

HUD TECHNICAL ASSISTANCE UPDATE

Las Vegas/Clark County

Southern Nevada Regional Planning Coalition

Committee on Homelessness

Background on Technical Assistance

Why does HUD TA do?

- HUD TA is a strategic intervention that brings together leadership, resources, and experience to build lasting local capacity
- This HUD TA provides an opportunity to build on existing efforts, change systems, and improve local capacity to end homelessness

Background on Technical Assistance

History of TA in Clark County

- 2000-01: HomeBase assisted with the planning process with local leaders to form the SNRPC over 10 years ago
- 2006-07: Discharge Planning Summit, led to State Re-entry Task Force
- 2010-11: Development of CoC Check-Up Assessment
- 2011: Priority Community Initiative

Background on Technical Assistance

- **Priority Community Initiative**
 - HUD and US Inter-Agency Council on Homelessness
 - Align CoC efforts with the Federal Strategic Plan
 - **HEARTH Readiness and Implementation**
 - Las Vegas is one of 9 Tier 1 Communities receiving targeted TA
- **A National and Integrated Effort**
 - Best practices are shared amongst the communities that are successfully working towards ending homelessness

Overview of the Self-Assessment Process

- CoC Check-up Self-assessment created to prepare for HEARTH implementation
- HomeBase analyzed history of policy changes, the raw data plus PIT data, Exhibit 1 from past 3 years, strategic plan, and other information provided by HUD
- Assessed for strengths, challenges, gaps
- Community Action Plan

Overview of the Self-Assessment Process

Strengths of the CoC and CoH?

Challenges facing the CoC and CoH?

Overview of the Self-Assessment Process

Strengths Identified

- Current CoC structure and management has:
 - Appropriate decision-making processes
 - Strong and knowledgeable leadership, and oversight
 - Excellent grant management experience
 - Ability to meet most HUD National Outcomes

Overview of the Self-Assessment Process

Challenges Identified

- Lack of housing
- Lack of staffing capacity
- Lack of provider-level capacity in some key areas related to services infrastructure and delivery.
- Improved data to make more data-driven policy decisions and track outcomes of the strategic plan
(This has greatly improved since 2011 Check Up!)

Approved Technical Assistance

1. **Standardize performance outcomes** and require funding applicants to reach these outcomes in order to receive funding through the Evaluation Working Group
1. **Develop and implement monitoring tools** to ensure grantees meet performance outcomes and comply with HUD rules, grant obligations, and CoC policies
1. **Use data** to inform policy
1. **Map the current system**; analyze gaps in how clients move through the current system.

PROGRESS Since 2012

- 1. Performance Measurements established
- 1. HMIS greatly improved, reliable data generated
- 1. Evaluation and Re-allocation resulting in more permanent housing
- 1. Capacity-building trainings for providers

Update on Performance Measures

- Initial measures set and integrated into NOFA scoring tools, used by Evaluation Working Group and local Review and Rank
- Plan created to address data issues (coverage, quality, depth)
- Community-wide measures generated out of Clarity

Update on Performance Measures

- HomeBase created monitoring tools during NOFA blackout
- Data action plan implementation continues (especially with emergency shelters)
- Clarity software upgrade is fully implemented

Update on HMIS Action Plan

Agencies Participating in HMIS in Southern Nevada

2007 – 15 Agencies

2010 – 52 Agencies

2012 – 65 Agencies

Users Participating in HMIS in Southern Nevada

2007 – 125 Users

2010 – 400 Users

2012 – 600 Users

- Note: Increase in participation without an increase in budget, more resources needed to support HEARTH's requirements

Update on HMIS Action Plan

Clients Served/Managed Through HMIS

2009 – 4197 clients managed through HMIS

2010 – 7678 clients managed through HMIS

2012 – 12,971 clients managed through HMIS

- Through implementation of Clarity software, Data quality has increased to 99%
- Data-driven decision making is now recommended with reliable data

Systems Mapping

- HEARTH CoC Interim regulations require a centralized or coordinated assessment system for CoC and ESG grantees
- Mapping the current system allows us to identify potential gateways, barriers that we need to reduce, system gaps, and existing resources

Update on Systems Mapping

- HUD TA **does not cover full** Coordinated Assessment design and implementation– just initial steps (establishing a framework)
- CoC briefed on concepts of Coordinated Assessment
- Emergency shelters introduced to systems-redesign

- NEXT STEPS
- Survey the CoC on existing programs, services, intake and assessment processes
- Begin mapping the system and establish guiding principles for coordinated assessment

CoC's Evolution under HEARTH

- Under HEARTH, the CoC is formalized as the federally-sanctioned body to coordinate the community-wide response to homelessness and align funding and community priorities from various funding sources
- The response to homelessness has evolved from an emergency response system that manages symptoms of homelessness → into a complex set of evidence-based interventions to end homelessness

CoC's Evolution under HEARTH

- Under HEARTH, the oversight and staffing of the CoC has become a much more complicated job!
- Moving from grants management, the NOFA, and reporting requirements to →
 - **GUIDING POLICY**
 - **STRATEGIC PLANNING**
 - **COORDINATING and INTEGRATING THE MAINSTREAM RESPONSE**
 - **ALIGNING AND EFFECTIVELY ALLOCATING LIMITED RESOURCES BASED ON DATA DRIVEN DECISION MAKING**

Needs Identified, Not under HUD TA

- **Goal: Increase stock, emphasis on, and access to permanent supportive housing.**
 - Use all possible resources towards the goal of creating more housing stock.
 - Outreach to landlords and housing developers
 - Transitional housing re-design
 - Create a housing /pipeline workgroup

Needs Identified, Not under HUD

TA

Goal: Improve and formalize system of care to better target resources and create a seamless system for consumers

- Use data to identify system gaps.
- Implement centralized intake or other standardized system for intake into larger system of care to become HEARTH compliant
- Increase partnership and collaboration between agencies, including mainstream agencies
- Coordinate CoC and ESG funding priorities
- Standardize case management models, tools, and data sharing across the entire CoC

Needs Identified, Not under HUD

TA

Goal: Increase overall effectiveness, capacity, transparency, and participation of the Continuum of Care

- Increase capacity of CoC coordination and staffing
- Improve and publish policies and procedures
- Increase participation by key stakeholders
- Increase capacity of Committee on Homelessness
- Advocate for Nevada Inter-Agency Council on Homelessness

Action

Recommendation for Immediate Action

- Identify existing resources (\$) that could be re-aligned towards ending homelessness and increasing CoC capacity to respond to HEARTH requirements, including HOME funds and additional CoC funding to **build housing**
- Explore other grant opportunities that could improve the system of care. For example, SAMHSA funding that could help with case management training, services, and treatment; VA GPD funding for services.
- Outreach to private funders who control funding or other resources needed to end homelessness, especially to **build housing**.

Questions?

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