



Homeless Service System Data for Dane County

FISCAL YEAR 2018: 10/1/17-9/30/18

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CONTINUUM OF CARE COORDINATOR

HOMELESS SERVICES CONSORTIUM OF DANE COUNTY

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Executive Summary

Recent progress made in our community, as well as others across the nation, has affirmed that ending homelessness is an achievable goal. An end to homelessness does not mean that no one will ever experience a housing crisis again. Changing economic realities, the unpredictability of life events, and unsafe or unwelcoming family environments may create situations where individuals, families or youth could experience, re-experience, or be at risk of homelessness. (*Opening Doors*, Federal Strategic Plan to Prevent and End Homelessness, 2015)

In 2015, Madison Mayor Paul Soglin accepted the *Mayors Challenge* to end veteran and chronic homelessness in our community. Since then, Madison/Dane County Continuum of Care (CoC) has partnered with Dane County, United Way, Veterans Administration, and the City of Madison in the national *Zero Initiative* and made significant progress toward reducing veteran and chronic homelessness. The implementation of the *Zero Initiative* was a response to HUD's 2015 amendment of its Strategic Plan to Prevent and End Homelessness. The amended national plan was centered around the belief that "no one should experience homelessness, no one should be without a safe, stable place to call home".

The goal of ending homelessness means that our community will have a systematic response in place that ensures homelessness is prevented whenever possible or is otherwise a rare, brief, and non-recurring experience. The CoC's Vision Statement, as adopted in the 2016 Community Plan to Prevent and End Homelessness in Dane County, states: All households in Dane County should have the opportunity to secure and maintain safe, stable and affordable housing. Our community will achieve that through the following four goals:

- I. Prevent Homelessness
- II. Support People Experiencing Homelessness
- III. End Homelessness
- IV. Collaborate with Local, State and National Partners

The Fiscal Year (FY) 2018 annual report on homeless services presents data that is entered into the Homeless Management Information System (HMIS). HMIS collects real-time data from agencies that operate nearly all of the homeless programs in Dane County. The CoC's annual report, and data contained within it, are submitted to the Department of Housing and Urban Development (HUD). The report has been revised to coincide with changes in HUD's reporting requirements and to align with its October 1 –September 30 fiscal year.

It is important to note that this report does not contain information about all homeless persons in the community. For example, it does not capture data about persons who are served solely by the small number of agencies or programs that don't utilize HMIS – such as Domestic Abuse Intervention Services (DAIS), St. Vincent de Paul (Port St. Vincent de Paul & St. Elizabeth Ann Seton House) and those receiving HUD Section 8 vouchers through Veterans Affairs Supportive Housing (HUD-VASH) – or by faith communities or grassroots organizations. Nor does the report include information about those who lack stable housing but might be living with friends or family, self-paying in hotels or existing without shelter and not interacting with service providers utilizing HMIS.

Prevent Homelessness

Homeless Prevention

Homeless prevention assistance includes rental assistance and housing relocation and stabilization services necessary to prevent an individual or family from seeking emergency shelter, or being forced to live on the streets, or a place not meant for human habitation. This assistance can take the form of direct financial aid or other services. Local providers include:

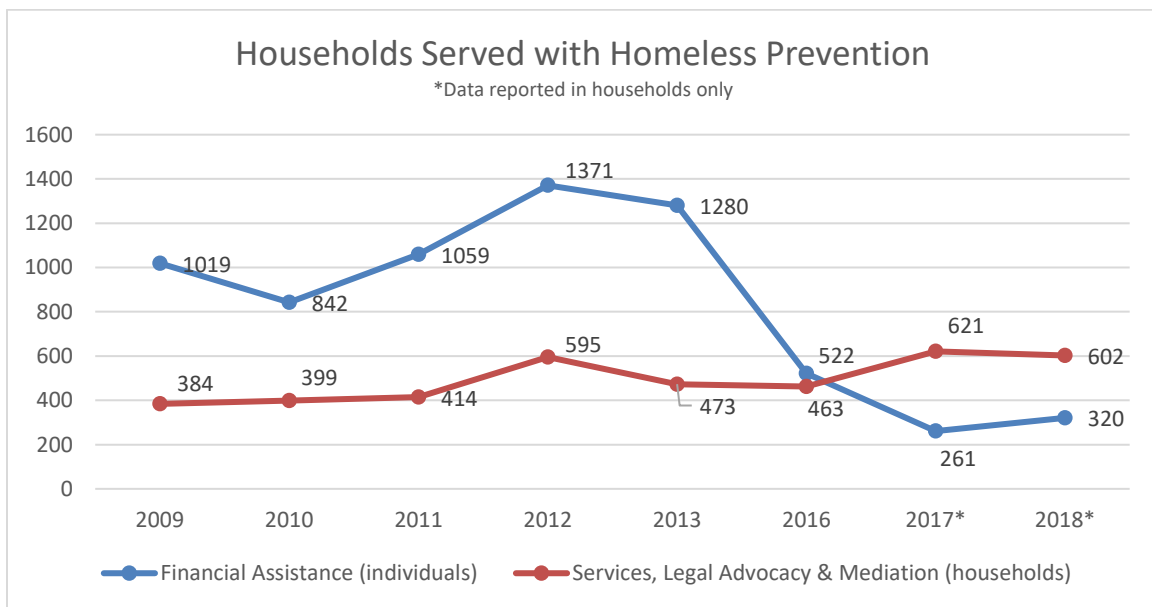
Providers of financial assistance:

- Tenant Resource Center
- Porchlight: DIGS Program
- Community Action Coalition
- YWCA Madison

Providers of services, legal advocacy and mediation:

- Briarpatch
- Legal Action of Wisconsin
- Tenant Resource Center

The following graph presents historical data (by calendar year) describing the number of households receiving Homeless Prevention Programming.



Diversion

Diversion¹ is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. Diversion specialists connect with people as they are requesting shelter or within 7-10 days of shelter entry. Diversion is not about keeping people out of the shelter system. It is about supporting self-resolution and should always be safe and appropriate according to the participant. Diversion services may include: short term case management; limited financial assistance; conflict mediation/ connection to mainstream services/benefits; and housing search.

In 2017, the CoC embraced Diversion as a strategy to prevent homelessness. At this time, families and single women are the only populations who receive diversion services as documented in HMIS. The Salvation Army is the sole provider of these services. In late 2019, Community Action Coalition will start providing diversion services to Veteran. The CoC is exploring how to expand diversion to other populations.

Support People Experiencing Homelessness

Street Outreach

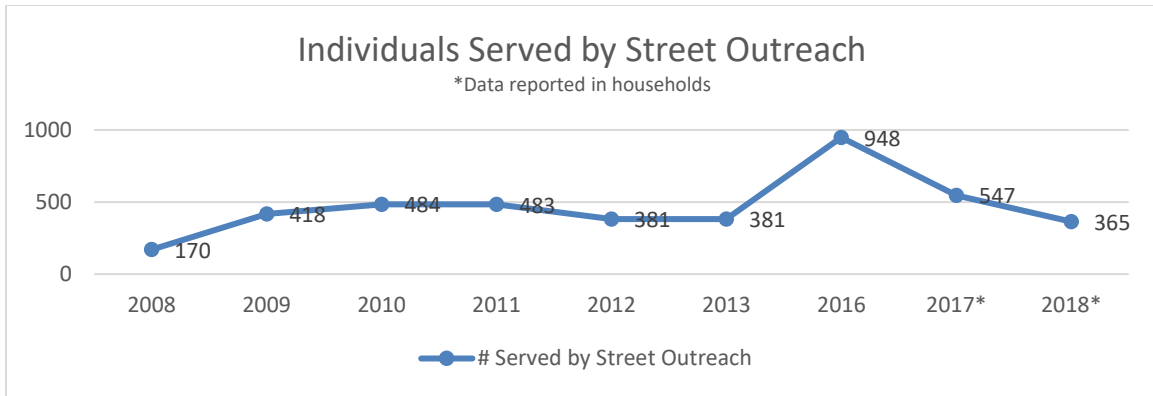
Street outreach workers engage with people experiencing unsheltered homelessness in order to connect them with emergency shelter, housing, or other critical services. Street outreach services are provided in non-facility-based settings for people experiencing unsheltered homelessness who are unwilling or unable to access emergency shelter, housing or an appropriate health facility. Local providers of these services include:

- Briarpatch
- Porchlight
- Tellurian
- Sankofa Behavioral and Community Health
- Veterans Medical Center Homeless Program*
- Madison Area Care for the Homeless (MACH) OneHealth: Street Health Team*
- Friends of the State Street Family*
- Meriter HEALTH Outreach Program*

*Data is not entered into HMIS so not included in the figures below.

The following graph shows historical data (by calendar year) regarding the number of people served by Street Outreach.

¹ Diversion section taken from: National Alliance to End Homelessness, "Closing the Front Door: Creating a Successful Diversion Program for Homeless Families"



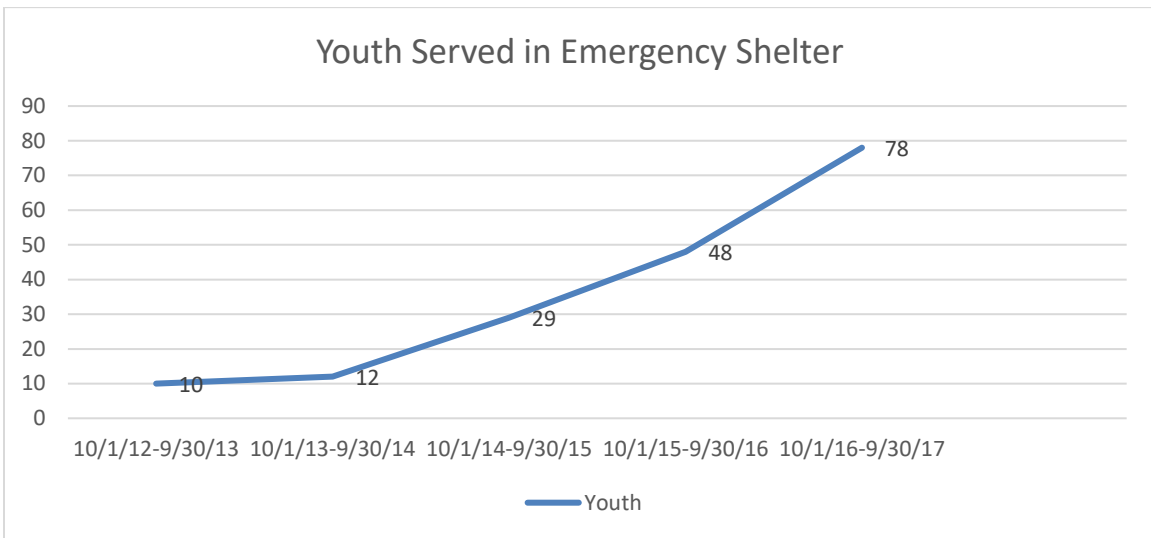
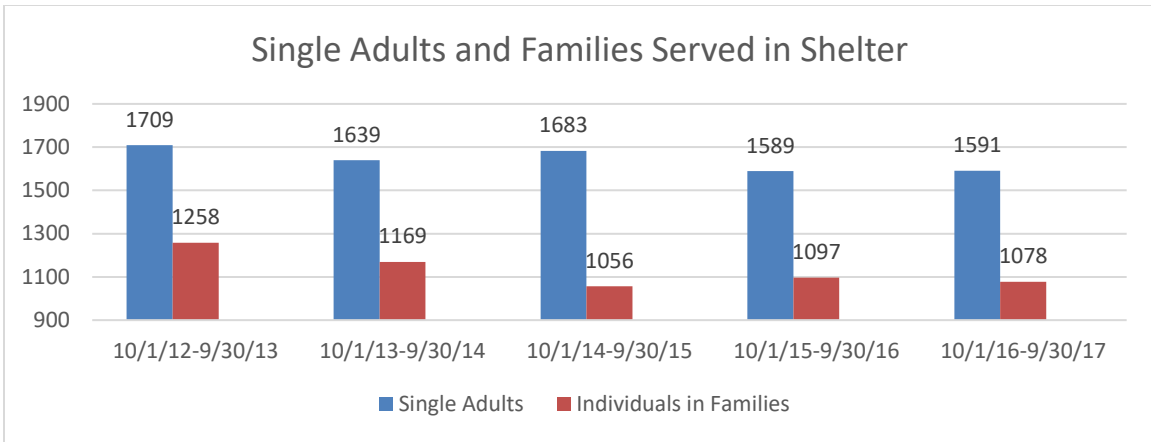
Emergency Shelter

The purpose of emergency shelter is to provide temporary shelter for people experiencing homelessness. Current Emergency Shelter providers included in the data are:

- Briarpatch: Youth Shelter
- Porchlight Inc.: Men’s Shelter
- The Salvation Army: Women’s Shelter and Family Shelter
- YWCA Madison: Family Shelter

Total Served in Emergency Shelter

	Served in Shelter 10/1/2012- 9/30/2013	Served in Shelter 10/1/2013- 9/30/2014	Served in Shelter 10/1/2014- 9/30/2015	Served in Shelter 10/1/2015- 9/30/2016	Served in Shelter 10/1/2106- 9/30/2017
Total # of Single Adults	1,709	1,639	1,683	1,589	1,591
# of Individuals in Families	1,258 with 761 children	1,169 with 697 children	1,056 with 630 children	1,097 with 649 children	1,078 with 602 children
# of Youth <18 years	10	12	29	48	78
Total	2,977	2,820	2,768	2,734	2,747



Transitional Housing

Transitional Housing (TH) facilitates the movement of homeless individuals and families to permanent housing within 24 months of entering TH. Programs provide safe, affordable housing that meets participants' needs. Current, Transitional Housing providers included in the data are:

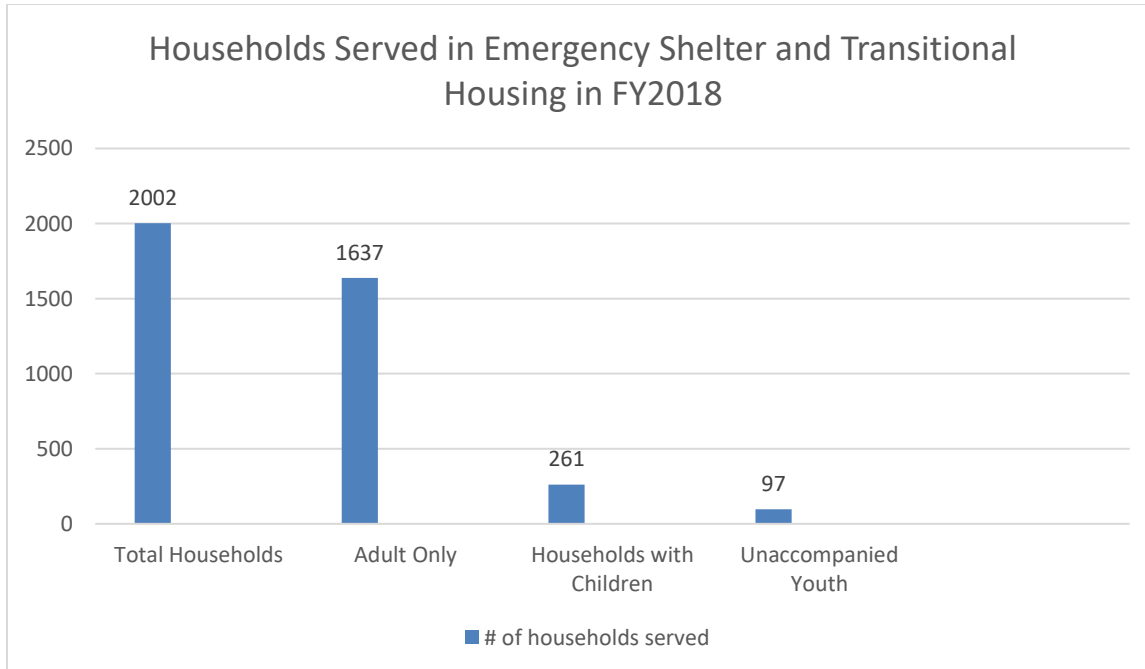
- Briarpatch: Transitional Living Program
- Porchlight Inc: VA Grant Per Diem: Spring Street
- The Road Home: Second Chance Apartment Project
- The Salvation Army: Holly House
- YWCA: Empower Home

Total Served in Transitional Housing

	Served in Transitional Housing 10/1/2012-9/30/2013	Served in Transitional Housing 10/1/2013-9/30/2014	Served in Transitional Housing 10/1/2014-9/30/2015	Served in Transitional Housing 10/1/2015-9/30/2016	Served in Transitional Housing 10/1/2016-9/30/2017
Total # of Single Adults	258	238	264	172	109
# of Individuals in Families	188 with 114 children	175 with 110 children	158 with 98 children	72 with 47 children	129 with 79 children
# of Youth <18 years	0	0	0	0	0
Total	446	413	422	244	238

FY 2018 Total Served in Emergency Shelter and Transitional Housing

In the FY2018 report, HUD has combined the demographics for people served in emergency shelter and transitional housing. For HUD purposes, households in Transitional Housing projects are considered to be experiencing homelessness.



End Homelessness

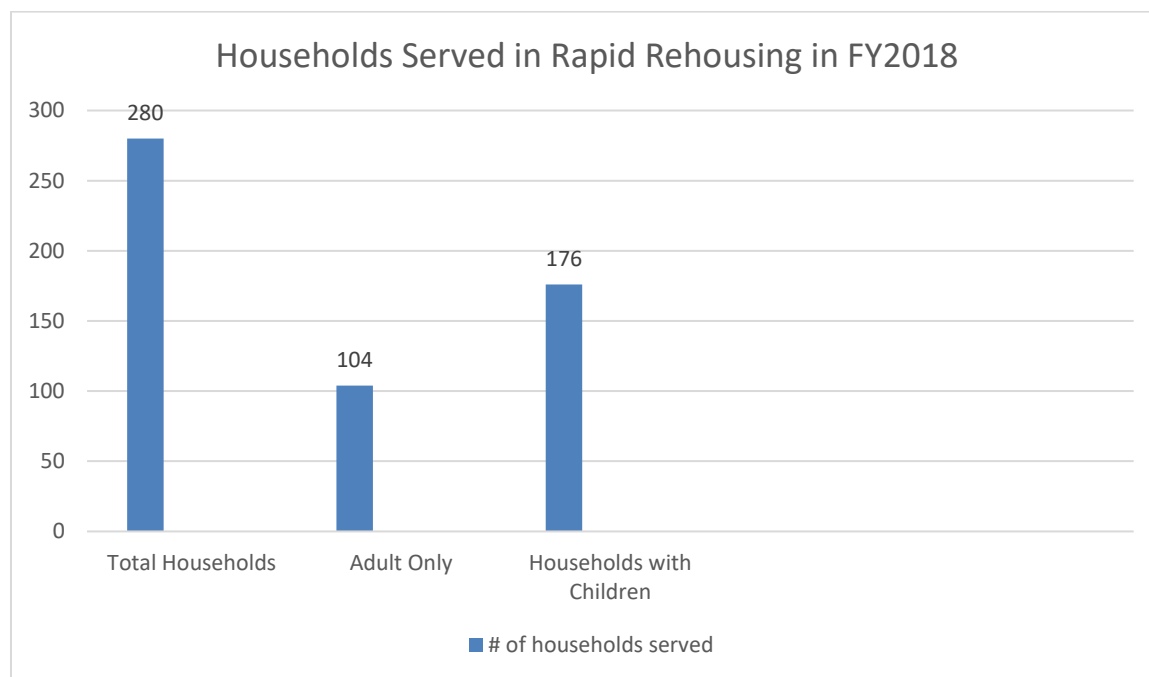
Rapid Rehousing

Rapid Rehousing is an intervention designed to help individuals and families exit homelessness as quickly as possible, return to permanent housing, and achieve stability in that housing. Rapid rehousing assistance is offered without preconditions (such as employment, income, absence of criminal record or sobriety) and the resources and services are provided are typically tailored to the unique needs of the household. The core components of a rapid rehousing program are housing identification and relocation, short- and/or medium-term rental assistance and move-in(financial) assistance, and case management and housing stabilization services. This program type is offered for no more than 24 months with up to 6 months of additional case management.

Rapid rehousing providers included in the data are:

- Community Action Coalition – Supportive Services for Veteran Families (SSVF)
- Tenant Resource Center: Rapid Rehousing
- The Road Home: Rapid Rehousing for Families
- The Salvation Army: DAWNS and RISE
- United Way of Dane County: Rapid Rehousing

FY2018 is the first year that HUD required reporting on Rapid Rehousing projects. Below is a chart of households served in rapid rehousing projects in FY2018.



Permanent Supportive Housing

Permanent supportive housing is safe, affordable housing, the purpose of which is to provide housing without a designated length of stay. It is defined by the following characteristics:

- Affordable – Housing is subsidized to ensure fiscal sustainability of household

- Safe – Housing meets standards of habitability
- Low-barrier – No required preconditions to access housing
- Supportive – Household has indefinite access to client-driven supportive services that follow household through housing transitions
- Community-focused – Housing is integrated, to its greatest extent, into the surrounding community and services support household in connecting to and interacting with community

Permanent Supportive Housing providers included in the data are:

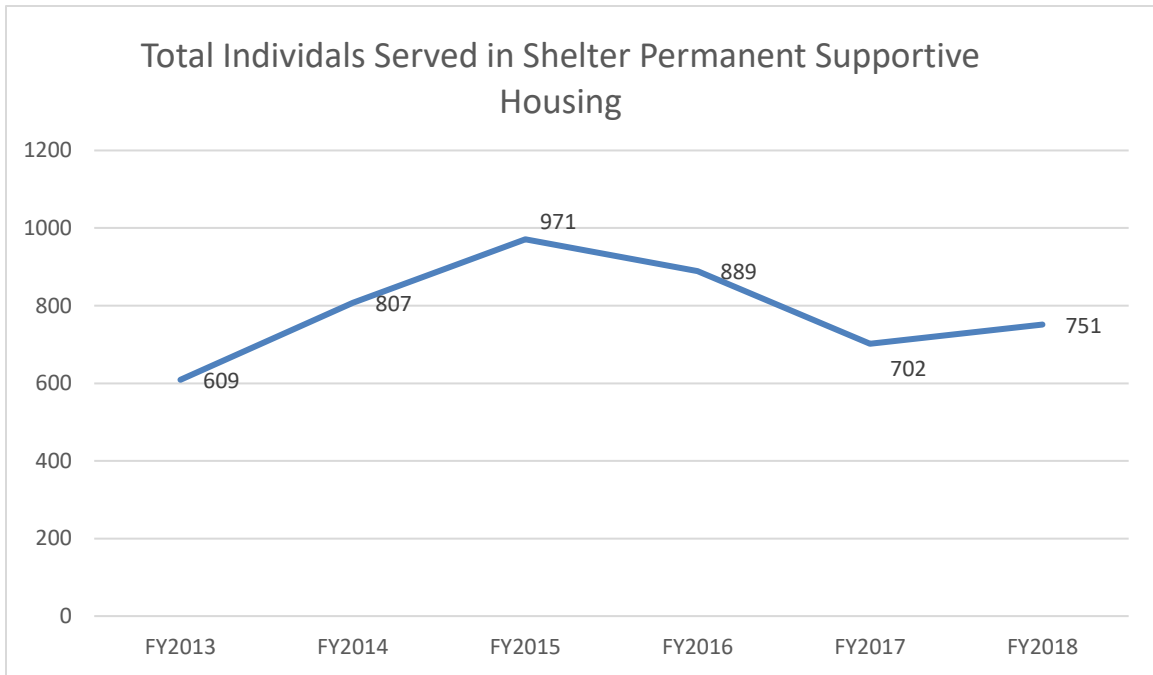
Community Action Coalition	Home for Good
	SHIFT
Heartland Housing	Rethke
	Tree Lane Family Housing
Housing Initiatives Inc.	Permanent Housing for Chronically Homeless
	Rental Assistance
Porchlight	Pheasant Ridge Trail
	Nakoosa Trail
	Housing First Leasing, Scattered Site
	Thierer Road
Tellurian	HOPE
	ReachOut Housing First
	ReachOut Housing First Expansion
	PHP: Scattered Site
	Willy Street SRO
The Road Home	Housing and Hope
YWCA Madison	House-ability

The 2018 Housing Inventory Count (HIC) shows that there were 1,031 beds of Permanent Supportive Housing available in our community. This number includes beds that are not represented in the data below (HUD-VASH vouchers).

Total Served in Permanent Supportive Housing

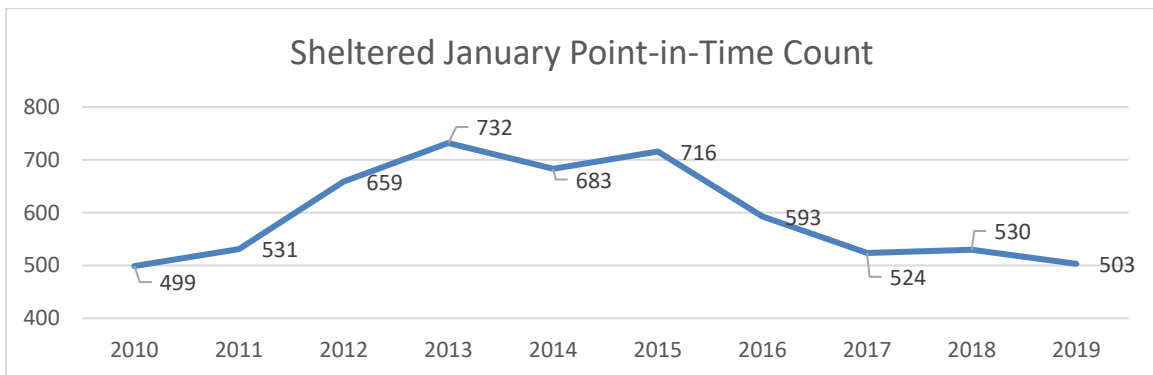
	10/1/2012-9/30/2013	10/1/2013-9/30/2014	10/1/2014 - 9/30/2015	10/1/2015-9/30/2016	10/1/2016-9/30/2017	10/1/2017-9/30-2018
Total # of Single Adults	352	399	494	472	380	312
# of Individuals in Families	257 with 164 children	408 with 247 children	477 with 290 children	417 with 258 children	322 with 196 children	440 with 282 children
# of Youth <18 years	0	0	0	0	0	0
Total	609	807	971	889	702	751

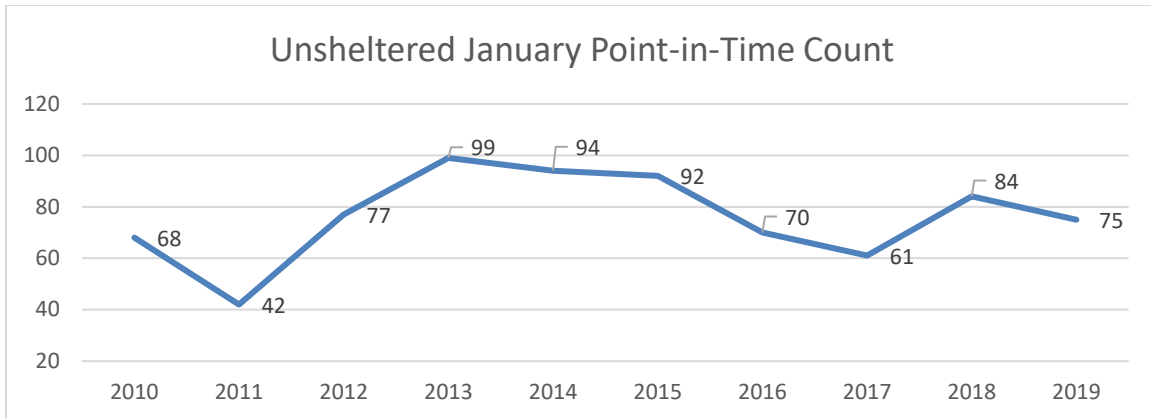
Below is a comparison of numbers served each year between the three program types.



Point-in-Time

The Point-in-Time (PIT) count is a process by which communities attempt to count the number of sheltered and unsheltered homeless persons on a single night each year. HUD requires that Continuums of Care (CoCs) conduct an annual count of homeless persons who are sheltered in emergency shelter, transitional housing and Safe Havens on a single night. In addition, CoCs must conduct a count of unsheltered persons on that same night. The following graph presents historical data showing PIT counts for both sheltered and unsheltered persons.





Spotlight Data

Aging and Homelessness

In February 2019, the National Alliance to End Homelessness held its first conference that focused solely on the needs of individual adults experiencing homelessness. During the conference, Dennis Culhane (professor and researcher, School of Social Policy and Practice, The University of Pennsylvania) presented on his work regarding homelessness and aging. Culhane’s research finds that, nationwide, the number of older adults experiencing homelessness is increasing. In 2010, 1 in 3 sheltered homeless single male adults was 46-54 as compared to 1 in 5 in 2000 and 1 in 8 in 1990.² In looking at data related to the aging population, it is important to note that the life expectancy for people experiencing homelessness is around 50 years of age (National Coalition for the Homeless).

With an increase of older adults accessing homeless services, providers and facilities need to change to meet their needs. As people age, healthcare, mobility and memory issues may emerge. Shelter and housing facilities should be set up to meet these needs. As the community considers the needs for purpose built shelter, it’s important to consider the accessibility needs of older adults experiencing homelessness. According to Culhane,

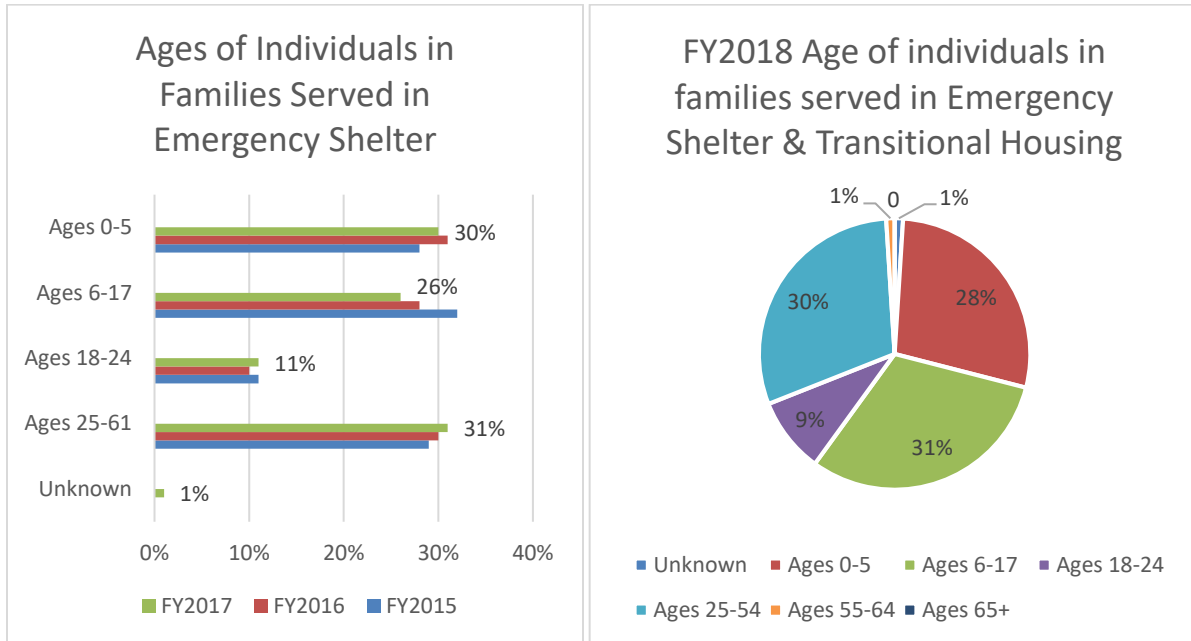
“Older homeless adults have medical ages that far exceed their biological ages. Research has shown that they experience geriatric medical conditions such as cognitive decline and decreased mobility at rates that are on par with those among their housed counterparts who are 20 years older.”

Additionally, we know that most people want to stay in their homes as they age. As housing is developed for people experiencing homelessness consideration should be made for what features can be put in place for older adults to remain home as long as possible.

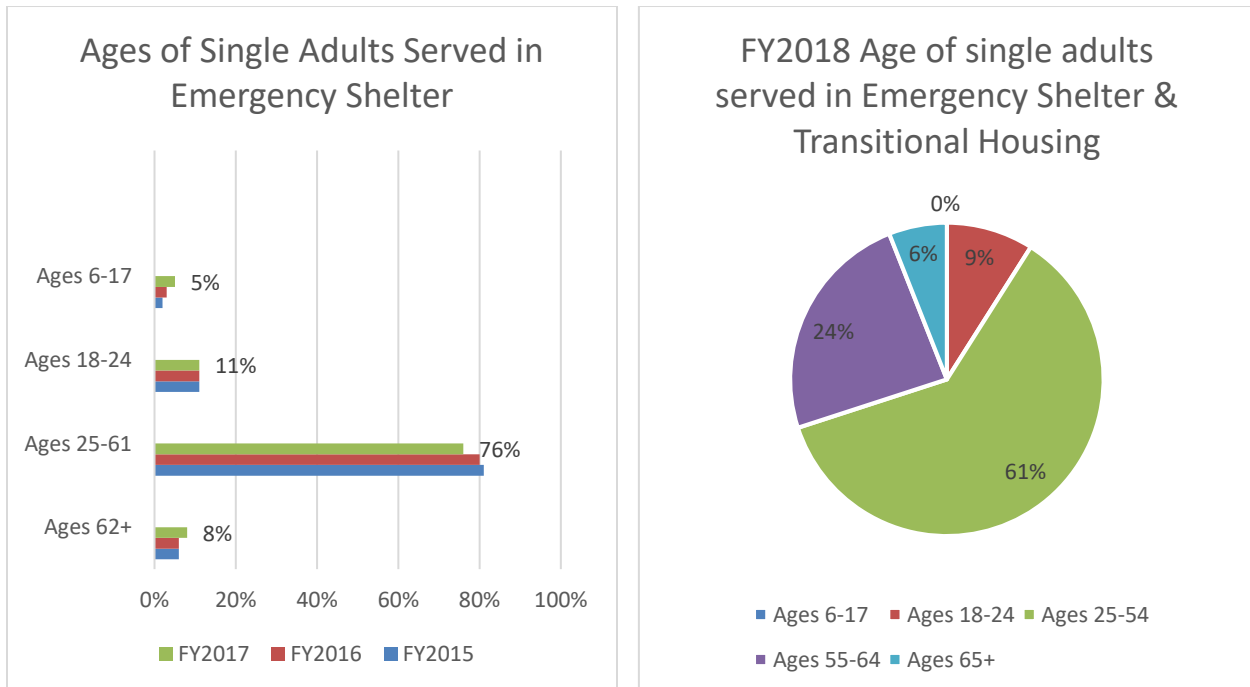
The needs of the aging population accessing homeless services is a fairly new recognition among homeless services. Providers are beginning to see the need to learn more about the resources available for older adults as they are seeing an increase in age related medical conditions.

² Culhane, Dennis et. al. “The Emerging Crisis of Aged Homelessness: Could Housing Solutions Be Funded by Avoidance of Excess Shelter, Hospital and Nursing Home Costs?”

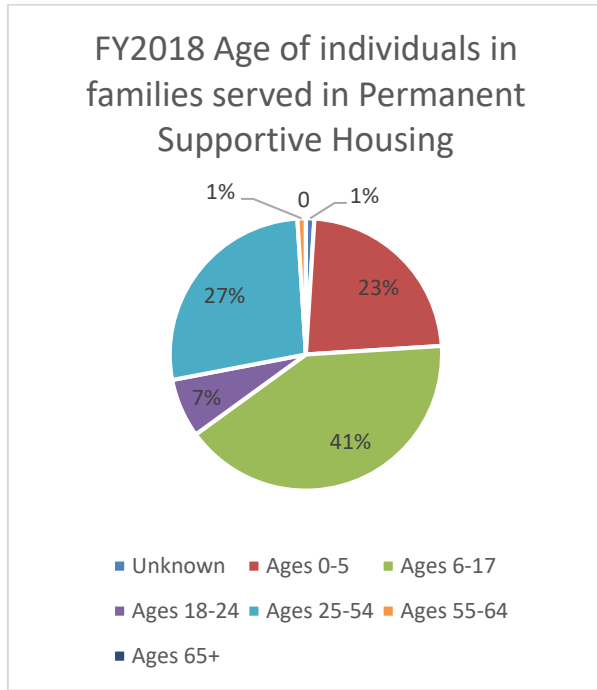
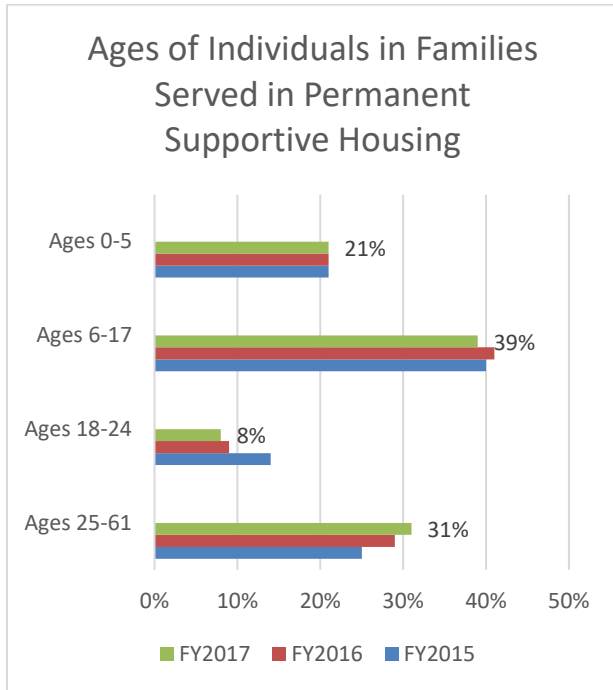
The below charts show historical data for the age of individuals in families who seek emergency shelter. Since 2015, there is an increase in the age of adults in families served in emergency shelter.



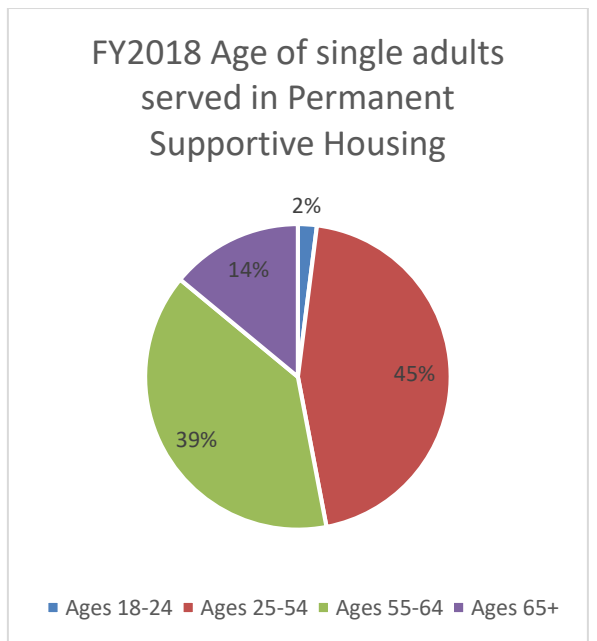
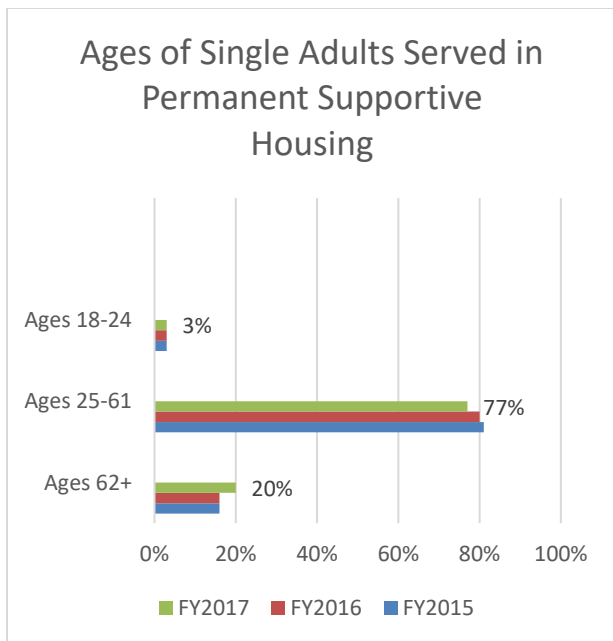
The charts below show the age of single adults who have accessed emergency shelter since 2015. In FY2017, 8% of those served in shelter were ages 62 and up. In FY2018, 24% of those served in emergency shelter were age 55-64 and 6% were older than 65.



The below charts show the ages of individuals in families who were served in permanent supportive housing.



Below are the ages of single adults served in permanent supportive housing. In FY2017, 20% were ages 62 and above and in FY2018 53% were ages 55 and above. This is an aging population who have unique service needs that should be provided so they are able to remain in their homes.



System Performance Measures

Funders have always required homeless service agencies to provide data on their projects. This data has significantly changes over the years. In the past, it felt important to know the number of people a project served. The thought was that the more people that came through the door the better. Gradually, it became important to report on what happened with those people. Projects started looking at the number of people who exited to permanent housing or achieved a certain goal. At that time, the community knew how individual projects were performing in very limited ways.

In FY2015, the Department of Housing and Urban Development asked Continuum of Cares to submit System Performance Measures. These measures help communities see how their overall homeless services system is making progress toward preventing and ending homelessness. Communities can also see how individual programs are performing within the system. There are seven measures that communities consider:

1. Length of time persons remain homeless;
2. The extent to which persons who exit homelessness to permanent housing destinations return to homelessness;
3. Number of people experiencing homelessness;
4. Jobs and income growth for people in CoC-funded projects;
5. Number of persons who become homeless for the first time;
6. Homelessness prevention and housing placement of persons defined by Category 3 of HUD's homeless definition in CoC-funded projects³;
7. Successful housing placement.

Communities are expected to examine their data each year for progress in preventing and ending homelessness. All of these measures are important for this work, but the community focuses on three of them: length of time homeless, returns to homelessness, and exits to permanent housing.

Length of Time Homeless

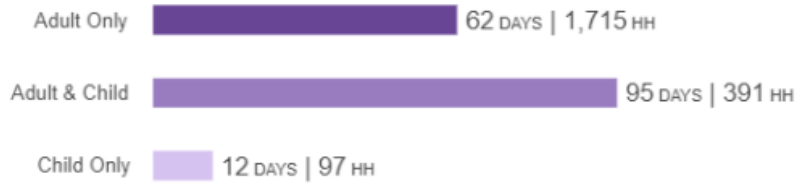
Below is data from FY2018 that shows 66 days as the average length of time spent homeless. This is for households served in emergency shelter, safe haven and transitional housing projects, and in rapid rehousing and permanent supportive housing projects before move-in. The second chart shows the time distribution of days homeless. The majority of households experience homelessness for 30 days or less. The third chart provides historical data, but only includes those served in emergency shelter and safe haven.

³ Only High Performing Communities, as designated by HUD, report on this measure. There are currently no High Performing Communities in the United States.

Average Days Homeless

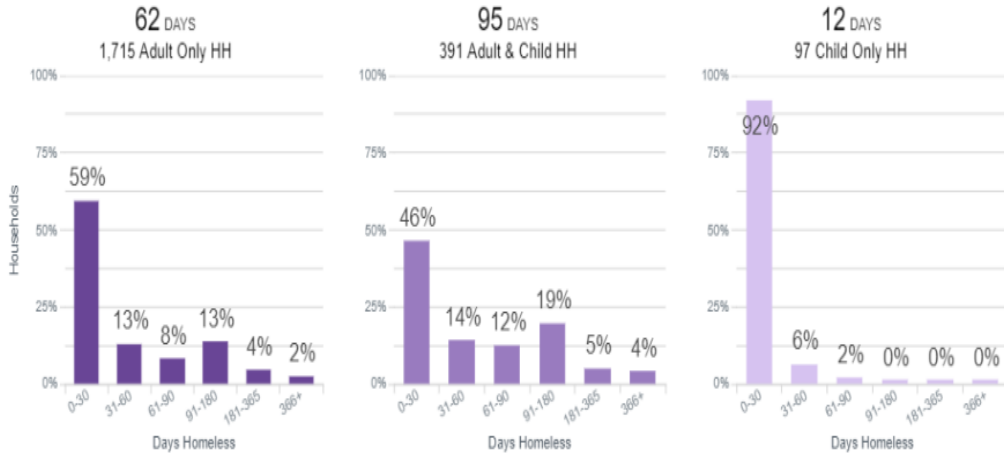
Average cumulative days that households were served in the homeless system.

66
DAYS Homeless
2,211 HH

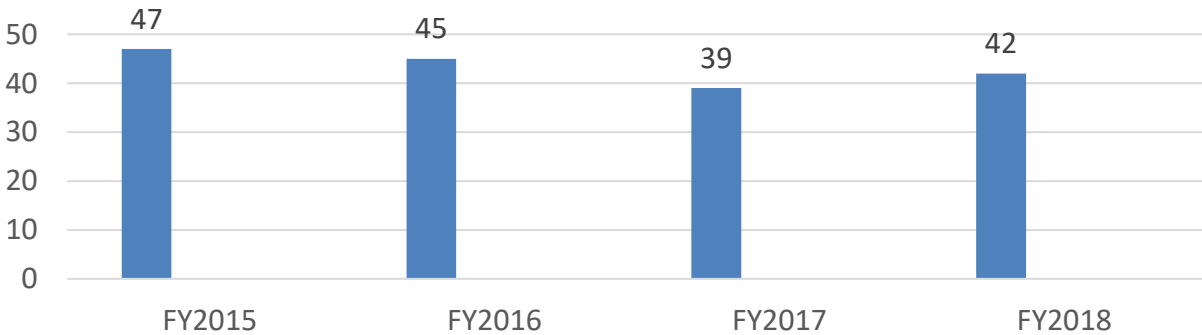


Time Distribution of Days Homeless

Average cumulative days and distribution by defined time intervals that households were served in the homeless system by household type.



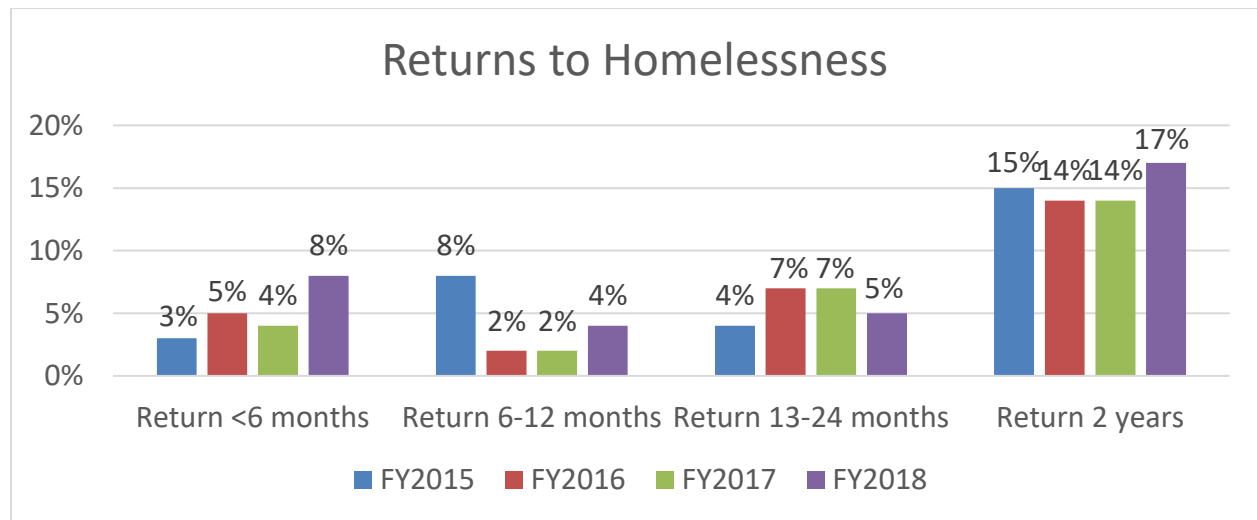
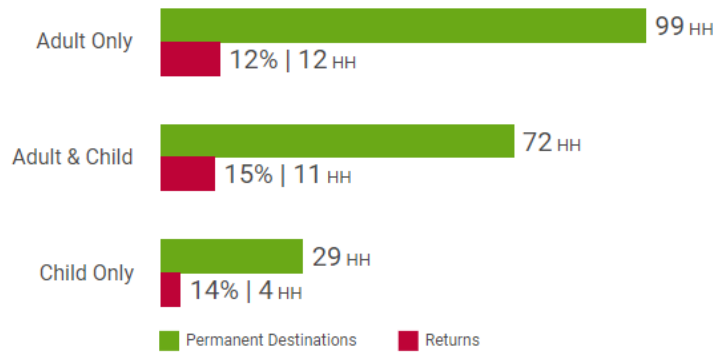
Average Length of Time Homeless for Persons in Emergency Shelter and Safe Haven



Returns to Homelessness

It is so important for households to exit to permanent housing destinations, but it is just as important for them to be able to maintain that housing. One of the goals in our community is, if homelessness is not prevented, that it be a one-time experience. The chart below shows the percent of households who returned to the homeless system within six months of exiting to permanent housing. Of those who exited to permanent housing, 14% returned to homelessness within six months. This is an increase from FY2018 where 8% of people who exited to permanent housing returned to homelessness within six months.

14%
RETURNS
27 of 200 HH



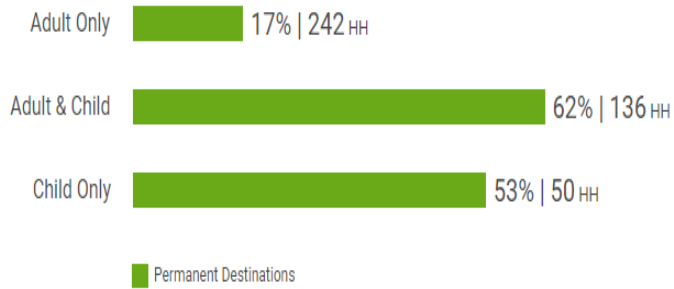
Exits to Permanent Housing

When households enter the homeless services system. Providers are working with them to find permanent housing as quickly as possible. In an ideal world, all households will exit to permanent housing. In FY2018, 24% of exited the homeless services system into permanent housing. This is a low number that can be attributed to 65% of households exiting to “unknown destinations.” This means that the household stopped accessing the service and the provider was not certain where they went.

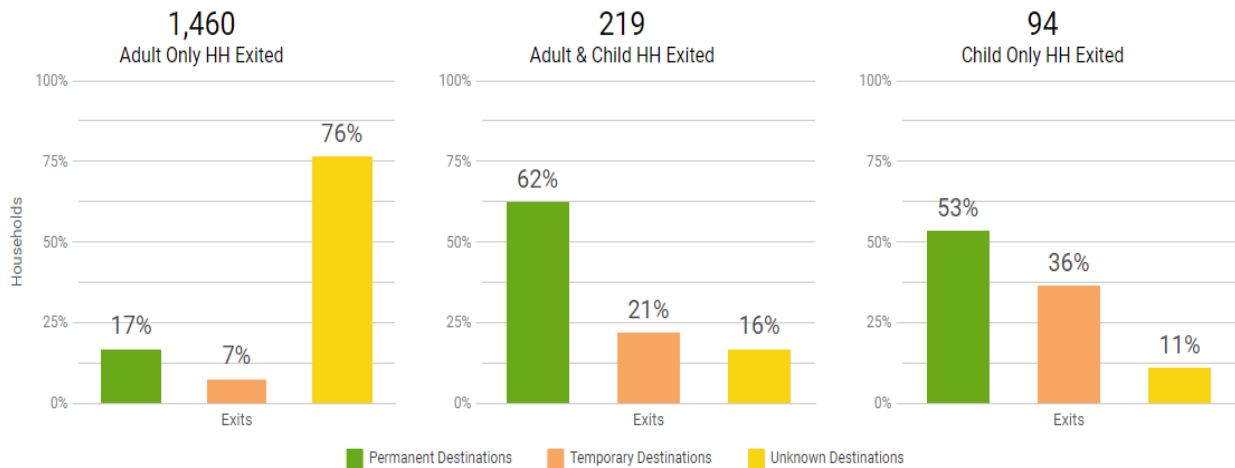
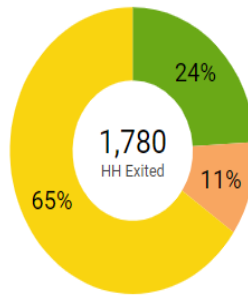
Agencies are working to hire more staff and put steps in place to achieve better data collection. This is an issue across the nation especially for shelters serving single adults on a night-to-night basis.

Exits from the Homeless System

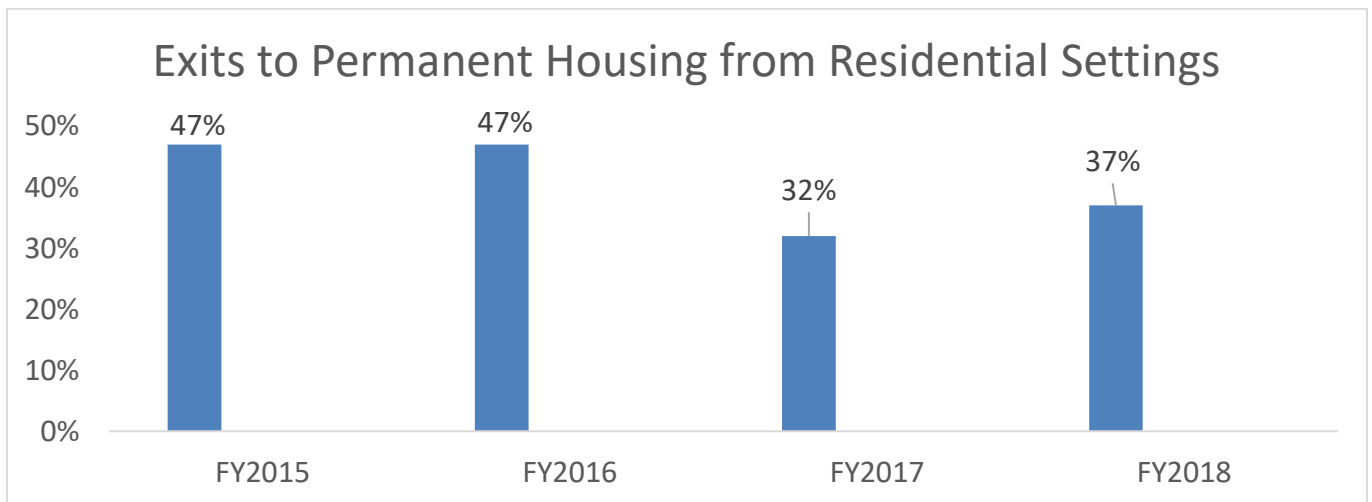
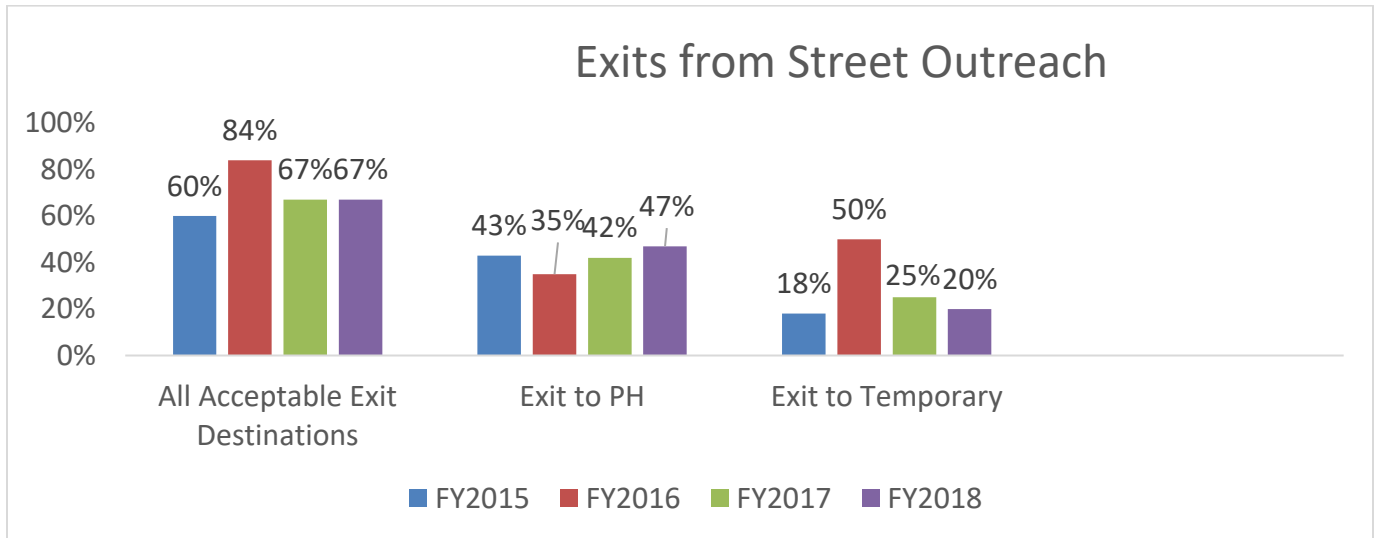
24%
 Exited to
 Permanent Destinations
 428 of 1,780 HH



Exits by Destination Type



Historical data looks at exits from street outreach and the exits of households served in emergency shelter, safe haven, transitional housing or rapid rehousing.



Providers of the Homeless Services Consortium are working to decrease length of time homeless, decrease returns to homelessness and increase exits to permanent housing. Members of the Consortium research what is working well in other communities, attend national conferences to learn best practices and talk with one another to improve service delivery in Dane County.