



Western Virginia Of Care Continuum

Q2 Meeting I
April 13, 2023

Agenda

- Welcome and Introductions
- Western Continuum of Care Overview
- CoC Meetings Structure
- CoC Grantees & Committee Updates
- CoC Data Review
- Open Discussions & Data Review Q & A
- Next Meeting: June 15th, in Winchester

CoC Defined

At its simplest, a continuum of care (CoC) is established by *representatives of relevant organizations* within a *geographic area* to *carry out the responsibilities* set for in the HUD's CoC program interim rule.

The CoC interim rule formalizes the role of the CoC as the planning body responsible for meeting the goals of ending and preventing homelessness.

CoC Membership

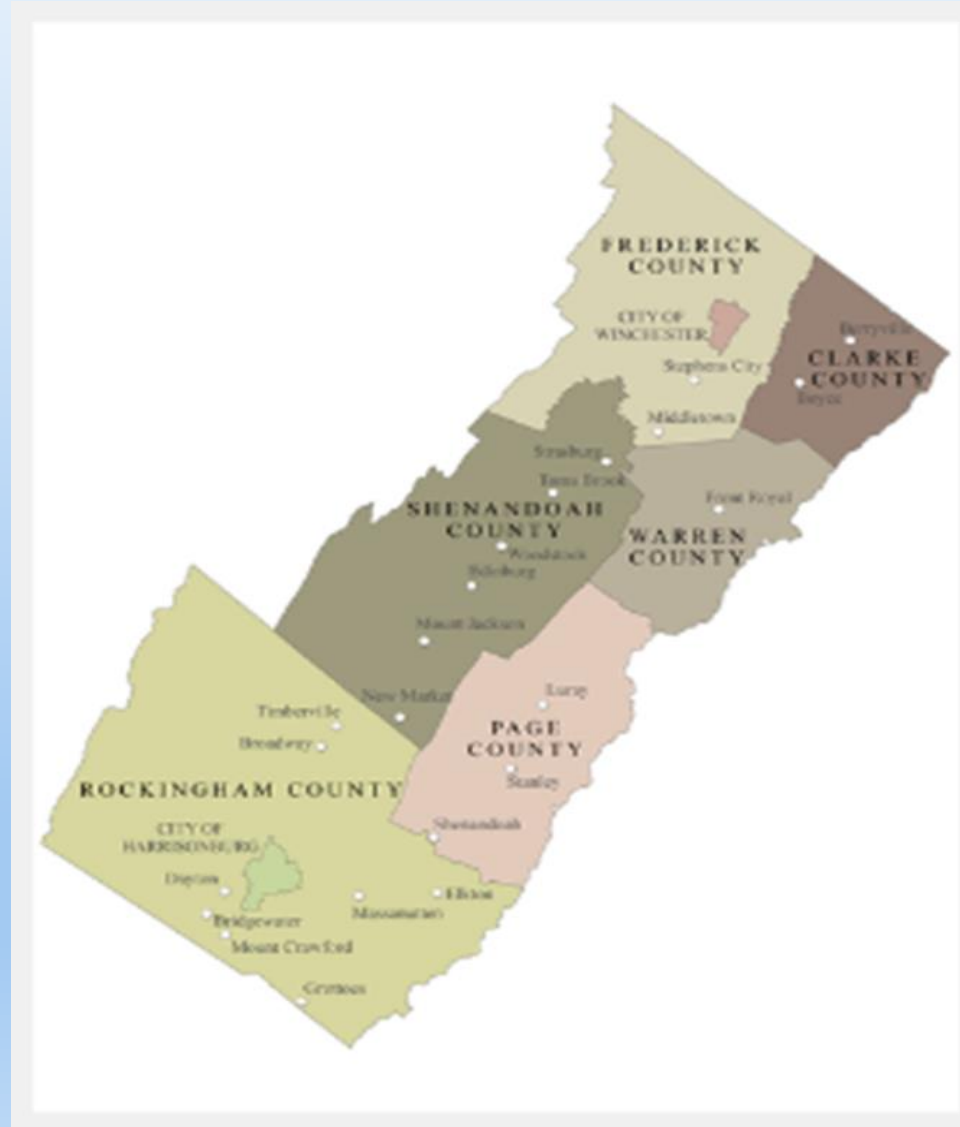
Membership should ensure:

- Community-wide commitment to ending homelessness
- Representation of the relevant organizations within the entire geographic area served by the CoC.
- Actively participate on at least two committees in the CoC (requirement for VHSP and HUD grantees)

Why The Continuum Of Care

- Promote a community-wide commitment to the goal of ending homelessness;
- Provide funding for the efforts to quickly rehouse homeless individuals
- Promote access to and effective use of mainstream programs and resources;
- Optimize self-sufficiency among individuals and homeless families
- Helps ensure that the process of planning, implementing, and overseeing housing services is collaborative, inclusive, measurable, and effective, and that CoC resources are allocated, targeted and utilized efficiently

Western Virginia Continuum Of Care



Western Virginia Continuum Of Care

- Result of the merger of the Harrisonburg-Rockingham CoC and Northern Shenandoah Valley CoC in 2012
- Area: Counties of Clarke, Frederick, Page, Rockingham, Shenandoah, and Warren + towns within these counties and the cities of Harrisonburg and Winchester
- Governed by established committees, of which the Executive Committee is the official governing and lead-decision-making body
- Promotes a **Housing First** approach: rapid rehousing without precondition and barriers, *Housing First, not Housing Only. The lack of housing has negative impact on overall health and life expectancy.* (HHS)
- Designated by HUD as VA-513

Western CoC Housing & Supportive Services

Housing Services

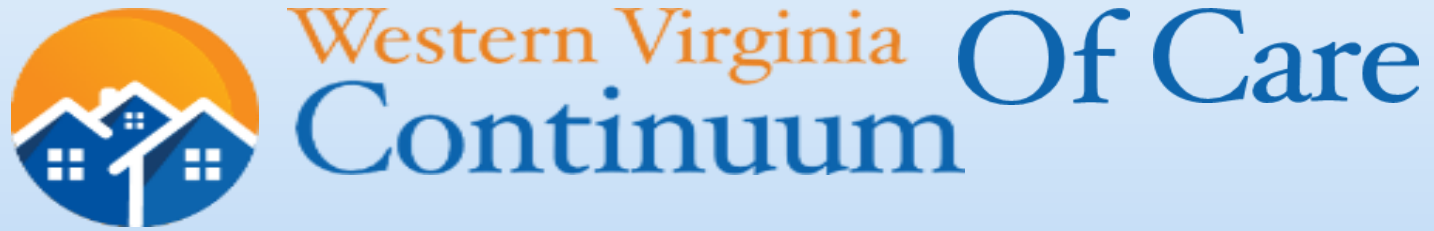
- **Centralized intake & Street outreach:** work concurrently to connect individuals to housing services
- **Rapid Rehousing:** Limited to literally homeless
- **Homeless Prevention:** targeted assistance for individuals at risk of homelessness
- **Permanent Supportive Housing:** Limited to literally homeless diagnosed with disability and substance use disorder and persons diagnosed with HIV/AIDS.
- **Tenant Based Rental Assistance:** Ongoing rental subsidies similar to housing voucher
- Emergency Shelter & Domestic Violence Shelter

Supportive Services

- Case Management, Housing Stability financial assistance (including move-in assistance), referrals, outreach, consultation, mental health, developmental disability, food distribution.
- Independent living skills & Skills building, employment, counseling, medication, transportation, crisis stabilization, substance abuse, veteran & family support, youth mentoring & education, safety planning, etc.

CoC meeting format

- ❖ Streamlined with practical content: focused on achievement of specific milestones
- ❖ Outcome-Oriented data: change measurement, results-focused, and continuous improvement to eradicate homelessness
- ❖ More opportunity for collaboration, Consensus building & Problem-solving
- ❖ Open Space for Active Participation: Structured agency & Committee updates: clear expectations will be set before the meeting
- ❖ “Touch builds trust”: more in-person meetings – Virtual connection will also be available



CoC Committees & Partnering Agencies Updates



Western Virginia
Continuum of Care

2023: DATA REVIEW

April 13, 2023
Kaitlin Heatwole

FUNDING

ACCOUNTABILITY

IMPROVING
SERVICES

COORDINATION

STORY
TELLING

ADVOCACY

REPORTING

SHARING

DATA QUALITY

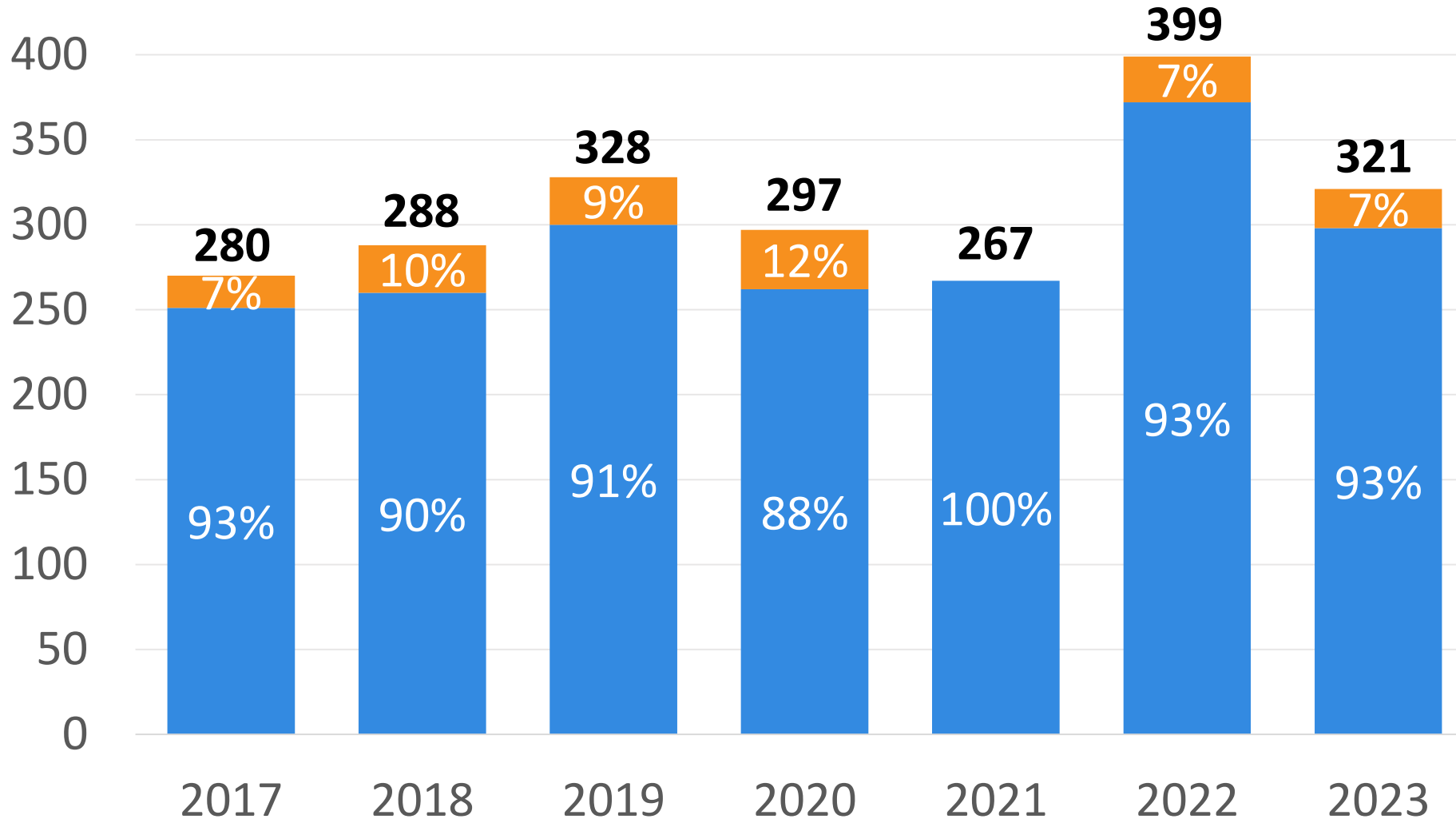
ROADMAP

1. Point In Time (PIT) count of homelessness
2. Highlights of CoC activities in HMIS
3. CoC-wide “system performance” review
4. Takeaways

1. PIT COUNT

PIT count totals over time in the whole Western VA CoC

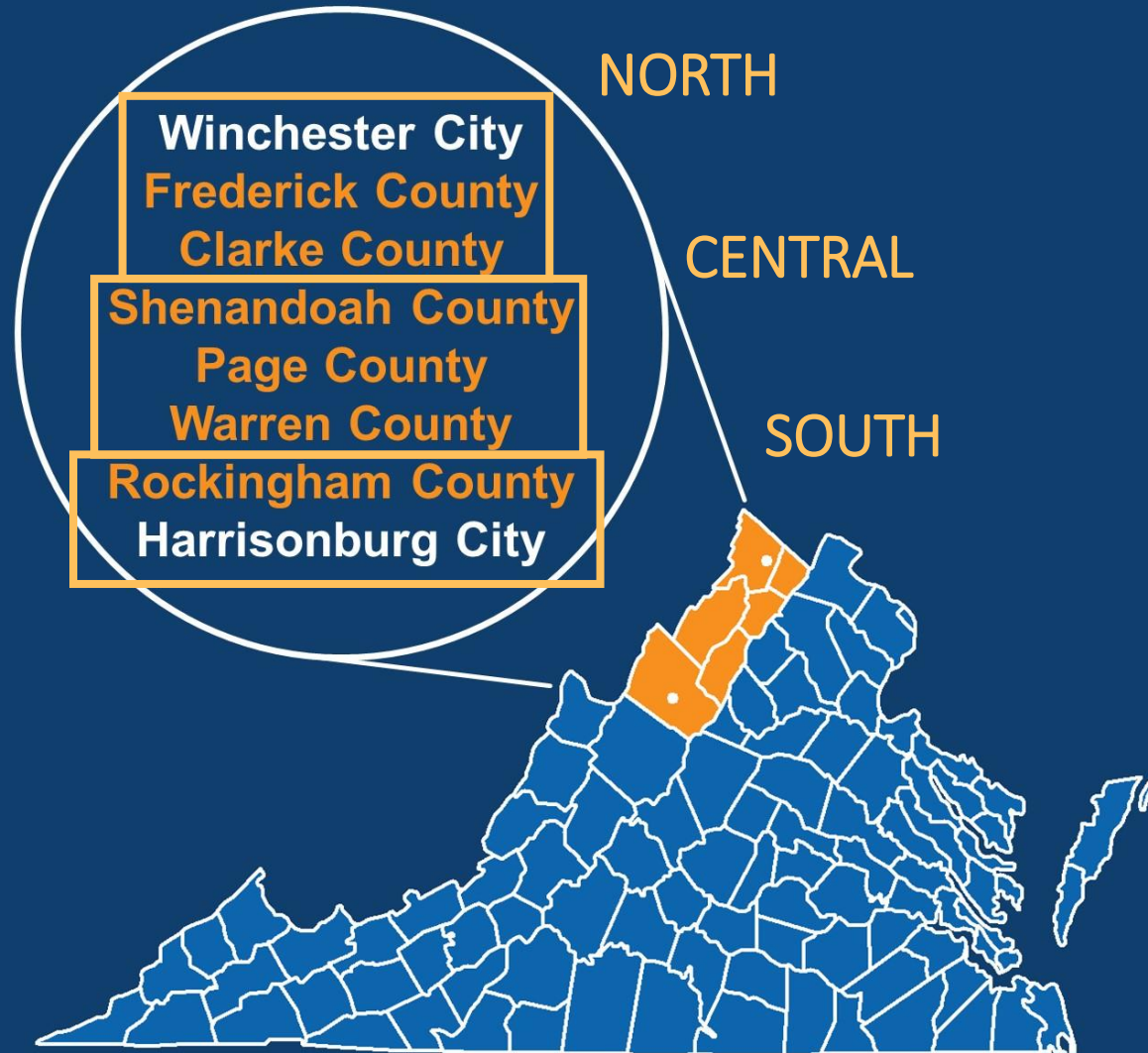
■ sheltered ■ unsheltered



TAKEAWAY:

- Unsheltered share has remained stable (there was no PIT survey conducted in 2021)
- 2022 gave some indication of the “hidden homeless” with COVID hotel vouchers

Data sources: PIT counts, 2017-2023



NORTH

CENTRAL

SOUTH

Winchester City
Frederick County
Clarke County

Shenandoah County
Page County
Warren County

Rockingham County
Harrisonburg City

2023 Point In Time: 321 people counted as homeless in Western VA CoC

Emergency Shelters: 250 (78%)

DV Shelters: 48 (15%)

Unsheltered: 23 (7%)

Winchester/Frederick/Clarke



Shenandoah/Page/Warren



Harrisonburg/Rockingham



TAKEAWAY:

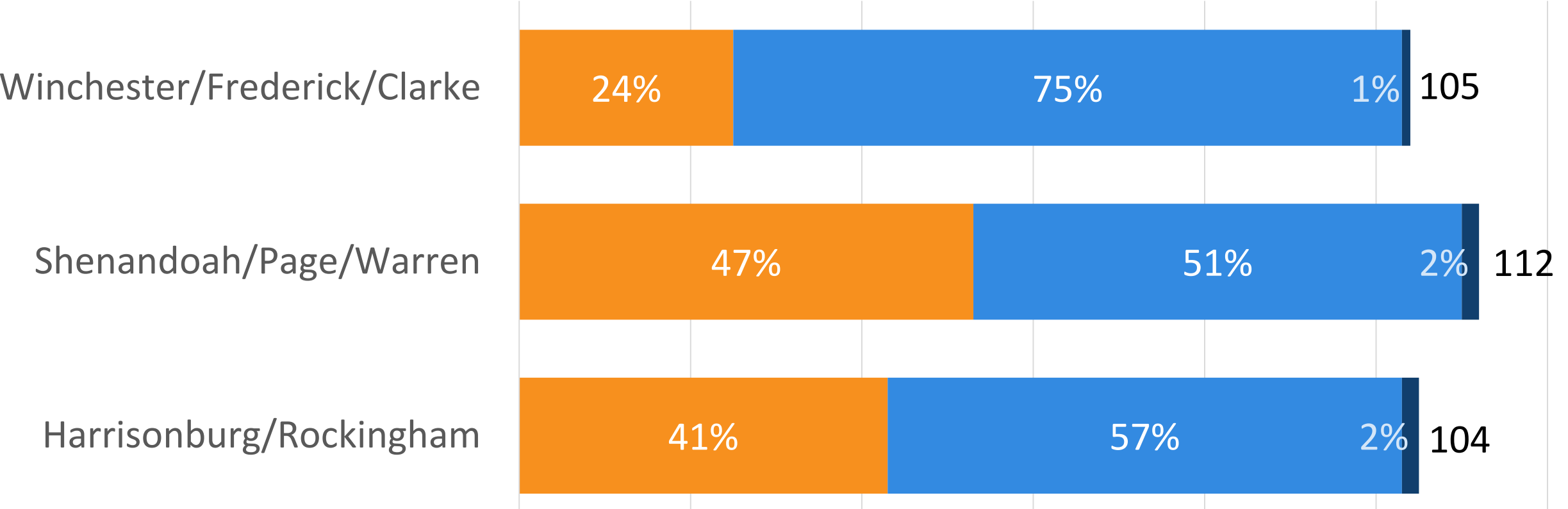
- Highest number and rate of homelessness is in the Central region, and high DV shelter rate
- Higher rate of unsheltered homeless in North

40 60 80 100 120

2023 PIT count & ACS 2021 5-year estimates

2023 PIT Count: homeless individuals by gender identity

Female: 121 (38%) Male: 195 (61%) Nonbinary and transgender: 5 (2%)



TAKEAWAY:

- Mostly men in the North
- Disproportionately high rate of women in Central

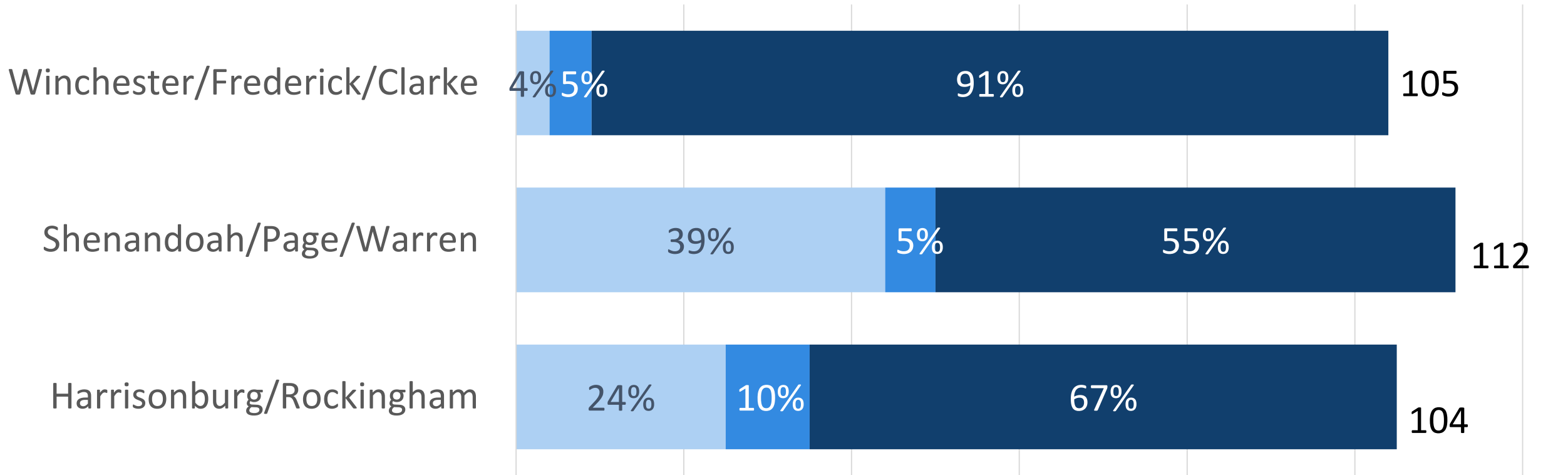
Data source: 2023 PIT count

2023 PIT Count: homeless individuals by age bracket

Children 0-17: 73 (23%)

Youth 18-24: 21 (7%)

Adults 25+: 227 (71%)



TAKEAWAY:

- No family shelters in North
- Disproportionately high rate of children in Central

Data source: 2023 PIT count

PIT Count 2023: homeless individuals by reported race

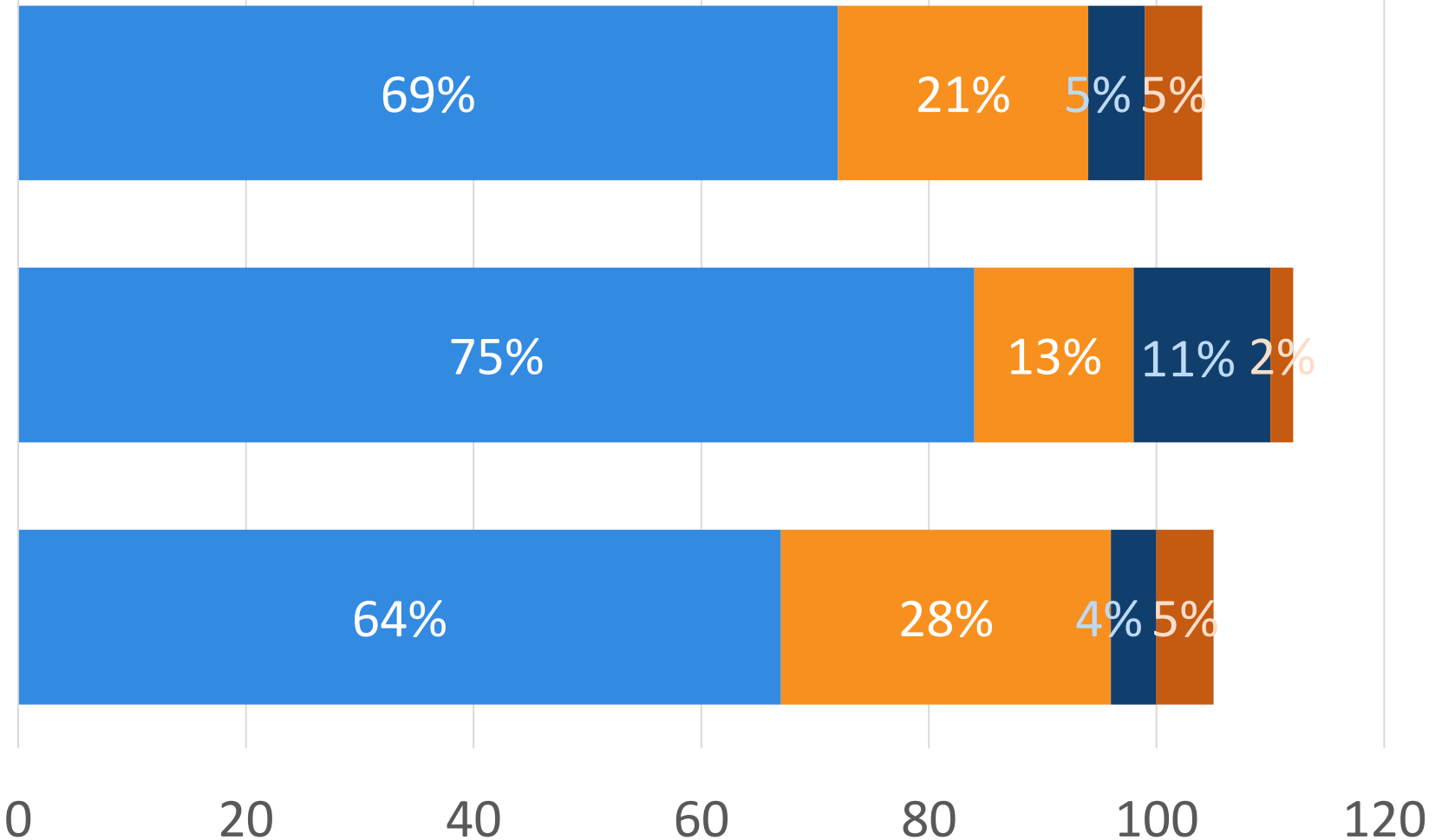
White: 223 (69%)

Black: 65 (20%)

Multiracial: 21 (7%)

Other*: 12 (4%)

Winchester/Frederick/Clarke

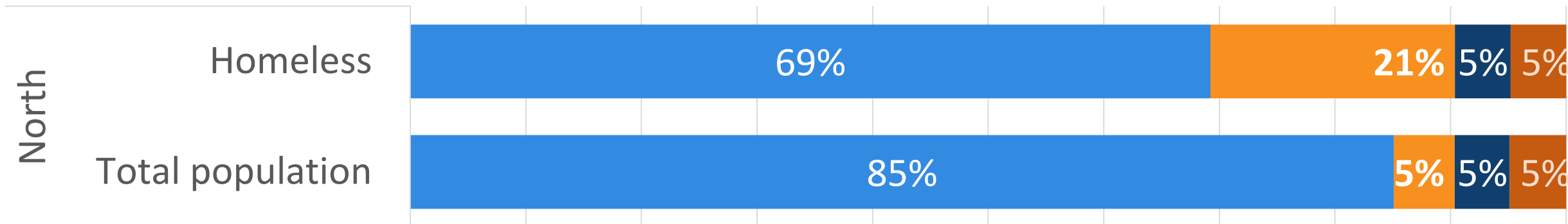


* Combined Asian, Native American, and Pacific Islander due to small sample sizes

Data source: 2023 PIT count

Comparing racial proportions of homeless and general populations

■ white ■ black ■ multiple races ■ other*



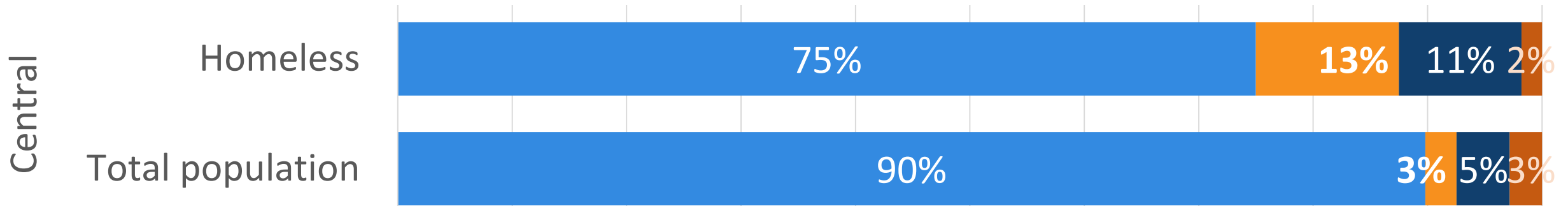
TAKEAWAY:

- Black people are 4x more likely to experience homelessness in the North
- Other racial categories are relatively proportional, with lower rate for white people

Data sources: 2023 PIT count & ACS 2021 5-year estimates

Comparing racial proportions of homeless and general populations

■ white ■ black ■ multiple races ■ other*



TAKEAWAY:

- Black people are experiencing homelessness at 4.5x the proportional rate in the Central region
- People identifying with multiple races are 2x as likely

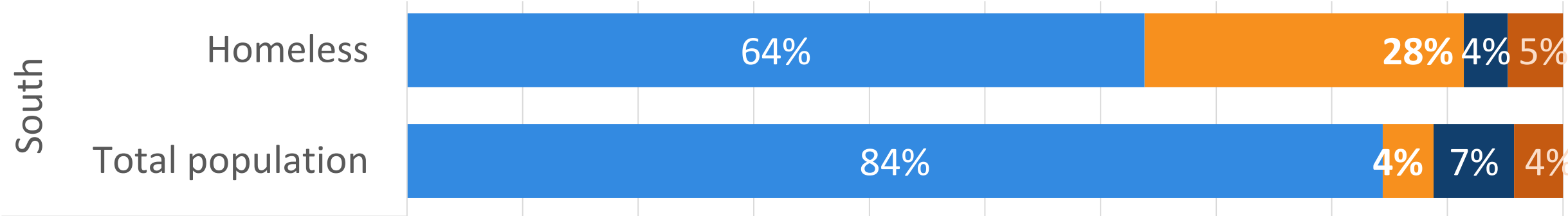
Data sources: 2023 PIT count & ACS 2021 5-year estimates

Comparing racial proportions of homeless and general populations

white black multiple races other*

TAKEAWAY:

- Black people are more than 6x likely to experience homelessness in Harrisonburg/Rockingham
- Other racial identities are proportional or under-represented in the population receiving homeless services

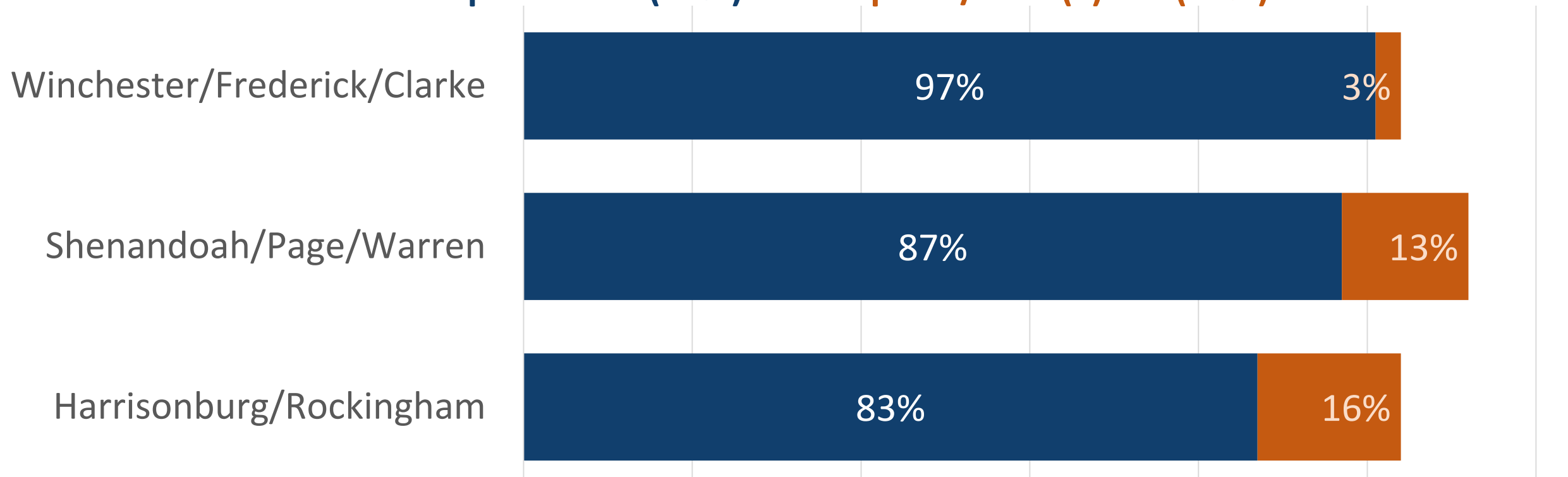


Data sources: 2023 PIT count & ACS 2021 5-year estimates

2023 PIT Count: Individuals by reported ethnicity

Non-Hispanic: 285 (89%)

Hispanic/Latin(x): 35 (11%)

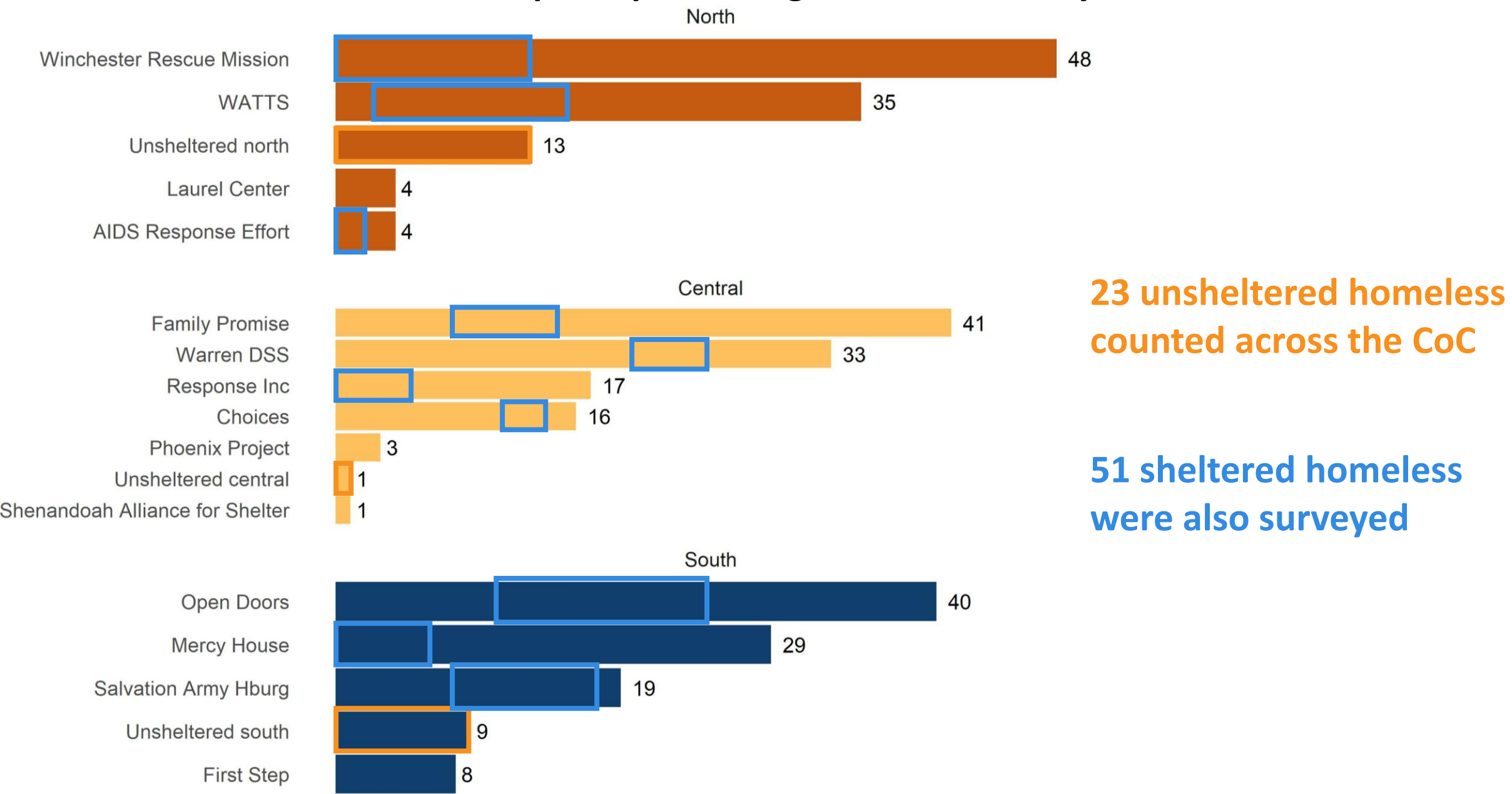


TAKEAWAY:

- South is roughly proportional (13% of general population is Hispanic)
- Central population is only 6% Hispanic: 2x likely to receive homeless services
- North is less likely to receive homeless services (10% of general pop)

Data source: 2023 PIT count

2023 PIT Count: People experiencing homelessness by shelter location



Frequency of top three factors contributing to current homeless situation

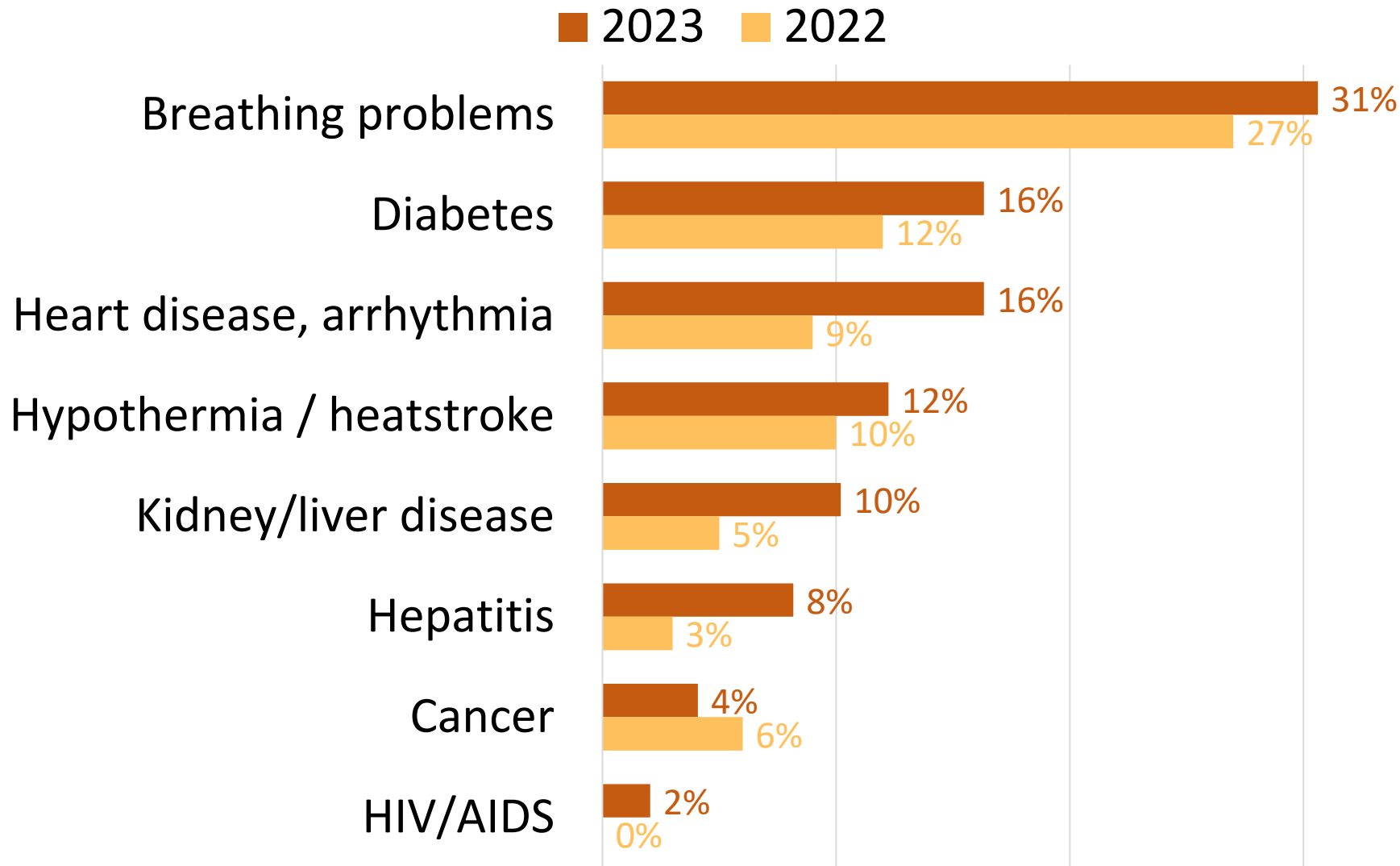
	First	Second	Third	Overall impact
Illness (self or family)	18	3	1	29%
Evicted/can't make payments	11	9	7	36%
Unemployment	9	17	11	51%
Disabilities	9	5	8	30%
Addiction	9	5	3	22%
Plans fell through	5	6	5	22%
Divorce/dispute	5	1	1	10%
Released from incarceration	3	3	3	12%
Other		7	2	16%
Domestic violence	1	1	2	5%
Moved / relocated	1	1	2	5%
Residence destroyed	1	1		3%
Released from hospitalization	1		3	5%

NOTE:

“Other” reasons included death of a family member (3), no transportation (2), and the inability to find housing (2)

Data source: 2023 PIT count surveys

Percent of people surveyed who report illnesses within the past 2 years



TAKEAWAY

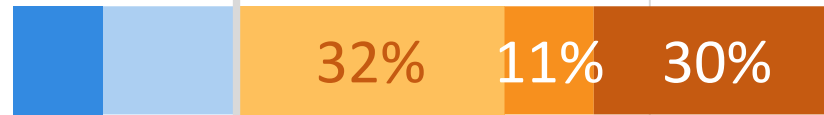
- Slight increase in rate of almost all illnesses from 2022 to 2023
- 41% of people surveyed listed at least one diagnosis

Data sources: 2022 and 2023 PIT count surveys

Frequency that mental health affects daily life reported by respondents

NEVER A LITTLE SOME A LOT ALWAYS

Those with a mental health diagnosis (n=37)



Those with no mental health diagnosis (n=32)



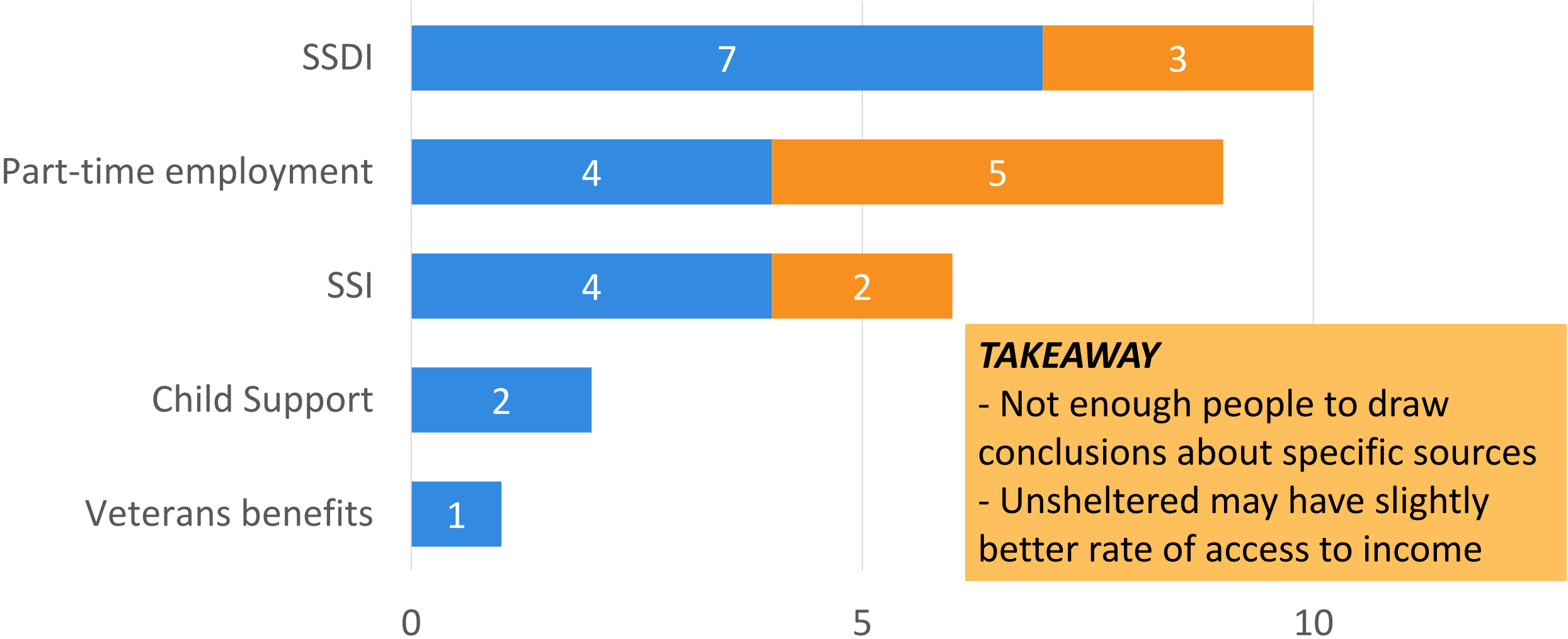
TAKEAWAY

- 70% of respondents are affected at least some of the time
- Those with a diagnosis are more likely to be affected a lot/always (41% vs 25%)

2023 PIT Count: 28 people (41%) reported having a source of income

Sheltered: 18 (35%)

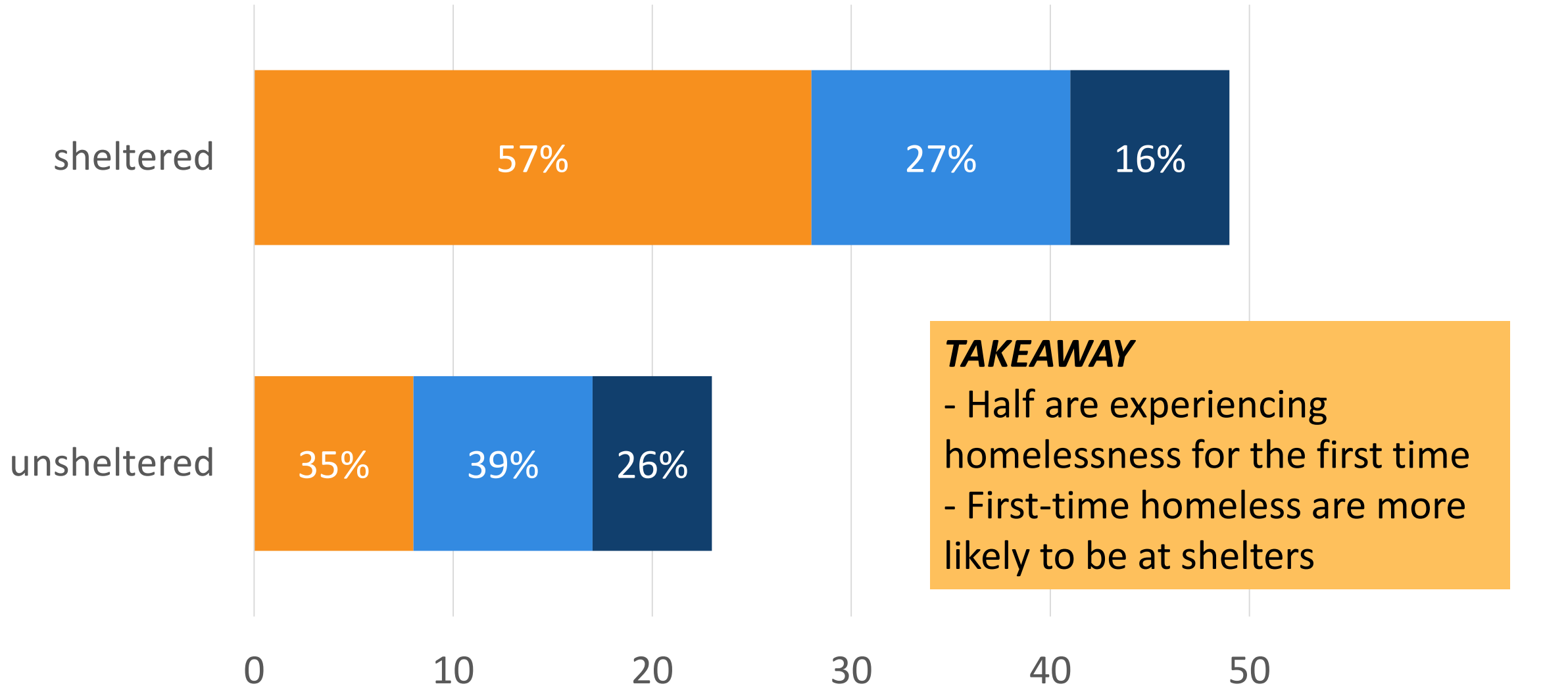
Unsheltered: 10 (43%)



Data source: 2023 PIT count survey

Number of times respondents have been homeless

First time: 36 (50%) 2-3 times: 22 (31%) 4+ times: 14 (19%)

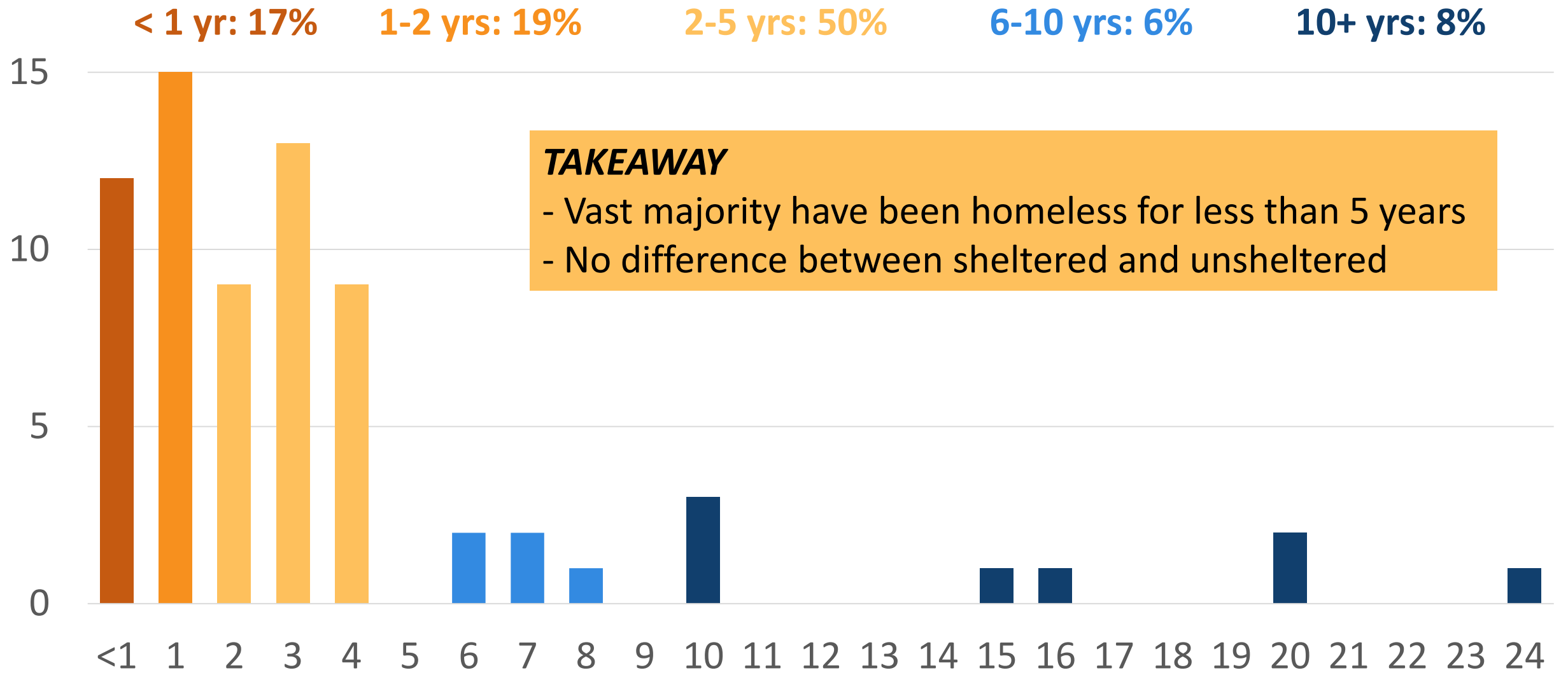


TAKEAWAY

- Half are experiencing homelessness for the first time
- First-time homeless are more likely to be at shelters

Data source: 2023 PIT count survey

PIT Count 2023: total years homeless over lifetime of respondents



Data source: 2023 PIT count survey

2. HIGHLIGHTS OF ACTIVITIES

Emergency Shelter
Rapid Rehousing
Permanent Supportive Housing
Centralized Housing Intake
Prevention
Street Outreach
Built for Zero
HOPWA

Emergency Shelter

Rapid Rehousing

Permanent Supportive Housing

Centralized Housing Intake

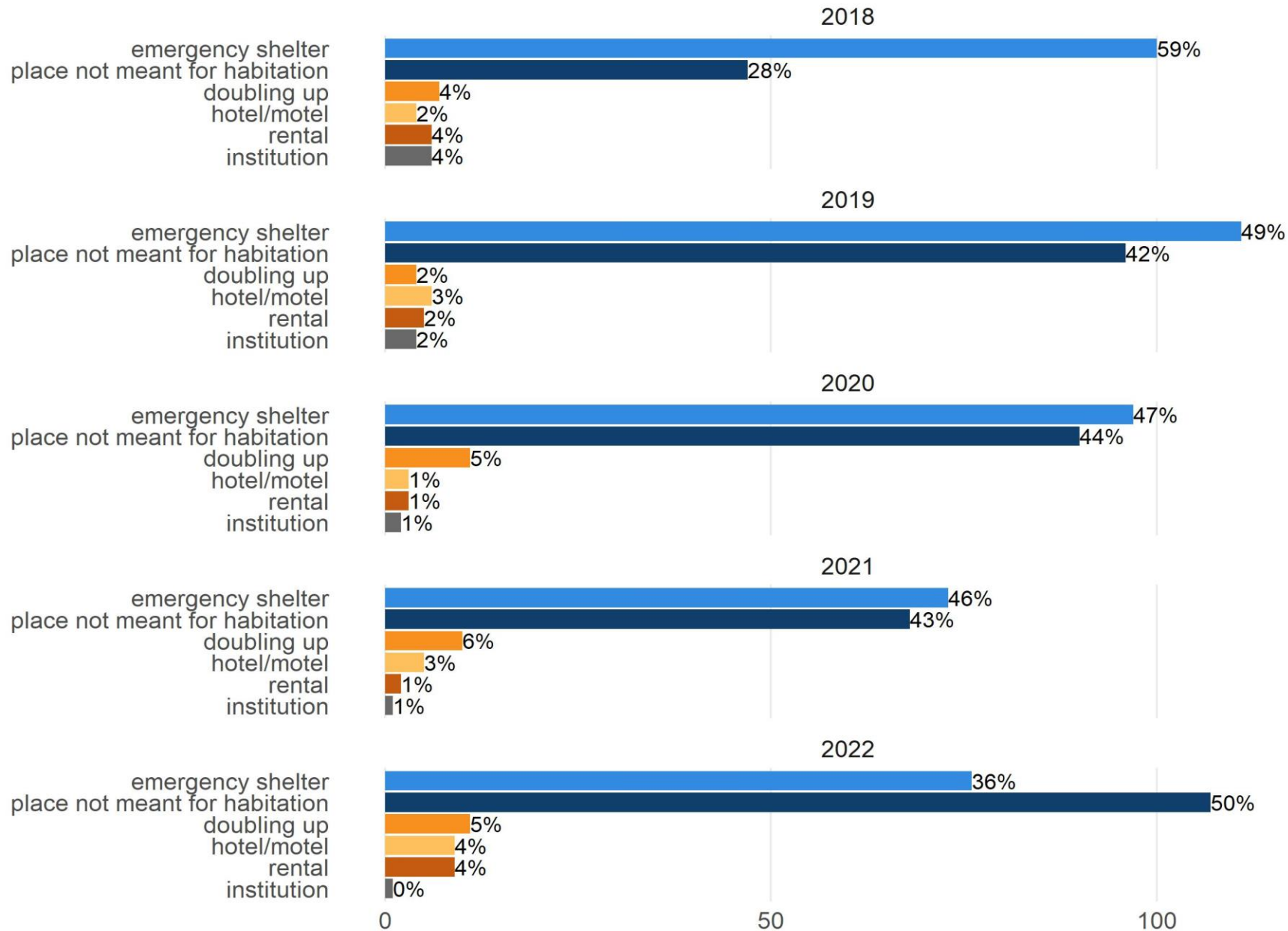
Prevention

Street Outreach

Built for Zero

HOPWA

Living situation of clients upon entry into RRH projects



TAKEAWAY

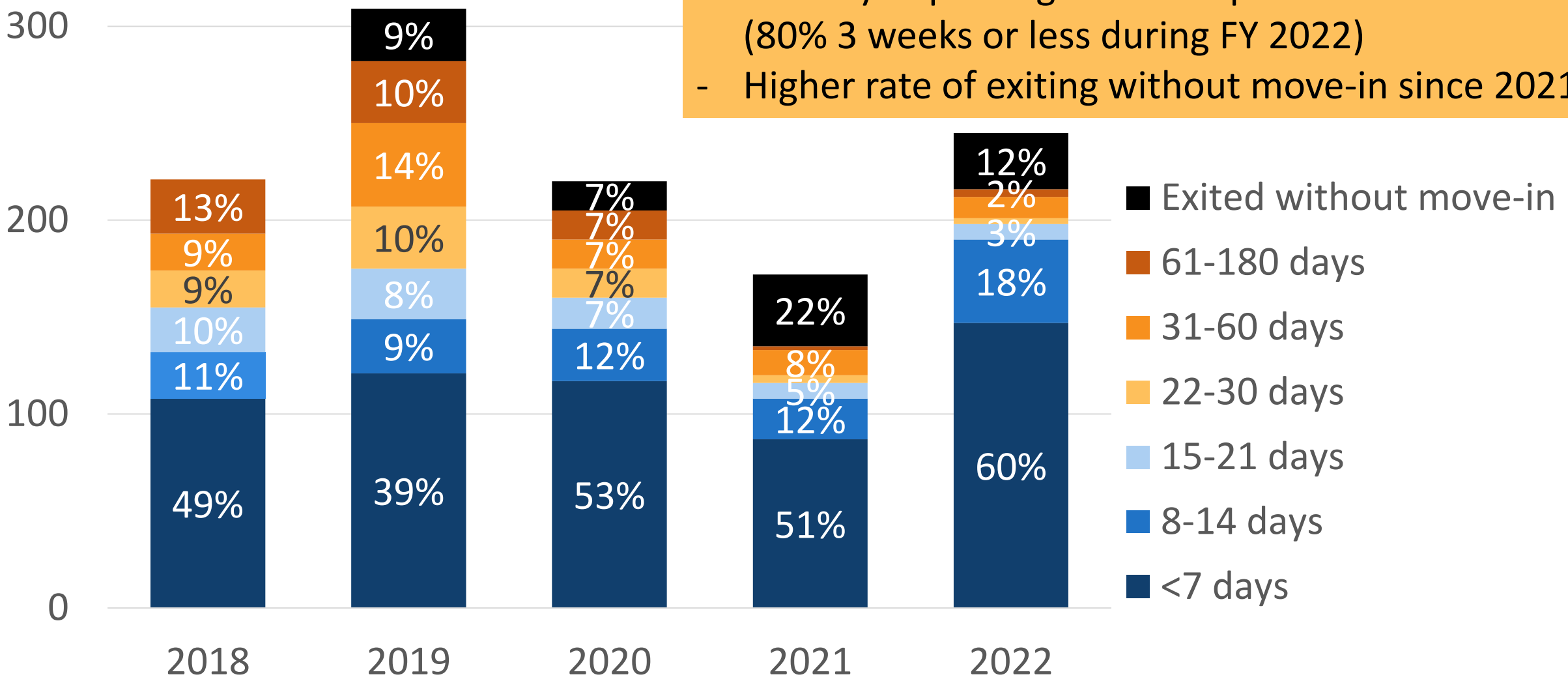
- Steady increase of RRH for people in places not meant for habitation (street)
- Total annual RRH entries consistently around 220 people

Data source: HMIS CoC APR for VA-513 RRH projects

Length of time from project start date to housing move in for RRH clients

TAKEAWAY

- Steadily improving move-in speed once enrolled (80% 3 weeks or less during FY 2022)
- Higher rate of exiting without move-in since 2021



Data source: HMIS CoC APR for VA-513 RRH projects

Emergency Shelter

Rapid Rehousing

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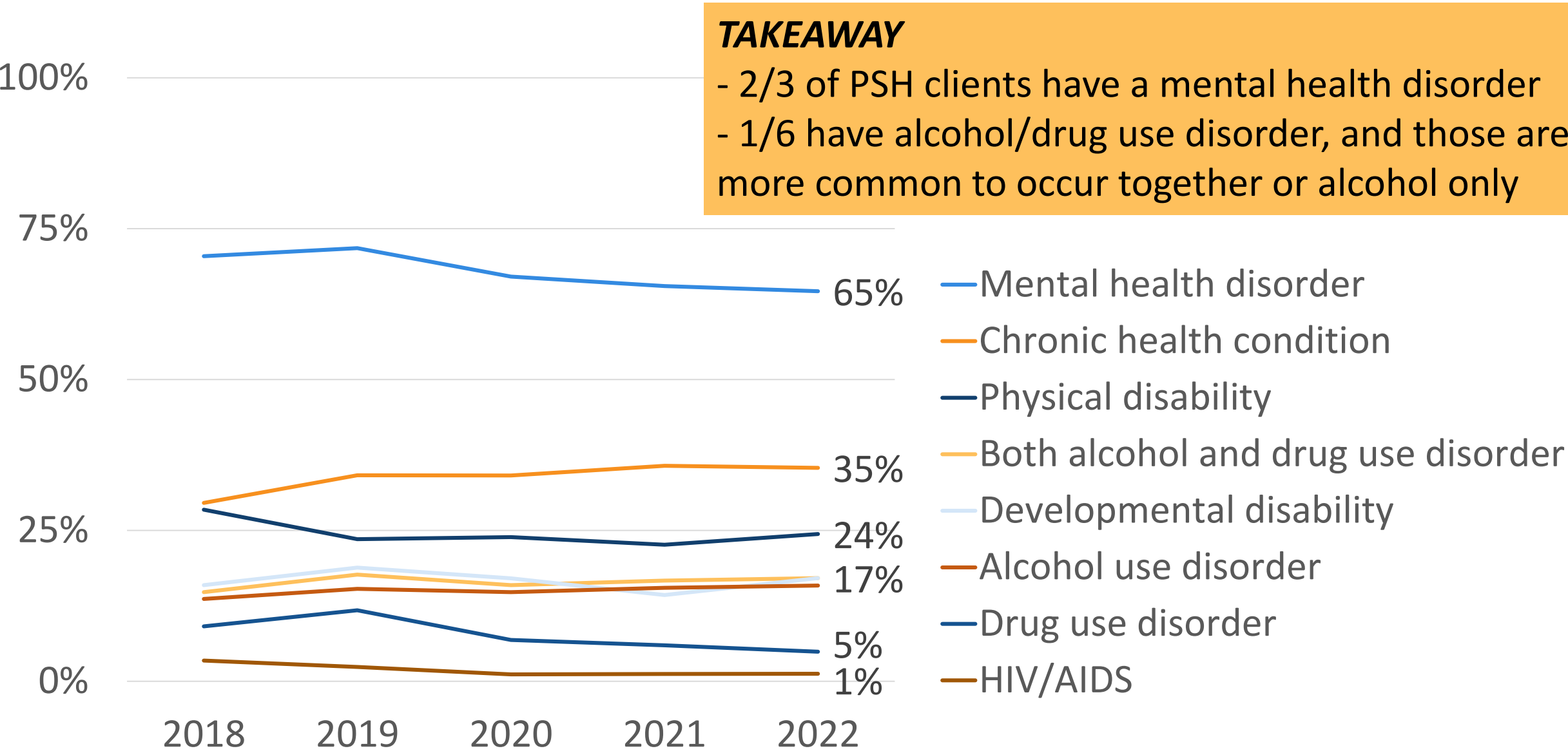
Built for Zero

HOPWA

Percent of clients reporting physical/mental health conditions upon entering PSH

TAKEAWAY

- 2/3 of PSH clients have a mental health disorder
- 1/6 have alcohol/drug use disorder, and those are more common to occur together or alcohol only

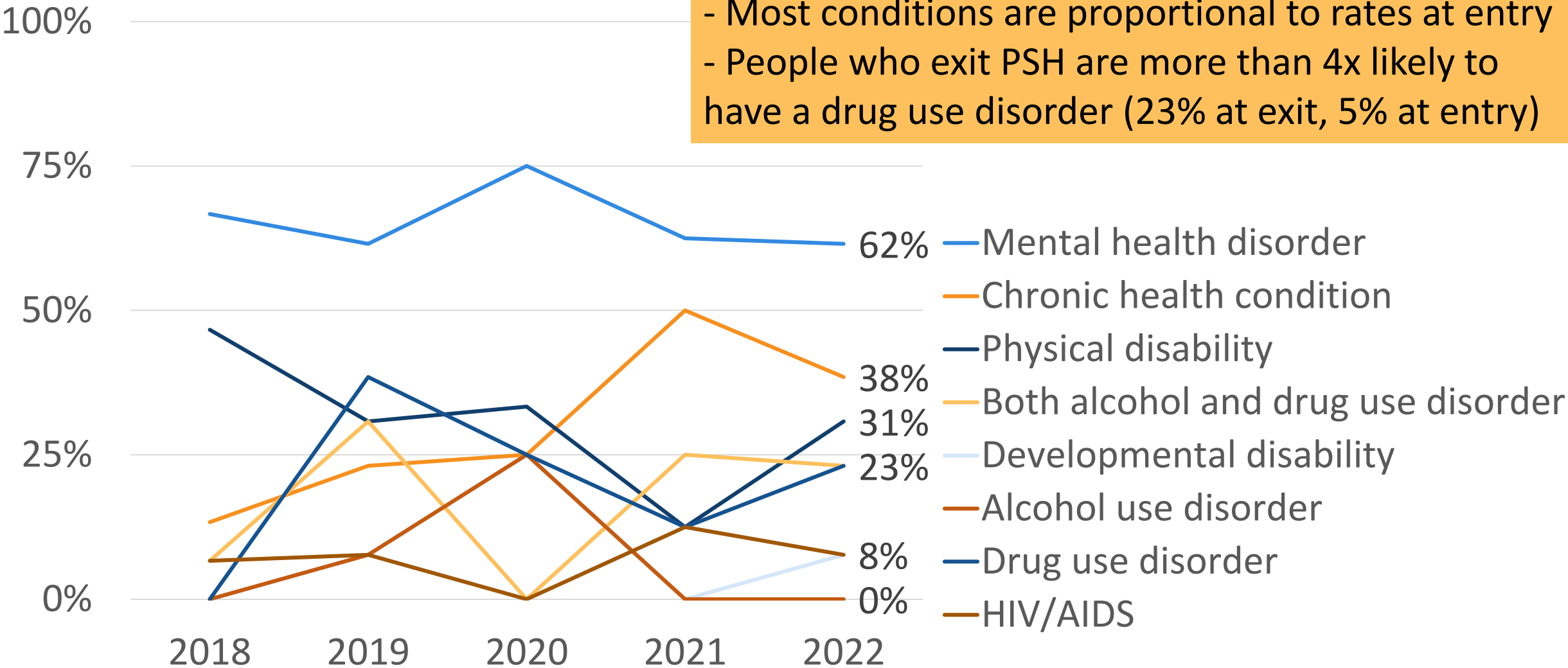


Data source: HMIS CoC APR for VA-513 PSH projects

Percent of clients reporting physical/mental health conditions upon exiting PSH

TAKEAWAY

- Most conditions are proportional to rates at entry
- People who exit PSH are more than 4x likely to have a drug use disorder (23% at exit, 5% at entry)



Data source: HMIS CoC APR for VA-513 PSH projects

Emergency Shelter

Rapid Rehousing

Permanent Supportive Housing

Centralized Housing Intake

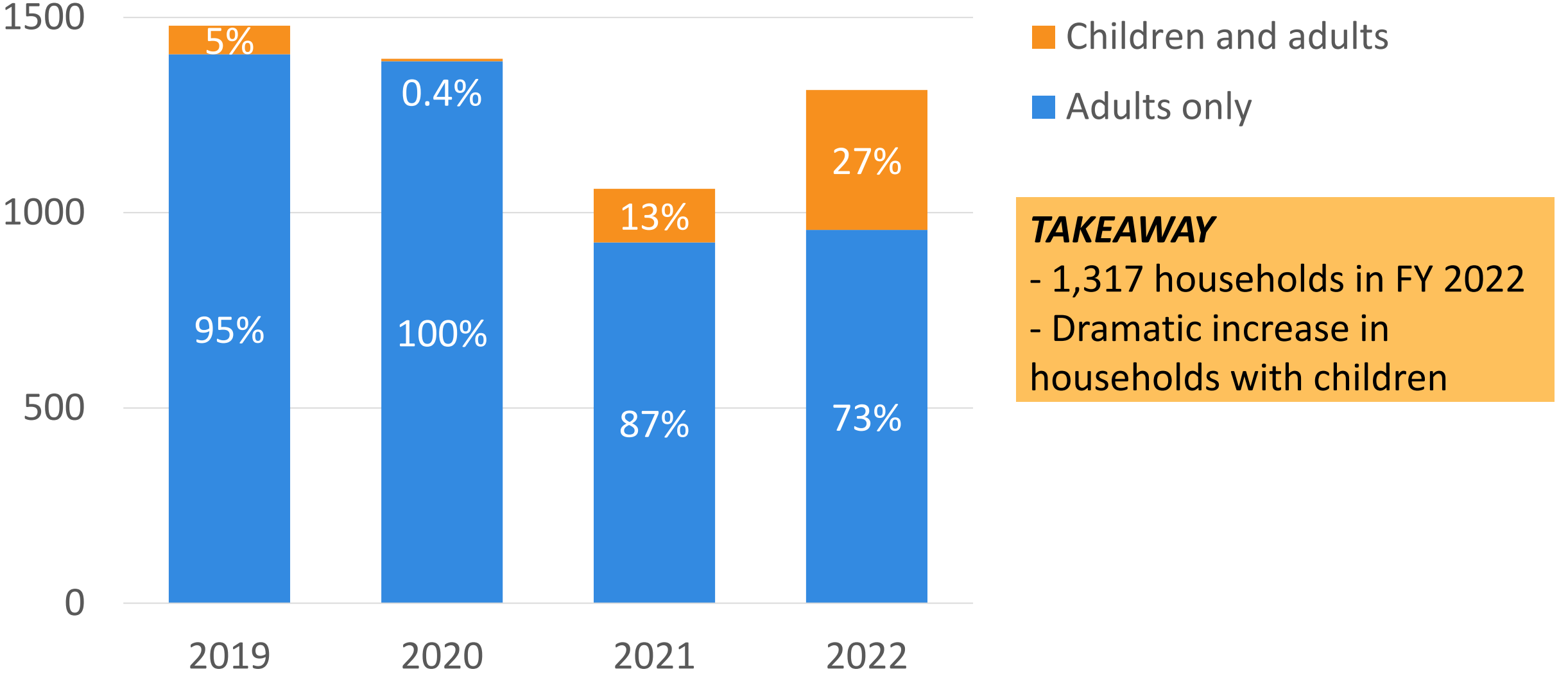
Prevention

Street Outreach

Built for Zero

HOPWA

Number of households served by Coordinated Housing Intake

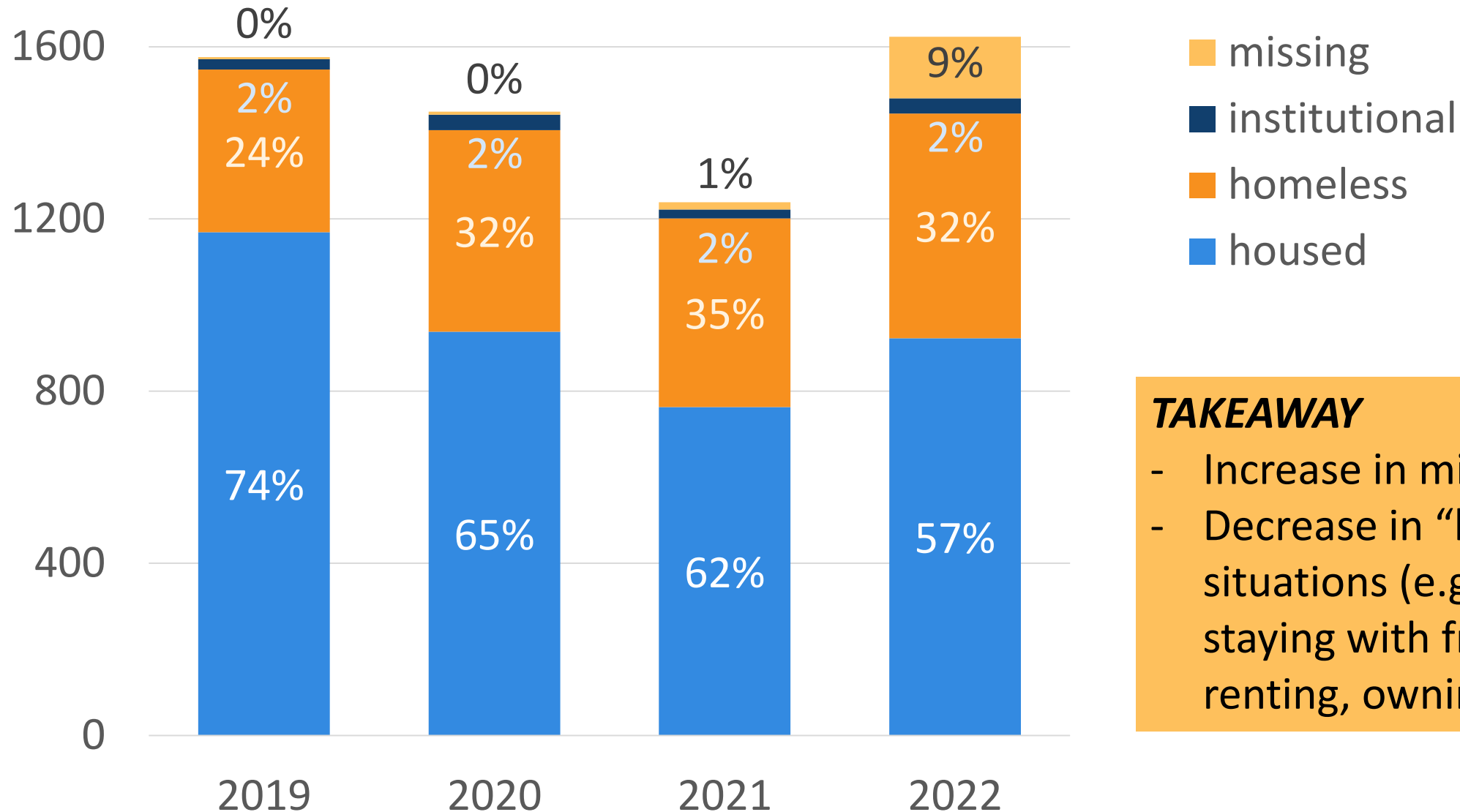


TAKEAWAY

- 1,317 households in FY 2022
- Dramatic increase in households with children

Data source: HMIS CoC APR for VA-513 CHI projects, Q8a

Current living situation of Coordinated Housing Intake clients

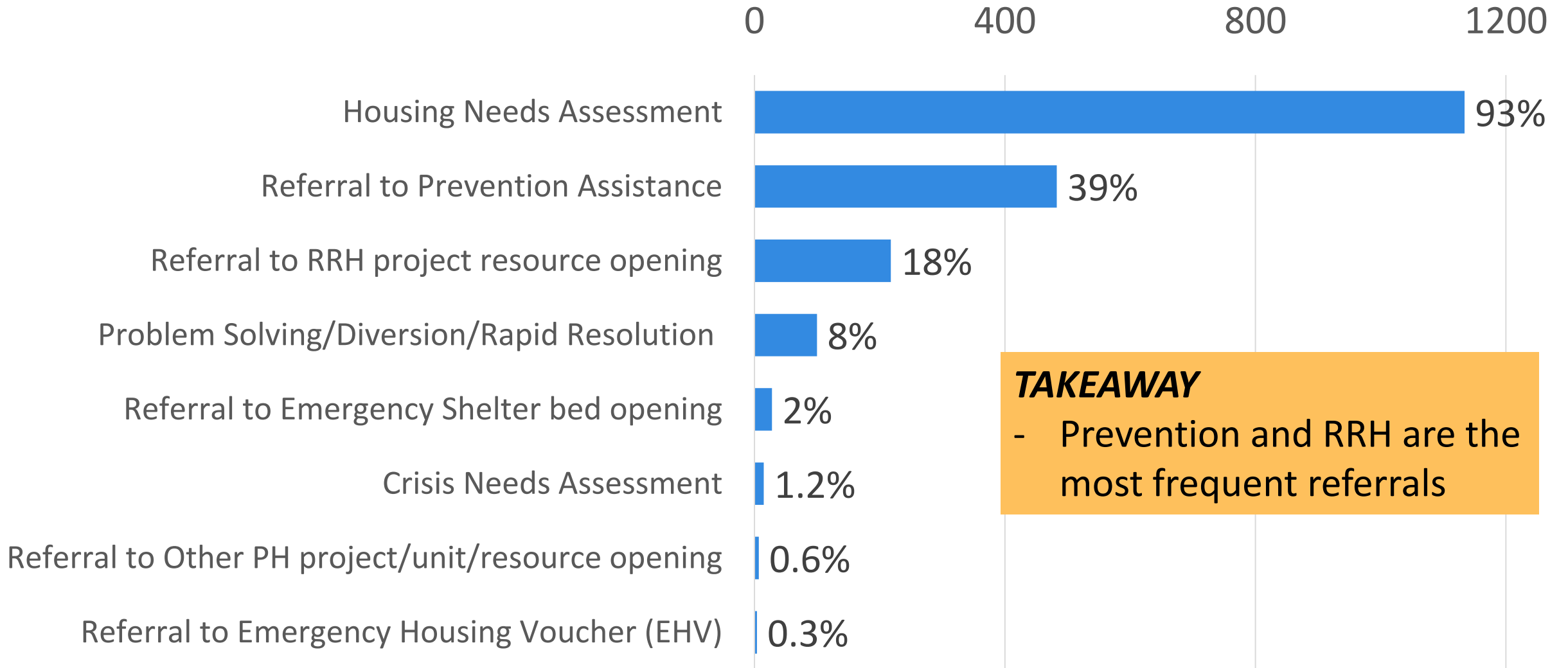


TAKEAWAY

- Increase in missing data
- Decrease in “housed” situations (e.g. hotels, staying with friends/family, renting, owning)

Data source: HMIS CoC APR for VA-513 CHI projects, Q8a

Most common access and referral services in CHI (FY 2022)



Data source: HMIS CE APR for VA-513 CHI projects, Q10

Emergency Shelter

Rapid Rehousing

Permanent Supportive Housing

Centralized Housing Intake

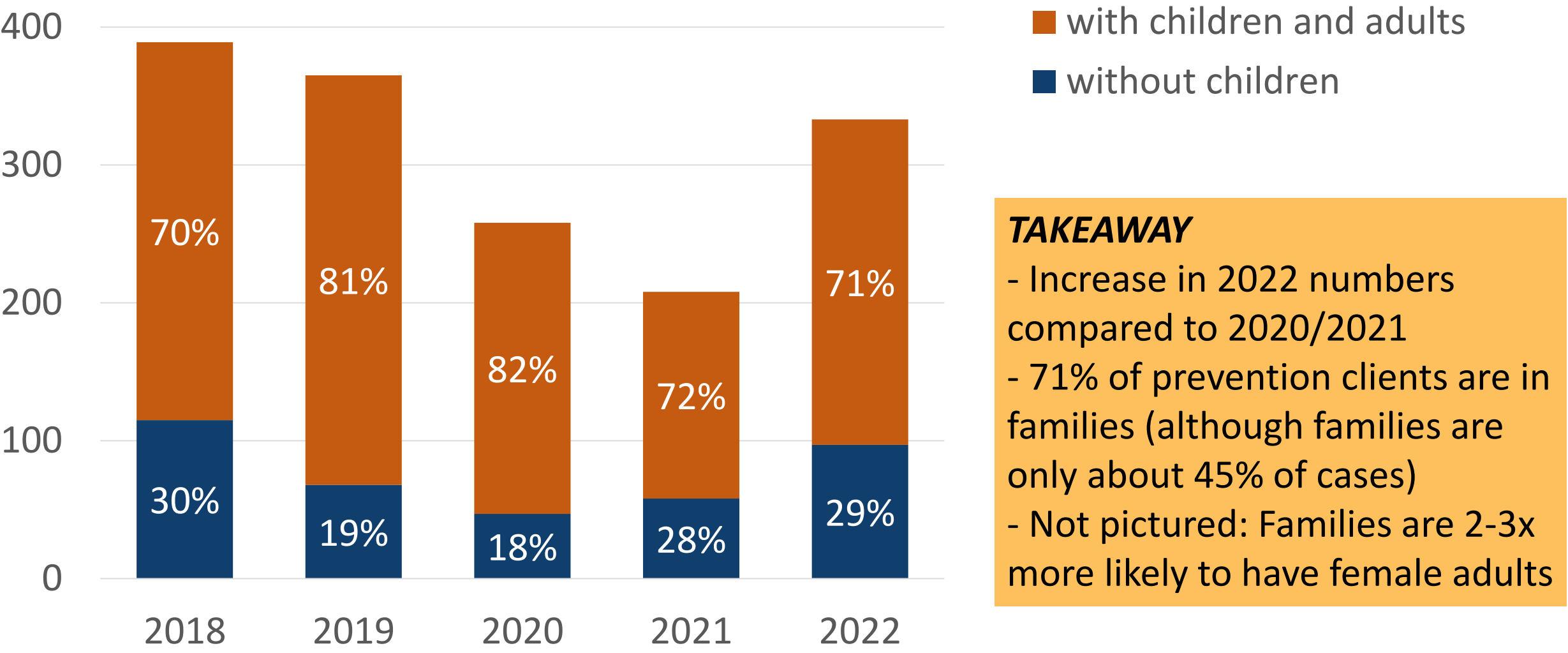
Prevention

Street Outreach

Built for Zero

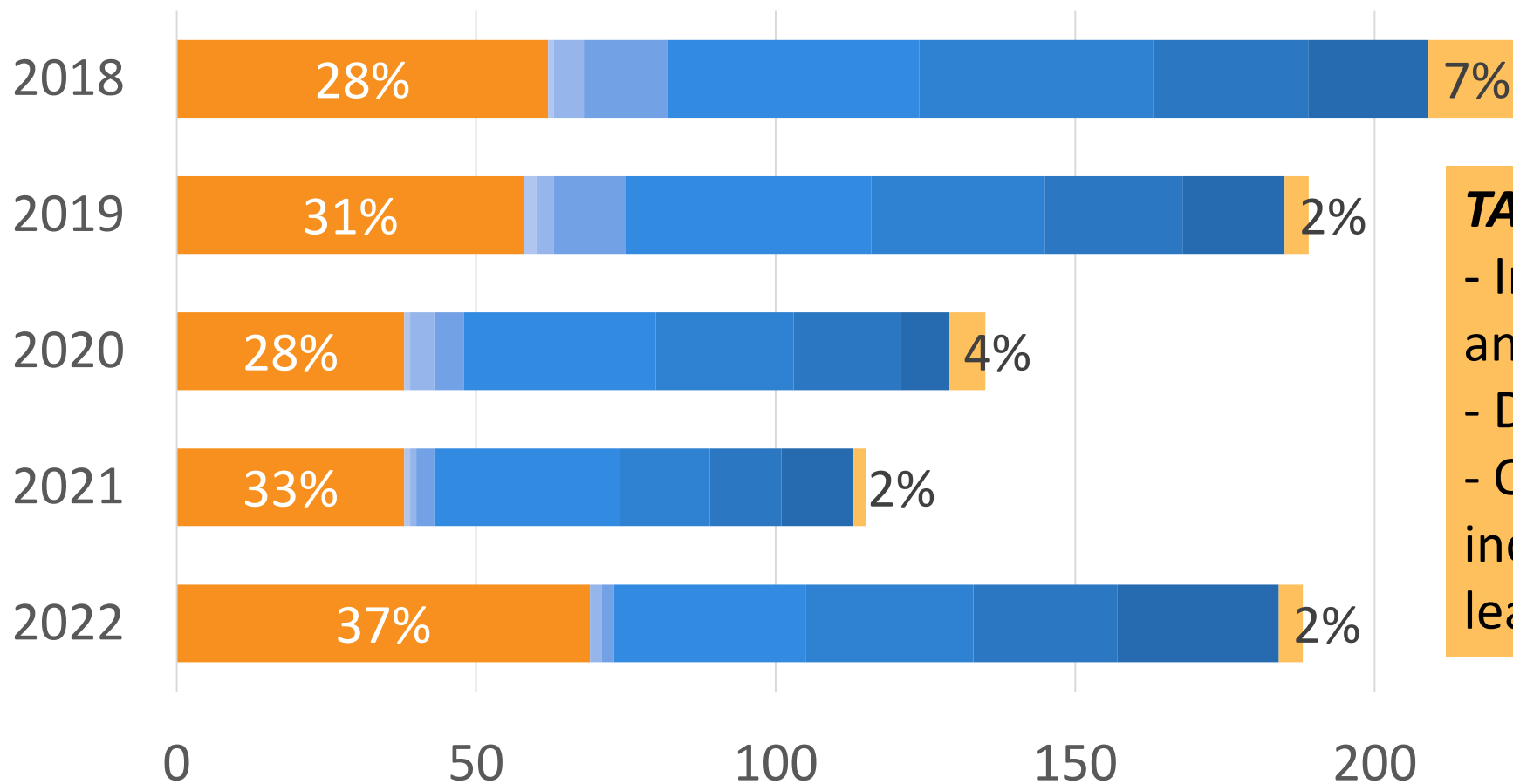
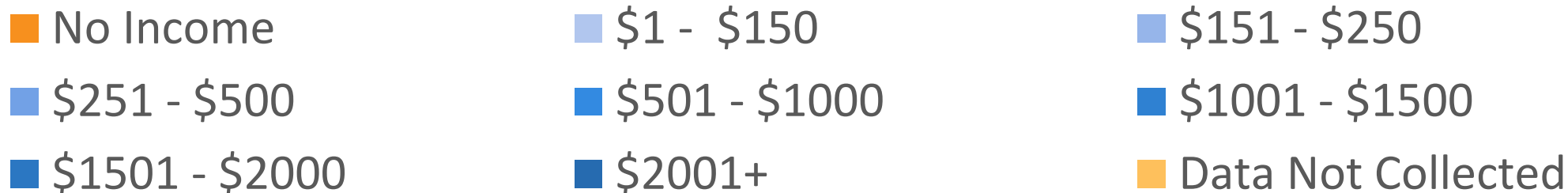
HOPWA

Number of clients receiving prevention services by household type



Data source: HMIS CoC APR for VA-513 prevention projects, Q10

Income ranges of adults receiving prevention services

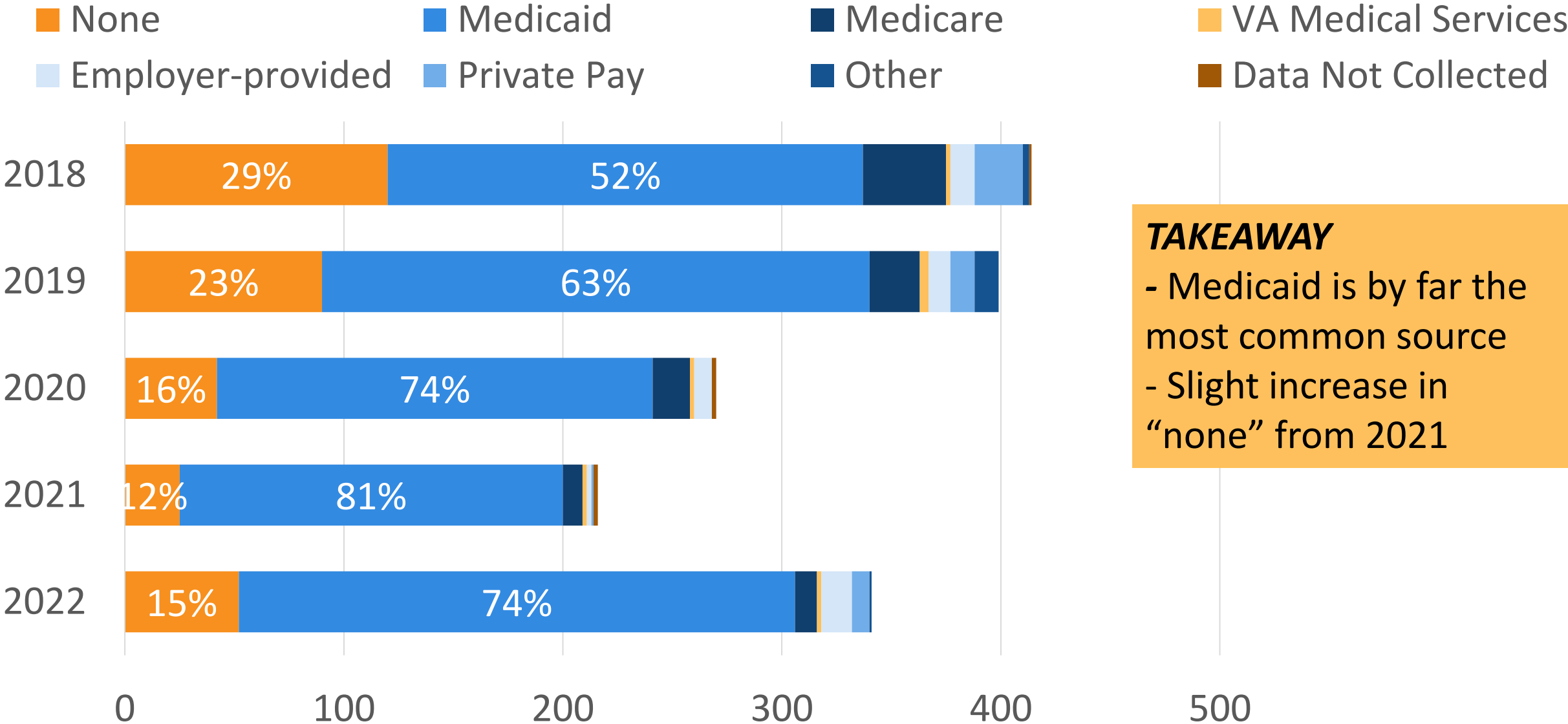


TAKEAWAY

- Increase in “no income” and total numbers in 2022
- Decrease in missing data
- Of those who do have income, most receive at least \$500/month

Data source: HMIS CoC APR for VA-513 prevention projects, Q16

Health Insurance of clients receiving prevention services



TAKEAWAY

- Medicaid is by far the most common source
- Slight increase in “none” from 2021

Data source: HMIS CoC APR for VA-513 prevention projects, Q21

Emergency Shelter

Rapid Rehousing

Permanent Supportive Housing

Centralized Housing Intake

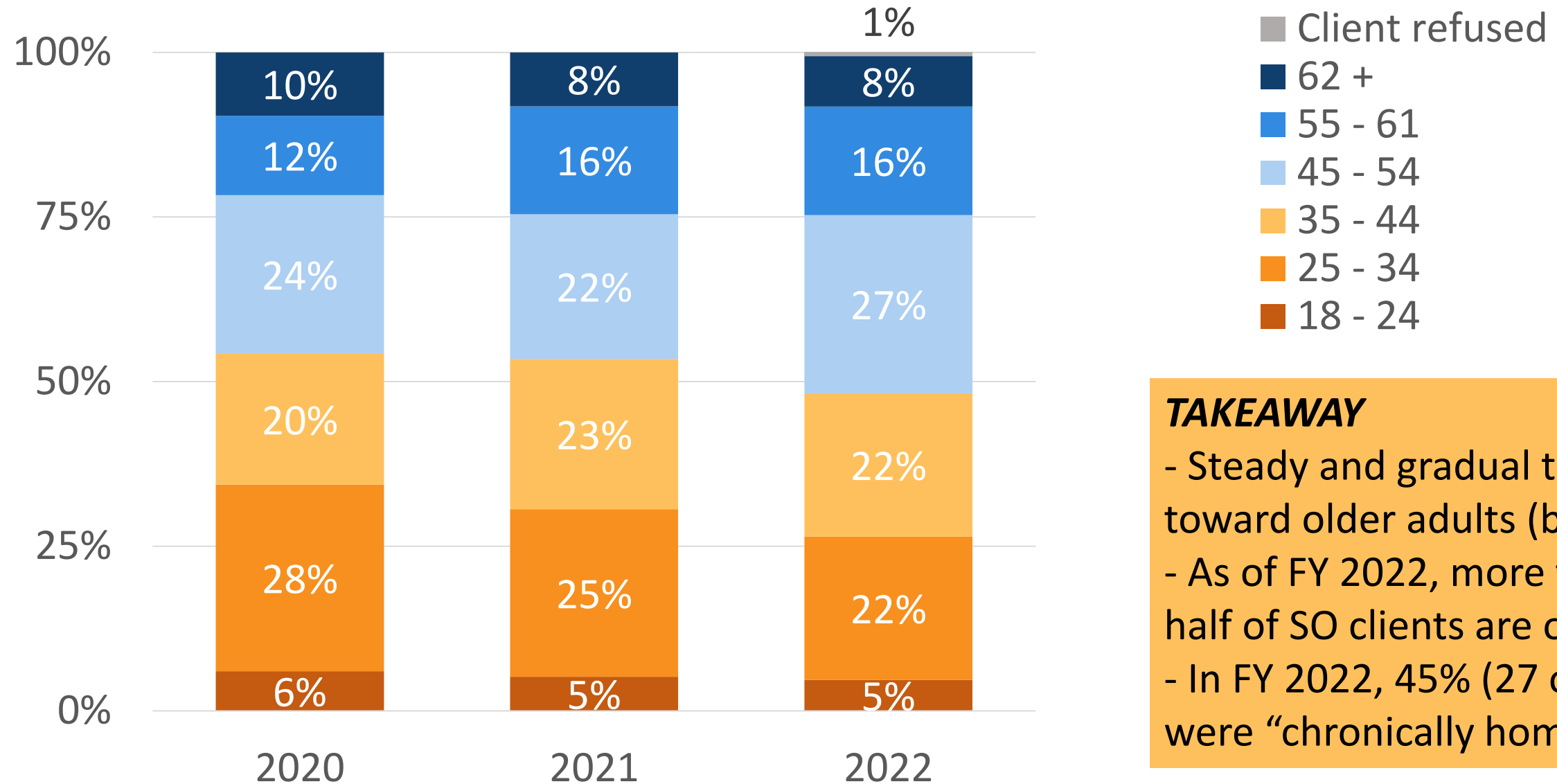
Prevention

Street Outreach

Built for Zero

HOPWA

Age range of clients receiving Street Outreach services

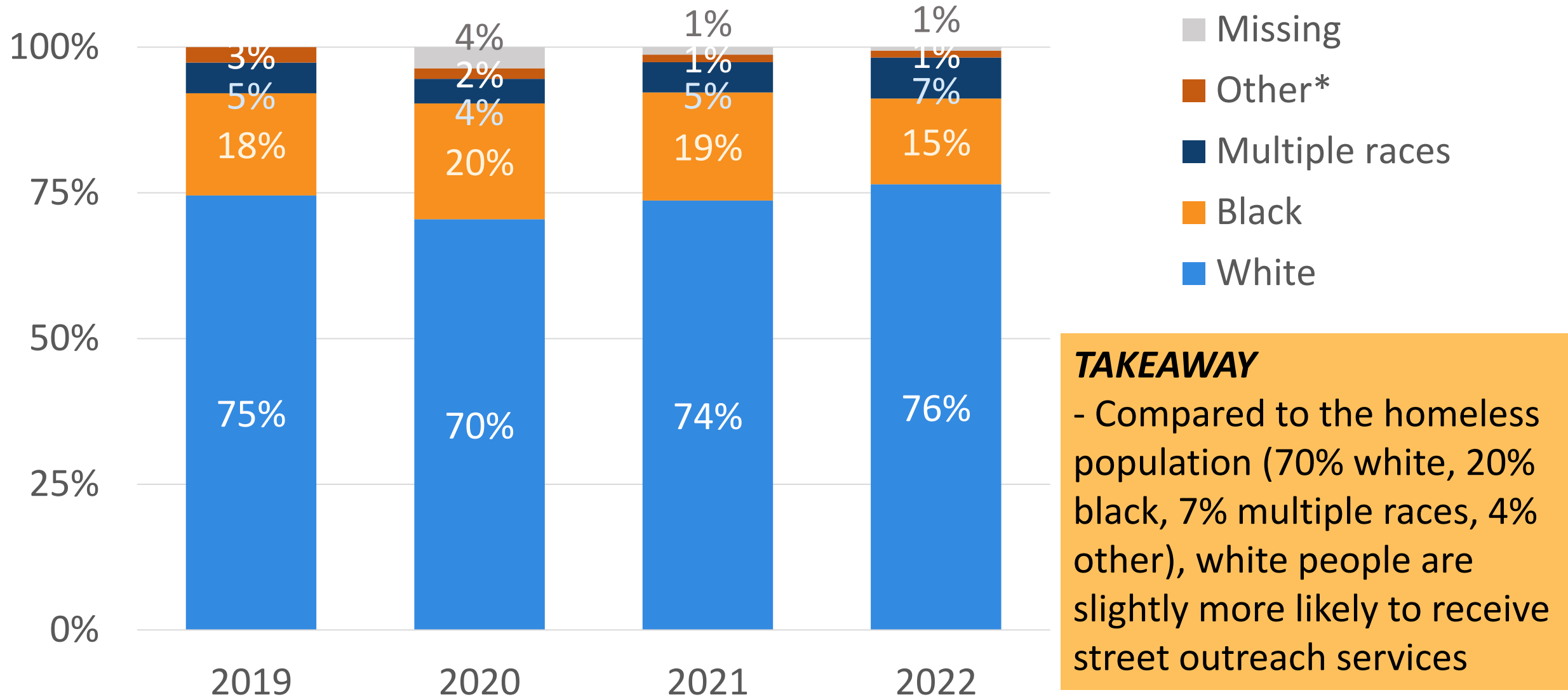


TAKEAWAY

- Steady and gradual trend toward older adults (blue)
- As of FY 2022, more than half of SO clients are over 45
- In FY 2022, 45% (27 of 60) were “chronically homeless”

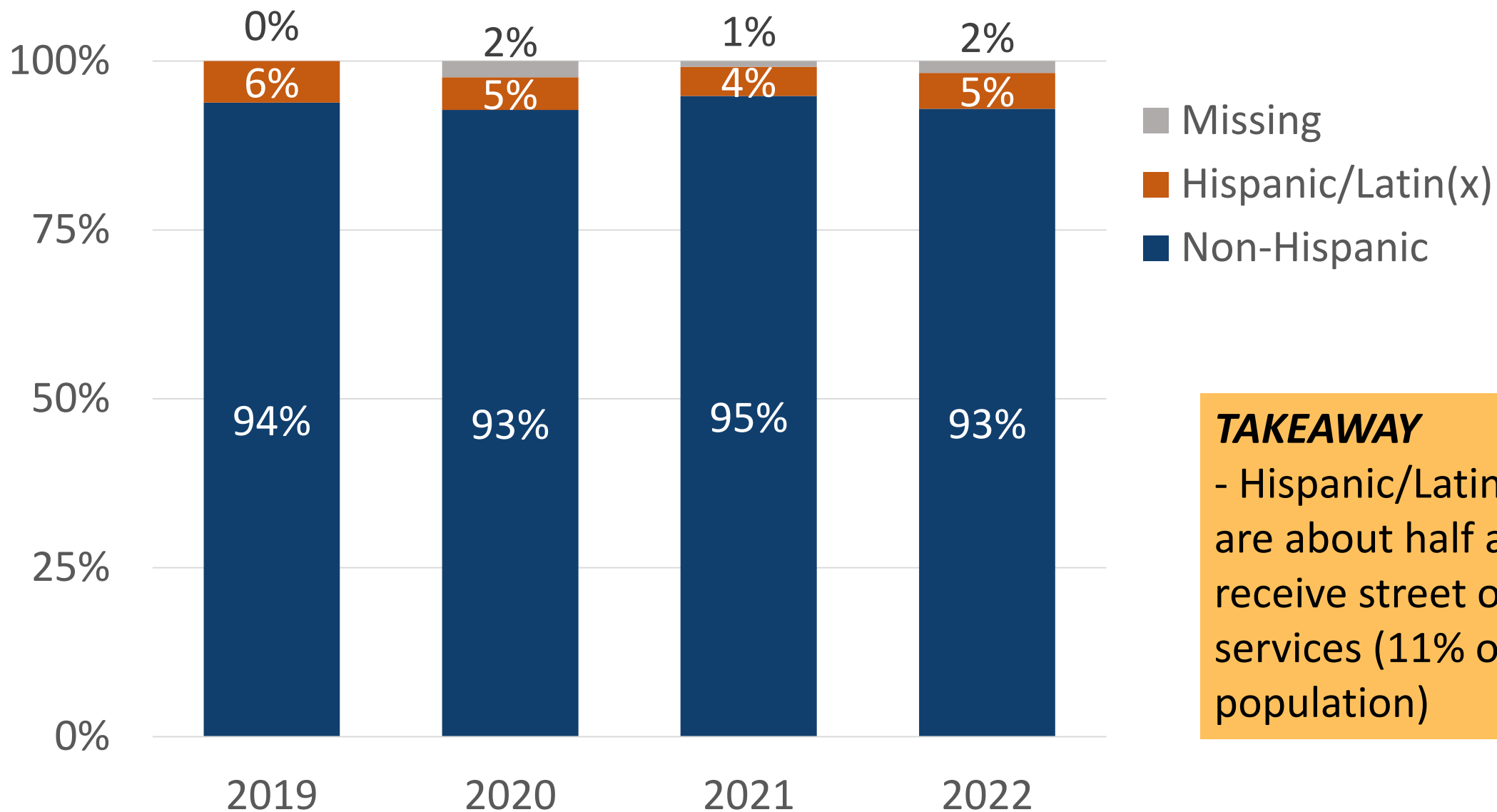
Data source: HMIS CoC APR for VA-513 street outreach projects, Q11

Race of people receiving Street Outreach services



Data source: HMIS CoC APR for VA-513 street outreach projects, Q12a

Ethnicity of people receiving Street Outreach services



TAKEAWAY

- Hispanic/Latin(x) people are about half as likely to receive street outreach services (11% of homeless population)

Data source: HMIS CoC APR for VA-513 street outreach projects, Q12b

Emergency Shelter

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Prevention

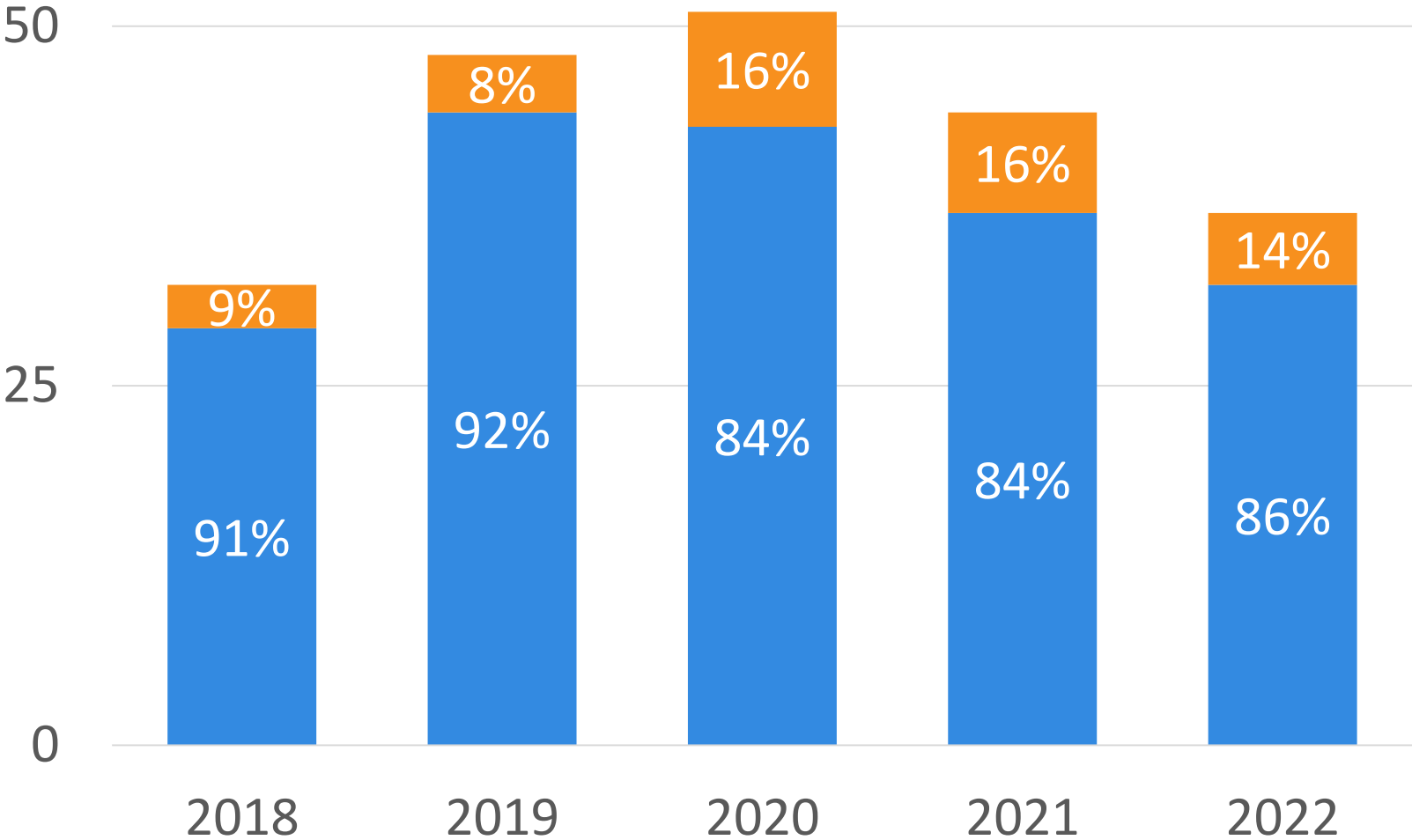
Street Outreach

Built for Zero

HOPWA

Living situation upon entering HOPWA programs

■ housed ■ homeless

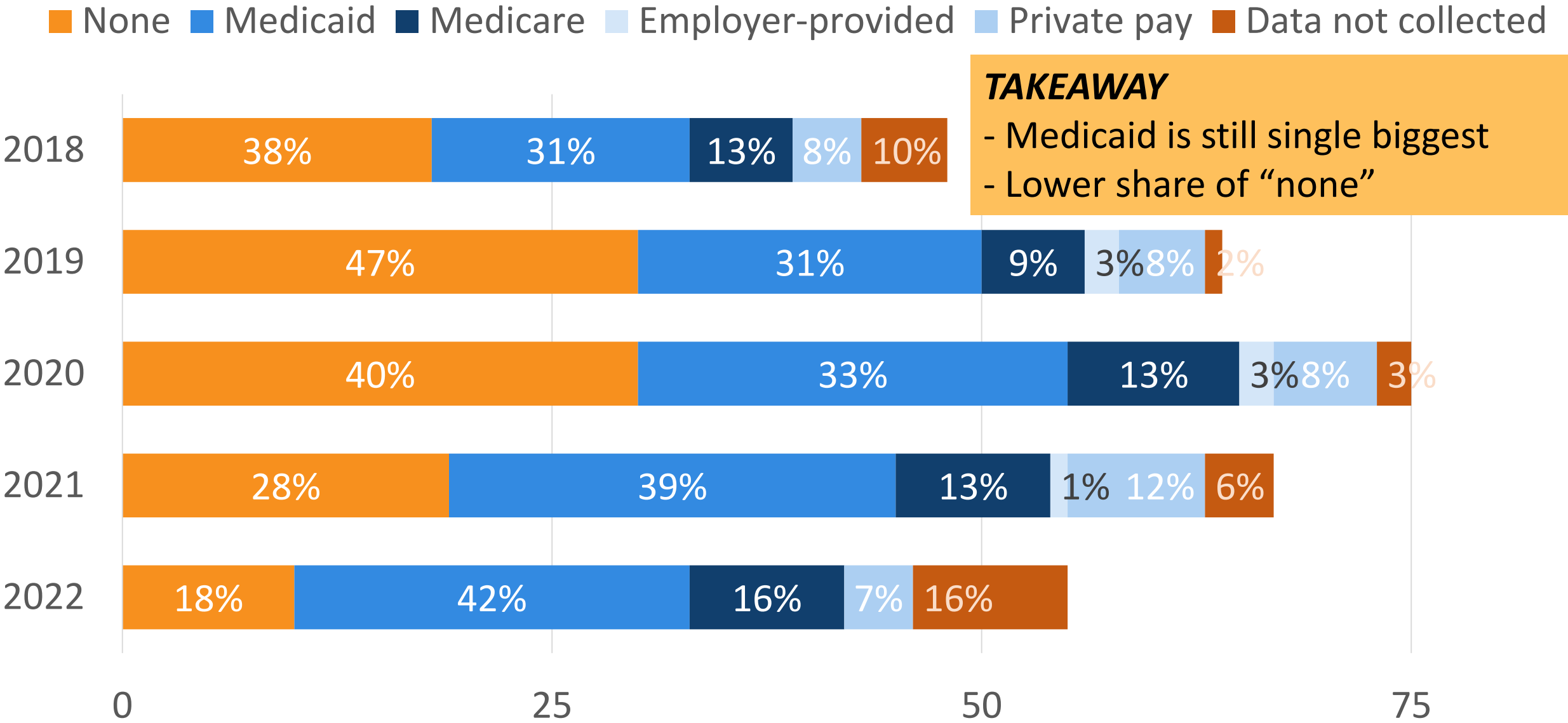


TAKEAWAY

- Total enrollment is down since 2020
- Rate of homeless clients has been higher from 2020-2022

Data source: HMIS CoC APR for VA-513 HOPWA projects, Q15

Source of health insurance for clients enrolled in HOPWA programs



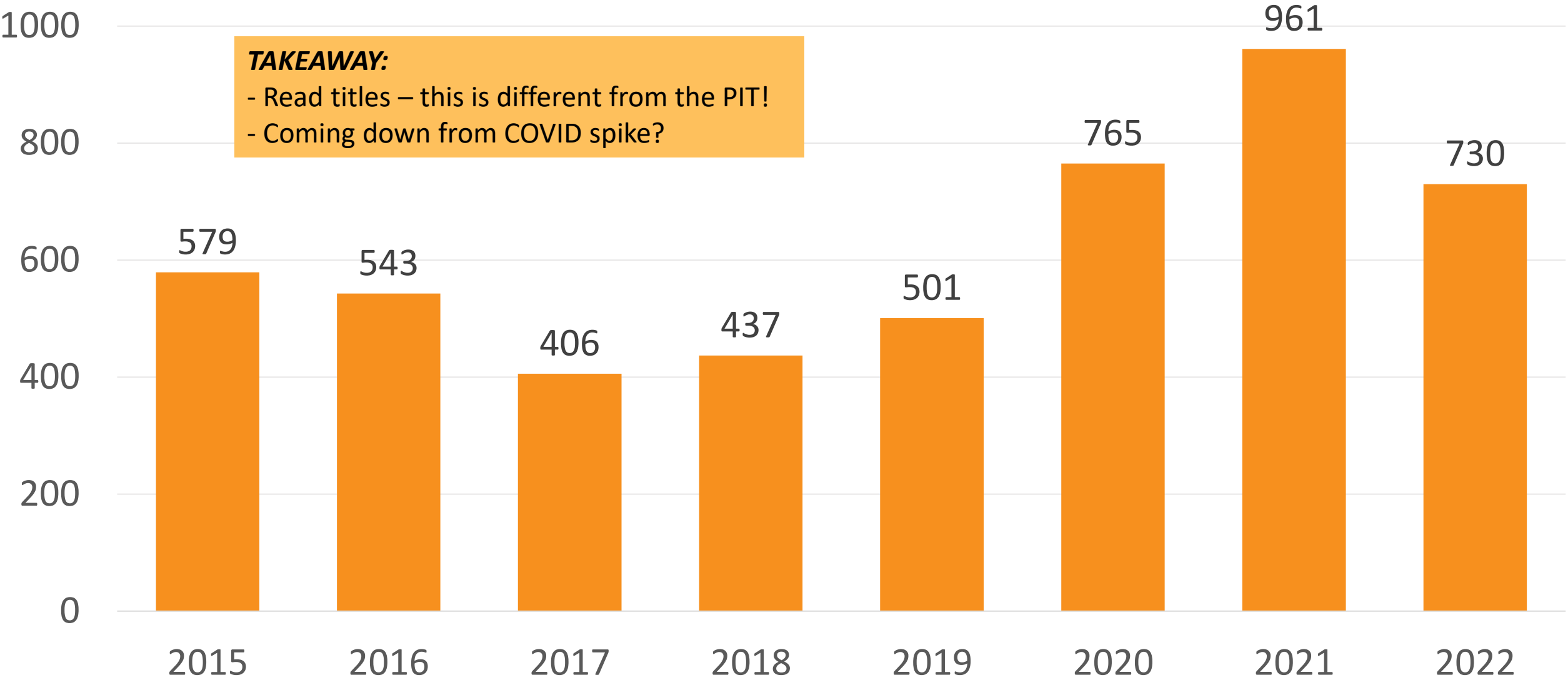
Data source: HMIS CoC APR for VA-513 HOPWA projects, Q21

3. CoC PERFORMANCE REVIEW

Number of individuals staying in emergency shelter over the course of each fiscal year

TAKEAWAY:

- Read titles – this is different from the PIT!
- Coming down from COVID spike?

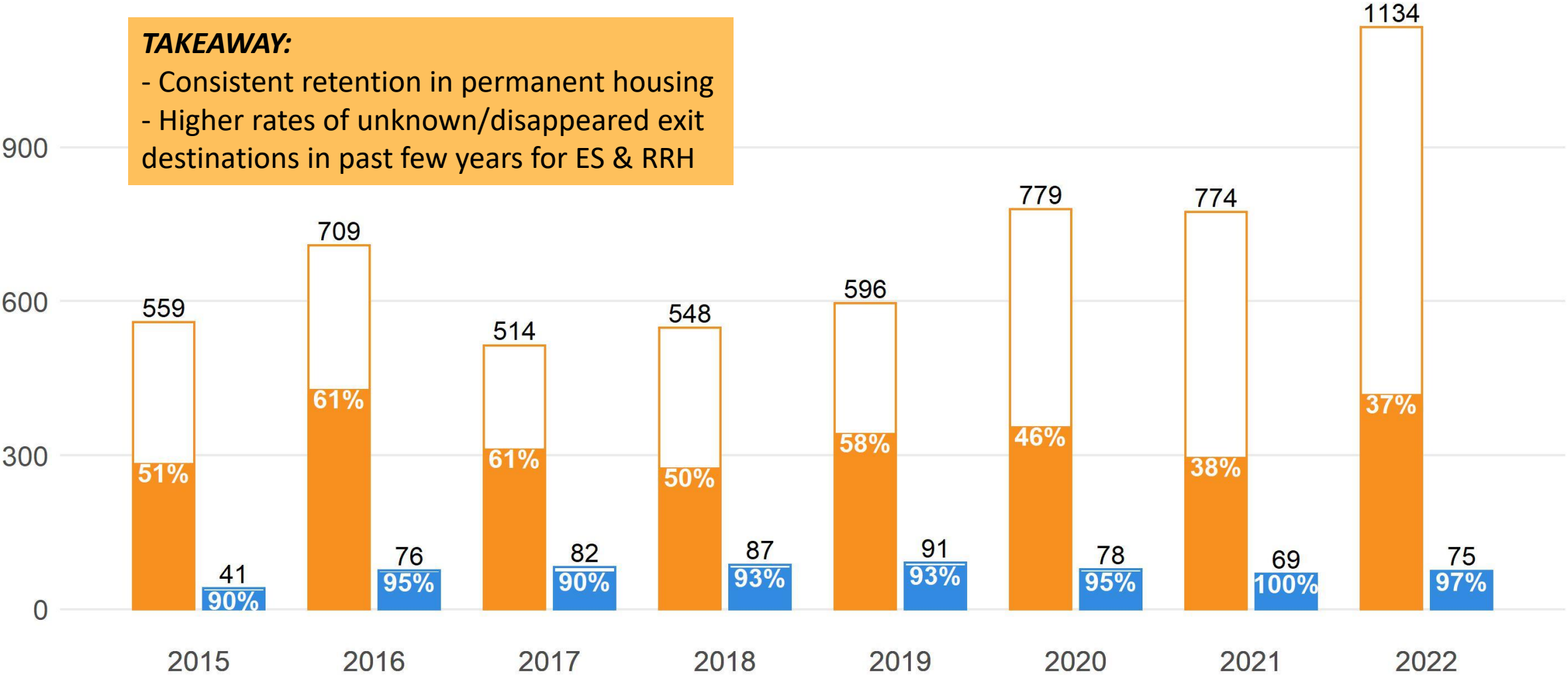


Data source: System Performance Measure #1

Number of people exiting projects and the percent who have successful exit destinations

Emergency Shelter & RRH Permanent Housing

TAKEAWAY:
- Consistent retention in permanent housing
- Higher rates of unknown/disappeared exit destinations in past few years for ES & RRH



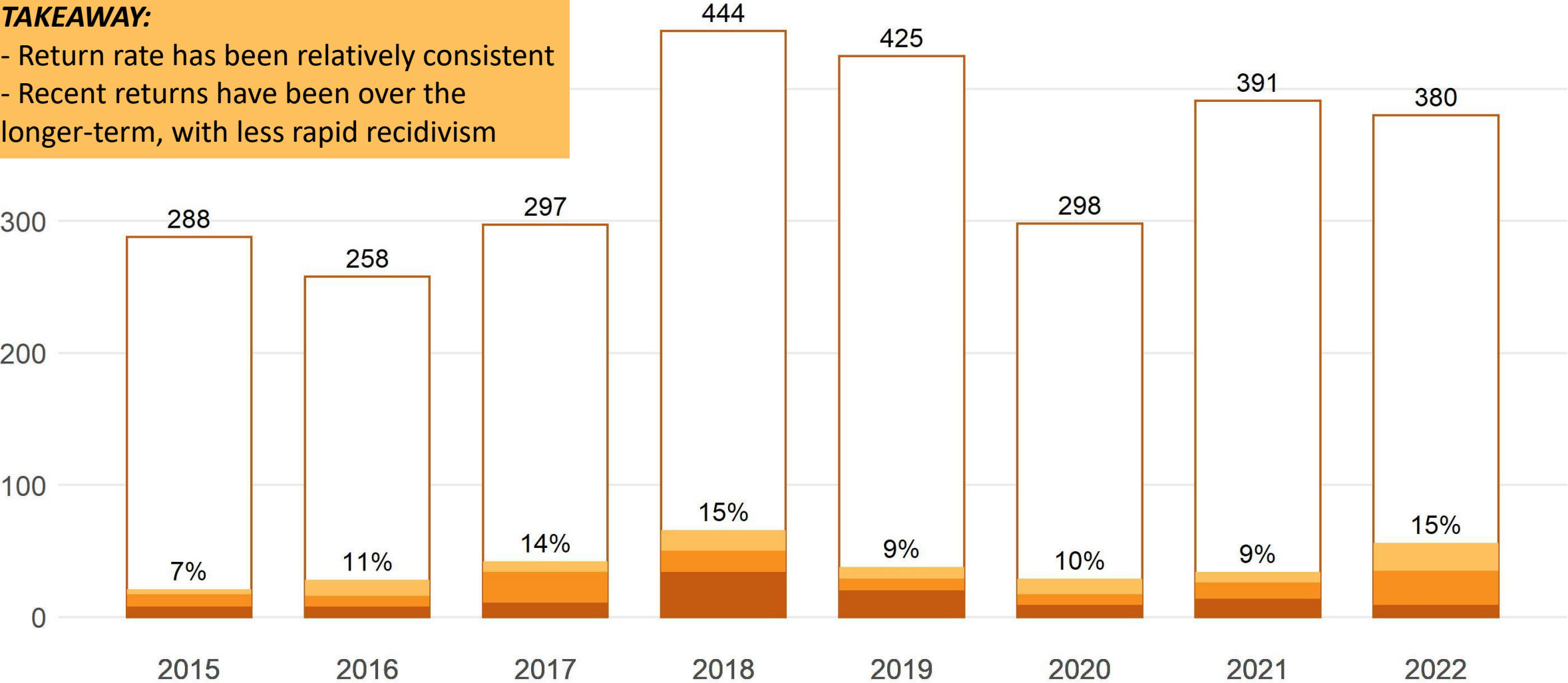
Data source: System Performance Measure #7

Share of people who returned to homelessness after exiting to permanent housing destinations

within 13-24 months within 6-12 months within 6 months

TAKEAWAY:

- Return rate has been relatively consistent
- Recent returns have been over the longer-term, with less rapid recidivism



Data source: System Performance Measure #2

4. TAKE AWAYS



WHAT WILL YOU TAKE AWAY TODAY?

WHAT DO YOU WANT TO KNOW?



Western Virginia Of Care
Continuum

Next Meeting on June 15th

Send agenda item to David

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