

10-Year Plan Reset Committee Responses to Several Background Research Questions

At the March 2012 meeting, Reset Committee members identified a series of questions that they thought would inform the reset process. Most of these questions will be addressed through presentations at the April and May 2012 meetings. A few of the questions seemed more appropriate to respond to in a written narrative rather than a presentation; the responses to those questions are summarized below.

Has the cost savings rationale of the current 10-YP been borne out?

One of the central premises of Portland/ Multnomah County's 10-Year Plan to End Homelessness was that addressing chronic homelessness would result in long-term cost savings by reducing the burden on other systems of care such as hospitals and jails. National and local research studies continue to support this premise. For example, a 2006 study of Central City Concern's Community Engagement Program¹ found a \$15,000 per person cost savings for the first year of enrollment in the program. Similarly, a 2006 cost-benefit analysis of a Denver program² that combines housing first with assertive community treatment services found a \$30,000 per person emergency cost savings over a 24-month period. More recently, a 2010 study by Dennis Culhane found that "Supportive housing models for people with serious mental illness who experience chronic homelessness may be associated with substantial cost offsets, because the use of acute care services diminishes in an environment of housing stability and access to ongoing support services."³

While these and other studies⁴ strongly suggest that Portland/ Multnomah County's 10-Year Plan has probably produced cost savings within other systems of care, those cost savings have not resulted in increased revenue for homeless services. The increased efficiencies still represent good public policy and a wise use of public resources, but the efficiencies have not trickled back into the homeless services system, and it is unrealistic to expect that they would in the future.

¹ Moore, Thomas (2006), "Estimated Cost Savings Following Enrollment in the Community Engagement Program: Findings from a Pilot Study of Homeless Dually Diagnosed Adults", Portland, OR: Central City Concern.

² Perlman, Jennifer, and John Parvensky (2006), "Denver Housing First Collaborative: Cost Benefit Analysis and Program Outcomes Report," Denver, CO: Colorado Coalition for the Homeless.

³ Culhane, Dennis et. al. (2010), "Service Use and Costs for Persons Experiencing Chronic Homelessness in Philadelphia: A Population-Based Study", *Psychiatric Services*.

⁴ For information on additional studies, see <http://www.endhomelessness.org/content/article/detail/2666> and http://www.endhomelessness.org/section/about_homelessness/cost_of_homelessness.

How are we using data collected from the Point-in-Time Count and Homeless Management Information System to inform our service delivery?

All communities that receive federal funding for homeless services are required to conduct a comprehensive Point-in-Time Count every two years in order to continue to receive funding. Data from the counts are required elements of federal competitive grants, such as the Continuum of Care, as well as the Consolidated Plan for Gresham, Portland and Multnomah County. The State of Oregon also requires communities to conduct a One Night Shelter Count (ONSC) every year to help inform the allocation of shelter and housing resources across the state. In addition to fulfilling state and federal requirements, the Point-in-Time counts help local governments and their nonprofit partners to more effectively allocate resources and services necessary to meet the needs of the various homeless populations in our community. Data from the counts also help us to measure how well we are meeting our community's goals to prevent and end homelessness.

All communities that receive federal funding for homeless services are also required to collect standard data elements in a Homeless Management Information System (HMIS). The Portland Housing Bureau implements a regional HMIS using ServicePoint, a web-based data system that allows agencies, coalitions, and communities to manage real-time client and resource data. HMIS data are required elements of federal competitive grants. In addition, HMIS data is used to help local governments and their nonprofit partners to analyze service usage and needs in order to more effectively allocate resources. The use of HMIS data will expand with implementation of the federal HEARTH Act.

What are the challenges and outcomes in the coordinated STRA program?

Home Forward recently reviewed the coordinated STRA (Short-Term Rent Assistance) program. The following tables summarize some of the key findings.

Funds Administered through STRA System Infrastructure 2011-12	
Total	\$4.25 million
Multnomah County	\$1.46 million
City of Portland	\$1.44 million
Home Forward	\$1.30 million
City of Gresham (via PHB)	\$0.04 million

Total includes STRA allocations, Winter Eviction Prevention, Action for Prosperity, and Schools and Housing Stability Fund

Number of Clients Served		
	People	Households
2008-09 Full Year Total	3,911	1,715
2009-10 Full Year Total	5,605	2,299
2010-11 Full Year Total	5,728	2,365

STRA Output: 2006-2011⁵	
Total unduplicated households receiving assistance	9,119
Total unduplicated households receiving homeless placement or eviction prevention assistance	6,480 (71%)
Average length of rent assistance	3 months
Percent of households receiving rent assistance that only received one month of assistance	50%

“Destination” at Exit from STRA Emergency Hotel Voucher Assistance⁶	
Permanent unsubsidized rental housing	67%
Permanent subsidized housing/program	10%
Transitional housing	1%
Temporary with family of friends	3%
Emergency Shelter	6%
Streets	1%
Other/Unknown	12%

Post-Assistance Housing Retention Outcomes (2010-2011)					
Permanent Placement			Eviction Prevention		
3 mo.	6 mo.	12 mo.	3 mo.	6 mo.	12 mo.
86%	78%	70%	88%	83%	74%

Strengths of the unified system

- Jurisdictions working together
- Focus on shared outcomes
- Improved system support and accountability
- Increased flexibility for providers
- Administrative ease for providers
- Ability to use STRA infrastructure to deploy new resources for housing assistance rapidly

⁵ DV household services without client names are excluded for all totals

⁶ Note: These numbers are only for households served with emergency hotel vouchers. The primary purpose of these vouchers is immediate safety, not permanent housing.