



Permanent Supportive Housing Community Profile Houston and Harris County, TX

Permanent Supportive Housing Pipeline

Houston has a process that maintains a PSH pipeline and anticipates adding 387 PSH units in 2015.

Creative Approaches

To reach the goal of creating more PSH units, it took collaboration between the City, County and two local Housing Authorities. All entities have been at the table as a team in a true collaborative effort.

In Houston, there is very little funding for mental health services, so the community had to identify new sources to tap for funding for behavioral health services. Houston is taking full advantage of the Medicaid 1115 Waiver, seeking new revenue streams through Medicaid billing to provide services that providers otherwise cannot fund through state and local sources.

Community Description

Houston recently completed a PSH roadmap that is rapidly expanding PSH capacity, but PSH is still relatively new to the community. Momentum to create the roadmap resulted from HUD Technical Assistance, a CSH Charrette process, and leadership of the Mayor's Office that increased community buy in. The roadmap contains actionable steps to end homelessness in Houston.

The community is currently identifying gaps and analyzing current housing stock to be creative and maximize their limited resources. They anticipate reallocating existing funding as they have done in the past to increase local PSH units.

Prioritization of PSH Units

Coordinated assessment has been implemented in Houston and is responsible for all referrals to PSH. Prioritization of PSH units is based on vulnerability and length of homelessness through a scoring system that was developed locally. Houston participated in the 100,000 Homes campaign and made community-specific adjustments to the Vulnerability Index. Highest prioritization is given to frequent users of the medical system.

Key Partners

- CoC Board
- Mayor's Leadership Council (business/corporate partners)
- Mayor's Office
- Local Mental Health Authority
- Two local Housing Authorities
- City and County departments: Health & Human Services; Housing Development
- Workforce Development
- Judicial Representatives

Community Rewards

People in Houston are now working toward the same goals. Government and providers are working together; they are no longer working in silos. Having everyone on same page and aligning with the larger systems work has provided much benefit to ongoing PSH efforts. PSH efforts have also brought new partners to the table, resulting in extremely successful partnerships. The Veteran’s Administration (VA) is an example of an entity that is fairly new to PSH efforts in Houston and they established a valuable role in creating additional PSH units.

Community Challenges

While the Continuum of Care (CoC) is dedicated to transparency, ensuring information gets out to keep people in loop, community members and stakeholders have had a hard time keeping up with everything that’s going on, given the fast pace of systems change in Houston. Also, PSH conversion and development efforts have changed the way people operate, specifically through reorienting services around housing. This has been a difficult shift, and the community has had to be intentional about making sure stakeholders understand how their role fits into the larger system. While NIMBY is still a challenge, Houston has two unique benefits: having the City and the mayor spearhead the PSH initiative means they go to bat for all PSH projects, and having two housing-focused staff members within the mayor’s office provides a resource for council members when they face community opposition and need talking points for effective communications.

PSH Funding Sources

- Capital:** Houston PSH Initiative; City/County joint RFP; entitlement resources and housing bonds allocated for PSH; Mayor’s Leadership Council (gap financing through private sources including business & philanthropic entities)
- Operating:** Housing Authority set aside 1,000 Project-Based vouchers for chronically homeless households and 100 Project-Based vouchers set for transition aged youth (TAY)
- Services:** City of Houston Health & Human Services Department; Medicaid 1115 Waiver (expands Medicaid managed care to the entire state and replaces the upper payment limit program with two new pools of funding-the uncompensated care pool & the delivery system reform incentive payment pool)

Words of Wisdom from Houston

“We’re all moving fast to do systems change, but be sure to recognize the victories – as small as they may be – and realize that bumps in the road aren’t the end of the road. It will always be challenging work, and it’s important to be mindful of the bigger vision throughout the process.”

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About CSH

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Permanent Supportive Housing Profile Mental Health Association – Oklahoma

Permanent Supportive Housing Pipeline

MHA has plans to add 13 PSH units in 2015 for homeless prevention & families with children. MHA maintains a pipeline by buying properties with acquisition capital, and bidding out and doing construction while looking ahead at upcoming rounds of funding.

Creative Approaches

To build on existing PSH stock, MHA raises private capital dollars to leverage public funding. When they have site control, they identify funding sources for acquisition and/or rehabilitation. Successful MHA models include a combination of chronically homeless, prevention and market rate units.

- 2010: Purchased apartment complex with \$500,000 in HOME funds and \$250,000 in private capital. HOME requires 10-year affordability period. Ten units are PSH and targeted for criminal justice diversion and child welfare programs, and the remaining units are for low income market rate renters, some of whom have Section 8 vouchers.
- Received \$1.3 million in unclaimed HOME funds that would have been given back to federal government. City added \$3million to MHA's \$1.4 million enabling acquisition of two complexes. MHA made improvements to 234 units and layered federal dollars with private dollars for capital improvements.

Oklahoma CoC's Ranking Committee includes community volunteers and consumers within the ranking and scoring process and does not including grantees. Transitional housing was recently ranked at the bottom and the community must now determine their position on the most effective usage of transitional housing and figure out how to fund it together.

Community Description

Total PSH Units: 345

- 99% of units are for single adults
- 1% of units are for families with children
- 80% of units are dedicated to chronically homeless households

Mental Health Association (MHA) is a statewide organization in Oklahoma and is the largest entity within a multi-state region that is in the business of developing and operating homeless housing programs. Many smaller organizations contribute additional PSH units statewide and the need for housing resources is viewed as a regional issue. MHA specializes in direct ownership through public and private partnerships and fundraises millions in private capital to leverage public resources. MHA owns 23 properties in 16 neighborhoods throughout Tulsa, Oklahoma. In 2014, MHA reallocated 25 Save Haven units to add 50 scattered site permanent housing units, which increased MHA's total PSH stock to 345 units.

Oklahoma is in the top 15% nationally for continuum of care (CoC) ranking due greatly to progress with PSH efforts, but the CoC is therefore a lower priority for federal bonus dollars which limits their ability to add new PSH projects. The community is in the process of implementing coordinated assessment, which will increase dedication of PSH units for chronically homeless households from 80% to 100%.

Prioritization of PSH Units

When coordinated assessment is implemented in 2015, 100% of PSH units will be prioritized for chronically homeless households through use of the VI-SPDAT. Until then, priority is shared between chronically homeless households and disabled veterans.

Key Partners

- | | |
|--------------------------|---------------------------|
| CoC leadership | Statewide CABHI grants |
| City of Tulsa | Formerly homeless people |
| Division of Grants | Dept. of MH & SA Services |
| County Commissioners | Housing Authorities |
| HMIS Manager | Veteran's Administration |
| Indian Nation Council of | |

Community Rewards

These efforts have led to widespread acknowledgement of a regional issue; the homeless system is no longer working in silos in 77 counties throughout the state. Oklahoma was intentional in bringing partners to the table and agreeing on a consistent message. With significant time and resources, everyone eventually landed on the same page, regardless of the office they were representing. Housing and services is no longer just a social work issue in Oklahoma – all hands are collectively on deck to reach a functional zero statewide.

Community Challenges

Oklahoma is a conservative state that encompasses 77 counties. Despite politics and geographic spread, Oklahoma has received direct appropriations from the legislature because they value targeting funding for effective interventions and recognize that it is more cost effective to build housing and support people than have them cycle through multiple expensive systems.

Incentive creation for developers continues to be a challenge, as well as getting public policies lined up so that everyone from service providers to developers are working in the same direction.

PSH Funding Sources

All MHA properties operate without a deficit and utilize sustainable models. The Housing Development Taskforce is a subcommittee of the MHA Board that is tasked with ensuring sustainability through risk analysis and maintenance of a Capital Improvement Plan.

Capital: HOME funds; Federal Home Loan Bank; private dollars

Operating: Facility-based PSH: CoC; Housing Authority
Scattered-site PSH: CoC; Profit from MHA market rate units offset losses.

Services: CoC; State Department of Substance Abuse Services (funding for 24-hour staffing & onsite services); Veteran's Administration (per diem housing/fee for reimbursement); Rental Income

Words of Wisdom from MHA

Staying on mission is really important to partners throughout this process. In Oklahoma, the PSH provider group meets together regularly to plan, implement and ensure work remains within provider missions whenever possible.

There are many factors to consider when planning, including local issues, funding sources, community gaps, political dynamics, provider and community priorities. Take all of these factors into consideration when working statewide.

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Permanent Supportive Housing Community Profile San Antonio and Bexar County, TX

Permanent Supportive Housing Pipeline

San Antonio does not maintain a PSH pipeline.

Creative Approaches

San Antonio and Bexar County are engaging an outside consultant to help create a housing plan that responds to the needs of highly vulnerable homeless people.

Housing Innovations will provide some capacity building, as well as take the community through a strategic planning process to help expand PSH units.

Community Description

San Antonio is in a period of transition. They recently changed their governance model from the City of San Antonio leading the Continuum of Care (CoC) to a newly formed non-profit – South Alamo Area Regional Alliance for the Homeless (SARAH). This new structure is currently supported by staff at Bexar County.

They anticipate building more infrastructure and revamping the CoC application and renewal process from one that granted renewals on a regular basis with no program evaluation to one that prioritizes projects that have strong outcomes for ending people's homelessness.

Prioritization of PSH Units

San Antonio does not prioritize for PSH units. They participated in 100,000 Homes and a FUSE (Frequent User) project to identify vulnerable people. They found that they did not have capacity among the providers to serve the identified population. Going forward they hope to set up a system through coordinated access that will prioritize people who are staying at Haven for Hope's Prospect Courtyard.

Key Partners

- CoC – South Alamo Regional Alliance for the Homeless (SARAH)
- Local Mental Health Authority - CHCS
- Haven for Hope and other providers
- Two local Housing Authorities
- City and County departments
- Judge's office (re-entry work)

Community Rewards

While Haven for Hope did not result in the outcomes anticipated by that planning effort, the considerable amount of resources (\$95 million) raised from a largely poor community (lack of corporate HQ's large foundations, etc.) is highly commendable.

Community Challenges

There are many challenges in San Antonio and Bexar County – not the least of which are resources. One of the biggest challenges identified, though, is capacity to do PSH and Housing First. Providing housing for vulnerable people in general is also a challenge.

PSH Funding Sources

Capital: There is no capital dedicated to PSH.

Operating: Housing Authority set aside two rounds of 100 vouchers for homeless people. CoC dollars make up the majority of homeless funding. VASH is available for veterans.

Services: CoC; partnership through Center for Health Care Services; Medicaid 1115 Waiver (expands Medicaid managed care to the entire state and replaces the upper payment limit program with two new pools of funding-the uncompensated care pool & the delivery system reform incentive payment pool)

Words of Wisdom from San Antonio

“A political and business champion helped created Haven for Hope. The same can happen for PSH and Housing First, leveraging more resources in the community.”

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Permanent Supportive Housing Community Profile Memphis, Tennessee

Permanent Supportive Housing Pipeline

The CoC added two grants from recent CoC cycle which will result in 21 new units to lease in 2015. Memphis received 10 additional HUD VASH vouchers that will be operational in 2015. The CoC is working with housing authorities to see if Housing Choice Vouchers are an option for future years.

The Public Housing Authority (PHA) has established a goal to no longer have any single site public housing, and as a result has properties that are closing down. Households in those units get priority on the PSH list. PHA has a set aside plan that hasn't been implemented, so the CoC is developing a strategy that will be presented to PHA.

Finally, Memphis has five Hope 6 projects in the pipeline that will de-densify public housing and establish mixed income buildings. Households currently in single site PHA buildings will have priority once those units are available.

Creative Approaches

Memphis reallocated 72 units of transitional housing in 2012 and converted the units to PSH for families involved in the child welfare system. The transitional housing award had \$90,000 remaining after the PSH conversion, which enabled Memphis to add a new project to Tier 2 in the NOFA application.

Through coordinated assessment, Memphis has provided bonus points for providers who use the centralized list to pull referrals to encourage prioritization for chronically homeless households.

With a community goal of having more leased units than single site facilities, Memphis is getting creative to find good landlords. When the landlord is happy, they aim to establish market rate units as set asides for households experiencing homelessness.

Community Description

Total PSH Units: 862 units

- 78% of units are for single adults
- 22% of units are for families with children

The city of Memphis has engaged in a concerted effort to increase PSH capacity and has been very successful. Over the last 13 years, Memphis has developed 862 PSH units. Most housing providers are utilizing a Housing First approach and they are committed to accepting chronically homeless households from a centralized waiting list. They are participating in the 100,000 Homes initiative which requires meetings twice weekly to analyze community vacancies and acceptance of the first chronically homeless household on the waiting list.

Prioritization of PSH Units

Outreach workers administer the VI-SPDAT pre-screening tool; when a household score 10 points or more, the full SPDAT is completed. Prioritization for PSH units is based on the assessment score, and when there is a tie, the next factors considered are a household's unsheltered status and length of homelessness.

Assessments are only completed when a unit is vacant; a community waiting list is not maintained.

Key Partners

- | | |
|-----------------------|--------------------------|
| Housing Providers | Public Defender's Office |
| Mental Health Centers | Corporations |
| County & City Gov. | Public Housing Authority |
| Mayor's Office | |

Community Rewards

Due to a multitude of efforts, including PSH efforts, homelessness in Memphis was reduced by 20% between 2012-2014 according to Point in Time Count data, and reduced even further - 39% - among chronically homeless households.

Community Challenges

The community has quite a lot of work to do in the future with reallocation, as there are 680 units of transitional housing in Memphis. They are working through the Mayor's Plan to End Homelessness and have so far converted 50% of transitional housing units.

PSH Funding Sources

- Capital:** Federal Home Loan Bank affordable housing program; HOME; Housing Trust Fund; local foundations; set aside of \$500,000/year as matching grant for other funds to develop housing for people with disabilities.
- Operating:** Majority funded through CoC; relying on leasing (which they feel is easier to get up and running and people live more integrated)
- Services:** What few they have are through the CoC. Received set-aside from County for small team to work with 100,000 Homes Campaign and that will eventually be an ACT team through a CABHI Grant from SAMPSA; Medicaid/Medicare; mental health partnerships (have County funding and access Safety Net through State to fund basic medical services)

Words of Wisdom from Memphis

Development of PSH is our primary job, and Regional Housing Facilitators have made a significant difference in the process. These regional roles were accomplished through Creating Homes Initiative in partnership with the Department of Mental Health and offer a laser focus for one person in the community.

Have a champion and get all partners to the table. Focusing on collaborations and best use of resources is critical. Remember those best practices - Housing First, Motivational Interviewing, Harm Reduction.

Contact Person

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Permanent Supportive Housing Profile Virginia Supportive Housing

Permanent Supportive Housing Pipeline

Over the next two years, VSH will add 160 new PSH units through low income housing tax credits. VSH is adding scattered-site units annually depending on the capacity of six CoCs in Virginia. In addition, many VSH buildings are 25 years old and in need of renovations, so VSH is starting the process of renovating original buildings and adding a few units where possible.

Creative Approaches

VSH has taken a regional approach to maximize PSH efforts. Some PSH projects have support from 3-5 different cities and/or counties, which enables costs to be split and regions to contribute to a larger goal. VSH projects are recognized by HUD as an effective, proactive model.

VSH has put much effort into developing community wide support, from capital support to political support so when there is a hearing regarding a special use permit or rezoning, they have champions ready to testify and experience fewer delays as a result of strong relationships.

Community Description

Total PSH Units: 800

- 98% of units are for single adults
- 2% of units are for families with children
- 63% of units are facility-based
- 37% of units are scattered-site

Virginia Supportive Housing (VSH) is the largest provider of PSH in Virginia, largely concentrated in Richmond, Charlottesville and Hampton Roads. VSH develops properties and has multiple single site locations for homeless households that include services and property management staff. Of 800 units, 500 are facility-based and 300 are scattered-site units. VSH manages programs that use CoC rental assistance dollars to place people in scattered site locations with supportive services.

VSH has a vision of growth. As fundraising needs increase (currently increasing by 10% annually), VSH is attempting to establish a services reserve for new building which requires the buy-in of the State Housing Finance Agency.

Prioritization of PSH Units

Prioritization of PSH units varies by CoC. In Richmond, a Coordinated Outreach Consortium screens applications for scattered-site units using the VI and weighted score for length of homelessness and the highest score is prioritized.

Housing authorities manage the waiting lists for single site units; the Richmond Housing Authority has a preference for chronically homeless households. VSH is working with other housing authorities to establish a preference for chronically homeless households.

Key Partners

- | | |
|----------------------|---------------------|
| 6 CoCs | Private Foundations |
| Local Government | Corporations |
| State & Federal Gov. | Volunteers |
| Board Members | Housing Authorities |

Community Rewards

With VSH's growth has come creditability within the community. Nimbyism is still a challenge when developing new projects, but recognition for their project designs and positive outcomes has grown and made neighborhood meetings a bit easier. With each new project, additional trust is built.

As result of coordinated outreach and addition of PSH units, the unsheltered count in Virginia dropped by 40% between 2011 and 2013.

Community Challenges

VSH has experienced much growth, going from ten staff only 12 years ago to currently employing 103 staff. Funding for services and administrative expenses has been a challenge to maintain during this period of growth, and the need for a strong infrastructure is more important than ever.

Virginia is a low tax, low service state. Although Virginia is in the top 25% for per capita income, voters do not believe in taxing for support. Virginia is not a Medicaid expansion state and funding is very limited. VSH is focusing on messaging around the the public need and cross sector savings to develop support for additional resources.

PSH Funding Sources

Capital: State HOME; local HOME; CDBG; Federal Bank of Atlanta (.5-1% interest rates); corporations and foundations; hoping to reestablish Housing Trust Fund

Operating: Project-based vouchers (Section 8 Mod Rehab or Housing Choice Vouchers); Rental Income (30% of tenant income) covers property management site and building costs.

Services: CoC; SAMHSA; local general funds; CDBG; HOPWA; private dollars; Medicaid reimbursement

Words of Wisdom from VSH

PSH is the way to go. Learn what you can from others – PSH not an easy thing to develop and you don't want to reinvent the wheel. Know what is reasonable and what you can agree to; don't make promises you can't keep.

Don't short change the supportive services that people need. It's not just about the physical unit; if you're targeting those most in need, you really have to make sure you have qualified staff and services that are available for people without time limits. Incorporate mainstream systems including mental health, substance abuse, and medical care to enhance services.

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Permanent Supportive Housing Community Profile Salt Lake County

Permanent Supportive Housing Pipeline

Salt Lake County does not maintain a pipeline. They stopped building housing and focused on the scattered site model, but later realized about 300 additional units are needed and are planning for those now. No new construction will occur in 2015). Additional VASH vouchers will be available in 2015.

Creative Approaches

When the community had an opportunity to build 100 units of PSH in one facility, they first created a pilot in which the Housing First approach was utilized for chronically homeless consumers. This pilot allowed for testing of Housing First with little funding and low risk. Salt Lake County found that Housing First worked and moved forward with the development of hundreds of units over five years. They found it important to rethink how they were providing services and be unique & innovative. They have also prioritized consistency with reporting and requirements to streamline processes for providers and funders.

Salt Lake County has one fulltime person tasked with the job of traveling across the state to local homeless committees and assisting with creating new visions and implementing pilot projects. This person helps committees work through barriers and rethink housing models. They have found that having a champion with this fulltime responsibility is critical and highly recommend other communities do the same.

Community Description

In Salt Lake County, the State has taken the lead with PSH efforts. Salt Lake County is a very collaborative community with the support of the County Mayor, Governor, two major housing authorities and a large emergency shelter. Local housing authorities prioritized Section 8 vouchers for PSH units beginning in 2007. A state homeless coordination committee and three CoCs are very involved with PSH efforts and all partners have agreed on community priorities which has greatly strengthened the collaboration.

Prioritization of Units

Salt Lake County utilizes the VI-SPDAT assessment tool, and the household with the highest score receives the next available unit. In the past year, they combined multiple wait lists into one list and are working through Fair Housing requirements with HUD.

Key Partners

State; County; Cities; Homeless Service Providers; Housing Authorities

Community Rewards

Salt Lake County has reduced chronic homelessness by 70% and received much attention from the media as a national model. They have 1,200 chronically homeless individuals and families in housing with a 6% eviction rate. Many people are in housing and not in jail, saving the community thousands of dollars annually.

Community Challenges

Challenges are ongoing similar to other communities. Salt Lake County always needs more funding, needs to be more organized and have a clear vision. Competing with affordable housing developers is always an issue, but things moving along through collaboration and strong champions.

PSH Funding Sources

Capital – Low Income Tax Credits; Housing Authority housing vouchers; local foundations; HOME; Block Grant funds

Operating - Block Grant funds; Affordable Housing Fund; State Homeless Trust Fund; COC funds

Services - State Homeless Trust Fund; TANF; Block Grant funds

Words of Wisdom from Salt Lake County

You can take the route of criminalizing homelessness, which is ineffective, or you can have compassion for your homeless citizens. Work together to identify solutions and truly end homelessness by providing necessary supports for people to get housed and stay housed. Engage your high level politicians – mayors, governors, council members – you need champions to help remove barriers.

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Permanent Supportive Housing Community Profile Broward County, FL

Permanent Supportive Housing Pipeline

Since the 2011 HUD CoC Competition, Broward has added 177 Permanent Supportive Units for Chronically Homeless using reallocated/unused CoC dollars; 78 new units added in the 2013 CoC Competition; and anticipates adding 120 units for chronically homeless through New Reallocation and Bonus Projects via the 2014 CoC Competition. In addition, Broward recently received 57 new VASH vouchers.

They do not have an established group or planning process to monitor ongoing pipeline developments at this time.

Broward was one of 65 communities selected to participate in Community Solution's ZERO:2016 Initiative and looks forward to ending Veteran and Chronic Homelessness.

Creative Approaches

Broward County reallocated CoC resources from two transitional housing projects to help fund the new 42 units anticipated in the 2014 year's CoC Award.

Scattered site vouchers leverage local and state behavioral health dollars for services.

United Way of Broward ZERO:2016 Fiscal Agent for donations

Community Description

Total PSH Units: 932

- 86% of units are for single adults
- 14% of units are for families with children

Prioritization of PSH Units

Broward is beginning to implement the VI-SPDAT to prioritize people into PSH as part of their Coordinated Access process. Participating in 100,000 Homes campaign helped move the community toward prioritization. This is a new step for Broward – currently projects operate on a first come first served basis, and often did not reserve PSH for the most vulnerable in the community.

Key Partners

Broward Behavioral Health Coalition
Henderson Behavioral Health
Chrysalis Behavioral Health
Broward County Housing Authority
Broward Housing Solutions Inc.
Miami Health Care for the Homeless, Veterans Affairs
United Way Of Broward
City of Ft Lauderdale

Community Challenges

Using a scattered site approach puts a lot of pressure on finding landlords to rent to vulnerable people. This process can be time consuming, as it requires ongoing attentions. Engaging the primary alcohol and drug services providers has also been a challenge.

Housing consumers without income has been a challenge with limited resources for incidental costs.

Implementing a prioritization scale has produced tension and anxiety among shelter providers. While their population needs housing, they often do not shelter the most vulnerable people. In Broward the most vulnerable are usually sleeping outside. This requires a shift in philosophy and practice that will take time to implement.

PSH Funding Sources

Capital: No capital – all scattered site

Operating: CoC (f.k.a Shelter Plus Care); VASH

Services: CoC; Local and State Behavioral Health; private

Words of Wisdom

“Keep an open mind; no wrong ideas, and seek out non-traditional partners like the Chamber of Commerce and Real Estate Associations. In Florida, we often look to faith communities, and ministries often include adoption of households to provide basic supports. Highlighting both the social and cost benefit of ending homelessness through implementation of housing first philosophies appeals to different segments of community. It’s important to tailor your message to individual and groups. Keep the message simple, if it gets to complicated or government focused, it’ll turn people off.”

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