

Office to Prevent and End Homelessness



Department Overview

The Office to Prevent and End Homelessness (OPEH) manages, coordinates, and monitors day-to-day implementation of homeless programs to achieve the goals in the Ten Year Plan to Prevent and End Homelessness (the Ten Year Plan) in Fairfax County. Specifically, OPEH is responsible for the management, oversight and operation of most of the homeless programs and services provided by the County, including homelessness prevention, rapid rehousing, emergency shelters, hypothermia prevention, and permanent supportive housing programs. It provides guidance and staff support to the Governing Board of the Fairfax-Falls Church Community Partnership to Prevent and End Homelessness. The OPEH leads strategic collaborative initiatives focused on addressing the needs of those experiencing homelessness in the community. It also takes the leadership role in homeless services redesign efforts and coordinated access planning and implementation. The OPEH tracks successes, initiates and maintains public awareness of homelessness, educates the larger community, and established and coordinates the Consumer Advisory Council.

OPEH has also been designated as the lead County agency for the Continuum of Care (CoC) program and is responsible for the County's annual Point in Time Count, a count of sheltered and unsheltered homeless persons on a single night. Federal funding for the CoC program currently totals more than \$7.6 million and supports 27 projects which are sponsored by 14 non-profit organizations and multiple County agencies. The projects include transitional and permanent supportive housing programs for individuals and families, as well as one planning grant.

Office to Prevent and End Homelessness

Department Resources

Category	FY 2014 Actual	FY 2015 Actual	FY 2016 Adopted
FUNDING			
Expenditures:			
Compensation	\$781,451	\$792,026	\$824,376
Operating Expenses	10,571,993	10,115,810	11,317,173
Capital Equipment	6,305	6,759	0
Total Expenditures	\$11,359,749	\$10,914,595	\$12,141,549
General Fund Revenue	\$0	\$0	\$0
Net Cost/(Savings) to General Fund	\$11,359,749	\$10,914,595	\$12,141,549
POSITIONS			
<i>Authorized Positions/Full-Time Equivalents (FTEs)</i>			
Positions:			
Regular	8 / 8	8 / 8	8 / 8
Total Positions	8 / 8	8 / 8	8 / 8

Lines of Business Summary

LOB #	LOB Title	FY 2016 Adopted	
		Disbursements	Positions
155	Leadership and Engagement	\$348,177	3
156	Emergency Shelter	10,209,471	1
157	Hypothermia Prevention Services	690,895	1
158	Supportive Housing Services	893,006	3
Total		\$12,141,549	8

Lines of Business

LOB #155:

LEADERSHIP AND ENGAGEMENT

Purpose

The Office to Prevent and End Homelessness, under the leadership of the Director, provides overall direction and oversight of agency-wide operational and administrative functions, to include establishing departmental strategic direction and promoting program accountability through performance measurement. The OPEH leadership also provides direction and support to the Fairfax-Falls Church Partnership to Prevent and End Homelessness, which includes the Governing Board and Consumer Advisory Council. In addition, OPEH oversees General Fund, state, and Continuum of Care federal resources directed to prevent and end homelessness. Through the active facilitation of partnerships with nonprofit, faith-based organizations, and businesses, resources are leveraged, awareness is raised and stakeholders are engaged to effectively prevent and end homelessness in the community.

Description

The Ten Year Plan to Prevent and End Homelessness, adopted by the Fairfax County Board of Supervisors in 2008, lays out a new road map for the Fairfax-Falls Church community that focuses on keeping people from becoming homeless in the first place, increasing and preserving affordable housing, delivering integrated social services to those who need it, and creating a community partnership that ensures accountability and funding. The plan requires partnership and collaboration between government, business, faith and non-profit communities, as does the operation and support of the County's current homeless services. Ending homelessness will require a high level of commitment and cooperation and active participation from all sectors. Partnership efforts are led by the OPEH Partnership manager who works to achieve the following principles: community acceptance and support of the Housing First approach; strong political will to provide leadership, commitment, resources, support, and government flexibility; strong participation from the business community; cooperative leadership and management throughout the community; collaboration across all agencies to make the necessary organizational, policy, practice, and process changes needed to implement the plan; meaningful opportunities for input from persons who are or have been homeless; diverse funding and resources throughout the community and accountability of all participating organizations.

OPEH manages and provides contract oversight of nonprofit organizations for the operation of the following homeless services: emergency shelters, the hypothermia prevention program, motel placements, transitional housing, permanent supportive housing, homelessness prevention and rapid rehousing funds, Continuum of Care grants, and Housing Opportunities Support Teams (HOST). Homeless support services are also provided by other County agencies, such as the Department of Housing and Community Development, the Fairfax-Falls Church Community Services Board, the Department of Family Services, and the Health Department. OPEH works closely with these agencies to facilitate coordination that ensures effective and efficient service delivery. In addition, OPEH responds to community concerns raised to the Board of Supervisors and others concerning the homeless in the community. The Director and OPEH staff also represent Fairfax County in regional and national discussions and conferences.

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Leadership responsibilities of the Director include:

- Administratively established within the Fairfax County government to manage, coordinate, and monitor day-to-day implementation of the Ten Year Plan to Prevent and End Homelessness,
- Assure coordinated execution of the work and staff the Governing Board,
- Track successes and trends,
- Communicate with the larger community, and
- Coordinate with the Consumer Advisory Council.

Engagement initiatives facilitated by OPEH to increase awareness and community participation include:

- Jeans Day (Denim Day) is an international event held to show support for many “causes.” In Fairfax, Jeans Day has been implemented to help those experiencing homelessness in the community. Partnering with non-profit service providers and local businesses, Jeans Days are held as awareness campaigns and fund raising. Participants donate \$5 (or more) for the privilege to wear denim/jeans to work on the day identified as Jeans Day. In most areas corporations encourage their employees to be involved by paying or donating to wear jeans for a cause. Some participating corporations match the funds raised by their employees. All funds raised provide services to clients.
- 100,000 Homes is a national movement to identify the most vulnerable people experiencing chronic homelessness. They are identified as particularly vulnerable because of co-existing health and/or substance abuse issues so significant that they are the most likely to die on the streets if not housed. It has been estimated that living on the streets shortens lifespan by 25 years. Ultimately, the campaign’s mission was to find permanent homes for 100,000 such people. States and localities joined the campaign to operationalize and implement it in their communities. The 100,000 Homes Fairfax has identified 300 unsheltered people at high risk of mortality, and housing them is an OPEH priority.
- The Mayor’s Challenge is an effort announced by first lady Michelle Obama and amplified by the U.S. Department of Housing and Urban Development, the United States Department of Veterans Affairs, the United States Interagency Council on Homelessness and the National League of Cities. The Mayors Challenge calls for mayors (and other jurisdiction leaders) to make a commitment to ending veteran homelessness in their communities in 2015.
- The Mannequin Campaign was designed to raise awareness that homelessness does exist in Fairfax County despite its wealth. Mannequins are on display in locations throughout the County, representing the faces of homelessness in the area. Each mannequin holds a placard asking residents “Do You Know Me? Can You See Me?” and a profile that tells the story of individuals/families actually experiencing homelessness in the community.
- Build a Village – Business, civic, faith and community-based organizations, and individuals will be asked to be engaged in ending homelessness through their involvement and financial support. Donors may buy a virtual brick or house online by providing monetary donations to the Fairfax-Falls Church Partnership to Prevent and End Homelessness. Proceeds will go to further the partnership’s programs and to provide housing solutions for those who are currently homeless.

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Benefits

The essence of the Office to Prevent and End Homelessness Leadership and Engagement LOB is defined in the Fairfax County Ten Year Plan to Prevent and End Homelessness. The plan establishes a coordinating office to bring about an unprecedented level of collaboration among the many diverse actors in what was a highly fragmented homeless services system. These partners include more than 20 non-profit organizations, as well as County human services agencies like the Department of Neighborhood and Community Services, the Fairfax-Falls Church Community Services Board, the Department of Family Services, and the Department of Housing and Community Development. Beyond these organizations, there is also active engagement needed with numerous faith communities, business and community partners who have an interest and role in preventing and ending homelessness in Fairfax County.

Providing leadership for the County's efforts with such a diverse group of partners requires maximum and ongoing effort. Gaining the trust of so many partners requires transparency and development of reliable data and reporting mechanisms. Gaining commitment requires engagement in a variety of formats, including coordinating policy boards, community forums, social media, special fund raisers and events designed to raise awareness of the need for and support of the mission to end homelessness. These reasons represent why the Leadership and Engagement LOB is a necessary and critical piece in the community's effort to end homelessness.

The value of this LOB is a consistent, publicized effort around making homelessness for families and individuals rare and brief in Fairfax County. A safe and caring community requires that all of its residents have their basic needs met, including adequate housing. The poor outcomes for homeless families and individuals are well documented and include reduced children's health outcomes and school achievement and poor health, early death for unsheltered adults, and increased involvement in the criminal justice system. All of OPEH's programs and services are coordinated through the Leadership and Engagement function with the singular focus on preventing and ending homelessness in Fairfax County.

Mandates

There are no mandates for the establishment of the Partnership to Prevent and End Homelessness. However, the Ten Year Plan, approved by the Board of Supervisors on March 31, 2008, established specific strategies that must be utilized to prevent and end homelessness. It is the Ten Year Plan that guides the work in the Office to Prevent and End Homelessness.

Trends and Challenges

The goal is that every person who is homeless or at risk of being homeless in the Fairfax Falls Church community is able to access appropriate affordable housing and the services needed to keep them in their homes. Even after homelessness has ended in the community, people will continue to experience crises that put them at risk of homelessness. Additionally, there will always be some people who choose homelessness over other options that are available to them.

The goal of ending homelessness in Fairfax County is not about any one organization or the particular services that they provide. The partnership relies on OPEH working with seasoned and capable nonprofits, the faith community, businesses, and other County agencies to implement a collective community response to the circumstances that make an individual vulnerable or homeless, and then rapidly placing them in safe and affordable housing. The community plan references high level goals and strategies for ending homelessness. In order to measure the community's progress, the goal is that the total number of people who are homeless and not in permanent housing decreases every year over the course of the Ten Year Plan. There has been a 34 percent decrease in the number of literally homeless persons in Fairfax County since 2008.

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The Point-in-Time (PIT) count is a count of sheltered and unsheltered homeless persons on a single night in January. The U.S. Department of Housing and Urban Development (HUD) requires that Continuums of Care conduct an annual count of homeless persons who are sheltered in emergency shelter, transitional housing, and Safe Havens on a single night. This provides a national snapshot of the numbers of people experiencing homelessness. It also provides localities with a snapshot of their community. In the January 2015 Point in Time count there were 1,204 people who were reported as literally homeless in the Fairfax-Falls Church community. The 34 percent decrease represents the difference between people who were reported as literally homeless in 2008 and those who were reported as homeless in 2015.

The largest challenge for the community in preventing and ending homelessness continues to be the lack of affordable housing. Market rates far exceed the earning capacity for the homeless in the community. Spending more for housing than what is affordable threatens the stability of households and puts them at risk of homelessness or makes it difficult for them to become stable in the community. Over 60 percent of adults in local family shelters are working one or two jobs and are still unable to remain self-sufficient. Housing options for people with limited job skills or employment opportunities, as well as those individuals with other challenges like mental illness or substance abuse, are scarce. It will be difficult to maintain progress in preventing and ending homelessness without additional affordable housing opportunities.

Resources

Category	FY 2014 Actual	FY 2015 Actual	FY 2016 Adopted
LOB #155: Leadership and Engagement			
FUNDING			
<u>Expenditures:</u>			
Compensation	\$329,536	\$346,599	\$333,958
Operating Expenses	6,817	21,580	14,219
Total Expenditures	\$336,353	\$368,179	\$348,177
General Fund Revenue	\$0	\$0	\$0
Net Cost/(Savings) to General Fund	\$336,353	\$368,179	\$348,177
POSITIONS			
Authorized Positions/Full-Time Equivalents (FTEs)			
<u>Positions:</u>			
Regular	3 / 3.3	3 / 3.3	3 / 3.3
Total Positions	3 / 3.3	3 / 3.3	3 / 3.3

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LOB #156:

EMERGENCY SHELTER

Purpose

The Emergency Shelter LOB includes emergency shelter and rapid rehousing assistance for those families and individuals who are homeless, as well as homelessness prevention assistance for those families and individuals at risk of homelessness.

Fairfax County's Emergency Shelter line of business provides critical services to people experiencing homelessness in the Fairfax-Falls Church community. Through contracts with five community non-profit partners, OPEH operates six emergency shelters that provide shelter for households with and without children. Shelters provide meals, case management services and a temporary place to stay while appropriate housing is obtained. All emergency shelters are run 24 hours a day, seven days a week, 365 days a year. During FY 2015, a total of 1,903 people were provided a safe, temporary place to stay by utilizing the County's emergency shelter program.

Case managers and housing locators work closely with clients at risk of homelessness and those who are literally homeless. When working with clients, staff utilizes the Housing-First approach. The primary goal of effective services is to resolve the client's housing crisis by:

- Preventing homelessness whenever possible,
- Reducing the length of time spent in emergency shelter, and
- Assisting clients in identifying and securing stable housing.

Description

The emergency shelters, homelessness prevention and rapid rehousing assistance programs are listed as one LOB because they are integrally related. The shelters provide the clients with safe, temporary housing and meals while the staff work with clients to link them to needed services and to resolve their housing crisis.

The County's first emergency shelter opened in 1978. The following table provides a description of the County-funded emergency shelters. The Office to Prevent and End Homelessness oversees contracts with five community non-profits to manage their day to day operations. In addition to staff that provide direct services to clients, the shelters also benefit from many community donations and volunteers. OPEH has staff dedicated to oversight of the shelter and case management programs that serve households both with and without children. They work closely with providers and contract staff to ensure the programs meet the rigorous program and fiscal requirements. They do strategic work with the non-profit partners to foster good outcomes for clients across the system and the program's ability to meet required performance measures. In addition, some client's situations are particularly complex and challenging. OPEH staff convenes meetings with non-profit partners, other County agencies and clients to address and come to resolutions on these complicated cases.

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Human Services Region	Name of Shelter
Region I	<p>Eleanor U. Kennedy Shelter - Provision of emergency shelter services and outreach services for households without children. Typically the shelter has 50 beds serving men and women.</p> <p>Next Steps Family Program - Provision of emergency shelter and outreach services for 18 households with children in County rented apartments.</p>
Region II	<p>Bailey's Crossroads Community Shelter - Provision of emergency shelter for households without children. The shelter has approximately 50 beds serving men and women.</p> <p>Patrick Henry Family Shelter - Provision of emergency and outreach service for households with children. This year round shelter serves 7 large families. Large families are defined as having 5 or more members.</p>
Region III	<p>Embry Rucker Community Shelter - Provision of emergency shelter for households without children and households with children. The shelter has approximately 70 beds. Twenty eight beds are for households without children and there are 10 rooms which accommodate households with children. In collaboration with the Department of Family Services and the Health Department, 5 beds are made available for short-term medical respite care.</p>
Region IV	<p>Katherine K. Hanley Family Shelter - Provision of emergency shelter and outreach services for 20 households with children.</p>

Contracted services are provided by the same non-profit partners. These services are provided in shelters and in the community. Case Managers follow the Housing First model and utilize a strength-based approach that values the importance of fully engaging the resident(s) in the development of a task-based housing and service plan.

Benefits

While it is critical for communities to have emergency shelters so that people facing housing crises are not forced to live unsafely on the streets, shelters are not appropriate long-term housing solutions. Services that quickly and effectively address these housing crises are crucial so that homelessness can be prevented or those that become homeless can be rapidly re-housed.

The Ten Year Plan to Prevent and End Homelessness utilizes the Housing First approach. This approach is based on the idea that when people have the security of knowing they are safely housed, they can then begin to effectively address the issues that caused or contributed to their housing crisis. The stress of homelessness strongly impacts their ability to look for jobs, do well in training programs, overcome substance/alcohol abuse issues, overcome illness, etc. Basic needs must be met before tackling the more complicated issues. This approach strives to minimize the amount of time a person or family is homeless. The stress of prolonged homelessness, whether on the streets or in shelters, is associated with many physical, emotional and cognitive risks.

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Specifically, homelessness and its accompanying stress are correlated to higher rates of communicable diseases, complex medical conditions, (e.g., diabetes, asthma, cardiovascular disease), domestic violence, mental health problems, substance and alcohol abuse. Homelessness can be particularly detrimental to children's health and development. Children living with chronic stress and unpredictability are more likely to have higher levels of health, emotional, and behavior problems. Their school performance and ability to learn under these conditions is often negatively impacted. This is of particular importance to Fairfax County because in the 2015 Point-in-Time count, 36 percent of the total number of people that were homeless were under the age of 18. It is critical that we work to house and stabilize people in housing crises in order to lessen the impact of these issues. By temporarily sheltering people and providing effective case management that houses people quickly, homeless service programs work tirelessly to minimize these risks in the community. The value of this work to the community is demonstrated by the fact that the homeless population has decreased by 34 percent since the Board of Supervisors' endorsement of the plan to end homelessness and the implementation of the Housing First approach.

Mandates

This Line of Business is not mandated.

Trends and Challenges

The greatest challenge facing this LOB is the continued lack of affordable housing in the community, as well as insufficient resources dedicated specifically to house the homeless.

Despite the success of reducing homelessness by 34 percent since 2008, the emergency shelters remain full. Contrary to some prevalent stereotypes, many people experiencing homelessness are employed. In the 2015 Point-in-Time Count, 62 percent of adults in homeless families were employed but did not earn enough to obtain and sustain housing because of the lack of affordable housing options available. Additional trends and challenges for people experiencing homelessness and/or residing in shelters include:

- High housing barriers, including extremely low income, criminal history, and poor credit.
- Reduced federal rental assistance available.
- A disproportionate representation of racial and ethnic minorities in the homeless system. A total of 52 percent of the people identified as experiencing homeless during the 2015 Point-in-Time Count were Black or African American.
- Increased number of refugees and asylees. These individuals need long term resettlement programs. Our housing crisis system does not have the intensive resources and supports appropriate for assisting them; however, they enter our homeless system because that is the only option available to them.
- An increasing number of older adults, who become more medically fragile. The County's homeless system has limited capacity to serve medically fragile people experiencing homelessness.
- Limited employment opportunities for individuals with minimal job skills or education.
- Challenges with earning potential in relation to cost of living in Fairfax County. Many clients have two or three jobs and still cannot afford housing.

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Resources

Category	FY 2014 Actual	FY 2015 Actual	FY 2016 Adopted
LOB #156: Emergency Shelter			
FUNDING			
<u>Expenditures:</u>			
Compensation	\$124,337	\$122,056	\$135,468
Operating Expenses	9,524,048	9,026,268	10,074,003
Capital Equipment	6,305	6,759	0
Total Expenditures	\$9,654,690	\$9,155,083	\$10,209,471
General Fund Revenue	\$0	\$0	\$0
Net Cost/(Savings) to General Fund	\$9,654,690	\$9,155,083	\$10,209,471
POSITIONS			
<i>Authorized Positions/Full-Time Equivalents (FTEs)</i>			
<u>Positions:</u>			
Regular	1 / 1.3	1 / 1.3	1 / 1.3
Total Positions	1 / 1.3	1 / 1.3	1 / 1.3

Metrics

Metric Indicator	FY 2013 Actual	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate	FY 2017 Estimate
Average number of days that people reside in emergency shelter	61	58	63	62	61
Total number of people reported as literally homeless in annual Point in Time count	1,350	1,225	1,204	1,180	1,100
Total number of people reported as literally homeless and unsheltered in annual Point in Time count	104	66	68	67	62
Percentage of people exiting emergency shelter to permanent housing	34%	46%	53%	54%	55%

The trends in efficiency and outcomes for the Emergency Shelter program are generally positive and reflective of the implementation of the Ten-Year Plan to Prevent and End Homelessness.

The number of people reported as literally homeless in the annual Point-in-Time count has been reduced almost 11 percent in the past two fiscal years from 1,350 in FY 2013 to 1,204 in FY 2015. The number of people reported as literally homeless has been reduced a total of 34 percent since the Ten-Year Plan was adopted. Similarly the number of people reported as homeless and unsheltered in the Point-in-Time count has also decreased almost 35 percent in the past two years from 104 in FY 2013 to 68 in FY 2015.

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The percentage of people exiting emergency shelter to permanent housing has increased significantly in the past two fiscal years from only 34 percent in FY 2013 to 53 percent in FY 2015. Meanwhile, the average number of days that people reside in emergency shelter has remained fairly stable for the past two fiscal years at about the 60-day mark. It is worth noting that the average number of days dropped more substantially in prior fiscal years, 2011 and 2012, when at its highest point the average length of time in family shelters was 111 days and in single adult shelters it was 72 days.

It is expected that the number of people reported as homeless and the average number of days that people reside in emergency shelter will continue to decline in the coming fiscal years, although likely at a modest rate. The percentage of people moving from shelters to permanent housing is also expected to show modest improvements. New contracts were awarded to non-profit organizations in FY 2015 that include, for the very first time, targeted outcomes for emergency shelter performance. In FY 2016 the new shelter contractors will work to further improve program efficiency and outcomes. The Office to Prevent and End Homelessness will monitor contractors' performance and work with them to make necessary improvements.

It is the collaboration between local government and its partner nonprofit organizations that has contributed most greatly to the program's positive performance. Cooperative decision making processes, long-term strategic planning and utilizing innovative strategies seen in other communities have resulted in higher efficiency and better outcomes. Collaboration across County agencies has also been positively impactful for shelter clients, such as shared initiatives between OPEH, the Fairfax-Falls Church Community Services Board, the Department of Administration for Human Services, the Department of Housing and Community Development, and the Health Department. Also an important contributing factor, OPEH and the partnership have invested significantly in shared data collection and analysis through the Homeless Management Information System, which has also improved program transparency and accountability to the public.

At the same time, there are serious restricting factors to the shelter program's performance. Homeless families and individuals have a multitude of barriers to stable housing and come to emergency shelters in a state of crisis that affects many facets of their lives. They often have low-income and poor credit due to a lack of stable employment, job skills and education. Many individuals also suffer from mental illness, physical disabilities and chronic health issues. In recent years, the increase of immigrant families, including refugees and asylees, also bring a host of new challenges including legal issues and limited English speaking skills.

Ultimately the lack of housing that is affordable to low-income renters is the primary reason why people are homeless in the Fairfax-Falls Church community and the shelters are full to capacity. Increasingly higher rental prices and consistently low vacancy rates have created a housing market that excludes many households at the lowest income levels.

LOB #157:

HYPOTHERMIA PREVENTION SERVICES

Purpose

The primary purpose of the Hypothermia Prevention Program is to prevent deaths among Fairfax County unsheltered homeless population as a result of exposure to the extreme cold. The program takes place in shelters, commercial space and houses of worship. Participants are provided meals and a safe place to sleep out of the elements. Case Management is also provided to participants of the program to link them with mainstream services and ideally connect them to permanent housing options.

Description

Hypothermia is a potentially life-threatening condition that occurs when a person's internal body temperature is less than 95 degrees Fahrenheit. This happens when a person is exposed to prolonged damp and cold temperatures without adequate protective clothing and shelter. The risk of hypothermia is particularly high for persons who are disabled by substance abuse or mental illness and who may be unaware of the fact that their body temperature has fallen to the point of danger.

Fairfax County's Hypothermia Prevention Program began in 2005. Contractors of the emergency shelter program are responsible for providing the hypothermia prevention efforts in their region. During the winter months the shelters have a no turn away policy and they can accommodate some additional people overnight to prevent hypothermia but demand for shelter exceeds the facilities' capacities. Additional space is needed to accommodate the numbers of homeless served through this program. Therefore, the County's Hypothermia Prevention program relies on community partnerships for its delivery and success. Major contributions are made by area faith-communities, who provide space and volunteers to prepare and serve meals at the hypothermia sites. The program utilizes more than 2,000 volunteers and has partnerships with more than 50 places of worship and other community partners across the County to provide safe overnight sleeping space for those experiencing homelessness. Coordination of the program is extremely complex and planning begins in July of each year. While each site manages their own location, coordination must take place across the regions to ensure a countywide program for 4 months of the year. The OPEH has staff dedicated to planning the program with the participants and the coordination of the program across the system. The program serves, on average, 200 clients per night and has served 1,000 or more clients per hypothermia season. Case management is offered to hypothermia program participants. Case managers strive to engage participants so that they may access the services and benefits for which they qualify. The case managers work with those that engage with the ultimate goal of housing them.

In addition, the Hypothermia Prevention Program supports the outreach component for the Homeless Healthcare Program (HHP). Fairfax County's Health Department manages the contract for HHP but it requires close coordination with outreach from the people working in the Hypothermia Prevention Program so that the connections between clients and services are made. HHP connects clients to medical care and other resources that the client would not routinely access.

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Benefits

Without the Hypothermia Prevention Program, it is likely that the community would have many deaths on the streets during the winter months. As noted in the description, the program serves, on average, 200 participants per night. If the County were to serve these clients directly, it would require the equivalent of four more shelters to accommodate the 200 participants per night during the hypothermia season. Using the Eleanor Kennedy Shelter as an example, this equates to in-kind contributions to the County of \$1.1 million per year.

Some of the homeless in the community are resistant to entering shelter for many reasons, including but not limited to serious mental illness, substance and/or alcohol abuse, traumatic stress, fear of government. This population is also the most vulnerable with the greatest need for shelter and services. While they are not comfortable going to a homeless shelter, many utilize the Hypothermia Prevention Program. As such, the program provides the opportunity to establish a relationship with these clients increasing the possibility of successfully linking them to much needed services and ultimately housing them. Through the HHP program, they also have the opportunity to access medical care. Because of the vulnerability of this population, this is critical to the survival of these individuals.

The program is not only lifesaving but one example of a successful public-private partnership. The program is a collaborative effort between numerous Fairfax County government agencies, several non-profit organizations and 150 faith communities, as well as more than 2,000 volunteers. As a result the program fosters opportunities for education about the needs of the homeless in the community and the relationships built often result in the continued engagement to help this population beyond the hypothermia season.

Mandates

There are no mandates for the Hypothermia Prevention Program; however, the facilities used to shelter participants must be in compliance with Fire and Building Codes. Since most of the locations for the program were not designed for overnight occupancy, there were some challenges with some of the facilities. A workgroup comprised of the Office of the County Executive, the Office to Prevent and End Homelessness, the Office of the County Attorney, Office of Public Affairs, Office of the Fire Marshall and the Department of Public Works and Environmental Services, and hypothermia program non-profit partners helped secure passage of a change to the 2012 capital State Code Adoption process that grants the County's Building Official the authority to grant a temporary change of use for a facility. This helps to ensure that private facilities in the Hypothermia Prevention Program can be approved for overnight occupancy in a more expedited manner and that the facilities meet all safety standards for such programs.

Trends and Challenges

While the amount of people served in the Hypothermia Program each year has not changed in recent years, there are differences in the population entering the program. The number of people accessing the program that are over the age of 55 is increasing, as is the number of young adults, ages 18 to 19 years old. Both of these populations have particular vulnerabilities associated with them.

As people age, especially those living on the streets, they often become more medically fragile. The homeless services system has very little capacity to serve them. There is a small Medical Respite Program in the Embury Rucker Shelter but its capacity to support this population is limited.

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Young adults also have limited options available to them. Emergency shelter environments are not appropriate environments for this population because, generally, they need different types of supports and/or more intensive services than an emergency shelter can provide. In addition, the requirements of HUD funded programs preclude them from entering their programs. For example, HUD funded permanent supportive housing programs require that the person be chronically homeless. It is unlikely that most homeless 18 year olds would meet this definition. There is no County program that is targeted to serving this population

Originally, the Hypothermia Prevention Program was established to prevent death on the streets in the winter months. A positive trend in the program is an increased emphasis on longer term results by linking the participants to services and to permanently housing as many participants as possible. The number successfully housed has increased each year since OPEH and its non-profit partners have added this as a priority of the program as illustrated by the following:

<u>Hypothermia Prevention Season</u>	<u>Number of Participants Permanently Housed</u>
2011-2012	9
2012-2013	17
2013-2014	19
2014-2015	64

Resources

Category	FY 2014 Actual	FY 2015 Actual	FY 2016 Adopted
LOB #157: Hypothermia Prevention Services			
FUNDING			
<u>Expenditures:</u>			
Compensation	\$70,453	\$68,894	\$77,050
Operating Expenses	541,667	546,837	613,845
Total Expenditures	\$612,120	\$615,731	\$690,895
General Fund Revenue	\$0	\$0	\$0
Net Cost/(Savings) to General Fund	\$612,120	\$615,731	\$690,895
POSITIONS			
Authorized Positions/Full-Time Equivalents (FTEs)			
<u>Positions:</u>			
Regular	1 / 0.8	1 / 0.8	1 / 0.8
Total Positions	1 / 0.8	1 / 0.8	1 / 0.8

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Metrics

Metric Indicator	FY 2013 Actual	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate	FY 2017 Estimate
Average cost per person served	\$548	\$583	\$580	\$580	\$580
Number of deaths reported due to Hypothermia	0	0	0	0	0

The trends in efficiency and outcomes for the Hypothermia Prevention program are positive. In fiscal years 2013 – 2015 no deaths in the Fairfax-Falls Church community were reported due to hypothermia.

The average County cost per person served in the Hypothermia Prevention Program in FY 2015 was \$580. This is only possible because of the immense value in cash and in-kind donations leveraged by the nonprofit organizations contracted to provide these services.

It is expected that the number of individuals utilizing the Hypothermia Prevention Program will remain fairly stable at around 1,000 people per season over the next few years. Ultimately the lack of housing that is affordable to extremely low-income renters is the primary reason why people are homeless in the Fairfax-Falls Church community and the shelters, including winter seasonal programs, are full to capacity. Increasingly higher rental prices and consistently low vacancy rates have created a housing market that excludes many households at the lowest income levels, especially those with a lack of stable employment and disabilities.

Office to Prevent and End Homelessness

LOB #158:

SUPPORTIVE HOUSING SERVICES

Purpose

The two primary components of supportive housing services are transitional housing programs and permanent supportive housing. Transitional housing programs provide clients with housing and supportive services for up to two years. During the two years, the clients work with case managers and the goal is for the client to achieve independent living by the end of the program. Permanent supportive housing provides long-term, non-time-limited housing that has intensive supportive services for homeless persons where the head of household has been diagnosed with a disabling condition. This type of supportive housing enables those that are eligible to live as independently as possible in a long-term setting. Additionally, the County receives two grants from the U.S. Department of Housing and Urban Development. These grants are discussed in more detail in the Grant Support section of this narrative.

Description

Through contracts with non-profit partners, the County operates the following supportive housing programs:

- **Mondloch I** – While traditionally called an emergency shelter, because of the intensive needs of these clients, Mondloch I is best described as supportive housing. It opened in 1978. It serves hard-to-reach individuals with severe mental illness and/or severe substance abuse who come primarily from the streets and have been unable or unwilling to participate in housing or supportive services. This program is temporary and the goal is to help the person become healthy enough to move to permanent supportive housing. It includes eight beds, one of which is dedicated to the County's adult protective services program. While the ultimate goal when working with any homeless clients is to facilitate client's successful transition to more permanent housing, working with this population is different than with those in traditional homeless shelters. Helping clients transition and to become comfortable with the idea of living indoors permanently so that they are in a safe place is a critical first step.
- **Mondloch Place** – Permanent supportive housing that includes 20 fully furnished efficiency rental units with onsite supportive services. All units are for chronically homeless with preference given to chronically homeless individuals that are deemed vulnerable during assessment.
- **Kate's Place** – Permanent supportive housing that includes six furnished townhomes with on-site services for six households with children.

Clients in permanent supportive housing programs are the most at-risk and often the hardest to serve. While they are at high risk, they are often also the clients that are the most challenging to engage in the system. The work required to get them to trust the system and engage in case management and accept services is intensive. The issues they face are multiple and complex including, but not limited to, significant mental illness, substance and/or alcohol abuse, chronic homelessness, involvement with the child welfare system. OPEH's non-profit partners have a strong commitment to serving this population. Without the benefit of this commitment, it would be challenging to meet the needs of this population and it is likely that many would remain unserved. OPEH staff works closely with providers and contract staff to ensure the programs meet the rigorous program and fiscal requirements. Staff do strategic work with the non-profit partners to foster good outcomes for clients across the system and the program's ability to meet required performance measures. OPEH staff convenes meetings with non-profit partners, other County agencies and clients to address and come to resolution on these complicated cases.

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While transitional housing programs are less cost effective options for moving households into permanent housing, there are specific populations (e.g. people fleeing domestic violence, youth aging out of foster care, transitioning 18 to 24 years old) that are best served using this model. Given the lack of resources and/or experiences of these populations, they need housing assistance and support services to become self-sufficient but are not necessarily in need of a permanent supportive housing program. Therefore, it is appropriate to maintain some transitional housing in the homeless services system.

Benefits

As detailed in the description, clients in permanent and supportive housing programs face many complicated issues and, as a result, are often the hardest to serve. Providing permanent supportive housing lessens the burdens on and costs in other human service delivery systems. Studies have indicated that this type of housing is associated with significant reductions in emergency room visits, hospitalizations, shelters, sobering centers, and jails. Further, because of the vulnerability of the individuals that need this type of housing, they are most at-risk of dying on the streets if not housed.

Families in permanent supportive housing programs are also high risk and therefore the children involved in these programs are particularly vulnerable. These families are known to the child welfare system and if not for this housing option with its intensive supports many of these families would not be able to remain together because of the risk of child abuse and neglect. Also, the children might not receive the developmental supports they receive in the program.

Mandates

This Line of Business is not mandated.

Trends and Challenges

Best practice indicates that the transitional housing model is not the most effective model in client outcomes or in cost efficiencies. HUD has also prioritized permanent supportive housing for chronically homeless individuals. Therefore, OPEH has been working to reduce the number of transitional programs in the system. In recent years the County has built properties for individuals and families in need of permanent supportive housing; however, the need for this type of housing far exceeds those properties. Therefore, OPEH relies on partnerships with landlords in the community to secure rental units. This requires a great deal of client advocacy as it is very difficult and time intensive to secure community-based housing, especially given the limited number of housing units available for low-income households.

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Resources

Category	FY 2014 Actual	FY 2015 Actual	FY 2016 Adopted
LOB #158: Supportive Housing Services			
FUNDING			
<u>Expenditures:</u>			
Compensation	\$257,125	\$254,477	\$277,900
Operating Expenses	499,461	521,125	615,106
Total Expenditures	\$756,586	\$775,602	\$893,006
General Fund Revenue	\$0	\$0	\$0
Net Cost/(Savings) to General Fund	\$756,586	\$775,602	\$893,006
POSITIONS			
Authorized Positions/Full-Time Equivalents (FTEs)			
<u>Positions:</u>			
Regular	3 / 2.6	3 / 2.6	3 / 2.6
Total Positions	3 / 2.6	3 / 2.6	3 / 2.6

Metrics

Metric Indicator	FY 2013 Actual	FY 2014 Actual	FY 2015 Actual	FY 2016 Estimate	FY 2017 Estimate
Percentage of people that remain housed in permanent supportive housing or exit to other permanent housing at the end of the year	92%	96%	93%	93%	93%

The trends in the Supportive Housing program outcomes are positive and reflective of the high quality of services provided by nonprofit organizations serving this particularly vulnerable population, as well as the coordination and leadership provided by OPEH.

Families and individuals served in Supportive Housing programs are the most challenging to house and keep housed. They are typically chronically homeless and come to the programs with a host of barriers to stable housing, including extremely low- and/or fixed incomes, chronic health conditions and serious mental or physical disabilities. Without providing supportive services, paired with housing that is affordable, this high-risk population would likely cycle in and out of shelter and continue to suffer in poor health, often dying at a disproportionately early age.

However, as the outcomes of the program demonstrate, the program is effective in assisting clients in maintaining housing stability with over 90 percent of the people served remaining in housing at the end of each year. The success of the program depends on well-trained staff that specialize in serving clients with specific needs, such as mental health treatment and securing housing that is appropriate. Successful examples include the County-constructed and nonprofit-operated, Kate's Place and Mondloch Place.

The program's success is most often restricted in the efforts to secure a sufficient number of supportive housing units. Multi-family construction on a single-site is not always possible so often program providers need to utilize rental housing in partnership with flexible landlords and property management companies. Using scattered-site properties is not ideal as rental prices continue to rise, vacancies are low and the delivery of services across the County at multiple-sites is inefficient.

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Grant Support

Grant support is primarily received from the U.S. Department of Housing and Community Development (HUD). The following three grants are awarded to the County and managed by OPEH:

- **Emergency Solutions Grant:** Funding provides direct services in homelessness prevention and rapid re-housing activities (e.g. utility payments, rental payments, security deposits) through the housing relocation and stabilization services that are provided by the community case managers and the Housing Locators Program contracted through several nonprofit organizations. The program year 2015 award totaled \$385,886. A 50 percent Local Cash Match is required; therefore, total funding available for this program totaled \$771,772.
- **Community Housing and Resource Program:** Funding assists homeless families in making the transition from living in shelters to permanent housing. The program offers 28 units for victims of domestic violence families and various supportive services. The program year 2016 award totals \$813,644 which includes \$373,837 in Local Cash Match. This grant is awarded as part of the Continuum of Care program discussed below.
- **RISE (Reaching Independence through Support and Education) Supportive Housing Grant:** Funding provides 20 units of transitional housing and support services for families through a partnership of private nonprofit organizations and County agencies. The program year 2016 award totals \$543,588 which includes \$67,000 in Local Cash Match. This grant is awarded as part of the Continuum of Care program discussed below.

OPEH has been designated as the lead County agency and manages all aspects of the Continuum of Care (CoC) program. Funding is awarded annually by HUD with the intent of developing a continuum of services to enable homeless families and individuals to move toward stable housing. Both County agencies and Fairfax County non-profit organizations receive funding through the CoC program; however, OPEH is the lead County agency responsible for the management, oversight, and compliance with HUD regulations of all funding awarded through the CoC program. Funding currently totals more than \$7.6 million. The number of projects the CoC funds can fluctuate each year depending on federal priorities and funds available. Currently the funds support 27 projects which are sponsored by 14 non-profit organizations and County agencies. The projects include transitional and permanent supportive housing programs for individuals and families, as well as one planning grant. These projects currently support 373 individuals and 95 families who are experiencing or have experienced homelessness in the community. There is a 25 percent Local Cash Match or in-kind requirement for each CoC project that is awarded funding.