
CITY OF VIRGINIA BEACH

STRATEGIC PLAN TO END HOMELESSNESS

2013-2018

October 2013 | Developed by:



PREFACE

This plan is intended to represent the vision of the entire Virginia Beach community to end homelessness. It is the collective work of the BEACH Community Partnership, private citizens, city government, and numerous faith-based, nonprofit and private organizations. This plan is intended to serve the needs of all who experience a housing crisis or homelessness including families, individuals, youth, veterans and people transitioning from institutional living.

Organizations that made contributions and commented on this document include the following:

- Access-Aids
- BEACH Community Partnership
- City of Virginia Beach Departments of Health, Human Services, Housing and Neighborhood Preservation
- Community Alternatives Management Group
- The Endependence Center
- Judeo-Christian Outreach Center
- PIN Ministry
- Potters House
- The Planning Council
- Samaritan House
- Seton Youth Shelters
- Stand Up For Kids
- VetsHouse
- Virginia Beach Community Development Corp
- Virginia Beach Public Schools
- Virginia Organizing
- Virginia Supportive Housing
- Volunteers of America

CREDITS

Lynne Carruth, a consultant working for the city, was the main author of this plan.

John Boylan, Homeless Policy and Resource Coordinator in the Dept. of Housing and Neighborhood Preservation (DHNP), contributed significantly to the content and review.

The final plan was edited by Andrew Friedman, director of DHNP.

TABLE OF CONTENTS

1. INTRODUCTION 1

Homelessness in Virginia Beach Today 1

Understanding the Scope of the Problem 1

The Context for Our Plan 3

Achievements to Date 6

The Challenges that Remain 7

2. VISION AND GUIDING PRINCIPLES 9

3. GOALS AT A GLANCE 10

4. OUR PLAN 13

Goals and Objectives 13

Action Plan 17

5. IMPLEMENTATION, MONITORING AND EVALUATION 29

APPENDIX 1: ACRONYMS AND GLOSSARY OF TERMS 31

APPENDIX 2: EXECUTIVE SUMMARY OF HOUSING CRISIS RESPONSE SYSTEM REPORT

APPENDIX 3: WEBSITE RESOURCES 34

1. INTRODUCTION

HOMELESSNESS IN VIRGINIA BEACH TODAY

There are many reasons why families and individuals become homeless: job loss; mental illness; family breakup; inability to afford housing costs; and health care costs. The impact of homelessness on a community is far reaching and long-lasting. The crisis of homelessness perpetuates itself in poor educational, health, employment and family outcomes for our community's most vulnerable residents. The cost to the community as a whole can be measured by expenditures for police intervention, incarceration, medical treatment and hospitalization, academic remediation and emergency assistance.

It is also important to know that people move in and out of homelessness on an ongoing basis so we cannot point to a single number and say that we have successfully assisted every person or family who will ever become homeless. *But what we can do and have been doing* is to drastically reduce the number of people that become homeless and to shorten the length of time that they experience homelessness; that is our definition of ending homelessness.

UNDERSTANDING THE SCOPE OF THE PROBLEM

The primary sources of data about the homeless in Virginia Beach and their service needs are the annual survey of people who are homeless, known as the Point-in-Time Count (PIT), and the Homeless Management Information System (HMIS), a computerized data collection system used by service providers. The PIT, conducted over a 24-hour period in January of each year, provides an unduplicated count of individuals and families in shelter as well as those living on the street. Data from the January 2013 PIT provides the following information:

Snapshot: Number of Homeless People Counted in January, 2013

- 389 Sheltered (people in shelters or transitional housing)
- 67 Unsheltered (people actually on the street or not in any type of housing or shelter)
- 456 Total People

Of these

- 201 Persons were in Households with children (including 123 children)
- 255 Persons in Households without children

- Chronically Homeless Individuals: People who were continually homeless for a year or more; or have had multiple episodes of homelessness over the past 3 years
 - Approximately 20% of all homeless persons in Virginia Beach were considered chronically homeless – 93 individuals and members of families.
 - This is higher than the national rate of 16%.
 - Approximately 33% were unsheltered – this means about 30 people were chronically homeless and unsheltered.

The following chart depicts subsets of the total homeless population:

Homeless Subpopulation Groups Identified During the 2013 PIT Count
note: some persons are counted in more than one category in this chart.

	Sheltered	Unsheltered	Total
	Persons in emergency shelters, transitional housing and safe havens		
Total Number of Veterans (including female Veterans)	69	9	78
Number of Female Veterans (subset of all Veterans)	12	0	12
Severely Mentally Ill	56	21	77
Chronic Substance Abuse	60	19	79
Persons with HIV/AIDS	4	0	4
Victims of Domestic Violence	58	17	75
Chronically Homeless Individuals	59	30	89
Chronically Homeless Families (Total Number of Families)	1	0	1
Chronically Homeless Families (Total Persons in Household)	4	0	4

In the 2011-12 school year, **637** students were identified as living in households considered homeless or at risk of homelessness. This information comes from Virginia Beach City Public Schools Project Hope, which is required to identify, assist and report on students experiencing or at-risk of homelessness.

How Virginia Beach's Homelessness Compares to Other Cities

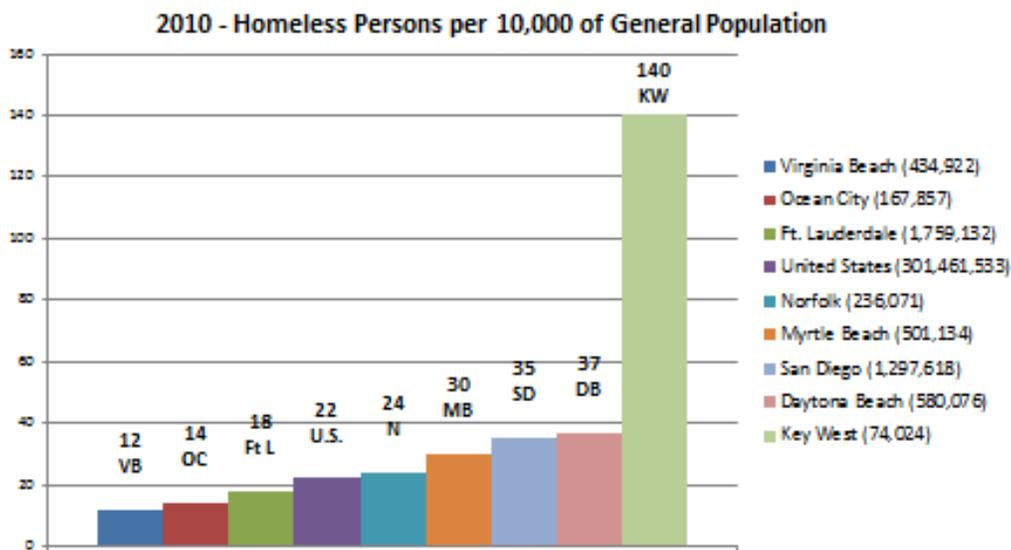
Virginia Beach's rate of homelessness is about 12 persons per 10,000. Based upon a comparison of data from 2010, that is the lowest for regional cities, the state, and comparable cities in the nation. We hope that our low rate is, at least in part, a result of efforts to date, but we still recognize the need to continue to improve.

The following chart compares rates of homelessness as reported to HUD in 2010:



OUR HOMELESS

How Do We Compare to Other Cities and the U.S. as a Whole?



THE CONTEXT FOR OUR PLAN

The City's Role in Ending Homelessness and How our System has Worked

The City has taken an active role in addressing homelessness since 1984 by working with non-profit, faith-based and regional partners to plan and implement programs addressing homelessness. Many of the existing organizations and services in Virginia Beach were started as initiatives by faith organizations who recognized that a separate non-profit was needed to carry out homeless assistance programs and obtain grants. Our system has always been a combination and/or partnership of government, faith organizations and non-profits working together.

The City has played various roles in the system but, in general, our approach has been to help lead, organize and partially fund the system of services that are primarily delivered by non-profit and faith

organizations. We have been the lead agency for the Virginia Beach Continuum of Care, helping to obtain and maintain key funding received directly from HUD by many of the non-profit service providers. We have been a key funder of services, but certainly not the only one. We have been a facilitator and supporter of community planning and dialogue to address homelessness and a participant and leader in regional planning and decision-making.

As we adopt this plan, we envision the City continuing to play these roles, but to also take a more active role as a catalyst and/or mobilizer of networks of organizations that will address key challenges. The City will also act as a funder of key and required elements of the more comprehensive and organized system necessary for success.

Our current system of services, in many ways, has “just grown” over time through the efforts of many groups and individuals. This is both a strength and a weakness. It is a strength because of the diversity of effort exerted, the initiative of each individual, faith congregation and non-profit and the creativity brought to address the problem. The weakness lies in the lack of consensus on the approaches and system for addressing the problems and lack of a unified decision-making process. Given that our system will always be composed of independent organizations, it will, to a certain extent, continue to depend on the good will of all involved to work cooperatively. As cooperation and coordination are also mandated for those who receive Federal funds, we expect that significant progress will be made, while striving to maintain the balance between coordination and independence.

The most recent plan addressing homelessness was adopted by City Council in 2007; this update, the 2013 Strategic Plan to End Homelessness, builds upon and expands the 2007 plan. It incorporates progress to date, new research and addresses the following key items:

- In May 2013, the City Council approved design funding for a Housing Resource Center to be located at 104 N. Witchduck Road.
- A new Federal law called the HEARTH Act requires that certain changes to every city’s homeless services system be in effect by August 2014.
- A study of the city’s housing crisis response system, completed in spring 2013, recommended changes to how our system is organized and operated.

Other Plans

In addition to the items listed above, this plan has been developed and will be executed in the context of overall city goals and plans including related plans for housing. This is a major consideration that will support the overall success of multiple city goals. These relevant city plans and guidance documents include the annually-developed City Council Priorities and the Comprehensive Plan – especially Chapter 10 - the Housing and Neighborhood Plan. These documents define key city goals, including housing options that serve people at all income levels and life stages. Additional plans and programs that are relevant include:

- The HUD Consolidated Plan, which identifies priorities, funding and programs to meet the housing needs of low and moderate income persons.
- The Homeless Continuum of Care strategy, which defines our current system of services for the homeless and provides significant funding for them.
- The regional “Housing Opportunities for People with AIDS” plan, which guides the use of Federal HOPWA funds.
- The Workforce Housing Program designed to enhance affordable housing opportunities so that vital members of the workforce can afford to live and work in Virginia Beach.

In addition, since so much of the funding for homeless services and affordable housing is federal, federal housing funding and regulations play a significant role in determining what can be done.

Regional Relationships

Regional cooperation is an essential element in addressing homelessness because we have a regional housing market; because we have organizations that work throughout the region; because people seeking housing don’t care about city boundaries; and because, through regional cooperation, we can solve problems by sharing resources and costs and thereby reduce the costs to individual localities and taxpayers.

Virginia Beach has been an active participant in the South Hampton Roads Regional Taskforce on Ending Homelessness since 2005, when it was created. The Task Force consists of the cities of Chesapeake, Franklin, Norfolk, Portsmouth, Suffolk, and Virginia Beach, and Isle of Wight County, The Planning Council and the United Way of South Hampton Roads. The taskforce develops and implements regional activities.

The best example of the success of regionalism has been the creation of efficiency apartment developments for formerly homeless people. Since 2006, four apartment developments consisting of a total of 240 units have been developed and are occupied by formerly homeless single people. These developments were built by Virginia Supportive Housing, a statewide non-profit and received financial support from multiple cities. For example, the most recent development, Heron’s Landing in Chesapeake, received financial support from Norfolk, Portsmouth, Chesapeake, Suffolk and Virginia Beach. By supporting these projects jointly, the cities have created far more housing than they could have individually. The regional nature of the projects has also attracted additional federal, state and private funding, so that millions of dollars of non-city funding has been leveraged to help build and operate these developments.

The HEARTH Act

In 2009, Congress enacted the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act which requires significant changes in the way communities plan and deliver services. Communities must now operate as a coordinated service delivery system rather than as a collection of individually funded projects. Specific requirements include a coordinated assessment process, performance-based funding, a focus on homeless prevention and permanent housing and an inclusive governance structure with representation from all service providers, not just those receiving federal funding. Implementation of HEARTH Act requirements is critical to ensuring the continuation of annual federal funding of approximately \$1.4 million.

The Housing Resource Center

The Housing Resource Center will replace and expand upon the services currently offered at the Lighthouse Center. The Housing Resource Center will serve as the focus for our community's effort to end homelessness through coordination of intake, assessment, services and referrals for families and individuals.

Currently in the planning stage, the center will be located at 104 North Witchduck Road. Facilities and services will include day services and emergency shelter for families and individuals. Permanent affordable housing may also be included on the site. The center is expected to be operational by the fall of 2017.

ACHIEVEMENTS TO DATE

Significant progress has been made since the first receipt of federal emergency shelter grant funding in 1984. Many major projects and programs have successfully enhanced what existed over 30 years ago to create what we have today. There are multiple major milestones that have been achieved by all involved agencies. The development of this plan is intended to build on and improve what has been created to date. A few of the key dates and important achievements are highlighted below:

- 1984: First receipt of Federal Emergency Shelter Grant funding—used to help fund the **Winter Shelter program**, a partnership of faith congregations, a non-profit and the city, which provides shelter at city churches from October through April. This program has now been operational for 29 years, and for the last 20 has been operated by Volunteers of America.
- 1984: Samaritan House, providing shelter to victims of domestic violence and homeless families, is organized.
- 1985: Mother Seton House, now called Seton Youth Shelters, is formed. It provides shelter to homeless and runaway youth.

- 1985: Virginia Beach Community Development Corporation (VBCDC) is formed by the City Council. VBCDC provides affordable housing and homeless services, and now owns over 300 units of affordable housing.
- 1986: Fire Escape on 17th & Pacific opens; later becomes Judeo-Christian Outreach, which provides shelter for the homeless as well as a daily dinner for all those in need, in partnership with area churches.
- 1988: Community Alternatives, a non-profit to serve the housing needs of mentally ill and substance abuse persons, including the homeless, is formed; it now houses participants in Dept. of Human Services programs as well as others.
- 1994: City coordinates the first continuum of Care application to HUD and is successful in receiving Federal funds; the application has been successfully submitted and funded each year since then.
- 1996: The Lighthouse Center construction is completed. The Center becomes the gathering site for the Winter Shelter and provides daytime services such as laundry, showers and access to services.
- 2005: The South Hampton Roads Regional Task Force to End Homelessness is chartered by Southside Mayors and Chairs and begins work.
- 2006: Gosnold Apartments (60 apartments) opens, the first of four regional efficiency apartment developments for the homeless.
- 2007: City council adopts the city's first Ten Year Plan to End Homelessness .
- 2008: Cloverleaf Apartments (60 apartments), the 2nd efficiency apartment development, opens in Virginia Beach.
- 2009: The BEACH Community Partnership is formed.
- 2010: South Bay Apartments (60 apartments) in Portsmouth opens, the third regional project.
- 2011: Judeo Christian Outreach opens 22 units of permanent and transitional housing for veterans.
- 2013: Study of Virginia Beach's homeless services system by OrgCode, Inc. completed.
- 2013: City Council authorizes design funding for the Housing Resource Center.
- 2013: Heron's Landing Apartments (60 apartments) in Chesapeake opens.
- 2013: City Council rezones property for Crescent Square Apartments (80 apartments).
- 2013: Cedar Grove Apartments opens, providing 32 units of permanent housing for veterans.

THE CHALLENGES THAT REMAIN

Despite the many successes achieved both in Virginia Beach and regionally, we recognize that challenges remain. There are still hundreds of people who are homeless and families who face housing crises daily. This plan is designed to address many of those challenges and accelerate our progress.

Among those challenges, as identified in the study of our system conducted by OrgCode in 2013, are the following:

1. We do not have a fully integrated system of services. There are no clearly defined pathways to obtain services and there are multiple access points, some of which work more efficiently than others.
2. Data on homelessness and homeless services is not as accurate or complete as it could be.
3. Providers do not use a common assessment system to determine the needs of homeless persons. As a result, consistent and appropriate service plans and referrals are not done as frequently as they could be and service plans may not be as effective as possible.
4. Providers across the system are not necessarily aware of or have easy access to information about all components of the system which limits their ability to assist persons they encounter.
5. Our system does not yet comply with the requirements of the federal HEARTH Act.
6. We need to implement best practices in addressing homelessness, both at the program level and in individual capability, through training about available tools and approaches.
7. There have been significant reductions in funding of federal housing and homeless programs that reduce the resources available to achieve our goals

2. VISION AND GUIDING PRINCIPLES

An effective plan requires a vision of what we're trying to achieve and principles that guide how decisions are made. This vision and principles are proposed based on discussions and decisions made by the BEACH Community Partnership as well as on how work is already done:

Our Vision

Realizing our personal and collective responsibility to our fellow man, we mobilize our community to prevent and end homelessness. We envision a future where everyone in Virginia Beach will be able to live in safe, decent and affordable housing.

The Principles that Guide this Plan and Our Work

- We believe that **we can prevent and end homelessness** in Virginia Beach for individuals and families. This means that we can **drastically reduce its occurrence and shorten the length of time** that people are homeless.
- Homelessness creates both direct and indirect costs to our community; ending homelessness will both **reduce those costs and create other benefits for the entire community**.
- We will end homelessness through the **active collaboration of all sectors of our community**. The BEACH Community Partnership represents our community's coordinated effort to do this.
- We must invest our resources in solutions that are shown to be **effective and sustainable**.
- We will work cooperatively with our **local and regional partners** to ensure that we do the most effective work with the lowest possible cost to taxpayers and other funders. Our regional work will focus on what can best be achieved together, while recognizing that some efforts require a local approach.
- We will focus our efforts on **prevention** of homelessness, **diversion** to other community and family supports **and rapid rehousing**; our programs will provide the least amount of assistance necessary to ensure housing stability.
- Our community will provide opportunities to help people avoid and end homelessness and **we rely on those who experience it to take maximum advantage of those opportunities**.
- Our service system will be **person-centered**, ensuring that homeless families and individuals play an active role in defining their needs and wants and are supported to obtain services that best achieve those goals. **The person, not the system, is in charge of defining the direction for their lives**. This includes ensuring that the needs of special populations are met and that all who need opportunities to avoid or end homelessness are served appropriately.
- We will use **defined and measurable outcomes** to determine the results of our work and how it can be improved.

3. GOALS AT A GLANCE

Our plan is organized around four broad goals designed to have a significant impact on homelessness. Together, these goals represent a comprehensive approach to ending homelessness by developing a more efficient, effective and coordinated delivery system for services and housing. Accompanying each goal is a discussion of why it is important and its expected impact. A more detailed look at the goals, with objectives and action steps, is presented in Section 4.

GOAL 1: INCREASE LEADERSHIP, COLLABORATION, INNOVATION AND CIVIC ENGAGEMENT IN OUR COMMUNITY EFFORTS.

Rationale: Ending homelessness only occurs where there is a strong, informed community commitment and partnership evidenced by the involvement and support of business and civic leaders, public officials, faith-based volunteers and providers of housing, human services and health care.

Although significant progress has been made, collaboration across all sectors must be increased to establish and implement action plans that will end homelessness. There must also be additional ongoing opportunities for citizen engagement through educational programs, volunteerism and public-private partnerships.

Innovation - in the use of resources, interaction with our partners and how we work with our homeless citizens - has been a key factor in development of model programs, such as creation of four regional efficiency apartments and must continue to inform our work.

What impact will achieving this goal have? Greater involvement, better coordination and more innovation will generate new ways to achieve our goals and more support for achieving them.

GOAL 2: CREATE A COLLABORATIVE SYSTEM OF SERVICE DELIVERY AND ACCESS THAT EFFECTIVELY AND EFFICIENTLY CONNECTS PEOPLE TO SERVICES THAT MEET THEIR BASIC NEEDS AND SUPPORT HOUSING STABILITY.

Rationale: For this plan to be successful it is necessary that services for persons who experience homelessness operate as a cohesive, comprehensive system. The system must incorporate all services in the community, whether they are part of the non-profit, government or non-governmental sector. The assistance provided must also ensure that the basic needs for shelter and food are met as well as access to stable housing.

The federal HEARTH Act creates some of the rationale for this goal. The HEARTH Act requires significant changes to the way localities deliver homeless services. Communities must now operate as a service delivery system rather than as a collection of individually funded projects. Funding will be predicated on

meeting specific performance measures.

Our current system is moving in the direction of better collaboration but additional improvements can be made. A successful model for coordinated service delivery is through networks of agencies and community volunteers who collaboratively provide services to address specific issues such as chronic homelessness, homeless families or healthcare.

Some challenges to achieving this goal are the number of current service providers, multiple service locations and multiple access points with limited coordination and data-sharing among them. There is no single pathway for a person to follow to obtain the services they need nor is there a coordinated assessment process and provision of referrals. This results in duplication of effort as clients must be re-assessed at every entry point. Additional barriers to service include lack of standard criteria for program entry, limited prevention funds and inadequate emergency shelter space.

What impact will achieving this goal have? People experiencing homelessness will find an organized system that is easy to access, easy to navigate and efficiently directs them to available services and housing. Service providers will more effectively and efficiently connect clients with needed services by having a defined system of services and access to accurate, real time information.

GOAL 3: INCREASE AND MAINTAIN THE SUPPLY OF AND ACCESS TO PERMANENT, ACCESSIBLE AND AFFORDABLE HOUSING.

Rationale: One of the fundamental causes of homelessness is the gap between a household's income and the cost of housing. People are generally extremely poor at the time they become homeless. An adequate supply of housing that is affordable is a permanent, cost effective solution to homelessness that provides benefits to the entire community.

The relatively high cost of housing in Virginia Beach poses a significant challenge to lower income families. 2011 data indicates that nearly 42% of all households are cost-burdened – paying more than 30% of their income for housing, the accepted standard for housing affordability. For very low-income households living in rental units, with incomes of \$20,000 or less, the challenge is even greater; 94% of these households are paying more than one third of their income for rent. Such households are at risk of homelessness through a single event such as loss of employment or a medical emergency.

Compelling evidence of the housing affordability crisis was demonstrated in September 2012, when applications were accepted for Virginia Beach Housing Choice vouchers, a federally funded rental subsidy. In one week, approximately 5,000 applications for assistance were received from residents of Virginia Beach alone.

What impact will achieving this goal have? There will be an increase in the number of affordable housing opportunities available to people who were previously homeless or at risk of homelessness. This will help reduce the number of people who are homeless.

GOAL 4: DEVELOP SUSTAINABLE RESOURCES TO SUPPORT OUR ONGOING COMMUNITY EFFORT.

Rationale: Predictable and sustainable funding for programs is required to achieve the goals of our plan. In an era of diminished federal funding and economic uncertainty, it is important to identify new and diversified revenue sources, redirect existing funding to support high performance programs and create partnerships to leverage new resources.

What impact will achieving this goal have? A net increase in funding for homeless programs and services creating a level of services and housing more closely aligned with community needs.

4. OUR PLAN

GOALS AND OBJECTIVES

Presented here, again, are the four broad goals that must be achieved to end homelessness in Virginia Beach. We have added specific objectives that break down the goal into manageable parts. In a separate section, a detailed action plan lists steps to achieve each objective and identifies the lead agency and a timeline for the action.

Goal 1: Increase leadership, collaboration, innovation and civic engagement in our community efforts.

Rationale: Ending homelessness only occurs where there is a strong, informed community commitment and partnership evidenced by the involvement and support of business and civic leaders, public officials, faith-based volunteers and providers of housing, human services and health care.

Although significant progress has been made, collaboration across all sectors must be increased to establish and implement action plans that will end homelessness. There must also be additional ongoing opportunities for citizen engagement through educational programs, volunteerism and public-private partnerships.

Innovation - in the use of resources, interaction with our partners and how we work with our homeless citizens - has been a key factor in development of model programs, such as creation of four regional efficiency apartments and must continue to inform our work.

Objective 1.1

Strengthen the capacity of key public and private organizations to prevent and end homelessness.

Objective 1.2

Increase community knowledge about homelessness and our community's efforts, successes and challenges.

Objective 1.3

Maintain and expand partnerships with all those who wish to be part of the effort.

Goal 2: Create a collaborative system of service delivery and access that connects people to services that meet their basic needs and support housing stability.

Rationale: For this plan to be successful, it is necessary that services for persons who experience homelessness operate as a cohesive, comprehensive system. The system must incorporate all services in the community whether they are part of the non-profit, government or non-governmental sector. The assistance provided must also ensure that the basic need for shelter and food are met as well as access to stable housing.

The federal HEARTH Act creates some of the rationale for this goal. The HEARTH Act requires significant changes to the way localities deliver homeless services. Communities must now operate as a service delivery system rather than as a collection of individually funded projects. Funding will be predicated on meeting specific performance measures.

Our current system is moving in the direction of better collaboration but additional improvements can be made. A successful model for coordinated service delivery is through networks of agencies and community volunteers who collaboratively provide services to address specific issues such as chronic homelessness, homeless families or healthcare.

Some challenges to achieving this goal are the number of current service providers, multiple service locations and multiple access points with limited coordination and data-sharing among them. There is no single pathway for a person to follow to obtain the services they need nor is there a coordinated assessment process and provision of referrals. This results in duplication of effort as clients must be re-assessed at every entry point. Additional barriers to service include lack of standard criteria for program entry, limited prevention funds and inadequate emergency shelter space.

Objective 2.1

Adapt our current system to ensure that it incorporates all components required by the federal HEARTH Act using recognized best practices.

Objective 2.2

Replace and enhance the services provided by the Lighthouse Center by creating a Housing Resource Center as the focus for our community's effort to end homelessness through coordination of intake, assessment, services and referrals for families and individuals.

Objective 2.3

Mobilize and support the coordination of community providers, volunteers and institutions to create or strengthen networks that address critical components of the services system such as chronic homelessness, homeless families or healthcare.

Objective 2.4

Ensure that the system reaches and effectively serves all those in need, including special needs populations, using person-centered principles and practices.

Objective 2.5

Continually enhance the professionalism, effectiveness and accountability of the services system.

Objective 2.6

Provide appropriate shelter and survival assistance to ensure that the homeless are safe and protected as they transition from homelessness to stable housing.

Goal 3: Increase and maintain the supply of and access to permanent, accessible and affordable housing.

Rationale: One of the fundamental causes of homelessness is the gap between a household's income and the cost of housing. People are generally extremely poor at the time they become homeless. An adequate supply of housing that is affordable is a permanent, cost effective solution to homelessness that provides benefits to the entire community.

The relatively high cost of housing in Virginia Beach poses a significant challenge to lower income families. 2011 data indicates that nearly 42% of all households are cost-burdened – paying more than 30% of their income for housing, the accepted standard for housing affordability. For very low-income households living in rental units, with incomes of \$20,000, the challenge is even greater; 94% of these households are paying more than one third of their income for rent. Such households are at risk of homelessness through a single event such as loss of employment or a medical emergency.

Compelling evidence of the housing affordability crisis was demonstrated in September 2012, when applications were accepted for Virginia Beach Housing Choice vouchers, a federally funded rental subsidy. In one week, approximately 5,000 applications for assistance were received from residents of Virginia Beach alone.

Objective 3.1

Continue to develop affordable housing units through new construction and conversion of existing transitional housing to permanent housing, as determined by community needs.

Objective 3.2

Avoid losses of existing affordable housing units through ongoing review of rehabilitation needs and financing and program requirements.

Objective 3.3

Increase financial subsidies and other support for access to rental housing.

Objective 3.4

Continue to create partnerships with non-profit and private sector housing developers for development of affordable housing.

Objective 3.5

Ensure an adequate supply of housing that is appropriate for special needs populations.

Goal 4: Develop sustainable resources to support our ongoing community effort.

Rationale: Predictable and sustainable funding for programs is required to achieve the goals of our plan. In an era of diminished governmental funding and economic uncertainty, it is important to identify new and diversified revenue sources, redirect existing funding to support high performance programs and create partnerships to leverage new resources.

Objective 4.1

Increase the availability of funding for proven assistance programs and new initiatives that end homelessness.

Objective 4.2

Identify and obtain new non-monetary resources.

Objective 4.3

Partner regionally and statewide in resource development in order to ensure a net increase in available funding.

ACTION PLAN

This part of the plan proposes specific actions, lead actors, benchmarks to measure their achievement and dates by which they should be achieved.

GOAL 1: INCREASE LEADERSHIP, COLLABORATION, INNOVATION AND CIVIC ENGAGEMENT IN OUR COMMUNITY EFFORTS.			
Objective 1.1: Strengthen the capacity of key public and private organizations to prevent and end homelessness.			
Action Steps	Lead	Benchmark	Date
Increase city staff support for the community's efforts to prevent and end homelessness.	DHNP	Hire Homeless Coordinator. AmeriCorps volunteer starts.	October 2013 and February 2014
Continue to support BEACH as the organization where we plan to end homelessness in Virginia Beach.	DHNP	BEACH is viewed by stakeholders as the place where plans and issues are discussed.	Ongoing
Strengthen the community governance system to enhance coordination, collaboration and insure compliance with the HEARTH Act. Ensure broad community membership including schools, Police, key health care providers and workforce development organizations.	DHNP BEACH Continuum of Care (CoC)	A new governance system meeting HEARTH Act requirements and community needs is created.	June 2014
Ensure that BEACH has full representation from all key groups, including homeless and/or formerly homeless persons.	BEACH Exec. Committee	BEACH membership reflects this.	January 2014
Expand use of the Charity Tracker data collection system in the faith-based community.	BEACH	New faith communities begin and continue using the system.	Ongoing

Ensure the availability of high quality, timely data on homelessness to facilitate targeting interventions, evaluating results, strategic planning and resource allocation.	VBCDC and CoC HMIS Committee	Monthly reports based on HMIS created and distributed.	Ongoing
Objective 1.2: Increase community knowledge about homelessness and our community's efforts, successes and challenges			
Action Steps	Lead	Benchmark	Date
Enhance the BEACH website to serve as the primary online information source about preventing and ending homelessness.	DHNP	Website complete. Information regularly updated.	November 2013
Publish and widely disseminate quarterly and annual reports documenting progress toward achieving plan goals. Consider a monthly report of numbers of people housed consolidating info from all agencies.	DHNP	Reports created, distributed and posted on DHNP and BEACH websites.	January 2014
Provide ongoing opportunities for people to engage in and learn about our efforts.	DHNP BEACH	Regularly scheduled events and publications about homeless issues.	ongoing
Objective 1.3: Maintain and expand partnerships with all those who wish to be part of the effort.			
Action Steps	Lead	Benchmark	Date
Create a Community Advisory Committee to provide community input on development of the Housing Resource Center.	DHNP	Committee appointed; Regular meetings scheduled.	December 2013
Create partnerships with higher education institutions to provide interns and volunteers to support the system and key services.	DHNP and other stakeholders	Agreements and programs with local institutions developed.	March 2014
Develop an employment and training program in partnership with the Regional Task Force to End Homelessness.	DHNP and key stakeholders	Employment program developed.	2015

Continue active participation in the Regional Taskforce to End Homelessness.	DHNP	Development of regional projects and programs that have win/win results for the city. Projects initiated include: The Healing Place; employment and training; HMIS; and regional conferences.	Ongoing
--	------	--	---------

GOAL 2: CREATE A COLLABORATIVE SYSTEM OF SERVICE DELIVERY AND ACCESS THAT CONNECTS PEOPLE TO SERVICES THAT MEET THEIR BASIC NEEDS AND SUPPORT HOUSING STABILITY.

Objective 2.1: Adapt our current system to ensure that it incorporates all components required by the federal HEARTH Act using recognized best practices.

Action Steps	Lead	Benchmark	Date
Create a comprehensive system plan to address HEARTH requirements, including governance, coordinated intake and assessment, consistent standards for service and a performance assessment system.	DHNP and BEACH CoC Committee	Individual component plans adopted throughout early 2014. Full system plan adopted and implemented by August, 2014	August 2014
Improve and enhance efforts for diversion, prevention, short-term emergency housing, access to mainstream resources and housing-focused case management.	DHNP	A central system implementing these activities will be in place. 200 individuals or families are diverted and assisted with less than 5% recidivism.	September 2015 September 2016
Reposition shelters to provide short-term housing only with reduced barriers to access, unified standards and procedures and a focus on accessing permanent housing.	DHNP	Emergency shelter usage is consistently less than 250 unique individuals annually and lengths of stay do not exceed 3 months.	2018

Support and invest in “Housing First” and Rapid Re-Housing models for homeless families and individuals that provide housing-focused case management and resources necessary for housing placement.	DHNP	Housing First and Rapid Re-Housing programs implemented.	2016
Enhance and expand the regional Homeless Management Information System to improve client data and support service delivery, evaluation and communication between providers.	The Planning Council VBCDC BEACH COC HMIS Committee	Timely, accurate data and reports are available to service providers.	April 2014
Objective 2.2: Replace and enhance the services provided by the Lighthouse Center by creating a Housing Resource Center as the focus for our community’s effort to end homelessness through coordination of intake, assessment, services and referrals for families and individuals.			
Action Steps	Lead	Benchmarks	Date
Develop the Housing Resource Center.	DHNP	Housing Resource Center constructed and operational.	Fall 2017
Develop services plan for relocation of appropriate current services and creation of new services for the Housing Resource Center, to include physical and virtual access.	DHNP and all stakeholders	Services plan developed. Services plan implemented.	March 2014 Fall 2017
Work with churches and providers to modify the system of assistance in the Oceanfront area to reduce the impact on area neighborhoods and increase coordination and effectiveness of services.	DHNP	Oceanfront services to the homeless are assessed and modified to maximize collaboration, efficiency and a reduction in homelessness.	2015

Work with the VB Police Department to enhance non-enforcement outreach and engagement efforts to homeless persons in the Oceanfront area.	VB Police DHNP DHS	Non-enforcement outreach staffing is developed and assigned to work in collaboration with DHNP and DHS	April 2014
Objective 2.3: Mobilize and support the coordination of community providers, volunteers and institutions to create or strengthen networks that address critical components of the services system such as chronic homelessness, homeless families or healthcare.			
Action Steps	Lead	Benchmark	Date
Identify new and existing key networks as well as current and potential members of each network.	DHNP DHS DH	Key networks and members identified.	2013
Develop a plan for each identified network that defines the goals and activities of those networks in detail.	DHNP	Plans drafted and actions begun. Key networks: Family homelessness with VB public school participation; Oceanfront homelessness issues; Disconnected youth.	2014
Objective 2.4: Ensure that the system reaches and effectively serves all those in need, including special needs populations, using person-centered principles and practices.			
Action Steps	Lead	Benchmark	Date
Expand and enhance outreach using appropriate staffing and skills to reach chronically homeless persons and families, individuals exiting institutions and nursing homes, veterans, disconnected youth and other special needs populations.	DHNP DHS	32 individuals annually access housing and support directly from the street. 25 homeless vets annually access VA benefits with 80% accessing supportive housing.	2014

Enhance existing and create new partnerships with the corrections, behavioral health, health and foster care systems to prevent people being discharged to homelessness. Include reviews of discharge policies and pre-discharge housing planning.	BEACH CoC	Memoranda of Agreement and other protocols developed.	2016
Assist persons experiencing homelessness and those at-risk to access all available behavioral and/or physical health services for which they are eligible.	DHNP DHS DH	Behavioral and physical health services available as needed.	2016
Develop a plan to provide medical respite shelter beds.	DHNP DH Other health stakeholders	5 respite shelter beds provided.	2017
Develop The Healing Place to serve the chronically homeless with substance abuse issues.	The Planning Council The Healing Place, Inc.	The Healing Place developed.	2018
Objective 2.5 Continually enhance the professionalism, effectiveness and accountability of the services system.			
Action Steps	Lead	Benchmarks	Date
Create a regional professional development curriculum that addresses key knowledge gaps, including housing-focused case management, outreach for special needs populations and person-centered planning and support.	DHNP Hampton Roads Community Foundation The Planning Council City of Norfolk	Training program launched.	March 2014

Develop a partnership, or contract, for an external monitoring/ evaluation process that provides regular, objective and data-based analysis and evaluation of individual programs and overall system performance.	DHNP	Agreement or contract in place.	June 2014
Ongoing evaluation reports begin.	DHNP	Report developed, reviewed and circulated.	December 2014
Objective 2.6: Provide appropriate shelter and survival assistance to ensure that the homeless are safe and protected as they transition from homelessness to stable housing.			
Action Steps	Lead	Benchmarks	Date
Implement Family Emergency Shelter Pilot Program.	BEACH Family Committee	Program operational.	March 2014
Create shelter beds for families and individuals in the Housing Resource Center.	DHNP	Shelter beds available at Housing Resource Center. Unsheltered homeless decrease by a minimum of 50%.	2017 2018
Expand the current faith-based Winter Shelter Program to a 12 month program on an interim basis, pending construction of the Housing Resource Center.	DHNP	City Council approves funding to establish 12 month program.	January 2014

GOAL 3: MAINTAIN AND INCREASE THE SUPPLY OF, AND ACCESS TO, PERMANENT, ACCESSIBLE AND AFFORDABLE HOUSING.

Objective 3.1: Continue to develop affordable housing units through new construction and conversion of existing transitional housing to permanent housing, as determined by community needs.

Action Steps	Lead	Benchmarks	Date
Ensure completion of Crescent Square Apartments.	Va. Supportive Housing	80 efficiency apartments for individuals built and occupied.	March 2015
Facilitate completion of Baker Woods Apartments.	Lawson Company	96 apartments for families built and occupied.	March 2015
Assess existing transitional housing and identify units appropriate for conversion to permanent rental housing.	BEACH CoC	Units converted to permanent housing, as determined by assessment	2016
Develop affordable housing in conjunction with the Housing Resource Center.	DHNP	Permanent affordable housing developed.	2018
Continue to work with regional and local partners to develop SRO projects and other scattered site housing.	DHNP City of Norfolk	80 additional SRO and other affordable housing units developed; re-assess need to ensure supply is matched to need.	2016
Review the zoning and other housing-related codes to identify barriers to affordable, accessible housing.	DHNP	Review conducted and code amendments made, as appropriate.	2015

Objective 3.2: Avoid losses of existing affordable housing units through ongoing review of rehabilitation needs and financing and program requirements.

Action Steps	Lead	Benchmarks	Date
Conduct regular reviews of existing affordable housing to identify and address deficiencies or potential loss of units.	DHNP	No net loss of affordable housing units.	Ongoing

Objective 3.3: Increase financial subsidies and other support for access to rental housing.

Action Steps	Lead	Benchmarks	Date
Explore use of TANF to support rapid re-housing programs.	DHS DHNP	Review conducted.	June 2014
Use HOME and other funds for temporary rental subsidies targeted to very-low income households and/or persons with disabilities.	DHNP	HOME and other funds allocated.	Ongoing
Ensure the availability of housing broker services to support rapid rehousing programs.	DHNP	Housing broker services established with regional partners.	2015
Identify a non-federal, ongoing source of funds for a short-term “Housing First” program that helps potential renters overcome one-time barriers to renting existing market rate housing units.	DHNP	Conduct research to identify sources.	2014

Objective 3.4: Continue to create partnerships with non-profit and private sector housing developers for development of affordable housing

Action Steps	Lead	Benchmarks	Date
Continue to provide financial support and incentives to promote development of affordable housing.	DHNP	Additional affordable housing units developed.	Ongoing

Encourage developer interest in affordable housing development and workforce housing program.	DHNP Planning	Increase in builder interest in affordable housing development.	Ongoing
Promote private development of affordable housing through outreach and education of housing industry professionals	DHNP BEACH HR Housing Consortium	Create and implement educational presentations for housing industry.	2014 Ongoing
Objective 3.5: Ensure an adequate supply of housing that is appropriate for special needs populations			
Action Steps	Lead	Benchmarks	Date
Provide permanent supportive housing to prevent and end chronic homelessness using Housing Choice vouchers when feasible and available.	DHNP	Permanent supportive housing units increase by 120 units.	2018
Target permanent supportive housing to frequent users of emergency shelters and public institutions including mental health facilities, hospitals, jails and prisons.	BEACH CoC Committee	Assessment criteria established that prioritize housing for frequent users of services.	August 2014
Provide opportunities for permanent supportive housing residents to transition to community based housing.	BEACH CoC Committee	Tenants transition to community based housing.	Ongoing
Increase scattered-site housing options in market rate units with supports provided in the community or in the home.	DHNP DHS	Relationships with private landlords established.	2016
Create and implement plans to address permanent housing needs and funding for: <ul style="list-style-type: none"> • disconnected youth • very low-income families • veterans and their families • People discharged from prisons, health care and mental health care facilities. 	DHNP DHS BEACH Committees	Plans developed Funding identified 18 unaccompanied homeless youth annually access housing or family reunification, as appropriate.	2015

Promote or incentivize inclusion of Universal Design and visitability features in affordable housing units.	DHNP	Increase in the number of affordable, accessible units.	2014
---	------	---	------

GOAL 4: DEVELOP SUSTAINABLE RESOURCES TO SUPPORT OUR ONGOING COMMUNITY EFFORT.			
Objective 4.1: Increase the availability of funding for proven assistance programs and new initiatives that end homelessness.			
Action Steps	Lead	Benchmarks	Date
Identify diverse and flexible funding that can respond to identified needs without regard to program requirements such as a Housing Investment Fund.	DHNP	Research conducted and sources identified.	2014
Integrate homeless funding with mainstream resources such as TANF and VA benefits.	DHS DHNP	Eligibility for mainstream resources is determined at assessment.	2014
Develop and implement outcome-based funding requirements so that funding is directed to the most effective programs.	DHNP	Outcomes established to guide fund allocation.	August 2014
Review feasibility of Social Impact Bonds.	DHNP	Develop a briefing paper for review by BEACH, city agencies and Hampton Roads Community Foundation.	2014
Support and participate in policy and resource development initiatives at the state level to promote resources that will support plan objectives.	DHNP	State resources allocated to homelessness are maintained or increased	2014 and annually

Objective 4.2: Identify and obtain new non-monetary resources.			
Action Steps	Lead	Benchmark	Date
Seek to establish social enterprises as part of or in conjunction with the Housing Resource Center and The Healing Place.	BEACH The Healing Place, Inc.	Programs initiated.	2018
Objective 4.3: Coordinate and increase resource development activities for homeless services in the City, Region and State to ensure a net increase in available funding.			
Action Steps	Lead	Benchmark	Date
Support the Virginia Beach fund raising effort for the Housing Resource Center	DHNP	\$1 million raised in support of the Center.	2016
Exchange information about fundraising plans and activities.	Regional Task Force to End Homelessness and BEACH	Regular information exchange at meetings.	ongoing
Implement collaborative fundraising activities and grant applications, as appropriate.	Regional Task Force to End Homelessness and BEACH	Grants developed and submitted.	ongoing
Seek to establish coordinated funding decision-making among regional funders to promote effective support of key programs and to ensure that grant proposals align with Virginia Beach system goals.	DHNP	Grant requests are coordinated and aligned with system goals.	2014
Support state-level efforts to stabilize or increase funding for homelessness.	DHNP	State funding is stable or increased	2014 and annually

5. IMPLEMENTATION, MONITORING AND EVALUATION

Successful implementation of this plan will require the participation of multiple partners who will be engaged in a wide variety of service activities, policy development and program initiatives. An appropriate governance structure will be necessary to coordinate and oversee plan efforts, review and refine plan contents, evaluate results and develop the resources needed for the proposed actions. A revised governance structure for BEACH that incorporates federal requirements as well as community desires is under discussion and will be developed and approved in early 2014.

The hiring of a new Homeless Coordinator at the Department of Housing and Neighborhood Preservation will provide enhanced support for all the functions of the system. An AmeriCorps volunteer will also provide support for one year beginning in February 2014.

A monitoring, evaluation and reporting process will be necessary to measure progress and create support for the ongoing work of the system. This evaluation process will also determine if changes are needed to the plan to reflect goals completed or new initiatives and funding. Quarterly progress reports will be developed and widely circulated. A more detailed annual review will be conducted using a reviewer external to the system. This in-depth annual review will incorporate any needed amendments to the plan. These activities are planned so that the first report will be provided in December, 2014.

An additional evaluation is conducted as part of the annual Continuum of Care funding process. Agencies requesting renewal of existing grants will undergo a rigorous performance review to determine if additional funding is warranted.

The evaluation process is informed by the quantity and quality of data collected on system activities. A comprehensive and accurate Homeless Management Information System will be essential to the evaluation process. This system will be significantly enhanced in the spring of 2014 when several local systems will be merged into a regional Homeless Management Information system. Data and reporting will be available on a regional basis allowing better coordination of services as well as improved performance monitoring.

APPENDICES:

APPENDIX 1 ACRONYMS AND GLOSSARY OF TERMS

APPENDIX 2 EXECUTIVE SUMMARY HOUSING CRISIS SYSTEM RESPONSE REPORT PREPARED BY ORGCODE, INC.

APPENDIX 3 WEBSITE RESOURCES

Plan Elements to be Created Following Adoption:

Appendix 3: 6 page executive summary Housing Crisis System Report

Appendix 4: Maps of Our System: Participant contact map; funding map; inventories of housing, organizations and programs

Other additions: Detailed sub-plans for system elements will be created as identified in the plan body. Once created, these will be added to the plan as future appendices.

APPENDIX 1: ACRONYMS AND GLOSSARY OF TERMS

BEACH

Bringing an End to All City Homelessness is a Virginia Beach community-wide partnership between citizens, faith, business, non-profit and city organizations working to address homelessness. A committee of BEACH facilitates the Continuum of Care process.

Continuum of Care (CoC)

A collaborative, community funding and planning process for a range of housing and services addressing the needs of homeless families and individuals. A grant application is submitted annually to the US Department of Housing and Urban Development for funding to implement the community plan. The group of community partners involved in this process is often referred to as the “Continuum of Care”.

Chronic Homelessness

Refers to a family or individual who has been continually homeless for a year or more; or has had four or more episodes of homelessness in the past 3 years.

Diversion from Homelessness

A strategy that prevents homelessness for people seeking shelter by helping them identify and access alternative housing arrangements and supports. Diversion programs reduce the number of families and individuals becoming homeless, the demand for shelter beds and the size of program wait lists.

DH

Virginia Beach Department of Health

DHNP

Virginia Beach Department of Housing and Neighborhood Preservation

DHS

Virginia Beach Department of Human Services

HEARTH

The federal Homeless Emergency Assistance and Rapid Transition to Housing Act, adopted in 2009, requires significant changes in the way communities plan and deliver services. Communities must now operate as a coordinated service delivery system rather than as a collection of individually funded projects. Specific requirements include a coordinated assessment process, performance-based funding, a focus on homeless prevention and permanent housing and an inclusive governance structure with representation from all service providers, not just those receiving federal funding.

Homeless Management Information System (HMIS)

A computerized data collection application that records and stores information on homeless individuals and families who use residential or other homeless services.

Homeless Prevention

A program that diverts households from homelessness by providing targeted, limited assistance to households who are likely to become homeless if not assisted.

Housing Affordability

The generally accepted definition, established by the US Department of Housing and Urban Development, that a household pay no more than 30% of its annual income for housing.

Housing First

An approach to homeless assistance that provides immediate access to housing followed by the supportive services that may be needed to foster long-term stability and prevent a return to homelessness.

Housing Resource Center (HRC)

The Housing Resource Center will replace and expand upon the services currently offered at the Lighthouse Center in Virginia Beach. The Housing Resource Center will serve as the focus for our community's effort to end homelessness through coordination of intake, assessment, services and referrals for families and individuals.

Currently in the planning stages, the Housing Resource Center will be located at 104 North Witchduck Road with a projected completion date of fall 2017. Facilities and services will include day services and emergency shelter for families and individuals. Permanent affordable housing will also be included on the site.

Permanent Supportive Housing (PSH)

Permanent housing that is coupled with services intended to support housing stability and independence. PSH is often targeted to those most at-risk of homelessness including individuals and families with substance abuse issues, mental illness and other disabling conditions.

Point-in-Time Count (PIT)

A one day (24 hours), statistically reliable, unduplicated count of sheltered and unsheltered homeless families and individuals within a defined geographic area.

Rapid Re-Housing

A service model designed to immediately return those who are losing or have lost their home back to permanent housing as well as shorten the length of shelter stays.

Single Room Occupancy Housing (SRO)

Permanent multi-family housing that consists of efficiency apartments, often developed with supportive services available to the tenants.

Universal Design

Universal Design is the design of products and environments to be useable by all people, to the greatest extent possible, without the need for adaptation or specialized design.

Visitability

Refers to housing designed and constructed so that it can be occupied or visited by individuals with mobility impairments. A home is visitable when it meets three basic requirements:

- One zero step entry
- Doors with 32 inches of clear passage space
- One bathroom on the main floor with sufficient maneuvering space (a rectangular space no less than 30" by 48" is available adjacent to the tub or shower, the commode and the sink).

APPENDIX 2: EXECUTIVE SUMMARY OF HOUSING CRISIS RESPONSE SYSTEM REPORT

APPENDIX 3: WEBSITE RESOURCES

2013 Virginia Beach Point-in-Time Count

www.vbgov.com/2013-PIT-Count

BEACH

www.beach-cp.org

Federal Strategic Plan to Prevent and End Homelessness

www.usich.gov/opening_doors/

Virginia Beach Department of Housing and Neighborhood Preservation

www.vbgov.com/government/departments/housing-neighborhood-preservation

Virginia Coalition to End Homelessness

www.vceh.org

National Alliance to End Homelessness

www.naeh.org