

Homelessness in the Roanoke Valley

2012-2013 Business Plan



Developed by
The Blue Ridge Continuum of Care
and
The Blue Ridge Interagency Council on Homelessness

June 2013

Introduction

In the past two years several key changes have taken place that shapes the content of this eighteen months business plan to reduce homelessness in the Roanoke Valley.

First, at the federal level, Congress passed the Hearth Act in 2010 allowing 1) local Continuum of Care more flexibility in providing services to prevent homelessness, 2) more emphasis on rapid re-housing and 3) reducing the time individuals and families spend in a homeless condition.

Second, at the state level less funding was available to support transitional and emergency shelters and more emphasis (and funding) was placed on prevention and rapid re-housing efforts. At both the federal and state levels more emphasis was placed on data collection, setting performance measures and tracking key indicators of homelessness.

Third, at the local level, in 2011, the City of Roanoke was required to develop a plan and submit a substantial amendment to the City's HUD Five Year Consolidated Plan governing the way services to the homeless were provided and how those services were measured.

The above forces of change and others have resulted in a gradual systems transformation among those organizations and agencies that provide services to those that are homeless or find themselves in danger of becoming homeless. A part of this system transformation is evident in the establishment of a Central Intake and community wide referral system within the Blue Ridge Continuum of Care; expansion in the role of the Community Housing Resource Center; and increased collaboration among service providers in the prevention/rapid re-housing and sheltering efforts being provided.

The plan found on the following pages is the result of multiple planning sessions with representatives from the Blue Ridge Continuum of Care and the Blue Ridge Interagency Advisory Council on Homelessness. The business plan builds on the foundations laid in, [A Place to Call Home: 10 Year Plan to End Homelessness](#) and incorporates the requirements of the City of Roanoke's Substantial Amendment to the 2010-2015 HUD Consolidated Plan.

The Guiding Principles for the 18 months plan include:

- Increasing access to affordable, stable housing for individuals and families
- Focus on community-wide referral and collaboration
- Pursuing prevention resources to assist those at highest potential of homelessness
- Providing mental health and substance abuse services to those experiencing chronic homelessness

The business plan is a living document that will change over time but is intended to guide the efforts of the Blue Ridge Continuum of Care and the Inter-Agency Advisory Council over the period July 1, 2012 through December 2013.

Goal 1: Information Management

Committee Members:

Lee Bosworth, Kim Gembala, Dan Merenda, Paula Prince, Susan Carroll, Carol Tuning, Marie Muddiman, Brian Geiser, Mike Moffitt and Kristin Moses

Benchmarks/Success Measure(s)

1. Expand number of new Agencies (partners) as required per HEARTH Act by category type (jobs, income, education, etc.)
2. Expand use of HMIS to meet Hearth Act requirements
3. Establish and implement quality data standards for Blue Ridge Continuum of Care
4. Non HUD funded agency staff will complete agency referral form for Central Intake that provide the required data elements to capture all homeless individuals and families in HMIS

Action Steps:		Person/Agency Responsible	Date
1.a.	Evaluate agency categories and identify potential partners per HEARTH Act	HMIS Steering Committee	7-31-2013
1.b.	Identify partners per Hearth Act Requirements Start conversation with Goodwill and Freedom First Financial Coalition	HMIS Steering Committee	8-31-2013
1.c.	Report progress quarterly to CoC	CoC Chair and Lead Agency President	Quarterly
2.a.	Develop agreements appropriate to the agency for referral to programs	HMIS Steering Committee	10-31-2013
3.a.	Increase proficiency in data entry through regular HMIS training and support	HMIS staff and Vendor	9-30-2013
3.b.	Report data quality improvement using HMIS reporting capability at Blue Ridge interagency Advisory Council on Homelessness	President Lead Agency	✓
3.c.	Report Bed Utilization rates to Blue Ridge Interagency Council on Homelessness	President Lead Agency	✓
4.a.	Meet with non-HUD funded agency staff to formalize referral process	HMIS Lead Agency and CoC Chair	12-31-2013

Goal 2: Reduction in Time Spent Homeless

Committee Members:

Marie Muddiman, Earl Saunders, Malora Horn, Sherman Pennix, Kim Gembala, Nancy Reed, Curtis Davis, Ali Hamed-Moore, Earl Edwards, Michael Kennedy, Ronald Brown, Quovadis Washington-Brown, Katy Poulous, Mary Downer, Lottie Diomedi, Kimberly Tuttle, , Susan Carroll, Alex Hash; Harry White; Tamy Mann; Susan Trout

Benchmarks/Success Measure(s):

Reduce time spent homeless by 20% through:

1. Establishing and implementing formal network of landlords to address barriers to housing
2. Identify homeless persons with serious mental illness and substance abuse and refer to appropriate services
3. Assist in increasing client income prior to shelter exit
4. By providing quality case management, at least 20% of clients will obtain employment prior to exiting shelter
5. By providing financial assistance, an increased number of people who are housing ready will move to permanent housing
6. Support increase staffing to match increased demand in services to Roanoke City Schools Homeless Student Program

Action Steps:		Person/Agency Responsible	Date
1.a.	Identify opportunities to connect w/landlords in the community	Matt Crookshank, CHRC Heather Brush, CHRC	Completed 6/12/2013
1.b.	Increase landlord knowledge and support of housing homeless quarterly participation at Roanoke Regional Housing Network meetings	CHRC / CoC Partners Committee	Ongoing
1.c.	Identify landlord acceptable incentives for housing homeless (offer higher rental deposits for high barrier families and the need for this has changed as a formal landlord network is established)	Terri Hostetter, PATH Central Intake Staff	4/1/13
1.d.	Offer more training to front line staff about the procedures/regulations with voucher programs so they can assist clients in this process. Training provided at HELPS meetings.	HELPS and Committee members	12/31/2013
2.a.	Increase/ensure collaboration between PATH and Central Intake	BRBH-PATH, CI Staff	Ongoing
2.b.	Research the need/funding for additional mental health staff	Terri Hostetter, PATH	12/31/2013
2.c.	Coordinate training for front-line staff to identify serious mental illness and substance abuse clients (Front line staff were offered training through MHA-Mental Health First Aid)	HELPS and Committee	Ongoing
2.d.	Through coordination of current mental health street outreach and central intake 100% of eligible clients needing mental health will be offered services	BRBH PATH; Salem VAMC Outreach; HAT Outreach	Ongoing
3.a.	Increase training & participation for SOAR process among homeless providers (BRRH PATH has offered and continues to offer SOAR training. The community will need to commit to having front line staff actively completing SOAR claims)	BRBH PATH; Coc	Ongoing
4.a.	Increase/improve linkages to programs w/employment related services (This action step has not been worked on formally. CoC may need to form a small task group to make initial linkages)	Executive Committee to create small task group	12/31/2013

4.b.	Explore and identify an assessment that can assist shelter staff in screening/assessing for employability	Task group created by Executive Committee	12/31/2013
5.a.	Identify service gaps associated with rapid re-housing that can be utilized with flexible funding (The community will need to continue to identify flexible funding each year)	CHRC CoC Chair	6/12/2013 Completed
6.a.	Identify funding to support increased demand. (Worked on this spring and the CoC received funds from DHCD to fund additional staff. There needs to be continued work on this action step to maintain funding as well as find new funding)	BRICH, Malora Horn, CoC	Ongoing
6.b.	Identify manageable case load to serve homeless school students	Malora Horn, Coordinator, Homeless School, Student Program – Roanoke City	6/12/2013 Completed

Goal 3: Prevention of Homelessness

Committee Members:

Joel Shank, Captain Argot, Angela Penn, Ali Hamed-Moore, Karen McNally, Matt Crookshank, Karen Mason, Tanyia Jones, Dave Prosser, Evelyn Jordan, Sacil Armstrong, Beth Lutjen, and Aaron Fuller

Benchmarks/Success Measure(s):

1. Legal services are utilized to address homeless prevention
2. Central Intake is used throughout the community to address homeless prevention issues
3. Establish and utilize community-wide diversion process to prevent homelessness
4. At least 60% of all eligible individuals and families will remain in permanent housing
5. Provide case management services to help increase income and decrease expenses in households.

Action Steps:		Person/Agency Responsible	Date
1.a.	Contact bar association through Blue Ridge Legal Services to explore pro bono opportunities	Emily Jewitt, Legal Aid	12/31/12
1.b.	Contact Legal Aid and Blue Ridge Legal Services to explore partnership possibilities	Emily Jewitt, Legal Aid	12/31/12
1.c.	Contact Washington & Lee about potential partnership	Angela Penn, TAP	12/31/12
1.d.	Collect and report data to CoC on referrals and services provided.	Emily Jewitt, Legal Aid	Quarterly
2.a.	Conduct community awareness/marketing campaign about services available through Central Intake	Paula Prince, BRICH Carol Tuning, CoC Chair Matt Crookshank, CHRC	12/31/12
2.b.	Track data of services provided through Central Intake to establish baseline for increasing services	Carol Tuning, CoC Matt Crookshank, CHRC	11/22/12
2.c.	Conduct training for Central Intake process for community and agencies	Carol/Matt	11/30/12
2.d.	Increase awareness of prevention services	Carol Tuning, BR-CoC Matt Crookshank, CHRC	12/31/2012
2.e.	100% of people who come through Central Intake will be referred to homeless prevention services	Central Intake Staff	On-going
2.f.	Central intake to determine which agencies have not been visited and develop plan for outreach	Central Intake Staff	On-going
2.g.	Establish Central Intake tracking mechanism with agency eligible services and availability of funding.	Central Intake Staff	On-going
3.a.	Conduct trainings for front-line shelter staff on diversion training	Marie Muddiman, Family Promise Ali Hamed Moore, Trust	12/31/12
3.b.	Include diversion in community-wide policies and procedures with agencies' process of reporting back to Central Intake	HSG Group	12/31/14
3.c.	Increase awareness of prevention services as measured by PIT survey responses	Paula Prince, Chair, BRICH	5/31/2013
4.a.	The CHRC and partners will provide financial assistance in accordance with CoC policies	CHRC and COC	12/31/13
5.a.	Develop partnerships as outlined by HEARTH Act and including United Way of Roanoke valley	Captain Argot, Salvation Army	3/31/2013
5.b.	Identification of emergency vs subsistence cases	CHRC and Central Intake	3/31/2013

Goal/Focus Area: Public Policy, Procedures and Monitoring

Committee Members:

Carol Tuning, Shane Sawyer, , Kristin Adkins, Paula Prince, Dawn Riddle, Judy Hough, Karen Michalski-Karney, Sonia Herron, Joe Cobb, Alfred Chevalier, Annette Lewis, Keith Holland

Benchmarks/Success Measure(s):

1. Unified Funding Agency (UFA) designation obtained (on hold pending HUD determination and NOFA release)
2. By providing ADA (architecturally accessible) and Sections 504 (programmatic accessible) compliance and 508 (Website) compliance, 100% of persons with disabilities will have access to homeless shelter services for the purposes of achieving decent housing, a suitable living environment and economic opportunity.
3. Develop monitoring and evaluation tool for HUD funded projects and utilize results for future funding and planning
4. Incorporate homelessness issues/workforce/affordable/accessible into all municipal planning documents
5. Develop and implement a homeless discharge plan
6. Establish clear policies and procedures for Central Intake program
7. Engage the faith community
8. Create a high profile task force to focus on rapid re-housing
9. Completion of at least 35% of housing study recommendations

Action Steps:		Person/Agency Responsible	Date
1.a.	Obtain City approval for BR CoC to become a HUD Unified Funding Agency (hold)	Carol Tuning, CoC Chair/Committee	1/31/2013
1.b.	Complete required UFA paperwork (hold)	Carol Tuning, CoC Chair	4/30/2013
1.c.	Amend CoC operating guidelines (hold)	Carol Tuning, CoC Chair Sonia Herron, CoC-Co-Chair	5/30/2013
1.d.	Obtain BR-ICH and CoC approval (hold)	Paula Prince, BRICH Chair Carol Tuning, CoC Chair	6/30/2013
2.a.	Continue to distribute printed materials on ADA/504 Accessibility and Section 508 with notification that w/in next 18 months they will be inspected. Work with service providers to provide services in an integrated setting	Karen Michalski Karney, BRILC	Complete
2.b.	Conduct site visits to monitor projects (local, state and federally funded)	Karen Michalski Karney, BRILC	Complete
2.c.	Create corrective action plan for not meeting ADA standards (Trust/TLC complete; Family Promise – on-going)	Karen Michalski Karney, BRILC and Agency	12/31/2013
3.a.	Establish a committee to develop tool for monitoring HUD funded projects. Develop a tool for monitoring HUD funded projects	Carol Tuning, CoC Chair	6/2013 9/1/2013
3.b.	Submit tool to CoC for approval	Carol Tuning, CoC Chair	9/30/2013
	Submit to BRICH for approval		10/30/2013
4.a.	Identify which plans fall into this category.	Shane Sawyer, Alleghany Regional Commission Sherman Pennix	9/30/2013
4.b.	Advocate to municipal planning bodies	Shane Sawyer, Alleghany Regional Commission Sherman Pennix	11/01/2013
5.a.	Convene meeting of foster care, health care, mental health and corrections	Dan Merenda, Council of Community Services	6/30/2013

5.b.	Have policies and protocols in place to ensure that persons being discharged from publicly-funded institutions or systems of care are not discharged immediately into homelessness.	Dan Merenda, Council of Community Services Carol Tuning, CoC Chair	9/30/2013
5.c.	Track compliance with discharge planning policies through HMIS	HMIS Lead Agency	Quarterly
6.a.	Convene committee to address development of policies and procedures	Matt Crookshank, CHRC Carol Tuning, CoC Chair Central Intake Staff	11/30/2012 Complete
6.b.	Obtain approval from CoC	Carol Tuning, CoC Chair	7/31/2013
6.c.	Obtain approval from Department of Housing and Community Development	Carol Tuning, CoC Chair	9/30/2013
7.a.	Convene semi-annual meeting with faith community.	Council of Community Services	11/01/2013 5/31/2014
7.b.	Establish partnership agreements with faith community to use community wide referral process and provide data.	Council of Community Services/ Central Intake	5/31/14
8.a.	Convene meetings of task force and report to BRICH and CoC Move to Goal 2	Dan Merenda, Council of Community Services	1/31/2013
9.a.	Report progress to BRICH and CoC	Shane Sawyer, Alleghany Regional Commission Matt Crookshank, Roanoke Regional Housing Network	Quarterly