Columbus & Franklin County Plan to Prevent and End Homelessness FRAMEWORK

Purpose: As approved by CSB's Board of Trustees and the Rebuilding Lives Funder Collaborative (Continuum of Care), this framework articulates our vision for an effective end to homelessness, guiding principles and high level goals. The framework will be used to develop an updated community plan that includes strategic priorities, general planning accountabilities by goal, and alignment of planning efforts to effectively prevent and end homelessness. The plan will be developed between January through June 2018. The final plan is not intended to be a comprehensive, all-inclusive blueprint for the ongoing work of the RLFC members, CSB or other community partners. Instead, it will provide strategic direction, measurable actions, and a path for alignment of ongoing work and new priorities.

Executive Summary

- 2-3 pages
- Three-Year Strategic Goals & Action Plans: Summary (FY2019-2021)

Ending Homelessness Every Day

What it means to prevent and end homelessness1

An end to homelessness means that our community will have a **systematic response** in place that ensures homelessness is prevented whenever possible, or if it can't be prevented, it is a rare, brief, and non-recurring experience.

Specifically, if fully resourced, our community's homeless crisis response system would have the capacity to:

- Quickly identify and engage people imminently at-risk of and experiencing homelessness.
- Intervene to prevent the imminent loss of housing and divert people from entering the homeless services system.
- When homelessness does occur, provide immediate access to shelter and crisis services, without barriers to entry, while permanent stable housing and appropriate supports are secured.
- Quickly connect people to housing assistance and services—tailored to their unique needs and strengths—to help them achieve and maintain stable housing.

Guiding Principles

Guiding principles include the approaches, philosophies, and practices that serve as the foundation for the Plan and our local response to people at-risk of or experiencing homelessness. These principles help ensure that services and programs are as effective as possible. The Rebuilding Lives Funder Collaborative and Community Shelter Board promote and support these principles, including support for partner agencies in their implementation. Where ever possible and as resources allow, we aspire to have policies, system and program design, direct services, resource allocation, monitoring, and evaluation processes reflect these principles.

The Plan embraces the following principles:

• Recognition that homelessness is a crisis that causes personal and community harm. There is inherent common interest and obligation to pursue efficient responses that effectively prevent and end homelessness.

¹ Adapted from the U.S. Interagency Council on Homelessness

- Prioritize safe, stable housing as the primary solution to homelessness and a basic human right. Homelessness is fundamentally due to lack of available, safe, affordable housing.
 Assistance intended to prevent or end homelessness should provide Housing First, quickly connecting people experiencing a housing crisis with permanent housing and the supports needed to stabilize housing without preconditions (e.g., income, sobriety, engagement in treatment).
- Prioritize self-determination. People experiencing homelessness should be able to choose
 housing among a variety of housing types and models, within reasonable limits. Services and
 supports should be voluntary, and there should be choice in who provides them.
- Reduce disparities and ensure equity in outcomes. Our collective efforts to end homelessness should reflect the disproportionality of people of color; people with disabilities; and lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth among people experiencing homelessness.
- Protect and support individual rights. Each person should be treated with dignity and respect, be afforded basic rights, and be supported to protect those rights.
- Support community integration. In alignment with Ohio's mandate to provide community-based services to persons with disabilities, assistance should support community integration and the highest level of independence possible that assures people can quickly resolve their housing crisis and maintain safe, stable housing. To that end, other community systems corrections, healthcare, foster care, etc. should work to not discharge people to the streets and homeless shelters given the increased harm and compounding impact of homelessness.
- Remove and maintain low barriers to shelter, services, and housing. People who are or will be unsheltered, including people with wide-ranging and significant health conditions and housing barriers, should have ready access to emergency shelter, re-housing and stabilization assistance to resolve their crisis as quickly as possible.
- Focus on individual needs. Services should be flexible, person-centered and adapt to a
 person or family's needs and preferences. People experiencing homelessness should
 participate in their own housing plan.
- Target resources for people with greatest vulnerability for becoming or remaining homeless. Community resources are limited and demand often exceeds them. People also have wide ranging housing, income, health, and service needs beyond the scope of our homeless crisis response system. Therefore, assistance from the homeless crisis response system should be used progressively and as-needed to help people quickly secure and stabilize in housing, while being connected with important community-based supports they need and desire. Assistance should also be prioritized for people more likely to become or remain homeless and with greater vulnerabilities, including people who are disabled, have severe service needs, women who are pregnant, transition and have experienced long term homelessness.
- Stewardship and maximization of resources. Public and private resources supporting the homeless crisis response system should be used for maximum benefit. Resources should be re-aligned and reallocated when necessary to support system efficiency and effectiveness (e.g., decreasing time people spend homeless, increasing successful housing outcomes).

There are a number of tools and resources available to support these guiding principles. They include *evidence-based practices* (those that show evidence of positive outcomes based on peer-reviewed randomized controlled trials or other equivalently strong methodology) and *promising*

practices (those supported by current clinical wisdom, theories, and professional and expert consensus).

Homeless Assistance Needs in Columbus and Franklin County

 2-3 pages - key data tables, charts, etc. based off analysis conducted as part of statewide planning

Aspirational System Overview

The Rebuilding Lives Funder Collaborative and Community Shelter Board seek to develop and

sustain homeless crisis response system that when appropriately resourced and optimized can effectively prevent and end homelessness every day for people who are imminently at-risk of and experiencing literal homelessness². Achieving and sustaining an optimized system also depends on having an effective, community-wide system and resources to prevent housing loss and promote housing stability, where people who are at-risk of

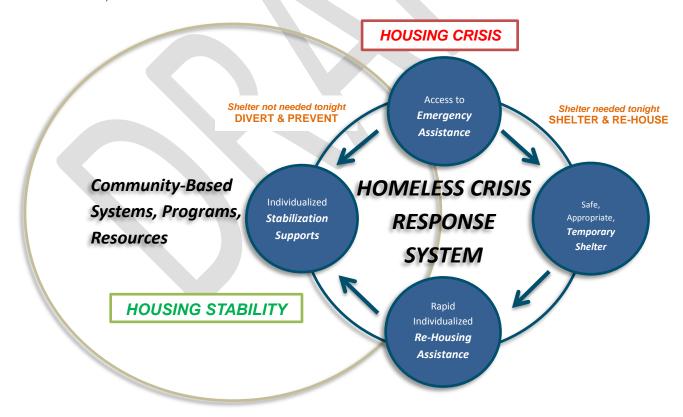
Optimization: an act, process, or methodology of making something (as a design, system, or decision) as fully perfect, functional, or effective as possible.

-Merriam-Webster Dictionary

housing loss but not yet in need of emergency shelter are quickly identified and connected to housing loss prevention and stabilization assistance before falling further into crisis.

Core Functions of Homeless Crisis Response System

The Columbus and Franklin County homeless crisis response system seeks to fulfill the following core functions, based on available resources.



² Literal homelessness includes people who have no safe, appropriate housing and require emergency shelter to avoid staying in a place not meant for human habitation. At-risk of literal homelessness includes people who will imminently require emergency shelter *but for* targeted prevention assistance and in spite of comprehensive and responsive early prevention efforts.

The following represent what a homeless crisis response system should be capable of when fully optimized, fully resourced, and adhering to the principles described above.

- Provide immediate access to community-based emergency assistance for people at-risk of losing their housing, including targeted homelessness prevention assistance for people most at-risk of literal homelessness;
- Identify all people experiencing literal homelessness through comprehensive outreach and coordinated system access points;
- Provide immediate access to safe, appropriate, low-barrier shelter for a wide-range of people with varying supportive service needs who are unsheltered or would otherwise be unsheltered;
- Provide immediate access to individualized re-housing assistance, including a wide-range
 of private market, subsidized, and permanent supportive housing options for people who
 are unable to resolve their homelessness and stabilize in housing on their own;
- Connect people who have experienced homelessness to a wide-range of communitybased services to address immediate needs and support long-term housing stability.

Performance

The following performance targets, if achieved, represent an optimized level of system performance expected from a system that is consistent with the vision, principles, and functions described above. Achievement of these goals is affected by available resources, use of evidence-based practices, fidelity to service standards, high quality service delivery, and sound management.

- CSB ends goals...
- System-wide performance goals...

Goals & Strategies

The following strategic goals and actions are intended to further develop and improve the homeless crisis response system towards achieving the optimal system qualities and performance described above. Goals and actions are broken out by specific populations and by cross-cutting areas applicable to all populations who experience homelessness. Work to achieve and sustain population-specific and cross-cutting goals inherently supports the broader collective effort to prevent and achieve an effective end to homelessness.

[FY2019 Strategic Actions Plans will be developed February-June 2018]

Population-Specific Goals

Population-specific goals reflect the distinct sub-systems within the broader homeless crisis response system intended to meet the needs of specific populations:

- U.S. military Veterans;
- People who experience chronic homelessness;
- Youth age 18-24;
- Families with minor children; and
- Single adults.

Goals align with federal and state plans, and focus on achieving the system qualities and general performance expectations described above for each population. While different strategies and assistance are needed for each population, they may not be mutually exclusive with other

populations. For example, the needs and outcomes for parenting youth are considered under both youth and family categories. Planning for and providing population-specific systems ensures strategies to prevent and end homelessness are responsive to and support individual needs, are consistent with evidence-based and promising practices, and use limited public and private resources in the most efficient manner possible for maximum benefit.

1. Veterans: Achieve and sustain an effective end to homelessness among Veterans

Lead Strategy Group: Ad Hoc Veterans System Leadership Group Lead Implementation Group: Veterans System Operations Workgroup

Conveners: CSB, Columbus Veterans Administration (VA)

Description and Rationale

Columbus and Franklin County have committed to achieving an effective end to
homelessness among Veterans according to <u>federal criteria and benchmarks</u> as soon as
possible. The current system meets federal criteria, including ensuring every Veteran who
is literally homeless has access to low-barrier shelter and re-housing assistance.
Additional system improvements are needed to meet federal performance goals related
to length of time to permanent housing and to reduce the number of Veterans becoming
homeless versus those ending their homelessness. Achieving an effective end to
homelessness among Veterans provides important evidence and practices to inform
efforts to end homelessness among other populations.

Data Highlights

- 2016 Snapshot key data
- Most recent benchmark data, including census (active only) trend
- Veteran system dedicated bed/unit inventory

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Improve average time to permanent housing by streamlining re-housing assistance processes
- Further develop landlord network and add new landlord partners
- Re-align federal resources from Supportive Services for Veteran Families (SSVF) to targeted homelessness prevention to reduce inflow
- Create new partnerships with Veteran service organizations to support increase targeted prevention assistance for Veterans

2. Chronically Homeless: Achieve and sustain an effective end to homelessness among individuals who are chronically homeless

Lead Strategy Group: Ad Hoc Single Adult System Leadership Group Lead Implementation Group: Adult System Operations Workgroup Conveners: CSB, Alcohol, Drug and Mental Health Board (ADAMH) (proposed)

Description and Rationale

 Columbus and Franklin County have committed to achieving an effective end to chronic homelessness according to <u>federal criteria and benchmarks</u>. The current system does not meet federal criteria. Sufficient resources are not presently available to assure single adults who are chronically homeless have year-round, low-barrier access to emergency shelter and sufficient access to critical health and behavioral health services while being assisted to secure housing. The system currently has a deficit of 1,419 permanent supportive housing (PSH) units for single adults³ who are experiencing or at-risk of chronic homelessness. Improvements are also needed related to identifying and prioritizing people who are chronically homeless for existing PSH and lowering barriers to PSH (e.g., restrictions related to criminal history).

Data Highlights

- 2017 Point-In-Time chronic homeless data
- PSH gap for chronic homeless and non-chronic homeless (CSB)

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Develop and maintain active list of people who are chronically homeless and at-risk of chronic homelessness and related case conferencing to address complex issues and assure efficient, effective assistance
- Increase permanent supportive housing capacity to meet need among single adults and families
- Improve targeting and access to existing PSH for people who have experienced long-term homelessness and have the most severe service needs
- Enhance and improve coordination of outreach services across various outreach providers and other crisis responders
- Increase access to critical health, behavioral health, legal assistance, and other critical supports necessary to effectively and efficiently re-house and stabilize people who are chronically homeless
- **3. Families with Children and Pregnant Women:** Goal: Achieve and sustain an effective end to homelessness among families with children and pregnant women

Lead Strategy Group: Ad Hoc Family System Leadership Group
Lead Implementation Group: Family System Operations Workgroup (FSOW)

Conveners: CSB, Franklin County Children Services (proposed)

Description and Rationale

• Columbus and Franklin County have committed to achieving an effective end to homelessness among families according to locally defined criteria and benchmarks as well as pregnant women. The current system only meets some criteria, including identifying every family who is literally homeless and ensuring every family and pregnant woman who is literally homeless has immediate access to low-barrier shelter. The system does not currently have sufficient re-housing capacity to effectively serve all families and pregnant women who don't otherwise self-resolve. There is an estimated gap of 276 rapid re-housing slots for families and insufficient resources to assure all pregnant women have access to sufficient rent and housing stabilization assistance before and after child birth to reduce risk of infant mortality.

³ See Appendix X: Columbus and Franklin County System Demand and Gaps Analysis

Additionally, an estimated 121 units of PSH⁴ are needed for families who are chronically homeless or who are otherwise in need of PSH to successfully end their homelessness.

Data Highlights

- 2017 Point-In-Time chronic homeless data
- 2016 Snapshot data or other annual data and/or FY17 System & Program Indicator Report key system performance data
- PSH gap for chronic homeless and non-chronic homeless (CSB)

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Develop and maintain an active list of all literally homeless families and related case conferencing to address complex issues and assure efficient, effective assistance
- Increase rapid re-housing capacity to meet need among families and pregnant women
- Enhance progressive assistance approaches to maximize and assure efficient use of shelter and re-housing resources
- Increase PSH capacity to meet need among families and pregnant women
- Further develop a care pathway for pregnant women who are literally homeless, including relevant outcomes, related assessment tool(s), and service strategies to support achievement of those outcomes
- **4. Youth:** Achieve and sustain an effective end to homelessness among unaccompanied youth and parenting youth

Lead Strategy Group: RLFC Committee to Address Youth Homelessness – Core Leadership Group

Lead Implementation Group: RLFC Committee to Address Youth Homelessness Conveners: CSB, City of Columbus

Description and Rationale

• Columbus and Franklin County have committed to achieving an effective end to homelessness among youth according to locally defined criteria and benchmarks. The current system is presently being developed by the Committee to Address Youth Homelessness and is informed by recent participation in the federally-sponsored 100 Day Challenge to End Youth Homelessness. While there are strong youth providers, there is currently no cohesive system capable of identifying and effectively serving all youth who are literally homeless. The system does not have sufficient capacity to assure all literally homeless unaccompanied youth age 18-24 have access to appropriate emergency shelter year-round. Shelter space designed to better meet youth needs, a youth-specific care pathway, and stronger service partnerships are needed. The system also needs additional, diverse permanent housing options for youth and presently lacks sufficient re-housing capacity to assist all homeless youth who do not otherwise self-resolve.

Data Highlights

• 2017 Point-In-Time data on youth

⁴ See Appendix X: Columbus and Franklin County System Demand and Gaps Analysis

2016 Snapshot key data or other annual data

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Develop youth-specific shelter space within existing shelter system
- Develop youth-specific services and partnerships with youth-serving providers for youth in shelter or who are otherwise literally homeless
- Develop and maintain an up-to-date list of all youth who are literally homeless, including
 youth who are unsheltered or unsafely housed, and related case conferencing to address
 complex issues and assure efficient, effective assistance
- Increase rapid re-housing capacity to meet need among youth
- Develop new permanent housing options, such as shared housing, host homes, and other options appropriate for youth
- Increase system integration with youth-serving agencies
- Further develop a general care pathway for youth who are literally homeless, including relevant outcomes consistent with federal guidance, related assessment tool(s), and service strategies to support achievement of those outcomes

5. Single Adults: Achieve and sustain an effective end to homelessness among single adults

Lead Strategy Group: Ad Hoc Single Adult System Leadership Group Lead Implementation Group: Adult System Operations Workgroup Conveners: CSB, ADAMH (proposed)

Description and Rationale

 Columbus and Franklin County have committed to achieving an effective end to homelessness among single adults according to locally defined criteria and benchmarks. The current system does not have sufficient capacity to assure all single adults who are literally homeless have access to appropriate emergency shelter year-round or sufficient re-housing assistance for single adults who don't otherwise self-resolve. There is an estimated gap of 1,039 rapid re-housing slots for single adults.

Data Highlights

- 2017 Point-In-Time data on single adults
- 2016 Snapshot data or other annual data

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Develop and maintain an active list of all literally homeless single adults and related case conferencing to address complex issues and assure efficient, effective assistance
- Increase rapid re-housing capacity to meet need among single adults
- Create new permanent housing options, such as shared housing, host homes, and other low-cost options for single adults

Cross-cutting Goals

The following goals pertain to families and individuals who are literally homeless or who are imminently at-risk of literal homelessness and reflect priorities applicable to various population groups. These goals are not intended to address the needs of families and individuals who are housed, even if they are precariously housed and at-risk of moving into or continuing to stay with family or friends (i.e., "doubled up").

6. Affordable Housing: Assure families and individuals who are homeless or at-risk have access to affordable housing

Lead Strategy Group: Affordable Housing Alliance of Central Ohio Conveners: Michelle Heritage, CSB (permanent supportive housing system representative)

Description and Rationale

• Sufficient affordable housing is critical to both preventing and ending homelessness. However, our community has a severe shortage of affordable housing. According to the Affordable Housing Alliance of Central Ohio, of the lowest-income households in Columbus, 54,000 allocate more than half their income on housing. They live in housing they really can't afford because their wages are insufficient. Presently, there is only one affordable rental unit for every three renters in poverty. In order to reduce the number of people becoming homeless and ensure people who are homeless can quickly secure housing, it is imperative we use our collective voice to advocate and support efforts to increase the availability of affordable housing.

Data Highlights

- PSH gap for chronic homeless and non-chronic homeless (CSB)
- Rapid Re-housing gap (CSB)
- Affordable housing gap (AHACO)

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Continue active role as founding member of the Affordable Housing Alliance of Central Ohio
- Increase supply of PSH to further close gap
- Increase prioritized access to subsidized housing options for people who are homeless and at-risk
- Increase access to time-limited rental assistance and housing stabilization services for people who are homeless and at-risk
- Increase access to ongoing affordable housing options for people moving on from PSH
- **7. Equity:** Assure families and individuals disproportionately represented among people who experience homelessness have access to responsive, equitable assistance to offset structural barriers and biases.

Lead Strategy Group: Ad Hoc Equity Leadership Group

Lead Implementation Groups: TBD

Conveners: CSB, TBD

Description and Rationale

People of color, people with disabilities, and people who are lesbian, gay, bisexual, or transgender (LGBT) are disproportionately represented among people who experience homelessness, both nationally and in Franklin County. African Americans, in particular, are more likely to become literally homeless than people of other racial and ethnic backgrounds. Black/African Americans are disproportionately represented in the homeless population (64.9%) compared to their proportion of the general population of Franklin County (22.2%) and the poverty population (39.9%). Work around the intersections of racism and homelessness is led by the Racism and Homelessness Committee and has been informed by analysis completed as part of a multi-city effort to create structural changes to reduce disparities. At the same time, an estimated 40% of youth experiencing homelessness identify as LGBT and they are at a greater risk for victimization, unsafe sexual practices, and mental health issues than non-LGBT young people experiencing homelessness. Structural changes outside the homeless crisis response system are key to ending historic forms of discrimination. The homeless crisis response system can also working to assure that staff at all levels have similar experience and characteristics of those served. assistance is provided in an individualized manner taking into account personal and structural barriers, and strong partnerships are pursued with criminal justice, legal assistance, housing providers, and employers to collectively counter-act structural barriers and biases.

Data Highlights

- Key data points from Supporting Partnerships for Anti-Racist Communities (SPARC) report
- Key data points from True Colors Fund, National Network for Homeless Youth, etc
- Data on disabling conditions among individuals, families, Veterans

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Research and document best practices, including lessons from local efforts
- Further target homelessness prevention assistance to neighborhoods with larger minority populations and high rates of homelessness
- Promote affirmative hiring practices to further diversify system staff at all levels to better reflect populations served
- Pilot strategies that identify and seek to rectify inequities
- Promote ongoing training to assure culturally appropriate responses in all forms of homeless assistance

8. Employment: Assure adults who are homeless or at-risk have coordinated access to employment opportunities and supports

Lead Strategy Group: Ad Hoc Employment/Benefits Leadership Group Conveners: CSB, FC Department of Job & Family Services (FCDJFS), FC Workforce Development Board (proposed)

Description and Rationale

 Employment that pays a wage sufficient to cover housing and other essential needs is key to both preventing and ending homelessness. Many people who experience homelessness struggle to find and keep employment and find that housing loss and employment loss are mutually-reinforcing crises. Discrimination can also create significant barriers. Increasing household income through employment directly reduces housing cost burden and increases available income for other critical needs, including costs for securing new housing, and can reduce overall cost, intensity, and duration of emergency shelter and re-housing assistance needed to end a homeless episode. Current efforts to connect people experiencing homelessness to employment supports are uneven across the system. System-wide responses are needed that effectively identify employment-related needs and offer direct or prioritized access to job search, training, and support services that are accessible during and after a housing-loss or homeless crisis.

Data Highlights

- Out of Reach data on housing wage required for fair market rent in Franklin County and State of Ohio
- Columbus ServicePoint data on housing affordability at exit from RRH, PSH
- Continuum of Care-funded RRH and PSH system performance 2015-17
- Employment rate and employment income change entry to exit for RRH, PSH only Employment rate and income amount at exit overall for system or by populationspecific system

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Research and document best practices, including lessons from local efforts (e.g., Job2Housing Program)
- Develop system-wide employment screening and referral protocol
- Develop system-to-system protocols with the Workforce Development Board and Ohio Means Jobs Center
- Facilitate access to job training, supported employment, and other opportunities for employment
- **9. Benefits:** Assure adults who are homeless or at-risk have coordinated access to benefits for which they are eligible

Lead Strategy Group: Ad Hoc Employment/Benefits Leadership Group Conveners: CSB, FCDJFS, FC Workforce Development Board (proposed)

Description and Rationale

Access to cash and non-cash benefits, including health insurance, is another key to both preventing and ending homelessness. People who are at-risk of or who experience homelessness are typically eligible for a wide range of public benefits, including the Supplemental Food Assistance Programs (SNAPS or "food stamps"), welfare payments, Supplemental Security Income (SSI), publicly funded child care, among others. Rapidly assessing and linking families and individuals to benefits they may be eligible for directly supports efforts to maintain or obtain housing quickly and meet other essential needs, thus reducing reliance on assistance from the homeless crisis response system. Current efforts to connect people experiencing homelessness to cash and non-cash benefits could be more efficient and effective.

Data Highlights

- Continuum of Care-funded RRH and PSH system performance 2015-17
- Cash and non-cash benefit rates at exit overall for system or by population-specific system

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Research and document best practices, including lessons from local efforts (e.g., Benefits Bank)
- Develop system-wide cash and non-cash screening and referral protocol with FCDJFS and Social Security Administration

10.Mental, **Behavioral**, **and Physical Health Care**: Assure people who are homeless or at-risk have coordinated access to integrated cross-system mental, behavioral, and physical health care.

Lead Strategy Group: Ad Hoc Health Care Leadership Group Conveners: CSB, ADAMH, and TBD health care partner (proposed)

Description and Rationale

• People who experience homelessness often struggle with one or more disabling condition that directly impacts their ability to maintain or obtain housing and meet other basic needs. Additional stress from living in precarious housing and experiencing homelessness can exacerbate a disability and contribute to unhealthy behaviors. The opioid crisis in particular is affecting a growing number of people, including those who experience homelessness, and requires increased coordination among crisis response providers. Acute and chronic mental health issues experienced by people who are homeless also require a degree of expertise and level of support that is largely outside the capacity of shelter and re-housing providers. Further improvements are needed to assure people with a wide variety of health needs can be safely sheltered while being rehoused. Cross-system collaborative strategies can assure people have immediate access to the type, level, and intensity of health care support needed while they resolve their homelessness and stabilize in housing as quickly as possible.

Data Highlights

- Number of disabled adults and types of disabling conditions among system users
- Housing outcomes for disabled vs non-disabled
- Data available on criminal justice system involvement

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Research and document best practices, including lessons from local efforts (e.g., First Breath Initiative with Celebrate One)
- Establish system-to-system protocols and agreements for care coordination and transfer, including for those with mental, behavioral, and/or physical health service needs

- Improve standardized system screening tools to identify and triage people with acute health needs
- Create step-down or step-across options for people no longer in need of inpatient care, but who have needs greater than homeless crisis response system capabilities

11.Criminal Justice: Assure people who are homeless or at-risk have coordinated assistance to address criminal justice related issues

Lead Group: Ad Hoc Criminal Justice Leadership Group Conveners: CSB, Franklin County Justice Programs Office (proposed)

Description and Rationale

• Some people who experience homelessness have past misdemeanor or felony criminal offenses that serve as a barrier to housing, employment, and other opportunities, even when their sentence has been served. Lack of stable housing, in turn, creates greater risk of recidivism and victimization to criminal behavior. People with a past felony conviction often have few employment or housing options and can be discriminated against outright, creating yet another penalty for a past crime. These challenges disproportionately affect people of color. Cross-system collaborative strategies can assure people engaged in the criminal justice and homeless crisis response systems are assisted to resolve their issues quickly and successfully, thus reducing community and personal costs. Greater cross-system data sharing and collaborative assistance strategies are needed to ensure people atrisk of literal homelessness upon exit from jail or prison have assistance to avoid exit to literal homelessness. Additional strategies should ensure people engaged in homeless services continue to meet their sentencing obligations and can quickly secure appropriate housing.

Data Highlights

- Number of disabled adults and types of disabling conditions among system users
- Housing outcomes for disabled vs non-disabled
- Data available on criminal justice system involvement

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Research and document best practices, including lessons from local efforts
- Improve standardized system screening tools to identify and triage people with involved with the criminal justice system who are at-risk of or currently experiencing literal homelessness
- Create information sharing and system coordination protocols to address the needs of people who are frequently involved with the criminal justice and homeless crisis response systems
- Create further alignment with Data Driven Justice & Behavioral Health Integration project with justice and mental health, which is piloting approaches for cross-system users

12. Domestic Violence: Assure people who are homeless or at-risk have coordinated access to integrated cross-system domestic violence survivor assistance.

Lead Strategy Group: Ad Hoc Domestic Violence Leadership Group Conveners: CSB, Lutheran Social Services/CHOICES, TBD human trafficking group (proposed)

Description and Rationale

• Approximately XX% of adults (predominantly women) who experience homelessness in Franklin County are survivors of domestic violence, including intimate partner and other family violence. To safely and quickly assist someone who is homeless to break free from a violent relationship, the exploitation and abuse of human trafficking, or other abusive relationships requires close coordination with survivor resources and partners. This includes survivors who need the level of support and safety offered by CHOICES, as well as for many others who don't require that level of support but find themselves homeless and seeking a safer future free from violence and abuse. Further improvements are needed to more closely coordinate, integrate and assure access to victim services, trauma-informed care, and re-housing services for survivors. Cross-system collaborative strategies can assure survivors have immediate access to the type, level, and intensity of support needed while they resolve their homelessness and stabilize in housing as quickly as possible.

Data Highlights

Number of adults reporting domestic violence experience

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Research and document best practices for coordinated and integrated care
- Improve linkages between HandsOn/Central Point of Access, CHOICES and other partners to ensure ready access to victim services and other critical support for people seeking shelter
- Document the types and frequency of violence experienced by people who are unsheltered

13.Homelessness Prevention: Assure people who are imminently at-risk of literal homelessness have coordinated access to targeted homelessness prevention assistance

Lead Strategy Group: Ad Hoc Targeted Prevention Leadership Group Conveners: CSB, Preventing Family Homelessness Collaborative, FCDJFS (proposed)

Description and Rationale

People who are poor and have other barriers often experience housing instability and are
at-risk for eviction or housing loss, whether due to falling behind on rent, lease violations,
family conflict, or other issues. However, relatively few people who face eviction or other
housing loss ultimately turn to emergency shelter, as alternative housing options and
resources are first exhausted. Targeted homelessness prevention – that is, assistance
designed to assist people who are imminently losing their housing and have no other

viable housing alternative or resource – can be effective at helping people avoid literal homelessness. From the vantage point of the homeless crisis response system, targeted interventions have the greatest impact relative to preventing entry to emergency shelter or a night on the street. Such experiences have high personal and community costs. Therefore, resources to prevent homelessness should focus on people at greatest risk of needing emergency shelter the soonest, including those who have greatest risk of being harmed by the experience of homelessness and/or who will be less able to exit homelessness without significant assistance. Improvements to coordinating access to targeted assistance community-wide are needed, along with further alignment of current community-based emergency assistance resources for maximum impact on reducing literal homelessness.

Data Highlights

- Homeless Hotline annual call volume and disposition
- Stable Families results
- SSVF national prevention demographics, results

FY2019 Strategies (refer to Appendix X for detailed FY2019 Strategic Action Plans)

- Strategy 1:
- Strategy 2:....

Strategic Opportunities

- Research and document best practices, including lessons from local efforts
- Implement neighborhood-based prevention system access points, including standard screening/triage, to critical housing assistance for people experiencing a housing emergency
- Further target existing community emergency assistance resources to assist people at greatest risk of literal homelessness
- Establish targeted homelessness diversion and prevention HUB pilot

Accountability and Reporting Framework

High-level description about how progress on the plan will be monitored (measurable benchmarks and metrics)

Closing

Reaffirmation of commitments, values, and hopefulness about impacts of Plan

Abbreviations and Glossary

Appendix: Columbus and Franklin County System Demand and Gaps Analysis