

Rosanne Haggerty

Rosanne Haggerty is the President of Community Solutions (CS), a national not-for-profit organization that helps communities save lives and money by transforming their response to vulnerable people. The organization develops and distributes tools, processes and model programs to connect vulnerable people to housing and community supports.

Haggerty earlier founded New York-based Common Ground and built it into a leader in the development of supportive housing and other research based practices that end homelessness. Its network of well designed, affordable apartments — linked to supportive services people need to maintain their housing, restore their health, and regain their economic independence — enabled more than 4,000 individuals to overcome homelessness. The organization is also credited with ending chronic homelessness in Times Square.

CS brings tested innovations in reducing homelessness and improving housing and service connections to a national scale, and designs new products and programs to prevent homelessness and integrate housing and services for vulnerable people. CS designed and leads the 100,000 Homes Campaign (www.100khomes.org), a movement of national organizations and local communities to house 100,000 chronically homeless and medically vulnerable individuals and families by July, 2014.

Haggerty is a 2001 MacArthur Foundation Fellow, an Ashoka Senior Fellow, and a Hunt Alternatives Fund Prime Mover.

Memo to USICH

Rosanne Haggerty President, Community Solutions

Community Solutions addresses chronic homelessness primarily through the 100,000 Homes Campaign, a national movement we coordinate among national partners and over 100 communities working together to find permanent housing for 100,000 vulnerable and chronically homeless individuals and families by July 2014. Our findings to date indicate that reaching the goals of *Opening Doors* will be enabled by four things:

- That each person experiencing homelessness is known by name to the entire homeless response system in that individual's community
- That federal resources be targeted to those communities with the highest rates of chronic homelessness, not equally distributed to communities on the basis of legacy formulas
- That sufficient mainstream resources, especially HUD-VASH and Housing Choice Vouchers, are set aside by local housing authorities and VISNs for the chronically homeless in each community
- That communities embed Quality Improvement measures into their homeless response system such that:
 - 2.5% of the community's chronically homeless population moves into permanent housing each month
 - o the entire housing placement process, from first outreach contact to actual placement in Permanent Supportive Housing, takes 30 days or less

Finding: Know Each Person by Name:

Chronic homelessness can not be resolved without more effective data collection methods than are now in place in most communities. Given that the significant majority of people (60 to 70%) experiencing chronic homelessness do so episodically, and 64% of people experiencing homelessness are unsheltered during Point in Time counts, coupled with low utilization rates of HMIS, scarce funding for outreach and other barriers to obtaining full and accurate information on who is experiencing chronic homelessness, we recommend harnessing the power of volunteers and adopting technology tools that enable crowd sourced data gathering to dimension homelessness in a more accurate and real time way and identify the chronically homeless. The HUD mandated bi-annual Point-in-Time counts provide insufficient data to drive local problem solving measures, and inadequate feedback for monitoring the effectiveness of responses to homelessness locally or nationally.

What 100,000 Homes Campaign is doing:

- The Campaign guides communities in mobilizing volunteers to create a local, by-name Registry of who is
 homeless in each community, and information on each individual to identify those who are chronically
 homeless, those in the most vulnerable health, and inform potential housing options such as possible
 eligibility for VASH or senior housing.
- More than 5,000 volunteers in over 50 cities have completed Registry Weeks, in which volunteers canvass the streets from 4 to 6 am for three mornings in a row and attempt to administer the Vulnerability Index survey a quick survey that captures name, demographic information, a photograph, length of homelessness, and health conditions associated in the research with mortality risk, to each person sleeping outside. Through this effort, more than 30,000 homeless adults have been surveyed, resulting in a person-level database that communities use to organize local housing, health and support services agencies around the common, measurable objective of rapidly housing the chronic and vulnerable homeless. The data enables communities to target resources to those in the most extreme need.
- A Registry Week goes deeper than the Point-in-Time count by surveying over three consecutive mornings, thereby increasing the odds of capturing episodically homeless adults, gathering relevant, person-specific data, and intentionally harnessing the interest of volunteers to remain involved beyond the survey process and also participate in housing placement and support initiatives.

Communities are seeking technology tools to assist them in "crowd-sourcing" person-specific data on
homelessness on an ongoing basis. Community Solutions is currently developing a mobile application that
will enable volunteers to "register" a person experiencing homelessness throughout the year and deliver
that information directly to managers of local homeless response systems. Ideally, this information could be
integrated seamlessly into HMIS databases to improve the quality of local data without requiring
significant new organizational costs.

Recommendations for USICH:

- Openly encourage and support participating communities in creating by name Registries and integrating the findings into HMIS
- Mandate the tracking of chronically homeless individuals by all HMIS systems
- Monitor and discover alongside Community Solutions the development of the mobile app. If it succeeds in pilot testing phases, encourage Continuum of Care Directors to integrate crowd-sourced data into their HMIS systems.

Finding: Target Resources to Communities with highest rates of chronic homelessness

All communities must enlist in the fight against chronic homelessness, but specific communities must be targeted in particular. We will not end chronic homelessness in America if we cannot end it in the over 30 cities with more than 1,000 unsheltered or chronically homeless residents. These communities are both unique laboratories and high-leverage opportunities to develop best practices for the rest of the country to adopt.

What the 100,000 Homes Campaign is doing:

• The Campaign focuses on recruiting these high burden communities, and with HUD, the VA and USICH is targeting 16 of these communities for quality improvement support (see below)

Recommendation for USICH:

 Redesign legacy allocation formulas for resources for the homeless to shift resources to targeted high burden communities. Link new resources specifically to reductions in chronic homeless in those communities.

Finding: Sufficient mainstream resources, especially HUD-VASH and Housing Choice Vouchers, should be set aside for chronic homeless population in each community

Local public housing authorities have an essential role to play in ending chronic homelessness but their current allocation practices are not aligned with this goal. Best estimates indicate that a mere 2% to 5% of all Housing Choice vouchers are allocated to the homeless, much less the chronically homeless. Simply put, McKinney-Vento resources are not enough to do the job of ending chronic homelessness, and mainstream resources must also be made available on a targeted basis.

What 100,000 Homes Campaign is doing:

• With the Corporation for Supportive Housing we are identifying a list of "model standards" for public housing authorities to adopt to help their communities end chronic homelessness. The "model standards" are in draft form. Our goal is to engage 20 high priority public housing authorities in locations with the highest rates of chronic homelessness in adopting the "model standards".

Recommendations for USICH:

- Incent public housing authorities in communities with high rates of chronic homelessness to adopt model standards (once finalized)
- Incorporate whether a public housing authority has adopted these model standards into its CDBG scoring, and whether existing PSH providers dedicate vacancies to chronically homeless adults into McKinney-Vento scoring methods for contract renewals or new awards.
- Recognize and award model housing authorities identified publicly and among their peers at NAHRO, CLPHA, etc.

Finding: Communities must embed Quality Improvement measures into their homeless response system such that 2.5% of the community's chronically homeless population moves into permanent housing each month and the entire housing placement process takes 30 days or less.

Our 2011 year end data analysis of Campaign communities indicates that the housing placement rate required for a community to achieve the goals of *Opening Doors* is 2.5% of its chronic homeless population housed each month. Upon reaching this benchmark, a community is between 40 and 48 months away from ending homelessness on the ground, depending on the rate at which new people become homeless.

We believe a basic Quality Improvement approach has the potential to significantly transform the response to homelessness at the national and local levels. The Department of Veterans Affairs has made considerable progress toward ending chronic homelessness among Veterans through the careful gatekeeping of resources and a relentless Quality Improvement approach. The basics elements of Quality Improvement (transparent reporting and sharing of data, the setting and measuring of progress toward goals, and an environment that encourages innovation and testing, to name a few), are profoundly lacking in many communities' homeless response systems.

What the 100,000 Homes Campaign is doing:

- Using 2011 PIT data, we calculate that 8 participating Campaign communities are currently meeting the 2.5%/month benchmark. We are currently analyzing what these high-performing communities are doing differently so that we can encourage and support other communities to adopt these effective practices.
- We provide monthly feedback reports to Campaign communities on the percent of chronic and vulnerable homeless people who were moved into housing the prior month and pro-bono coaching and assistance in improving their processes.
- Alongside HUD, the VA, and USICH, we partnering with the Rapid Results Institute to offer at no cost the Rapid Results Housing Boot Camp training to 16 communities with high rates of veteran homelessness to dramatically reduce the time it takes to move chronically homeless veterans into housing. We intend that this methodology become a template for improving housing placement rates for all chronically homelessness persons.

Recommendations for USICH:

Create the expectation and offer incentives to PHAs, Continuum of Care directors, VISNs and other local
recipients of federal funds for the homeless so that they achieve and maintain a housing placement rate of
>2.5%/month for those identified as chronically homeless, and complete the housing placement process
within 30 days.