Continuum of Care

A. Need to improve CoC structure

The ultimate goal of any homeless Continuum of Care (CoC) is to end – not manage – homelessness. By “ending” homelessness, we mean creating a system that ensures that homelessness is (1) rare, (2) brief, and (3) nonrecurring.

An effective CoC structure brings together community leaders to implement solutions to homelessness from a high-level systems perspective.

With the passage of the federal HEARTH Act in 2009, local communities have been asked to reorganize their homeless assistance systems and governance structure. The intent of the CoC structure is to bring together decision-makers and community leaders to address homelessness from a systems perspective. Then, using good data and reliable outcome measures, the CoC leadership group plans for and implements a homeless assistance system that ensures that fewer households become homeless, and that when homelessness does occur, persons are quickly returned to housing in which they can stabilize.

Pasco, like many communities, has struggled with implementation of best practices around Continuum of Care structure. With this report, we provide a path to restructuring the CoC.

The Coalition for the Homeless of Pasco County (CHPC) is the CoC lead agency for Pasco. Currently, the board of CHPC does double-duty – acting as both the nonprofit’s board of directors as well as the CoC Board. Because the role of a nonprofit board and the role of a CoC Board are very distinct, this is not the most effective solution. Further, there exists a Pasco County Homeless Advisory Council, which adds some confusion around roles and responsibilities. We recommend changes to the current CoC structure to clarify roles and responsibilities, and to ensure that CoC governance is effective and efficient.

In brief, we recommend that a revised CoC Charter be adopted by the CoC. In that Charter, there should be created a singular CoC Homeless Leadership Council to serve as CoC Board. There should be a separate

WHAT IS A COC? A LEAD AGENCY?

A Continuum of Care (CoC) membership comprises stakeholders representing many sectors of the community, all wishing to end homelessness.

The Continuum of Care Board acts on behalf of the CoC and the community – to plan and implement effective homeless assistance systems.

The CoC Lead Agency is the entity responsible for carrying out the policies enacted by the CoC Board, operating the HMIS, ensuring compliance with best practices, and coordinating the system components.

Board of Directors for the nonprofit agency CHPC. Members of the current CHPC Board or the current Homeless Advisory Council may wish to join the new Homeless Leadership Council to continue their roles as policymakers in the homelessness arena.

The role of the CHPC Board of Directors is to provide support to CHPC specifically and ensure the continued viability and strength of CHPC. In comparison, the role of the Leadership Council is to provide vision, planning, and means of implementing an effective CoC and homeless assistance system. The relationship between the CoC Leadership Council and CHPC should be memorialized through a Memorandum of Understanding (MOU).

To assist the CoC and CHPC in this restructuring, we provide three appendices intended to help implement our recommendations: a sample CoC Charter, a sample CoC MOU, a sample CoC Responsibilities grid. Each can be revised based on local needs and priorities but should serve as a solid basis for moving forward with a stronger CoC structure.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need to improve CoC structure	A.1 Approve a revised CoC Charter establishing a CoC Leadership Council	CHPC, CoC	Revised Charter Leadership Council created MOU executed
	A.2 Separate CHPC Board of Directors from CoC Board (i.e., Leadership Council)	CHPC	Revised CHPC Bylaws

WHAT IS A COC? A LEAD AGENCY?

A Continuum of Care (CoC) membership comprises stakeholders representing many sectors of the community, all wishing to end homelessness.

The Continuum of Care Board acts on behalf of the CoC and the community – to plan and implement effective homeless assistance systems.

The CoC Lead Agency is the entity responsible for carrying out the policies enacted by the CoC Board, operating the HMIS, ensuring compliance with best practices, and coordinating the system components.

B. Need to build capacity of CoC Lead Agency

CHPC currently wears two hats in the homeless response system.

First, CHPC is the designated CoC Lead Agency. As the Lead Agency, CHPC is responsible for implementing a County-wide effective homeless crisis response system, applying for and managing federal and state funding on behalf of the CoC, monitoring provider agencies, operating the Homeless Management Information System (HMIS), and coordinating local government and service provider agency responses.

Second, CHPC is a direct services provider. CHPC works directly with households experiencing homelessness. CHPC staff help people move out of encampments and into motels, help others find and move into permanent housing, and help many access non-housing services and case management that are needed.

We recommend that CHPC continue to serve as the CoC Lead Agency but discontinue its role as a direct service provider.

We recommend that CHPC continue to serve as the CoC Lead Agency but discontinue its role as a direct services provider. Attempting to do both jobs is simply too much for such a small agency and pulls the staff in too many directions, ultimately resulting in diminished performance overall. Due to the nature of client crises, it is not surprising the CHPC staff are often pulled away from important CoC Lead responsibilities to address urgent housing issues for individual households. If CHPC discontinued providing direct services, staff would be able to devote its human resources, administrative capacity, and leadership to benefit the CoC and the community as a whole.

Further, we recommend that CHPC increase its staffing specific to CoC Lead Agency positions. CoC Lead Agencies for comparable CoCs typically include a CEO, Finance Director, Operations Director, HMIS Administrator, HMIS Analyst(s), Coordinated Entry System (CES) Manager, and Administrative Assistant. Some CoC Lead Agencies also employ one or more Housing Navigators and/or Community Relations Director.

It is incumbent upon local government and other funders to provide resources to build the capacity of the CoC Lead Agency, which serves as the hub of the homeless response system. If the CoC Lead Agency is not resourced well enough to do its job, federal and state funding to the area will decline and homelessness will climb. While funding for a CoC Lead Agency is a difficult “sell” in some communities, we believe

Pasco will recognize the critical importance of shoring up CHPC so that significant improvements can be realized throughout the area.

We should note that the CHPC, in recent months, has made progress on building its own staffing and expertise independent of financial support. For instance, CHPC has renewed membership and participation with the Florida Coalition for the Homeless, a body of peer organizations and professionals working to end homelessness in the state. This action will certainly expose CHPC staff and Board members to best practices, cutting edge research, and peer networks in the state. These relationships are indicative of a renewed sense of commitment to principles, relationship-building, and best practices from CHPC leadership.

We should also note the impressive shift in perception of the CHPC’s efficacy since new leadership has come on board, as evidenced by the stakeholder survey detailed in Appendix I. Service providers indicated a generally negative or neutral perception of leadership at CHPC approximately 6 months before research started on this project, and a generally positive perception of leadership at CHPC at the start of research. These are impressive initial results, and is a testament to how quickly coordination and optimism can shift within the CoC.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need to build capacity of CoC Lead Agency	B.1 CHPC discontinue direct services operations and replace with subcontracts with other agencies	CHPC	Contracts with service providers
	B.2 Provide additional funding to CHPC to build its capacity as the CoC Lead Agency in pursuit of improved system coordination, intake, triage, and reporting and monitoring.	County, United Way, Other funders	Increased local government and private sector grants to CHPC



Outreach and Coordinated Entry

C. Insufficient coordinated entry procedures, training, and support

An effective Coordinated Entry System (CES) system is essential to preventing and reducing homelessness. A constant challenge faced by service providers is matching clients with appropriate housing interventions and services to meet their need. An effective CES serves as the connective tissue between available resources and the people who need them. Improving the CES, along with implementing recommendations for Rapid ReHousing and Permanent Supportive Housing discussed later in detail, will result in a more efficient and effective system.

Research for this report revealed multiple concerns with Pasco's CES. First, many service providers do not regularly report data to the HMIS. Second, many providers do not conduct formal VI-SPDAT needs assessments. Third, the providers that do conduct VI-SPDAT assessments have not received formal training, indicating assessments may not be conducted with consistency across agencies. Fourth, housing placements are not coordinated through the CES and a CES-generated "By-Name-List" based on priorities and needs. A By-Name-List is a list of households awaiting housing in order of priority based on level of need and length of time homeless.

Taken together, these issues indicate the CES is, at best, fragmented and lacking coordination. The result is inconsistent connection of clients to available services depending on the agency involved. Depending on the door individuals walk through, they can reasonably expect to be connected with different resources, met with varying levels of expertise and professionalism, or hear a different answer as to the resources available to them.

The result of this fragmented system is late night calls to help find shelter – any shelter – for a person found on the street in critical condition.

WHAT IS A COORDINATED ENTRY SYSTEM?

A Coordinated Entry System (CES) is a critical process through which people experiencing or at risk of homelessness access the system in a streamlined way, have their needs assessed, and are quickly connected to the resources they need to be stably housed and live a productive and healthy life. Some think of the CES as a triage process, where needs are assessed and available resources are offered on an individual basis. The CES refers to three functions: 1) a common assessment of needs, 2) a database of individuals as they enter and engage with the system, and 3) utilizing that information to prioritize and place households into housing.

We want to make clear that implementing a highly coordinated CES is a difficult task. It requires dedicated staff persons specific to managing training, coordination, and regular communications with the CoC member agencies. As the CoC Lead Agency, CHPC is ideally suited to serve in this capacity. CHPC should seek funding for additional staff to help manage the CES, should provide additional training on best practices in CES for provider agencies, and develop a procedures manual demonstrating the intake and coordination process. When pieced together, these actions will facilitate greater communication across agencies, will drive more consistent evaluation of need, improve the prioritization of clients with the highest need, and ultimately present a greater return on investment of both funding and staffing resources.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need to improve Coordinated Entry System	C.1 Conduct regular CoC-wide CES training	CHPC	Count of agencies trained on CES
	C.2 Increase number of staff responsible for managing the CES, to include: training, documenting procedures, and monitoring agency performance	CHPC	Funding secured for additional staffing
	C.3 Produce a CES Procedures Manual and distribute to all provider agencies in the CoC	CHPC	Published procedures manual
	C.4 Hold By-Name-List meetings twice monthly to prioritize households for housing interventions and require provider agencies to house according to established priorities	CHPC	Number of By-Name-List meetings Number of housing placements from By-Name-List

WHY IS THE HMIS IMPORTANT?

Because federal and state funding depend on data from HMIS, and because federal funding depends on the number of providers that utilize HMIS, it is crucial to have a fully supported and highly functional HMIS. HMIS can assist in connecting persons in need with resources available to support them. Having an effective HMIS requires regular and consistent training from the HMIS manager.

Complete and accurate HMIS also provides a much clearer picture of ongoing homelessness in the County, rather than relying on imperfect PIT numbers as the only measure

D. Undertrained agencies and staff persons on HMIS

The Homeless Management Information System (HMIS) is a database of client-level information on individuals, their needs and the services rendered to them. The database manages the flow of client intake and provision of services. If regularly updated, the database also helps to answer questions like: “Which clients have the highest needs?” or “Which clients still need housing?” A well-managed HMIS should have the answers to these fundamental questions at the ready, facilitating improved coordination across the entire system.

Due to frequent changes in staffing at CHPC, including at the executive director level, Pasco’s HMIS is a work in progress at the time this report was written. Stakeholders report the HMIS vendor was recently changed and CHPC was in the process of hiring a new staff person to manage the HMIS. Additionally, CHPC recognizes that data in the system is unreliable and not comprehensive. Many provider agencies in Pasco, including those offering housing and support services to persons experiencing homelessness, do not report data to the HMIS simply due to the burden and past history of frustrations with the system and support they received.

We should also note that crucial funding sources, including HUD, base funding allocations on data in the HMIS. A system with poor reporting and data gaps in the HMIS presents a clear barrier to obtaining resources and allocation from federal sources. The HMIS should be used as a tool to demonstrate to HUD and other funders that the system works, is efficient, and makes a positive impact on clients.

Developing and managing a highly effective HMIS requires staffing and dedicated training.

Developing and managing a highly effective HMIS requires staffing and dedicated training. There must be staff responsible for following up with delinquent agencies, especially if those agencies receive HUD-sourced funds. Staff must also regularly present training and guidance to CoC member agencies on how to enter data into the system to ensure consistent and quality data.

We recommend CHPC seek new staff persons to manage the HMIS, and ensure that individual ultimately improves data quality in the HMIS.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need for better trained agencies and staff on HMIS	D.1 Hire a new staff person to help manage HMIS, provide training	CHPC	Count of persons on staff responsible for HMIS
			Count of agencies regularly updating HMIS
	D.2 Improve data quality in HMIS	CHPC	Monthly “Data Quality Reports” for each agency and the system as a whole
	D.3 Require all agencies that provide homeless services or housing to participate in HMIS and CES	Funders (e.g., County, United Way)	Count of contracts and grants that require HMIS and CES
	D.4 Ensure submission of valid and accurate System Performance Measures, Housing Inventory Chart, Point in Time Count, and AHAR to HUD	CHPC	Submission of valid reports to HUD

ISN'T OUTREACH HAPPENING ALL THE TIME?

Housing focused outreach is designed to connect people to the housing and supports they need. There is a crucial difference between housing focused outreach and outreach for other services. Persons offering charity-style services, for instance, may tell someone about CHPC or refer them to a low-cost medical clinic down the road. This outreach is not the same as conducting a professional evaluation with progressive engagement and connecting those individuals to agencies with the resources and capacity to help house and support them.

E. Housing-focused outreach is essentially nonexistent

Outreach is an essential component to identifying persons experiencing homelessness and connecting them with appropriate resources. In Pasco, outreach is currently underfunded and understaffed. While there is some outreach currently supported through grant programs (e.g., Projects for Assistance in Transition from Homelessness, or PATH and through the Supportive Services For Veteran Families (SSVF) program), there is a need for increased capacity in outreach.

These outreach workers will personally engage with individuals who are homeless, gaining their trust and respect. They will then complete the intake process for those who are homeless, entering them into the CES, and ensuring consistent and accurate assessments of needs using the CoC's common assessment tool, the VI-SPDAT. The outreach works must have a comprehensive understanding of resources and services available in the community so persons met on the street can be connected quickly to those resources.

Effective outreach must be provided by professional trained in housing-focused outreach and operating from a strengths-based approach with progressive engagement.

Effective outreach must be provided by professionals who are trained in housing-focused outreach and operate from a strengths-based approach with progressive engagement. Those professionals must be able to conduct the assessment (i.e., the VI-SPDAT) to identify barriers to housing and enter the individuals into the CES and HMIS, so they might be prioritized for appropriate housing solutions. The outreach workers must also help connect individuals with shelter and other services as requested and needed. Through proactive and appropriate street outreach, individuals who are homeless will be better able to connect with options for success and stability.

Pasco can make reasonable assumptions as to the effects of increased funding and support for improved outreach. With effective outreach, there will be less need for law enforcement officers (LEOs) to focus on those who are homeless and play the role of social worker. Rather, LEOs will be able to quickly connect with a housing-focused outreach worker, provide a warm handoff of the situation, and return to other duties.

Pasco can expect that more effective outreach will build a sense of confidence in the County’s understanding of the scale of the homeless challenge in the County. Outreach workers will be better able to record data in HMIS. This data component of outreach efforts supports grant applications and funding allocations dependent on a solid understanding of the homeless challenge.

A final point of discussion related to outreach is effective execution of the annual Point In Time (PIT) count. According to our research, there are serious concerns related to the validity of figures collected and reported to HUD during the PIT count in previous years. This is unacceptable. It undermines the validity of outcome measures and monitoring, it weakens Pasco’s competitiveness in drawing funds from HUD and the state, and it prevents effective program design related to need identified in the PIT.

With that said, we understand current leadership at CHPC is devoting significant time and attention to the January 2019 PIT Count, including recruitment of volunteers, coordination across agencies, assignment of teams to predetermined geographies in the County, deliberate focus on East Pasco, and sufficient training on data definitions and methodology. These efforts are admirable. In addition to actually conducting an effective PIT Count, we also recommend CHPC perform an “after action review” of the Count to identify any lessons learned and adjustments for the following year.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need for coordinated housing-focused outreach	E.1 Ensure all outreach workers, across all outreach programs, are regularly trained on HMIS	CHPC	Count of HMIS and CES data entries by outreach workers
	E.2 Seek programmatic funding for additional outreach workers, staffed by CHPC or other provider agencies	CHPC	Count of housing-focused outreach workers
	E.3 Coordinate all outreach efforts through CHPC	CHPC	Monthly outreach coordination meetings
	E.4 Execute effective PIT Count in 2019 and conduct after action review	CHPC	Validity of count; catalogue of lessons learned and applied to 2020 count



Prevention & Diversion

F. Lack of a formal diversion process

Research in other communities shows that as many as 30% of persons seeking entry to the homeless assistance system can be diverted from homelessness with an effective diversion script and coordination with resources. In Pasco, there is no established formal diversion process and provider agencies are not systematically pursuing diversion opportunities.

Similar to other strategies for addressing homelessness, an effective diversion program must include all provider agencies in the system. Every agency in the system should follow a prescribed set of questions and pursue every opportunity for connecting individuals with mainstream services and supports. This approach, when practiced system-wide, will result in a reduction in caseloads, and reserve resources for high priority clients.

Establishing a formal diversion process is relatively inexpensive and highly cost-effective

Fortunately, establishing a formal diversion process is relatively inexpensive and highly cost-effective. Establishing the process can be as simple as developing a checklist of questions to ask all persons during initial screening and evaluation interviews. The checklist should answer exploratory questions to better gauge housing options available to the individual other than formal shelter or housing services. The diversion process should systematically answer questions like:

- Where did the individual sleep the night before?
- Does the individual have housing options (friends, family) available to him or her over the next few weeks?
- If they have available housing options, what resources do they need to connect them with the alternative options?

Answering these basic questions for all individuals at the front door of the coordinated entry system strengthens the chances of success, reduces caseloads for providers, and reserves limited resources for the highest need individuals. All provider agencies should have access to the

DIVERSION: WHAT'S THE POINT?

A formal diversion process is a system, adopted by all agencies, for ensuring all options are explored before entering the individual into the system of care. The most effective homeless service systems devote resources only to those persons without alternative housing or support options. Research shows a significant share of persons at the “front door” of the system can be diverted from the system of care by implementing a process to divert persons from the homeless system to alternative supports and resources.

checklist, and new staff should be introduced to the diversion process during on-boarding. In addition, the diversion process should be integrated into the CES and diversion outcomes tracked to determine effectiveness.

As the system’s CoC Lead Agency, CHPC is best positioned to develop the formal diversion process and to ensure there are sufficient training opportunities available to CoC agencies. The means by which CHPC offers training on the diversion process is certainly at CHPC’s discretion. Solutions adopted by other CoC’s in Florida include offering the training during regular CoC monthly meetings, offering regular webinar trainings, and making materials available on the Lead Agency’s website.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need formal diversion process	F.1 Develop formal diversion processes and training for all provider agencies	CHPC	<p>Reduced count of persons entered into CES by trained agencies</p> <p>Increased count of persons identified as “diverted” from the system</p>
	F.2 Expand opportunities to access diversion training	CHPC	Count of agencies executing formal diversion process

CHARITY: WHAT'S THE PROBLEM?

When it comes to homelessness, there is nothing inherently bad about charity. The danger Pasco faces is that charity-style interventions are seen as a solution to homelessness and thus excessive resources are devoted to these efforts. Both financial and staffing resources that might otherwise be dedicated to case management, coordination, and housing are instead dedicated to providing food, clothing, and showers. An effective homeless service delivery system focuses its resources on effective interventions for ending homelessness, not managing it.

G. Excessive emphasis on charity-style interventions

In Pasco, too many resources are dedicated to charity-style interventions. Pasco has a deep bench of agencies, individual agents, and informal support systems geared to offering short-term, charity-style actions.

The challenge presented by this focus on charity-style intervention is two-fold.

The challenge presented by this focus on is two-fold. First, the intervention can generate conflict between residents, businesses, and the agencies offering the intervention. It is evident from our research that residents and businesses in some cases see the charity action as disruptive and sometimes dangerous. The Sheriff's office reports that a majority of homeless-related complaints are submitted by business owners. This environment drives a sense of frustration and anger for all parties involved. Efforts to generate support and energy for addressing homelessness in Pasco are stymied by this basic conflict generated by charity-style interventions.

Second, these charity-style interventions are seen, often by the providers offering the service and in some cases by systemic authorities, as an effective means for ending homelessness. The result is a system that places an excessive emphasis on funding and supporting interventions designed to mitigate the effects of unaddressed homelessness rather than focusing on tested and effective solutions for ending it.

We should be clear about what we mean by a charity-style intervention. Classic examples of charity-style interventions are services aimed at managing the immediate needs associated with unaddressed homelessness, including: food distribution, clothing, camping gear, and hygiene.

We do not recommend eliminating availability of these services. These services are undoubtedly meeting a need for the reality of unaddressed homelessness in the County - no one should face life without knowing where to get their next meal, nor should they have to concern themselves with how long their shoes will last in the heat and rain. What we do recommend is that the system ensure all agencies and individuals offering these services be plugged into the broader system of care. For instance, staff persons delivering charity-style interventions should be trained so that they know how to effectively engage with persons experiencing homelessness, are familiar with the broader

network of services available, and are able to connect the individual with more intensive case management and housing interventions as necessary. In other words, the intervention should not end with the delivery of clothing and food, it should end with connecting the recipient to the right service providers to address individual need as assessed by the intervention worker.

What’s the best way to make sure charity-style interventions are seen for what they are? Typically, this is accomplished through education and outreach on best practices in ending homelessness and formal communication from authorities expressing support for housing and best practices. By authorities we mean local government representatives (including elected officials), the faith community, philanthropists, and individuals and agencies with responsibility for making funding decisions. This outreach has been executed through broad communications and messaging platforms, where authority figures champion a housing first approach to ending homelessness, and point to charity-style interventions as only managing a problem, not ending it.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need to reduce emphasis on charity-style interventions	G.1 Provide formal housing-focused outreach training to all individuals involved in charity-style interventions	CHPC	Count of referrals to provider agencies by charity agents
	G.2 Reduce funding allocation to agencies exclusively offering charity-style interventions	CHPC	Count of agencies executing formal diversion process
	G.3 Host a public event to discuss and endorse best practices in ending homelessness	County	Count of attendees; count of participating elected officials
	G.4 Conduct outreach and education efforts within the faith-based and philanthropic community	CHPC	Count of faith-based organizations conducting charity-style interventions



Emergency Shelter

H. Emergency shelter crisis

Despite the County's, and CHPC's, efforts to address emergency shelter needs through its Housing Services Center and Family Rehousing Program at the Youth Lane site, Pasco County faces an emergency shelter crisis. Specifically, Pasco needs increased capacity for low-barrier shelter beds for singles that are open 24 hours a day seven days a week. Our research revealed a consistent pattern from service providers, law enforcement, and government staff: there is near universal consensus that Pasco needs a low-barrier emergency shelter for singles, but no organization or individual interviewed during the course of our research could identify a location for an emergency shelter of this type. Stakeholders across the system must work in concert to identify a location for an emergency shelter and a service provider with long-term successful experience in managing a high capacity housing first focused shelter should be engaged as soon as possible. While there are initial conversations happening regarding a location for the emergency shelter, these discussions must produce meaningful results in a short time.

Over the course of our research we heard a near constant pattern of concern related to the lack of shelter capacity: jails effectively releasing individuals to homeless camps near parole offices, law enforcement watching the same people cycle in and out of jail, substance abuse and mental health providers visiting semi-permanent camps in woods, single men with substance use disorders living under bridges. In a functional system, these scenarios are significantly reduced with the presence of sufficient emergency shelter bed capacity.

The worst a system can do is force persons facing homelessness to live on the street or in the woods.

Some may wonder why we refer to the emergency shelter environment in Pasco as a "crisis." We use such strong language because an effective system must have a low-barrier emergency shelter for all people experiencing or at risk of homelessness. The worst a system can do is

WHAT IS AN EMERGENCY SHELTER?

The best emergency shelters focus on a singular mission: placing clients in permanent housing as quickly as possible. An effective emergency shelter accomplishes this goal by evaluating need and offering housing-focused services for rapid placement in permanent housing. An emergency shelter should be a temporary residence. Positive outcomes are best realized outside of a shelter environment, where individuals can receive follow-up case management in their own home.

force persons facing homelessness to live on the street or in the woods because there are not shelter beds available – these environments do not help the individual stabilize and quickly move into housing.

We should make it clear that an emergency shelter must not be a de facto housing solution. An appropriate benchmark average length of stay in shelter is fewer than 30 days; the range of length of stay should be between one night and 90 nights, with the majority of individuals staying 7 days or less. In an effective system, no shelter should have long average stays because the system focuses on quickly connecting individuals with housing options and then helps them move out as rapidly as possible into a rental unit or other permanent housing option. Further, when examining data on length of stay for persons in the shelter system, ideally, we would see a significant drop-off in the number of days persons stay in the shelter system.

It should be noted, of course, that the shelter provider is not solely responsible for the short lengths of stay – there must be adequate “exit doors” (e.g., Rapid ReHousing, Permanent Supportive Housing) to ensure that stays in shelter are brief. Further, it is critical that the planned shelter operate based on housing first principles – with all services directed toward rapid placement into permanent housing and with very low or no barriers to entry and stay (e.g., no requirements for sobriety, medication compliance, work). Currently there are no shelter or transitional housing programs in Pasco that satisfy this requirement.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need for low-barrier housing-focused emergency shelter	H.1 Host a workshop composed of the business community, philanthropy, and CoC agencies, to identify possible sites for a housing-focused low-barrier emergency shelter	County; CHPC	Properties identified for possible development of emergency shelter
			Developer partners identified
	H.2 Develop a housing-focused low-barrier emergency shelter for single adults	County; HCPC	Contract or MOU signed with nonprofit and construction firm
	H.3 Identify a proven service provider to manage shelter based on proven past performance in short term shelter stays and permanent housing placements	County; HCPC	Contract or MOU signed with emergency service provider



Rapid ReHousing

I. Insufficient capacity in Rapid ReHousing and excessive emphasis on transitional housing programs

Transitional housing and recovery programs are those that focus on services first and result in longer-term stays (relative to emergency shelter) in a supervised impermanent housing environment. It should be emphasized that transitional housing is not “housing,” but rather a type of long-term services-focused shelter. These types of programs are expensive to operate, result in comparatively longer episodes of homelessness, and are not consistent with best practices established nationally and recognized by leading homelessness policy organizations and the federal government. Most importantly, the “services first” approach does not serve the person as well as the “housing first” (and services second) approach.

Decades of research support the fact that people are much more likely to address their employment and health issues if they are housed first, and then provided appropriate supports after they move into their rental units. The outdated “services first” approach is not only less effective for the individuals who have become homeless, but it is also more expensive for the community, resulting in ever longer lengths of stay in programs.

Research supports the fact that people are much more likely to address employment and health issues if they are housed first, and then provided support.

The overemphasis of transitional housing and recovery programs in Pasco contributes to the lack of resources for more effective solutions, including low-barrier emergency shelter and Rapid ReHousing.

Research for this report revealed concerns in existing RRH programs. Specifically, some RRH programs operating in the CoC limit services to certain subpopulations and/or require unnecessary preconditions for assistance in the program (e.g., sobriety, background checks, or income requirements). These eligibility requirements – subpopulation type and preconditions – reduce efficiencies in the system, decrease coordination

TRANSITIONAL HOUSING VS. RAPID REHOUSING

Transitional housing programs are typically focused on “preparing” an individual for permanent housing or getting them ready to move into housing.

Rapid ReHousing programs are focused on quickly placing an individual in an apartment, and immediately providing wraparound case management services to ensure the individual is able to sustain the housing placement and improve their quality of life. Research shows that Rapid ReHousing is far more effective at ending homelessness, is more cost effective, and can be replicated. For these reasons, the federal government has largely eliminated funding for Transitional Housing programs.

across agencies, and limit the ability of CHPC to place persons in housing based on priorities and need. Further, research identified RRH-specific funding is currently allocated to agencies offering transitional housing type programs. Those programs tend to use RRH funding to place clients into housing based on the programs’ own determinations, rather than based on the CES-generated By-Name-List that prioritizes households for housing.

Given the restricted funding environment in Pasco County, particularly for the most effective solutions to ending homelessness, it is recommended that CHPC set expectations for funded programs for RRH services and monitor programs to ensure they meet best practices in RRH. Further, it is recommended that more resources be directed toward RRH, relative to transitional housing, to at least double the number of households that are housed through RRH while increasing the number of months rent assistance and services are provided.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need to build capacity in Rapid ReHousing	I.1 Develop and staff a monitoring program to ensure RRH programs follow best practices	CHPC	Average length of stay; barriers to entry
	I.2 Develop operating guidelines for agencies funded with RRH-specific moneys based on best practices	County and CoC Board	Issuance of policy memorandum Contractual requirements regarding CES and housing outcome deliverables
	I.3 Identify and contract with proven RRH providers that operate low-barrier, housing first RRH programs with solid housing outcomes	CHPC and County	Number of proven RRH providers that use best practices
	I.4 Reduce reliance on, and funding for, transitional housing programs; redirecting those resources to both emergency shelter and RRH	CHPC and County	Number of transitional housing beds versus number of shelter and RRH beds



Permanent Supportive Housing

J. Lack of Permanent Supportive Housing

Persons experiencing homelessness all have individualized needs. Some may need a light intervention, others require more intensive case management and ongoing housing assistance. An archetypal permanent supportive housing (PSH) candidate is an individual with no family connections, a diagnosable long term behavioral health disorder and/or chronic physical health condition. The layering of disabilities and no ability to receive help from family networks leaves this person with no option but homelessness. It is this category of need best addressed through PSH.

Pasco County has a concerning dearth of PSH slots available to the highest need individuals. Without an expansion in capacity for PSH, the County can expect to see continued chronic homelessness and the highest need individuals living on the streets or in the woods.

We should be clear that PSH represents the model with the highest cost per client. This is due to the reality of ongoing rental assistance plus intensive case management that is so crucial to positive outcomes in the program. Even with this cost, research demonstrates that the program typically pays for itself by taking chronically homeless individuals off the street, out of jails, out of detox facilities, and out of emergency rooms, and straight into an apartment with the support they need to maintain stable housing.

There is funding available through the Florida Housing Finance Corporation for project-based PSH.

Increasing the stock of affordable housing for this specific population is necessary. There is funding available through the Florida Housing Finance Corporation to create project-based PSH developments. Obtaining a site and applying for this funding can be challenging; therefore, working with an experienced PSH developer and an experienced housing first nonprofit organization are critical to the success of any PSH development.

WHO NEEDS PSH?

PSH slots should be reserved only for the highest need individuals, typically persons with multiple serious and persistent co-occurring disorders like a physical disability and/or a substance use or mental health disorder. Because these individuals are the highest need candidates, and are typically unlikely to live independently without significant support, they require the intensive case management and rental subsidies offered in a PSH program.

In addition, funding is available through HUD for scattered-site PSH using existing rental housing stock. Currently there is such funding in Pasco. Those projects should be reassessed to determine whether they are: (1) serving those who are chronically homeless with the highest needs, and (2) operating with low barriers to entry and low service requirements. If those projects do not meet these requirements, and/or if they have low housing stability outcomes, the HUD funding should be reallocated to create PSH slots for those with the most severe disabilities and the longest time homeless.

We often receive questions about the distinction between RRH and PSH. The distinctions between RRH and PSH are a matter of time, intensity, and target population. RRH provides rent assistance for three to twelve months, along with home-based support services of moderate intensity, and is appropriate for households that have moderate barriers to housing stability. PSH provides rent assistance and intensive support services for much longer and is appropriate for households that have very high barriers to housing stability (i.e., PSH is typically reserved for chronically homeless individuals with disabilities). Studies show that in a typical CoC, only about 10% of those who are homeless need PSH-level assistance, whereas about 60% need RRH-type assistance, with the remaining 30% able to move out of homelessness using their own natural support systems (often addressed through a formal diversion process, see Section F, or through self-resolution).

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need to build capacity in Permanent Supportive Housing	J.1 Establish a working group to actively monitor and pursue PSH funding opportunities at FHFC	CHPC	Working group convened, including potential developer partner, experienced nonprofit service provider agency
	J.2 Submit a response to a FHFC PSH RFA	Other	Proposal to FHFC
	J.3 Evaluate performance metrics and program policies and procedures for existing PSH providers; reallocate if appropriate	CHPC	Results of evaluation; Reallocated funds, if appropriate

K. Fragmented County efforts

By near-universal consensus, County officials currently in place are seen as effective agents in the system. They are working overtime to coordinate with relevant actors in the system and to be proactive in addressing barriers and challenges. This positive assessment from the community extends not just to current County agency leadership, but also to County Commissioners who appear attentive, engaged, and knowledgeable of current challenges in the system and the need for increased support for services.

With that said, research for this report revealed some concerns related to County initiatives that present challenges for coordination and efficient use of funding within the broader homeless crisis response system. First is a large allocation of County funds to the United Way, some of which supports homeless service providers. While this is certainly a worthwhile investment in Pasco, it does present challenges around effective coordination with the CoC at large, and the funding may support programs operating outside of accepted best practices in addressing homelessness, including charity-style interventions. One of

From our experience, one of the most effective means of encouraging programs to adopt best practices is to leverage the influence of funders.

the most effective means of encouraging existing programs to adopt housing first and best practice principles is to leverage the influence of funder priorities. If a significant resource in Pasco County does not require best practice principles, this leverage is lost.

The second concern is related to County efforts to create new service provider entities. It appears the motivation is a positive one: building a deep roster of high capacity service providers. While we believe these efforts are grounded only in good will, they do run the risk of drawing funding and energy away from existing organizations in the system. At a minimum, these new entities must be fully integrated into the CES, and

DO WE NEED MORE
SERVICE
PROVIDERS?

Pasco County is currently supported by numerous service providers. These same providers have experience offering services, are familiar with the broader system and its partners, and are capable of expanding their services with additional support and funding. The providers should also be given the opportunity to embrace and implement best practices, with training and consistent monitoring.

the County should ensure the organizations operate according to housing first principles and best practices.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need to reduce fragmentation among funders and providers	K.1 Facilitate dialogue between County and CHPC on new entities	CHPC; County	Understanding between CHPC and County relative to any new entities created by County to address homelessness
	K.2 The County should ensure funds ultimately disbursed with the purpose of addressing homelessness are monitored to ensure housing first best practices	County	Quarterly program monitoring to ensure best practices
	K.3 Extensive training in best practices, along with regular monitoring and contractual requirements, for all services/housing providers should be instituted to ensure a maximum return on investment of all funding across the system	CHPC	Number of agencies participating in training Improved policies and procedures; improved housing outcome measures

ARE RIDESHARE PROGRAMS AN OPTION?

Rideshare programs are increasingly considered in the context of supporting mobility for persons experiencing homelessness. In the past, both Uber and Lyft have offered free rides to homeless veterans to and from job interviews, for instance. Further, there are numerous examples of local CoCs, local governments, and service providers working with rideshare companies to develop agreements for transporting persons experiencing homelessness. This option is particularly appealing for Pasco County, considering its size and lack of public transportation capacity.

L. Geography and transportation

Pasco County faces considerable transportation and mobility challenges, especially for people who are homeless and lack access to a vehicle. Research for this report revealed consistent concerns related to these geographic and mobility concerns. We discovered stories of service providers paying out of pocket for Uber rides from one end of the County to the other and homeless individuals walking for miles without shoes, of employers located on bus routes feeling overwhelmed by homeless persons asking them for a job.

We discovered stories of service providers paying out of pocket for Uber rides from one end of the County to the other ...

There are two reasons why public transportation is critical for the homeless population. First, public transportation is an essential service for enabling persons experiencing homelessness to access the services, employment, and resources they need to stabilize and live a fully productive life. It is difficult enough to maintain employment given the range of physical, psychological, and emotional barriers many persons experiencing homelessness deal with – it is made even more difficult when it takes hours to get from point A to point B.

Second, the challenge is made more difficult simply by virtue of the size of the County, and by the location of population centers split between the Western corridor (Route 19) and the Eastern corridor (Route 98/301). The distance between these main routes is approximately 30 miles and takes nearly an hour to drive across. This geography presents a true barrier for providers working on one end of the County, particularly for those on the East side, to access services and opportunities along the Western corridor.

In other communities, solutions for mobility are relatively straightforward: make free or reduced cost bus passes readily available and ensure transportation service is available on weekends and non-traditional work hours. In Pasco, some service providers do have access to free bus passes they can distribute to persons in need, but the scale of the problem far exceeds the supply. To address this issue, we recommend expanding the supply of free bus passes. We also recommend pursuing nontraditional means of expanding access to personal transportation, including rideshare agreements or an automobile donation drive. Regarding this last point, our research revealed some provider agencies already manage vehicle donations on

an ad-hoc basis, and are already providing these vehicles to successful clients. With that said, obviously due diligence and common sense should dictate the beneficiaries of auto donation drives. Automobile donations should be handled by a designated service provider agency, and only clients with need for personal transportation and the ability to safely operate a vehicle should be granted a vehicle.

Ultimately, Pasco will only address its mobility challenges through creative thinking.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need to address geography and transportation barriers	L.1 Establish a mobility task force, in coordination with the County’s Homeless Advisory Board and/or reconstituted CoC Board, to identify alternative options for expanding public transportation	CHPC; County Homeless Advisory Board or CoC Board	Publication of an Action Plan to expand access to public transportation/ rideshare opportunities for persons experiencing homelessness
	L.2 Increase availability of free bus passes for service providers	County	Count of bus passes distributed to service providers

WHAT CAN WE DO ABOUT HOUSING AFFORDABILITY?

There are many tools available to local governments and the private sector to promote access to, and development of, affordable housing. In general, we support shared equity models (community land trusts), adjustments to impact fees to incentivize affordable housing, establishing inclusionary zoning programs, encouraging accessory dwelling units, pursuing equity from the state, reducing barriers to development of affordable housing through regulatory changes, starting land bank programs, and establishing housing trust funds. These programs, even if adopted holistically, will not shift the housing environment overnight. These programs require commitment and dedication, but the best time to start is now.

M. General housing and employment barriers

We elect to include two broad concerns within a single topic area: housing affordability and access to employment. Both of these issues drive the underlying environment conducive to homelessness. Both require dedicated and long-term commitment beyond the scope of interventions specific to reducing homelessness.

During the course of the Coalition’s research, the topic of housing affordability in general was repeatedly raised as a significant barrier to addressing the homelessness issue in Pasco County. Stakeholders indicated that there is a severe shortage of affordable housing units to extremely low-income households (ELI), or those making at or below 30% of area median income (AMI). Homeless households typically fall within the ELI population.

There is a strong link between housing affordability generally, and occurrences of homelessness in a community with a serious shortage of affordable housing to ELI households. As rents inflate to levels unaffordable to lower-income households, their housing insecurity and housing cost burdens also rise. Thus, any systems approach to homelessness must acknowledge the broader housing environment.

... any systems approach to homelessness must acknowledge the broader housing and employment environment.

Households that spend more than 30% of gross annual household income on housing costs are considered housing cost burdened. It is assumed that households spending more than 30% of income on housing must make sacrifices in the household budget to pay for groceries, utilities, transportation, and other typical household expenses. This sacrifice can lead to crisis situations when there isn’t enough money in a checking account to pay for an emergency car repair or to cover a security deposit when moving into a new home. It is in a housing strained environment that communities witness inherent increases in the number of persons experiencing homelessness.

Related to housing affordability is the income component. Persons experiencing homelessness often require hands-on workforce training in order to gain the skills and job-readiness necessary for securing and maintaining employment with an income sufficient for

Expecting persons experiencing homelessness to secure gainful and meaningful employment without support is typically unreasonable. On the other hand, once someone is placed in permanent housing and supported with case management, opening doors to workforce training and apprenticeship program is an effective means of ensuring people get back on their feet and can live sustainably. The County government should play a high-profile role in the workforce development component, including expanding training opportunities, subsidizing programs for the homeless, and building partnerships between the public and private sector.

We should also note that the CHPC is capable of supporting access to affordable housing, in addition to supporting broader strategies outlined in the “What Can We Do About Housing Affordability” sidebar in this section. The CHPC can certainly serve as a central point of contact and coordinator of landlord participation in the housing authority’s HCV program, and service provider RRH programs. Additionally, the CHPC can serve as a central repository for an updated list of available housing units, their cost, and location across the County. These services are certainly within the scope of CHPC’s ability, and does not require broad strategies managed by County government and officials.

Action Plan

Issue	Recommended Actions	Responsible Party	Success Measures
Need to address housing and employment barriers	M.1 Establish and fund employment and workforce development program with a preference for persons referred through the CES	County	Number of persons employed through workforce program
	M.2 Host a county-wide housing forum to discuss options for promoting development of and access to affordable housing	County	Development of action plan for addressing housing affordability concerns
	M.3 Ensure new homeless services and housing providers locate their units near public transportation	County	Accessible homeless services/housing providers