

## **Virginia Balance of State CoC Plan to Serve Individuals and Families with Severe Service Needs**

### **Introduction:**

The mission and vision of the Virginia Balance of State Continuum of Care (VA BOS CoC) is to make sure our system is accessible and equitable so homelessness is rare, brief, and non-recurring for all households. This includes a dedication to serving individuals and families with severe service needs. The VA BOS CoC Plan to Serve Individuals and Families with Severe Service Needs will serve as the action plan that will guide the CoC in their service provision to individuals and families with severe service needs. The VA BOS CoC is comprised of twelve regionalized Local Planning Groups (LPG) that serve seventy-three localities and cities across the Commonwealth of Virginia. LPGs are responsible for the local coordination of homeless services. The LPGs are comprised of community partners that interact with the homeless system and includes but is not limited to homeless service providers, landlords, community service boards, domestic violence and sexual violence providers, faith-based organizations, and educators.

The Plan to Serve Individuals and Families with Severe Service Needs was created by many community partners within the VA BOS CoC. Partners came together in a workgroup dedicated to serve individuals and families with severe service needs in the VA BOS CoC. The workgroup dedicated to serving individuals and families with severe service needs is the workgroup that was responsible for identifying the priorities of the Rural and Unsheltered Special Funding Opportunity, serving as support for recommendations for funding, and making recommendations on behalf of the priority populations that are represented by each member of the workgroup regarding the future governance structure of the VA BOS CoC. The partners that have contributed to this plan include Individuals with Lived Experience, Homeless Service Providers, Public Housing Authorities (PHA), Virginia Sexual and Domestic Violence Action Alliance (VSDVAA), Housing Liasons, and VA State Agencies that include the Department of Housing and Community Development (DHCD), Department of Medical Assistance Services(DMAS), and Department of Veterans Services(DVS).

### **Current CoC Strategies:**

#### **Conducting Coordinated and Comprehensive Outreach**

Outreach is conducted across the CoC's geography to engage individuals and families experiencing homelessness who are not connected to services. LPG communities tailor outreach strategies to community need and work with emergency services including, EMTs, hospitals, law enforcement, and other community resources, to help identify individuals and families experiencing homelessness, and identify households who are not connected to services. If households are identified by the LPG, it is the responsibility of the LPG to have the CE staff conduct outreach (establish a relationship, conduct assessment, make referrals, offer services, and follow up as appropriate) until the household experiencing homelessness is housed.

Each year during the point-in-time count (PIT) LPGs work with emergency services including hospitals, EMTs, law enforcement, and other community resources to conduct outreach to identify persons who are unsheltered. During the PIT, providers complete VI-SPDAT assessments (when appropriate) and begin engagement with the goal of providing permanent housing. Once located, persons who are

unsheltered are followed up with regularly until permanent housing is obtained or until they enroll in a homeless service program.

## **Barriers to Conducting Coordinated and Comprehensive Outreach**

As a predominantly rural CoC, the VA BOS CoC faces unique challenges in the administration of coordinated and comprehensive outreach. Anecdotally and through the discussions with the workgroup that is dedicated to serving individuals and families with severe service needs, the following challenges were identified as impacting outreach in rural communities: community and accessibility barriers.

Community partners who participate in efforts to resolve homelessness, but are not educated about the struggles faced by individuals and families that are being served with outreach, create barriers to outreach efforts. Due to the varied and rural nature of communities comprising the CoC, each LPG faces unique challenges in identifying and locating individuals and families who are experiencing unsheltered homelessness. While homeless service providers continue to offer educational opportunities to their partners, there continues to be a disconnect in the understanding of homelessness.

Transportation continues to be a challenge that has been exacerbated in communities since 2019. Specifically in rural communities, households experiencing unsheltered homelessness have a difficult time accessing the necessary resources to resolve their housing situation due to the distance that it may take to travel from one place to another. While some LPGs have developed positive relationships with different opportunities, transportation continues to be limited in a majority of the CoC communities. Additionally, the digital divide has continued to present an issue across the communities of the VA BOS CoC. During the pandemic, communities recognized that individuals who are older and did not have access to the necessary technology, including email, internet and even phone services were having difficulty accessing services.

On the night of the PIT in FY 2019, 124 individuals were identified as experiencing unsheltered homelessness in the VA BOS CoC communities. Since FY 2019, communities continued to experience an increase in individuals experiencing unsheltered homelessness by a rate of approximately 27.5%. However, in the 2022 PIT count, the CoC experienced an approximate 113% increase in individuals experiencing homelessness. This is largely due to the adjustments made in FY 21 as a result of the impacts of the COVID-19 pandemic. Outreach to individuals experiencing unsheltered homelessness improved through the attempted mitigation of transportation and technology barriers, as well as the increase in providers supporting CoC communities in the 2022 PIT count. Improved coordination increased the knowledge of CoC partners in locating individuals experiencing unsheltered homelessness. Additionally, the CoC requested an extension for the 2022 unsheltered PIT count due to increased rates of COVID-19 virus spread at the time of the PIT count. This allotted more time for providers and clients to contact community partners for assistance and spread awareness of homeless services. Based on the CoCs coordinated entry (CE) data it shows that from FY 2019 to FY 2021 there was an increase of individuals and households making contact with the CoCs CE system that were coming from places not meant for human habitation, 46% (979 individuals and households to 1,430 individuals and households).

Despite the challenges that the CoC has faced in the delivery of coordinated and comprehensive outreach, providers continue to navigate through these challenges to connect individuals experiencing

unsheltered homelessness with permanent housing. In FY 21, 77% of individuals retained permanent housing after being placed from outreach.

### **Providing access to low-barrier shelter and other temporary accommodations**

Emergency shelters play a critical role in the crisis response system. Low barrier, permanent housing-focused shelters ensure households have a safe place to stay, and that their experience of homelessness is as brief as possible. Emergency Shelter is defined as any facility, the primary purpose of which is to provide a temporary shelter for households experiencing homelessness in general, or for specific populations of households experiencing homelessness, and which does not require occupants to sign leases or occupancy agreements. Shelters provide emergency housing to address a household's immediate housing crisis. Assistance is offered without preconditions (such as employment, income, absence of criminal record, or sobriety), and with few to no barriers. The resources and services provided are tailored to the unique needs of the household.

Emergency Shelters exist for both single adults and families. Single adult shelters serve individuals aged 18 years and over, family shelters serve one or more adults who are accompanied by one or more children. Family shelters must follow prohibition against involuntary family separation, the age of a child under age 18 must not be used as a basis for denying any family's admission to an emergency shelter, and a family must be accepted and sheltered as they present regardless of family composition. Shelters may also serve specific target populations such as single adult men, single adult women, those with medical vulnerability, or survivors of sexual and domestic violence.

All shelters must follow Equal Access and Prohibited Inquiries where all activities must be made available without regard to actual or perceived sexual orientation, gender identity, or marital status. Shelters are prohibited from inquiring about an applicant's or participant's sexual orientation or gender identity for the purpose of determining eligibility or otherwise making shelter or housing available. This does not prohibit an individual from voluntarily self-identifying sexual orientation or gender identity. Decisions about eligibility for or placement into single-sex emergency shelters or other facilities will place a potential program participant (or current program participant seeking a new assignment) in a shelter or facility that corresponds to the gender with which the person identifies, taking health and safety concerns into consideration. A program participant's, or potential program participant's, own views with respect to personal health and safety should be given serious consideration in making the placement. For instance, if the potential client requests to be placed based on their sex assigned at birth, the provider should place the individual in accordance with that request, consistent with health, safety, and privacy concerns. Providers must not make an assignment or reassignment based on complaints of another person when the sole stated basis of the complaint is a program participant or potential program participant's non-conformance with gender stereotypes.

Emergency Shelters are housing focused with the goal of every household obtaining permanent housing in 30 days or less. In order to achieve this outcome, shelters cannot work as standalone programs and must be connected with permanent housing resources such as housing location, housing focused case management, and appropriate rapid re-housing or permanent supportive housing.

### **Barriers providing access to low-barrier shelter and other temporary accommodations**

Through the provision of low-barrier shelter and other temporary accommodations, CoC providers have identified the following barriers impacting their delivery of these services:

- Not being low barrier from other non-traditional and non-funded homeless service providers (i.e. discriminating practices, ID barriers, background checks)
- Emergency shelters are consistently at capacity and funding for non-congregate sheltering is decreasing rapidly
- Stays in shelter are longer than optimal
- Case management capacity is compromised which is negatively affecting individuals and families stays in emergency shelter (i.e. less case management availability due to staff turnover)
- The lack of available housing in the community is contributing to households staying in shelter longer
- Hotels and motels being subpar in condition and cleanliness but having no alternative shelter.

CoC staff identified the impacts of these barriers through the assessment of HMIS data on emergency shelter interventions within the VA BOS CoC. Since FY 2019, our CoC has experienced an approximate 19% increase in individuals accessing emergency shelter. The CoC evaluated this data further by examining different subpopulations presenting for emergency shelter services. Between 2019 and 2021 there was an 11% decrease in individuals who are chronically homeless being served with emergency shelter, 159 individuals to 141 individuals. However, since FY 2019 the CoC experienced an approximate 69.66% increase in individuals experiencing chronic homelessness through PIT counts. Between 2019 and 2021 there was a 14% increase in individuals identifying as BIPOC being served with emergency shelter, 764 individuals to 874 individuals. Between 2019 and 2021 there was an increase of 14% for individuals who identified as hispanic/latin(a)(o)(x) being served by emergency shelter, 59 individuals to 67 individuals. Between 2019 and 2021 there was a 4% decrease in individuals who identified as exiting institutions being served with emergency shelter interventions, 126 individuals to 121 individuals.

Despite the identified barriers in accessing low-barrier emergency shelter and temporary accommodations, CoC providers continue to navigate through these challenges to access permanent housing for households with severe service needs. In FY 21, 57% of households exited to permanent housing from emergency shelters. This is an increase from FY 19 where only 56% of households exited to permanent housing from emergency shelter services.

### **Providing immediate access to low-barrier permanent housing**

When providing individuals or families experiencing homelessness with immediate access to low-barrier permanent housing the VA BOS CoC process begins with CE. Assistance is offered without preconditions regarding employment, income, legal history, or substance use. Supportive services and financial assistance are tailored to the needs of the households to ensure that services will meet each household's needs and stabilize them in permanent housing. The VA BOS CoC CE process begins with the individual or family identifying their current housing crisis, after which they are triaged to address their current needs. Based on the household's need, the current crisis is addressed through a variety of interventions that may include but are not limited to mediation, housing search, resource referrals, and emergency shelter referrals. All households who are sheltered are screened for diversion. Diversion occurs through a strengths-based conversation with the household to help identify alternatives to shelter. Once the immediate crisis is averted, an assessment is conducted to prioritize further services to obtain

and or stabilize housing, Referrals to housing interventions include prevention, rapid re-housing, and permanent supportive housing. These referrals are based on prioritization. This process is conducted over the course of 3 to 5 days. Community check-ins are completed quarterly to evaluate project implementation and address challenges that have arisen during implementation which may include barriers to entry for the project and stabilization.

### **Barriers providing immediate access to low-barrier permanent housing**

Through the provision of low-barrier permanent housing, CoC providers have identified the following barriers impacting their delivery of these services:

- Availability of housing stock
- Appropriately sized housing (i.e. for families, larger structures for larger families)
- Safe (physical structures, non-triggering), affordable housing (housing choices) in the communities that the person/household wants to live (letting clients define their own “safe” meaning of housing)
- A gap with financial supports (i.e. utilities)

Through HMIS data, the VA BOS CoC staff assessed different populations that utilized permanent housing interventions. Between 2019 and 2021 there was a 16% increase in individuals who are chronically homeless being served with permanent housing interventions, 152 individuals to 176 individuals. Between 2019 and 2021 there was a 3% decrease in individuals who identified as BIPOC being served with permanent housing interventions, 685 individuals to 666 individuals. Between 2019 and 2021 there was an increase of 43% for individuals who identified as hispanic/latin(a)(o)(x) being served by emergency shelter interventions, 37 individuals to 53 individuals. Between 2019 and 2021 there was a 39% increase in individuals who identified as exiting institutions being served with emergency shelter interventions, 18 individuals to 25 individuals.

Despite the barriers identified in accessing low-barrier permanent housing, CoC providers continue to prioritize a household’s stability in housing through the delivery of individualized services. In FY 21, 97% of households retained housing within their first year of being placed in permanent housing. This is an increase compared to FY 19 when only 92% of households retained housing within their first year of being housed.

### **Landlord Recruitment**

Landlord outreach for the VA BOS CoC is conducted across the CoC’s geography through a variety of methods. Providers tailor outreach strategies depending on the availability of housing resources and build relationships directly with landlords to access additional permanent housing opportunities. Organizations that provide permanent housing opportunities hire housing navigators to serve as the liaison in building relationships with landlords. The relationship between a housing navigator and the landlord begins prior to a household’s enrollment in the permanent housing project. LPG partners conduct one-on-one meetings with landlords to evaluate the type of housing resources they have available. LPG partners also hold landlord events to recruit new landlords and provide technical assistance opportunities to existing partner landlords. In April 2022, LPG partners were provided training on Fair Housing and how to effectively implement equal access in housing programs. In addition to assessing effective equal access practices within HUD housing programs, the scope of the

training provided information regarding the implementation of Fair Housing practices into other housing programs within the communities. Fair Housing training was provided to housing providers, victim service providers, members of the community, and landlords.

Additionally, in order to maintain regular contact and engagement with landlords, LPGs provide a community newsletter that highlights the work of landlords and their support of efforts to end homelessness. Landlord newsletters are distributed monthly to LPG partners and highlight the benefits of working with homeless service providers, provide information on best practices, and educate landlords regarding the provision of housing to households that have experienced homelessness.

## **Updating the CoCs Current Strategies**

### **CoC Strategies to update Coordinated and Comprehensive Outreach**

There are different methods of outreach that LPGs identified and are currently utilizing to engage households experiencing unsheltered homelessness.

- Method one includes community based outreach in various locations and is done by engaging with encampments, engaging the healthcare system, and educating other resources in the community around outreach efforts.
- Method two includes in-reach where individuals experiencing homelessness or a housing crisis may go to a physical location where they can make contact with providers, enroll in homeless service programs, and/or access CE.
- Method three includes resource lines where individuals experiencing homelessness can make contact with providers through various methods that include calling in, being interviewed and assessed for programs, receiving access point information, and making contact via email.

As our CoC updates our outreach methods to engage households experiencing unsheltered homelessness, we plan to leverage the uniqueness of rural communities. In rural communities it is not uncommon for there to be familiarity among community members and a tight knit community. Engaging local partners (i.e. businesses) can create ways to aid in identifying households experiencing unsheltered homelessness. The CoC plans to leverage informal partnerships with businesses and organizations in the community to aid the community's awareness of, and education about, homelessness. This engagement will include the discussion of common language that is often used in the delivery of homeless services. This will ensure that partners are aligned with outreach efforts and will create an improved, streamlined process into CE. CoC providers will be supported by the lead agency and collaborative applicant regarding connections with and in the provision of education opportunities for partners in their community.

The CoC will formalize these methodologies in an updated version of the system level policies and procedures. Additional technical assistance focusing on outreach and engagement will be provided to partners within the CoC. CE staff located at the LPG lead agency will be responsible for supporting the implementation of street outreach across the VA BOS CoC. This is to ensure that communities are supported in their efforts to identify and prioritize households experiencing, or with histories of unsheltered homelessness.

DHCD staff will support the efforts of the Uniformed CE and Assessment Committee of the VA BOS CoC to update the CoC's assessment tool. The goal is to create additional mechanisms to identify and prioritize individuals and households who are experiencing unsheltered homelessness or that have a history of experiencing unsheltered homelessness through a trauma informed and equitable lens. The CoC's intention is to identify the best practices resulting from the implementation of projects that will be funded from the unsheltered set aside to address the needs of households experiencing unsheltered homelessness. These best practices will be formalized in the CoC's updated policies and procedures to replicate across all VA BOS CoC communities.

## **Increasing access for vulnerable subpopulations**

### **Survivors of sexual and domestic violence**

The CoC recognizes the unique and critical housing needs of survivors of sexual and domestic violence. Our goal through the implementation of this plan is to create more pathways for survivors to access housing services that prioritize safety and trauma informed care. The VA BOS CoC is currently in the process of increasing the coordination between victim service providers (VSP) and homeless service providers. This includes the evaluation of the need for immediate coordination between homeless service providers and VSPs during the CE process. Additionally, the CoC is dedicated to developing cross-sector technical assistance opportunities to educate providers on safety planning, category 4 HUD definition of homelessness, and system-level planning. This technical assistance will help providers streamline processes and assist households experiencing violence navigate available resources and services. The VA BOS CoC will continue their extensive relationship with partners at the state wide coalition for sexual and domestic violence, the VSDVAA, to increase support for CoC VSPs and support the system level analyses of data through the HMIS Comparable Database, VADATA, to identify gaps and funding opportunities.

### **Justice Involved Population**

The VA BOS CoC will bolster their efforts to conduct inreach for the justice population to ensure that there is no gap in services for individuals exiting correctional institutions and diverting these individuals from homelessness. In our evaluation of those individuals and families with severe service needs, the VA BOS CoC assessed the needs of individuals who identified their prior living situation as a jail, prison, or juvenile detention facility. This data was compiled from the Virginia Homeless Data Integration Project (HDIP). The HDIP is the statewide HMIS data warehouse. Individuals who identified as having their prior living situation as a jail, prison, or juvenile detention facility has decreased over the years. From 2018 to 2019, 99 individuals identified their prior living situation as a jail, prison, or juvenile detention facility. From 2019 to 2020, the number of individuals who identified their prior living situation as a jail, prison, or juvenile detention facility decreased to 98 individuals. From 2020 to 2021, the number of individuals who identified as having their prior living situation as a jail, prison, or juvenile detention facility decreased again to 55 individuals.

Our CoC efforts to increase in-reach for the justice involved population will be similar to inreach for individuals and households experiencing homelessness. This will include CoC partners providing inreach for the justice involved populations engaging individuals at a location that is accessible by this population through resource fairs, re-entry connections, and case management. CoC partners will also

conduct traditional outreach by engaging individuals at a safe location, enrolling the individual in homeless service programs, and/or accessing CE. A variety of services needs to be provided for the justice involved population for re-entry, this can include but is not limited to applications for mainstream resources, and support for obtaining identification.

### **CoC Strategies to update the provision of low barrier emergency shelter and temporary accommodations**

Our CoC's goals to update the provision of low barrier emergency shelter and accessing temporary accommodations includes:

- Ensuring that access to emergency shelter is quick and efficient - the goal of our CoC is to reduce the barriers that could block or delay a household's access to emergency shelter
- Ensuring that resources are prepared to accept individuals during the day and night
- Increase capacity for traditional and non-traditional homeless service providers in their provision of emergency shelter services
- Increase positive exits from emergency shelter and temporary accommodations by at least 5%

CoC strategies to achieve these goals include:

- Having a block of rooms at a hotel that is reserved for non-congregate emergency sheltering
- Frontline emergency shelters being educated around the provision of services to survivors and having streamlined services prepared
- Highlighting the different definitions of homelessness as a barrier to emergency shelter and how that barrier is mitigated
- The provision of education services to non-traditional and non-funded partners that include:
  - Training non-traditional homeless services providers in the housing first model if they are providing emergency shelter (i.e. churches, hotel owners when doing non-congregate shelter)
  - Find out the "why." Why does an individual or organization wish to operate an emergency shelter? Figuring out the why and tailoring technical assistance and materials to that motivation.
  - Having a place for educational materials that emergency shelter providers can access
  - Utilize a gentle approach to create and provide educational materials for providers around risk mitigation for individuals and families experiencing homelessness
  - Guidance around hotel/ motel situations that may arise (i.e. bedbugs, damages)
  - Oversight for community partners providing emergency shelter to remain aligned with CoC policies and procedures for emergency shelter operations
  - Identifying barriers and resolutions for emergency shelter providers (i.e. navigating around background checks, etc.)

### **CoC Strategies to update the provision of low barrier permanent housing**

The VA BOS CoC will implement the following strategies to ensure that permanent housing is low-barrier and accessible to households with severe service needs:

- Address the limited availability of housing opportunities through:
  - Increasing rapid re-housing resources
  - Increasing the number of permanent supportive housing units – where data supports the need for chronic homeless units

- Increasing the number of physical housing stock available in communities through new construction, acquisition, or rehabilitation
- Increasing the utilization of the shared housing model, whenever possible, to navigate through existing housing opportunities
- Improve accessibility to services and housing through:
  - Addressing the needs of individuals and families who share multiple intersectional identities
  - Coordinating with mainstream partners
  - Improving access points within the community
  - Addressing financial barriers that can create a burden for individuals to access housing by leveraging other state and private funding to support individuals
  - Ensuring equity is prioritized in delivery of services
  - Prioritizing CoC funding and support for projects that implement the housing first approach
- Maintain housing stability through:
  - Provision of individualized services to meet the basic needs of individuals and families experiencing homelessness, both during the housing search and while in permanent housing
    - Through CoC supportive services, providers will address the additional barriers that exist outside of the housing system that may affect a household's ability to maintain housing (i.e. employment needs, health needs, educational needs, etc.)
  - Ensuring that supportive services are culturally competent in their administration of housing interventions
  - Coordination of housing services with other mainstream resources
  - Addressing the experience of intergenerational homelessness

Additionally, in FY 23, the CoC plans to convene collaborative peer learning spaces for providers to address gaps in the provision of housing interventions. This will include spaces dedicated to projects focused on emergency shelter, homeless prevention, homeless street outreach, CE, rapid re-housing, permanent supportive housing, and other permanent housing resources. Through these collaborative spaces, the CoC will provide oversight and support in the administration of homeless services throughout the VA BOS communities.

### **CoC Strategies for New Landlord Recruitment**

The VA BOS plans to expand on the strategies that are currently utilized for landlord recruitment in the CoC and continue to use practices that have positively engaged landlords in the community. Providers will continue to tailor outreach strategies to landlords depending on the availability of housing resources, and further build relationships with landlords to access additional permanent housing opportunities. Organizations will continue to hire housing navigators to serve as the liaison in building relationships with landlords. LPG partners will continue to hold meetings with landlords to evaluate the type of housing resources available. LPG partners will also continue to hold landlord events to recruit new landlords and provide technical assistance opportunities to existing partner landlords. In order to maintain regular contact and engagement with landlords, LPGs will continue to provide a community newsletter that highlights the work that is being done by landlords and their support for efforts to end homelessness.

The BOS CoC will create more opportunities for landlords to engage in system planning. Our CoC is dedicated to ensuring that the provision of permanent housing is person centered and trauma informed. In order to ensure that best practices are being administered, it is imperative that the VA BOS CoC identify opportunities for landlords to connect to the CoC on a system level. Collaboration between landlords and homeless service providers will ensure improved and better informed practices of homeless services projects. Additionally, throughout the duration of this funding the CoC will create a strategy to engage landlords regarding specific subpopulations experiencing homelessness including the justice involved population, BIPOC populations, and survivors of violence.

### **CoCs strategies on Leveraging Housing Resources**

The VA BoS CoC providers make every effort to leverage all housing resources including opportunities for housing outside the provision of subsidies through CoC or ESG programs. In FY 21, 67% of households who exited to permanent housing destinations exited without an ongoing subsidy provided through ESG or CoC programs. In FY 21, there was an increase (6% from 3% in FY 19) in households exiting to permanent destinations with family and friends. The increase was, in part, due to diversion conversations and solutions created to offset limited housing availability.

Despite the limited resources available through public housing authorities, CoC providers continue to maintain their connection with PHA partners to leverage resources to support households experiencing homelessness. The CoC has 22 PHAs. Each of the 12 LPGs work to differing degrees with their PHAs depending on capacity and cooperation. The largest provider of the Housing Choice Voucher (HCV) is Virginia Housing (VH), the administrator of HCVs for 13 PHA agencies. The LPG lead agencies work with VH to improve the relationships between the PHAs and the LPGs to ensure coordination to best serve individuals experiencing homelessness. Currently, 31% of the agencies working with VH adopted a homeless preference and 46% have adopted an elderly or disabled preference (often used to assist homeless households). DHCD and LPGs worked directly with PHAs to increase the delivery of housing vouchers to individuals experiencing homelessness. Through the administration of Emergency Housing Vouchers (EHV), 41% (9) of the local PHAs adopted a formal policy to accept referrals from the CoC's CE system. A few of the LPGs are collaborating with PHAs to accept referrals from CE for the HCV programs as well. At the local level, over 50% of the direct administrators or voucher agencies participate as LPG members.

### **Improving the leverage of housing resources in the CoC**

In order to adequately address the needs of individuals and families with severe service needs, CoC partners have advocated for the need to increase the number of affordable housing units in communities. This has been demonstrated anecdotally through bi-monthly public open forum meetings with providers as well as through the increase in the length of time an individual or family experiences homelessness prior to accessing permanent housing. According to the HMIS data collected through Stella P, in the VA BoS CoC system, individuals are experiencing homelessness for longer than households with one child. The average length of time individuals are experiencing homeless is approximately 112 days, while the average length of time households with at least one adult and one child are experiencing homelessness is 89 days. Families have a higher rate of exiting to a permanent destination across the BOS when compared to singles. Families exit to a permanent destination at a 69% success rate while individuals

exit to a permanent destination at a 43% success rate. The goal of accessing this funding opportunity will be to increase the availability of affordable housing in the CoC by 3% over the next three years.

Additionally, the CoC plans to continue leveraging the already existing relationships with PHAs to increase support for households experiencing homelessness. The existing CoC relationships with PHAs have proven to be a mutually beneficial relationship. This is evident through the exits from CoC or ESG-funded programs to HCV and other public housing units in the communities. FY 21, 15% of exits to permanent housing destinations have resulted in referrals to HCV programs as well as other public housing units. This demonstrates an increase in the number of households connected to long-term subsidies compared to FY 19 where only 7% of exits to permanent destinations included referrals to HCV and other public housing programs. The CoC lead agency continues to partner with VH around housing initiatives, including the expansion of permanent supportive housing, in the CoC communities. As the largest distributor of housing choice vouchers, VH plans to also access vouchers through the non-competitive allocation of New Stability Vouchers that were released by HUD in August 2022. The lead agency will support the administration of these vouchers to aid in the response to homelessness in the VA BOS CoC communities. DHCD will continue to explore collaboration opportunities, including preparing and submitting a joint application for funding for individuals and families experiencing homelessness, with the LPGs, VH, and the local PHAs.

### **Individuals with Lived Expertise**

#### **Current CoC Strategies for Involving Individuals with Lived Expertise**

The VA BOS CoC involves individuals with lived expertise at every level of the CoC decision-making process. The CoC holds at least one seat for an individual with lived expertise to participate in the main governing committee, the CoC Steering Committee. In order to recruit for this seat, the CoC lead agency disseminates information about open recruitment for individuals with lived expertise to the LPG lead agencies. The LPG lead agencies identify individuals with lived expertise and personally invite them to participate on the CoC steering committee and subcommittees. During the CoC bi-monthly virtual forums, which are open to the public, an announcement is made for recruitment for individuals with lived expertise. Additionally, some of the LPGs established consumer advisory boards composed of members with lived expertise. Individuals with lived expertise participate in anonymous surveys and focus groups that are administered and conducted annually by LPG partners regarding services offered within the community.

Individuals with lived expertise have been an integral part of the implementation of CoC initiatives, specifically in regards to ending youth homelessness. Youth with lived expertise are represented on the VA BOS CoC Youth Homelessness Demonstration Program (YHDP) lead team and implementation team. Youth with lived expertise share decision power with older adult partners represented on the lead team. The success of programs resulting from this collaboration between the youth with lived expertise and older adult partners highlights the necessity for individuals with lived expertise in the CoC decision-making processes. Youth who have led the YHDP implementation process have been compensated for their involvement.

#### **Identified barriers in the provide of services for individuals with lived experience**

In order to adequately update the CoC's strategies for involving individuals with lived expertise in decision making processes, staff engaged individuals with lived expertise in the structuring of this plan. Identified barriers in serving households experiencing homelessness includes:

- Transportation
- Allowable expenses that are conducive to supporting individuals experiencing homelessness

Many clients have limited to no access to transportation for themselves and the existing transportation resources that are available for individuals experiencing homelessness are often unreliable and limited in usefulness. Public transit to a variety of locations is available, but it is limited due to the nature of the vast rural service area. Other transit opportunities, such as the Medicaid funded transportation systems, often fail to be reliable and timely.. This in turn leads to clients missing appointments and potentially missing connection with healthcare resources, as providers have become less amenable towards clients who may be late or miss an appointment.

Additionally, transit organizations that are offering resources are often not trained to support individuals who are experiencing homelessness with multiple intersectional vulnerabilities (i.e. an SMI diagnosis or physical health condition). Individuals face the struggle of being barred from their medical provider of choice, the panic of uncertainty, and the unnecessary stress of needing to find a new provider. These stressful events can lead to medication lapsing, complete inability for the client to meet with their providers in times when they may be in the most need, and potential missed opportunities for housing stabilization.

In order to improve a household's connection to services, the CoC recommends that additional cross system advocacy must be prioritized over the implementation of this plan. More transportation options need to be made available to clients to best meet the needs of individuals or households. Partners should leverage existing relationships with transit operators to support the improvement of existing transportation opportunities . Partners should evaluate the feasibility of leveraging private funding to support a small transportation team, who can accommodate households experiencing homelessness so clients may attend their appointments. Additionally, services should allow transportation with the accompaniment of a peer, as it is often reassuring and comforting for clients, as an allowable expense through funded programs. Peers can offer assurance as well as advocacy for the household to the landlords, housing providers, and medical providers. Peers also have the unique ability to bridge the language gaps between what is being shared and done with the client by their case manager. This aids the provision of understanding services and supports a provider's ability to empathize with a household's struggles.

### **Additional updates to the CoC's Strategies for Involving Individuals with Lived Expertise**

The VA BOS CoC is dedicated to improving our current strategies to incorporate, include, and engage individuals with lived experience in decision-making processes. Improving peer work and creating more mentorship opportunities will be integral in improving the way clients are able to navigate the homeless services system. The VA BOS CoC will work to engage and include individuals with lived expertise in all aspects of system design and delivery which includes policy, outreach, inreach, training, and program development. Having multiple individuals with lived expertise involved in the decision-making

processes will create a more informed system of delivery of homeless services to genuinely meet the needs of the individuals and households that interact with the system.

In order to authentically engage individuals with lived expertise, the CoC's goal is to prioritize power sharing among individuals with lived expertise who are participating in these processes. The intention of our CoC is to update our current structure to include a new entity for individuals with lived experience that will hold equal decision-making power to that of the primary governing body of the CoC. Compensation for individuals with lived expertise is currently being processed through the individual provider level. The CoC is currently working to formalize a process to compensate individuals for their leadership in system level decision-making processes.

### **Leveraging Healthcare Resources:**

DHCD partners with DMAS, in the Health and Housing Institute facilitated by the National Academy for State Health Policy, to improve coordination between healthcare organizations and homeless service providers. LPG communities include healthcare providers such as hospitals, private clinics, and managed care organizations (MCOs) as part of their membership and collaborate to assist program participants in receiving healthcare services. Health care organizations regularly report updates on eligibility, referral processes, timelines, new services or contacts, and other vital information regarding healthcare services. If there are any changes with services, a training is available to LPG partners around resource updates. Additionally, LPG case managers are connected with staff at healthcare organizations to ensure that clients have access to healthcare and mental health treatment. Case managers are also responsible for connecting clients to healthcare resources. If there are challenges in accessing services, LPG partners address the barriers between the community partners.

The CoC plans to leverage a variety of funding opportunities to ensure there is a collaboration between housing and healthcare resources for individuals and households who are experiencing homelessness. The CoC lead agency will partner with LPG leadership to evaluate the appropriate funding sources to support projects that partner with healthcare and housing resources. This will include partnerships that will be leveraged through the CoC supplement to address unsheltered and rural homelessness as well as private and state funding opportunities.

### **CoCs Current Strategies for Supporting Underserved Communities and Supporting Equitable Community Development**

The VA BOS CoC is committed to supporting underserved communities, actively identifying barriers that lead to disparities in communities being served, and supporting equitable community development by taking steps to address barriers. Our CoC conducts a semi annual assessment to identify racial disparities on a system and local level. The CoC collects HMIS data and analyzes for racial disparities utilizing the National Alliance to End Homelessness' (NAEH) Racial Equity Tool and U.S.Census Data. Analysis for racial disparities includes the assessment of data from emergency shelter, rapid-rehousing, permanent supportive housing and other permanent housing projects that utilize HMIS.

In FY 21, the CoC was able to secure technical assistance from local partners at Collective InCite(CI) which focused on addressing social justice and racial equity in communities. CI provided technical

assistance to each of the LPGs to enhance partnerships with community based organizations (CBO) serving culturally specific communities.

As a result of the racial disparities assessment, the CoC began convening an 8 member Racial Equity Ad Hoc committee in 2020. This committee is responsible for formalizing a process to evaluate the racial equity in the delivery of homeless services and the construction of a formalized strategic plan to address racial equity in services.

### **Black, Indigenous and People of Color**

Through the racial disparities evaluations, CoC staff identified significant racial disparities that exist among the LPG communities. HMIS data demonstrated that between HUD FY 17 and FY 20, an average of approximately 39% of individuals experiencing homelessness identified as African American while 2019 census data indicated African Americans only represented 17.6% of the individuals living in the BOS LPG communities. This is in stark contrast to White counterparts who present on average approximately 54.5% of the individuals experiencing homelessness while representing 78.6% of the total population in the BoS CoC communities. Additionally, between FY 17 and FY 20, less than 1% of individuals experiencing homelessness identified as Native American while representing 1.4% of individuals identified as American Indian or Alaska Native alone in the CoC communities. Preliminary FY 21 HMIS data continues to portray a similar trend where individuals who identify as African American are presenting for homeless services at twice the rate of how the population is represented in the LPG communities (38% represented in HMIS data versus 17.6% represented in the community). It is critical in our work to end homelessness for the CE system to prioritize racial equity to ensure that those who are the most vulnerable are able to access the appropriate housing resources to end their experience of homelessness.

### **American Indian, Alaskan Native, or Indigenous**

The VA BOS CoC examined the delivery of services to individuals who identified as American Indian, Alaskan Native, or Indigenous through data collected from the HDIP. Individuals who identified as American Indian, Alaskan Native, or Indigenous has fluctuated over the years. From 2018 to 2019, 145 individuals identified as American Indian, Alaskan Native, or Indigenous. 2019 to 2020 showed an increase, to 170, of individuals who identified as American Indian, Alaskan Native, or Indigenous. Conversely, 2020 to 2021, shows a decrease to 81 individuals identifying as American Indian, Alaskan Native, or Indigenous. While this data demonstrates the interaction of individuals identifying as American Indian, Alaska Native or Indigenous with our CoC system, anecdotally Tribal leadership and housing staff believe that the numbers of individuals and households identifying as American Indian, Alaskan Native, or Indigenous in Virginia are underreported. All of Virginia's federally recognized Tribes received recognition between 2016 and 2018, which could affect those who identify as American Indian, Alaskan Native, or Indigenous in the homelessness system. The CoC is addressing the inconsistent relationship with tribal nations with current CE funds through the CoC program and plans to continue addressing these issues through the Rural and Unsheltered Funding Opportunity.

### **Updates in supporting underserved communities and supporting equitable community development**

The VA BOS CoC will continue to utilize the data collected both on the CoC and local levels to inform decision making and improve the provision of homeless services in communities. Additionally, to ensure equitable access to services the CoC currently convenes the Racial Equity Ad Hoc Subcommittee of the Balance of State Steering Committee. This committee is dedicated to evaluating the data from each assessment to inform the necessary changes in policies and procedures to meet the needs of clients of traditionally marginalized and underserved communities. The committee also utilizes the tools provided in the HDIP. Tools available in the HDIP allow the Balance of State CoC, as well as the LPGs, to do deeper analysis of the data collected in HMIS for racial equity.

During the implementation of this plan, the CoC will conduct outreach to culturally specific organizations to lead in the CoC's efforts to improve our current governance structure and aid in the identification of gaps within our CoC's provision of services. Partners of the CoC who supported the creation of this plan, including partners who represented traditionally marginalized and underserved populations, discussed the importance of evaluating the CoC's cultural competency in the delivery of services and requested to continue the evaluation of culturally competent practices within CoC policy and procedures.

Additionally, throughout the implementation of this plan the CoC will continue to conduct specific community outreach to tribal nations to provide support around the following areas:

- Evaluating the need of individuals experiencing homelessness in tribal nations based on both the HUD definition as well as other definitions of homelessness and housing instability, including overcrowding, as identified by tribal citizens
- Improve the coordination efforts with local planning group partners to ensure citizens of tribal nations are served
- Leveraging flexible state dollars to meet the needs of tribal nations
- Create a structure to have tribal nations lead in the creation of policies and procedures that will be adopted by the VA BOS CoC providers
- Expanding on existing services to meet the evaluated need of tribal nations and their citizens to support their response to homelessness in their communities.