

Vermont Plan to Prevent and End Homelessness

2014 Annual Report and 2015 Action Plan

July 1, 2014

Submitted to Governor Peter Shumlin by the Vermont Council on Homelessness

Executive Order 03-12 calls for the Council on Homelessness to report to the Governor on July 1 of each year on: (1) recommendations to the Administration regarding resource, policy, and regulatory changes necessary to accomplish the goals of the Five Year Plan to Prevent and End Homelessness, and (2) progress made under the Plan.

Contents

| | |
|--|--------|
| I. Introduction | Page 3 |
| II. Strategies, Recommended Action Items, Progress, Challenges | Page 4 |
| III. Indicators of Progress (Point in Time Count) | Page 9 |

I. Introduction

Vermont's plan to Prevent and End Homelessness was developed by the Vermont Council on Homelessness in 2012 and endorsed by Governor Peter Shumlin in January of 2013. The full document, covering calendar years 2013 through 2017, is available at:

<http://humanservices.vermont.gov/boards-committees/vermont-council-on-homelessness/>

This Annual Report to the Governor and one year Action Plan covers key strategies, recommended action items to support those strategies, a summary of progress to date, discussion of challenges; and information on the prevalence of homelessness in Vermont.

Strategies and Action Items

The state's five year plan centers on the following three strategies:

- 1. Increase the number of units affordable to people with extremely low-incomes (ELI), especially those who are homeless.*
- 2. Align and coordinate existing homelessness prevention, housing retention and rapid re-housing activities under a clear and common objective, regardless of funding source, with the goal of flexibly meeting the needs of the person instead of the program. This will include standard definitions, reporting and performance measurement.*
- 3. Expand the capacity of programs to provide individualized supportive services once households move into permanent housing.*

The Council on Homelessness recommends that the state maintain focus on these overarching strategies in 2015 and has added and refined action items to increase impact. Additional detail on strategies, recommended action items, progress to date and challenges encountered can be found in section II of this report.

Extent of Homelessness in Vermont

Vermont's most recent Point in Time count, conducted in January of 2014, estimates that on any given night 1,556 Vermonters are without housing. This represents a 9% increase over the previous year. Additional data and trends from the Point in Time count can be found in section III of this report.

II. Strategies, Action Items, Progress and Challenges

The Council on Homelessness recommends continued focus on three overarching strategies for 2015. From a list of potential future strategies developed for the five year plan, three are now included as action items within the broader framework. The Council recommends linking a number of action items with Vermont's five year Consolidated Plan undertaken by Vermont's Department of Housing and Community Development. Any overlapping action items between strategies will be coordinated and communicated through the Council.

Strategy 1: Increase the number of units affordable to people with extremely low-incomes, especially those who are homeless.

Action Items to address this strategy:

- i. *Develop the foundation of a housing production strategy which would include regular discussions between housing providers and supportive service agencies to discuss how best to implement this strategy, including determining for whom the housing would be created, where, and how to fund development and ongoing operations.*
- ii. *Set goals for a multi-year housing strategy to increase housing for people who are homeless.*

New Action Items for this strategy:

- a. *Suggest future conversations engage non-profit housing providers around screening processes. Ask housing partners to provide data on vacancies.*
- b. *Explore options for additional unit or funding percentage set-aside targets for households with extremely low incomes or experiencing homeless.*
- c. *Develop incentives for landlords to rent to households with significant barriers to housing. Look to materials from Access to Housing meeting and six month county action plans.*
- d. *Engage private sector landlords in the production and affordability strategy, including strategies for improving units that may be sub-standard.*
- e. *Encourage the setting of local targets for housing production and rehabilitation tied to the upcoming Housing Needs Assessment and incorporating county-level Point-in-Time data. These goals could be embedded in the next five year HUD Consolidated Plan and include determinations of relative local need for different types of housing, such as transitional, permanently affordable, housing affordable to persons with incomes below 30% of AMI, and supportive housing.*
- f. *Explore additional subsidy mechanisms, such as Medicaid, to increase affordability.*

Strategy 1 - Progress and Challenges:

Contracting federal resources for housing have unwound gains and additional work is needed for this production and affordability strategy. Council members continue to explore state-level strategies as well as lend support to promising national efforts. The National Low Income Housing Coalition is focusing on housing for the lowest income Americans and has suggested states use funding that might materialize through the National Housing Trust Fund to end homelessness in their communities by targeting assistance to persons below 30% of area median income (AMI).

- As of May 2014, Vermont has an estimated **7,667** federal project-based apartments affordable to people considered extremely low income (defined as earning 30% or below of area median income). This represents an increase of **88** since January 2013.
- As of December 2013, Vermont had approximately **7,039** federal tenant-based section 8 vouchers, representing a loss of approximately **911** vouchers to sequestration.
- In the last two years, Vermont's Agency of Human Services has added approximately **200** state-funded tenant-based rental subsidies through the Department of Mental Health's *Subsidy and Care* program and the Department for Children and Families' *Vermont Rental Subsidy Program*.

In 2014, the Joint Committee on Tax Credits approved changes to Vermont's Qualified Action Plan (QAP) strengthening the incentive for developers of tax credit affordable housing who set-aside 10% of apartment units for people who are homeless or at-risk of homelessness. Over time, this change is expected to have a positive and long-lasting impact in the ability of vulnerable Vermonters to access high quality affordable housing.

In April 2014, the Vermont Housing and Conservation Board and Vermont Agency of Human Services convened housing and homeless service providers from all regions of Vermont to showcase local collaborations and effective practices for increasing access to affordable housing and helping stabilize tenants at risk. Event organizers will follow up with counties on progress made with individual six month action plans.

Vermont has not set overall housing production goals targeted to address homelessness, though individual programs such as the Low-Income Housing Tax Credit (LIHTC) have incentives that may achieve similar objectives. In light of sequestration and its negative impact on both federal funding to support the development or preservation of affordable housing and operating subsidies, developers are reluctant to set targets without dollars attached.

On the federal front, sequestration of HUD section 8 funding cost Vermont the equivalent of 911 housing choice vouchers last year. Similar cuts to USDA Rural Development funding also jeopardized affordable housing in Vermont. VASH vouchers from the Veterans Administration (held harmless during sequestration) have been a welcome tool for reducing chronic homelessness among veterans. Reductions in federal rental subsidies have had an immediate impact on Vermont's fixed-term subsidies such as the Vermont Rental Subsidy Program, reducing the number of new households which can be brought on. More recently, HUD has again begun issuing Shelter+Care vouchers.

Strategy 2: Align and coordinate existing homelessness prevention, housing retention and rapid re-housing activities under a clear and common objective, regardless of funding source with the goal of flexibly meeting the needs of the person instead of the program. This will include standard definitions, reporting and performance measurement.

Action items to address this strategy:

- i. Create standard program definitions for activities such as: case management; financial sustainability; housing support or retention specialist; length of service follow up after housing is secured; and “stable housing.”
- ii. Try to determine and encourage maximum caseloads so that the defined role of case management can be implemented effectively.
- iii. Draft uniform reporting standards that measure outcomes for these programs.
- iv. Report the drafted standards to community partners for discussion.
- v. Consider implementing the following:
 1. Increasing state funded rental assistance;
 2. Expanding and enhancing financial capacity-building services and asset-building strategies;
 3. A supportive housing program for families with children.

Strategy 2 - Progress and Challenges:

Strategy two addresses services and coordination. While progress on individual action items is happening, the overall strategy is not yet fully realized in terms of alignment and coordination across *all* programs or flexibly meeting the needs of *all* people seeking assistance. There exists an inherent tension between flexibility and uniformity and this strategy aspires to both.

Definitions: The Agency of Human Services has developed standard expectations for items such as "case management," "housing case management," and "housing retention," through issuance of an AHS Policy on Housing Stability. AHS and the Council on Homelessness have adopted standard definitions of "homelessness" and "at-risk of homelessness." AHS has worked with departments to use such definitions consistently within programs.

Case Loads: One example is the Family Supportive Housing Program (FSH), launched in July of 2013, which specifies case load ranges of between 12-15 households per full-time service coordinator when working intensively with homeless and formerly-homeless families with multiple and complex needs. This program establishes a minimum frequency of visits with a case manager, designates lead case managers, and defines duration of assistance at 24 months. Case load ratios for Family Services have also been one of the factors in determining where to target expansion of this program. Case load expectations should be expanded to other programs where possible.

Rental Assistance: Increasing state-funded rental assistance received overwhelming support in last year's action plan recommendations. The Council recommended that the Governor double the size of the Vermont Rental Subsidy Program. The Council was pleased to see the Governor and Legislature support this request for state fiscal year (SFY) '15.

Financial Capacity: Asset-building strategies are integrated into the Family Supportive Housing program and should be expanded into other programs and districts. The FSH financial empowerment curriculum builds off of pilots in the Champlain Valley and Windsor County and brings in staff from CVOEO's "Financial Futures" program to build local agency capacity at demonstration sites. A number of other supportive, transitional and affordable housing programs around Vermont have added financial capacity or credit repair programming. HUD's Family Self-Sufficiency Initiative is another good example of financial capacity programming embedded in a housing program.

Supportive housing for families: The Family Supportive Housing demonstration launched in July 2013 in Brattleboro, Burlington and Rutland, and is slated to expand to two additional districts in SFY '15. The initiative links local service and housing partners to provide 24 months of intensive case management, service coordination and affordable housing for homeless families who have experienced multiple episodes of homelessness. Successful supportive housing programs should be expanded to additional districts as funding allows.

Reporting standards: AHS has coordinated with departments to increase uniformity in recent grant cycles. In SFY '14, the Community Housing Grants (CHG) used the same definitions and measures as the Emergency Solutions Grant (ESG). Coordination of these programs will increase in SFY '15. For fiscal year 2015, the Department of Mental Health is merging their Housing Contingency Fund and Housing Recovery Fund into the CRT Housing Support Fund. At the local level, providers have made progress working within their Continuum of Care. AHS has defined seven broader housing strategies for greater consistency across departments and coordinated with departments to develop standard measures for each, beginning with transitional housing. In SFY '15 Transitional housing measures will be consistent across DOC, VDH and DCF. More work remains to be done in this area and AHS will share common housing measures with the Council on Homelessness for feedback as they are developed.

Coordinated Intake and Assessment: By the end of state fiscal year 2015, Vermont expects to be piloting Coordinated Intake and Assessment in one or more counties. This initiative – driven by the Continuum of Care with technical support from HUD and the State Office of Economic Opportunity - will further increase local system coordination and improve the experience and housing outcomes for consumers.

Strategy 3: Expand the capacity of programs to provide individualized supportive services once households move into permanent housing.

Action items to address this strategy:

- i. Work with local service providers to document barriers to providing services for one year.
- ii. Ask housing recipients about their needs after services end during a lease term.
- iii. Talk with housing providers about what their needs are after supportive services end during a lease term.
- iv. Work with the departments of AHS to estimate the resources needed to provide the appropriate financial and supportive services for at least a year when homeless households move into permanent housing.
- v. Report on findings of the above activities to the Council and community partners.

Strategy 3 - Progress and Challenges:

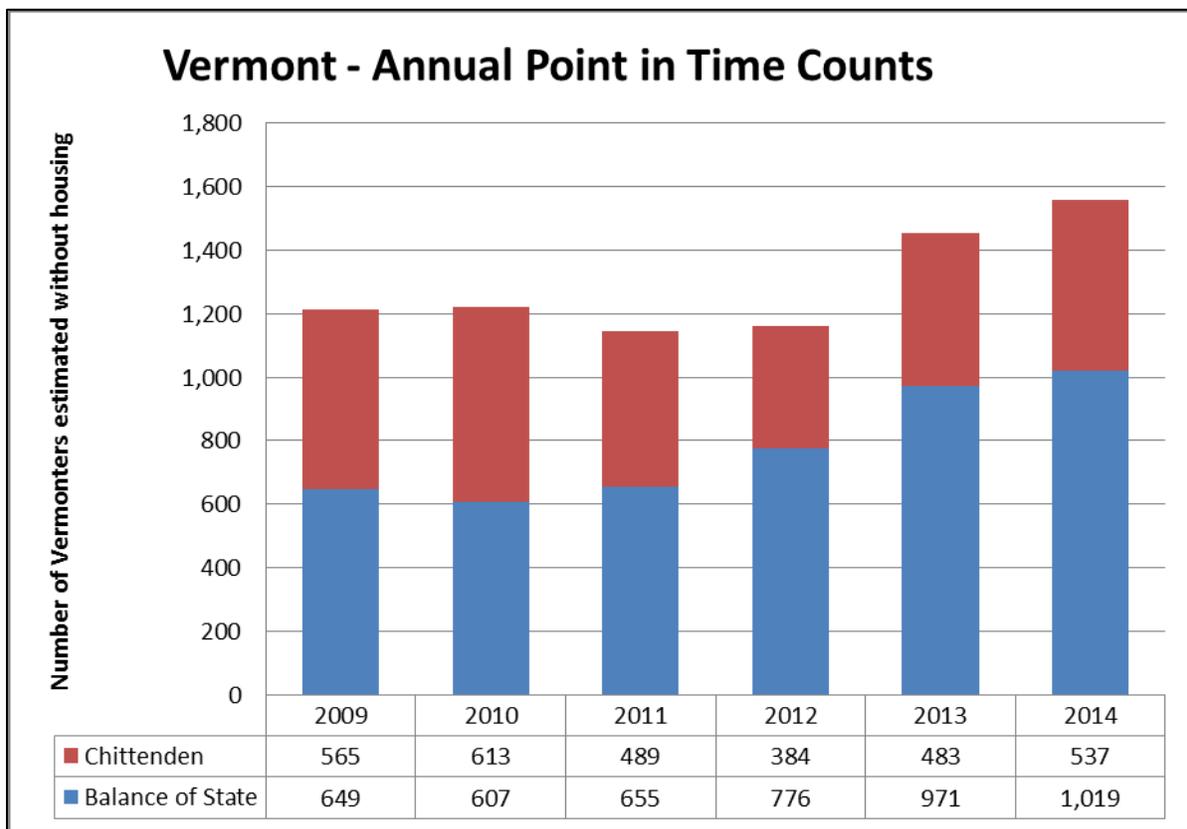
The Council has generally endorsed supportive housing and permanent supportive housing as an effective resource for people who have experienced chronic homelessness. The State of Vermont Department of Mental Health (DMH) has embraced the Housing First approach as a tool to assist in ending chronic homelessness. Pathways Vermont was recently awarded conditional Specialized Service Agency provider status by DMH, enabling them to bill Medicaid for services which support clients experiencing homelessness and mental illness.

A sub-committee of the Council on Homelessness developed three on-line surveys to address action items i through iii. Surveys were distributed to service providers, clients and housing partners. The sub-committee has released results from the first two surveys and will analyze results of the final survey to share with the Council and partners.

The April 15th Access to Housing meeting held in Randolph provided a wealth of information relating to housing and service barriers, the needs of tenants and housing providers, and solutions. This will be shared widely and should help support the overall strategy #3. The event spurred creation of six-month local action plans which will be revisited in the fall of 2014.

III. Indicators of progress (Point in Time count)

Each January, states and cities across America conduct a one day Point in Time count of persons experiencing homelessness. Vermont’s most recent Point in Time count, conducted in January 2013, estimates that on any given winter night **1,556 Vermonters are homeless**. This represents a 9% increase over the previous year in which the same methodology was used. Individual Council members have expressed that, as high as these numbers are, they likely underrepresent the true extent of homelessness in our rural state. This can be because people who are precariously-housed may not meet the definition of homelessness or because not all persons experiencing homelessness identify as such or seek services. For this reason, all such data are considered proxy measures.



- **At the time of the 2014 Point in Time count:**
 - 589 persons were in an AHS-funded motel
 - 408 persons were in emergency shelter
 - 27 persons were in another charitably-funded hotel or motel
 - 349 persons were in Transitional Housing (*counted as homeless per HUD definition*)
 - 166 persons were unsheltered (*staying on the street, in a vehicle or in the woods*)
 - 17 persons did not report where they had stayed

- Chittenden County saw an 11% one-year increase in the number of people who are homeless. The rest of the state saw an increase of 5%.
- 35% of all persons surveyed were in Chittenden County. The next two largest concentrations of homelessness were reported in Windham and Rutland counties (11% and 10% respectively). In each of these three counties, the share of homelessness exceeds the county's relative share of the state's population.
- Approximately 25% of Vermont's homeless population is under 18.
- 45% of those surveyed reported some type of disability.
- 15% reported a history of domestic violence.
- 8% identified as veterans which remains consistent from last year.
- Approximately 10% of respondents were unsheltered, meaning they were staying in a vehicle, in the woods or on the streets. Outside Chittenden County, the number of people reported as unsheltered is down across all family types from the previous year.

Because Vermont's small sample sizes can magnify relatively small fluctuations in trends, the Council will continue to monitor long-term trends from the Point in Time count. Because measuring the rate or incidence of homelessness is a challenge in any region, data from the annual Point in Time count will continue to be supplemented by other sources such as the shelter census reports and Emergency Solutions Grant reports.