



Proposed Changes to Rapid Rehousing Referrals

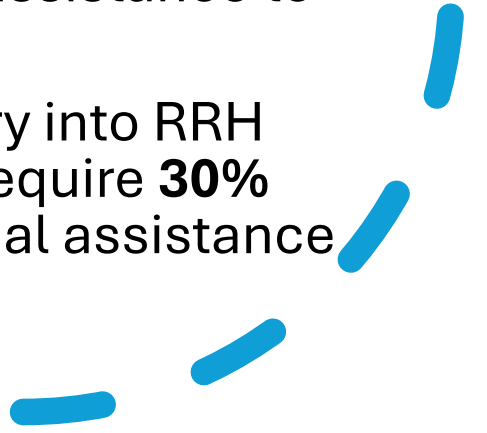
Speaker: Yeme Mehari

Committee:

Date



Rapid Re-Rehousing

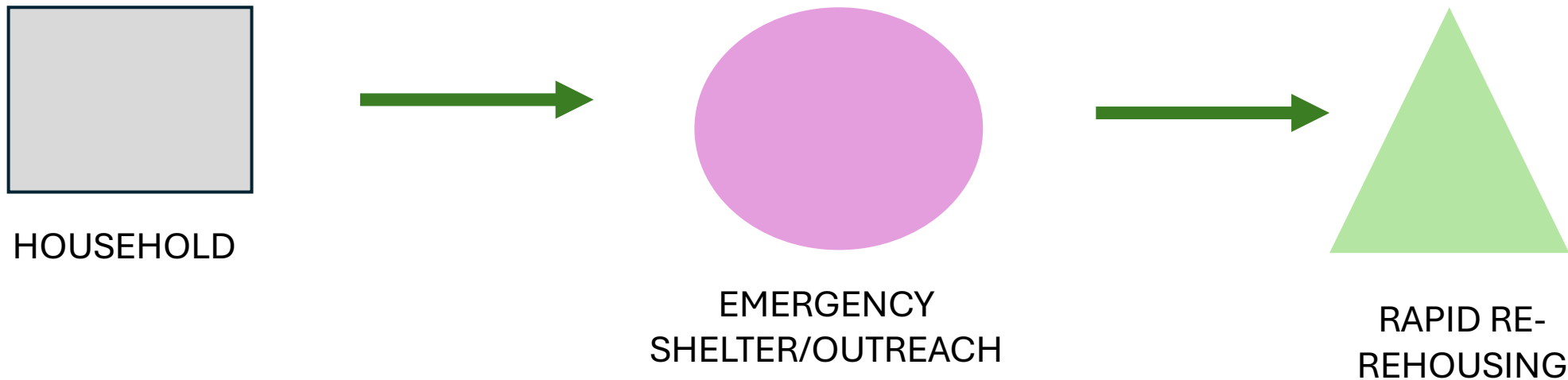
- Rapid Re-Rehousing is a housing program designed to help individuals and families experiencing homelessness move into permanent housing as quickly as possible. It provides a combination of short-term (average 6-9months) rental assistance, help with move-in costs, and supportive services like case management to promote long-term housing stability.
 - Rapid Re-Rehousing can be utilized for 24 months of assistance (including 6 months of arrears) in a three year period.
 - The program is offered without preconditions like employment or sobriety and tailors its assistance to each household's needs.
 - There is no income requirement for entry into RRH until the 90 day recertifications which require **30% AMI** or less to remain eligible for financial assistance
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Current Rapid Re-Housing Process

- Historically, Fairfax County RRH have been auto enrolling households into RRH when they enter shelter or engage with outreach services.
- The rapid rehousing (RRH) provider would evaluate the household using the VI-SPDAT assessment tool to assess if the household is an appropriate match.
- Each RRH provider would apply their individual prioritization process to match eligible households with available RRH openings.
- Additionally, each RRH provider would determine, via their internal system, the duration of financial assistance they can offer.



Current Rapid Re-Housing Process



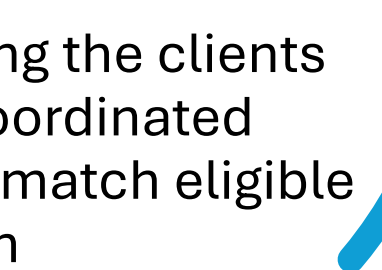
- Fairfax County's 4 regions each has two RRH providers (Adult Only Households & Households with Minor Children)

Issues with Current Process

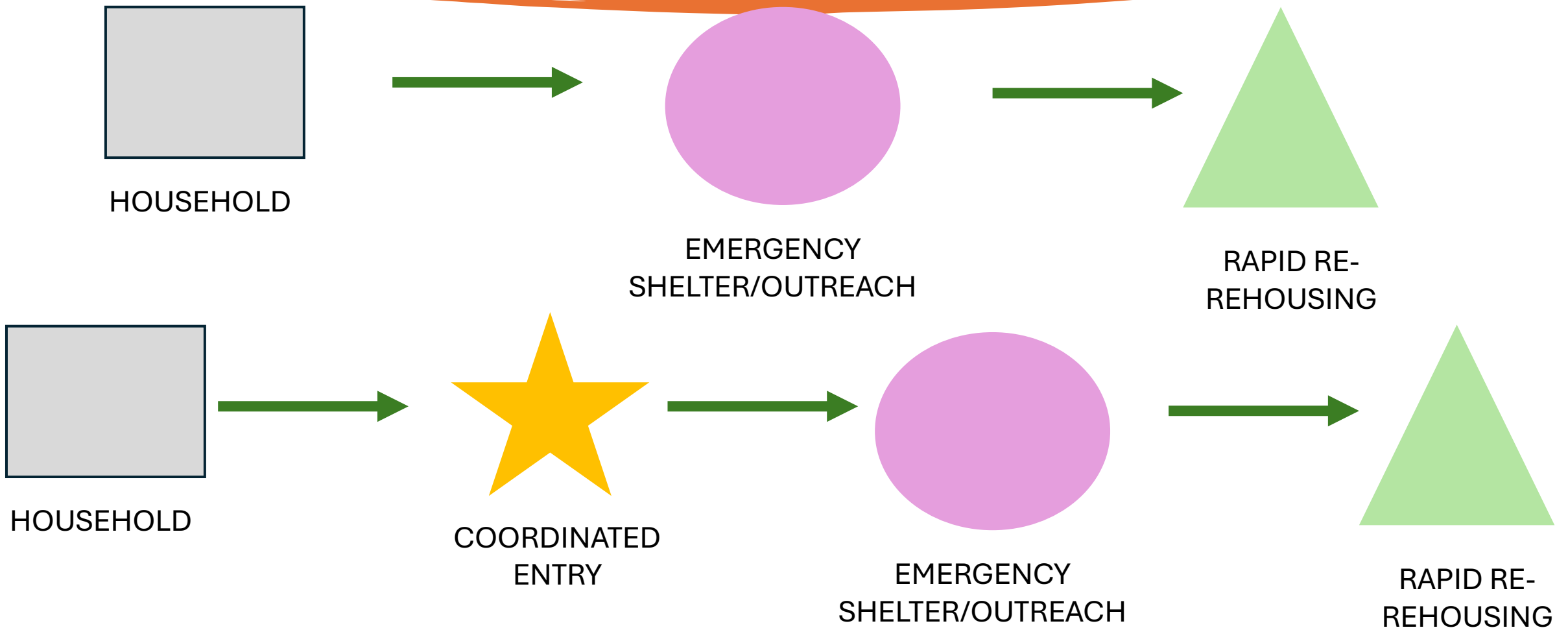
- The automatic enrollment of participants inflated the HMIS data because individuals were entered into RRH projects without being actively matched to openings or working towards housing.
- Each provider established its own system for prioritization, referrals, and services under RRH, resulting in a lack of standardized practice across the county.
- Rapid rehousing providers often felt pressured to place as many participants as possible into their projects without adequately projecting their expenditures, and as a result frequently exited households when funding ran out.
- Providers would exit households in accordance with their individual policies, resulting in a lack of standardization across the county.

Proposed Rapid Re- Housing Changes

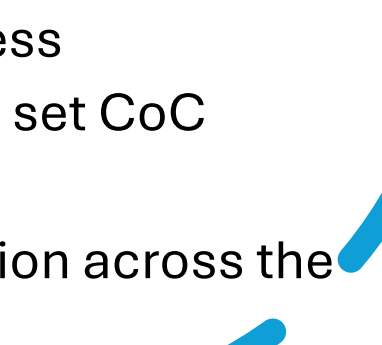
The proposed change to Rapid Re-Housing would impact the 4 elements of Coordinated Entry (**Access**, **Assessment**, **Prioritization**, and **Referral**).

- **Access:** Change from clients directly accessing RRH through shelter/outreach providers to clients accessing it through Coordinated Entry
 - **Assessment:** Change from VI-SPDAT to C.H.A.N.G.E Assessment
 - **Prioritization:** Change from providers creating their own prioritization tool to a standard Coordinated Entry prioritization tool
 - **Referral:** Change from providers referring the clients from their shelter and/or outreach to Coordinated Entry utilizing the By Names List tool to match eligible participants based on their prioritization
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Rapid Re-Housing Proposed Change



Reason for Changes

- 1) Ensure compliance with HUD requirements
“A centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services and includes a comprehensive and standardized assessment tool.” 24 CFR 578.3
 - 2) Enhance data accuracy and reliability
 - Auto enrolling households created inflated and inaccurate data
 - Monthly case conferencing to review HMIS data entry
 - Monthly review of participant’s progress
 - Regularly assess services against the set CoC benchmarks
 - 3) Promote consistency and standardization across the county
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During RFP Transition

- During the transition, RRH services have continued with greater involvement from OPEH.
- Providers have been case conferencing with OPEH to (1) match new households, (2) assess the progress current participants, (3) assess the exit indicators for current participants.
 - Supports appropriate matching, placing households in RRH only when it is the right fit.
 - Provides technical support to RRH providers.

