

# Rx:Housing

## **Report on Ending Chronic Homelessness in Louisville, Kentucky December 14, 2015**

In late 2014, Community Solutions selected Louisville, Kentucky as one of the twenty five cities in the country most likely to reach the U.S Interagency Council on Homelessness goals of ending both veteran and chronic homelessness by December 31, 2016. On veteran's day, November 15, 2015, Louisville reached "functional zero" in addressing veteran homelessness which means that all homeless veterans in the community had been identified by name and all had been housed except for a small number in process no larger than the number being housed on a monthly basis. Louisville is now preparing to meet the second goal of ending chronic homelessness in Louisville by the end of 2016. It should be noted that this work is not new for Louisville. The Louisville Continuum of Care began identifying and housing the chronically homeless in 2011. This effort has led to lower numbers of chronically homeless in the community each year and even while housing over 628 veterans in 2015, the community also housed 364 chronically homeless persons.

In order to reach "functional zero" in addressing chronic homelessness, we must gather the following: 1) a number needing to be served, 2) a list of resources already in place, 3) changes to take place to reach the goal and 4) any barriers preventing success. The group now called Rx: Housing will hold their first meeting on January 5, 2016 and continue to meet until the goal is met. We will continue to work with Community Solutions, HUD and others for assistance through the process:

**Agencies represented in Rx: Housing include:** The Office of the Mayor, The Coalition for the Homeless, St. Vincent de Paul, Volunteers of America (VOA), Louisville Metro Housing Authority (LMHA), Louisville Metro Community Services, Family Health Centers (FHC), St. John Center, Wellspring, Legal Aid Society, the Brain Injury Alliance, Seven Counties Services, Jeff Street at Liberty, Louisville Rescue Mission and Wayside Christian Mission.

**Number of Chronically Homeless Persons in Louisville:** The Louisville Homeless Management Information System has shown a steady decrease in the chronically homeless over the past four years. This is mostly due to the creation of a common assessment team that assesses every homeless person in the community and prioritizes permanent housing resources for those in greatest need versus those first in line. It is difficult to get consistent information on who was chronically homeless in the past due to changes in the chronically homeless definition and how it is recorded in the Homeless Management Information System database, but a print out of all persons identified as homeless since January 1, 2015, shows that the community has identified **490 known homeless chronically persons in Louisville, Kentucky**. This is a list of anyone identified as homeless and disabled in Louisville that has been homeless for over a year or that has been homeless more than four times in three years. National research shows that while this group may be smaller than the group originally identified as homeless veterans, most of this group will need permanent supportive housing. It is also important to note that more people will fall into this definition during the year as they remain in a state of homelessness and reach the one year threshold adding to our original list of 490.

**Outreach to the Chronically Homeless and Waiting Lists for Housing:** Seven Counties Services has an outreach team of four that provides outreach on the streets and in camps to identify and help the chronically homeless. Family Health Centers has an outreach team, mental health outreach team and common assessment team that work to identify, assess and rank any homeless persons in the community. These teams have agreed to make several changes in procedures to ensure that chronically homeless persons access all services they qualify to receive:

- 1) Seven Counties services will enter clients identified on the streets into HMIS and work to ensure that any chronically homeless persons identified are referred to the common assessment team.
- 2) The Louisville CoC will provide a preference in housing for the chronically homeless so that these clients in greatest need will get served first on the CoC permanent supportive housing waiting list.
- 3) Seven Counties Services and the Louisville CoC will get signed waivers from all clients to allow them to make direct referrals to each other and share information as needed.
- 4) The Coalition for the Homeless will work with volunteer outreach groups to add any folks not identified in HMIS.

**Emergency/Transitional Shelter:** Because it takes 30-180 days for homeless persons to access permanent housing, emergency/transitional housing options are needed. There are presently 406 emergency shelter beds for single persons at Salvation Army, St. Vincent de

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Paul and Wayside Christian Mission. There are also 122 transitional housing units for the minority of chronically homeless persons who may be able to make it on their own after drug treatment or other programming.

**Services, Benefits and Employment:** Several agencies has adopted the best practice model of “housing first” services in the provision of permanent supportive housing for the chronically homeless in our community. The costs of these services are covered through Community Development Block Grant, U.S. Department of Housing and Urban Development Supportive Housing Funding, Federal SAHMSA funding and local private dollars. A small group of providers have received their license to bill Medicaid for these services but most are still in process of making this happen. Family Health Centers has a full-time SOAR worker who makes sure each client receives the full benefits they are eligible to receive. Seven Counties Services ACT Teams and a St. Johns Center case manager are also available to help the chronically homeless navigate the service system to housing. Rx: Housing Chronic partners agreed to coordinate these changes to ensure that each chronically homeless person receives all the benefits and services they should in the following ways:

- 1) Five agencies are working to get licensed to bill Medicaid for behavioral health services in supportive housing.
- 2) Several agencies have met with the Jobs Center to create employment opportunities including supported employment.
- 3) The common assessment team will refer the chronically homeless on their list to ACT and St. John to help with the transition to permanent housing.

The following are barriers identified by Rx: Housing Veterans that if addressed could help coordinate services so that all veterans get help receiving benefits and opportunities for employment:

- A) Funding is needed to expand the SOAR program to other agencies.

**Verifying Disability and Chronic Status:** The Common Assessment Team will work with data provided in HMIS and staff at day shelters and outreach programs to verify homelessness. They will work with Family Health Centers and Seven Counties Services early in the project to verify disability for everyone possible in HMIS.

**Permanent Supportive Housing:** Most of the 490 chronically homeless identified in Louisville will need permanent supportive housing. While there are 860 permanent housing vouchers available through the Louisville Continuum of Care, most of these are full. At this point, approximately eight openings are available for new people to move in each year. To assist with the remaining need, Louisville Metro Housing Authority has made available 100 “move up” vouchers for those who are stabilized in the existing 860 vouchers above to get a

Section 8 voucher making their voucher with services available to someone new moving from the streets. This means that approximately 196 new permanent housing vouchers will be made available during the year. Rx: Housing Louisville has also agreed to the following:

- 1) The Louisville CoC will provide a preference in housing for chronically homeless persons.
- 2) LMHA will work to ensure that the most lenient policies are used in each housing subsidy program to ensure that as many persons in permanent housing will qualify for the Move Up vouchers as possible.
- 3) Rx: Housing will create a committee to review the cases of difficult to serve chronically homeless to address their housing needs.

We have identified the following barriers to permanent housing:

- B) Even when subsidies are available, there is a great shortage of efficiency and one-bedroom rental units in the community making it difficult to use these vouchers. We will need to continue to educate landlords about the need and may need to use policies from other communities like a signing bonus to get all the chronically homeless housed.

**Deposits and Household Items:** All 490 chronically homeless persons identified are expected to need access to an average of \$650 in security deposits and approximately \$1,100 in household items. The Coalition for the Homeless has funding raised through Give-a-Jam to serve approximately 20 so this is a huge service gap to meet our goal. This funding is the area where Rx: Housing Chronic feels the corporate and private members of our community could do the most to support the effort to end chronic homelessness.

Therefore, we have done the following:

- 1) Rx: Housing will ask the community to support funding for these items through websites, grant applications and community events.
- 2) St. Vincent de Paul has agreed to accept furniture and other items and give Rx: Housing partner agencies vouchers of equal value so that their clients can shop in their stores for items they need to set up their homes.
- 3) Community partners have multiple studies available to show the community the cost savings of housing this population versus allowing them to live on the streets.

We have identified the following barrier where the Office of the Mayor and city could help:

- C) Rx: Housing needs to recruit corporate and other private entities interested in helping the chronically homeless move into housing. Funding is especially needed for furniture (something to sit on, eat on and sleep on) and household items like sheets and dishes as well as service staff to help the chronically homeless access and move into their apartments.

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