

## **RURAL DESIGNATION**

All counties within the Vermont Balance of State Continuum of Care (VT BoS CoC) are included in this YHDP NOFA application submission. The HUD FY2017 YHDP Rural Area Worksheet calculates VT BoS CoC as a rural area designation (Category B). The total population in between the ages of 10 and 24 within the geographic area is 85,468 (U.S. Census).

## **LEADERSHIP CAPACITY**

### **1. Demonstrate CoC has addressed a similar systemic challenge related to homelessness...**

In 2016, the VT BoS CoC launched the Veterans@Home Initiative in partnership with the Veterans Affairs Medical Center-White River Junction with the goal of reducing veteran's homelessness to functional zero. Under this initiative, the CoC established a Veteran representative position on the CoC Board to inform policy decisions and project design, and created a statewide Veteran's Homelessness Committee (VHC), encompassing Vermont's two CoCs and including veteran and mainstream homeless providers, to identify and break down barriers to care and housing for veterans experiencing homelessness. Resulting from the VHC's focused leadership and planning, the VT BoS CoC (and Chittenden County CoC) have integrated most U.S. Veterans Affairs - Supportive Services for Veterans Families and Grants Per Diem – Transitional Housing homeless providers into HMIS and have started mainstream integration of homeless veterans into Coordinated Entry. The VHC conducts bi-weekly case conferencing to identify all known homeless veterans in Vermont using a "By Name List," assess and prioritize need, and develop housing and service plans, and has begun a process to transition to the Federal Benchmark Generation Tool to more effectively track progress in ending veterans homelessness. Through these efforts, to date, over 150 homeless veterans have moved into permanent supportive housing, and the number of literally homeless veterans has been reduced by 57%.

**2a – 2d. Identify the proposed YHDP Lead Agency.**

The Vermont State Housing Authority (VSHA) will be the YHDP lead agency. VSHA is a statewide public housing authority that administers a variety of HUD Section 8 Housing Choice Voucher Programs (including targeted funding) and state-funded housing programs. VSHA is a statewide HUD-designated Performance Based Contract Administrator serving 8000+ youth, individuals, and families. VSHA has been the VT BoS CoC Collaborative Applicant for 10+ years and has been the Grantee/Program Administrator of several McKinney-Vento CoC Programs for 25+ years. VSHA's Homeless Grants Administrator, Daniel Blankenship will act as lead to collaboratively implement the YHDP. Additionally, the CoC will hire a FTE Project Coordinator position through a financial collaboration between the Vermont Coalition of Runaway and Homeless Youth Programs (VCRHYP), statewide Runaway and Homeless Youth (RHY) administrator, and VSHA. The Project Coordinator will play a leadership role, as member of the YHDP leadership team. They will report to the YHDP lead and work closely with the Youth Homelessness Prevention Plan Committee (YHPPC) and Youth Action Board (YAB) to facilitate and coordinate planning and implementation of a youth homelessness strategy.

**2e. Description of the experience of the Lead Agency in any other initiatives designed to...**

VSHA has been an active leader in youth homelessness initiatives. In 2015, VSHA initiated the inclusion of a youth provider representative on the VT BoS CoC Board. In 2016, as Collaborative Applicant, VSHA engaged VCRHYP (statewide RHY administrator) to join the VT BoS CoC. Through this collaboration, the CoC, created a statewide the Youth Homelessness Prevention Plan Committee (YHPPC), encompassing Vermont's two CoCs, and on which VSHA and VCRHYP sit as part of an Executive Committee (the "YHDP" team). The YHPPC has engaged youth and youth providers in planning; conducted a youth baseline needs assessment;

and incorporated youth perspectives into the CoC's Coordinated Entry policies and procedures. Most recently, with support from VCRHYP, VSHA and the YHPPC created a statewide Youth Action Board (YAB) that operates as a CoC standing committee and independent youth voice. Programmatically, in 2016, VSHA, as administrator of a BoS CoC RRH Program, dedicated 10% (7) of subsidies for homeless youth in two counties experiencing high youth homelessness rates. Since 1999, VSHA has maintained a super preference within its Section 8 Housing Choice Voucher waitlist for eligible Youth-in-Transition households, and in 2017 overhauled the HUD Family Unification Program referral process through an MOU with the Vermont Dept. of Children & Families (Public Child Welfare Agency) to improve TAY utilization.

**3. Demonstrate how the CoC structure will support the Lead Agency.**

The CoC has established an effective governance and decision-making structure to advance its goal to prevent and end youth homelessness, and for supporting the YHDP lead. This includes:

**Youth Homelessness Prevention Plan Committee (YHPPC)**: 18 members across the two VT CoCs representing RHY and mainstream service providers, housing providers, emergency shelter providers, state agencies, and the YHDP Lead Agency. With an overarching goal to prevent and end youth homelessness, its objectives are to: 1) Improve data collection and analysis; 2) Develop evidence-based practices; 3) Create a plan to end youth homelessness through interventions that address the USICH core outcomes; and 4) Ensure our community has the capacity to identify and engage youth at risk of homelessness to prevent them from becoming homeless. In addition, the YHPPC operates the following workgroups: 1) *Data Workgroup*: Collects, analyzes, and synthesizes statewide youth homelessness data; 2) *Youth Engagement Workgroup*: Creates opportunities for an authentic youth voice in planning and laid the foundation for formation of the YAB; 3) *Stakeholder Workgroup*: Creates opportunities for input

from stakeholders that come into contact with youth and are key decision-makers and works to engage stakeholders in the YHPPC who are not currently engaged; and 4) *Coordinated Entry (CE) Workgroup*: Ensures CE assessment and processes are youth inclusive and appropriate.

**Youth Action Board (YAB)**: Composed of 4 currently and former homeless youth, with a goal of 12 members. The YAB objectives are to: 1) Inform the CoC's baseline needs assessment; 2) Identify areas of strength in youth interventions and innovative intervention models; 3) Inform and vote on policy decisions; 4) Ensure youth housing interventions address the 4 core outcomes identified by USICH; and 5) Participate in planning and implementation of the PIT Count & CE.

**YHDP Leadership Team**: Composed of 6 members from the YHPPC, including VSHA and VCRYHP, this Team leads the planning and implementation of a CoC-wide plan to prevent and end youth homelessness, including coordinating and facilitating the YHPPC meetings, providing oversight to YHPPC workgroups, and acting as liaison to the CoC board.

**HMIS Advisory Board**: Comprised of 8 members, including a youth provider representative. The Board supports HMIS implementation, utilization, data security, and performance measures.

#### **4. Demonstrate how the CoC includes direct youth participation...**

During the winter of 2017-2018, the YHPPC conducted four youth focus groups across the state to solicit input from youth with lived experiences of homelessness or precarious housing. These events were attended by 30 youth, aged 15 to 25 and were facilitated by a trained peer facilitator along with a member of the YHPCC. Additionally, the YHPPC developed and disseminated a survey for youth with lived experiences of homelessness or precarious housing, which elicited an additional 59 responses. The YHPPC analyzed the focus group and survey data, which is being used to identify gaps in the current service and housing array, prioritize funding for interventions that youth most need, and guide ongoing planning and implementation of strategies to end and

prevent youth homelessness. In addition, the CoC established (March 2018) the Youth Action Board (YAB) with staff and stipend support from VCRHYP; YAB is a CoC standing and independent youth leadership committee. The YAB currently has 4 members, aged 16-24, with lived experiences of homelessness; recruitment is ongoing to reach a target of 12 youth. The YAB meets bi-monthly to inform CoC work on planning and implementing strategies to prevent and end youth homelessness, in particular prioritizing housing and service interventions and designing effective youth outreach, assessment, and engagement methods. In addition, the CoC intends to create a new voting member seat designated for a YAB member.

**5. Demonstrate the CoC's willingness and ability to engage youth providers that are not...**

The VT BoS CoC has incorporated active participation of youth providers since its inception (20+ years). In 2015, this participation was formalized when the VT Coalition of Runaway and Homeless Youth Programs (VCRHYP), representing a network of RHY providers in every county of the state, was brought into the CoC as a voting Board member. VCRHYP ensures information sharing with its members and that members are actively participating in local CoCs (PIT, Coordinated Entry, etc.). With the creation of the YHPPC in early 2017, the CoC has done broad and intentional outreach to other youth providers and youth serving organizations. The Agency of Education's McKinney Vento Statewide Coordinator became a voting member of the VT BoS CoC in July 2017, is a member of the YHPPC, and is being invited to join the YHDP Leadership Team. The YHPPC conducted in-person interviews with the State's Juvenile Justice Workgroup and Balanced and Restorative Justice (BARJ) youth providers to inform planning; a BARJ youth provider, who works with youth at risk or currently involved with the juvenile justice system, has attended YHPPC planning meetings. Children's mental health leaders participated in an in-depth stakeholder meeting, and this provider network was part of the

statewide stakeholder survey (among a diverse array of youth providers), to inform the baseline needs assessment. Earlier this year, the YHDP Leadership Team reached out to Outright VT, the statewide LGBTQ youth-serving agency, and is engaging them in the planning work given the high prevalence of LGBTQ youth who are at risk of, or experiencing, homelessness.

**6. Demonstrate CoC plans to engage other entities who are not currently working on...**

In addition, the VT BoS CoC has begun to engage entities who are not currently working on youth homelessness. Through the creation of a CoC-wide Substance Use Disorders Committee in the spring of 2018, the VT BoS CoC will engage substance use providers. In addition, the CoC recently coordinated a presentation on employment and homelessness (including serving youth populations) by the VT Department of Labor's director of workforce policy and performance (WIOA), and is exploring the creation of a youth employment and/or education-focused workgroup that would include VocRehab's JOBS Program (targeted for at-risk youth), the WIOA Youth Manager, and others (e.g., VT Adult Learning, Community Colleges of VT, VT Technical College, YouthBuild, and JobCorps) to coordinate programs and develop best practices to support effective youth employment and educational outcomes. Finally, members of the YHDP Leadership Team plan to attend a meeting of the statewide Parent Child Center network this spring to engage key providers that serve parenting youth and invite their participation in the VT BoS CoC and YHPPC planning activities.

**CURRENT RESOURCE CAPACITY**

See Resource Capacity Chart in Attachments.

**COMMUNITY NEED**

**1. Indicate whether a youth specific homelessness needs assessment was completed...**

A youth specific homelessness baseline needs assessment began in March 2017 and was

finalized in March 2018.

**2a. The methodology or methodologies used to conduct the needs assessment.**

To create a baseline needs assessment, the YHPPC compiled all existing data on youth homelessness. Existing data included an HMIS report on inflow and outflow of youth in the CoC system from 7/1/16-6/30/17; the 2017 PIT Count (literal homeless and precariously housed youth); McKinney Vento 2015-2016 data; DV/SV shelter data on # of youth in each shelter 7/1/16-6/30/17; # of homeless youth served by Youth Development Program (serving youth aging out or aged out of foster care); state-funded motel voucher program data on youth heads of households; and youth demographics from the VT Department of Health Youth Risk Behavior Survey. The YHPPC supplemented this data with additional quantitative and qualitative data from youth with lived experience of homelessness or unstable housing through a youth survey (59 participants) and 4 youth-led focus groups (30 participants). The YHPPC also surveyed youth serving organizations (174 individual participants) and conducted in-depth interviews with experts in the field who are key providers and policy-makers in areas that impact youth homelessness. The HMIS Lead Agency compiled and supported the YHPPC with analysis of the quantitative data, and the YHPPC used a coding methodology for the qualitative survey data.

**2b. From what specific youth systems, organizations and agencies the needs assessment...**

The YHPPC led the baseline needs assessment. YHPPC members include the VT Coalition of Runaway and Homeless Youth Programs, VT Dept. for Children and Families ( PCWA), VSHA (Collaborative applicant and YHDP lead), the VT Coalition to End Homelessness (CoC governing body), Washington County Youth Services (RHY provider), Windsor County Youth Services (RHY provider), Youth Services Inc. (RHY provider), Youth Development Program (transitional foster care youth provider), Office of Economic Opportunity (ESG recipient),

Valley Court Diversion Programs (JJ Provider), NE Kingdom Youth Services (RHY Provider), Homeless Prevention Center, Pathways VT (statewide PSH Housing First program), the VT Network to End Domestic and Sexual Violence, NW Counseling and Support Service (RHY & Mental Health Provider), and the Agency of Education McKinney Vento Statewide Coordinator.

**2c. The scope of the assessment...**

The assessment covered the entire VT BoS CoC. Youth-specific, mainstream, DV/SV, and veteran services and housing units were all included in the assessment's scope through data collection, stakeholder interviews and/or surveys. Youth providers, mental health and substance use providers, PCWA social workers, law enforcement, educators, juvenile justice workers, emergency shelter providers, and housing providers completed surveys. The YHPPC conducted interviews with leadership from the Balanced and Restorative Justice Programs, Youth Development Program (for youth aging/aged out of foster care), Mental Health Agencies, DCF Juvenile Justice workgroup, DCF Commissioner's office, and Community Action Agencies.

**2d. A description of the youth targeted including a typology of youth based on...**

The YHPPC used age and housing status for its typology and further examined demographic characteristics to understand risk factors, especially among vulnerable populations. The needs assessment included unaccompanied minors (12 through 17 years old) and young adults (18 through 24 years old). The assessment looked at housing status: youth who are unsheltered; youth who are in a homeless crisis response system location, including youth ES, mainstream ES, SH and TH for people experiencing homelessness; youth who are unstably housed; and youth who are at risk of homelessness (e.g., exiting a foster home or treatment facility).

**2e. An explanation of the key findings from the youth homelessness needs assessment...**

There were an estimated 660 youth who were literally homeless within the geography of the VT



BoS CoC from 7/1/16-6/30/17. The YHPPC identified the following key findings:

**Prevalence Among Vulnerable Sub-Populations:** 32% of youth who were homeless were parenting youth and experienced longer average stays in ES than the general youth population; 23% reported as survivors of DV, with 98 youth head of households staying in DV/SV shelters; and 27% of youth staying in youth-specific ES identified as LGBTQ compared with 12% of VT's general youth population. **Need for Coordinated Discharge Planning:** Youth are leaving emergency shelters and some transitional housing without secure housing (27% had stayed in a different ES or TH the night before) or are discharged from institutions or other systems of care into homelessness (8% had stayed in an institution/system of care - foster care, jail, hospital, mental health or substance use facility - the night before). **Lack of Developmentally Appropriate and Reliable Services:** Youth and youth service providers identified a need for vocational and educational supports; additional youth-specific housing search and navigation services (address limited or lack of rental history, lack of credit history, low wage or no wage, lack of or no transportation, etc.) and services that prioritize positive, permanent connections, such as mentoring, peer supports, family counseling, and drop in centers. **Need for Youth Specific Crisis Response Programs:** There are only 30 youth-specific ES units in the VT BoS CoC, all serving youth only up to 21 days. Due to this scarcity, 468 youth stayed in mainstream ES (not including DV/SV shelters) from 7/1/16-6/30/17. **Need for Youth Appropriate Transitional and Permanent Housing:** There are 54 youth specific transitional and permanent housing units in the VT BoS CoC: 48 TH and only 6 youth-designated RRH. The YHPPC estimates a need for 415 youth appropriate housing units.

**3. Demonstrate the CoC's ability to collect and report data on sheltered and unsheltered...**

In the 2017 PIT count the VT BoS CoC reported the following: **3a.** Number of unaccompanied youth (24 or younger) identified in the 2017 sheltered PIT Count - 59; **3b.** Number of parenting and pregnant youth identified in the 2017 sheltered PIT Count - 24; **3c.** Number of unaccompanied youth identified in the 2017 unsheltered PIT Count - 10; **3d.** Number of parenting youth identified in the 2017 unsheltered PIT Count - 6.

**3e. Indicate whether your CoC did the following: 3e1 – e5.**

**3e1 -2.** The VT BoS Coc conducted a youth-specific PIT Count at the same time as the rest of the CoC's 2017 PIT and integrated counting strategies targeted to finding and engaging youth.

**3e3.** The VT BoS CoC did not conduct a youth PIT Count separate from the regular CoC 2017 PIT.

**3e4.** Youth appropriate changes to the PIT count included: 1) outreach to youth-serving agencies who counted youth (including precariously housed youth) in their programs who were not counted in previous years; and 2) including precariously housed youth data in the PIT count.

**3e5. Identify data that were collected that were not required by HUD and describe how...**

The VT BoS CoC collected precariously housed youth data to understand the full extent of youth homelessness, especially in rural communities, where youth are more often precariously housed than literally homeless. The VT BoS CoC also reported on the number of youth homeless within the CoC's 11 geographical regions, including vulnerable populations, like pregnant/parenting youth. This geographic data is used to target housing and services based on local need.

**3f. Number of homeless youth reported by the CoC's local education agencies to the...**

The State Education Agency reported 931 homeless youth for the 2016-2017 school year.

**3g. The factors that are currently contributing to youth homelessness in the community...**

In addition to the key findings from the baseline needs assessment listed in Q2e, the three factors most identified from the stakeholder and youth surveys contributing to youth homelessness are:

1) Increasingly complex and multi-generational service needs; 2) Lack of affordable and youth appropriate housing options; and 3) Lack of employment opportunities. In the needs assessment, stakeholders ranked child abuse and neglect (33%), family substance use disorders (24%), youth poverty (22%), and family mental health issues (21%) as the top contributing factors to youth homelessness. And when stakeholders were asked what services and support are needed to end youth homelessness, the top 3 resources identified were affordable housing, age-appropriate housing supports, and youth employment and vocational supports. These three factors are also seen in the youth survey data, where youth identified getting and keeping a job, emotional and physical safety, safe adult connections, and physical and mental health among their top ten support needs. The youth and stakeholder data mirror what statistics bear out. Economic challenges impact young people across Vermont. The statewide poverty rate is 10.4% and food insecurity is on the rise (13% of Vermont's population received food assistance through SNAP benefits in 2016). Vermont is the 7th most expensive rural state to live in (NLIHC Report Out of Reach 2017). Further, Vermont's rurality causes other barriers, most notably transportation (62% of public roads in the CoC are unpaved and public transportation is extremely limited).

## **CAPACITY FOR INNOVATION**

### **1. Describe an experience where the CoC successfully adopted a new broad reaching...**

In 2012, the VT BoS CoC and Chittenden County CoC identified a need to improve their HMIS implementations in response to system capacity constraints in the face of increased federal data and reporting requirements. Over the next 3 years, Vermont State Housing Authority (VSHA), in its role of Collaborative Applicant and HMIS grantee, spearheaded a multifaceted process to evaluate and develop requirements for a more robust, scalable HMIS implementation statewide. In 2013, VSHA led a formal evaluation of the VT BoS CoC's HMIS including creating an

evaluation workgroup; conducting a statewide provider HMIS needs assessment; facilitating strategic planning meetings with local providers and state partners, including AHS (Public Child Welfare Agency) and the VT Coalition of Runaway and Homeless Youth Programs (VCRHYP); and forming a Single HMIS Exploratory workgroup to assess the feasibility of a shared, joint CoC statewide HMIS implementation. In 2014, under VSHA leadership, the Single HMIS Exploratory workgroup developed a statewide HMIS budget and assessed local and state partner needs (VA, RHY, CoC, ESG, State, etc.) to create a Request for Proposals for a new HMIS Lead Agency. In 2015, both VT CoCs approved a new statewide joint HMIS implementation and selected a new VT HMIS Lead Agency. The positive outcomes of a new statewide HMIS implementation have included increased economies of scale to support over two HMIS dedicated staff positions; leveraging multiple funding sources to support a sustainable budget; shortened periods of time to complete the annual PIT/HIC data reporting (<2 months instead of 3) and usage of HMIS as a primary tool for collecting PIT data; 100% AHAR acceptance; increased HMIS provider utilization by 79.75% from 2015 to 2017; and, importantly, full integration of federal and state RHY programs into HMIS to better support youth homelessness planning and programming. The integration of RHY data has been successful. It did however require significant system integration and changes in state and provider practices (in conformance with HHS/FYSB memo for RHY providers' use of HMIS) while also implementing a new VT HMIS lead. VSHA and VCRHYP worked with the RHY providers, the VT BoS CoC and the VT HMIS state lead to develop new data collection practices that maintained a statewide data set, streamlined processes, and minimized burden. Ultimately, after collecting input from stakeholders, a new set of protocols and tools were put in place to integrate RHY data into HMIS, supported with a specialized staff position. An important additional outcome of this

collaboration to create system-wide change is that RHY providers, working closely with the new HMIS lead, have built in additional data measures utilized by RHY providers, which are being used to improve youth program development and youth homelessness planning.

**2. Describe experience where one or more youth homelessness providers in the...**

In 2017, the Vermont State Housing Authority (VSHA), in its role as statewide administrator of HUD's Family Unification Program (HUD-FUP) and the VT Dept. for Children & Families (DCF), in its role as PCWA, revised the application and waiting list process to improve utilization and outcomes for transition aged youth. Specifically, in Sept. 2017, VSHA and DCF signed a new "Collaboration Protocol – Family Unification Program" that adopts a centralized referral and waiting list process that prioritizes Youth in Transition and is maintained at and by AHS-DCF. Historically, referrals to the HUD-FUP were made directly to VSHA by individual providers. The motivation for this change was to expedite access to the program; address low utilization rates, particularly among the eligible youth population; better prioritize families and youth for whom the program is most appropriate; monitor case management effectiveness; and track housing stability outcomes. One challenge was the change in the referral process for providers, which necessitated a new training to help them understand the process. The implementation was successful in shortening time from referral to program entrance. At the provider level, VCRHYP developed the Resiliency Assessment (RA) as a result of VCRHYP's member network desiring a better way to measure the impact they were having on youth's lives, beyond nights of housing and exit locations, and to more fully understand the factors that contributed to longer term housing stability and positive economic and social outcomes for youth. VCRHYP developed the RA using a positive youth development framework, in collaboration with representatives from member agencies and input from a youth pilot group.

One challenge in its adoption was ensuring that providers were trained in order to create an environment for the youth to answer the RA questions honestly. The adoption of the RA was successful and is consistently used by RHY providers at project entry, every 6 months of service, and at program exit. It includes a youth self-report on resiliency markers, such as permanent connections, feelings of safety, well-being, and self-sufficiency. Compiled RA data has been used to direct new program development and improve and adapt existing programs. VCRHYP reviews trends in resiliency markers annually and uses the information to inform Training and Technical Assistance (T & TA) plans. For example, when youth were marking themselves low on “connections to a non-family member adult,” VCRHYP provided more robust T & TA, as well as peer sharing, on how to support youth to build permanent connections: connections to mentoring programs, volunteer opportunities, and working with youth to identify their support network and enhance those relationships. And most recently, when VCRHYP’s RHY providers transitioned into VT HMIS, VCRHYP worked with the BoS CoC’s HMIS State Lead to integrate the tool and its data into HMIS.

**3. Indicate whether the CoC currently operates any rapid rehousing models for youth...**

VSHA operates a VT BoS CoC RRH Program that is low barrier and utilizes a Housing First approach. In 2016, VSHA earmarked up to 10% (7) of total subsidies to serve homeless young adults in two counties. Adapting the VT BoS CoC’s RRH model for homeless youth is requiring consideration of significant program innovations, including flexible, developmentally appropriate support services; tailored outreach to landlords willing to rent to young adults or the possibility of provider leasing; clustered locations to ease transportation needs; prioritizing young adults transitioning from systems of care (juvenile justice, mental health, substance abuse) and/or inclusion of precariously housed youth (subject to a HUD waiver) as eligible. These

program changes are under discussion as part of the CoC's youth homelessness planning.

Challenges in serving youth with CoC-RRH rental assistance include its restrictive/limited homeless eligibility (streets/shelter) which does not consider the CoC's rural character for youth who predominantly experience precarious housing/couch-surfing; the fact that it does not always meet the developmental needs of transition-aged youth; poor or lack of rental and income history for youth which pose challenges for landlords; and a lack of adequate transportation to access housing in remote areas.

**4. Describe interventions that are not currently operating in the CoC that the community...**

The following are program components that the VT BoS CoC is not currently operating, which the YAB and YHPPC have identified as priority interventions: **1) Develop a RRH 2.0**

**program** targeting youth aged 18-24, including flexible and developmentally appropriate case management, for young adults who are literally homeless, or unstably housed and considered homeless under other federal statutes. The VT BoS CoC anticipates requesting waivers to serve young adults considered homeless under category 3 of the HUD homeless definition, and to extend the maximum term beyond 24 months for rental assistance, in certain cases, for those youth who are working toward job readiness/full time work but need more time to secure stable housing, both of which present barriers to current RRH utilization for youth. In addition, given the difficulty of securing willing landlords, especially in more rural counties, the CoC is interested in requesting a waiver for youth providers to use leasing funds to rent units that would be subleased to youth, providing better opportunity for youth to stay close to their support networks, including family and employment, and mitigate limitations in transportation options.

**2) Transition Aged Youth Rental Assistance (TAYRA)**, including a waiver to serve youth under 23 years old and to allow for assistance beyond 24 months in some cases. The target

population for this program component would be youth transitioning out of the state's Transitional Living Programs (TLP), who have successfully completed TLP but face barriers transitioning due to a lack of credit, rental histories, and insufficient income to immediately assume the full cost of market rents. TAYRA could also be offered to youth who did not receive TLP housing through a RHY provider due to limited availability, who are otherwise eligible for TLP services. This rental assistance would be paired with developmentally appropriate case management services using positive youth development approaches to support youth in sustaining stable housing and working towards independence through educational and/or employment advancement, and building permanent connections and well-being. **3) Using Supportive Services Only** to fund additional mobile case management and expand services in drop in centers targeted towards youth at imminent risk of losing housing. These homeless prevention services would include intensive and trauma-informed case management, employment services, housing search and placement services, and legal services. **4) Expanding Host Homes** availability and use SSO to offer increased supports for youth in need of a youth appropriate, safe, and culturally competent emergency shelter options for youth over 18. **5) Shared Housing** to provide short to medium term rental assistance for youth to live with a family. This model supports youth in building permanent connections with adults, while finishing school or securing employment, as they transition to independence. Target population would be youth 16-20. Youth in Shared Housing would remain engaged in ongoing case management through VCRHYP youth provider agencies.

**5. Be willing to question existing models and test new methodologies...**

The VT BoS CoC, in close partnership with RHY and mainstream housing providers statewide, is willing to test new methodologies and find models that work best for youth, especially in rural



areas. To date, most youth specific housing interventions in the state operate outside of the CoC program using models that allow for earlier intervention with RHY funding to prevent and limit homelessness. But growing need is greatly outpacing current capacity. Thus the CoC, working with VCRHYP, through the statewide YHPPC, is spearheading efforts to incorporate and fund youth appropriate, evidence-based housing and service models. One example is VCRHYP's recent adoption of a new practice framework, the YouthThrive Framework, for which Vermont is one of 11 pilot sites. This framework builds on positive youth development approaches for building youth protective and promotive factors.

## **COLLABORATION**

### **1. Describe the CoC's current written plan to prevent and end youth homelessness...**

The VT BoS CoC has adopted the YHPPC's written plan to prevent and end youth homelessness. The YHPPC full membership developed the plan (including RHY providers, VSHA – collaborative applicant and lead YHDP agency, VCRHYP, DV statewide coordinating agency, Agency of Education, ESG recipient, and the PCWA), and the full VT BoS CoC Board adopted the plan. The plan's overarching objective is to target systems, services and supply to make youth homelessness rare, brief and non-recurring. The plan articulates four key strategies: 1) Increase data collection and analysis to gain a better understanding of youth homelessness; 2) Develop a shared understanding of evidence-informed practices, current resources, and effective interventions; 3) Increase availability of and access to housing supports that address the distinctive needs of the youth population; and 4) Enhance capacity to identify and engage youth at risk of experiencing homelessness. It also identifies and adopts priority outcomes for youth consistent with the USICH framework. These are: **Stable housing** – increased placement in safe and developmentally appropriate housing, moving youth towards independent living;

**Permanent connections-** improving ability to develop and maintain positive attachments to social networks; **Education/employment-** increasing employability and academic success to promote long-term stability; and **Social-emotional well-being-** enhance the development of key competencies and behaviors that equip a young person to succeed across multiple domains of daily life. In addition, the plan articulates 3 phases: 1) Assess, 2) Design, and 3) Implement. In anticipation of this YHDP application, and to lay the ground work for further planning, the YHPPC conducted a baseline needs assessment (as described in Rating Factor 2: Community Need) using youth and stakeholder surveys, in-depth stakeholder interviews, youth focus groups, and compilation and analysis of multiple existing data sources. Currently, the YHPPC and Youth Action Board are in the Design Phase, working to identify promising project models, to enhance successful existing infrastructure and support, and to define benchmarks for success.

**2. Demonstrate how the CoC is working with the pre-populated stakeholders...**

See Stakeholder Chart attachment.

**3. Indicate whether the Coordinated Entry Process incorporates youth...**

Yes, the Coordinated Entry Process incorporates youth.

**3a. Indicate whether there is a separate coordinated entry access for youth or whether...**

Access points are designed for all persons presenting for assistance, including youth.

**3b. Describe how the youth are prioritized within the coordinated entry process...**

The Coordinated Entry (CE) process prioritizes those who are chronically homeless, those with disabilities, and those with the most complex service needs. Each complex service need is assessed using a unified tool created with input from youth service providers and adopted by the VT BoS CoC. Two of the complex service needs assessed as part of CE address the unique experiences of youth, which are: 1) having been homeless before the age of 25; and 2) having

been in foster care at age 16 or older. By including these in the complex service needs section, the CE process recognizes that youth who have experienced homelessness or separation from their families before the age of 25 are at an increased risk of experiencing long-term housing instability and should be prioritized for available resources.

**3c. Indicate which of the CoC and ESG funded resources are available to youth...**

All Permanent Supportive Housing and Rapid Re-Housing projects, both those funded by ESG and those funded through the CoC, are accessed through the CE process and available to youth.

**3d. Describe the extent to which all other youth homelessness and at-risk providers...**

Both youth (RHY) and mainstream service providers (e.g., community action agencies, state mental health agencies) are integrated into the process as one of the following: Referral Partners (screen clients into CE and refers for an assessment), Assessment Partners (complete Housing Assessment with clients), or Lead Agencies (Complete assessment, refer to and manage Master List, and oversee CE process). Youth presenting at a mainstream provider have the option of accessing CE with that provider or choosing to access CE with the local RHY provider.

VCRHYP (the RHY provider network) is active in the VT BoS CoC's CE Committee to ensure youth providers are integrated into CE and that mainstream providers that may serve homeless or at-risk youth are trained to do so. RHY providers are also active members of their local CoCs, allowing for their involvement in local-level CE planning.

**4. Describe the system-level discharge strategy for child welfare (foster care), juvenile...**

In consultation with both the two VT CoCs, the system-level discharge strategy for the Departments of Child Welfare (foster care), Juvenile and Adult justice, and Mental and Physical Health in the state are developed by the VT Agency of Human Services and the VT Council on Homelessness. Following are the system-level discharge strategies for:

**Child Welfare:** DCF Family Services (PCWA) assists foster youth in preparing for adulthood, preventing homelessness, and securing safe, stable housing upon discharge through 1) its formal casework planning process and 2) the provision of financial and contracted youth development services extending until the youth's 23<sup>rd</sup> birthday. As part of its formal casework planning process, DCF Family Services, in coordination with youth, is required to develop a Transition to Adulthood Plan not more than 90 days prior to a youth turning 18 in DCF custody. The plan must outline specific plans and information regarding educational, vocational, employment, health care and insurance, transportation, housing, social and recreational skills, and establishing and maintaining connections with family and community. The Youth Development Program (YDP) serves youth ages 14 through 22 either in foster care or transitioning/transitioned out. YDP staff assist youth before and after discharge to achieve safety, well-being, permanency, and self-sufficiency skills as they transition from custody to young adulthood and independent community settings; extended care resources are also accessed through YDP.

**Juvenile and Adult Justice:** All inmates and offenders supervised in the community develop an Offender Case Plan which outlines areas of need and risk, including housing. All inmates must begin working on a Transition Plan at least 180 days prior to the anticipated release date. The Vermont Department of Corrections (DOC) funds 325+ transitional housing beds which serve offenders reentering the community. These sites provide support services to prepare participants for independent living. DOC Housing Specialists provide housing search and retention services to returning offenders. DOC provides Release Money for housing, which can fund security deposits and short term rental assistance. In addition to the above, Vermont is conducting reforms to its Juvenile Justice System to emphasize youth diversion and other reforms, including changing jurisdiction from adult criminal court to family court, expanding the Youthful Offender

status from 17 to 21 years old, and creating an option for the State's Attorneys to refer youth to a DCF approved community restorative justice program in lieu of filing charges in family court.

**Institutions of Mental and Physical Health:** The Vermont Department of Mental Health (DMH) is the agency that has the primary responsibility for coordinating the activity of all stakeholders involved in the community re-entry system for mental health consumers who are in treatment in acute care beds. The discharge planning process is a team approach that involves all people with significant client transition responsibilities as part of a Care Management Team (e.g. Care Management Team Leader, housing resource specialist, physician, consumer, family members, case manager, etc.). This Care Management Team approach facilitates efficient communication and effective use of resources. The Care Teams have been developed with DMH staff and collaborative partnerships among designated agencies as well as local institutions that are responsible for service, support, housing, and treatment for the client. For institutions of physical health, system-level discharge planning involves coordination with local hospital-based social workers and Community Health Team workers, as part of VT's Blueprint for Health initiative (a state-led, nationally-recognized initiative transforming health care delivery), to ensure patients are connected to appropriate services and resources upon discharge. The Community Health Team promotes integration of health and human services to address medical and non-medical needs that impact outcomes, including social, economic, and behavioral factors.

**5. Describe the role of PCWAs in serving homeless children under 18 and in serving...**

The Vermont Department for Children and Families (DCF) is Vermont's Child Welfare Agency. One of DCF's highest priorities is to direct resources to help end homelessness in Vermont. In keeping with this priority, DCF maintains a strong collaborative relationship with the VT BoS CoC to strengthen the supports it currently provides at-risk and homeless youth and young adults

and to identify new prevention strategies. DCF assists foster youth in preparing for the transition to independence and securing safe and stable housing through: 1) its formal casework planning and permanency hearings, and 2) the provision of financial and contracted youth development services until the age of 23. In Vermont, federally required Chafee Foster Care Program for Successful Transition to Adulthood services are administered through the Youth Development Program (YDP). YDP staff assist youth to achieve safety, well-being, permanency, and self-sufficiency skills as they transition from custody to young adulthood and independent community settings. Specifically, YDP supports current and former foster youth with transitioning to self-sufficiency; receiving the education, training, and services necessary to obtain employment; preparing for and entering post-secondary training and education; providing emotional support through mentors and the promotion of interactions with dedicated adults; providing financial, housing, counseling, employment, education, and other appropriate support and services; and ensuring that youth have regular, on-going opportunities to engage in developmentally-appropriate activities. Youth are eligible for services from the YDP from ages 14 to 22; DCF is required to refer all youth in custody to the YDP at age 15. Extended care resources (extended foster care, independent living, and youth investment grants) are accessed through YDP. In addition, DCF contracts with VCRHYP to provide housing and case management services to at-risk and homeless youth and young adults. VCRHYP RHY providers work to support family reunification for youth under 18 and independent living for youth 16 through 23. These services build on and expand what RHY providers offer through FYSB Basic Center and Transitional Living Program grants. VCRHYP agencies maintain between 12 and 20 host home shelter beds at any given time, as well as 4 residential beds. Additionally, VCRHYP supports 55 Transitional Living Program beds. Youth are identified through referrals from

schools, DCF, community partners, and agency outreach efforts. VCRHYP agencies serve 500 youth annually; approximately 50% are or have been involved with child welfare. VCRHYP agencies have strong community service linkages, develop plans of care with each youth grounded in positive youth development and trauma-informed care, and ensure coordination of services. DCF also partners with local and state Public Housing Authorities to administer the Family Unification Program. DCF refers families and youth for determination of eligibility for rental assistance and provides supportive services to families and youth receiving the rental assistance. In addition to these programs, DCF has developed an initiative to address the needs of LGBTQ youth who come into its system of care. DCF now has a Commissioner’s Committee on LGBTQ issues, recruits and trains foster homes to serve this population, and has created policies to guide case planning and placements for LGBTQ youth. DCF also has contracts with community-based organizations to serve pregnant and parenting teens who are at-risk or become homeless. The network of Parent Child Centers and the Reach Up Program deliver these services, which include residential and transitional housing components for this population.

**FINANCIAL RESOURCES**

**1. Demonstrate how the CoC will obtain additional funding, other than HUD technical...**

The VT Coalition of Runaway and Homeless Youth Programs is committing \$20,000 to fund the YHDP Program Coordinator position, \$3,500 for YAB stipends, and in-kind staff and administrative support to the YAB and YHPPC as detailed in a financial commitment letter.

**2. Describe the CoC’s proposed 8-month budget for developing a coordinated...**

Task	Description	Resource	8 Month Cost
YHDP Leadership	DCF, VSHA and VCRHYP YHDP planning,	In-kind staff resources (estimated .5 FTE)	\$25,330

Narrative Responses to the Rating Factors in Section V.A.1

	implementation, and shared oversight of YHDP Coordinator		
YHDP Planning Support	Meeting space and Admin support provided by DCF	In-kind staff time (estimated .14 FTE) and meeting space	\$7,929
Youth Action Board	Support for YAB	Stipend, transportation costs, facilitation and admin support as needed	\$3,500
YHDP Coordinator	New position to coordinate and support the YHDP planning activities	1 FTE (.5 FTE funded by RHY admin and .5 FTE funded by YHDP)	\$ 26,667
Innovation and Project Design support	T.A. on best practices, service design, refine housing models, outcomes	HUD TA provider (estimated .07 FTE)	\$21,600
HMIS TA and support	Provide data support to providers and aggregate data for YHDP plan	YHDP HMIS project funds	\$15,000
<b>TOTAL</b>			<b>\$103,026</b>

**DATA AND EVALUATION CAPACITY**

**1. Indicate the percentage of all types of homeless beds, excluding beds provided by...**

HMIS coverage is 94%, inclusive of all programs except for HUD-VASH and the state-funded



Vermont Rental Subsidy Program (short term rental assistance), which do not currently participate in HMIS. Including those two programs, 65% of all types of homeless beds, excluding beds provided by victim service providers, currently participate in HMIS.

**2. Indicate the percentage of all types of youth beds, excluding beds provided by victim...**

100% representing full integration of RHY provider reporting into HMIS.

**3. Describe how the CoC actively recruits new homeless projects to HMIS for youth...**

As described in Capacity for Innovation Q1, the VT BoS CoC, in close coordination with VCRHYP, has fully integrated all RHY providers into the VT HMIS through system unification and changes in provider practices and behavior. The VT BoS CoC and VCRHYP continue to recruit new projects and/or service providers serving homeless youth. With tested and successful protocols in place, the VT HMIS Lead, ICA, provides outreach, training and T.A to facilitate reporting and data integration for new youth providers.

**4. Describe how the CoC supports the transition of new homeless projects to HMIS...**

The VT BoS CoC supports the transition of new homeless projects to HMIS in coordination with the HMIS Lead Agency, Institute for Community Alliances (ICA). ICA staff provides in-person and web-based Training & Technical Assistance (T&TA) to transition new projects to HMIS (on project-specific workflow, pulling reports, data standards and security, PIT and HIC reporting, CE and HMIS, and SPMs). In FY17, ICA provided 190 trainings to 41 agencies, hosted 38 webinars, and designed 14 specialized webinars utilized 412 times. DCF - Office of Economic Opportunity, Department of Mental Health (PATH), SSVF, and VCRHYP all provide financial resources to cover HMIS licenses to facilitate the transition of new homeless projects into HMIS. ICA is currently meeting regularly with the State's motel voucher Program Director and his team to transition its motel voucher program (serving 1,679 households) to HMIS. In addition,

VCRHYP provides additional HMIS support to RHY projects throughout the VT BoS CoC.

This includes a part-time staff position to complete centralized data entry on behalf of its member agencies and in-person and remote training to RHY providers throughout the year.

**5. Indicate whether the CoC met all HUD data reporting requirements in the past 12...**

The VT BoS CoC met all HUD data reporting requirements in the past 12 months, including submission of PIT and HIC data in HDX.

**6. Indicate whether the CoC submitted AHAR table shells to HUD and if those AHAR...**

Yes, the VT BoS CoC submitted AHAR table shells and 100% were accepted.

**7. In addition to gathering youth data in HMIS, indicate whether the CoC gathers youth...**

The CoC gathers the following youth data, in addition to HMIS data to inform its planning and program development: **RHY Providers:** Resiliency Assessment (RA) data on youth in RHY Programs, at entry, 6-month intervals, and exit. The RA is comprised of 22 measures that are indicators of safety, well-being, self-sufficiency, and permanent connections. The data is collected from paper forms that RHY providers fill out with clients and is being integrated into Service Point. **DV/SV shelters:** # of youth who stayed at each DV/SV shelter. DV/SV shelters store the data in an HMIS-comparable database; the data is shared quarterly with the CoC. **State Agency of Education:** # of youth reported to McKinney Vento Homeless Education Liaisons, by school district, which is obtained from the Program Coordinator for McKinney Vento Education. The data is stored by the State Education Agency in web-based platform Grantium and shared annually with the CoC. **DCF's Youth Development Program (YDP):** # of homeless youth served. This data is collected from YDP's web-based database and shared annually with the CoC. **State-Funded Motel Voucher Program:** # of youth-headed households that receive state-funded motel vouchers broken down by geographical region, # parenting youth,

# receiving Reach Up (TANF), and # receiving SSI. This data is collected from the State’s Excel spreadsheets and reported annually to the CoC. **Department of Health:** Race, ethnicity, and LGBTQ data on VT’s in-school youth population from the VT Department of Health. The data is collected from an annual Youth Risk Survey, conducted with all grade 6-12 students. This data is collected from the Department of Health’s secure SAS files and shared with the CoC annually.

**8. Describe the performance measures that the CoC has implemented throughout all...**

The VT BoS CoC has implemented HUD’s System Performance Measures throughout its homelessness assistance programs. These measures encompass all projects that enter into HMIS:

<b>Target Data Points</b>	<b>Universe Group</b>
Avg. # of days persons are homeless in 1 year; Median # of days persons are homeless in 1 year	Persons in ES or SH Persons in ES, SH, or TH
% returns to homelessness (ES, SO, SH, TH) after exits to permanent housing within 6 months, 6-12 months, 13-24 months, at 2 yrs	Persons who exited ES, SO, SH, TH or PH to permanent housing during previous 2 years
Total sheltered homeless persons in HMIS in 1 yr	Persons in ES, SH, and TH
Change in employment, non-employment, and total income for adult leavers and stayers	Adults in CoC Program-funded SH, TH, PH-RRH, and PH-PSH project types
# of homeless persons with no prior HMIS enrollment	Persons in ES, SH, TH, and PH projects who enter during reporting period

<p>% exits to PH from SO; Exits to PH from residential settings</p>	<p>1. System leavers in SO projects 2. System leavers in ES, SH, TH, and PH-RRH projects</p>
<p>% retaining PH</p>	<p>Persons in PH except for PH-RRH</p>

The data is collected in HMIS and reported annually through a System Performance Measure dashboard created by and updated by the HMIS Lead Agency. The VT BoS CoC board also shares an annual report with providers to highlight key performance areas (improvement, regression, comparison to other CoCs). The VT BoS CoC local monitoring process includes identification of performance measures that require improvement—performance is not meeting HUD’s standard goal or there is a negative change from the previous year. The VT BoS CoC HMIS Lead Agency then develops a plan with the provider(s) to improve upon that performance measure through training and technical assistance, collaborative initiatives targeting performance measure improvement, and if necessary, re-allocation of funding. Because DV/SV providers do not enter into HMIS, the VT BoS CoC uses quarterly performance monitoring reports collected in an HMIS-comparable database (using the same performance measures) and reported quarterly to monitor DV/SV projects, and annually in report form to the VT BoS CoC.

**9. Describe how the CoC monitors the performance of its youth providers...**

The monitoring criteria and process described in Q8 includes all youth providers, as all CoC youth providers are integrated into HMIS. In addition, RHY providers submit quarterly reports to VCRHYP using monitoring criteria aligned with USICH outcomes and including measures from VCRHYP’s self-developed and nationally recognized Resiliency Assessment. These are:

**Stable Housing:** % of exits to safe destinations; % who have a safe exit that continue to be

stably housed for at least 90 days; % of youth under 18 who exit to stay with family; **Social and Emotional Wellbeing:** % of leavers who have accessed counseling services; % of leavers who report an increase in one or more Resiliency Assessment indicators related to well-being, self-sufficiency and safety; **Education and Employment:** % of leavers provided with educational or vocational supports; % increase in youth employed at entry vs. exit; **Permanent Connections:** % of leavers that report a connection to one or more caring adults; % of leavers who report an increase in one or more Resiliency Assessment indicators related to Permanent Connections.

Members who don't attain desired performance measures create an individualized improvement plan and a peer support team is established. Support includes sharing of training opportunities, peer-level troubleshooting, and best practice development at membership meetings.

**10. Demonstrate how the CoC has used data, either regarding the composition of...**

As the result of the youth homelessness data captured in the 2017 PIT Count, the VT BoS CoC has designated 10% of RRH subsidies for homeless youth in two regions with high rates of youth homelessness. There were 21 youth head of households homeless on the night of the 2017 PIT Count in Washington County, the highest number of homeless youth head of households in any county. In response, several RRH subsidies are being prioritized for homeless youth head of households in Washington County through the CE system. The VT BoS CoC would like to grow this initial pilot into a RRH 2.0 program through the YHDP.

**11. If selected as a YHDP community, describe your proposed demonstration outcome...**

The YHPPC and the VT BoS CoC will define **system-level success** based on the framework of preventing homelessness, and for those youth that do become homeless, ensuring homelessness is rare, brief and one-time. The YAB and YHPPC will collaboratively define system-level targets, as well as quarterly and annual benchmarks, based on baseline data in the following five

measures: 1) **Total Youth Experiencing Homelessness for the first time - Prevention**

**Measure:** Inclusive youth staying in ES, SH or TH designated for homeless persons, RHY

programs, or who are unsheltered for the first time; 2) **Total Youth Experiencing Homelessness**

**- Rare Measure:** Inclusive youth experiencing homelessness in HMIS, in domestic and sexual violence shelters, and in other shelters and transitional housing for the homeless that do not enter

into HMIS; 3) **Length of Time Youth are Homeless - Brief Measure:** The number of days in emergency shelter or transitional housing; 4) **Returns to Homelessness - One-Time Measure:**

Within the periods of less than 6 months, 6-12 months, 13-24 months, and 2 years; and, 5)

**Percentage of Safe Exit Destinations** from the housing crisis response system. The VT BoS

CoC will track progress through review and analysis of quarterly and annual dashboards,

inclusive of additional measures identified through the planning process. By tracking these five

measures in unison, we will be able to identify benchmarks and define system-level success. In

addition, the VT BoS CoC will define **program-level success** based on measurable youth

improvement in the USICH four core outcome areas, some of which youth providers are already

tracking, as detailed in Q9. These are: **Stable Housing:** % of exits to safe destinations; % who

have a safe exit that continue to be stably housed for at least 90 days; **Social and Emotional**

**Well-being:** % of leavers who have accessed counseling services; % increased rating on mental

health status question; **Education and Employment:** % of leavers provided with educational or

vocational supports; % increase in youth employed at entry vs. exit; and **Permanent**

**Connections:** % of leavers that report a connection to one or more caring adults; % exits to

family, % moved in with friends, % reporting improved family relations.