

# **Solid Foundations DC: Strategic Plan to Prevent & End Homelessness**

## **Appendices**

Appendix 1: Definitions

Appendix 2: ICH Youth Subcommittee: Member Agencies and Organizations

Appendix 3: Plan Development Process

Appendix 4: Program Models Matrix

Appendix 5: Assumptions for Pathways

Appendix 6: Pathway and Length of Stay Assumptions by Year

## Appendix 1: Definitions

This appendix provides definitions and explanations of terms used in the plan.

**At Risk of Homelessness:** For individuals and families who do not meet the definition of “homeless” under any of the categories established in the Federal Homeless Definition final rule, the McKinney-Vento Act was amended to allow homeless prevention assistance to be provided to persons who are “at risk of homelessness. Individuals and families may qualify as “at risk of homelessness” under three categories, as defined by the Federal government, including:

- 1) individuals and families;
- 2) unaccompanied youth and children; and
- 3) families with children and youth.
  - Individuals and Families. An individual or family that:
    - (i) Has an annual income below 30 percent of median family income for the area, as determined by HUD;
    - (ii) Does not have sufficient resources or support networks (e.g., family, friends, faith-based or other social networks) immediately available to prevent them from moving to an emergency shelter or a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; and
    - (iii) Meets one of the following conditions: (A) Has moved because of economic reasons two or more times during the 60 days immediately preceding the application for homelessness prevention assistance; (B) Is living in the home of another because of economic hardship; (C) Has been notified in writing that their right to occupy their current housing or living situation will be terminated within 21 days after the date of application for assistance; (D) Lives in a hotel or motel and the cost of the hotel or motel stay is not paid by charitable organizations or by Federal, state, or local government programs for low-income individuals; (E) Lives in a single-room occupancy or efficiency apartment unit in which there reside more than two persons or lives in a larger housing unit in which there reside more than 1.5 people per room, as defined by the US Census Bureau; (F) Is exiting a publicly funded institution, or system of care (such as a health-care facility, a mental health facility, foster care or other youth facility, or correction program or institution); or (G) Otherwise lives in housing that has characteristics associated with instability and an increased risk of homelessness, as identified in the recipient’s approved consolidated plan;
  - Unaccompanied children and youth. Specifically, a child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 387(3) of the Runaway and Homeless Youth Act (42 U.S.C. 5732a(3)), section 637(11) of the Head Start Act (42 U.S.C. 9832(11)), section 41403(6) of the Violence Against Women Act of 1994 (42 U.S.C. 14043e– 2(6)), section 330(h)(5)(A) of the Public Health Service Act (42 U.S.C. 254b(h)(5)(A)), section 3(m) of the Food and Nutrition Act of 2008 (7 U.S.C. 2012(m)), or section 17(b)(15) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)(15)); or

- Families with children and youth. Specifically, a child or youth who does not qualify as “homeless” under this section, but qualifies as “homeless” under section 725(2) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a(2)), and the parent(s) or guardian(s) of that child or youth if living with her or him.

The At Risk of Homelessness definition, and corresponding recordkeeping requirements, was published in the interim Emergency Solutions Grants program rule on December 5, 2011.

**Affordable Housing:** Housing for which the occupant(s) is/are paying no more than 30 percent of their income for gross housing costs, including utilities. Households that pay more than 30 percent of their income for housing may have difficulty affording necessities such as food, clothing, transportation and medical care and are considered cost burdened by HUD. Households that pay more than 50 percent of their income for housing are considered severely cost burdened.

**Area Median Income (AMI):** The median divides the income distribution into two equal parts: one-half of the cases falling below the median income and one-half above the median. HUD uses the median income for families in metropolitan and non-metropolitan areas to calculate income limits for eligibility in a variety of housing programs. HUD estimates the median family income for an area in the current year and adjusts that amount for different family sizes so that family incomes may be expressed as a percentage of the area median income. Income limits for the District can be found at [http://www.huduser.org/portal/datasets/il/il14/index\\_il2014.html](http://www.huduser.org/portal/datasets/il/il14/index_il2014.html).

**Chronically Homeless:** As defined by HUD in the “chronically homeless” final rule issued December 2015, chronic homelessness means:

- (1) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:
  - (i) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
  - (ii) Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;
- (2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or
- (3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

**Client:** As defined in the HSRA, a client is an individual or family seeking, receiving, or eligible for services from programs offered by the District CoC.

**Community Case Conferencing:** A resource meeting that includes the service provider, relevant agency representation, the youth, and family members/natural supports identified by the youth to determine

best long-term housing/placement option. The objective is to 1) work with youth to identify significant adults in their lives and ensure that youth have a major role in decisions made about their housing/next placement; 2) Engage the adult(s) identified, considering a wide range of supporting roles they can play other than or in addition to providing housing and care; and 3) ensure that youth experiencing homelessness have opportunities to interact and maintain relationships with the significant adults in their lives.

**Coordinated Assessment and Housing Placement (CAHP) System:** Also referred to as coordinated entry or coordinated intake. Per the HEARTH Act, HUD has required that all CoCs establish and operate a CAHP system. A CAHP system is a client-centered process that streamlines access to the most appropriate housing intervention for each individual or family experiencing homelessness. Within a CAHP system, clients are prioritized through a process that is data-driven and real time. A CAHP system must be able to capture client specific information and communicate the data needed to facilitate a housing match/referral. In addition, the data collection and communication platform provides a portal to inform local policy and resource decisions. A CAHP system can be broken down into four key components: 1) Assessment, 2) Navigation and Case Conferencing, 3) Housing Referral with Choice, and 4) Data Collection and Communication.

**Continuum of Care (CoC):** The entity authorized to carry out homelessness planning for a community. Under the HEARTH Act, the CoC must include representatives from nonprofit homeless assistance providers, victim service providers, faith-based organizations, government, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, and organizations that serve Veterans and homeless and formerly homeless individuals. Responsibilities of the CoC include the operation of the CoC, designating and operating an HMIS, and Continuum of Care planning. The designated CoC for the District of Columbia is the DC Interagency Council on Homelessness. The Collaborative Applicant for the District (i.e., the legal entity designated by the CoC to apply for and administer funding on behalf of the Continuum) is The Community Partnership for the Prevention of Homelessness.

Under the HSRA, a continuum of care refers to the comprehensive system of services for individuals and families who are homeless or at imminent risk of becoming homeless, designed to serve clients based on their individual level of need. The Continuum of Care may include crisis intervention, outreach and assessment services, shelter, transitional housing, permanent supportive housing, and supportive services.

**Crisis Intervention:** Under HSRA, this is assistance to prevent individuals and families from becoming homeless, which may include, but need not be limited to, cash assistance for security deposits, rent or mortgage payments, credit counseling, mediation with landlords, and supportive services.

**Culturally Competent:** Under the HSRA, refers to the ability of a provider to deliver or ensure access to services in a manner that effectively responds to the languages, values, and practices present in the various cultures of its clients so the provider can respond to the individual needs of each client.

**Cost Burdened:** HUD considers households that pay more than 30 percent of their income for housing and may have difficulty affording necessities such as food, clothing, transportation and medical care as cost burdened.

**Day Program:** Defined by the HSRA to mean a facility that provides open access to structured activities during set hours of the day to meet the supportive services needs of individuals and families who are homeless or at imminent risk of becoming homeless.

**Emergency Shelter:** Defined by HUD to include any facility, the primary purpose of which is to provide temporary or transitional shelter for the homeless in general or for specific populations of the homeless. Under the HSRA, “shelter” refers to severe weather shelter, low barrier shelter, and temporary shelter:

- **Severe weather shelter** is used for the purpose of protecting lives in extreme hot and cold weather.
- **Temporary shelter** is used for the purpose of meeting short-term housing needs and other supportive service needs. It refers to:

- a) A housing accommodation for individuals who are homeless that is open either 24 hours or at least 12 hours each day, other than a severe weather shelter or low barrier shelter, provided directly by, or through contract with or grant from, the District, for the purpose of providing shelter and supportive services; or

- b) A 24-hour apartment-style housing accommodation for individuals or families that are homeless, other than a severe weather shelter, provided directly by, or through contract with or grant from, the District, for the purpose of providing shelter and supportive services.

- **Low barrier shelter** is used for the purpose of sheltering and engaging individuals who avoid temporary shelter because of identification, time limit, or other program requirements. It refers to overnight housing accommodation for individuals who are homeless, provided directly by, or through contract with or grant from, the District, for the purpose of providing shelter to individuals without imposition of identification, time limits, or other program requirements.

**Engagement Services:** Services and/or programs geared towards connecting or reconnecting persons who are homeless or at imminent risk of becoming homeless to needed social supports.

**Family:** Under the HSRA, family means:

- a) A group of individuals with at least one minor or dependent child, regardless of blood relationship, age, or marriage, whose history and statements reasonably tend to demonstrate that they intend to remain together as a family unit; or

- b) A pregnant woman in her third trimester.

**Family Median Income (FMI):** See Area Median Income (AMI) definition above.

**Family Service Prioritization Decision Assistance Tool (F-SPDAT):** The F-SPDAT is an evidence-informed approach to assessing a family’s acuity and was developed by OrgCode Consulting. The tool, across multiple components, prioritizes who to serve next and why, while concurrently identifying the areas in the person or family’s life where support is most likely necessary in order to avoid housing instability.

**Harm Reduction:** A set of strategies that reduce negative consequences of substance use and that incorporate a spectrum of strategies from safer use, to managed use, to abstinence.

**HEARTH Act:** The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act was signed by President Obama on May 20, 2009. The HEARTH Act amends and reauthorizes the McKinney-Vento Homeless Assistance Act with substantial changes, including: a consolidation of HUD’s competitive grant programs, the creation of a Rural Housing Stability Assistance Program, a change in HUD’s definition of homelessness and chronic homelessness, a simplified match requirement, an increase in prevention resources, and an increase in emphasis on performance.

**Homeless:** Under HSRA, the definition is limited to individuals and families that:

1. Lack a fixed, regular residence that does not jeopardize the health, safety, or welfare of its occupants, and lack the financial ability to immediately acquire one; or
2. Have a primary nighttime residence that is: 1) A supervised publicly or privately operated shelter or transitional housing facility designed to provide temporary living accommodations; or 2) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

Under HUD's *Homeless Definition Final Rule*, the term is more expansive, establishing four categories of homelessness for use by the homeless assistance programs administered by HUD under the McKinney-Vento Homeless Assistance Act. These categories are:

1. An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: 1) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground; 2) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by Federal, state, or local government programs for low-income individuals); or 3) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;
2. An individual or family who will imminently lose their primary nighttime residence, provided that: 1) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance; 2) No subsequent residence has been identified; and 3) The individual or family lacks the resources or support networks (e.g., family, friends, faith-based or other social networks) needed to obtain other permanent housing;
3. Unaccompanied youth under 25 years of age, or families with children and youth, that do not otherwise qualify as homeless under this definition, but that: 1) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e–2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a); 2) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance; 3) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and 4) Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or
4. Any individual or family that: 1) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence; 2) Has no other residence; and 3) Lacks the resources or support networks (e.g., family, friends, faith based or other social networks) to obtain other permanent housing.

**Homeless Management Information System (HMIS):** A software application designed to record and store client-level information on the characteristics and services needs of people experiencing homelessness. Each CoC maintains its own HMIS, which can be tailored to meet local needs, but also must conform to HUD HMIS Data and Technical Standards.

**Household Type:** The composition of a household upon entering a shelter program. People enter shelter as either an individual or as part of a family.

**Housing Inventory Count (HIC):** Required by HUD, the HIC is a point-in-time inventory of all of the dedicated beds and units within a Continuum of Care's homeless services system, categorized by type of project and population served.

**Housing First:** Under the HSRA, Housing First means a program that provides clients with immediate access to independent permanent housing and supportive services without prerequisites for sobriety or participation in psychiatric treatment. Clients in Housing First programs may choose the frequency and type of supportive services they receive and refusal of services will have no consequence for their access to housing or on continuation of their housing and supportive services.

HUD encourages all recipients of CoC Program funded PSH to follow a Housing First approach to the maximum extent practicable. To that end, a Housing First orientation is specified as one of the universal qualities that a coordinated assessment process should include. Coordinated assessment tools should not be used to determine "housing readiness" or screen people out for housing assistance, and therefore should not encompass an in-depth clinical assessment. A more in-depth clinical assessment can be administered once the individual or family has obtained housing to determine and offer an appropriate service package.

**Hyperthermia Shelter:** Under the HSRA, this is defined as a public or private building that the District shall make available for the purpose of providing shelter to individuals or families who are homeless and cannot access other shelter, whenever the actual or forecasted temperature or heat index rises above 95 degrees Fahrenheit. The term hyperthermia shelter does not include overnight shelter.

**Hypothermia Shelter:** Under the HSRA, this is defined as a public or private building that the District shall make available, for the purpose of providing shelter to individuals or families who are homeless and cannot access other shelter, whenever the actual or forecasted temperature, including the wind chill factor, falls below 32 degrees Fahrenheit.

**Individual:** Refers to a person who is not a part of a family during an episode of homelessness.

**Interim Housing:** Shelter or temporary housing programs designed to provide people experiencing homelessness with a stable and safe place to sleep while they pursue permanent housing.

**Length of Stay:** Defined by HUD, the average cumulative number of days a household receives assistance in a given program intervention. This is measured from entry to exit (or last day of report period) within the given program.

**Length of Time Homeless:** Defined by HUD, the average cumulative number of days households receive outreach services, emergency shelter, and transitional housing as measured by their sum total days of

program participation. For each program enrollment, this is measured from first program entry to exit or last day of report period.

**Low Barrier Shelter:** Defined by the HSRA, low barrier shelter is used for the purpose of sheltering and engaging individuals who avoid temporary shelter because of identification, time limit, or other program requirements. It refers to overnight housing accommodation for individuals who are homeless, provided directly by, or through contract with or grant from, the District, for the purpose of providing shelter to individuals without imposition of identification, time limits, or other program requirements.

**Permanent Housing:** As defined by HUD, permanent housing refers to community-based housing without a designated length of stay and where the client is the lease-holder. Permanent housing models included in this plan are Rapid Re-Housing, Permanent Supportive Housing, and Targeted Affordable Housing. Individuals and families who are living in permanent housing are no longer considered to meet the HUD homeless definition.

**Permanent Supportive Housing (PSH):** Defined in the HSRA as supportive housing for an unrestricted period of time for individuals and families who were once homeless and continue to be at imminent risk of becoming homeless, including persons with disabilities as defined in 24 C.F.R. 582.5, for whom self-sufficient living may be unlikely and whose care can be supported through public funds. Likewise, under the CoC Interim Rule, HUD defines PSH as permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently.

**Point-in-Time (PIT) Count:** An unduplicated one-night estimate of both sheltered and unsheltered homeless populations. The one-night count, conducted according to HUD standards by CoCs nationwide, occurs during the last week in January of each year.

**Progressive Engagement:** Defined by the US Interagency Council on Homelessness as a case management strategy of offering a small amount of assistance initially, and adding more assistance as needed to help each household reach stability. This strategy uses the lightest touch possible for each household to be successful, knowing more assistance can be added later if needed. Assessment is critical to this strategy, but for the purpose of identifying a household's strengths and barriers, not to determine the amount of assistance they will ultimately need.

**Rapid Re-Housing:** As defined in the program model, the provision of housing relocation and stabilization services and short- and/or medium-term rental assistance as necessary to help a homeless individual or family move as quickly as possible into permanent housing and achieve stability in that housing. The individual or family has a lease in their own name and may remain in the housing when rental assistance ends.

**Safe Environment:** Defined as either: 1) a physical location that protects homeless persons from harm from abuse, assault, threat, exhaustion, or the elements; or 2) a psychological/emotional "space" where homeless persons are entitled to speak, to be respected, to tell their story, to ask for help, and to be heard.

**Service Plan:** Defined by HSRA to mean a written plan, collaboratively developed and agreed upon by both the provider and the client, consisting of time-specific goals and objectives designed to promote self-sufficiency and attainment of permanent housing and based on the client's individually assessed needs, desires, strengths, resources, and limitations.



**Severely Cost Burdened:** Households that pay more than 50 percent of their income for housing are considered severely cost burdened by HUD.

**Temporary Therapeutic Housing:** Defined in the Homeward DC plan as transitional housing for individuals and families that are not initially assessed for PSH but have a specific health or therapeutic need that inhibits the ability to obtain or remain stably housed and have a preference for a communal living environment (which may be congregate or individual apartments in the same building, but offers shared spaces, group therapy, etc.). For example, temporary therapeutic housing may be targeted to individuals or families with a specific healthcare need (e.g., substance abuse treatment, mental health treatment, or medical respite), victims of domestic violence, refugees and sex workers experiencing severe trauma, or high need families with heads of households between 18 and 24 (i.e., those scoring on high end of RRH scale and those that are CFSA-involved).

**Temporary Shelter:** Defined by HSRA, temporary shelter is used for the purpose of meeting short-term housing needs and other supportive service needs. It refers to: 1. A housing accommodation for individuals who are homeless that is open either 24 hours or at least 12 hours each day, other than a severe weather shelter or low barrier shelter, provided directly by, or through contract with or grant from the District, for the purpose of providing shelter and supportive services; or 2. A 24-hour apartment-style housing accommodation for individuals or families who are homeless, other than a severe weather shelter, provided directly by, or through contract with or grant from, the District, for the purpose of providing shelter and supportive services.

**Transition Age Youth Service Prioritization Decision Assistance Tool (TAY-SPDAT):** The TAY-SPDAT is an evidence-informed approach to assessing a youth's acuity and was developed by OrgCode Consulting. The tool, across multiple components, prioritizes who to serve next and why, while concurrently identifying the areas in the youth's life where support is most likely necessary in order to avoid housing instability.

**Transitional Housing:** Defined by the HSRA to mean a 24-hour housing accommodation, provided directly by, or through contract with or grant from, the District, for individuals and families that:

1. Are homeless;
2. Require a structured program of supportive services for up to 2 years or as long as necessary in order to prepare for self-sufficient living in permanent housing; and
3. Consent to a case management plan developed collaboratively with the provider.

Under the Interim CoC Rules, HUD similarly defines Transitional Housing to mean housing in which all program participants have signed a lease or occupancy agreement, the purpose of which is to facilitate the movement of homeless individuals and families into permanent housing within 24 months or such longer period as HUD determines necessary. The program participant must have a lease or occupancy agreement for a term of at least one month that ends in 24 months and cannot be extended. Individuals and families living in Transitional Housing are included under the HUD Homeless definition.

**Trauma-Informed Care:** Most individuals seeking public behavioral health services and many other public services, such as homeless and domestic violence services, have histories of physical and sexual abuse and other types of trauma-inducing experiences. Trauma-informed organizations, programs, and services are based on an understanding of the vulnerabilities or triggers of trauma survivors that traditional service delivery approaches may exacerbate, so that these services and programs can be more supportive and re-traumatization can be avoided.

**Turnover:** The rate at which units or beds become available as households exit a program model and/or homelessness.

**Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT):** The Vulnerability Index is a tool for identifying and prioritizing the homeless population for housing according to the fragility of their health. The SPDAT is an evidence-informed approach to assessing an individual's or family's acuity. The VI-SPDAT tool, across multiple components, prioritizes who to serve next and why, while concurrently identifying the areas in the person or family's life where support is most likely necessary in order to avoid housing instability. Co-occurring social and medical factors are the primary factors that contribute to homelessness. The VI-SPDAT was created through the merger of the Vulnerability Index, as owned and made popular by Community Solutions, and the SPDAT Prescreen Tool, which is part of the SPDAT tool suite owned and created by OrgCode Consulting, Inc.

## Appendix 2: ICH Youth Subcommittee – Member Agencies and Organizations

Government Agencies	Youth and Family Service Providers	Community Partners and Advocates
Child and Family Services Agency (CFSA)	Casa Ruby	Children’s Law Center
Department of Behavioral Health (DBH)	Catholic Charities	The Community Partnership for the Prevention of Homelessness
DC Public Library (DCPL)	Community Connections	DC Alliance of Youth Advocates
DC Public Schools (DCPS)	Community of Hope	DC Center for the LGBT Community
Department of Human Services (DHS)	Covenant House	DC Fiscal Policy Institute
Department of Youth Rehabilitation Services (DYRS)	Friendship Place	Far Southeast Family Strengthening Collaborative
Mayor’s Office of LGBTQ Affairs	HER Resiliency Center	National Law Center on Homelessness & Poverty
Office of the State Superintendent of Education (OSSE)	Latin American Youth Center	Total Family Care Coalition
	Sasha Bruce Youthwork	
	SMYAL	
	The Wanda Alston Foundation	

## Appendix 3: Plan Development Process – Meeting Dates

The ICH Youth Subcommittee first formed in summer 2010 and organized heavily in October 2014 to focus on the annual youth census and coordinated entry system required under legislation passed earlier that year. The legislation also called for a comprehensive plan to end youth homelessness, and beginning in July 2015, the ICH Youth Subcommittee convened monthly to develop the CPEYH (typically on the fourth Thursday from 10am to noon at DHS). Other business of the subcommittee (e.g. partner presentations on services for youth) was also conducted at these meetings, so throughout the plan development, additional meetings of all members and certain stakeholders were occasionally held to focus specifically on the CPEYH. The timeline below details this planning process.

	Plan Development Steps	Dates/Timeline
Developing the Program and System Models and Program Pathways	Initial workgroup conversation to determine and draft system program models for CPEYH	Tuesday, July 14, 2015
	First monthly meeting of the ICH Youth Subcommittee	Thursday, July 23, 2015
	Monthly meeting of the ICH Youth Subcommittee	Thursday, August 27, 2015
	Follow-up workgroup meeting to refine system program models and continuum of services for CPEYH	Tuesday, September 15, 2015
	Monthly meeting of the ICH Youth Subcommittee	Thursday, October 1, 2015
	System modeling meeting with ABT Consultants	Thursday, October 8, 2015
	Monthly meeting of the ICH Youth Subcommittee – included facilitated conversation to refine components of program models	Thursday, October 22, 2015
	Monthly meeting of the ICH Youth Subcommittee	Thursday, November 12, 2015
	System modeling meeting with ABT Consultants (continued)	Thursday, November 19, 2015
	Monthly meeting of the ICH Youth Subcommittee – final check in with ABT re: system modeling	Thursday, December 17, 2015
	Monthly meeting of the ICH Youth Subcommittee	Thursday, January 28, 2016
	Monthly meeting of the ICH Youth Subcommittee	Thursday, February 25, 2016
Plan Pre-Drafting & Background Work	Workgroup meeting to plan timeline and chart responsibilities for CPEYH plan development	Wednesday, March 2, 2016
	Monthly meeting of the ICH Youth Subcommittee – introduction of outline and background narrative needs	Thursday, March 24, 2016
	Monthly meeting of the ICH Youth Subcommittee – incorporating group’s work into background chapter	Thursday, April 28, 2016
	Monthly meeting of the ICH Youth Subcommittee – discussion of service models to inform core plan chapters	Thursday, May 26, 2016
	Monthly meeting of the ICH Youth Subcommittee – revisiting timeline, goals, resources for plan development	Thursday, June 30, 2016
	Monthly meeting of the ICH Youth Subcommittee – presentation and discussion of core strategies/next steps	Wednesday, August 24, 2016
	First draft of overall plan narrative	Early September 2016
	Monthly meeting of the ICH Youth Subcommittee – facilitated review and discussion of initial plan draft	Thursday, September 22, 2016

Public Comment Period and Second Review	Public Comment Period/Youth Input – stakeholders review plan; focus groups with youth held 10/24 and 11/17	Monday, October 24 to Friday, November 4
	Monthly meeting of the ICH Youth Subcommittee – review and discussion of plan draft for public comment	Thursday, October 27, 2016
	Incorporate public feedback and other final comments/revisions/edits into plan	November 2016
	Monthly meeting of the ICH Youth Subcommittee – final review and discussion of plan; preview next steps for implementation in 2017	Thursday, December 1, 2016
	ICH Full Council meets to vote on approval of plan	Tuesday, December 13, 2016

## Appendix 4: Program Models Matrix

**Overview:** The program models matrix is intended to be a living document to guide planning and implementation efforts. It is intended to help funders understand what to fund and providers understand what they are expected to deliver. It also helps ensure we are measuring outcomes of similar programming in a consistent way. It is important to note that the “essential program elements” identified are intended to reflect the ideal program components that should be included in the program type, especially for any new programs a provider is designing or a funder is supporting. Some of the elements identified are cost neutral (e.g., use of a common assessment tool, how program vacancies are filled), but it is important to acknowledge that other elements are not. In some cases – particularly on issues impacted by facility size/configuration – existing programs may not be able to incorporate certain program elements at all. In other cases, providers will not be able to adapt programming unless contracts include the necessary resources (e.g., moving from 12 to 24 hour access, reducing case load sizes). Funders and providers will have to work together closely to examine where changes can be implemented immediately and where time, resources, and/or capacity building will be required.

<b>I. “FRONT PORCH” SERVICES</b> “Front Porch” services are those provided to youth before they reach the front door of the homeless services system (the front door being the shelter system). This may include services to both those already experiencing homeless as well as to those at imminent risk.				
Program Type	Description	Essential Elements	Timeframe	Population
<b>Outreach</b>	Identify, engage and inform about resources for youth experiencing or at risk of homelessness	<ul style="list-style-type: none"> <li>• Available during key hours (to be determined in coordination with system administrators; dependent on resource availability)</li> <li>• Coordinated Entry Assessment</li> <li>• Referral for additional services (warm handoff)</li> <li>• Crisis/risk identification and triaging /linkage to services</li> <li>• Coordination with larger network of outreach teams to ensure geographic coverage</li> <li>• Identify and report hot spots for youth within their geographic region;</li> <li>• Coordination with partners (MPD, CFSA, DYRS etc)</li> <li>• Provide basic needs to clients (food, clothing, transportation support, hygiene kits blankets etc)</li> <li>• Inreach to known locations with high youth traffic</li> <li>• Peer or Near Peer staff</li> <li>• Multi-Lingual</li> </ul>	N/A	Youth aged 24 and under who are experiencing homelessness or unstable housing, or are at risk of homelessness
<b>Drop In Center Drop-In</b>	Provides a point of access where youth experiencing	<ul style="list-style-type: none"> <li>• Available during key hours (to be determined in coordination with system administrators; needs to align with availability of other services in community)</li> </ul>	N/A	Youth aged 24 and under who are experiencing

## I. "FRONT PORCH" SERVICES

"Front Porch" services are those provided to youth before they reach the front door of the homeless services system (the front door being the shelter system). This may include services to both those already experiencing homeless as well as to those at imminent risk.

Program Type	Description	Essential Elements	Timeframe	Population
<b>Center</b>	homelessness can access prevention assistance, referral to shelter and/or other critical services	<ul style="list-style-type: none"> <li>• Crisis assessment/triage and linkage to other crisis services</li> <li>• Assessment for prevention/diversion assistance</li> <li>• Use of common assessment tool (i.e., TAY-SPDAT)</li> <li>• Provision of food, hygiene products, clothing, shower and laundry are made available</li> <li>• Capacity to provide health services (either directly or through co-location of partner)</li> <li>• Connection to and co-location of other services (employment, education)</li> <li>• Transportation assistance (eg, tokens) provided</li> <li>• Youth development services and activities</li> <li>• Peer or near-peer staff</li> <li>• Thoughtful approach to meeting the needs of sub-populations (undocumented, non-English speakers, LGBTQ). This can include identifying other organizations to serve as specific drop in centers.</li> </ul>		homelessness, unstable housing, or are at risk of homelessness
<b>Crisis Hotline</b>	24 hour hotline that immediately connects youth in crisis to housing and, as needed, other immediate services	<ul style="list-style-type: none"> <li>• Bilingual</li> <li>• 24 hour</li> <li>• Enough capacity to have minimal wait times</li> <li>• Trained in crisis de-escalation, services are trauma informed and culturally competent</li> <li>• Coordination of transportation</li> <li>• Peer/near peer staff</li> <li>• Well publicized</li> </ul>	N/A	Youth aged 24 and under who are experiencing homelessness, unstable housing, or are at risk of homelessness
<b>Front Door Prevention and Diversion</b>	Services are designed to prevent loss of permanent housing, and when that's not possible, identify safe alternative housing options to	<ul style="list-style-type: none"> <li>• Available via drop-in center and outreach programming.</li> <li>• Emphasis on mediation, community case conferencing, and connection to services needed to achieve housing and family stability.</li> <li>• Case management to develop stabilization plan, using a strengths-based model.</li> </ul>	N/A	Youth aged 21 and younger who are experiencing unstable housing or acute family conflict that could cause unstable housing.

## I. "FRONT PORCH" SERVICES

"Front Porch" services are those provided to youth before they reach the front door of the homeless services system (the front door being the shelter system). This may include services to both those already experiencing homeless as well as to those at imminent risk.

Program Type	Description	Essential Elements	Timeframe	Population
	prevent the need for a shelter placement while working with the youth to regain stability.			*Non-System involved youth unless contractually agreed upon
<b>Upstream Prevention</b>	Discharge planning and housing support designed to help youth exiting/aging out of other systems from becoming homeless or being discharged to programming within the homeless services system.	<ul style="list-style-type: none"> <li>Community case conferencing to help youth build/rebuild connections to family and/or other significant adults..</li> <li>Next steps planning beginning minimally 12 months prior to discharge.</li> <li>Agency offers a variety of programming (ranging from low to high intensity) to support the youth's transition to independence. Housing supports may be provided in partnership with another District got agency and/or a nonprofit housing provider in the community.</li> </ul>		CFSA, DYRS, and/or DBH-involved youth



## II. Short- to Medium Term Housing

Crisis housing/services are intended to be time limited in nature and are designed to be a stepping-stone to stability. They will typically last 1-3 months and provide supportive, holistic, developmentally appropriate services that lead to long-lasting housing stability. These services should be flexible, client centered, trauma informed, and strengths based. They will be “low barrier” in that they will not remove youth from programming due to unhealthy or disruptive behaviors. There is recognition that these unhealthy coping mechanisms are temporary in nature, and are a part of the process to achieving lasting stability.

Program Type	Description	Essential Elements	Timeframe	Population
<b>Youth Emergency Shelter</b>	Meets the immediate needs of youth experiencing a housing crisis. Allows safety and stability needed to determine next steps for ongoing housing and family stability	<ul style="list-style-type: none"> <li>• Maximum 30 beds/units per site.</li> <li>• Use of common assessment tool</li> <li>• Initial assessment completed within 24-72 hours (depending on complexity of situation)</li> <li>• Relationship building</li> <li>• Exploration of family intervention and reunification services, including evidence-based and strength-focused parenting support, counseling, and intervention services including all persons the youth considers to be part of his/her family (community case conferencing).</li> <li>• 24-hour residential environment (safe and structured setting, provision of basic needs including meals or cooking space, access to laundry, storage, etc).</li> <li>• Case management services to include: planning and goal setting, assistance building and rebuilding family and community support networks, and connection to mainstream benefits and services, as appropriate, including (but not limited to): <ul style="list-style-type: none"> <li>- social and emotional mental health counseling;</li> <li>- suicide prevention;</li> <li>- legal services and representation;</li> <li>- healthcare;</li> <li>- substance abuse treatment and prevention;</li> <li>- education; and</li> <li>- job training and placement assistance.</li> </ul> </li> <li>• Case managers in this program have <u>three primary intake tasks</u>: <ol style="list-style-type: none"> <li>1) <i>Conduct the assessment tool</i></li> </ol> </li> </ul>	<p>Under 18: 21 days or less (hard time limit, unless exception granted)</p> <p>Age 18-24: Average of 60 days or less (No hard time limit; timeframe is a target, but provider works to make connection to next step as quickly as feasible on a case by case basis.)</p>	<p>Youth aged 24 and under who are experiencing homelessness and/or unstable housing</p> <p>Note: Separate crisis beds may be needed for pregnant/parenting minors given their unique situation. Pregnant and parenting TAY</p> <p>*Non-System involved youth unless contractually agreed upon</p>

		<p>2) <i>Attend to Necessities</i>: ID/TANF/SNAP/linking to eligible federal benefits, medical attention</p> <p>3) <i>Initial Next Step Determination</i> – based on assessment score, case manager /social worker clinical assessment:</p>		
<b>Transitional Housing</b>	Provides safe and stable housing for youth who prefer a communal living environment. A communal environment may be individual apartments in the same building, or private rooms that offer shared spaces and group services.	<ul style="list-style-type: none"> <li>• Maximum 30 units per site.</li> <li>• 24 hour residential environment (safe and structured setting, provision of cooking space, access to laundry, storage, etc).</li> <li>• Case management services to include: <ul style="list-style-type: none"> <li>- Support establishing and implementing a housing stabilization plan;</li> <li>- Financial literacy training and tools (e.g., checking/savings/escrow;</li> <li>- Connection to mainstream benefits and services (SNAP, healthcare, etc);</li> <li>- Connection to both education and workforce development services/support;</li> <li>- Assistance building/rebuilding family and community support networks.</li> </ul> </li> <li>• Capacity for both single and roommate options.</li> <li>• Escrow accounts set up for youth who are employed to save 30% of their income, with a rate that increases as they are near transitioning out of the program (e.g. transitional housing)</li> <li>• Program option to sublease to youth 18 and over to help build financial independence (e.g. transitional housing)</li> </ul>	18-36 months, (only hard time limit is determined by funding source regulations); otherwise, timeframes are targets and exceptions may be granted in specific situations (e.g., youth is nearing completion of education or other self-sufficiency plan)	Youth aged 16-24 that have little or no independent living experience, need deeper support and life skills training, and/or prefer a communal living environment.

### III. Permanent Housing

Housing in which the youth can remain in the unit as long as he/she chooses (assuming he/she abides by the terms of the lease agreement). Housing assistance and services may be short, medium, or long term to support the youth's ability to retain the housing.

Program Type	Description	Essential Elements	Timeframe	Population
<b>Transition Age Youth (TAY) Rapid Re-Housing</b>	Short- to medium-term subsidy and services program that TAY achieve housing stability and economic viability. Services package should be tailored to meet needs of TAY.	<ul style="list-style-type: none"> <li>Youth holds lease if possible, though in some cases the provider may initially hold lease and transfer to youth once rental history is established.</li> <li>Provision of financial assistance (rental arrears, security deposits, utility deposits, utility assistance, short to medium term rental assistance).</li> <li>Subsidy can be deep or shallow subsidy and change over time based on the needs of the client.</li> <li>Case management services to include: <ul style="list-style-type: none"> <li>Support establishing and implementing a long-term housing stabilization plan;</li> <li>Financial literacy training;</li> <li>Connection to mainstream benefits and services (SNAP, healthcare, etc.);</li> <li>Connection to both education and workforce development services/support;</li> <li>Assistance building/rebuilding family and community support networks.</li> </ul> </li> <li>Capacity for both single and roommate options.</li> <li>Housing search assistance (either directly or through a partner).</li> <li>Regular meetings with client to ensure implementation of plan and progress on stabilization.</li> <li>Services should be scalable and based on client needs.</li> </ul>	Up to 24 months of assistance (renewable in 6 month increments after the first 12 months), with option for extension under special circumstances.	<p>Older youth (e.g., aged 21-24) that have had some independent living experience;</p> <p>Youth that participated in Transitional Housing and are ready for more independence but need some additional support to achieve independence.</p>

### III. Permanent Housing

Housing in which the youth can remain in the unit as long as he/she chooses (assuming he/she abides by the terms of the lease agreement). Housing assistance and services may be short, medium, or long term to support the youth's ability to retain the housing.

Program Type	Description	Essential Elements	Timeframe	Population
<b>Permanent Supportive Housing</b>	Long-term subsidy and long-term, wrap-around support services that help individuals and families with intensive needs obtain and maintain housing stability.	<ul style="list-style-type: none"> <li>Household holds lease. Master leasing as an option for high barrier, hard to lease populations.</li> <li>Assessment is conducted to determine service needs.</li> <li>Services are intensive, flexible, tenant-driven, voluntary, and offered in the client's housing if they so choose.</li> <li>Primary focus of services is on tenancy supports that help people access and remain in housing.</li> <li>Additional focus of services is to connect tenants to or directly provide tenant-driven supportive services, including mental health services, substance abuse services, physical health services, benefits assistance, employment assistance, etc.</li> <li>Barriers to entry strongly discouraged (i.e., housing should be provided without clinical prerequisites for sobriety or completion of treatment, and reduced barriers for credit history and minor criminal convictions).</li> <li>Annual reassessment using common assessment tool to determine households ready for "move-on" or if/when transition to adult programming is appropriate.</li> </ul>	No time limit	For very small percentage of 18 to 24 year olds expected to need ongoing assistance/support to maintain housing over their lifetime.
<b>Family Reunification &amp; Stabilization</b>	Youth and family continue to receive services and remain connected to care as needed to regain/retain stability. Service slots may be funded through programs such as the Parent and Adolescent Support Services Program (PASS) or other programs to be identified.	<ul style="list-style-type: none"> <li>Family members may be birth parents, or kin (grandparents, aunts/uncles, older siblings), or another significant adult known to the youth</li> <li>Youth/family may receive wraparound services from placing provider to promote stability</li> </ul>	Up to 6 months of support services; extensions allowed with approval.	<p>Youth under age 18 (whenever possible)</p> <p>Youth 18-24 (to extent possible and appropriate)</p>

## Appendix 5: Assumptions for Pathways

Overview on Estimates: Estimates of the percentage of youth needing each pathway were developed from VI-SPADT and TAY-SPADT assessment results that had been conducted as of the development of the plan, with considerable additional input from the members of the Youth Subcommittee. The baseline for the plan is the annual estimate of homelessness among youth plus a housing insecure multiplier. The annual estimate of homelessness among youth is currently around 700. Additionally, based on the results of the Youth Housing Survey, the Youth Subcommittee is adding 100 more youth (~15 percent) to the baseline to account for extremely vulnerable youth that choose not to seek assistance from the current system because they are comingled with adults and programs are not designed to meet their needs. The estimates for both the pathways and the baseline are the starting point for the plan and will be updated as more information is available.

Pathways	Overall Strategy (%)	Detail Strategy (%)	Justification for Assumptions
Prevention/Diversion	5%	5%	Of those currently entering homeless programs, Group thought a fairly small % can be diverted without any shelter with more service-rich, accessible prevention assistance.
Youth Shelter Beds Only	33%	33%	Although 80% of youth are currently only accessing ES, this is likely a reflection of the insufficient capacity in youth shelters and lack of youth-orientation within existing adult ES. Group assumed one-third can resolve their homelessness with crisis beds alone (including low barrier beds). While some may stay less than 1 month (especially those under 18), other youth (especially older youth) may be able to resolve homelessness without additional assistance if given longer stays. On average, 3 months seems reasonable, augmented by an average of 3 months of after-care to prevent subsequent homelessness.
TAY RRH (no YS beds)	18%	4%	For many youth, especially those 22-24 years, insufficient income is assumed to be the biggest barrier to resolving homelessness. An average of 18 month will support 1 year of assistance for some, and 2 years for others. Roughly one-third of this group is expected to need crisis bed assistance before moving to PH (TAY RRH), the other two-thirds will be directed to individuals who are identified through adult ES or can stay in doubled-up or other settings until moving into PH.
TAY RRH (through YS beds)		14%	
Transitional Housing (no YS beds)	22%	5%	About 40% of youth, especially those 18-21, are expected to need TLP/ILP assistance to provide developmentally-appropriate services and a safe housing environment to support trauma stabilization and successful transition to independent housing. Just under half of those (particularly those who become homeless at a very young age) are assumed to need one to two years of rapid re-housing support to as part of their transition due to their age and limited economic options. Most are expected to access
Transitional Housing (through YS beds)		17%	
Transitional Housing to TAY RRH (no YS beds)	17%	4%	

Transitional Housing to TAY RRH (through YS beds)		13%	crisis beds before being placed in TLP/ILP programs, but some may be identified directly from the streets or drop-in centers or through adult shelters.
PSH (unsheltered or identified through AS)	5%	3%	About 5% of youth are expected to need permanent supportive housing to end their homelessness and prevent repeated episodes. These youth would qualify for PSH based on a chronic disability and some may evidence patterns of long-term or repeated homelessness.
PSH (through YS beds)		2%	

## Appendix 6: Length of Stay Assumptions by Year

The charts in this appendix provide year by year information about assumptions of average length of stay in each project in a pathway (also referred to as project utilization). For all program types, project utilization is calculated in months, except for PSH, which is a permanent intervention. Project utilization for PSH is calculated as a unit needed for a year. The Project Inventory Needed information in the second chart uses the length of stay assumptions to project the inventory needed for all the youth projected to enter the system each year.

Plan Year 1: Pathways and Length of Stay Assumptions												
Service Strategies	Youth		Projected System Utilization (Avg Months of Asst in each Program Type)								Avg Length of	
	Overall Strategy (%)	Detail Strategy (%)	Adult Shelter	Youth Shelter - Under 18	Youth Shelter - 18-24	Transitional Housing	TAY Rapid Rehousing	Permanent Supportive Housing	Prevention / Diversion	After care	Time Homeless	Homeless Assistance
Strategies for People Presenting Each Month												
Prevention/Diversion	0%	0%									0	0
Adult Shelter (AS)	45%	45%	2								2	2
Youth Shelter - Under 18	31%	13%		3						3	3	6
Youth Shelter - 18-24 (YS)		18%			3					3	3	6
TAY RRH (no YS)	3%	0%									0	0
TAY RRH (through YS)		3%			2		18				2	20
Transitional Housing (no YS)	16%	4%	1			12					13	13
Transitional Housing (through YS)		12%			2	12					14	14
Transitional Housing to TAY RRH (no YS)	3%	0%									0	0
Transitional Housing to TAY RRH (through YS)		3%			2	12	18				14	32
PSH (unsheltered or identified through AS)	2%	2%						1			0	60
PSH (through YS)		0%									0	0
TOTAL	100%	100%										

Plan Year 1: Projected Inventory Needed	
Program Types - YOUTH (Point-in-Time Unit Count)	Proposed Youth System (Units)
Prevention/ Diversion	0
Adult Shelter	63
Youth Shelter - Under 18	26
Youth Shelter - 18-24	52
Transitional Housing	152
TAY Rapid Rehousing	72
Permanent Supportive Housing	37
Reunification/Stabilization	62



Plan Year 2: Pathways and Length of Stay Assumptions												
Service Strategies	Youth		Projected System Utilization (Avg Months of Asst in each Program Type)								Avg Length of	
	Overall Strategy (%)	Detail Strategy (%)	Adult Shelter	Youth Shelter - Under 18	Youth Shelter - 18-24	Transitional Housing	TAY Rapid Rehousing	Permanent Supportive Housing	Prevention / Diversion	Aftercare	Time Homeless	Homeless Assistance
Strategies for People Presenting Each Month												
Prevention/Diversion	5%	5%							6		0	6
Adult Shelter (AS)	25%	25%	2								2	2
Youth Shelter - Under 18	33%	13%		3						3	3	6
Youth Shelter - 18-24 (YS)		20%			3					3	3	6
TAY RRH (no YS)	10%	2%					18				0	18
TAY RRH (through YS)		8%			2		18				2	20
Transitional Housing (no YS)	17%	5%	1			12					13	13
Transitional Housing (through YS)		12%			2	12					14	14
Transitional Housing to TAY RRH (no YS)	7%	2%									0	0
Transitional Housing to TAY RRH (through YS)		5%			2	12	18				14	32
PSH (unsheltered or identified through AS)	3%	2%						1			0	60
PSH (through YS)		1%			2			1			2	62
TOTAL	100%	100%										

Plan Year 2: Projected Inventory Needed	
Program Types – YOUTH (Point-in-Time Unit Count)	Proposed Youth System (Units)
Prevention/ Diversion	20
Adult Shelter	36
Youth Shelter - Under 18	25
Youth Shelter - 18-24	69
Transitional Housing	176
TAY Rapid Rehousing	180
Permanent Supportive Housing	59
Reunification/Stabilization	66

Plan Year 3: Pathways and Length of Stay Assumptions												
Service Strategies	Youth		Projected System Utilization (Avg Months of Asst in each Program Type)								Avg Length of	
	Overall Strategy (%)	Detail Strategy (%)	Adult Shelter	Youth Shelter Under 18	Youth Shelter 18-24	Transitional Housing	TAY Rapid Rehousing	Permanent Supportive Housing	Prevention Diversion	Aftercare	Time Homeless	Homeless Assistance
<b>Strategies for People Presenting Each Month</b>												
Prevention/Diversion	5%	5%							6		0	6
Adult Shelter	14%	14%	2								2	2
Youth Shelter - Under 18	33%	13%		3						3	3	6
Youth Shelter - 18-24 (YS)		20%			3					3	3	6
TAY RRH (no YS)	14%	4%					18				0	18
TAY RRH (through YS)		10%			2		18				2	20
Transitional Housing (no YS)	20%	5%	1			12					13	13
Transitional Housing (through YS)		15%			2	12					14	14
Transitional Housing to TAY RRH (no YS)	10%	2%									0	0
Transitional Housing to TAY RRH (through YS)		8%			2	12	18				14	32
PSH (unsheltered or identified through AS)	4%	2%						1			0	60
PSH (through YS)		2%			2			1			2	62
TOTAL	100%	100%										

Plan Year 3: Projected Inventory Needed	
Program Types - YOUTH (Pt-in-time Unit Count)	Proposed Youth System (Units)
Prevention/ Diversion	20
Adult Shelter	22
Youth Shelter - Under 18	25
Youth Shelter - 18-24	88
Transitional Housing	224
TAY Rapid Rehousing	264
Permanent Supportive Housing	88
Reunification/Stabilization	66

Plan Year 4: Pathways and Length of Stay Assumptions												
Service Strategies	Youth		Projected System Utilization (Avg Months of Asst in each Program Type)								Avg Length of	
	Overall Strategy (%)	Detail Strategy (%)	Adult Shelter	Youth Shelter Under 18	Youth Shelter 18-24	Transitional Housing	TAY Rapid Rehousing	Permanent Supportive Housing	Prevention/ Diversion	Aftercare	Time Homeless	Homeless Assistance
<b>Strategies for People Presenting Each Month</b>												
Prevention/Diversion	5%	5%							6		0	6
Adult Shelter	0%	0%									0	0
Youth Shelter - Under 18	33%	13%		3						3	3	6
Youth Shelter - 18-24 (YS)		20%			3					3	3	6
TAY RRH (no YS)	18%	4%					18				0	18
TAY RRH (through YS)		14%			2		18				2	20
Transitional Housing (no YS)	22%	5%				12					12	12
Transitional Housing (through YS)		17%			2	12					14	14
Transitional Housing to TAY RRH (no YS)	14%	4%				12	18				12	30
Transitional Housing to TAY RRH (through YS)		10%			2	12	18				14	32
PSH (unsheltered or identified through AS)	5%	3%						1			0	60
PSH (through YS)		2%			2			1			2	62
TOTAL	97%	97%										

Plan Year 4: Projected Inventory Needed	
Program Types – YOUTH (Pt-in-time Unit Count)	Proposed Youth System (Units)
Prevention/ Diversion	20
Adult Shelter	0
Youth Shelter - Under 18	25
Youth Shelter - 18-24	99
Transitional Housing	288
TAY Rapid Rehousing	384
Permanent Supportive Housing	124
Reunification/Stabilization	66

Plan Year 5: Pathways and Length of Stay Assumptions												
Service Strategies	Youth		Projected System Utilization (Avg Months of Asst in each Program Type)								Avg Length of	
	Overall Strategy (%)	Detail Strategy (%)	Adult Shelter	Youth Shelter Under 18	Youth Shelter 18-24	Transitional Housing	TAY Rapid Rehousing	Permanent Supportive Housing	Prevention/ Diversion	Aftercare	Time Homeless	Homeless Assistance
<b>Strategies for People Presenting Each Month</b>												
Prevention Diversion	5%	5%							6		0	6
Adult Shelter (AS)	0%	0%									0	0
Youth Shelter - Under 18	33%	13%		3						3	3	6
Youth Shelter - 18-24 (YS)		20%			3					3	3	6
TAY RRH (no YS)	18%	4%					18				0	18
TAY RRH (through YS)		14%			2		18				2	20
Transitional Housing (through YS)	22%	5%				12					12	12
Transitional Housing to TAY RRH (no YS)		17%			2	12					14	14
Transitional Housing to TAY RRH (through YS)	17%	4%				12	18				12	30
PSH (unsheltered or identified through AS)		13%			2	12	18				14	32
PSH (unsheltered or identified through AS)	5%	3%						1			0	60
PSH (through YS)		2%			2			1			2	62
TOTAL	100%	100%										

Plan Year 5: Projected Inventory Needed	
Program Types – YOUTH (Pt-in-time Unit Count)	Proposed Youth System (Units)
Prevention/ Diversion	20
Adult Shelter	0
Youth Shelter - Under 18	26
Youth Shelter - 18-24	102
Transitional Housing	312
TAY Rapid Rehousing	420
Permanent Supportive Housing	158
Reunification/Stabilization	66