MIAMI-DADE COUNTY COMMUNITY HOMELESS PLAN

2019 ALIGNMENT OF PLAN WITH NEW PRIORITIES

2019: PRIORITY HOME
Federal/HEARTH Act Drivers for Policy and Programs & Performance Objectives

Federal Strategic Plan Objectives to Prevent and End Homelessness

- Ensure homelessness is a rare experience
  - Collaboratively build lasting systems that end homelessness
  - Increase capacity and strengthen practices to prevent housing crises and homelessness
- Ensure homelessness is a brief experience
  - Identify and engage all people experiencing homelessness as quickly as possible
  - Provide immediate access to low-barrier emergency shelter or other temporary accommodations to all who need it
  - Implement coordinated entry to standardize assessment and prioritization processes and streamline connections to housing and services
  - Assist people to move swiftly to permanent housing with appropriate and person-centered services
- Ensure homelessness is a one-time experience
- Sustain and end to homelessness
  - Prevent returns to homelessness through connections to adequate services and opportunities

HUD System Performance Measures

- Length of Time Persons Remain Homeless (Reduce Length of Time Homeless)
- Extent to which persons who Exit Homelessness to Permanent Housing Return to Homelessness within 6 to 12 months (Reduce Recidivism) / Extent to which persons who Exit Homelessness to Permanent Housing Return to Homelessness within 2 Years (Reduce Recidivism)
- Number of Homeless Persons (Reduce Homelessness)
- Employment and Income Growth for Persons in CoC Program Funded Projects (Increase Financial Resources)
- Number of Persons who Become Homeless for the First Time (Homeless Prevention)
- Successful Placement from Street Outreach (Outreach Coverage) / Successful Placement In or Retention of Permanent Housing (Stably House)

HUD Policy Priorities

- End homelessness for all persons
- Create a systemic response to homelessness
- Strategically allocate and use resources
- Use a Housing First approach
1. Housing: Emergency, Transitional, Permanent Housing & Rapid Re-Housing
2. Coordinated Entry, Assessment and Referral
3. Homeless Prevention and Diversion
4. Support Services
5. Effective Use of Data
6. Governance & Resource Maximization
7. Quality Assurance
8. Homeless Plan
### 1. Housing: Emergency, Transitional, Permanent Housing & Rapid Re-Housing

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<th>Implementation Measure</th>
<th>Strategies / Status</th>
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| **Review inventory of Emergency Housing and allocate beds based on need** | Reduce reliance on hotel/motel for families & increase percentage of families who move from hotel/motel directly to Permanent Housing (PH)  
Strengthen housing navigation resources  
Continue working with CSH to develop a Shelter Needs Assessment Tool  
Prioritize rapid placement into PH |
| **Target long-term stayers in Emergency Shelter, Transitional Housing and Safe Haven for Permanent Housing** | Reduce system-wide average Length of Time (LOT) homeless from 135 days  
Prioritize unsheltered persons who meet chronic homeless definition for Permanent Supportive Housing (PSH)  
Create partnerships/interventions to serve hard-to-serve undocumented clients (consulates, Refugee Services, Catholic Legal Services)  
Map process from homelessness to housing to reduce redundancies and reduce referral to placement in Tenant Based Rental Assistance (TBRA)  
Prioritize elderly long-term stayers 62+ for specialized PH |
| **Assess Transitional Housing needs** | Use system data to determine need for Transitional Housing (TH)  
Consider special populations including unaccompanied homeless youth, safety for survivors of domestic violence, and assistance with recovery from addiction  
Consider creation of Transitional Housing with Rapid Re-Housing (TH:RRH)  
Ensure coordinated referrals for all TH  
Work to transition state Diversion First funding from TH to PH to help with homeless, jail diversion exits  
Revisit Rental Regulatory Agreement and referrals to Inn Transition South (DV) |
| **Sustain an end to homelessness among Veterans** | Use homeless preferences to house vets when VASH and CoC resources are insufficient to sustain functional zero on veteran homelessness  
Continue bi-weekly conferencing with VA, SSVF partners and other stakeholders  
Continue maintaining veteran by-name list  
Collaborate with other stakeholders to fill targeted system gaps (i.e. United Way Mission United)  
Sustain functional zero for homeless vets |
| **End homelessness among persons experiencing chronic homelessness** | Maintain chronic persons by-name lists  
Continue monthly case staffing meetings with CoC partners; staff households without children, families and unsheltered persons separately  
Develop HMIS assessment to record who is document ready  
Assign clients who are not document ready to case management  
Reach and sustain functional zero |
|---|---|
| **End youth homelessness and family homelessness** | Maintain separate youth and family by-name list  
Continue targeted monthly youth and family case staffing meetings with CoC partners  
Reach and sustain functional zero  
Continue using TAY-VI-SPDAT youth vulnerability instrument and F-VI-SPDAT family vulnerability tool as part of the CE process  
Review Youth System Map  
Review Youth Homelessness Plan as needed  
Apply for USHUD Youth Homelessness Demonstration Project & Family Unification Program (FUP) vouchers  
Explore feasibility of creating new Coordinated Entry (CE), Emergency Shelter (ES), TH:RRH, PH, shared housing, host homes or other innovate model(s) to serve youth  
Allow CoC to coordinate referrals for Florida Housing and Finance Corporation (FHFC) Link and FUP units dedicated for youth based on BNL  
Work with Public Child Welfare Agency (PCWA) to prevent youth exiting foster care from entering the CoC program  
Incorporate youth with lived in experience in planning meetings, committees and service PIT counts; explore funding to provide stipends for youth w/lived experience  
Secure funding commitments from youth-focused organizations |
| **Reallocate underperforming, unsatisfactory or cost-ineffective Transitional Housing, Safe Havens, Rapid Rehousing and Permanent Supportive Housing to provide new PSH or RRH** | Consider retooling or reallocating Safe Haven (SH) to PH  
Rate renewal providers using HUD Rating and Ranking tool  
Look at provider level System Performance Measures (SyS PM) to identify trends, provide training and recommend performance improvements |
| Incorporate Housing First approach into all housing types | Reduce service participation requirements and preconditions  
Reduce barriers to entry (such as poor credit history, poor rental history, criminal convictions, engagement in therapeutic goals, use of alcohol/drugs.)  
Focus on housing planning, navigation and document requirements  
Map process from homelessness to housed, look for ways to reduce LOT homeless |
| --- | --- |
| Review inventory of Rapid Rehousing programs and allocate funds based on need | Continue collaboration with Emergency Solutions Grant (ESG) partners  
Continue collaboration with State Housing Initiatives Partnerships (SHIP) entitlement jurisdictions  
Continue collaboration with HOME Investments Partnership Programs  
Continue collaboration with SSVF providers  
Continue to advocate for rental assistance as a priority for EFSP funding  
Continue to advocate use of South Florida Behavioral Health Network (SFBHN) transitional funding for rental assistance  
Continue using local, state and HUD funding to maintain/increase RRH inventory  
Ensure RRH offers appropriate support services promoting self-sufficiency and increased income  
Fund housing navigation  
Review new ES:RRH performance standards  
Develop RRH for survivors of human trafficking  
Improve coordinated referrals to RRH  
Ensure DV RRH providers collect UDEs  
Use RRH to bridge households waiting for PSH  
Use state Challenge Grant funding for RRH |
| Review inventory of Permanent Supportive Housing programs and allocate resources based on need, serving people with greatest need and longest histories of homelessness; expand Other Permanent Housing (OPH) | Continue collaborating with PHAs to establish homeless set-asides in HCV & Public Housing  
Apply for USHUD Mainstream Voucher with PHAs  
Pursue CoC funding for new projects: PSH with a preference for Chronic Homelessness (CH); or RRH  
Use Move Up strategy  
Partner with PHAs to renovate additional public housing units in exchange for referral opportunities  
Capitalize on Florida Housing Finance Corporation development/financing opportunities  
Support community, statewide and federal efforts to expand affordable housing (Miami Homes for All w Housing Solutions Task Force, PACT, Sadowski Coalition) |
2. Coordinated Entry, Assessment and Referral

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| Advocate for protective equitable policy and process mechanisms & development of affordable housing in Opportunity Zones  
  Look at need among sub-populations (i.e. homeless over 60)  
  Expand HUD-Assisted Multifamily Housing Homeless Preference partnerships,  
  Expand referral relationships with existing and new tax credit projects  
  Collaborate with CDBG providers to acquire property on which permanent housing can be built | Work with housing providers to identify and coordinate mainstream resources and systems to ensure chronically homeless clients access support services  
  Partner with VA, Federally Qualified Health Center (FQHC) and Managed Care providers to provide support services to disabled persons in PSH  
  Use Food and Beverage (F&B) tax to fund gaps in support services to leverage new PSH  
  Support Medicaid pilots providing comprehensive support services to disabled persons  
  Create new Permanent Housing Options for Medically Needy and Frail  
  Collaborate with Assisted Living Facilities; PACE Centers; Long-Term Care providers |

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| Establish comprehensive coordinated entry system.  
  Ensure cultural competency of SO  
  Review racial and other system disparities  
  Use technology to create efficiencies (mobile tablets document engagement, assessments, contacts & referrals)  
  Conduct regular training to ensure effective use of vulnerability tool, street engagement and implementation of Evidenced based Practices (EBPs) such as Housing First and Motivational Enhancement Therapy (MET). Make diversion the first intervention by identifying alternate housing arrangements  
  Ensure HV issuance even when ES is not available/refused; provide clients RRH application information  
  Enhance collaboration with DV system for placement into ES, TH, RR and PSH  
  Develop coordinated entry system with accessible after-hours procedures  
  Provide comprehensive services to unsheltered (MET, street medicine, involuntary examination, housing navigation) persons who refuse all services  
  Evaluate housing-focused investments at Day Center | |
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| Engage faith-based groups to enhance landlord connections and volunteer opportunities, and dissuade street feedings | Continue specialized behavioral health, primary care, legal services outreach, particularly for unsheltered persons refusing all services  
Continue collaboration with PATH program  
Continue collaboration with VA outreach  
Continue collaboration with law enforcement on specialized pilots (City of Miami Pre-Arrest Diversion and Miami Beach Marchman Act)  
Support specialized Access Points for persons fleeing DV, human/sex trafficking and youth |
| Expand specialized outreach to serve persons refusing all services.             | Review and evolve discharge planning protocols (staff at the court, jail, Mosher case staffing meetings, public hospital…)  
Include key funders and stakeholders in By Name List (BNL) case staffing meetings  
Develop data collaborative to understand trends and costs of high system users |
| Improve discharge planning from jails, crisis centers, hospitals & institutions serving homeless youth | Maintain toll-free helpline for centralized access to the CoC  
Measure monthly call volume, hold time, average call length; re-evaluate and update helpline messaging as needed |
| Maintain a system-wide central waitlist for placement into CoC funded PH and homeless set-aside permanent housing programs | HT Housing Coordinator hired in 2014 to make centralized referrals  
Maintain PSH and Order of Priority referral process that complies with HEARTH and HUD guidance on Coordinated Entry  
Focus on length of time homeless and vulnerability for referrals to PH  
Include unsheltered persons to length of time homeless report |
| Expand on indoor meal programs as a means to engage homeless individuals   | Coordinate indoor feedings with community stakeholders and access points |
| Improve landlord outreach, engagement and retention                          | Maintain risk mitigation fund  
Develop Navigator Certification Program  
Expand use of exclusive CoC Landlord Listing Tool  
Conduct quarterly engagement meetings with existing/prospective landlords  
Utilize SEEFA membership to gain and retain landlord leads  
Promote RentConnect |
### 3. Homeless Prevention and Diversion

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| Expand rent/utility assistance and other interventions to prevent homelessness | Use SHIP, State Challenge grant, ESG, TANF, F&B, and EFSP to prevent homelessness
Look at HP eligibility barriers and explore making policy changes to serve extremely low income, vulnerable households beyond those with a third party notice to vacate. |
| Create a successful diversion for homeless individuals and families | Make diversion first intervention. Identify alternate housing arrangements. (Implement strategies to reduce 1st time homelessness)
Consider flexible financial assistance
Train access point staff in mediation |

### 4. Support Services

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<tr>
<td>Improve CoC-wide knowledge and use of Marchman and Baker Acts, and Guardianship Program</td>
<td>Invite SFBHN to present at Providers’ Forum</td>
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| Maximize the use of mainstream and other community-based resources | Continue collaboration with Head Start, Catholic Legal Services, Veterans Affairs, Faith-Based Organizations, Managed Care, Greater Miami Legal Services, OIC of South Florida, PACE Centers, Career Source, Parent to Parent, Advocacy Network on Disabilities
Provide training and broker Memorandums of Understanding (MOU’s) between providers with poor employment and CareerSource
Maintain Homeless and Youth Homeless Resource Guides
Support the State Opportunity Work Tax Credit in state legislature |
| Pursue alternative to inpatient/residential treatment programs for the mentally ill | Support the construction and completion of the Mental Health Diversion Facility |
5. Effective Use of Data

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<tr>
<td>Conduct bi-annual homeless census</td>
<td>Continue unsheltered and sheltered counts conducted twice annually</td>
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<td>Conduct Point-in-Time Surveys</td>
<td>Complete PIT surveys annually, during the last 10 days in January to gauge identified gaps and needs</td>
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<tr>
<td>Conduct annual iCount &amp; Surveys</td>
<td>Continue youth service count (iCount), during the last 10 days in January using youth with lived experience and countywide magnet sites</td>
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<td>Participate in national data sharing of youth data dashboard</td>
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<td>Create youth-specific benchmarks to measure progress</td>
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<tr>
<td>Submit Longitudinal System Analysis</td>
<td>Complete Longitudinal System Analysis (LSA) fka. AHAR</td>
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<td>Use LSA to review system performance</td>
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<td>Publically post program outcomes</td>
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<tr>
<td>Enhance HMIS data capturing and reporting capacity</td>
<td>Measure CoC-wide and provider performance utilizing HUD measures</td>
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<td>Perform data analysis to identify CoC and provider-level trends and opportunities</td>
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<td>Look at data warehouses that can share homeless service and mainstream resource data</td>
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<td></td>
<td>Housing Coordinator to input Other Permanent Housing (OPH) data in HMIS</td>
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<td>Perform data quality assessment</td>
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6. Governance & Resource Maximization

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| Ensure Board and Committee composition and governing bylaws comply with federal HEARTH regulations and are representative of all stakeholders | Include input from LGTBQ+, Victims of Human Trafficking, Unaccompanied and Parenting Youth, Individuals with Disabilities, etc.  
Look at strategies for engaging increased participation by persons with lived, homeless experience (i.e. paying youth)  
Further ensure alignment with HUD guidance through committee appointments and participation  
Scale up new Performance Evaluation Committee |
| Enhance coordination with entitlement jurisdictions to ensure alignment with CoC goals/objectives | Established quarterly calls with ESG staff at entitlement jurisdictions; provide input annually/as requested to Consolidated Plan and Action Plan for all entitlement jurisdictions |
| Increase Public Education and Awareness, in particular in impacted communities/areas.  | Educate the Downtown business community on the Trust policies and priorities (e.g. CH); conduct on-going communication with business community on Trust’s efforts and accomplishments to end CH |
| Engage governmental, leadership, advocacy organizations to note emerging trends, innovations and best practices | Continue collaboration with USHUD, DCF Office on Homelessness, Florida Housing Coalition, National Alliance to End Homelessness, CSH, Florida Coalition to End Homelessness, Dade-Miami Criminal Justice Council, United States Interagency Council on Homelessness, HHS |
| Engage local, state and federal elected leadership | Legislative Priorities  
- Diversion First RRH  
- Staffing Grant  
- Challenge Grant  
- Sadowski Affordable Housing Trust Fund  
- Expand F&B tax  
- Mental Health Reform  
- Maintain/increase vouchers  
- Work Opportunity Tax Credit |
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<tr>
<td>Implement CoC-wide grievance procedures</td>
<td>Grievance Procedures approved by SDC in December 2016</td>
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<td>Restorative Practices training conducted in February 2017</td>
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<td>Implement electronic customer satisfaction surveys and evaluate annually</td>
<td>Continue annual, electronic customer satisfaction survey</td>
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<td>Review and adjust, if necessary, local performance measures</td>
<td>Continue to align local performance measures with HUD system performance measures. Review and adjust benchmarks annually.</td>
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<tr>
<td>Conduct “Secret Shopper” evaluation of CoC delivery of housing and services annually</td>
<td>Conduct secret shopper activities to test the helpline and recommend improvements</td>
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<td>Conduct annual desk audits and on-site monitoring of programs</td>
<td>Perform risk assessment of contracted providers annually</td>
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<td>Partner with Housing Authorities to joint monitor ESG</td>
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<td>Monitor and reduce evictions and discharges to unknown destinations</td>
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<td>Developing monitoring procedures</td>
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<td>Use HUD monitoring tools</td>
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<td>Ensure timely grant execution, payments to providers/landlords</td>
<td>Implement provider payment recommendations:</td>
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<tr>
<td></td>
<td>1) Implement “buddy system” policy to ensure consistent contract coverage</td>
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<td>2) a. Require and provide provider training on do’s and don’ts of reimbursement requests</td>
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<td>b. Provide “office hours” for package corrections</td>
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<td>c. Provide “one on one” training at the beginning of the contract period and by request when there is personnel turnover at the provider level</td>
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<td>3) Create policy regarding deadlines to submit policy adjustments</td>
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<td>4) a. Create shared file for “deficiency report” to review with and have available for management</td>
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<td>b. Create a checklist of main deficiency categories</td>
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<td>5) Notify contract manager, CEO, board members when package is returned</td>
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<tr>
<td>Adopted the Dade County Community Homeless Plan: 1994</td>
<td>Review Homeless plan with CoC Subcommittee annually</td>
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<td>Review Homeless plan at joint-Board retreat</td>
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8: Homeless Plan

- Engage HUD on impact of delays
- Conduct review of Zengine and develop procedure for tracking key payment process milestones
  - Provide regular report to HT management on late provider submittals
- Further engage with OMB and Ryan White sections
- Review and implement Rental Assistance Program policies and procedures
- Reduce reliance on F&B funding for Rental Assistance portfolio
- Review and update finance policies and procedures

- Conduct capacity-building training to CoC providers
- Utilize Planning Grant and local experts to conduct provider training on HUD guidance and emerging best practices

- Review and improve disaster response and recovery plans
- Review and update COOPs
- Review and update emergency cold weather and other severe weather procedures; improve client tracking procedures following overflow activation events