

Southern Nevada Prevention and Diversion Gaps Analysis

Context, Strategies, and Decision Points

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Overview

Methodology:

- ✓ Previous regional studies and current tools
- ✓ Relevant local government and funding stream data
- ✓ Consumer focus groups and surveys
- ✓ Key stakeholder interviews and meetings
- ✓ SNH CoC board and provider surveys
- ✓ HMIS data
- ✓ Applicable federal guidance and community examples



Context

Background

Southern Nevada System Structure

Relevant Questions

Gaps

Possible Solutions

Context: Demographics

Stakeholders reported providing prevention and diversion services to between 1,500 and 6,500 persons per year

The majority of stakeholders reported that 100% of their clients would benefit from prevention and diversion services

The majority of persons seeking access to resources through 2-1-1 database were single and between the ages of 30 and 59

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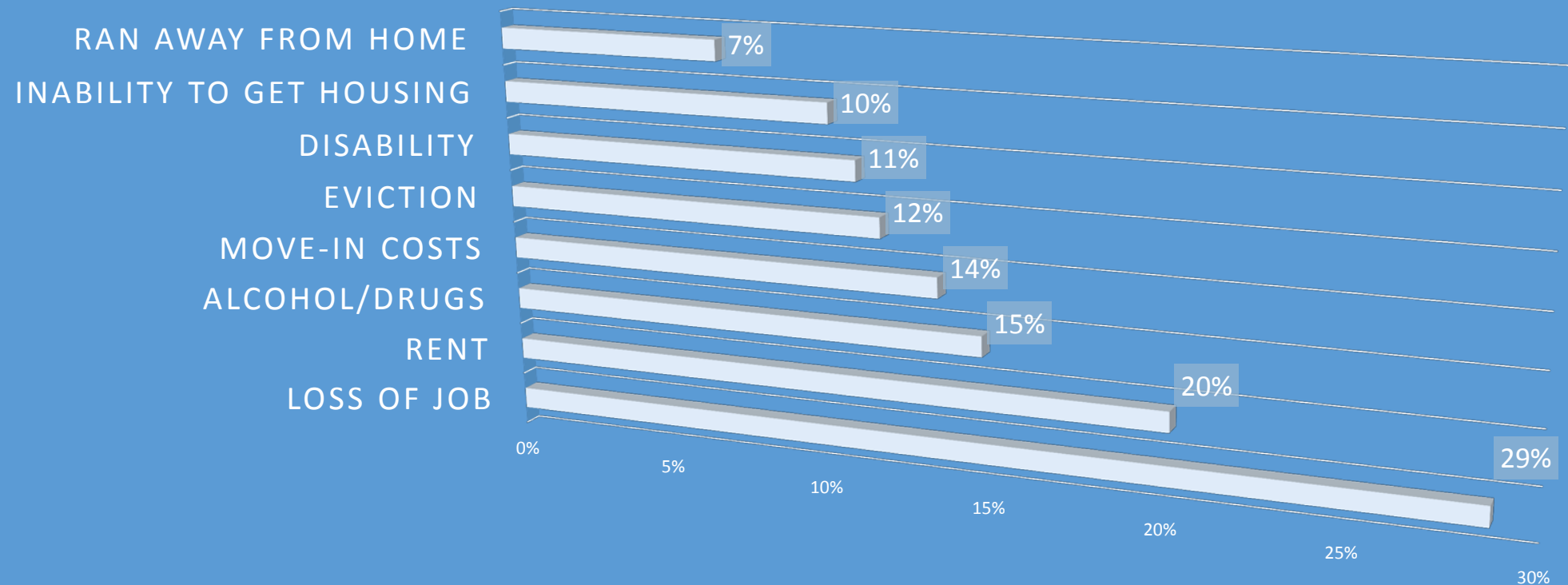
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Context: Reasons for Homelessness

TOP REASONS FOR HOMELESSNESS



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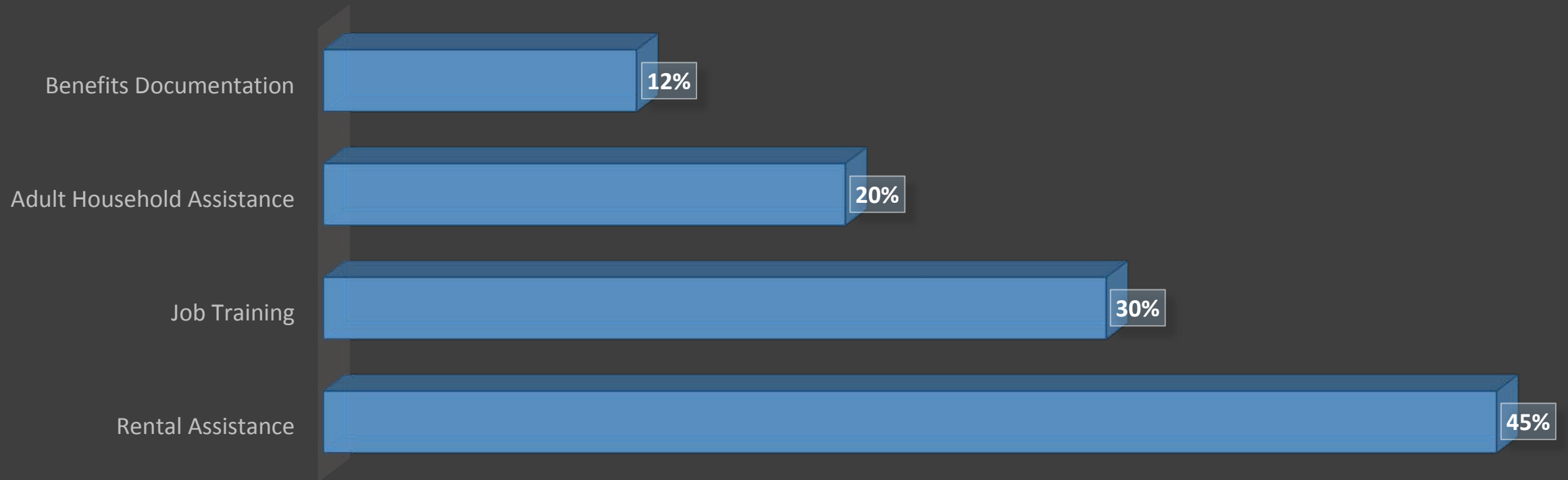
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Context: Desired Preventive Services

RESPONDENT REPORTS OF SERVICES THAT COULD HAVE PREVENTED LOSS OF HOUSING



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Context: Resources Sought and Offered

Nevada 2-1-1

- Housing, individual and family support services, food, utilities, and income support and employment
- Over 50,000 calls were prevention related

2016 City of Las Vegas Homeless Survey

- 45% believed rental assistance could have kept them in their housing
- 32% report services could have been offered to prevent their housing loss
 - Rental assistance, job training, assistance with benefits documentation

Downtown Las Vegas Business Alliance Homelessness Proactive Outreach Report

- Primary assistance offered: agency referrals and emergency shelter (70% offered and accepted)
- 3% offered and accepted diversion services (out of state transportation or were housed in placements other than emergency housing)

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What are Prevention and Diversion?

PREVENTION

Provision of supports and services aimed at housing retention for persons at imminent risk of experiencing homelessness

DIVERSION

Offers to persons currently experiencing homelessness alternative housing situations and supports that redirect them away from the homeless system

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Types of Prevention and Diversion Assistance

Financial Assistance	Non-Financial Supportive Services
Rental assistance	Connection to public assistance programs
Mortgage assistance	Housing advice, search and placement
Utility Assistance	Conflict resolution/mediation
Emergency (Cash) Assistance	Legal services
Hotel/Motel vouchers	Credit repair and budgeting
Transportation vouchers	Case management
Rental application fees and security deposits	Transportation
Funds for other expenses	Employment and job training
Mainstream Resources	Education (life skills, financial management)



HUD Guidance on Prevention/Diversions

- 1 Use mainstream and non-targeted resources to identify persons at risk and integrate housing stability into intake
- 2 Coordination of referrals between mainstream resources and CoC
- 3 Align and scale resources and interventions to expand capacity
- 4 Co-locating system and mainstream services to promote access and unified case planning
- 5 Prioritize access to mainstream resources

Coordinated Entry Checklist: Required Activities

Access:

Easy access points

Written policies and procedures for process of accessing ESG funded prevention and diversion resources

Prioritization

If separate access points, written procedures for how persons are prioritized for referrals



Prevention/Diversions Best Practices

Housing Subsidies

Supportive Services Coupled with Permanent Housing

Mediation in Housing Courts

Cash Assistance for Rent or Mortgage Arrears

Rapid Re-Housing

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Prevention/Diversion Best Practices

- Screening tools
- Flexible funding streams
- Early intervention/front door assessment

Community Examples	
<u>Cincinnati, OH</u>	<u>Commonwealth of Virginia</u>
<i>Regular data assessments and system evaluation</i>	<i>Written standards, policies and procedures</i>
Common screening tool for early identification of persons at risk of homelessness	Pre-discharge protocols include viable home plans and case management training in housing navigation
Strategic plan with quantifiable goals for increasing access to prevention and diversion services	Pre-discharge protocols require documenting numbers discharged to shelters

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Prevention/Diversion Best Practices

- Maximize community resources—cooperation from participating provider organizations and mainstream resources
- Coordinated Entry to assist with access and identification

Community Examples	
<u>Los Angeles, CA</u>	<u>Boston, MA</u>
<i>Coordination and engagement with service providers</i>	<i>Consistent implementation via coordinated entry</i>
CoC works with government agencies to enhance discharge planning and promote linkage to services	Use early warning system to identify persons at risk of homelessness through mainstream government providers
Direct housing referrals and supportive reintegration services	Use coordinated entry-type approach that tracks outcomes
Transition planning for foster care and juvenile probation with vocational training and wraparound services	Coordinate and standardize intake network and assessment tools

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Challenges

Identification of Target Population

- *Difficult to identify and engage this population*

Access

- *Requires well-trained and knowledgeable staff*
- *Requires marketing*

Evaluation and Measurement

- *Varying causality makes engagement and access difficult*
- *Difficult to track and measure activity that occurs after services to measure the non-occurrence of homelessness*



Community Examples of Prevention and Diversion

PREVENTION

SEATTLE, WA

- Dedicated flexible funding stream
- Affordable housing development
- Rental assistance
- Diversion
- Rapid re-housing

DIVERSION

DUDLEY, MA

- Transition aged youth who are parents (25% of population)
- Flexible funding stream
- Subsidies for rent and utilities
- Loss of housing prevented at a cost that was 20% of the cost of housing each family in shelter
- 42% diverted to other housing

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Pertinent Questions

- 1 What **financial** assistance is available?
- 2 What **non-financial** services are available?
- 3 How does the system **identify** persons at risk of homelessness, allow those persons **access** to resources, and what is the **process** to obtain services?
- 4 How are system efforts to provide prevention and diversion services **evaluated** and **measured**?
- 5 What are the **ideal services** that *this* system should provide to consumers in *this* region?



Existing Prevention and Diversion Resources in Southern Nevada

Financial Assistance

Rental Assistance
Security Deposits
Utility Assistance
Emergency Assistance
Transportation Assistance
Hotel/Motel Voucher

Non-Financial Services

Food
Case Management
Transportation Assistance
Housing Placement/Navigation
Mediation/Legal Services
Assistance with Mainstream Benefits
Referrals (Employment, Alternate Housing)

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Existing Prevention and Diversion Processes in Southern Nevada



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Existing Prevention and Diversion Processes in Southern Nevada

- **Identification:**

varies—word of mouth; walk-ins

- **Access**

varies—multiple access points; walk-ins, some coordinated entry; service provider-dependent

- **Process**

Varies—service provider-dependent; multiple tools; varying mechanisms and service/assistance availability



Existing Prevention and Diversion Processes in Southern Nevada

Measuring and Evaluating Southern Nevada's Process and Resources

Report but not fully utilized HMIS database

Minimal and inconsistent follow-up on services provided

Varying (inconsistent) metrics across programs and funders

Frequent but substantively inconsistent reporting

Limited prevention and diversion data analysis

Incomplete and inconsistent entries of funding streams, consumer services and outcomes by program

Best Practices

- Follow-up with consumers;
- Clear consistent metrics on program progress and services provided;
- Consistent, thorough, and accurate data entry; and
- Regular data analysis and report dissemination

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Ideal Prevention and Diversion Assistance

Most Commonly Reported Ideal Prevention Assistance by Consumers and Stakeholders

	<i>Consumer Focus Group and Focus Group Survey</i>	<i>Stakeholder Interviews</i>	<i>Stakeholder Survey</i>
Financial Assistance	<ul style="list-style-type: none"> Rental Assistance/Housing Subsidies 		
Non-Financial Services	<ul style="list-style-type: none"> Affordable Housing Housing Navigation Behavioral Health Linkages Peer Support or Mentoring Employment/Job Training Life skills Financial Literacy 	<ul style="list-style-type: none"> Affordable Housing Housing Navigation 	<ul style="list-style-type: none"> Affordable Housing Transportation Assistance
Other		<ul style="list-style-type: none"> Better use of data Funding and Support for more case management (including navigation) 	<ul style="list-style-type: none"> Coordination among Service Providers

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System Strengths

Food Banks

Communication and coordination between the SNH CoC and service providers

Diverse array of service providers in SNH CoC

Funding for rental and utility assistance

Family Resource Center

Funding for hotel/motel assistance

OVERALL:

Substantial network of providers and resources available for prevention and diversion services.

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Gaps

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- 2 What **non-financial** services are available?
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Gaps: Financial Assistance

Consumers

- *Rental Assistance*
- *Housing Subsidies*

Stakeholders

- *Rental Assistance*
- *Emergency Assistance*

Service Providers

None reported

OVERALL:

Availability of rental assistance and housing subsidies



Gaps: Non-Financial Assistance

Consumers

- Behavioral health linkages
- Life skills training
- Housing navigation
- Transitional programs
- Employment
- Job training
- Affordable housing

Stakeholders

- Affordable housing
- Employment and job training
- Transportation
- Financial management and literacy training

Service Providers

- Affordable Housing
- Employment and employment services

OVERALL:

Affordable housing and training or programs that contribute to self-sufficiency



Gaps: Identification, Access, Process

Consumers

- *Lack of information available on prevention/diversion resources*
- *Lack of clarity and information on system navigation and accessing resources*

Stakeholders

- *Gaps in outreach and information about preventive resources*
- *Lack of system coordination in prevention/diversion service provision*

Service Providers

Lack of communication and workflow coordination
Lack of centralization (of information and for services)
Lack of common tool or process to screen for prevention/diversion eligibility or assistance

OVERALL:

Lack of information coordination and dissemination and lack of centralization to provide information and services



Gaps: Evaluation and Measurement

Consumers

Lack of follow up after receiving prevention/diversion or housing services

Service Providers

None reported

Stakeholders

- *Lack of data*
- *No clear metrics*
- *Information silos*
- *Lack of system-level reports*
- *No predictive analytics*

OVERALL:

No metrics or follow up to contribute to data and no analysis of data or dissemination of reports about system or prevention/diversion efforts



Gaps: Other

Funding

Need flexible unrestricted funding

- *to address varying needs and*
- *to cover case management, transportation and other expenses*

Partnerships and Tools

- *Underutilization of “front doors” like food banks*
- *Lack of knowledge about existing services (2-1-1) and self-sufficiency tools and services*
- *No widespread integration of informal partners*
- *No standardized or coordinated use of tools and assessments for prevention/diversion services*

SNH CoC Priorities

- *All groups noted prevention and diversion as no longer a community priority, which impacts support for those programs and services*
- *Stakeholders desired more information on what was working and data from ongoing efforts*

OVERALL:

SNH CoC should reprioritize prevention and diversion to ensure providers and funders orient their efforts in this way

Gaps Noted in Review of HMIS

OVERALL: Insufficient data to inform what gaps exist in system or to report longitudinal data; no system- or program-wide documentation of entries, exits or interim processes

Necessary Prevention and Diversion Metrics and Strategies

- Numbers of specific individuals who access each service;
- Amount of time each individual accesses the service;
- When or if the person exits the system;
- How many persons are offered, denied, accept, and reject services;
- Reasons for any denials and rejections;
- Any sources of funding providers use for non-financial services;
- Follow-up data documenting status of specific individuals after exiting the system; and
- Clear method within HMIS of matching or mapping funding streams with service provision across programs, providers, and types of assistance.



Recommendations

Improve
Marketing and
Outreach

Better Utilize
Partnerships and
Tools

Improve
Identification of
Target
Population and
Access

Review SNH CoC
Priorities

Improve Data
Analytics and
Reporting



Recommendations

Improve Marketing and Outreach

1. Develop easy to distribute materials highlighting resources available to prevent and divert persons from homelessness with points of access (including locations, hours of operation and contact information) to resources that will help persons navigate the system or obtain resources;
2. Engage providers of mainstream benefits and homeless services to enhance publicity and information dispersal and access regarding available resources.

Key Components

Better Utilize Partnerships and Tools

1. Formalize partnerships with local law enforcement, code enforcement, and 2-1-1 with a plan to leverage resources and content to better serve persons at risk of homelessness, including possibly using 2-1-1 as a primary access point for information on resource availability;
2. Ensure consistent universal use of the CHAT or a prescreening tool; and
3. Regular HMIS reporting on prevention and diversion assistance offered, accepted, rejected, and denied.



Key Components

Develop a prescreen tool or additional prescreen questions to incorporate into the CHAT tool to enhance identification of eligible consumers and improve access to assistance.

Improve
Identification of
Target
Population and
Access



Key Components

Review SNH CoC Priorities

Review SNH CoC priorities to make room for developing and enhancing prevention efforts, particularly as they relate to concerns that more broadly affect consumers in the homeless system of care, including eligibility for benefits and data analytics and reporting.



Key Components

1. Ensure high data quality; and
2. Encourage frequent system level reports about prevention and diversion across the system and over time.

Improve Data
Analytics and
Reporting



Recommendations

Improve
Marketing and
Outreach

Better Utilize
Partnerships and
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Improve
Identification of
Target
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Review SNH CoC
Priorities

Improve Data
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Conclusion

Findings	Recommendations
Insufficient Information about Prevention and Diversion Resources to Enable Necessary Consumer Access to Available Resources	Improve marketing and outreach about prevention and diversion assistance and process to access the resources
Underutilized Partnerships and Tools	Better utilize partnerships and tools through formal relationships and policies and procedures
Inconsistent and Undeveloped Prevention and Diversion Screening Tools and Processes Limits Identification of Eligible Consumers and Access	Improve identification of target population and access for that population to resources through screening tools
SNH CoC Priorities Must Incorporate Prevention and Diversion to Ensure Funding and Resource Availability	Update SNH CoC priorities to make room for developing and enhancing prevention efforts, including eligibility for benefits, and data analytics and reporting
Inconsistent Data Quality and Reporting around Prevention and Diversion Metrics for Purposes of Data Collection and Reporting	Ensure high data quality using specific metrics and encourage frequent system level reports about prevention and diversion across the system and over time



Conclusion: SNH CoC Effectiveness

Best Practices and Metrics	SNH CoC Characteristics	SNH CoC Effectiveness
Coordinated Entry	Single Adults Only; Not available for P/D	Needs Improvement
Coordinated Screening Tools	Exist but no coordination	Some Progress/Need Improvement
Collaborative Partnerships	Many possible partners	Good
Using Mainstream Resources to Identify Consumers	Referrals only at this point	Some Progress/Need Improvement
Coordinating Mainstream Referrals with System and Access Points	Providers knowledgeable Not fully coordinated	Good--in progress
Targeted Identification of Consumers and Program Goals	Provider services overlap with P/D; No marketing	Needs Improvement
Documenting Effectiveness through Data Systems and Outcome Measures	Robust system; Ineffective data collection	Needs Improvement

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QUESTIONS?



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Thank You

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