“Treat each person’s episode of homelessness as an urgent crisis!”

COORDINATED ENTRY

Engage persons with lived experience in advocacy meetings with elected officials

Purposeful Strategic Planning Process
Includes stakeholders of all types
Centers lived experience

System Performance
“Ideal Scenario”
Vs. Poor System Flow
Immediate access to help
No one unsheltered
Short periods of homelessness
People do not re-enter the homeless system

Unchanging number of unsheltered
Waitlists for shelter
High exits from shelter to homelessness
Average LOH not decreasing
Steady/increasing inflow
Long waitlists for PSH & RRH

Effective Homeless Response
Right-sizing (all pieces of system built to scale at the same time)
RRH to scale
  (Bridge housing shortened Vegas’ LOH post-referral from 90 days to 7 days)
Balance of temp and perm housing
  (Houston has reduced, to the extent possible, beds dedicated to special sub-populations)
Outflow from PSH to other PH is a bottleneck!
Shallow subsidies

DIVERSION as a CULTURE
System-level Progressive Engagement
High performers focus on diversion at every point in the process
“Creative conversations”
Allow time for self-resolution (30 days); 25% self-resolve, the rest go into the priority pool

WE HAVE GOT TO DO MORE FOR UNACCOMPANIED SINGLE PEOPLE.
Disparity for singles in PIT/HIC data
Vets - 75/100
TRANSGENDER ISSUES IN HOMELESSNESS
⅓ of transgender persons have faced homelessness. When coupled with family rejection, HIV pos status, and/or sex work, they are 2x more likely. 70% of transgender persons seeking shelter have experienced violence, harassment, discrimination, and/or placement in “incorrect housing”

SERVICE PARTICIPATION REQUIREMENTS & HOUSING FIRST
CoC programs may NOT require disability-related services
CoC programs may NOT require substance use treatment (unless you are a substance use program)
PSH programs must make every possible effort to not evict people
“Do not do things to make people lose their housing.” -Norm Suchar