Homeless Crisis Response System

Definitions of Housing Types

**Rapid Re-housing (RRH)** is an intervention designed to help individuals and families through short term rental assistance and supportive services. RRH services are typically less than 24 months in duration with the goal of helping households achieve stability and exit to permanent housing in the shortest timeframe possible. Households served must meet the HUD definition of literally homeless. Rapid re-housing assistance is offered without preconditions (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided tailor to the unique needs of the household. Services to support rapid re-housing include housing search and landlord negotiation, financial and rental assistance, and the delivery of home and agency-based housing stabilization services, as needed. Caseload maximum per FTE is 30 households, programs are encouraged to meet caseload size of 20 per FTE.

Source: National Alliance to End Homelessness

**Permanent Supportive Housing (PSH)** is long-term housing that provides supportive services for people who are literally homeless and have disabilities through a Housing First Model. This type of supportive housing enables people with high vulnerability and housing barriers to live as independently as possible in a permanent setting. The supportive services provided in connection with housing shall address the special needs of individuals (such as persons with disabilities who are homeless and families with children who are homeless) intended to be served by a program. Household participation in services should be voluntary and case management should be community based. Permanent housing can be provided in one structure or several structures at one site or in multiple structures at scattered sites. Caseload maximum per FTE is 20 households, programs are encouraged to meet caseload size of 15 per FTE.

Source: CHG Guidelines

**Transitional Housing (TH)** is time limited housing and support services, up to 24 months, for persons experiencing homelessness. In Clark County, Transitional Housing programs serves persons who are identified through coordinated entry assessments as eligible for PSH and are unable to enter PSH due to no available program openings. Households served through TH may or may not meet HUDs chronically homeless definition; Transitional Housing programs support PSH eligible households until one of the following occurs: a PSH program spot becomes available and the household is still in need of PSH, a household stabilizes and can transition into a RRH program or transitions to another housing option. Transitional Housing may be site based or scattered site, all models must be paired with behavioral health, mental health, and physical health services. Services and supports must be available 24/7 and caseload maximum per FTE is 15 households.

**Shelter** is composed of temporary, indoor housing which households must leave at the end of their program participation. Shelters must be housing focused, low barrier, utilize the housing first approach, meet essential needs of households served including and not limited to health (direct service or external partnership), safety and hygiene. Households are considered homeless while enrolled in this temporary housing intervention. Caseload maximum per FTE is 25 households.

Shelter includes the following year-round programs:

- **Emergency Shelter**: Emergency shelter provides short-term temporary shelter (lodging) for those experiencing homelessness. Emergency Shelters can be facility-based, or hotel/motel voucher.
• Day Shelter: Day shelter provides indoor shelter during daytime hours, generally between the hours of 5am and 8pm. Day shelters serve households experiencing homelessness.

• Drop-in Shelter: Drop-in Shelters offer night-by-night living arrangements, generally between the hours of 5pm and 8am, that allow households to enter and exit on an irregular or daily basis.

• Continuous-stay Shelter: Continuous-stay Shelters offer living arrangements where households have a room or bed assigned to them throughout the duration of their stay.

New Shelter Capacity is any increase to the current, permanently available, shelter bed inventory for Clark County or an increase in available Day Shelter services for adults. New shelter capacity must be available year-round and meet the shelter definition within this document.

Increasing Existing Shelter Services is any increase in scope, services or staffing for a shelter program currently receiving Clark County Shelter funding through a direct contract. Proposals must indicate how shelter programs will meet established system performance goals, outcomes, and outputs; and support the Clark County Homeless Action Plan (HAP).

**Targeted Prevention Assistance** is the practice of providing short to medium-term supportive services and rent assistance to households at-risk or at imminent risk of homelessness. Households served by Targeted Prevention programs must have experienced homelessness in the past. Prevention connects people with the care and support needed to maintain their housing and achieve a better quality of life. All prevention programs will provide targeted prevention, an approach where households are strategically prioritized to receive homeless prevention assistance based on a standardized, evidence-based assessment that identifies households who are at highest risk of becoming homeless. The length of assistance 2-6 months on average, and assistance can extend up to 24 months. Source: HUD Performance Training

**Homeless Outreach** is a housing focused service provided to persons experiencing unsheltered homelessness. Staff engage clients using a trauma informed, culturally appropriate, low barrier approach. Personal connections with healthy boundaries are formed with clients to address immediate health, safety, and housing needs. Outreach providers utilize By Name List workgroups to identify persons with the highest needs and connect them to housing and other supportive services. Outreach staff spend much of their time with their current caseload of clients to work on housing goals and additional time with new contacts to deliver essential needs that increase health, safety, and access to housing. Outreach staff work closely with coordinated entry staff to support clients who are referred into supportive housing programs and maintain contact with those who are newly housed to support their transition into housing. Homeless outreach staff must be available during evenings and weekends, programs are required to adjust outreach schedules to meet system needs. Homeless outreach programs must be available to provide services throughout Clark County, focused service areas are permitted and should be adjusted to meet system needs. Partnership with, or direct services available from behavioral health, mental health and physical health providers is required for all homeless outreach programs.

**Additional Definitions**

**Caseload** is the amount of work of a staff person, represented in number of persons or households served. Each person or household is actively engaged by staff persons in an ongoing relationship and sustained effort that has the purpose of securing the outcome intended by the program.

Example: each month, a program serves 10 households with 2 Full Time Employees (FTE); staff working 32 to 40+ hours per week are considered FTE. The 2 staff provide direct services and all 64-80+ hours per week of the employee’s time are dedicated to the 10 households served, training and other job functions relevant to a specific
program is considered time dedicated to households. If the average number of clients served throughout the year, each month, remains at 10 and the staffing level remains at 2 FTE, the program has an average caseload size of 1 FTE to 5 households. A case manager caseload is their total client load compared to their total hours worked per week.

**Equity** is the guarantee of fair treatment, access, opportunity, and advancement while at the same time striving to identify and eliminate barriers that have prevented the full participation of some groups. The principle of equity acknowledges that there are historically underserved and underrepresented populations, and that fairness regarding these unbalanced conditions is needed to assist equality in the provision of effective opportunities to all groups.

Source: Equity in the Center

**Inclusion** is the act of creating environments in which any individual or group can be and feel welcome, respected, supported, and valued to fully participate to bring their full, authentic selves to work. An inclusive and welcoming climate embraces the differences and offers respect in the words/actions/thoughts of all people.

Source: Equity in the Center

**Housing First Theory** is a whole-system orientation, and not a "program," that offers permanent, affordable housing as quickly as possible for individuals and families experiencing homelessness, and then provides the supportive services and connections to the community-based supports people need to keep their housing and avoid returning to homelessness. The approach begins with an immediate focus on helping individuals and families get housing. Income, sobriety and/or participation in treatment or other services are not required as a condition for getting housing. All services are voluntary and are not a condition for retaining housing. Housing provides people with a foundation from which they can pursue other goals. Tenants are assisted in developing or improving skills for independent living while they live in permanent housing instead of requiring them to complete a transitional residential program first.

Source: USICH

The **Housing First Model** is an evidence based best practice designed to end homelessness and support recovery by housing individuals as quickly as possible and then wrapping services around them as needed. This housing model has proven effective in housing a wide variety of homeless population subsets including chronically homeless households and families and the general homeless population. Within this model, housing is not contingent upon participation in services or eligibility screening and services provided are designed to promote housing stability.

Source: USICH

**Outputs** are the direct and measurable products of a program’s activities or services, often expressed in terms of units (hours, number of people or completed actions). Outputs refer to the activities you will conduct and the people you hope to reach. Note: More than one OUTPUT is necessary to produce a final OUTCOME

Examples from Housing Program
- Number of case management hours
- Number of clients served
- Number of referrals provided
- Number of households housed
- Number of people who access mental health services

Source: National Community Action Partnership

**Outcomes** are the results or impact of these activities or services, often expressed in terms of an increase in understanding, and improvements in desired behaviors or attitudes of participants. Note: A single OUTCOME is often the result of multiple OUTPUTS.

Outcome Examples from Housing Programs
- Number of households with an increased income
• Percent of households stably housed three months after exit.
• Reduced system re-users
• Length of time homeless.
Source: National Community Action Partnership

**Systems of Care:**
Public residential facilities or programs that may exit people into homelessness.
The following prior residence categories are considered systems of care:
• Foster care home or foster care group home
• Hospital or other residential medical facility
• Jail, prison, or juvenile detention facility
• Psychiatric hospital or other psychiatric facility
• Substance abuse treatment facility or detox center
Source: WA Department of Commerce CHG Guidelines

**By and For Organizations** are operated by and for the community they serve. Their primary mission and history is serving a specific community and they are culturally based, directed, and substantially controlled by individuals from the population they serve. At the core of their programs, the organizations embody the community’s central cultural values. These communities may include ethnic and racial minorities; immigrants and refugees; individuals who identify as LGBTQ+, individuals with disabilities or who are deaf; and Native Americans.
Source: WA Department of Commerce T-RAP Guidelines