



Task Force for Sustaining Housing First Solutions
Draft Recommendations for Media/Public Release
June 7, 2018

GOAL: To achieve and sustain a “functional zero”ⁱ of adult chronic homelessnessⁱⁱ in the City of Worcester by creating a community response that incorporates the five components of Housing Firstⁱⁱⁱ: Crisis Response; Housing Supply; Support Services; Housing Crisis; and a Data-Driven System.

OVERARCHING RECOMMENDATIONS

1. Public, Nonprofit organizations, and private landlords should work together to produce 103 housing units by December 30, 2019, and continue to preserve and develop adequate units for those who become chronically homeless in future years.
2. All community housing entities and mainstream support service providers should become part of the Worcester City & County Continuum of Care^{iv} (CoC) Coordinated Entry System^v (CES), aimed at providing housing subsidies with individualized support services prioritized for chronically homeless individuals.
3. The Worcester City Manager should establish and support a “Sustaining Housing First Solutions Coordinating Council,” which will ensure a coordinated community-wide system that acts with urgency and embodies these essential elements:
 - a. Actionable, measurable goals;
 - b. Clear, accountable leadership;
 - c. Prioritized access to housing, with active case conferencing that respects confidentiality;
 - d. Public commitment & transparent reporting;
 - e. Funder education, alignment & sufficiency of resources.

RECOMMENDED SYSTEM COMPONENTS

Crisis Response

4. The Coordinating Council should explore the establishment and piloting of an early warning system that includes a homeless prevention fund, an adequate triage and assessment system of diversion, alternative residential or service referral, reunification/relocation where appropriate, and rapid re-housing to prevent people from becoming homeless or to limit shelter stays.

Housing Supply

5. The City and Coordinating Council should encourage the production of a variety of housing units, from individual scattered sites to small (e.g., 10-15 units) and moderate-sized (e.g., 25 units) congregate sites, which would include on-site resident managers, to accommodate the various current needs of clients and anticipate the need in future years.
6. The City and the Coordinating Council should assist in identifying sources of capital for the development of housing for the chronic homeless, including the enhancement of a Worcester-based low interest loan fund.
7. The City should assist providers by identifying properties appropriate for expanding housing units, and when possible, donate City-owned property. The Coordinating Council should advise the City on regulations and zoning that promotes development of appropriate housing.

Support Services

8. Providers should assist chronically homeless clients to fully access healthcare, support and case management services through enrollment in an appropriate insurance product.
9. The CoC should on a regular basis host trainings for provider staff to help orient new staff, provide updates on eligibility and accessing CES, mainstream benefits, and offer opportunities for peer learning on a variety of case management related topics, including accessing health insurance, social security and SNAP benefits, as well as engagement techniques. This should include mechanisms to receive ongoing feedback from local providers, peer specialists, and clients.

Housing Crisis

10. The City should explore the establishment and piloting of a Landlord-Tenant Insurance Fund, which reduces the perception of risk for private property owners, and eliminates housing barriers on rental applications.

Data-Driven System

11. All funders of providers should require and help support those recipients to participate in the CoC's HMIS, which will also feed into the Statewide Data Warehouse.
12. The City's staff should assist the Coordinating Council by developing and implementing an ongoing communications plan, including an annual report, to inform the public about the state of homelessness and the progress being made to achieve and sustain "functional zero."

ⁱ **FUNCTIONAL ZERO:** Functional zero is reached when the number of persons experiencing (chronic) homelessness within a community is less than the average number of persons being connected with permanent housing each month. In achieving this measure, a community has demonstrated the system and capacity to quickly and efficiently connect people with housing and ensure that homelessness within the community will be rare, brief, and non-recurring.

ⁱⁱ **CHRONICALLY HOMELESS PERSON:** (as defined by HUD) An individual (or family) with a disabling condition who has been continuously homeless for a year or more or has had at least four episodes of homelessness in the past three years.

ⁱⁱⁱ **HOUSING FIRST:** An approach to ending homelessness that centers on providing people experiencing homelessness with housing as quickly as possible, while providing services as needed. The basic underlying principle of Housing First is that people are better able to move forward with their lives if they are first housed.

^{iv} **CONTINUUM OF CARE:** A community planning body required by HUD to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximum self-sufficiency. This is often used to refer to the system of programs to address and prevent homelessness as well as the body that coordinates such efforts. The Central Massachusetts Housing Alliance (CMHA) is the Lead Agency for the Worcester City & County CoC.

^v **COORDINATED ENTRY SYSTEM:** A community-wide process to outreach to and identify households experiencing homelessness, assess their needs, and prioritize access to programs and resources to end their homelessness. An effective coordinated entry process includes prioritization of those with the highest need, Housing First orientation, emergency services, standardized assessment, referral to housing, outreach, and use of HMIS.