

CoC Plan for Serving Individuals and Families Experiencing Homelessness with Severe Service Needs
Allegheny County CoC (PA 600)
FY22 CoC Supplemental to Address Unsheltered Homelessness

P-1. Leveraging Housing Resources

P-1a. Development of New Units and Creation of Housing Opportunities–Leveraging Housing. See Leveraging Housing Commitment letter attached.

P-1b. Development of New Units and Creation of Housing Opportunities–PHA Commitment. See PHA Commitment letter attached.

P-1c. Landlord Recruitment

Current Strategy:

DHS established the Housing Navigation Unit (HNU) in 2018 to recruit and incentivize private landlords to rent to households experiencing homelessness. The team consists of two full-time Housing Navigators and a supervisor who work on behalf of the CoC to help housing providers match individuals and families to affordable units in the private market. The HNU's recruitment strategies include conducting online research to find affordable housing units, creating prospect lists, and cold calling potential landlords to educate them about the benefits of working with CoC housing programs. The HNU also operates various landlord incentive programs on behalf of the CoC, which encourage renting to tenants with criminal backgrounds, past evictions, poor credit history, or other housing barriers. These include the DHS Landlord Risk Mitigation Fund, which provides up to \$3,000 per unit to offset property damage or vacancy loss, and other new incentives described below. Finally, the HNU offers community trainings and one-on-one technical assistance to help landlords and service providers prevent and resolve challenges that might otherwise result in loss of housing.

Effectiveness of current strategies across the CoC's geographic area, including areas where the CoC has historically not been able to find units:

Since the Landlord Risk Mitigation Fund was established in 2017, the HNU has enrolled nearly 500 new properties across the CoC's geographic area. DHS is partnering with the two local Public Housing Authorities on HUD's Community Choice Demonstration Program, a long-term study to examine the ability to improve geographic mobility for families with Housing Choice Vouchers (HCVs). In preparing for the study, DHS, the Allegheny County Housing Authority (ACHA) and the Housing Authority of the City of Pittsburgh (HACP) successfully advocated to HUD to create a tract-based payment standard to ensure that payments are more reflective of competitive market rate rents in hyper-local rental markets. This approach will offer HCV families access to more rental units and greater geographic choice. Participants began enrolling in the study in September 2022. While the study will last five years, the CoC hopes to use any preliminary findings as soon as they are available to improve recruitment in areas where the CoC has struggled to find landlords and units.

New Landlord Recruitment Practices and Lessons Learned:

To adapt to soaring housing costs and increased competition for units in the wake of COVID-19, the HNU implemented several new practices. HNU staff increased their involvement with local real estate associations and began hosting their own landlord forums. The HNU also took advantage of the flexibilities available through pandemic relief funds to pilot new landlord incentives. These included a \$1,000 sign-on bonus for new landlords renting to CoC households and a repair fund (up to \$5,000 per unit) that enabled landlords participating in the Emergency Housing Voucher (EHV) program to bring units into compliance with Housing Quality Standards. The HNU also worked to reduce red tape for landlords by immediately enrolling them in the Risk Mitigation Fund upon signing a lease with a CoC household.

The EHV program has been effective at attracting new landlords, particularly those with tenants seeking to apply the vouchers to their current unit. The EHV landlord incentives brought in seven new landlords representing a large collective portfolio of units. Other highlights have included the HNU's strong partnership with ACHA and a strong emphasis on customer service to landlords, which have resulting in high voucher utilization rates. As of early October 2022, 67% of EHV's awarded by ACHA are leased up, compared to the statewide average rate of 45%.

Using Data to Update the Landlord Recruitment Strategy:

The HNU maintains a list of active landlords who rent to CoC households, enabling the team to track key data points including the number, size and geographic distribution of housing units, landlord participation in incentive programs, voucher utilization, and spending. The Housing Navigators will continue to manage the list and work with the DHS Office of Analytics, PHAs and CoC stakeholders to identify trends. This data will inform future strategies, such as which types of incentives provide the most benefit to landlords. The HNU will also continue collecting information about service participants' desired housing locations to identify geographic areas where additional landlord coverage is needed.

P-2. Leveraging Healthcare Resources. See Healthcare Leveraging Commitment letters attached.

P-3. CoC's Current Strategy to Identify, Shelter, and House Individuals and Families Experiencing Homelessness

P-3a. Current Street Outreach Strategy

Coordination of Street Outreach teams:

Allegheny County's street outreach effort is coordinated by the CoC and carried out by a regional network of more than 10 publicly and privately funded street outreach teams. The Homeless Outreach Coordinating Committee (HOCC), a subcommittee of the CoC's advisory board, strategizes ways that the homeless system and community partners can better identify, engage, and support those who are unsheltered. Additionally, the CoC facilitates a weekly case conferencing meeting to review a by-name list of unsheltered individuals and to plan effective engagement approaches. The DHS Field Unit (the Field Unit) supplies day-to-day staff support for these activities, ensuring effective coordination across partners.

Frequency of street outreach:

Street outreach teams are out in the community every day of the week, including daytime and evening hours. They visit encampments, drop-in centers, food lines, and other community spaces where unsheltered individuals are known to stay or receive services multiple times each week.

Helping people exit unsheltered homelessness:

The street outreach network covers 100% of the CoC's geographic area. Strong cross-agency communication enables street outreach teams to quickly respond to service calls from many different sources, including emergency responders, police, 311, community groups, and BigBurgh, a local web-app for homeless services. Outreach workers are able to offer basic needs assistance, harm reduction resources, shelter connections, and referrals to Coordinated Entry at any location in the community.

Engaging those with the highest vulnerabilities using culturally appropriate strategies:

Trauma-informed care, Motivational Interviewing, harm reduction, racial equity, and LGBTQIA+ cultural competency are universal standards of practice for all street outreach providers that work within the CoC. Outreach workers build trust and rapport with clients, often starting by simply offering food and water. The intent is to develop a relationship in which the individual eventually trusts enough to reach out for help when necessary. Outreach workers often pair up with providers or community members unsheltered individuals

already know and trust. The street outreach network includes service providers with specialized expertise in medical street outreach, harm reduction, and youth development.

Using street outreach teams to connect unsheltered individuals and families to permanent housing:

The Field Unit plays a significant role in connecting unsheltered individuals and families to permanent housing via the Coordinated Entry (CE) system, known as the Allegheny Link. Since 2015, the Allegheny Link has operated a phone hotline, email service and walk-in hours at the DHS headquarters in Downtown Pittsburgh. Realizing that it needed staff out in the community to reach the most vulnerable people, DHS created the Field Unit in 2016. The Field Unit functions as a mobile division of the Allegheny Link, combining street outreach, case management and housing assessment services.

The Field Unit has grown from one staff person to seven and has become an invaluable complement to the housing process. Its service coordinators can often find individuals out on the streets whom CE staff are struggling to reach by phone. Additionally, the team communicates with street outreach and shelter providers about households' current CE status, including any applicable assessments or housing referrals. This information is shared at weekly CoC case conferencing meetings for unsheltered individuals and young adults, enabling partners to coordinate effectively around housing and other service needs.

Hiring people with lived expertise of unsheltered homelessness to conduct outreach:

The CoC is exploring opportunities to hire individuals with lived experience in street outreach roles. While several individual providers utilize Community Health Workers and other peer support roles, this practice is not standardized across the homeless system. The social-emotional wellbeing of those with lived experience is a key priority. Before implementing any strategy, CoC stakeholders are studying best practices in other communities and systems, with special attention to identifying models that recognize those needs and offer appropriate levels of support to prevent re-traumatization.

Alignment with evidence-based practices:

Allegheny County's current street outreach strategy aligns with evidence-based practices outlined in the United States Interagency Council on Homelessness' 2019 publication entitled "Core Elements of Street Outreach to Persons Experiencing Homelessness." These include delivering comprehensive and coordinated services, using a Housing-First approach, prioritizing safety, and ensuring that services are person-centered, trauma-informed, and culturally responsive. Street outreach teams use Motivational Interviewing techniques to engage with unsheltered people. They also offer harm reduction services endorsed by the Substance Abuse and Mental Health Services Administration, such as overdose reversal supplies and linkages to HIV testing and treatment services.

P-3b. Current Strategy to Provide Immediate Access to Low-Barrier Shelter and Temporary Housing for Individuals and Families Experiencing Unsheltered Homelessness

Current Strategy:

Allegheny County's strategy for connecting individuals and families to shelters relies on close coordination between the Allegheny Link (CE), the mobile Field Unit, street outreach teams, and local shelters. Unsheltered individuals can access emergency shelter by visiting or calling the shelter directly. They do not have to contact the Allegheny Link to obtain referrals for emergency shelters. Those who do contact the Allegheny Link receive up-to-date information about emergency shelter locations and intake times. Allegheny Link staff also help callers create a plan to safely get to the shelter program of their choosing.

The CoC offers non-congregate shelter beds to safely serve individuals with the greatest vulnerabilities. These shelters are often more appealing to individuals who are long accustomed to living outside on their own, as well as LGBTQIA+ individuals looking for a more gender-affirming environment. Access to non-

congregate shelters is managed by the Allegheny Link and Field Unit, working in close partnerships with the street outreach provider network to identify individuals who would most benefit from these spaces. The current inventory of non-congregate shelters is both geographically dispersed and responsive to varying household compositions and levels of service needs. Current programs include:

- Home 2020, a 17-bed low-barrier shelter that uses a shared housing model and provides intensive case management to help individuals establish trust and connect with various services, with a focus on behavioral health needs.
- Wood Street Commons and Homeless Assistance Program (HAP) Crisis units, which supply non-congregate shelter space for individuals identified by the Street Outreach teams, but without the intensive level of case management support provided at Home2020.
- The McKeesport Emergency Shelter, which is open to those who present at it, supplying emergency shelter space in a non-congregate facility setting.

For families seeking shelter, the Allegheny Link takes an intensive case management approach. Allegheny Link staff first work with the family to try to find alternatives to entering the homelessness system. This emphasis on diversion helps most families avoid shelter stays all together. For those families unable to find other solutions, the Allegheny Link provides a warm hand-off to a family emergency shelter with a vacancy that can accommodate the family size and composition.

The CoC works closely with the Allegheny County Office of Children, Youth, and Families (CYF) to help families at risk of homelessness preserve their housing and improve their living arrangements using supports outside of the CoC. CYF operates a homeless prevention program for families active in child welfare and trains all caseworkers to identify risk factors such as being behind on rent or precariously doubling up. DHS has also created a community-based prevention initiative that brings mobile Housing Specialists into neighborhood centers to help families address housing issues before they become crises.

Effectiveness of current strategies:

The CoC's strategy for connecting individuals and families to shelters has evolved in the years since Coordinated Entry launched. Initially, the Allegheny Link managed access to all shelters, including those serving single individuals. DHS later reversed this practice after observing that it led to bottlenecks and unfilled shelter beds. After the first-come-first-serve policy was implemented for single shelters, bed utilization rates increased significantly. The average daily utilization of emergency shelter beds for singles was 96% during the first six months following this policy change, compared to just 80% during the same six-month period in the year prior. Non-congregate shelters have been successful at serving the most vulnerable individuals and creating a pathway to permanent housing within the CoC. As a result, the CoC has significantly expanded the inventory of non-congregate shelter beds over the last five years. Through the active collaboration with CYF and the use of family diversion and homelessness prevention services, the CoC has a long-standing history of keeping families sheltered.

New Practices and Lessons Learned:

The CoC recognizes the significance of supporting the physical and behavioral health needs of households in shelter. Through pandemic relief funding, DHS purchased and supplied mobile telehealth technology for every emergency shelter. Through partnerships with local health providers, particularly area FQHC's, these telehealth stations increase the delivery and accessibility of healthcare to people in shelters. The CoC is building on these successes by further collaborating with shelter staff and the Allegheny County Health Department to identify and share best practices for telehealth station use.

Further, the creation of a low-barrier shelter has been a key priority of the CoC since 2017. Over the last three years, DHS has secured partnerships and funding from public and private partners to bring this concept

to life. The result of this collaboration is Second Avenue Commons (2AC), a brand new 45,000-square-foot, five-floor facility in Downtown Pittsburgh, scheduled to open Fall 2022.

The new 2AC facility will house four complementary services to help those experiencing homelessness find safety and stability while moving towards permanent housing. These include a 95-bed low-barrier shelter, with space to add 40 additional beds when needed; a daytime drop-in center; a medical and behavioral health clinic operated by the University of Pittsburgh Medical Center (UPMC); and 43 Single Room Occupancy (SRO) units. Services within 2AC will not require identification, background checks or sobriety. Clients will be able to access 2AC by walking in, calling in or through referrals from community organizations and street outreach workers.

CoC leaders researched the characteristics of successful low-barrier shelters by reviewing literature on trauma-informed design, interviewing staff at comparable facilities across the country, and gathering input from local experts. These experts included individuals who have experienced unsheltered and sheltered homelessness. Flexibility was the most important takeaway from the research. In the final blueprints for 2AC, all bathrooms and sleeping rooms are gender-neutral and the shelter has a multipurpose space that can convert into overflow sleeping rooms. Avoiding excessive rulemaking was another important lesson learned. At the shelter, partners will be able to stay together, pets are welcome, and residents may store possessions in the facility's secure storage units.

P-3c. Current Strategy to Provide Immediate Access to Low-Barrier Permanent Housing for Individuals and Families Experiencing Unsheltered Homelessness

Current Strategy:

The CoC's strategy to quickly connect individuals and families to permanent housing is rooted in Housing First principles and relies on several integrated components: 1) increasing the supply of RRH and PSH programs, 2) leveraging the Housing Navigator Unit to build the capacity of CoC housing providers, 3) partnering with public housing agencies to prioritize households experiencing homelessness, and 4) working across human services systems to leverage housing available through other funding streams.

The CoC formally committed to Housing First in 2017, ushering in a host of new policies and procedures for contracted providers. All housing providers must use low-barrier approaches to ensure individuals and families are able to quickly access and continue to receive housing services without preconditions. Individuals and family members may not be denied services based on their employment status, income, religious affiliation, participation in faith-based activities, or abstinence from drug or alcohol use. Programs cannot issue blanket denials based on criminal background, being in active recovery, or having a mental health disability. The CoC uses a Housing First termination and appeals process designed to avoid discharging individuals to homeless situations.

- 1) **Utilization of RRH and PSH:** As part of the transformation to a Housing First approach, the CoC reallocated nearly all CoC Transitional Housing funds to Rapid Rehousing (RRH) and Permanent Supportive Housing (PSH) programs. Utilizing RRH and PSH has proven to be the most effective strategy for supplying immediate, low-barrier housing to individuals and families. Over time, DHS has repeatedly sought and secured additional funding to expand the CoC's inventory of RRH and PSH. Currently, the CoC housing inventory includes 885 RRH beds and 2144 PSH beds.

Individuals and family's access RRH and PSH programs through the Allegheny Link, which assesses and prioritizes households based on chronic homeless status, vulnerability, and length of time homeless. The Field Unit and street outreach workers support this process by regularly reviewing a by-name list of unsheltered individuals to identify highly vulnerable and/or chronically homeless

individuals in need of CE screening or reassessment. The Allegheny Link connects households to housing programs through a centralized vacancy matching process, facilitated by a Housing Resource Coordinator. The CoC regularly monitors housing referrals for timeliness using HMIS.

- 2) Leveraging the Housing Navigator Unit to build the capacity of housing providers: The DHS Housing Navigator Unit (HNU) works on behalf of the entire CoC to identify and incentivize landlords to rent to households experiencing homelessness. By continually vetting potential landlords and creating a centralized, real-time inventory of open units across the county, the HNU fortifies providers' ongoing efforts to serve households with the greatest barriers.

Housing Navigators offers an annual 7-part training series for housing providers, covering a wide range of topics from housing vouchers to tenant rights. During the pandemic, the HNU introduced virtual "office hours," weekly drop-in sessions at which CoC providers can ask housing-related questions or troubleshoot challenges they are facing. These educational programs complement and enhance the housing expertise of caseworkers inside and outside of the CoC.

- 3) Partnering with public housing agencies: The CoC has an established homeless admission preference through the HCV program with the two largest housing authorities in the geographic area—Allegheny County Housing Authority and Housing Authority of the City of Pittsburgh. Both PHAs sit on the CoC governance board, allowing for a close working relationship. The homeless admission preferences have been in place for nearly a decade and are an important part of the CoC's Move On strategy.

The CoC also collaborates with both PHAs on other voucher types including Emergency Housing Vouchers, Mainstream Vouchers, Family Unification Program, and Fostering Youth to Independence vouchers. The preference allows participants of PSH, RRH, and transitional programs who require a housing subsidy to move to the top of the HCV waiting list. These preferences have enabled the CoC to open the back door of the homeless system into permanent housing and create space in the system for newly identified homeless individuals and families to take their place.

- 4) Working across human services systems: As an integrated human service agency, DHS can connect individuals and families experiencing homelessness with other county-funded housing supports outside of the CoC. These include a diverse array of temporary, permanent, scattered site and congregate housing programs managed by different DHS program offices. For example, individuals with developmental disabilities may be eligible for housing through the life-sharing programs operated by the Office of Developmental Supports. Young people with past child welfare involvement or a qualifying mental health diagnosis may participate in specialized housing programs through the Office of Children, Youth, and Families and the Office of Behavioral Health, respectively.

DHS maintains a software application called Client View which allows all agency staff and contracted providers to review clients' past and current involvement in any county-funded human services. Client View is used in case conferencing meetings to identify alternative pathways to permanent housing outside of the CoC.

Effectiveness of current strategies:

Prior to the pandemic, the CoC saw both a decrease in length of time homeless (LOT) and an increase in enrollments of unsheltered households into RRH and PSH. Between 2017 and 2019, the median LOT decreased from 47 to 28 days for people in emergency shelter and safe haven, and from 68 to 34 days when

including those in transitional housing programs. The percentage of people enrolled in RRH or PSH that reported “place not meant for human habitation” as their prior living arrangement increased from 10% in 2015 to 25% in 2022. These results can be attributed to effective integration of newer CoC strategies, including the Field Unit and the Housing Navigator Unit.

The CoC has seen an increase in median and average length of time homeless (LOT) since the onset of the COVID-19 pandemic. The shortage of affordable, quality housing stock remains a critical barrier across the CoC, particularly for a subset of long-stayers. The CoC seeks to increase its inventory of permanent housing while building upon strategies with demonstrated success in quickly linking unsheltered people to those resources.

New Practices and Lessons Learned:

In 2020, the Allegheny Link implemented a new decision support tool called the Allegheny Housing Assessment (AHA), replacing the VI-SPDAT. Designed to be a more trauma-informed and data-driven approach to CE assessment and prioritization, the AHA uses a predictive risk model to predict the likelihood of three types of events occurring in a person’s life if they remain unhoused over the next 12 months: a mental health inpatient stay, a jail booking and frequent use (four or more visits) of hospital emergency rooms. These events serve as indicators of harm if a person’s homelessness persists.

DHS used community input to develop AHA and conducted an independent ethics review and external data validation. Preliminary outcomes have shown that the AHA is both more accurate and equitable at prioritizing households with the greatest vulnerabilities. It is also less time-consuming and does not require individuals to answer sensitive questions which can add to their trauma during a housing crisis.

While these improvements have made the CoC more effective at serving people with the greatest vulnerabilities, the region’s tightening housing market impedes our ability to quickly move people out of homelessness. Additional CoC funding will enable us to fill gaps in our RRH and PSH inventory, improve the flow of people into and out of the homeless system, and increase housing navigation services for unsheltered people. We aim to leverage non-CoC funding to increase landlord and developer engagement and to expand landlord incentives tied to CoC housing programs.

P-4. Updating the CoCs Strategy to Identify, Shelter, and House Individuals Experiencing Unsheltered Homelessness with Data and Performance

Using data, performance, and best practices to improve performance of and expand street outreach:

Allegheny County’s most recent Point-In-Time Homeless Count data show an increase in unsheltered homelessness from 2021 to 2022. Encampments within the city of Pittsburgh have grown in number and in size over the last year, renewing public concerns regarding the well-being of unsheltered people. The CoC will leverage its existing street outreach infrastructure to implement strategies to better serve unsheltered people. It will also complement broader public safety efforts being carried out in at the county level, ensuring that unsheltered households are able to reap the benefits of those innovations. Current plans include the following:

1. **Reforming the county crisis response system, with targeted strategies to prevent homelessness:** In 2020, Allegheny County began a full-scale transformation of its crisis response system to address the overreliance on emergency services for people with behavioral health needs, as well as the racial inequities that persist throughout the crisis system. The initiative is based on recommendations from a 30-member Crisis Response Stakeholder Group and includes specific plans to prevent homelessness among the reentry population and individuals with behavioral health needs. As part of this effort, the

CoC will work with local hospitals, jails, and crisis response agencies to increase access to housing by improving discharge planning procedures. Additionally, the county will procure more reentry housing and create a “shared front door” to housing resources within the homeless and behavioral health systems.

2. Improving access to community resources for unsheltered individuals: Allegheny County is piloting a program to measure the effects of discounted public transportation fares in connecting low-income residents to services, jobs, and community resources. Within the Downtown area, a stakeholder group led by the Building Owners & Managers Association of Pittsburgh and Point Park University has begun convening to identify solutions to the lack of public restroom facilities. The CoC will play a role in supporting these efforts, including identifying ways to target solutions for unsheltered populations.
3. Increase supportive services that smooth the pathway to housing: DHS Field Unit staff will be co-located within the drop-in center at the new Second Avenue Commons facility, offering both shelter residents and unsheltered guests’ timely access to the Coordinated Entry system for housing assessment and referrals. Through new SSO programs (described in more detail below) the CoC will offer enhanced housing case management to unsheltered individuals, helping them to secure vital documents, review housing options, and complete housing applications.
4. Decommissioning encampments with synchronized supports: The City of Pittsburgh and Allegheny County are currently exploring best practice models for decommissioning encampments with synchronized housing referrals and supports. The envisioned model will be trauma-informed and will provide all encampment residents with access to shelter and permanent housing options within a rapid timeframe (one week or less). Client choice and credible offers of support, in which appropriate housing is immediately available, will be critical to the success of this strategy. As such, this effort connects closely to the CoC’s ongoing work to expand and diversify its housing inventory.

How street outreach activities are connected to coordinated entry or HMIS:

The DHS Field Unit will continue to facilitate connections between the CoC’s network of street outreach programs - including new partners and activities outlined in this plan - and the Coordinated Entry system. As a mobile division of the Allegheny Link, the Field Unit staff regularly partner with all street outreach teams, conducting CE assessments and ensuring that unsheltered individuals and families receive appropriate referrals. All CoC-funded street outreach activities are tracked in HMIS.

How the CoC will incorporate new partners into street outreach strategies:

The CoC continually leverages the expertise and connections of its diverse stakeholder network to generate new partnerships. For example, the City of Pittsburgh builds relationships with comparable cities for peer-sharing and best practices; the Pittsburgh Downtown Partnership enlists support from corporations and small businesses; and street outreach providers identify community agencies offering specialized services. New partners will be joining the diverse array of stakeholders already engaged around street outreach, including homeless service providers, emergency responders and law enforcement, businesses, healthcare and harm reduction providers, and youth agencies. HOCC and street outreach case conferencing meetings are highly collaborative and will enable the CoC to quickly and seamlessly integrate new partners.

How data, performance, and best practices will be used to improve access to low-barrier shelter and temporary accommodations:

The new Second Avenue Commons (2AC) incorporates low-barrier shelter best practices for design, policies, and programming, as described in Section P-3b. Beyond creating more shelter beds for the CoC, the

project is intended to remove barriers that are known to limit access for various groups of people, such as not being able to keep one's pets or stay with a loved one. The facility provides flexible, gender-neutral spaces that empower residents to choose where and with whom they feel comfortable staying. Through its on-site drop-in center and medical clinic, unsheltered individuals who choose not to stay in shelter can still connect with services and build rapport with shelter staff. These program features will improve access for individuals who have traditionally avoided shelters.

The CoC will collect and analyze utilization, performance, and demographic data to ensure that the new facility is meeting the demand for shelter services and equitably serving all populations with emphasis on marginalized communities. 2AC will have a participant council including current and former shelter residents. The council will have a formal governance role and will provide ongoing guidance to drive quality improvement.

How data, performance, and best practices will be used to expand, as necessary, low-barrier shelter and temporary accommodations:

The 2AC facility will add 95 shelter beds to the CoC's current inventory. It has also been designed with flexible space that can accommodate up to 40 more beds during a severe weather event or other crises. The CoC will track utilization data to assess whether these additional beds meet the need. If capacity is not sufficient, the CoC will draw upon other county resources to supply more shelter beds. The CoC's goal is to reduce the need for shelter by significantly increasing the supply of permanent housing and improving the flow of households through the homeless system.

New practices and activities that will be funded through an award under this competition:

Using funds awarded under this Special NOFO, the CoC seeks to establish a new Supportive Service Only (SSO) project that will create a team of Housing Solution Specialist (HSS) who will provide specialized housing navigation and case management across the CoC. HSSs will provide direct assistance to households experiencing unsheltered homelessness and participants at the emergency shelters that are not eligible, not likely to receive, or not in need of longer-term homeless system housing services (RRH or PSH). This direct housing assistance will provide opportunities for these households to stabilize in housing more quickly and enable the CoC to serve the most vulnerable with appropriate PSH and RRH services. Where shelter staff do not have the capacity for extensive housing casing management, the HSS will: provide individuals with direct assistance to help resolve their housing crisis; provide preliminary eligibility screening for publicly and privately funded programs; serve as an expert on the different types of housing available, the requirements for housing, the processes for applying, and recommended resources for listings; assist households with completing paperwork and becoming "document ready" for housing; serve as a resource for reviewing leases and explaining tenant rights and responsibilities; and track and assess supports provided and referred.

How data, performance, and best practices will be used to improve the CoCs ability to rapidly and permanently house people with histories of unsheltered homelessness:

CoC performance data collected in FY 2020 and FY 2021 show a decrease in the rate at which people exited emergency shelter, transitional housing, safe haven, and RRH projects to permanent housing destinations. While the CoC's primary goal is to increase the supply of affordable housing, as described below, there are multiple plans underway to improve service delivery and strengthen the existing pathways to permanent housing. These include:

1. Increasing the availability of housing case management to households experiencing sheltered and unsheltered homelessness: The CoC currently funds one full-time diversion specialist who works within shelters to help seniors navigate subsidized and private market housing, as well as specialized

service coordinators who perform similar roles for families and young adults experiencing homelessness. These programs have demonstrated success in reducing clients' time in shelter and their reliance on CoC housing. However, these programs remain limited to a small subset of CoC households, primarily those in shelter. Using funds awarded under this Special NOFO, the CoC seeks to establish a new Supportive Service Only (SSO) project that will replicate and expand upon this model by establishing a team of Housing Solutions Specialist who will provide housing case management targeted toward unsheltered people and those who are not in an RRH or PSH program.

2. **Creating a shared front door to housing through the homeless and behavioral health systems:** DHS is leading an effort to integrate its homeless and behavioral health systems to maximize their respective resources and ensure people receive the housing and services they need. Currently, system fragmentation results in a misalignment of services and needs. For examples, individuals with serious mental illness sometimes receive CoC housing when behavioral health housing might better meet their needs, and individuals with lower needs taking up a higher cost behavioral health bed when they could be effectively served through homeless housing. In both systems, housing waitlists are long. DHS is working to create a shared front door to both systems. The expected outcome is for clients to have access to housing programs that best fit their needs.
3. **Diversifying permanent housing options within the CoC:** The continuum of RRH and PSH housing will ideally offer a greater variety of options from which households can choose. Shared housing is an emerging best practice that has attracted the CoC's attention as a means to address the high cost of housing and to build natural communities of support. The CoC piloted a youth shared housing program with YHDP funds and is assessing the feasibility of a shared housing strategy for the entire CoC. CoC stakeholders are currently participating in the Shared Housing Institute's national training cohort to learn from other CoCs that have successfully launched shared housing programs. The CoC is also exploring how it might better customize the level and frequency of supportive services within housing programs using progressive engagement.
4. **Educating landlords:** Leveraging the existing capacity and expertise of the Housing Navigator Unit, the CoC seeks to create education programs that help landlords better understand the lived experience of homelessness. For example, trauma-informed landlord training could help potential renters develop useful communication skills and identify ways to resolve conflicts without resorting to the threat of eviction. The CoC will explore ways to connect training completion to landlord incentives.
5. **Streamlining housing access:** The CoC is exploring process improvements to make it easier for individuals in crisis to access housing. Proposed strategies include simplifying Fair Market Rent calculations for the CoC and developing a common housing application that reduces the number of times households must provide documentation. CoC members have begun to explore ways to create shallow rental assistance and/or a locally funded and administered voucher program to enable more households to receive financial assistance.

How data, performance, and best practices will be utilized to expand the CoCs ability to rapidly and permanent housing people with histories of unsheltered homelessness:

In Allegheny County, affordable housing has been in short supply for years and the combined forces of the pandemic and inflation have exacerbated the gap. As a result, households are staying in the homeless system for longer periods of time. The CoC aims to increase the inventory of permanent housing within the homeless system, reducing the length of time individuals and families remain unsheltered. Simultaneously, the CoC seeks to increase affordable housing in the community at large, enabling households to exit

homeless services more rapidly and reducing the overall demand for these services. To achieve those goals, the CoC is pursuing the following strategies:

1. Expanding the CoC's inventory of permanent housing: The CoC has included applications for additional PSH and RRH projects in both the FY22 CoC Competition and the Special NOFO to Address Unsheltered Homelessness. The projects applied for are designed to serve individuals and families experiencing homelessness, without any additional eligibility criteria. The CoC will continue to prioritize households based on vulnerability using the AHA, as described on page 7. In addition, the new Second Avenue Commons will add 43 Single Room Occupancy units with priority for unsheltered individuals.
2. Leveraging Medicaid dollars to increase PSH: DHS has submitted a plan to use Pennsylvania Medicaid Reinvestment Fund to create additional PSH units and services, and to support development of units for PSH participants. If approved by the state, as expected, the plan would invest an additional \$10 million into PSH for people experiencing homelessness in Allegheny County. The funds would cover direct participant expenses, such as rental subsidies and housing services, for an estimated 70-100 individuals per year. It would also help increase the supply of affordable housing through landlord incentives and a housing development fund for capital investments within larger mixed-population rental projects and/or small scale PSH projects. Through this housing development fund, the County seeks to add 30 units over 5 years.
3. Continued collaboration with local Public Housing Authorities to increase the supply of public housing vouchers and pilot new move-on strategies. The CoC will partner with the Allegheny County Housing Authority to administer stability vouchers, building off the lessons learned and successes of the homeless preference in the HCV and EHV programs. New move-on strategies will help households transition more efficiently from CoC subsidy to PHA vouchers, enabling them to maintain their current housing when possible. Opportunities include: providing supplemental rental assistance to fill gaps between the end of CoC subsidies and the start of PHA voucher payments; incentivizing landlords to accept vouchers by offering funds to bring housing up to code; and enhancing support services for individuals living in public housing to prevent eviction.
4. Continued collaboration with entities receiving housing and development resources across the CoC's geographic region to increase the supply of affordable housing. This includes the ongoing coordination regarding Consolidated Plans, American Rescue Plan funds, HOME-ARP funds, and the Urban Redevelopment Authority (URA) of Pittsburgh's Housing Opportunity Fund (HOF). In 2018, the City of Pittsburgh established the HOF, committing \$10 million annually to support residents to stay in their homes or move to safe and affordable homes. The HOF supports this goal through programs including rental home development, financial assistance for rent, mortgages and utilities, down payment and closing cost assistance, assistance with home repairs, for-sale home development, housing legal assistance, and landlord assistance with repairs.
5. Improving the flow of households into and out of Permanent Supportive Housing. The new SSO programs proposed under this Special NOFO are designed to improve system flow. As described previously, the Housing Solutions Specialist (HSS) unit will help individuals who are unsheltered or in emergency shelter to stabilize in housing outside of the homelessness system. The proposed unit also includes dedicated staff who will provide specialized housing navigation and support to households who are ready to exit PSH, helping them transition into permanent subsidized or market rate housing outside the CoC. They will target services to households that no longer require the level

of support services that are available through PSH. In doing so, they will help improve system flow and conserve PSH units for those with the greatest need.

Finally, the proposed Torchlight SSO program will provide services to households, particularly unsheltered households and those with a history of unsheltered homelessness, until the time they enroll in a housing program. This program fills an existing service gap in the CoC by providing immediate case management and support services that are not dependent on a household's enrollment in a CoC housing program. This is expected to help some households stabilize in housing outside of the CoC; however, for households that do require CoC housing services, this program will actively assist them in initiating their housing plans, becoming document ready, and addressing support service needs. This program will improve system flow by reducing the demand for PSH and RRH units, and more effectively positioning households to quickly enter housing when a program spot becomes available.

6. **Creating pathways to home ownership:** The CoC will explore opportunities to buy and convert multi-unit properties into limited equity co-ops as well as creating programs that incentivize home ownership for formerly homeless households.

DHS will regularly monitor all new RRH and PSH projects funded under this Special NOFO using the CoC Performance Management Plan. Programs must meet CoC performance standards within one year of implementation. SSO Programs are new to the CoC's HUD funding and targets have not yet been set for all performance measures. Where there is not a set performance target, providers are expected to track data to inform the impact of the services. Performance monitoring occurs bi-monthly for rapid rehousing programs and quarterly for permanent supportive housing programs.

P-5. Identifying and Prioritizing Households Experiencing or with Histories of Unsheltered Homelessness

Ensuring the resources awarded will reduce unsheltered homelessness in Allegheny County:

To inform the development of this plan, DHS sought input from a broad coalition of CoC stakeholders with knowledge of unsheltered homelessness in Allegheny County. These subject matter experts included street outreach providers, members of the Homeless Outreach Coordinating Committee, and the Consortium of Recognizing Experience, a recently formed committee of the Homeless Advisory Board which includes members with lived homeless experience. In addition, DHS surveyed CoC providers to name current gaps and opportunities to reduce unsheltered homelessness. The Homeless Advisory Board then reviewed all stakeholder feedback to identify trends and community priorities, with permanent housing, supportive services, and healthcare appearing as top needs within the CoC.

DHS issued a request for proposals to competitively select new RRH, PSH, and SSO programs for funding under this special NOFO. The RFP prioritized programs that leverage housing resources outside of the CoC as well as those with strong healthcare partnerships to address participants' physical health, mental health, and substance use treatment and recovery needs. All proposals were scored and ranked by a selection committee composed of CoC members, staff, and individuals who have lived experience with unsheltered homelessness.

Adopting program eligibility and CE processes that reduce unsheltered homelessness:

Eligible households for the new PSH and RRH programs funded under this Special NOFO include individuals and families (with or without children) who are experiencing homelessness. In addition, PSH programs must serve chronically homeless individuals and/or families meeting HUD disability requirements.

RRH programs must serve homeless individuals and/or families coming directly from the streets or emergency shelter or fleeing domestic violence situations. All new programs must follow a Housing First model and serve participants without regard to previous criminal history, time abstinent from substance use, employment, credit worthiness or other restrictive criteria.

The Allegheny Link will manage all referrals to the new PSH and RRH projects funded under this Special NOFO. The existing CE protocols prioritize individuals and families based on vulnerability, including length of time experiencing unsheltered homelessness. SSO Programs will coordinate with the Allegheny Link as needed.

Using street outreach to connect unsheltered people with housing resources:

The CoC will leverage the DHS Field Unit and the existing network of street outreach providers to that ensure unsheltered individuals and families are identified and connected to housing resources, including the new PSH and RRH programs funded under the Special NOFO. Existing practices that have proven successful include using motivational interviewing and other low-barrier engagement techniques to build trust, conducting Coordinated Entry assessments in locations where unsheltered people are staying (via the Field Unit's mobile staff), and using well-established street outreach case conferencing processes to identify and address the individual housing needs of unsheltered people.

Additional steps to increase access to identification:

As part of the crisis response system transformation, Allegheny County is piloting a Law Enforcement Assisted Diversion (LEAD) program. LEAD is intended to reduce policies and practices that disproportionately criminalize low-income people and people of color who struggle with unmet behavioral health needs, problematic substance use and homelessness. LEAD program case managers will coordinate referrals to community services, including housing. The new initiative is likely to increase numbers of unsheltered people identified as well as referrals to street outreach and Coordinated Entry. Additionally, the CoC is developing a plan to further integrate Field Unit staff into street outreach providers' outreach rounds, increasing CE access for unsheltered populations.

Additional steps to provide housing navigation services:

Through a new SSO programming proposed under this NOFO, unsheltered and sheltered households will have greater access to housing case management at various access points in the homeless system. Housing Solutions Specialist will offer housing navigation services to unsheltered individuals and others who are not enrolled in RRH or PSH, and will assist PSH households with finding and moving into subsidized or market rate housing outside of the CoC. These projects are described in more detail in Section P-4 above.

Additional steps to provide access to health care and other supportive services:

Second Avenue Commons will offer a clinic staffed and operated by the University of Pittsburgh Medical Center, which will provide routine physical and behavioral health services. The 2AC health clinic will increase access to quality healthcare services for shelter residents and unsheltered individuals. The CoC is also developing a model of expanded Acute Service Coordination (ASC) for individuals in shelter. ASC is an intensive engagement and intervention approach designed to coordinate and link services for those members who have complex psychiatric needs as well as drug and alcohol use, and social, environmental, and housing needs. Through ASC in shelter the CoC would address the challenge of sustaining behavioral health services in shelters, as the activities are eligible for Medicaid Reimbursement.

The CoC is also a partner in county-level strategies intended to improve healthcare access at the systems level, including 1) maximizing the ability of Managed Care Organizations to pay for the services rendered to their insured members, and 2) creating programs that offer informal and community-based mental health

supports for people who have been harmed by or face barriers to accessing traditional systems. Each of the new RRH and PSH programs described in Section P-4 leverage partnerships with healthcare providers.

P-6. Engaging Individuals with Lived Experience of Homelessness in Decision Making.

Outreach efforts to engage those with lived homelessness experience to develop a working group: Currently, the CoC is actively exploring and testing models to increase the meaningful involvement of people with lived experience. In March 2022, the Consortium of Recognizing Experience (CORE) began meeting as a forum for people with lived experience with homelessness or housing instability to voice their perspectives and help guide improvements to the homeless system. Two members of the HAB, the CoC's board, are leading this effort. CORE members and other CoC stakeholders raise awareness about this opportunity through flyers, public bulletins, and word-of-mouth outreach to people who are currently or formerly unsheltered.

Integration of individuals and families experiencing homelessness into CoC decision making: The CoC emphasizes the importance of consumer voice in creating a responsive system. The HAB has collaborated with homelessness services providers to engage and support individuals who are experiencing or have previously experienced homelessness in participating in the CoC. Such individuals currently serve on the CoC board, take part in committee meetings, and have been active in the CoC's strategic planning processes, including the development of the CoC's 5-year plan.

Additionally, the CoC has an active Youth Action Board which includes young adults who have experienced or are currently experiencing homelessness. This board led the development of the CoC's Youth Homelessness Demonstration Program (YHDP) Coordinated Community Plan and projects funded under the YHDP NFO. The YAB meets monthly and supplies ongoing guidance to the CoC.

Through Plan-Do-Study-Act cycles the CoC is seeking to identify and maintain processes that meaningfully and actively engage people with lived experience in the planning, coordinating, and operating of a system that meets the needs of households experiencing homelessness.

Involvement of individuals and families in delivery of services within the CoC: It is common for people involved in street outreach and other homeless services to share their experiences with unhoused loved ones, friends, and peers. These informal relationships can lead people to – or away from – services. The CoC is interested in ways to better engage community supports in service delivery and how these informal roles might lead to employment opportunities.

P-6a. Involving Individuals with Lived Experience of Homelessness in Decision Making– Letter of Support from Working Group Comprised of Individuals with Lived Experience of Homelessness. See Lived Experience Support Letter attached.

P-7. Supporting Underserved Communities and Equitable Community Development

Current strategy to identify underserved populations within the CoC: The CoC's administrative and lead agency, DHS, has a core value that all services, policies and processes will be informed by a commitment to diversity, equity, and inclusion. To fully realize this value, DHS joined the Government Alliance for Racial Equity and adopted their framework to eliminate racial inequities and improve outcomes for all racial groups. DHS conducts Racial Disparities Assessments on behalf of the CoC to determine whether disparities exist with respect to different racial groups' access to homeless services and the outcomes of those services.

LGBTQIA+ people, especially young adults and people of color, have traditionally experienced disproportionately high rates of homelessness. The CoC does not collect sexual orientation data for the general population receiving homeless services. CoC programs do collect information about gender identity, but individuals may or may not choose to disclose it. The CoC relies on input from stakeholder groups representing LGBTQIA+ communities to identify potential disparities.

How underserved communities interact with the homeless system:

The most recent Racial Disparities Assessment found that Black people are significantly overrepresented in Allegheny County's homeless population. It also found that the CoC is placing people into homelessness service programs and achieving positive outcomes at rates almost identical to that of the population seeking services. This indicates that racial disproportionality is not occurring once people are connected to the homeless system.

A recent analysis of Allegheny County CE data revealed that use of the Allegheny Housing Assessment tool for service prioritization has in fact led to improved outcomes for Black clients since the tool was introduced in 2020. Higher risk Black clients are more likely to be served in permanent housing programs since the AHA tool was introduced.

Among individuals who responded to the 2020 Pennsylvania LGBTQ Health Needs Assessment, more than 20% reported having experienced homelessness in their lifetimes. The number increases to over 30% among respondents of color and respondents who are transgender, non-binary or gender queer. These outcomes align with anecdotal observations shared by CoC stakeholders and community members representing LGBTQIA+ communities.

Current strategy to provide outreach, engagement, and housing interventions to serve populations experiencing homelessness that have not previously been served by the homeless system at the same rate they are experiencing homelessness:

- **LGBTQIA+:** The new 2AC low-barrier shelter is intended to be a safe and affirming space for LGBTQIA+ individuals and their partners. All shelter bathrooms and sleeping rooms are flexible and gender neutral. Two of the congregate sleeping rooms have been designed to offer more privacy and greater space between clients compared to the standard bunks. Shelter staff will work with clients to determine which sleeping room feels safest and most comfortable.
- **Non-English-Speaking Populations:** The Allegheny Link, Field Unit, and all CoC-contracted street outreach, shelter, and housing providers offer on-demand language translation services (including sign language) for people for whom English is not the primary or preferred language. Additionally, DHS has mandated that the new 2AC facility hires culturally competent and bilingual staff.
- **Black and Indigenous People of Color:** Through the Pathways Forward initiative, a grant from the Heartland Alliance, the CoC is partnering with the local workforce development system to address structural and systemic racism on homeless jobseekers of color. This initiative aims to increase racial equity in wages and job retention for individuals enrolled in RRH programs. The CoC also committed to a youth-centered racial equity strategy as part of its 2020 Coordinated Community Plan to Prevent and End Youth Homelessness.