

The background of the entire page is a stylized map of Philadelphia. The map uses a color palette of light grey for streets, yellow for major roads, blue for the Schuylkill River and other water bodies, and green for parks and green spaces. A dark blue rectangular box is positioned at the top center, containing the title and subtitle in white and orange text respectively.

ROADMAP TO HOMES

Philadelphia's Five Year Strategic Plan
for the Homeless Assistance System

“I believe that the commitment to develop accountability and to invest resources strategically will preserve the resources, thus making the impact on ending homelessness direct and permanent. I am excited to be a part of this process.”

**– Broderick Green, CoC Board member
with lived experience of homelessness**

“People’s Emergency Center pledges to invest its time in helping realize a comprehensive response to homelessness in Philadelphia. The Action Steps described in this plan are the right action steps. I and PEC look forward to working with the City on implementation.”

**– Kathy Desmond, President,
People’s Emergency Center**

“This is excellent. I think the major actions are so clear; the rationale is clear, the measures of success are the right level of specificity, and then there is clear action.”

**– Christopher Strom, Principal, Corona Partners
and member, Shared Public Spaces Workgroup**

With **Shared Vision** and **Shared Accountability**, Ending Homelessness is **ACHIEVABLE**

As Director of the Office of Homeless Services, I am a member of the broad, diverse and passionate community of people working day-in and day-out to **make homelessness rare, brief and non-recurring in Philadelphia**. For us, the very idea that so many people lack the basic human necessity of a place to live calls us to dedicate our lives to improving the situation.

At the same time, we understand that without a plan, a set of goals and priorities, our efforts are less effective. That's why our community has come together and rallied around a **shared vision** for transforming the system of care. We have committed to make our system as effective and efficient as possible for those we serve and for those providing the services. We have agreed to align our efforts to achieve our goals and to **share accountability** for action.

This document lays out the goals, values and priorities of the plan, as well as the context and rationale.

We share three organizing principles:

We CAN do better. It is unacceptable that 15,000 Philadelphians experience homelessness each year. Only when people are housed can they really begin to stabilize their lives, address their physical and behavioral health needs and the needs of their children, seek and hold a job, and plan for the future.

We WANT to do better. While we celebrate the successes of our collective efforts past and present, we are energized by the desire to improve our impact. All of us dedicated to ending homelessness are ready to play our roles in achieving real, lasting solutions by implementing this plan together.

Our goals ARE achievable. The HOUSING FIRST approach we have adopted is proven and cost-effective. If we collaborate to fully implement the comprehensive, coordinated response to homelessness laid out in this plan, we *will* make homelessness rare, brief, and non-recurring in Philadelphia.

Let's make this happen.

Liz Hersh

Director of Homeless Services
City of Philadelphia



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Roadmap to Homes

Is a Bold Commitment to

MAXIMIZE IMPACT

The new five-year plan for Philadelphia's homeless assistance system demonstrates new resolve to tackle homelessness¹ in all its complexity. The plan is pragmatic and actionable. It reflects a dramatic shift toward a strategic, system-wide approach that coordinates efforts, reduces duplication and increases efficiency, especially in the use of resources. It boldly lays out our community's commitment to maximize impact over the next five years based on a person-centered, data-driven approach to doing what works.

THE SITUATION. Each year, approximately 15,000 people access our city's homeless services after finding themselves without a place to stay at night; thousands more are at risk of homelessness¹. Homelessness is caused by involuntary poverty, high housing costs, behavioral health challenges and trauma. Numerous stakeholders are invested in both responding to and preventing homelessness in a resource-constrained and often highly stigmatized environment. Coordinating a measurable, high-impact community response that helps individuals and communities drives the need for and benefit of a system plan.

THE SYSTEM. Forming the core of the homeless assistance system are the City **Office of Homeless Services** (OHS) supported by state and federal partners, and the network of direct service and housing providers. Around that core are the diverse stakeholders who work with, have been served by, or are otherwise invested in solving homelessness. The purpose of the plan is to coordinate the efforts of this network to be cohesive, coherent and high-impact.

THE PLANNING PROCESS. The Roadmap to Homes is the result of a 12-month process building on local leadership with support from the nonprofit **Corporation for Supportive Housing**, a nationally recognized consultancy. **Input** was provided by more than **400 stakeholders** who accepted the challenge to help "**Re-Envision Philadelphia's Homeless Assistance System.**" The community of stakeholders contributed the expertise, wisdom, energy, and experience that shaped this plan.

It is a plan by the community, for the community.

The Community of Stakeholders

Stakeholders in Philadelphia's homeless assistance system are a large and diverse group. The community includes:

- City government leaders and staff
- Direct service and housing providers
- People with lived experience of homelessness
- Leaders in business, hospitality and philanthropy
- Leaders of key public and private systems outside government
- Civic leaders, including representatives of resident, neighborhood, and community development organization

¹ See the U.S. Department of Housing and Urban Development (HUD) definition of homelessness in the Appendix. This plan focuses exclusively on homelessness as defined by HUD. HUD's definition does not include those who are unstably housed, "couch-surfing" and in need of affordable housing. The broader need for affordable housing is being addressed by the City's **Division of Housing and Community Development (DHCD)** in the City's Housing Action Plan.

GOALS

of the Roadmap to Homes

In alignment with the [national goals for addressing homelessness](#) in our country

Goal: Make homelessness rare.

Prevent homelessness to the greatest extent possible:

- Work together to keep people from exiting public systems into homelessness.
- Provide financial assistance and supportive services to keep people from ending up on the streets or in a shelter.

Goal: Make homelessness brief.

Resolve experiences of homelessness as quickly as possible:

- Work together to speed identification of people experiencing homelessness.
- Facilitate access to low-barrier housing, followed by linkage to ongoing supports and services.

Goal: Make homelessness non-recurring.

Support people to achieve and maintain stable housing so they do not fall back into homelessness:

- Work together to make connections to community-based services and supports.
- Match assistance to household needs.

Turn to page 28, [Measuring Progress Toward Plan Goals](#), to see specific targets for each goal and how we measure progress.

VALUES

of the Roadmap to Homes

As determined by the community of stakeholders who participated in developing the Roadmap

Trauma-informed

We recognize and understand the trauma experienced by people who have nowhere to live, and we are sensitive in responding to their needs.

Person-centered

We partner with people experiencing homelessness to develop accessible, easy-to-navigate solutions for meeting their needs, allowing participants the dignity of choice, and considering human desires, values, family situations, social circumstances, and lifestyles.

Assessment-based

We match assistance to the assessed needs of the household and prioritize assistance to the most vulnerable people who have the most intensive service needs.

Data-driven

We make decisions based on systematic attention to data on needs and outcomes.

Flexible

We continuously assess and improve quality and consistency of services, supported by adequate training for staff at all levels.

Efficient

We use innovative, evidence-based, collaborative, holistic, and non-duplicative program models to serve more people more effectively.

Transparent

We provide ample communication around inclusive decision-making processes that solicit and give weight to community input.

Accessible

We ensure that all people have equal access to the resources they need to prevent or resolve their homelessness, no matter their age, ancestry, national origin, ethnicity, disability, marital status, domestic violence status, family composition, gender identity, sexual orientation, or source of income.

Meeting the Needs of Subpopulations

Within the population of people at risk of or experiencing homelessness are numerous identified subpopulations, each of which has distinct needs. The homeless assistance system is committed to serving each subpopulation in a culturally competent manner. Subpopulations include, but are not limited to:

- Youth 18-24*
- Families with children*
- People experiencing chronic homelessness *
- Veterans*
- LGBTQ individuals
- Survivors fleeing domestic violence, dating violence, sexual assault, human trafficking, or stalking
- People with mobility challenges and other disabilities
- Older adults
- Returning citizens
- Immigrants
- Medically fragile people
- People with substance use disorder
- People with severe mental illness

** U.S. Department of Housing and Urban Development (HUD) priority populations*

PRIORITIES

of the Roadmap to Homes

As determined by the community of stakeholders who participated in developing the Roadmap

Expand Homeless Housing Resources

To meet the need for homeless housing, find new resources to expand the housing inventory.

We know that homelessness is best resolved with a HOUSING FIRST approach that provides quick access to permanent housing for all who need it. In Philadelphia, demand for homeless housing far exceeds supply. Without additional resources, we cannot fully implement HOUSING FIRST. We will explore innovative options and new funding opportunities to bring supply in line with demand. Meanwhile, we will continue to invest resources strategically to fill gaps in assistance. *See full plan on pages 17-19.*

Coordinate Across and Integrate Systems

To reduce trauma and better serve people trying to access government services, integrate systems and improve coordination. People in need often feel traumatized as they attempt to navigate multiple public systems, each of which offers help with a different facet of the life challenges they are facing – challenges that can include or lead to homelessness. We will create a multi-level, collaborative, cross-system leadership structure to integrate separate efforts by various systems to serve the same people. *See full plan on pages 20-21.*

Implement Transparent and Inclusive Quality Improvement Process

To provide a high quality, person-centered experience, implement a transparent and inclusive quality improvement process. People at risk of or experiencing homelessness are best served when the homeless assistance system is easily accessible, well-coordinated, consistent and caring. We will hold ourselves and our partner organizations accountable to high, clearly-defined standards, supported by inclusive quality improvement processes that involve people with lived experience and front-line providers in identifying training and technical assistance to be provided. *See full plan on pages 22-23.*

Communicate More Effectively

To support system transformation, communicate more effectively with stakeholders and the public about the response to homelessness. System changes affect people trying to access the system, people working within the system, and the public. All need clear, consistent information about the system and how it operates, as well as when, how, and why changes may occur. We will develop a communications plan that keeps stakeholders informed, shares knowledge within the system to support continuous learning, and increases public understanding and engagement. *See full plan on pages 24-25.*

Connect People to Employment and Workforce Development

To increase long-term housing stability, connect people in the homeless system to workforce development and employment opportunities. Most people who have experienced homelessness need and want a living wage job to remain housed. However, many face significant barriers to employment and require support to overcome them. We will establish a strategic partnership with the City's workforce development system and identify opportunities to connect people with existing jobs and/or create new jobs that meet their needs. *See full plan on pages 26-27.*

LEADERSHIP

Key to Successful Implementation

Successful implementation of the Roadmap to Homes will result from a **multi-level, collaborative, cross-system leadership structure**, described below. Leaders have committed to ongoing partnership and community engagement as they work together to achieve plan goals in accordance with plan values.

Intergovernmental Council on Homelessness (ICH)

Twelve leaders within the City structure agreed to create ICH in an unprecedented attempt to coordinate, at the highest levels of city government, the responses of multiple city systems. The ICH is comprised of commissioners and directors who lead City government systems that typically serve people experiencing socio-economic, behavioral or physical health problems that coexist with homelessness or can lead to homelessness. The Council members support the mission, values, and goals of this plan and have offered their expertise to help ensure the health and success of its strategies and actions. They will deploy key staff members to active involvement in implementation, recognizing that although action on homelessness may be one of many priorities, all ICH agencies play a role in actualizing our shared vision.

Continuum of Care (CoC) Board

A CoC Board, comprised of diverse stakeholders, will have high-level responsibility for strategy and accountability over plan implementation. It will include an array of voices to develop broad support for community efforts. CoC Board members will share ownership of the problem of homelessness and investment in solutions, keeping a big picture vision in focus, guiding resource allocation, measuring progress and helping pivot as needed. Standing subcommittees will focus on ensuring effectiveness in fulfilling responsibilities.

Stakeholder Affinity Groups

People with lived experience and providers who work within the system every day have the most expertise about its functioning, its needs and its opportunities. As we move forward with plan implementation, we will establish a Lived Experience Commission to inform and advise with the voice of their experience. We also will develop new methods of soliciting input on an ongoing and regular basis from providers and from the [Young Adult Leadership Committee](#).

Office of Homeless Services (OHS)

As the collaborative applicant for the Philadelphia CoC, OHS is responsible for supporting, coordinating, administering and overseeing plan implementation. OHS leaders are aligning the agency budget with plan priorities and reorganizing staff to maximize performance. OHS also is creating a Director of Communications position and a Training and Technical Assistance Unit. Early in the implementation process, OHS will convene Ad-Hoc Strategy Groups to map out implementation tasks and identify activities and deliverables, appropriate project teams and timelines for action.

Learning from Best Practices in Other Communities

Our implementation process is and will continue to be informed by research on best practices by CSH, our Strategic Planning consultant, training and technical assistance from HUD and communicating with our peers in other cities about ways they are implementing their strategic plans, coordinated entry processes, governance structures and other elements of their homeless assistance systems.



CONTEXT

Why the Roadmap Takes a **HOUSING FIRST** Approach

Locally and nationally, homeless services are increasingly focused on helping people secure safe, decent housing as the first priority, immediately followed by connecting them to services that can help them remain housed.

This HOUSING FIRST approach is grounded in the understanding that the basic need for a place to live must be met before people can take on the life challenges that led to homelessness, be they physical or behavioral health issues, lack of education or employment, or something else. In a dramatic shift from past practices, our system no longer screens out or terminates people from homeless housing due to lack of income, poor credit history, substance use, criminal justice history or other factors.

HOUSING FIRST was originally a very specific model for moving the most vulnerable people from the street directly into housing. The success of that model, data on its cost-effectiveness and common sense led to applying HOUSING FIRST principles in serving all homeless populations.

Today, when we talk about HOUSING FIRST, we make the following points¹:

HOUSING FIRST is a whole-system orientation and response. The approach succeeds when a whole system of aligned programs, from street outreach to long-term housing and all kinds of supportive services, works together to help house people quickly and without contingencies, offer access to the right supports to keep their housing and empower them to improve their quality of life.

Housing is step one; step two is offering services to meet other needs. Once they are housed, people need voluntary, high-quality services to meet their individual needs. Needs vary among people without experience in living independently or paying bills, with long histories of homelessness, with complex health problems, or facing any number of other challenges.

Housing options must address the distinct needs of subpopulations. Subpopulations (see page 7) need different supports and access to different resources. We must create an adequate range of housing options to meet needs, such as safety from domestic violence, support for recovery from substance use disorder, or affirmation and support of gender identity or sexual orientation

Housing providers have the right to set expectations of participants. While providers are expected to make every effort to connect participants to supportive services, participants should be held to the same expectations as other tenants: pay rent on time, maintain the unit, comply with the lease and avoid putting the health and safety of neighbors at risk. Participants who previously declined supportive services often agree to engage if their behavior is putting them at risk of losing their housing.

The HOUSING FIRST Approach Is Based on These Beliefs

- At its core, an experience of homelessness is immediately resolved by a home.
- All people need the safety and stability of a home to overcome challenges and pursue opportunities.
- Access to safe, decent housing without preconditions is the most effective way to support people experiencing homelessness in rebuilding or stabilizing their lives.

¹ US Interagency Council on Homelessness, www.usich.gov/news/four-clarifications-about-housing-first

How the Roadmap to Homes Is **Building on Past Success**

Philadelphia's [last community-wide plan](#) to address homelessness launched in 2005, with a central goal of increasing our local supply of permanent supportive housing (PSH). Between 2005 and 2017, the long-term supply of PSH increased by 1,924 beds.

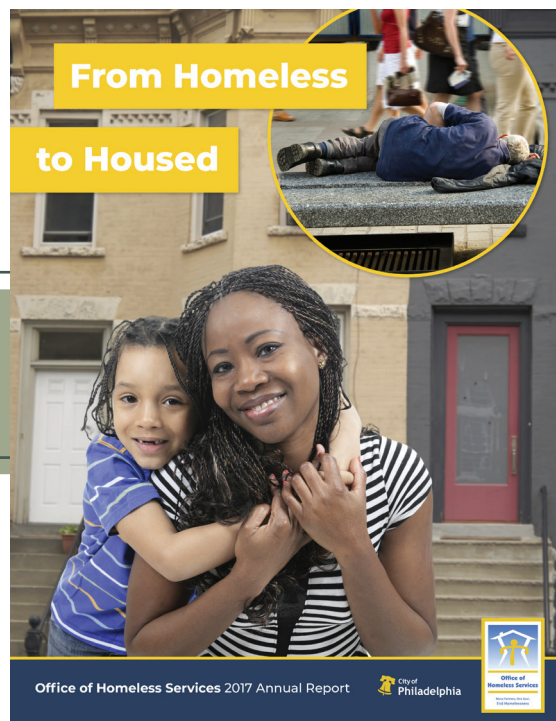
Additionally, as part of an innovative collaboration, more than 3,500 formerly homeless families moved into “Blueprint” units subsidized by Philadelphia Housing Authority with supports from the Department of Behavioral Health and Intellectual disabilities (DBHIDS).

Through another cross-system collaboration and an infusion of federal resources, Philadelphia [effectively ended Veteran homelessness](#) in 2015.

[Notable achievements from 2005-2017](#) also included investments in solutions that produced meaningful results, a redesign of how people access resources, implementation of a more sophisticated data management system, and creating additional successful partnerships.

In the year 2017 alone, the homeless assistance system helped prevent or end experiences of homelessness for 1,784 households, providing them with a lifeline to new opportunities, dignity, health and economic stability.

For more examples of recent successes, see the [Office of Homeless Services 2017 Annual Report](#), which is available on the OHS website.



Snapshot of the Current Homeless Assistance System

The City's Homeless-dedicated Housing Capacity

Over the past decade, Philadelphia has significantly expanded its homeless housing inventory, in number of units and breadth of options.¹

- Permanent supportive housing provides long-term rental subsidy and services to people with disabilities, with an average 90% success rate.
- Transitional and rapid re-housing provide short- to medium-term rental subsidy and services for people whose need for support will likely decline over time.
- To meet immediate needs, Philadelphia's emergency shelters put a roof over the heads of approximately 3,420 people on any given night.
- Safe havens help stabilize hard-to-reach persons with severe mental illness who have been living on the streets and have been unable or reluctant to participate in supportive services.

As of January 2018, Philadelphia's inventory of emergency, temporary, and permanent housing for people experiencing homelessness included:

Philadelphia Homeless-Dedicated Housing [Inventory](#), January 2018

Program Type	Number of Year-Round Beds	Number of Seasonal or Overflow Beds
Emergency Shelter	3,429	338
Safe Haven	255	—
Transitional Housing	1,244	—
Rapid Re-Housing ²	1,176	—
Permanent Supportive Housing	4,926	—

¹ See Appendix for definitions of common terms.

² Rapid Re-Housing rental assistance does not have a set number of year-round beds; the number of persons served annually fluctuates depending on the level of assistance provided to households, which varies based on their needs, composition, and income level.

Who Is Homeless in Philadelphia

In 2017, despite having the highest poverty rate among the 10 largest cities in the United States, Philadelphia had the lowest number of people without shelter³.

The public tends to focus on people who are unsheltered, because they are visible in parks and on city streets. Yet in Philadelphia, less than 20% of people experiencing homelessness at any given time are living on the street.

Over 80% are able to spend the night indoors and out of the elements in emergency shelter, safe haven or transitional housing programs, but still lack permanent places to call home.

Still, the number of unsheltered people has been growing since 2014, due largely to the opioid epidemic and reduced availability of federal housing vouchers.

Total Number of People Experiencing Homelessness (Sheltered and Unsheltered) in Philadelphia⁴ — January 25, 2018

	Adults Over 24	Adults 18-24	Children Under 18	Total
in Households with Children	583	198	1,418	2,199
In Households without Children	3,287	266	-	3,553
In Households with Only Children	-	-	36	36
Total	3,870	464	1,454	5,788

Characteristics of People Experiencing Sheltered and Unsheltered Homelessness in Philadelphia — January 25, 2018

	Sheltered (ES, TH, & SH)	Unsheltered	Total
Total Number of People	4,705	1,083	5,788
Female	2,049	262	2,311
Male	2,631	808	3,439
Black or African American	3,779	585	4,364
White	707	425	1,132
Chronically Homeless	515	427	943
Adults Self-Reporting Mental Illness	993	489	1,482
Adults Self-Reporting Substance Use Disorder	946	522	1,468

³ Source: "2007 – 2017 PIT counts by CoC." HUD Exchange, PIT and HIC Data Since 2007. December 2017.

Source: Annual Estimates of the Resident Population for Incorporated Places of 50,000 or More, Ranked by July 1, 2017 Population: April 1, 2010 to July 1, 2017." U.S. Census Bureau, Population Division. May 2018.

⁴ Through our annual [Point-in-Time Count](#) of people experiencing homelessness, we identify the demographics and characteristics of people staying on the streets and in sheltered locations—emergency (ES), transitional (TH), and safe haven (SH)—on a single night.

Funding Sources for Philadelphia's Homeless Assistance System

Our continuum of care invested approximately \$85 million dollars in housing and services through the Office of Homeless Services in FY18 (July 1, 2017-June 30, 2018).¹

Federal Dollars

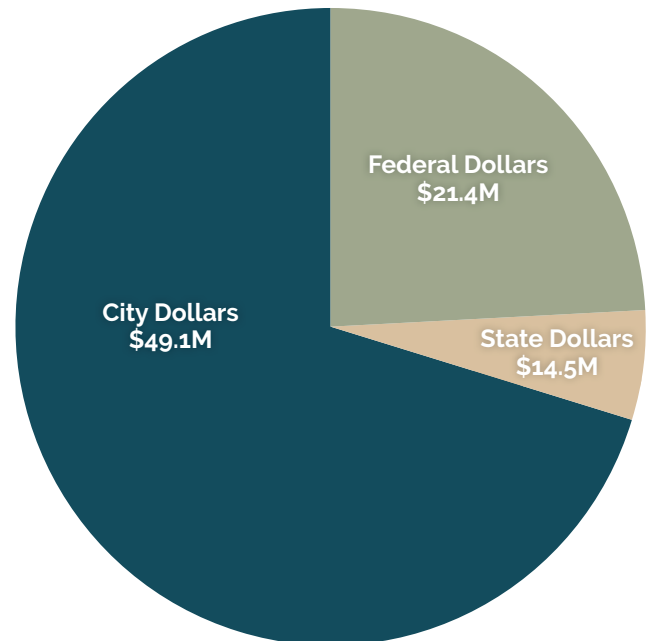
In FY18, Philadelphia received \$21.4 million dollars in Federal funds, primarily from the US Department of Housing and Urban Development (HUD) for permanent supportive housing and rapid re-housing provided to households experiencing homelessness. The bulk of these funds are renewals for housing that already exists and are occupied by people who are formerly homeless.²

State Dollars

The Commonwealth of Pennsylvania invested approximately \$14 million dollars in the City's shelter, homelessness prevention and homeless assistance service system. The quasigovernmental Pennsylvania Housing Affordability and Rehabilitation Enhancement Fund (PHARE) added another \$500,000.

City Dollars

The City of Philadelphia invested \$48 million dollars in FY18 to provide shelter, permanent supportive housing, rapid rehousing, homelessness prevention and diversion, intake and assessment of people facing or experiencing homelessness. Of this total, \$39 million was used for contracted services by providers throughout the community. The local Housing Trust Fund provided \$1.1 million for homelessness prevention.



¹ The estimate of 15,000 people experiencing homelessness annually (on p. 5) is based on data entered into our Homeless Management Information System, which does not account for the entire system of homeless assistance. Our inventory as reflected in the Housing Inventory Count is based on a single point in time and does not provide information about how many people many use a single bed or households will stay in a single unit over the course of the year. For these reasons, as well as absence of a sum of private resources dedicated to the system, none of these figures can be used to produce an accurate per-unit, per-household, or per-capita average.

² Every year, each CoC nationwide submits a single Consolidated Application to HUD for CoC Program funds. HUD requires communities to establish these CoCs to create a coordinated community-based process of identifying needs and building a system of housing and services to address those needs. Philadelphia's process has produced this Roadmap to Homes, which will guide our future actions.

³ OHS received the public dollars shown above. In addition to Federal funds received by OHS, nonprofit providers directly received a total of nearly \$17.2 million in HUD CoC Program funding.

Additional Funding Invested in the System beyond OHS³

Private Philanthropic Dollars. Funding from the private sector supports the work of many nonprofit providers. There is no tally available of this investment at this time.

Funding that is Not Homeless-Dedicated. Hundreds of millions more fund the many other public and private systems in which people experiencing homelessness are only one of the diverse populations served.



THE ROADMAP

To meet the need for homeless housing, **secure new resources to expand the housing inventory**

We know that homelessness is best resolved with quick access to permanent housing for all who need it. In Philadelphia, demand for homeless housing **far exceeds supply**. While working to maximize system capacity with current funds, we will explore innovative approaches and new funding opportunities to bring supply in line with demand.

The Challenge

People experiencing homelessness need housing, first and foremost. Permanent supportive housing, rapid re-housing, and prevention assistance all provide rental subsidy and supportive services, each targeted to households and subpopulations requiring a specific level of service.

Limited resources mean few openings in supportive housing for those who need that level of support, rapid re-housing that is less than rapid, and entries to emergency shelter that could have been prevented with modest assistance to remain in a safe home.

Along with communities nationwide, Philadelphia recently launched a [Coordinated Entry and Assessment-Based Housing Referral System](#) (CEA-BHRS, pronounced “sea breeze”) to ensure that the system uses its limited housing resources as effectively and efficiently as possible, by matching assistance to household needs and prioritizing the most vulnerable for referral. CEA-BHRS provides a standard housing assessment for use by everyone who assesses individuals and families for referral to homeless-dedicated housing. People of all descriptions and families of all compositions experience homelessness and this standardization seeks to ensure equitable access for all.

We need new resources to expand our supply and fill our system gaps. The following estimates¹ of our unit needs are based on based on the annual number of people experiencing homelessness in the city, data-informed assumptions² about the interventions required to address their housing needs, and currently available resources for those interventions. These projections do not represent exact or final figures on population need, but do provide an empirical foundation for community conversation on resource allocation and unit creation, based on best available local and national data.

Continued on next page

¹ Members of a stakeholder workgroup produced the estimates using a methodology provided by the Corporation for Supportive Housing (CSH).

² The projected estimated need for additional units is based on the following assumptions:

1. The volume of people moving into the system, their needs, their lengths of stay, and turnover rate of current inventory remain consistent as when we pulled the data;
2. Households are matched to the intervention that best meets their level of service need;
3. A percentage of households will self-resolve their homelessness without requiring an intervention.

Estimated Number of Additional Resources Required to Address the Current Needs¹

Housing Intervention	Household Type	Number of Households Needing This Intervention Annually	Number of Units in Inventory Available Annually	Estimated Number of Additional Units Needed to Fill Gaps for Annual Demand
Prevention: Rent/utility assistance to keep people at imminent risk of homelessness in their homes	Households with Children (heads of household ages 25+)	515	—	515
	Households with Children (heads of household ages 18-24)	200	—	200
	Households without Children ages 25+	1,820	—	1,820
	Households without Children ages 18-24	195	—	195
	TOTAL Prevention			
Rapid Re-Housing: Medium-term rental assistance and supportive services to stabilize and relaunch lives	Households with Children (heads of household ages 25+)	390	290	100
	Households with Children (heads of household ages 18-24)	170	50	120
	Households without Children ages 25+	5,115	255	4,860
	Households without Children ages 18-24	670	30	635
	TOTAL Rapid Re-Housing			
Permanent Supportive Housing: Long-term housing subsidy with supportive services, for people with disabilities	Households with Children (heads of household ages 25+)	195	60	135
	Households with Children (heads of household ages 18-24)	55	10	50
	Households without Children ages 25+	1,895	225	1,670
	Households without Children ages 18-24	625	5	620
	TOTAL Permanent Supportive Housing			

¹ For more information about methodology, see Appendix.

The Response

We will continue to invest resources strategically while exploring a range of options and approaches for bringing supply in line with demand, including:

- Target, prioritize, or repurpose resources based on need and program performance data.
- Expand partnerships to increase investment in innovative, cost-effective solutions that align with the Roadmap to Homes.
- Increase the number of landlords engaged with the homeless assistance system to facilitate housing supply expansion as new funding becomes available.
- Coordinate resource expansion efforts with the [Philadelphia Department of Planning and Development's Housing Action Plan](#), to be released in Fall 2018.

Action Steps

- **GAP ANALYSIS.** Conduct annual analysis of gaps between population needs and inventory of housing and services to drive funding decisions for new prevention, rapid re-housing, and permanent supportive housing.
- **EXPAND CEA-BHRS.** Expand [Coordinated Entry and Assessment-Based Housing Referral System](#) (CEA-BHRS) and consider additional vulnerability measures that enable better targeting and prioritization of resources.
- **MOVE-ON STRATEGY.** Design and implement a strategy for people to “[move on](#)” to affordable housing from permanent supportive housing when they no longer need intensive supportive services, freeing up service-intensive housing for people who need it most.
- **FUNDERS COLLABORATIVE.** Support the development of a funders collaborative to elevate broad-based community investment in solutions.
- **LANDLORD ENGAGEMENT.** Design and implement a landlord engagement strategy to expand the pool of available, affordable units.
- **DIVERSION STRATEGIES.** Research and implement effective homelessness diversion strategies, including training of landlords and other community members.
- **SHALLOW RENT.** Expand shallow rent pilot program to allow additional households on low fixed incomes, such as those with a disability, to exit homelessness.
- **HEALTHCARE SYSTEM.** Cultivate relationships with major healthcare systems to leverage resources that can stabilize users of high-cost healthcare by providing them with permanent housing.

To reduce trauma and better serve people trying to access government services, **integrate systems and improve coordination**

People in need often feel traumatized as they attempt to navigate multiple public systems, each of which offers help with a different facet of the life challenges they are facing – challenges that can include or lead to homelessness. We will create a multi-level, collaborative, cross-system leadership structure to integrate separate efforts by various systems to serve the same people.

The Challenge

People engaged with a system of care – such as a hospital, child welfare or justice system – are disproportionately vulnerable to homelessness, even more so if engaged with more than one system.¹ When the processes and policies of intersecting systems do not align, people fall through the cracks into homelessness or face unintended roadblocks to securing housing.

Further, each system focuses on one challenge faced by the person or family and may not even consider the full scope of their needs. Despite best efforts to align service delivery, City agencies operate in silos. People with complex needs and the providers serving them have to navigate each system separately in an attempt to piece together the supports that can prevent or end experiences of homelessness.

The Response

We will take steps to integrate systems of care and improve coordination among them, including:

- Establish a cross-system leadership structure to facilitate collaboration and service integration for people engaged with one or more systems of care.
- Ensure inclusion of systems serving HUD's priority populations – youth ages 18-24, families with children, people experiencing chronic homelessness, and veterans – as well as systems serving other subpopulations with distinct needs.
- Identify systemic obstacles to accessing and securing housing and supportive services.
- Revise policies and/or processes to prevent entry into the homeless system from other public systems.
- Build relationships and processes that enable swift response to urgent and emergent needs, such as [recent efforts](#) related to the [opioid epidemic](#) and related [encampments](#).
- Identify and analyze specific needs of subpopulations across systems by expanding data sharing agreements and improving connectivity between care providers.

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¹ [US Interagency Council on Homelessness \(USICH\), Home, Together: The Federal Strategic Plan to End Homelessness, 2018-2022](#)

Action Steps

- **INTERGOVERNMENTAL COUNCIL.** Establish an Intergovernmental Council on Homelessness comprised of leaders of City agencies to stay abreast of plan implementation and prioritize the needs of people engaged with their systems who are at risk of or experiencing homelessness.
- **CoC GOVERNING STRUCTURE.** Reconfigure the Philadelphia Continuum of Care (CoC) governing structure to align with and advance the strategies in the Roadmap to Homes.
- **YOUTH HOMELESSNESS.** Continue to develop a coordinated response to youth homelessness through the [Philly Homes 4 Youth Coalition](#).
- **YOUTH HOUSING STABILITY.** Work with the [Department of Human Services \(DHS\)](#) on system changes to improve housing stability for youth exiting child welfare systems.
- **STUDENT HOMELESSNESS.** Collaborate with key partners, including the [School District of Philadelphia](#), to build capacity to identify and support students experiencing homelessness, and increase their access to [McKinney-Vento education resources](#).
- **FREQUENT USERS.** Implement a pilot of the evidence-based [Frequent Users Systems Engagement \(FUSE\)](#) Model to house people with extensive histories in multiple systems: criminal justice, behavioral health, and homelessness.
- **PARENT-CHILD REUNIFICATION.** Pilot [Rapid Re-Housing for Reunification](#), a partnership of OHS and DHS, with assistance targeted to parents and children remaining separated primarily because of difficulty securing housing.
- **DATA SHARING.** Launch and utilize Client Snapshot, a data-sharing tool for City departments and their contracted providers, to improve coordination of care for individuals and families served by multiple City departments.
- **PROVIDER PARTICIPATION.** Increase participation of homeless service providers in the Homeless Management Information System (HMIS) to make system data and reports more valuable in informing our community about the needs of people experiencing homelessness and the performance of the system created to serve them.
- **STREET OUTREACH DATA.** Connect street outreach data with data on the rest of the homeless assistance system to expedite eligibility determinations and improve referrals so that people are moved directly from the streets into permanent housing as quickly as possible.

To provide a high quality, person-centered experience, **implement a transparent and inclusive quality improvement process**

People at risk of or experiencing homelessness are best served when the homeless assistance system is easily accessible, well-coordinated, consistent and caring. We will hold ourselves and our partner organizations accountable to high, clearly-defined standards, supported by inclusive quality improvement processes that provide training and technical assistance.

The Challenge

Philadelphia's homeless assistance system is historically shelter-based. Today, research shows that the most efficient, effective homeless systems (a) focus on housing, (b) prioritize the most vulnerable people, and (c) ensure high quality services that base future funding decisions on performance and outcomes.

To achieve that vision, the system will have to incorporate new practices and adjust their service model to ensure providers are equipped and supported to succeed.

Providers want – and deserve – fair and transparent expectations, undergirded by robust training and technical assistance. Further, they need to be involved in the development of policies and performance measures, to provide input as key stakeholders and to be able to anticipate coming changes in expectations.

The Response

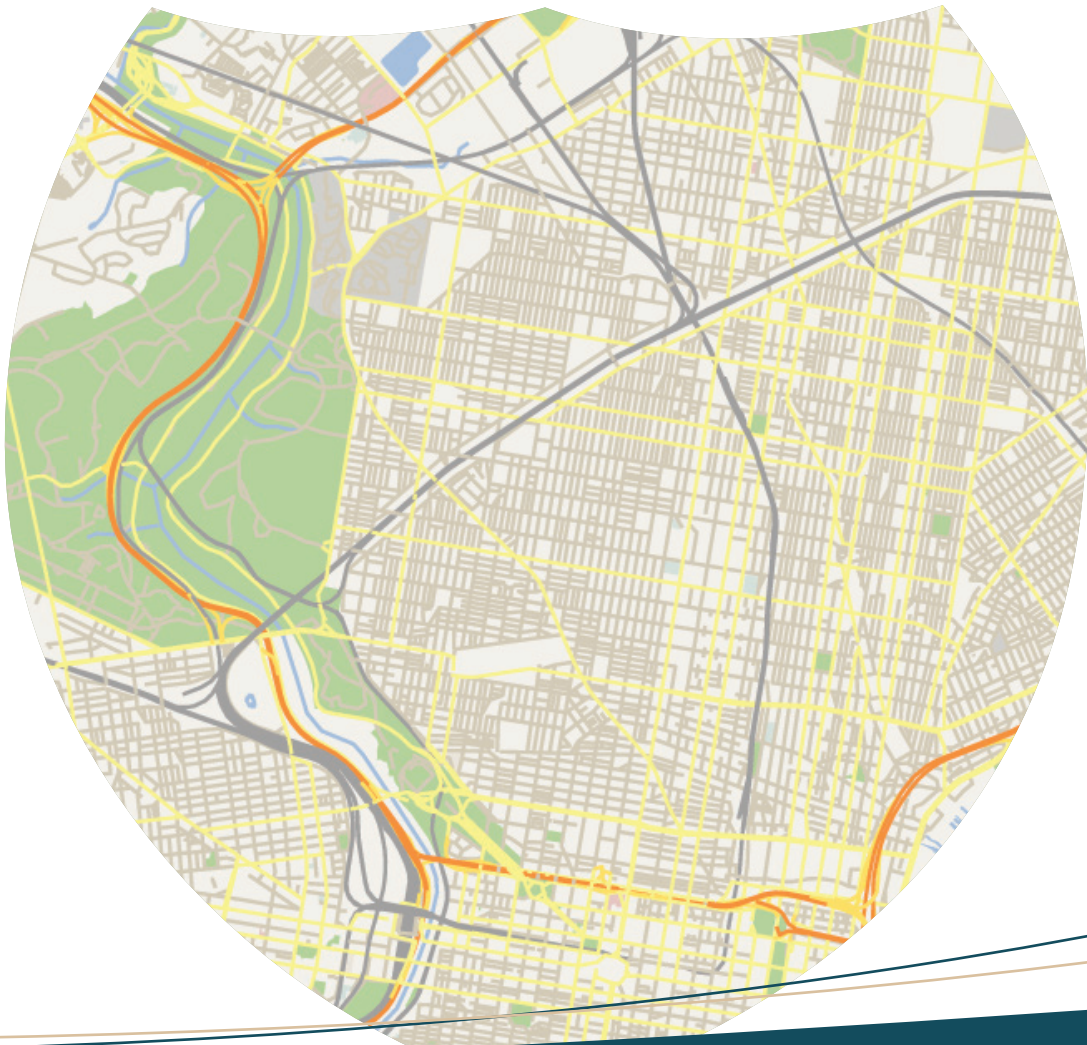
We will cultivate a culture of excellence and strengthen programs and policy in line with the values, priorities and goals of the Roadmap to Homes. Specifically, we will:

- Establish and implement a transparent quality improvement process, with clear program standards and performance measures, developed with input from providers and people with lived experience of homelessness.
- Create and implement a transformative learning culture that equips providers to effectively deliver culturally competent, trauma-informed, and HOUSING FIRST services, targeted to the specific needs of each subpopulation, and give providers opportunities to share with and learn from one another.

Continued on next page

Action Steps

- **PROVIDER INPUT.** Seek provider input when establishing annual program performance targets.
- **EXPAND TRAININGS.** Develop a training plan, including forums of provider peer-to-peer learning, OHS Training Unit support on the [Housing First](#) approach, [Equal Access Rule](#), and case management best practices, and identify resources to expand trainings offered to City staff and providers on topics such as cultural competency, trauma-informed care, LGBTQ inclusivity, domestic violence safety planning, substance use disorders, and mental health first aid.
- **EVALUATION.** Revisit mission and goals of the CoC's Quality Improvement and Evaluation Subcommittee (QIES) and establish a group of stakeholders to develop and refine an annual CEA-BHRS evaluation strategy.
- **PARTICIPANT INPUT.** Regularly convene people who've experienced homelessness to seek recommendations on assessing and responding to program outcomes and service quality.
- **PERSON-CENTERED SERVICE.** Implement recommendations of the City's [Participatory Design Lab](#) for person-centered service delivery at OHS' Appletree and Roosevelt Darby Homeless Resources Centers.
- **ANNUAL ASSESSMENT.** Assess the homeless assistance system [annually](#) using [HUD System Performance Measures](#).



To support system transformation, **communicate more effectively with stakeholders and the public about the response to homelessness**

System changes affect people trying to access the system, people working within the system, and the public. All need clear, consistent information about the system and how it operates, as well as when, how, and why changes may occur. We will develop a communications plan that keeps stakeholders informed, shares knowledge within the system to support continuous learning, and increases public understanding and engagement.

The Challenge

People who have lost their housing most acutely need to know where to turn for help, but stakeholders of all types require clear and consistent information about the system of response to homelessness.

Within the system, City staff and service providers not only need to know about current policies and practices, they also need to understand how the changes stem from lessons learned about homelessness and how to maximize effective response. To develop that understanding, they need opportunities to share successes, challenges, questions, feedback, and opportunities.

When passers-by see people living on the streets, they are reminded of the prevalence of homelessness, creating tremendous concern and appetite to know “what is being done.”

The Response

To inform stakeholders, share knowledge and increase public engagement, we will:

- Institute a multi-channel internal communication strategy targeting various stakeholder groups within the system and provide mechanisms for stakeholder information sharing.
- Organize and share resources that will help City staff and service providers meet the unique needs of subpopulations.
- Develop a strategic external communications strategy to increase public understanding of homelessness and the homeless assistance system and build community engagement in supporting the system.

Continued on next page

Action Steps

- **PUBLIC INFORMATION CAMPAIGN.** Identify and secure resources to create a communications campaign that will improve public understanding of homelessness, the available solutions, and the community's strategies to make homelessness rare, brief, and non-recurring.
- **REFERRAL SYSTEM AND POLICY.** Launch communications campaign to inform all stakeholders about [Coordinated Entry and Assessment Based Housing Referral System \(CEA-BHRS\)](#) and [Non-Discrimination Policy](#).
- **OHS STRATEGY IMPLEMENTATION.** Implement revamped OHS communication strategy to increase clarity and consistency in sharing information.
- **ACCESSIBLE DATA.** Work with the City's [Office of Open Data & Digital Transformation](#) to increase accessibility of homeless assistance system data, specifically data on subpopulations, CEA-BHRS, and system performance.
- **KNOWLEDGE SHARING.** Research existing platforms and identify most appropriate option for centralized information-sharing to facilitate participant access to available resources.



To increase long-term housing stability, **connect people in the homeless system to workforce development and employment opportunities**

Most people who have experienced homelessness need and want a living wage job to remain housed. However, many face significant barriers to employment and require support to overcome them. We will establish a strategic partnership with the City's workforce development system and identify opportunities to connect people with existing jobs and/or create new jobs that meet their needs.

The Challenge

Most people in the homeless assistance system will need to increase their incomes to pay rent or mortgage payments and remain housed. Connecting people to employment will support their housing stability and help drive economic growth in our city. Moreover, employment also promotes social contact and support, challenges despair, builds self-confidence, and provides economic freedom.

Most people experiencing homelessness who provided input for the Roadmap to Homes expressed a strong desire to get a job – or a higher paying job – to support themselves. But many face numerous barriers to employment. These can include lack of childcare or transportation, gaps in employment history, a criminal record, and low literacy.

To end homelessness, our community needs to provide sufficient affordable housing, supports to overcome barriers to employment, and opportunities for people in the homeless assistance system to increase their incomes.

The Response

To support people in gaining employment and ensure the City's workforce development system is prepared to address the barriers to employment they face, we will:

- Establish a strategic partnership between the homeless assistance and workforce development systems to draw upon each other's expertise in connecting people experiencing homelessness to pre-employment or employment opportunities.
- Identify opportunities to create new jobs targeted to the specific needs of the populations experiencing homelessness.

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Action Steps

- **CO-LOCATE RESOURCES.** To increase sustaining-wage job attainment while improving access to public benefits and services, co-locate employment, job training, and benefits access services in a trauma-informed space at the Appletree Homeless Resources Center.
- **ASSESS NEEDS.** Create a working group to assess the workforce development needs of people experiencing homelessness.
- **COORDINATE BETWEEN SYSTEMS.** Establish and implement a plan to increase coordination between the systems for homeless assistance and workforce development.
- **ADDRESS BARRIERS.** Investigate opportunities to address childcare and transportation barriers to employment, and advocate for barrier reduction or removal.
- **FIRST STEP STAFFING.** Work with the nonprofit [First Step Staffing](#), which prepares and places entry-level and semi-skilled workers with local employers and supports their success with wrap-around services.
- **DAY LABOR PROGRAM.** Explore the potential to create a day labor program for people experiencing homelessness.



Measuring Progress Toward Plan Goals

While we recognize that economic, social and political forces beyond our control contribute to homelessness, we will make progress toward our goals by holding ourselves and our partners accountable for advancing the five priorities of the Roadmap to Homes.

As we take the Action Steps specified in this plan, we will assess our progress by measuring the outcomes of system transformation and the increase in our impact on homelessness. The measures noted below have been set nationally by HUD. As we move into implementation, our community will look closely at Philadelphia’s unique context to develop performance targets that are realistic and attainable, but also ambitious, in moving us forward.

We will monitor performance not only for the total population of participants, but also for identified subpopulations (see page 7), to assess any possible disparities. In this effort, we will draw on the expertise of coalitions such as [Philly Homes 4 Youth](#), the [Family Service Provider Network](#), [Philly Vets Home](#), [Shared Safety: Philadelphia](#), and the Chronic Homelessness Team.

We will strive to be flexible in our approach, changing course as we learn what works, and adapting to the changing policy landscape and emergent needs.

Goal: Make homelessness rare.

Indicators of Success	HUD System Performance Measure Baselines ¹
Fewer people on the streets or in temporary housing programs (emergency shelter, safe haven, or transitional housing)	5,788 people experiencing homelessness in 2018 Point-in-Time Count: 4,075 sheltered; 1,083 unsheltered
Fewer exits from institutional settings – such as prison, foster care, or hospitals – directly into homelessness	7,163 people experiencing homelessness for the first time during FY2018
Fewer first-time entries into the homeless assistance system	

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¹ The HUD System Performance indicators for FY2018 (7/1/2017– 6/30/2018) reflect only the data entered by the current stakeholders actively utilizing Philadelphia’s Homeless Management Information System (HMIS) and should be used only as a general guide. As the numbers do not reflect the entire network, this baseline does not provide a complete picture. Once all stakeholders are utilizing HMIS, the universe of participants included will grow and performance measured in percentages will fluctuate. Current levels may not be indicative of future results of any specific project type. Year-to-year changes also may reflect a shifting baseline rather than a change in performance. If you have any questions regarding the information in this report, please contact Michele.Mangan@phila.gov.

Goal: Make homelessness brief.

Indicators of Success	HUD System Performance Measure Baselines
<p>Shorter experiences of homelessness</p> <p>Less time from housing assessment to referral, from referral to permanent housing move-in</p>	<p>233 day average stay in emergency or temporary housing in FY2018, median: 145 days</p>

Goal: Make homelessness non-recurring.

Indicators of Success	HUD System Performance Measure Baselines
<p>More moves from homelessness to permanent housing</p> <p>More people with increased income</p> <p>Fewer people falling back into homelessness assistance system</p>	<p>29% of participants exiting time-limited housing moved to permanent housing in FY2018</p> <p>42% of non-shelter participants increased their incomes in FY2018</p> <p>92% of participants who entered permanent housing in FY2016 did not return to homelessness in FY2017 or FY2018</p>



Getting Started – Now!

1

The community of stakeholders will sign on to this plan. It will take all of us, as a community, to transform the homeless assistance system. Sign-on has begun at the highest levels of public sector leadership: City commissioners and directors responsible for major systems that serve people experiencing homelessness. By agreeing to serve on Philadelphia's Intergovernmental Council on Homelessness (ICH), these leaders have endorsed the goals, values and priorities of this plan.

We need your commitment, too! Volunteer to help on page 31.

2

System governance will align with the Roadmap's goals and priorities to operationalize implementation. The Continuum of Care Board is responsible for coordinating implementation efforts. The CoC Board's composition will be reconfigured in fall 2018 and Ad Hoc Strategy Groups will be formed to design and direct execution of specific plan strategies. ICH members will designate appropriate staff for governmental seats on the CoC Board. To fill non-governmental seats, the CoC will hold a full-membership election, ensuring representation of people with lived experience of homelessness, service providers, and other community stakeholders (see page 9).

3

Budgets and staffing will align with plan priorities within the Office of Homeless Services and across the provider network. While this alignment is resource-dependent and will evolve over time, OHS is taking the first steps: hiring a Director of Communications, aligning the agency budget with plan priorities and reorganizing staff to achieve and maximize performance, and establishing a Training and Technical Assistance Unit to begin advancing quality and performance goals.

4

The CoC Board will monitor and report on progress. The CoC Board will monitor data dashboards tracking implementation benchmarks, review data on outcomes and system gaps, allocate public resources, and produce annual public progress reports for presentation to the community. Tracking progress and discovering what challenges arise, the CoC Board also will identify opportunities for collaboration and peer learning, ways to build upon successes, and ways to shift approach as necessary to overcome challenges.

We Invite You to **Commit to this Plan**

It's time to roll up our sleeves. We hope you'll join in our efforts! We invite all stakeholders in the homeless assistance system to pledge their commitment to uphold the **values** of this plan, align their work with the **priorities** of this plan, and play a role in achieving plan **goals**.

[Sign up to volunteer on the OHS website](#)

APPENDIX

Appendix

Common Terms and Acronyms

Chronically homeless – A homeless individual with a disability who lives in a place not meant for human habitation, a safe haven, or an emergency shelter and has been living in such places for at least 12 months either continuously or on at least 4 separate occasions in the last 3 years OR

- An individual who met the above criteria before beginning a stay of 90 or fewer days in an institutional care facility OR
- A family with a head of household who meets the criteria above.

Collaborative Applicant – Entity designated by each Continuum of Care (CoC) to submit the annual CoC Consolidated Application for funding on its behalf. The Office of Homeless Services is the Collaborative Applicant for Philadelphia CoC.

Continuum of Care (CoC) – A group organized to address homelessness through a coordinated community-based process of identifying needs and building a system of response.

Continuum of Care Program – Federal homeless assistance grants awarded competitively by HUD. Applicants in a community submit a consolidated application to HUD that includes all individual project requests, ranked by the community in order of funding priority. Eligible uses are permanent housing, including permanent supportive housing (PSH) and rapid re-housing (RRH); transitional housing (TH), Joint TH-RRH, HMIS support, and Supportive Services for Coordinated Entry. The Collaborative Applicant also applies for a grant to support CoC Planning.

Coordinated Entry & Assessment-Based Housing Referral System (CEA-BHRS, “sea breeze”)

– Philadelphia’s coordinated entry system, a process designed to coordinate program participant access and referral to homeless assistance services and housing with a standardized assessment and system-wide prioritization factors.

Emergency Solutions Grant (ESG) Program – Federal homeless assistance grants awarded by formula to city, county, and state governments by HUD, with eligible uses including emergency shelter operations and homelessness prevention and rapid re-housing assistance.

Homeless – HUD identifies four categories of experiences under its definition of homelessness and supports housing to meet the needs of individuals and families in categories 1 and 4:

- Category 1: Literal homelessness – lacking a fixed, regular, and adequate nighttime residence, meaning:
 - Sleeping in a place not designed for or ordinarily used as habitation, including a car, park, abandoned building, bus or train station, airport, or camping ground OR
 - Having temporary living arrangements, including living in an emergency shelter, transitional housing, hotels and motels paid for by a nonprofit or government program OR
 - Exiting an institution (e.g. jail, hospital) after 90 or fewer days, having resided in emergency shelter or a place not meant for human habitation immediately before entering the institution

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- Category 2: At Risk of Homelessness
 - Will lose primary nighttime residence within 14 days AND
 - Have no subsequent residence identified AND
 - Lack the resources or support networks needed to obtain other permanent housing
- Category 3: Homeless under other Federal statutes: Unaccompanied youth under age 25 or families with children and youth who do not otherwise qualify as homeless, but who
 - Meet homeless definition under another federal statute; AND
 - Have not had a lease, ownership interest, or occupancy agreement in permanent housing within the last 60 days; AND
 - Have experienced two or more moves during last 60 days; AND
 - Can be expected to meet these criteria for an extended period of time due to special needs or barriers
- Category 4: Fleeing/Attempting to flee domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions related to violence
 - Fleeing or attempting to flee violence that has either taken place within the household's primary nighttime residence or has made the household afraid to return to that residence AND
 - Have no subsequent residence identified AND
 - Lack the resources or support networks needed to obtain other permanent housing

Homeless Management Information System (HMIS) – A local information technology system used to collect client-level data and data on the provision of housing and services to people experiencing and at risk of homelessness. All Continuums of Care (CoCs) are required by HUD to have an HMIS. Philadelphia's HMIS is called ClientTrack.

Homelessness Prevention Assistance – An intervention that provides relocation and stabilization services, financial assistance (e.g., rental application fees, security deposits, utility payments, last month's rent) and/or rental assistance to help people retain housing or move into other permanent housing, rather than move to an emergency shelter or a place not meant for human habitation.

HOUSING FIRST – HOUSING FIRST is a homeless assistance systems approach that prioritizes providing permanent housing to people experiencing homelessness, thus ending their homelessness and serving as a platform from which they can pursue personal goals and improve their quality of life.

Housing Inventory Chart (HIC) – A complete inventory of a community's emergency shelter, transitional housing, safe haven, and permanent supportive housing beds, as well as the units/beds supported with rapid re-housing funds on the night of the Point-in-Time Count.

HUD System Performance Measures – A set of standard performance measures for homeless assistance systems as a whole, independent of funding source, which HUD requires all communities to use to gauge their progress in preventing and ending homelessness.

Participant – The term that Philadelphia's Office of Homeless Services uses for any person who is at-risk of, experiencing, or has experienced homelessness who is touching some part of our homeless services system.

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Permanent Housing (PH) – Community-based housing without a predetermined maximum length of stay.

- Permanent Supportive Housing (PSH) – Permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently; and
- Rapid Re-Housing (RRH) – An intervention that rapidly connects people to permanent housing through housing identification, rent and move-in assistance, and case management and services.

Point-In-Time (PIT) Count – A one-night statistically reliable unduplicated count, during the last week of January, of sheltered and unsheltered persons experiencing homelessness in an area.

Safe Haven (SH) – Housing with an overnight capacity limited to 25 or fewer persons that provides 24-hour residence and low-demand services for an unspecified period to hard-to-serve persons with mental illness who came from the streets and have been unable or unwilling to participate in supportive services.

Transitional Housing (TH) – Supportive housing used to facilitate the movement of people experiencing homelessness to permanent housing within 24 months.

US Department of Housing and Urban Development (HUD) – The federal agency responsible for national policy and programs that address the country’s housing needs.

US Interagency Council on Homelessness (USICH) – The U.S. Interagency Council on Homelessness (USICH), which has 19 federal agency members, leads national efforts to prevent and end homelessness in America.

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