



## FY 2016 Annual Report

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### Executive Summary

The Greater Virginia Peninsula Homelessness Consortium (GVPHC) had a banner year in FY 2016 as it continues to create innovative programs, set and exceed goals, and garner recognition for excellence in community service. Over the past year, the coalition launched Impact Thursday, an innovative project for families with children; participated in a National Alliance to End Homelessness (NAEH) training for Emergency Shelters Best Practices; and was awarded, along with member organization LINK, the *Outstanding Social Service Community Leadership* award from the Human Rights Commission. Reflecting its vision that *homelessness will be rare, brief and non-recurring*, the GVPHC member organizations continue to improve the housing and services that help their clients achieve housing stability.

The GVPHC has also implemented a set of System Performance Measures defined by the U.S. Department of Housing and Urban Development (HUD) to gauge its progress and identify where improvements are needed. The coalition reports some of the key successes below:

- Decreasing the annual number of persons experiencing first-time homelessness by 209 persons
- Decreasing the annual number of persons experiencing homelessness as reflected in the Homeless Management Information System (HMIS) by 226 persons
- Decreasing the percent of returns to homelessness for persons who have exited permanent housing to just 12%
- Retaining 96% of those in permanent housing programs or ensuring that they exited to other permanent housing

The GVPHC partnered with 32 member organizations to secure \$2.8 million in federal funds and \$1.3 million in state funds for 39 housing and homeless service programs across the region. With support and guidance from the Mayors and Chairs Commission on Homelessness, the GVPHC is committed to making data driven decisions that will ensure that homelessness is indeed rare, brief and non-recurring.

## About the GVPHC

The Greater Virginia Peninsula Homelessness Consortium (GVPHC) is a coalition of public and private organizations that maintains a current and viable process to end homelessness and provides services and resources to the most vulnerable households and individuals across the following six (6) jurisdictions: the cities of Hampton, Newport News, Poquoson, and Williamsburg, and the counties of James City and York.

The GVPHC serves as the region's Continuum of Care (CoC) organization, and is responsible for coordination and management of federal and state funding for homeless services; the Hampton Department of Human Services acts as the lead agency for the CoC. Coordination and facilitation is provided by The Planning Council. Persons who have experienced or are experiencing homelessness are encouraged to participate in the process, as well.

The GVPHC recognizes the following standing committees:

- Leadership Team
- Program Monitoring Committee
- HMIS Committee
- GVPHC Housing Resources Committee
- Service Coordination and Assessment Network (SCAAN) Committee

For more information, including current officers and a list of partner agencies, please visit [www.gvphc.org](http://www.gvphc.org).

The GVPHC has adopted the vision that *homelessness will be rare, brief, and non-recurring*. This report focuses on the CoC's efforts to make this vision a reality for the residents of the Greater Virginia Peninsula. The report period is July 1, 2016 through June 30, 2017. Much of the data provided in this report is sourced from the Hampton Roads Homeless Management Information System (HMIS), administered by The Planning Council.

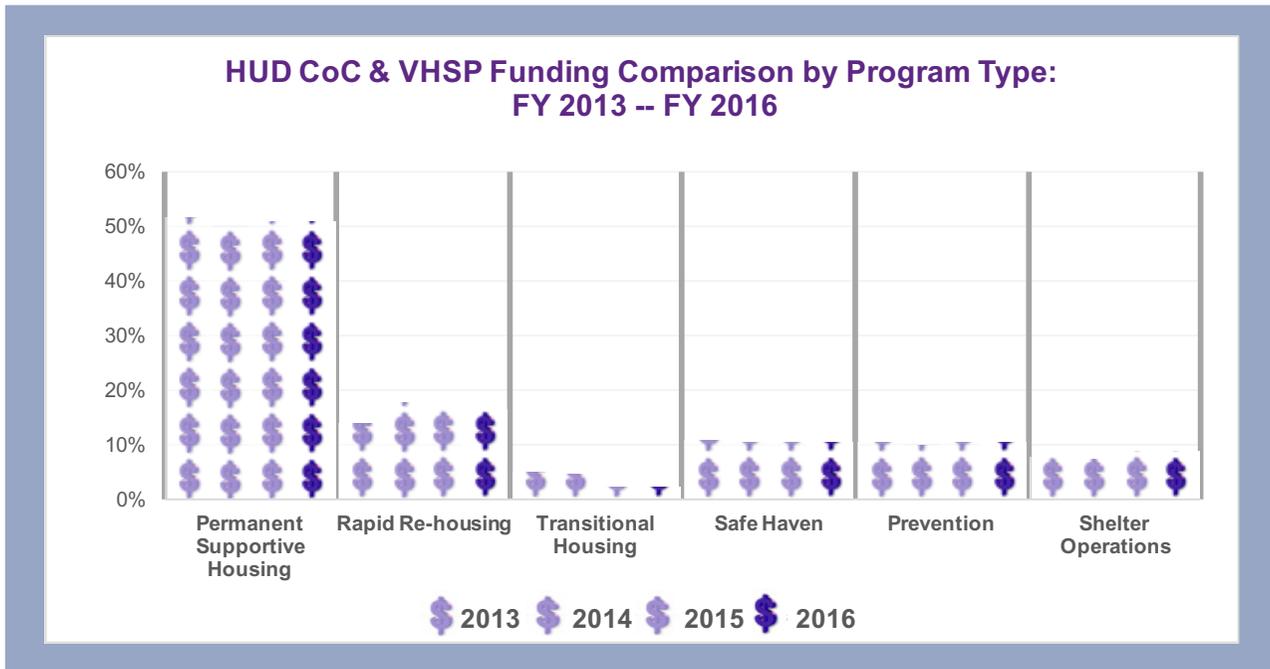
## About Hampton Roads HMIS

As stated above, this report includes data provided by member agencies to the Homeless Management Information System (HMIS). The GVPHC, the Southeastern Virginia Homeless Coalition (SVHC), the city of Virginia Beach CoC, the city of Portsmouth CoC, and the Central Virginia CoC have merged their HMIS databases, creating the Hampton Roads HMIS. HMIS is the repository for client level data, which helps identify gaps in services and offer a better understanding of the needs of the service population.

HMIS participation is required for federally and state funded homeless service providers; other providers voluntarily participate. There are a few non-HMIS participating providers in the region; their data will not be reflected in this report. For a list of participating agencies, please visit [www.gvphc.org/hmis.html](http://www.gvphc.org/hmis.html).

## Federal & State Funding Update

In FY 2016, the GVPHC was awarded **\$2,017,216** from the U.S. Department of Housing and Urban Development (HUD), and **\$1,039,438** from the Virginia Homeless Solutions Program (VHSP). The Hampton-Newport News Community Services Board was also awarded funding for the Road2Home program through the Cooperative Agreement to Benefit Homeless Individuals (CABHI), administered by the Substance Abuse Mental Health Services Administration (SAMHSA). The program provides \$798,576 from SAMHSA for clinical services, and \$350,000 from the Virginia Department of Behavioral Health and Developmental Services (DBHDS) for housing vouchers. An additional \$379,000 Permanent Supportive Housing expansion grant was awarded to Road2Home in FY 2018.



HUD and VHSP housing funds were allocated to the following program types:

- Permanent Supportive Housing
- Rapid Re-housing
- Transitional Housing
- Safe Haven
- Prevention
- Shelter Operations.

Compared to FY 2013, the CoC has increased Rapid Re-housing funds by \$78,607, for a total Rapid Re-housing investment of \$449,513.

## CoC Activities

Between July 1, 2016 and June 30, 2017, the GVPHC launched a variety of planning and community engagement activities. Many of these activities support the CoC's efforts to meet the goals of *Opening Doors*, the Federal Strategic Plan to Prevent and End Homelessness. A few highlights are listed below:

- Conducted Annual Point in Time Count
- Was awarded by the Human Rights Commission for *Outstanding Social Service Community Leadership*
- Hosted Annual Landlord Partnership Forum
- Launched Impact Thursday, an innovative program to reach hard to serve families with children in the schools
- Participated in National Alliance to End Homelessness (NAEH) training for Emergency Shelters Best Practices
- Continued to improve Coordinated Assessment Process with completion of the Service Coordination and Assessment Network (SCAAN) Committee Participation Agreement
- Successfully compiled and submitted the Annual Homeless Assessment Report (AHAR), the Homeless Community Outcomes Report, and the System Performance Measures (SPMs)
- Hosted Newport News Project Homeless Connect
- Participated in Hampton Roads Youth Count 2017

## Coordinated Assessment

One of the primary duties of the CoC is to facilitate a functioning system of coordinated entry and assessment. The CoC has a "No Wrong Door" approach: if persons experiencing homelessness present, they are assessed using the Coordinated Assessment tool. The GVPHC offers the following central access points to the service delivery system:

- The Regional Housing Crisis Hotline, operated by ForKids, inc.
- LGBT Life Center of Hampton Roads
- Outreach
- Emergency Shelters/Day Centers

All persons presenting for services are assessed for diversion and prevention; if those efforts are unsuccessful, the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT) is completed and presented at the Service Coordination and Assessment Network (SCAAN) meetings. Both the results of this assessment and the case history provide the basis for decisions made by the service providers which comprise SCAAN; the committees then make appropriate referrals to available housing programs. For more information, please visit [www.gvphc.org/provider-resources.html](http://www.gvphc.org/provider-resources.html).

Since the inception of tracking case progress through SCAAN:		
	# Housed	# Matched with a Housing Program
Upper SCAAN	104	11
Lower SCAAN	345	43

## System Performance Measures

Measuring the performance of the system as a whole is a helpful way to gauge the progress the CoC is making toward meeting the goals of *Opening Doors*. HUD has defined the following 7 System Performance Measures, whereby not only the success of each CoC is shown, but also areas for improvement to prevent and end homelessness.

1. Length of time persons remain homeless
2. The extent to which persons who exit homelessness to permanent housing destinations return to homelessness
3. Number of homeless persons
4. Jobs and income growth for homeless persons in CoC program-funded projects
5. Number of persons who become homeless for the first time
6. Homelessness prevention and housing placement of persons defined by Category 3 of HUD's homeless definition in CoC program-funded projects
7. Successful housing placement and retention

These measures fulfill requirements of the HEARTH Act, which required HUD to grant funding based on competitive, measurable outcomes, or performance based selection criteria. They evaluate system-wide performance of both federally funded and not federally funded agencies. The data is sourced from HMIS, with the exception of one measure that also takes Point in Time Count data into account.

As this was the second year the System Performance Measures were required for inclusion with the CoC annual competition for HUD funding, the GVPHC submitted a report covering October 1, 2015 through September 30, 2016. The data in this report covers the more recent date range of July 1, 2016 through June 30, 2017. Many of the measures allow the CoC to look back at the prior year for comparison; this is noted in the analysis following.

**Measure 1** shows a 19% increase in the length of time homeless for persons in Emergency Shelter, Safe Haven, and Transitional Housing; as this measure calculates the number of nights persons are served in HMIS participating programs, the increase is impacted by changes in participation and data quality in those programs. HUD has chosen to include Safe Havens in this category, although in the GVPHC, the Safe Haven program is a Permanent Supportive Housing program.

**NEW IN 2016:** An additional way length of time homeless is measured is by looking at HMIS homeless history questions (self-report of the approximate date their homelessness began), which provide a fuller picture of the length of time persons are experiencing homelessness. For persons served by Emergency Shelters and Safe Havens, the average length of time homeless was 322 days; the average length of time homeless increases to 335 days when persons served by Transitional Housing programs are included in the measure.

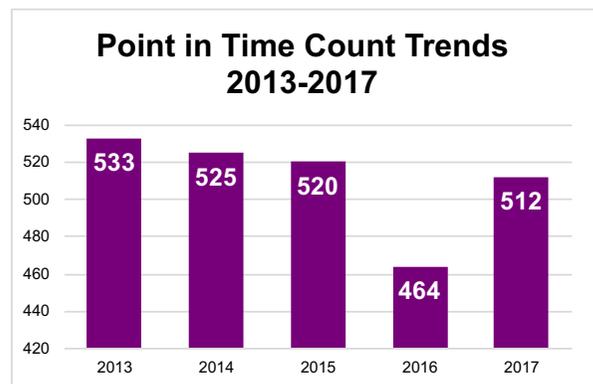
**Just 12% of total exits to permanent housing returned to the homeless system.**

**Measure 2** illustrates a fairly low total rate of returns to homelessness for persons who have exited to permanent housing (12%); the rate of return is a bit higher for persons who exited from Emergency Shelter to Permanent Housing (15% rate of return to homelessness after Permanent Housing Exit). For persons who exited from Permanent Supportive Housing, Other Permanent Housing, and Rapid Re-housing projects to Permanent Housing, the rate of return to homelessness increases as time goes by; this trend may indicate a need for follow up services for those clients.

**Measure 3** demonstrates that the overall number of persons experiencing homelessness is decreasing based on HMIS entries (226 fewer persons served in 2016). The decrease was consistent across the following project types included in the measure:

- Emergency Shelter (206 fewer persons served)
- Transitional Housing (22 fewer persons served)
- Safe Haven (8 fewer persons served).

Although the Point in Time (PIT) Count total increased from 2016 to 2017 (48 person increase), the overall trend over the past 5 years is decreasing (for the full PIT Report, please visit [www.gvphc.org/homeless-data1.html](http://www.gvphc.org/homeless-data1.html)).



**Measure 4** examines the Employment and Income Growth for persons served by HUD CoC funded programs—both for persons who are still being served (stayers) and persons who exited (leavers). This year, an increasing number of stayers show an increase to their total income (from 31% to 35%). Looking at leavers, there was a slight decrease in the rate of total income increase (from 48% to 41%). The highest portions of the income increases are due to the Non-Employment Cash Income category; increasing earned income remains a challenge.

It's important to note that a majority of HUD CoC funding on the Peninsula is awarded to Permanent Supportive Housing projects. Persons served in these projects are often better able to maintain income than to increase it. The GVPHC has demonstrated success with long term housing stability for this project type (see Measure 7 below).

**Measure 5** reports the number of persons experiencing homelessness for the first time; this is calculated by looking for existing HMIS records from 2 years prior to the report year for two categories:

1. Persons served by Emergency Shelter, Safe Haven, and Transitional Housing programs
2. Persons served by Emergency Shelter, Safe Haven, Transitional Housing, Permanent Supportive Housing, and Rapid Re-housing programs.

This year, there 209 fewer persons who became homeless for the first time in the first category, and 180 fewer in the second category; this data aligns with the overall totals of homelessness, which are also decreasing.

**Measure 6** was not required this year, as no CoCs across the country were authorized to serve persons who meet other definitions of homelessness besides HUD’s final rule.

**Measure 7** demonstrates the rate of positive destinations and housing stability for persons who exited the following program type categories:

- Street Outreach (47%)
- Emergency Shelter, Safe Haven, Transitional Housing, & Rapid Re-housing (47%)
- Permanent Housing programs (96%).

This measure combines Rapid Re-housing with Emergency Shelter, Transitional Housing, and Safe Haven, rather than Permanent Housing programs. The lower rate of successful placement in permanent housing for that combination of program types is likely attributable to lower rates of permanent housing exits from Emergency Shelter.

Looking ahead, the GVPHC plans to regularly assess the performance of the system using these measures. These assessments will enable the community to use the data in the following ways:

- Help determine gaps in service delivery.
- Identify programs that may benefit from increased technical assistance.
- Identify opportunities for reallocation.

## Conclusion

The GVPHC is well on its way to meeting the goals set forth by *Opening Doors*. The CoC is client-focused and committed to making data driven decisions for strategic planning, with the vision that *homelessness will be rare, brief, and non-recurring*. The GVPHC’s capacity continues to grow, but so does the need for expanded services and resources.

Through Coordinated Assessment, the CoC will continue to prioritize the most vulnerable families and individuals, with a special focus on:

- Veterans;
- those experiencing chronic homelessness; and,
- youth (up to age 24).

Reaching the goals of the Federal Strategic Plan and improving the System Performance Measures will continue to be the work of the community, together. To that end, the GVPHC recognizes the support and guidance of the Mayors and Chairs Commission on Homelessness with appreciation. For additional information, or to get involved with local CoC activities, please visit [www.gvphc.org](http://www.gvphc.org).



### COMMISSION ON HOMELESSNESS

*Special thanks to the Mayors & Chairs Commission on Homelessness for their continued leadership & guidance for the efforts of the GVPHC.*

#### Members:

Wanda Rogers, City of Hampton  
Barb Watson, James City County  
Alan Archer, City of Newport News  
Judy Wiggins, City of Poquoson  
Pete Walentisch, City of Williamsburg  
Abbitt Woodall, York County