

## KEY TERMS

**Chronic Homelessness:** The U.S. Department of Housing and Urban Development (HUD) defines a chronically homeless person as an unaccompanied individual with a disabling condition who has been living in a place not meant for human habitation (i.e. the streets) or in emergency shelter for at least a year, or has had at least 4 episodes of homelessness in the last 3 years. This definition is tied to HUD funding specifically set aside to promote deeper levels of services and prompt placement into permanent housing for individuals for whom traditional homeless services have not been effective.

However, our community recognizes that there are couples, families and youth who experience chronic homelessness. We are in the process of refining a local definition of chronic homelessness for families.

### Continuum of Care

Since 1994, the U.S. Department of Housing and Urban Development (HUD) has used the phrase “Continuum of Care” when referring to a stream of funding specifically intended to serve homeless persons. HUD has stated that the best approach for alleviating homelessness is through a community-based process that provides a comprehensive response to the different needs of homeless individuals and families. To this end, HUD has encouraged communities to shape a coordinated housing and service delivery system called a Continuum of Care.

Continuum of Care Homeless Assistance programs fund permanent and transitional housing for homeless persons. In addition, Continuum grants fund services like outreach, job training, health care, mental health counseling, substance abuse treatment and childcare. Eligible applicants include nonprofit organizations, units of governments, public nonprofit community mental health associations, and private nonprofits.

**Continuum of Care Plan,** as described by the HUD, is a community plan to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and self-sufficiency. The plan includes components to end homelessness and to prevent a return to homelessness.

**Disabilities/Special Needs:** HUD defines a disabling condition as one or more of the following: a diagnosable substance use disorder, serious mental illness, developmental disability, HIV/AIDS or chronic physical illness or disability.

**The Federal McKinney-Vento Act** was passed in 1987 as part of the Homeless Person’s Survival Act. The McKinney Act was intended to provide federal funding for emergency provisions of shelter, food, health care, and transitional housing for homeless persons.

**Homeless:** A person is considered homeless by HUD only when he/she resides in one of the places described below:

- a. in places not meant for human habitation, such as cars, parks, sidewalks, and abandoned buildings;
- b. in an emergency shelter;
- c. in transitional or supportive housing for homeless persons who originally came from the streets or emergency shelter;

In addition, a person may be considered homeless if, without assistance from a service-provider, they would be living on the streets. This includes persons:

- being evicted within a week from a private dwelling unit and no subsequent residence has been identified and the person lacks the resources and support networks needed to obtain housing; or
- being discharged within a week from an institution in which the person has been a resident for more than 30 consecutive days and no subsequent residence has been identified and he/she lacks the resources and support networks needed to obtain housing.

In addition, persons who ordinarily sleep on the street or in emergency or transitional housing but are spending a short time (30 consecutive days or less) in a hospital or other institution are considered homeless. People staying in “homeless camps” or otherwise living outdoors are also considered homeless.

A **Housing First** approach rests on two premises: 1) The central goal is direct placement into permanent housing for those who are currently homeless, and 2) provision of appropriate individualized services (may include mental health and/or substance abuse treatment) are offered via follow-along services after housing placement to ensure long-term housing stability. Typically, programs modeled on a Housing First approach provide; housing placement assistance, short or long-term rent subsidies, individualized needs assessments, case management to link to needed services, and crisis intervention.

**Enhanced Property Management** includes base operating expenses (typical property management related activities such as repairs, maintenance, rent payment collection, lease issues), plus the costs of “enhanced” or “enriched” management that may include for example 24-hour front desk coverage, security, and/or resident services coordination.

**Mainstream Services** are government-funded programs that provide services, housing and income supports to poor persons whether they are homeless or not. They include programs providing welfare, health care, mental health care, substance abuse treatment, veterans’ assistance, and employment services. Mainstream resources needed to end homelessness are: Federal, State and Local Government Programs such as Medicaid, Social Security, Temporary Assistance for Needy Families, Workforce Initiative Act (WIA) employment programs, mental health and substance abuse services, and local Housing Authorities and other housing subsidy programs.

**Permanent Supportive Housing** is rental housing with support services for low-income or homeless people with a permanent disabling condition such as, physical or cognitive disability, serious health condition, severe mental illness, substance abuse disorder, or HIV/AIDS. Permanent supportive housing provides a permanent home with a rent subsidy along with direct linkage to essential social services/treatment programs to ensure long-term stability. Services may include: needs assessments, medication management, nursing or daily living support, on-site meals mental health or substance abuse counseling/treatment services, crisis intervention, and case management. Supportive Housing can range from full service on-site programs to program models with a mix of home-based and community services.

**Resident Services Coordination** refers to apartment complexes or property owners who arrange for provision of basic social services to help connect residents to needed assistance to support stable tenancy. Staff can be an employee of the landlord/property owner or the employee of a non-profit social service agency through a partnership agreement.

The **Shelter Plus Care** Program (S+C) is a federal rental subsidy intended for homeless persons with chronic disabilities. S+C rental assistance is modeled on the federal Section 8 program, with tenants paying 30% of their adjusted income for rent and the rental subsidy paying the difference between the tenant's share and the base rent. The S+C program differs from Section 8, as the subsidy is provided with a requirement that social or medical services are provided (at a dollar per dollar matched value) via a partnering local health or social service agency.