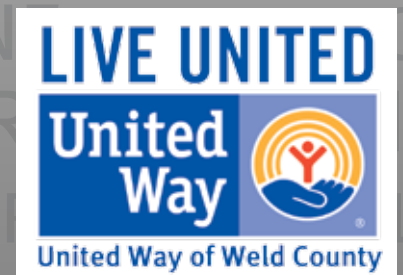


WELD'S WAY HOME

Addressing and Preventing Homelessness in Weld County

Strategic Plan

Fall 2016



PURPOSE – VISION – GUIDING PRINCIPLES

PURPOSE: To connect individuals and families experiencing homelessness with aligned resources to decrease homelessness and housing instability.

VISION: Every person in Weld County has the opportunity to access safe, adequate, and affordable housing.

GUIDING PRINCIPLES: Successful implementation of Weld’s Way Home will require the partnership of many different agencies and individuals: homeless serving agencies, state and local government, the business community, landlords, foundations and donors, the faith community and, of course, individuals and families experiencing homelessness. In order to consider Weld’s Way Home a success we will need to ensure that:

- those who fall into homelessness experience a flexible and comprehensive continuum of services that will help them re-establish stability, engage in personal rehabilitation, and achieve holistic health and well-being;
- those at-risk of becoming homeless have accessible safety nets and opportunities to help achieve increased stability for themselves and their families; and
- the public-private partners involved strategize and align their services to ensure that assistance is provided in the most helpful and cost-saving manner possible.

up to **3,000**

Weld County families live doubled up with others not by choice

homeless youth are **7x**

more likely to die from AIDS because they may be forced to engage in risky sexual practices in return for food and shelter

Dear Friends,

Here we offer to you Weld's Way Home, Weld County's strategic plan to address and prevent homelessness.

Since 2002, when the George W. Bush Administration began prioritizing a federal government response to homelessness, the value of plans to address homelessness has been recognized on federal, state and local levels. Four-hundred-plus local plans now align the work of government agencies, nonprofit entities, the faith-based community, businesses and other concerned individuals and organizations. Each plan pragmatically and strategically acknowledges that we can accomplish much more as a united effort than any one of us can alone.

The need for a Weld County strategic plan is clear. A 2015 Point-in-Time Count in Weld County found 256 people living in shelters or on the streets. A 2012 Vulnerability Index survey collected data and stories from 223 homeless and near homeless individuals; nearly a third were found to have a chronic physical condition, mental illness and/or substance abuse challenge that puts them at great danger of premature death.

Between 2000 and 2010, the population in Weld County grew by 39.7% and continues to increase steadily. Weld County has more than 270,000 residents. It is estimated the population will reach 500,000 by 2040. As Weld County grows, the number of homeless persons and scope of need will inevitably rise as well. We should plan for this increase in population in many ways, our homelessness addressing efforts being one of them.

Weld's Way Home provides information about Weld County and our homeless population, the economic and social costs of homelessness, and a flexible plan for addressing our challenge. As the cure to homelessness is housing, a fundamental plan goal and its vision is that everyone in Weld County can have access to safe, adequate and affordable housing.

Beginning in fall 2011, United Way of Weld County through the Weld Homeless Coalition has convened community members and stakeholders for addressing the challenge of Weld County homelessness. For many years, dedicated service providers have worked hard on behalf of those experiencing homelessness. We now can further align their work for increasing our community-wide capacity. We are also pleased to say that United Way of Weld County will continue leading this effort.

We hope you will read this plan with a critical eye and a hopeful heart. The bulk of our work lies ahead. We invite you to join us on Weld's Way Home.

Here's to heading home,

Fred Otis, Co-Chair
Weld's Way Home Planning Committee

Becky Safarik, Co-Chair
Weld's Way Home Planning Committee

Bob Hinderaker, Chair
Weld's Way Home Executive Council

Jeannine Truswell, President & CEO
United Way of Weld County

www.weldswayhome.org



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each change of
school costs a child

3 TO 6
MONTHS
of learning

EXECUTIVE SUMMARY

Homelessness in Weld County

There are two primary definitions of homelessness:

- the U.S. Department of Housing and Urban Development (HUD) definition which includes those literally homeless and does not include individuals/families living together not by choice;
- the McKinney-Vento Homelessness Assistance Act does include those living together not by choice, otherwise known as doubled-up.

Weld’s Way Home is dedicated to serving homeless individuals and families fitting both definitions.

Four populations of homeless are present in Weld County: veterans, families, individuals (chronic), and youth (including youth aged 18-24 and unaccompanied minors). In the United States, the number of individuals experiencing homelessness chronically is decreasing whereas family and youth homelessness are increasing. Since at least 2013 (the year of the first annual Weld County Point-in-Time Count), the size of all populations of homeless has been increasing in Weld County.

100+ homeless veterans on a combined Larimer/Weld County VA housing wait list (September 2016)

In 2011 leaders from across Weld County began more intentionally considering the difficulty that homelessness presents, determining the size of the populations affected, and planning for ways to address this community challenge in the future. While currently there are a number of resources available to those experiencing homelessness, the delivery of these services needs further alignment and additional capacity needs to be created. The economic and social cost of homelessness is substantial; it is in the best interest of all sectors of Weld County stakeholders—business, education, faith community, government, nonprofits, and more—to address the challenge of homelessness.

Housing Strategies

In the United States and other industrialized countries, a consensus is forming that a Housing First approach is the best way to address homelessness. Known as a “harm reduction” model, Housing First provides opportunities for housing without pre-condition on the understanding that those experiencing homelessness are more likely to find success in addiction and medical treatment (mental and physical), attaining employment, connecting with a stable support system, etc., if doing so while living indoors in stable housing. Numerous studies have shown that Housing First is less costly than maintaining people in their homelessness. Housing strategies that are considered Housing First or that complement it include: emergency shelter, transitional housing and permanent (non-time limited) housing options including independent housing, supportive housing, and permanent supportive housing.

\$86
MILLION

the amount of taxes lost in Weld County because people spent too much on housing and couldn't support local businesses (2015)

Weld's Way Home: The Plan

Weld's Way Home, the Weld County strategic plan to address homelessness, includes seven directions for activity in three broad action areas:

Assess

1. Identification
2. Emergency Assessment

Assist

3. Emergency Housing
4. Stabilization Assessment

Assign

5. Transitional and Permanent (non-time limited) Housing Options
6. Case Management
7. Wraparound Services

For the first years of plan execution, eight priorities will receive focus:

1. Community Education
 - a) Informing individuals where they can direct others to resources
 - b) Informing members of the community where they can go in the event they experience homelessness
2. Shared Intake and Assessment (also referred to as a Coordinated Assessment and Housing Placement System or CAHP System)
3. Discharge Planning
4. Street Outreach
5. Cold Weather Shelter
6. Navigation Center
7. Expanded Case Management Services
8. Affordable Housing with Case Management

Evaluation and Sustainability

Program accountability and performance will be measured and evaluated from the beginning.

Accomplishments will be sustained through robust plan management and increasing community support.

Conclusion

Now is the time to address homelessness in Weld County by focusing on and strengthening a continuum of aligned services, while the challenge is relatively small and before the county's population increases. **This is Weld's Way Home.**



HOMELESSNESS IN WELD COUNTY: AN OVERVIEW

Homelessness Defined

The federal government recognizes different definitions of homelessness. The two most widely used are those of the US Department of Housing and Urban Development (HUD), as established by 24 CFR 578.3 of the Homeless Definition Final Rule, and the McKinney-Vento Homeless Assistance Act.^{1,2} Both definitions have been amended by the Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act).

The HUD definition is generally considered to be more narrow, and has recently been amended (2012) to categorize the criteria for defining homeless into four sections:

- Literally Homeless: an individual or family who lacks a fixed, regular and adequate night-time residence
- Imminent Risk of Homelessness: an individual or family who will imminently lose their primary night-time residence
- Homeless Under Other Federal Statutes: unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition
- Fleeing/Attempting to Flee Domestic Violence: any individual or family who is fleeing, or attempting to flee, domestic violence, has no other residence, and lacks the resources or support networks to obtain other permanent housing

The McKinney-Vento definition, most widely used by the US Department of Education and local school districts, is more inclusive than the HUD definition. In addition to the above criteria, *McKinney-Vento also defines those that are living doubled-up because of economic hardship as homeless.*

Weld's Way Home addresses those in Weld County that would be considered homeless under both definitions. For purposes of this effort the McKinney-Vento definition of homelessness, which includes persons living doubled-up, applies. In the instance when two households are living together in the same residence and this is not by choice, the household that does not have its name on the lease or mortgage is considered homeless.

1,013

Weld County homeless students during the 2014-2015 school year

¹ For full HUD definition see Appendix A.

² For full McKinney-Vento definition see Appendix A.

Four Populations and Homelessness

In accordance with national trends, Weld’s Way Home includes work plans for four populations of people experiencing homelessness. Population definitions are somewhat fluid and will overlap at times. For example, a veteran may also be a chronically homeless individual. Nevertheless, by planning for these different populations, we will better serve those experiencing homelessness, as the needs and available resources for each population vary.³



VETERANS: Any individual who has served at least one day of active duty in the armed forces.

AT LEAST
9%
of homeless are Veterans



FAMILY: Any group with at least one adult (over 24) or youth (18-24) AND at least one child, under the age of 18.



INDIVIDUALS (CHRONIC): Any individual that has a disability—substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002)), post-traumatic stress disorder, cognitive impairments resulting from brain injury, or chronic physical illness or disability—and has been living in a place not meant for human habitation, in an emergency shelter, or a safe haven for at least 12 months continuously or on at least four occasions in the last three years where those occasions cumulatively total at least 12 months.



YOUTH: Any individual between the ages of 18-24 that is experiencing homelessness (Department of Housing and Urban Development definition). Weld’s Way Home also includes unaccompanied minors, any child or youth (under the age of 18) that is without his/her legal guardian and is not in foster care or the care of any other public or private institution.

A fifth population considered by Weld’s Way Home is those at **imminent risk of homelessness**. In any given instance, this can include one or more of the above populations. Studies show that it is less expensive to help a household stay in housing than it is to wait for them to fall into homelessness and then assist in re-establishing a permanent residence.⁴ Plans that decrease the number of people experiencing homelessness also include homelessness prevention.

³ For an extended definition of each population please see Appendix B.

⁴ “Family Options Study,” http://www.huduser.gov/portal/portal/sites/default/files/pdf/FamilyOptionsStudy_final.pdf.

History of the Weld Homeless Coalition

In fall 2011, an increasing number of shelter requests prompted Greeley-area emergency shelters, the Salvation Army, United Way of Weld County, and other community agencies to recognize the need for a seasonal cold weather shelter. United Way of Weld County convened the community to determine a solution. In response, the Salvation Army provided a shelter building, staff training, administration, and two meals each weekday. LAM Ministries and Greeley Inn also provided shelter for individuals and families. The cold weather shelter lasted from mid-December 2011 until the end of March 2012. It was a helpful resource, providing 694 nights of shelter to 57 unduplicated people.

26% of the homeless
in Weld County
have resided
here for at least 21 years

United Way of Weld County again brought together the cold weather shelter committee of agencies in preparation for the 2012-2013 winter season, realizing the need for an ongoing solution. This continuing discussion gave birth to the Weld Homeless Coalition.

After data was collected utilizing the Vulnerability Index (VI) throughout the month of October 2012, Homeless Coalition members and other concerned citizens gathered for a November Homelessness Summit to determine next steps. Barriers and solutions to solving homelessness in Weld County were discussed, including the areas of addiction, affordable housing, legal issues, life skills, and medical/mental health. Since these initial meetings, the Homeless Coalition has grown to include more than 50 agencies.

In 2013, the cold weather overflow shelter for single males was moved to Catholic Charities Guadalupe Community Center. Motel vouchers were provided for women and families through both Catholic Charities and Greeley Transitional House. While these services were extremely important for the well-being of those utilizing them, longer term solutions were still needed.

60% of Weld County homeless
have resided here for
2 or more years

Much of the work of the Homeless Coalition has been achieved through quarterly meetings and work groups focused on specific needs/tasks. Four populations of people experiencing homelessness were identified: Veterans, Families, Individuals (Chronic), and Youth. Efforts have increased coordination amongst homeless serving agencies. While grateful for the hard work of dedicated service providers, Weld County still needed increased collaboration and a more robust continuum of services for those experiencing homelessness and at-risk of becoming homeless. A more intentional response brought United Way of Weld County to convene the planning that is now Weld's Way Home.



Trends: National and State

National Homeless Data

According to HUD, an individual or family is homeless if they lack a fixed, regular, and adequate night-time residence, is sleeping in a place not meant for human habitation (car, park bench, under bridge, etc.), and/or is fleeing or attempting to flee domestic violence. In addition to these qualifications, the McKinney-Vento Homeless Assistance Act includes those sharing housing (doubled-up) due to a loss of housing or economic hardship as homeless.

Nationally, data shows that the number of people living on the streets or in a place not meant for human habitation is decreasing. However, calculations of individuals and families living doubled-up show steadily increasing numbers.⁵

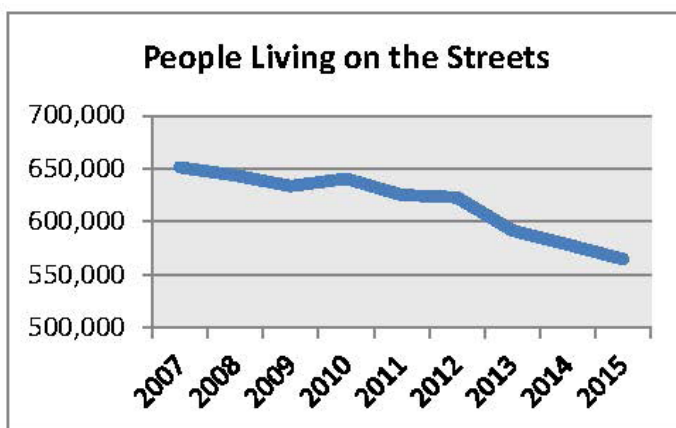


Figure 1, Source: “The State of Homelessness in America” annual reports

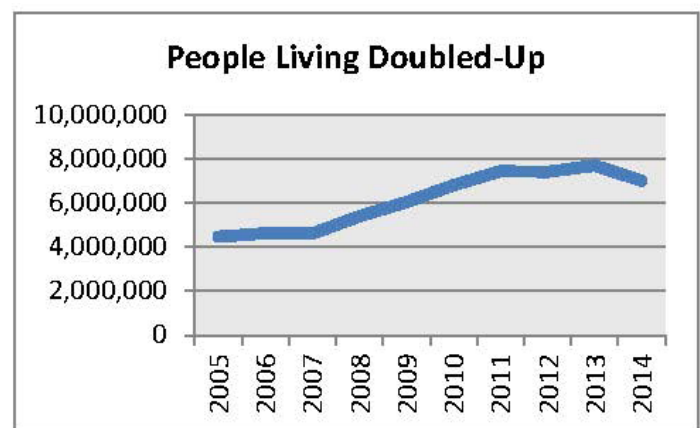


Figure 2, Source: “The State of Homelessness in America” annual reports

The number of people included in the two homelessness definitions show differing trends. There are two explanations. First, the Federal government has dedicated resources to assisting chronically homeless individuals and veterans, two populations that more closely match the HUD definition of homeless, meaning that they are living on the streets or in a place not meant for human habitation, rather than families or youth who often live doubled-up. Because there have been more resources allocated to helping these street-based populations, the number of chronically homeless individuals and veterans living out of doors has decreased, thus decreasing the national numbers. Second, factors such as lack of affordable housing, increasing rents, and stagnant wages lead individuals and families to live doubled-up. **Research shows that doubling-up is the most common housed situation before an individual or family is forced to live on the streets.**⁵ Unless more resources are dedicated to assisting those living doubled-up, eventually the number of persons living on the street will begin to increase.

⁵ “2016: The State of Homelessness in America,” <http://www.endhomelessness.org/page/-/files/2016%20State%20Of%20Homelessness.pdf>.

Statewide Point-in-Time Count Data

As a state, Colorado is making mixed progress on reducing the number of individuals and families experiencing homelessness. Every year during the last 10 days of January, communities across the nation are federally mandated to conduct a Point-in-Time Count (PIT Count). This PIT Count is completed to help local areas better understand how many individuals and families are experiencing homelessness on a given night. Nationally, the rate of homeless people per 10,000 is 17.7. In Colorado, the rate is 18.6, making it slightly higher than the national average.⁶ The following shows the total number of people experiencing homelessness in Colorado from 2012 to 2015.

State of Colorado Total Number Homeless Population and Subpopulations

Numbers Based on Population Experiencing Homelessness

	Unaccompanied Youth (under 25)	Chronic Individuals	Veterans
2015	566	1,877	950
2014	n/a	1,621	753
2013	n/a	1,780	685
2012	n/a	1,943	1,512

In January 2016

30

Weld County families were living in homeless shelters

Numbers Based on Living Situation⁷

	Overall	Sheltered	Unsheltered
2015	9,953	7,134	2,819
2014	10,028	8,083	1,945
2013	9,754	7,591	2,163
2012	16,768	7,260	9,508

Numbers Based on Household Make-up

	Individuals	Persons in Families
2015	5,729	4,224
2014	5,573	4,455
2013	4,664	5,090
2012	5,101	11,667

40%
of Weld County homeless population are women

⁶“2016: The State of Homelessness in America,” <http://www.endhomelessness.org/page/-/files/2016%20State%20Of%20Homelessness.pdf>.

⁷“2007-2015 Point-in-Time Estimates by CoC,” https://www.hudexchange.info/resource/4832/2015-ahar-part-1-pit-estimates-of-homelessness/?utm_source=HUD+Exchange+Mailing+List&utm_campaign=18006c5238-HUD+Report+Homeless+Cont+Decline+Nationally&utm_medium=email&utm_term=0_f32b935a5f-18006c5238-19306801.



Statewide McKinney-Vento Data

Every Colorado school district must have at least one homeless education liaison, per the McKinney-Vento Homeless Assistance Act. This is the contact for any child/youth that experiences homelessness. This liaison helps youth and their families connect to resources, such as free school lunches and transportation to a child's home school if the family is forced to move out-of-district. The district liaison ensures school attendance stability when other aspects of the child's life are unstable. Homeless education liaisons are required to record and report the total annual number of children and youth experiencing homelessness.

State of Colorado Total Number McKinney-Vento Homeless Children/Youth*

School Year	Total Number
2014-2015	24,685
2013-2014	26,020
2012-2013	25,282
2011-2012	25,924

*Please note that these are cumulative numbers. For instance, if a family finds housing halfway through the school year, the child will not be taken off the list. The above numbers do not include parents/guardians of the identified children and youth.⁸

In January 2016
41%
of Weld County
shelter residents
were children

⁸ http://www.cde.state.co.us/dropoutprevention/homeless_data.



Current Identified Need

Identifying the total number of people in Weld County who are experiencing homelessness is a difficult task. Not only are different kinds of people identified as homeless when using different definitions, but many individuals and families do not wish to identify as homeless. For those willing to respond, there are several survey tools available for communities to identify the number of people experiencing homelessness, to visualize trends, and to understand conditions and needs. In recent years, Weld County has utilized the Vulnerability Index Survey (VI) and the Point-in-Time Count (PIT Count) so that we may better get to know those experiencing homelessness. Both the VI and the PIT Count gather demographic information and other data about individual and family experiences of homelessness. Recent Weld County data follows.

Similar to the United States overall, Weld County is growing in the number of homeless families, as evidenced by increasing McKinney-Vento numbers. Weld County is also experiencing an increase in the number of chronically homeless individuals. The larger size of both of these groups is likely due to the rapidly growing population of northern Colorado and the increasing cost of housing, as well as improved identification practices of people whom are living out of doors.

an individual has to work
80 HOURS
a week at minimum wage
to afford a 1 bedroom
apartment in Colorado



Vulnerability Index

In Fall 2012, the Weld Homeless Coalition, in preparing for the upcoming winter, decided it would be helpful to better understand the needs of those experiencing homelessness and were most at-risk. Looking to State of Colorado homeless initiatives, the Homeless Coalition signed on to the Colorado Counts program, part of the national 100,000 Homes Campaign. Under the direction of 100,000 Homes and Colorado Counts, the Homeless Coalition surveyed individuals using the Vulnerability Index Survey (VI).

Volunteers interviewed over 200 homeless or near homeless individuals at Weld Project Connect and other touch points in the community. Based on the work of Dr. Jim O'Connell of Harvard University, which shows that certain medical conditions place homeless individuals at much higher risk of death than members of the general population facing identical conditions, the VI considers persons vulnerable if they have been experiencing homelessness for six or more months and have at least one of the following:

- serious medical condition
- more than three emergency department visits in the past three months
- more than three hospitalizations or emergency department visits in the past year
- age over 60 years
- history of cold weather injury
- tri-morbidity: mental health condition, serious medical condition, and substance abuse

2012 Weld County Vulnerability Index – 223 Interviews

Condition	Total Number	Percentage
Total Number of Surveys	223	100%
Considered to be Vulnerable*	69	31%
Tri-Morbid	56	25%
Veterans	23	10%
ER Visits in Past 3 Months**	190	---
Chronic***	114	51%
Mental Health Condition	114	51%
No Health Insurance	112	50%
Dual Diagnosis	82	37%

* A person is considered to be vulnerable if he/she has been homeless for 6 or more months, and has at least one of the following conditions: serious medical condition, age over 60 years, history of cold weather injury, more than 3 ER visits in the past 3 months, more than 3 ER visits or hospitalizations in the past year, and/or Tri-Morbidity.

** There is no percentage associated with ER visits because individual surveys could have reported accessing ER services several times.

*** A person is considered to be chronic if he/she has been homeless for at least one year, or on at least four separate occasions in the past four years and has a diagnosable mental/physical condition or disability (including substance abuse).

25%
of Weld County homeless
population have been
homeless for at least
12 months
and have a disabling
condition

Point-in-Time Count

In addition to the VI, Weld County has conducted annual Point-in-Time Counts since 2013. Each year, communities complete a count of homeless individuals and families in shelters. Every other year, in addition to the sheltered count, a count of the unsheltered homeless is completed. For the sake of consistent data, in 2016 Weld County conducted an unsheltered count as well as a sheltered even though it was not required to count unsheltered. Parenthetically, moving forward the Weld Homeless Coalition will conduct an unsheltered count every year because completing an annual unsheltered count is helpful for funding purposes and so that we might better understand the experiences of homeless individuals and families. The PIT Count takes place during the last 10 calendar days of January. 2013 was the first year that Weld County conducted a coordinated unsheltered PIT Count, though sheltered counts have been happening since 2006.

2013-2016 Weld County PIT Count

	Sheltered		Unsheltered N (%)	Total Number (%)
	Emergency Shelter N (%)	Transitional Housing N (%)		
2013	94 (33%)	123 (44%)	64 (23%)	281 (100%)
2014	89 (51%)	84 (49%)	Did not do	173 (100%)
2015	90 (35%)	79 (31%)	87 (34%)	256 (100%)
2016	116 (45%)	63 (25%)	78 (30%)	257 (100%)

With the population of Weld County growing rapidly, in future years more at-risk individuals and families will be in need of assistance. The above figures—particularly the increase in the number of unsheltered people—suggests that our challenge will not be easily addressed. Rather it shows that the most vulnerable—those living in cars, on the streets, under bridges—are increasing in number. Over half of 2015 PIT Count interviewees said they were living in Colorado before becoming homeless; 59% had been in Weld County for more than five years. Only 25% were individuals that had been in Weld County for less than one year. *It is people that have committed to making Weld County home that are falling into homelessness.*



McKinney-Vento

The McKinney-Vento Homeless Assistance Act requires that every school district across the United States have at least one designated staff member that assists children and youth experiencing homelessness. This staff member is required to record the number of children and youth that qualify for assistance every year. In addition to assisting students that are literally homeless (sleeping out of doors, in a car, etc.), McKinney-Vento school district representatives assist those that are living doubled-up, or that are couch surfing.

2006-2015 Weld County Student Homeless Population⁹



* September 2013: flooding displaced Weld County households, causing a spike in the number of homeless children and youth.

The above figure includes the total for all 13 school districts that are located entirely in Weld County since the start of the 2006-2007 school year. This increasing number of homeless students is reflective of national trends and data, which also show an increase in the number of homeless families, particularly those living doubled-up.

For a breakdown of the number of homeless students by school district, please see Appendix C.

⁹ http://www.cde.state.co.us/dropoutprevention/homeless_data.



Current Available Resources

The following charts illustrate the resources available to people in Weld County whom are experiencing homelessness. It includes emergency shelters (including cold weather shelters), transitional housing and permanent supportive housing options.

In addition to the housing options listed, some sober living facilities may also assist individuals experiencing homelessness. However, because not all of the beds are dedicated to homeless assistance, they are not included below. A list of Weld County sober living facilities can be found in Appendix D.

the life expectancy
for those who are
stably housed is
77 vs 41
YEARS
for those who
are homeless



Emergency Shelter options in Weld County, Colorado (Fall 2016)

Shelter/ Home Name	Cold Weather Shelter	Guadalupe Community Center	A Woman's Place Shelter	Hope @ Miracle House	GTH Shelter
Parent Organization	Catholic Charities	Catholic Charities	A Woman's Place	Hope @ Miracle House	Greeley Transitional House
Location	Greeley	Greeley	Greeley	Fort Lupton	Greeley
Type of Housing	Seasonal Emergency Shelter	Emergency Shelter	Emergency Shelter	Seasonal Emergency Shelter	Emergency Shelter
# Beds	45 beds	60 beds, 3 cribs	29 beds	Space for 2 families	34 beds, 2 cribs. Can house up to 12 families.
Possible Length of Stay	1 night at a time, may sleep there several nights; intake required each night.	Up to 120 days. Appeal process available if client is complying with all program requirements.	30 days	30 days, can extend up to 60	Up to 60 days. Appeal process available if client is complying with all program requirements.
Reserved for	Single Men and Women (18+)	Single men, single women and families. No sex offenders.	Domestic Violence Victims	Families with children	Families only. Can include 2 adults with no children, or single pregnant mother.
Intake Process	Open from 7 p.m.- 7 a.m. Walk in, process intake immediately. Form of ID required.	Apply with phone call or walk in. Once background check is complete, will process intake immediately if beds are available. If no beds are available will be put on waiting list.	Screening/interview process happens over the phone.	Phone screening, background check and complete intake packet, if space is available.	Application is in-person only. Once an application is complete and the background check complete, an intake is scheduled within 24-48 hours. If eligible for program, they are placed in a room immediately if available. If a room is not available, will be placed on waiting list.
Protocol for clients with mental illness	Will accept on nightly basis, based on behavior.	Will work to make sure clients with mental illness receive proper referrals to NRBH and that they have resources to pay for their medications. Have active weekly staffing with NRBH.*	If a client's needs are beyond the scope of advocacy, and client jeopardizes safety of self or others and does not fulfill criteria for self-sufficiency, client would not be admitted.	Will work to make sure clients with mental illness receive proper referrals.	Will work with clients who have a mental illness. Work to make sure clients are receiving proper referrals to NRBH and that they have resources available to pay for their medication.
Protocol for clients with criminal record/violent tendencies	Will accept on nightly basis, based on behavior.	Only turn away sex offenders. Work closely with parole department to direct violent clients to more appropriate housing.	Cannot admit clients with violent tendencies or violent criminal records.	Family members must pass background check.	If have a recent felony (less than three years) would only take them if the offense was not violence-related and they have ability to rent on the private market. Sex offenses and child abuse offenses automatically disqualify them for the program.
Additional Client Services	Referral service to community partners. Serve a dinner upon intake and a continental breakfast upon exit.	Case management.	Individual domestic violence advocacy, case management, domestic violence counseling, education and support groups, children's programs, and legal advocacy.	Case management provided by Catholic Charities.	Case management (adult and child/adolescent), life skills classes (adult & teen), parenting assistance through DHS, food pantry, hygiene items, household supplies, diapers/formula, furniture/clothing vouchers, limited rent/deposit assistance.

* NRBH = North Range Behavioral Health, the primary mental health services provider in Weld County.

Transitional and Permanent Supportive Housing options in Weld County, Colorado (Fall 2016)

Shelter/ Home Name	Northern Front Range Transitional Housing	Camfield Corner Apartments	North Side Apts, Carriage House, Kinnick House, Stanek House, Duplex	Harmony Way	Stephens Brain Injury Campus
Parent Organization	Greeley Transitional House	Greeley Transitional House	North Range Behavioral Health	North Range Behavioral Health	Greeley Center for Independence
Location	Scattered Sites	Greeley	Scattered Sites (Greeley)	Greeley	Greeley
Type of Housing	Transitional Housing	Transitional Housing	Transitional Housing	Transitional Housing	Transitional Housing
# Beds	31	27	37	20	10
Possible Length of Stay	Maximum 2 year program	Maximum 2 year lease	North Side: 6-8 months Carriage: 6-8 months Kinnick: 6-12 months Stanek: 6 months Duplex: 6-12 months	Indefinite assuming no lease violations	Permanent
Reserved for	Families exiting homelessness.	Families exiting GTH Shelter.	Mental health and substance abuse patients engaged in services at NRBH.*	Mental health and substance abuse patients engaged in services at NRBH. Must meet homeless criteria and have a verifiable disability.	Adults with brain injury.
Intake Process	Families are referred through case management at the Greeley Transitional House emergency shelter program. Funding is limited to 10 families at a time on the program. Only three or four openings are available each year.	Families are referred through case management at the Greeley Transitional House emergency shelter program. There are only 11 apartments currently available (five more are planned by 2017). Only three or four apartments become available each year.	Mental health assessment and appropriate referral from NRBH primary therapist or case manager.	Mental health assessment and appropriate referral/ documentation from NRBH primary therapist or case manager.	Brain injury must have occurred prior to age 65 and are eligible for the Colorado Medicaid Brain Injury Waiver.
Protocol for clients with mental illness	Will work with clients who have a mental illness. Work to make sure clients are receiving proper referrals to NRBH and that they have resources available to pay for their medication.	Will work with clients who have a mental illness. Work to make sure clients are receiving proper referrals to NRBH and that they have resources available to pay for their medication.	Primary clients are mentally ill. Wraparound mental health services available. To be eligible for NRBH housing, individuals must be engaged in treatment at the agency. This could include one or all of the following: Case Management, Individual Therapy, Medication Management.	Primary clients are mentally ill. Wraparound mental health services available. To be eligible for NRBH housing, individuals must be engaged in treatment at the agency. This could include one or all of the following: Case Management, Individual Therapy, Medication Management.	As long as brain injury is primary diagnosis they will be considered.
Protocol for clients with criminal record/ violent tendencies	Will work with families with felonies, and often their enrollment in this program makes all the difference for them being able to work with private landlords because of the case management offered.	Work to place families with the most barriers into this program so as to provide extra support needed to get back into private market housing. Will work with families with felonies.	Will evaluate, but not necessarily exclude.	Will evaluate, but not necessarily exclude.	If criminal activity occurred prior to brain injury, a case by case situation is reviewed. Must be minimum 6 months violent incident free.
Additional Client Services	Case management, subsidized rent, supportive financial services: education, employment, mental health, legal, transportation, food, life skills.	Case management, subsidized rent, GreenPath.	Frontier House (off-site), drop-in center with individual and group Peer Support services. Walk in crisis services and respite, as available, for those that meet criteria.	Frontier House (off-site), drop-in center with individual and group Peer Support services. Walk in crisis services and respite, as available, for those that meet criteria.	24/7 supervision, on-site adult day program, ILST, transportation, and money management.

* NRBH = North Range Behavioral Health, the primary mental health services provider in Weld County.

The Cost of Family Homelessness

One of Weld County's biggest challenges is a lack of affordable housing. More than half of low income households in Colorado spend more than 50% of their income on rent. A 2015 Piton Foundation study found that Weld County had a deficit of 3,866 affordable rental units for families living on 30% of the Area Median Family Income (\$19,890 per year).

The unavailability of affordable housing to rent and to own in a community often causes households to experience a host of negative outcomes. Vulnerable individuals and families often must choose one or more of the following: having high residential mobility (moving often); living doubled or tripled up with other families; choosing to live in housing that is unaffordable and therefore lacking funds for other necessities; getting stuck in a cycle of perpetual renting of inadequate and unaffordable housing; and/or opting to live in low cost, often poor quality housing. Conversely, affordable housing can benefit a household and even a whole community. Outcomes of affordable housing deficits and housing instability include:

High Residential Mobility (Changing Residences Often)

- High residential mobility is associated with significant deficits in childhood educational achievement.
- Residential stability facilitates better knowledge of and access to available community resources and social support networks for families with longer tenures. In contrast, residential moves are often accompanied by declines in social connections, whether assessed by children's social network sizes, popularity, or parents' familiarity with their children's friendship networks.
- When children don't have to move regularly, their school attendance is better, and they have a higher chance of ending the school year in the same school in which they started.

Living Doubled or Tripled Up

- Overcrowding has been linked with symptoms of psychological problems among elementary school-aged children; one possible reason for this link is that children in crowded living spaces have less control over their actions and interactions, which leads to a loss of self-efficacy and a feeling of helplessness.
- Adolescents living in crowded conditions may be more likely to use drugs, engage in delinquent behavior and have sexual intercourse.

1.2 MILLION students in the United States are homeless
75% live doubled up with other families

Perpetually Renting Inadequate and Unaffordable Housing

- Households with housing cost burdens frequently cut corners on spending on health care and nutrition.
- Without affordable housing, wealth accumulation among low-income families may not occur, thus limiting opportunities for homeownership, which represents the largest source of wealth accumulation for most households.
- Renters stay in their residences for an average of 2.5 years, while homeowners stay for about 13 years. School-age children whose parents own their homes are less likely to exhibit behavior problems than those whose parents rent their homes.
- For young adolescents, living in a rented home has been linked with a greater likelihood of psychological distress and having a child before age 18.

Living in Poor Quality but Affordable Housing

- Due to fear for their children's safety, parents may not allow children who live in unsafe neighborhoods to play outside; the resulting lack of exercise is not beneficial for children's health.
- Poor housing conditions may lead to negative health outcomes, especially through exposure to hazards such as lead paint and risk factors for respiratory illness.
- Children living in socio-economically disadvantaged neighborhoods are more likely to experience mental health problems than other children.
- When residents are pressured to live farther away from work in order to find affordable housing, for every dollar that's saved by moving to a house that's more affordable but farther from work, a family pays, on average, an additional 77 cents to cover the transportation costs of car payments, insurance, gas, parking and maintenance. Longer worker commutes increase pressure on a community's transportation infrastructure.¹⁰

74%

of Weld County
homeless moved here
for work or to be near
families

¹⁰ Please see Appendix E for the 2013 Weld County Housing Affordability Snapshot.

All data in this section came from:

<http://www.bizjournals.com/denver/stories/2008/01/28/focus4.html>.

http://www.fundersnetwork.org/files/learn/Housing_and_Child_Well_Being.pdf.

<http://www.mhponline.org/files/AffordableHousingImpact-CommunitiesandHouseholds.pdf>.



The Cost of Chronic Homelessness

Homelessness is detrimental to the well-being of individuals and families and costly to the community. People experiencing homelessness have an abnormally high use of services like law enforcement, ambulance rides, the emergency department and detox.

A study commissioned by the Colorado Coalition for the Homeless found that it costs less to house chronically homeless individuals than for them to continue living on the streets. The study tracked utilization of services before and after entry into a Housing First program (see next page for a description of Housing First). Cost and utilization of services like detox, incarceration, emergency department, outpatient and inpatient care, and shelter costs were included. On average, chronically homeless individuals cost the system \$43,239 per person in the 24 months before entering a Housing First program. During the first two years after program entry, the cost to the system dropped to \$11,694 per person for these services, a savings of \$31,545 per individual over a two-year period.¹¹

When factoring in the cost of providing comprehensive housing and support services through a Housing First program, it was found that there is a net cost savings of \$2,373 per person, per year. If one calculates similar savings for the 78 individuals found to be chronically homeless in the 2016 Weld County Homeless Point-in-Time Count, this would mean an average savings of \$185,094 in taxpayer and charity care dollars per year, or more than \$1.8 million over 10 years, assuming that these 78 individuals remain in permanent supportive housing indefinitely. Over time, however, many of these formerly homeless men and women would begin earning income and regain enough stability to live on their own without substantial support, saving taxpayers even more money in years to come.

In addition to the money diverted to housing from other service costs, the Colorado Coalition for the Homeless study found that overall health outcomes and residential stability improved for the sample of chronically homeless individuals. Once living indoors, more than 80% of participants maintained housing for at least six months. Weld County could expect similar results.

In summary, maintaining people in their homelessness is more expensive than paying for housing and supportive services. A Housing First response system is not only more cost effective, it also improves quality of life for the most vulnerable individuals and families.

**\$31,545
SAVED**

per individual on emergency services when utilizing the HOUSING FIRST method

¹¹ “Denver Housing First Collaborative: Cost Benefit Analysis and Program Outcomes Report,” http://denversroadhome.org/files/FinalDH-FCCostStudy_1.pdf.

COMMON HOUSING STRATEGIES

Several common housing strategies have proven effective in other communities across the nation. Because Weld County is so diverse, and has rural, suburban, and urban areas, different housing strategies will work better in particular areas and for particular populations, depending upon their needs. Following are the housing strategies that have been most often used; each has found varying degrees of success.

Housing First Approach

Housing First is a whole-system response that offers non-time limited, affordable housing as quickly as possible for individuals and families experiencing homelessness while providing the level of supportive services people need to keep their housing and avoid returning to homelessness. The approach begins with an immediate focus on helping individuals and families to move back into housing. Income, sobriety, and/or participation in treatment or other services are not required as a condition for getting housing.

There are five core principles of Housing First:

1. Immediate access to permanent (non-time limited) housing with no readiness requirements
2. Consumer choice and self-determination
3. Recovery orientation
4. Individualized and client-driven supports
5. Social and community integration



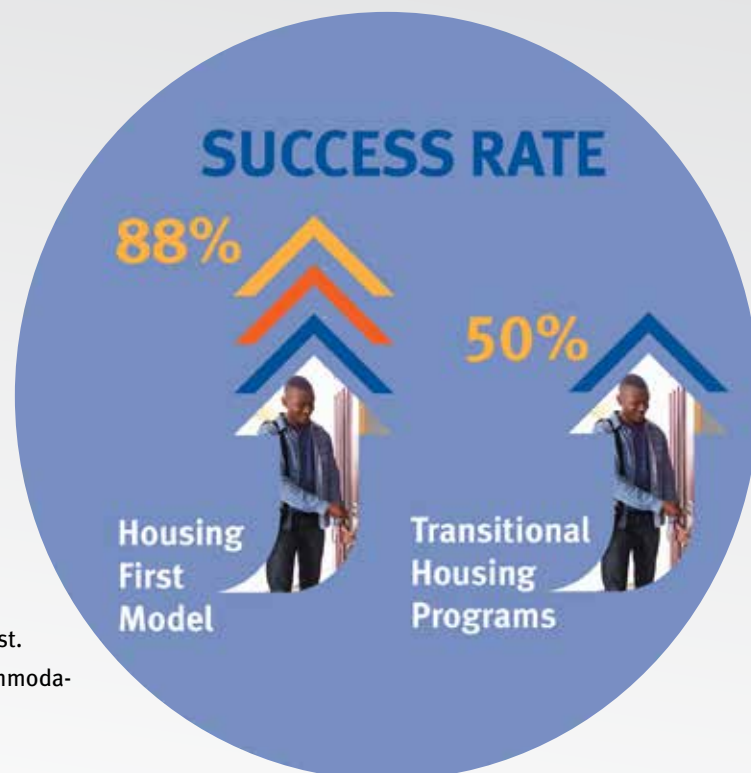
The Weld Homeless Coalition is committed to a Housing First response model. To read more on Housing First please see Appendix F.^{12 13}

Emergency Shelter

Emergency Shelter is designed to provide immediate relief and assistance, including temporary shelter, for up to 90 days to any individual or family experiencing homelessness. Under the Housing First model, individuals or families may be placed in an emergency shelter until an assessment can be completed to determine which housing option is best for them. Individuals and families may also be placed in Emergency Shelter if permanent (non-time limited) housing options are not immediately available.

¹² "Housing First," <https://www.usich.gov/solutions/housing/housing-first>.

¹³ "Housing First," <http://www.homelesshub.ca/solutions/housing-accommodation-and-supports/housing-first>.





Transitional Housing

Transitional Housing is designed to provide assistance to individuals (particularly youth) and families who experience homelessness for up to two years. Transitional Housing is often used for families who need more intensive case management, and allows people to further stabilize before moving back into non-time limited housing. While a complementary part of the homeless response system, Transitional Housing is not considered a Housing First strategy.

Permanent (Non-Time Limited) Housing Options

Independent Housing

Independent housing is any market-based housing in which an individual or family may reside. Independent Housing complements but is not considered a Housing First strategy.

Supportive Housing

Supportive Housing combines and links permanent, affordable housing with flexible, voluntary support services designed to help tenants stay housed and build the necessary skills to live as independently as possible.

- **Rapid Re-Housing:** Rapid Re-Housing is one of many supportive housing options. It is an intervention designed to help individuals and families quickly exit homelessness and return to non-time limited housing. Services and support associated with Rapid Re-Housing includes, but is not limited to, housing search and landlord negotiations, short term financial and/or rental assistance, connection to resources, and other client-driven case management. This type of assistance has proven to be particularly successful for families who do not need extended support. It also helps to increase turnover in shelters, which allows more families to be served. Rapid Re-Housing is considered a Housing First strategy.¹⁴
- **Public Housing:** Public Housing is a federally funded housing program for low-income households administered by HUD and operated locally by housing authorities.

Permanent Supportive Housing

Permanent Supportive Housing (PSH) is an evidence-based housing intervention that combines non-time limited affordable housing assistance with wraparound supportive services for individuals and families experiencing homelessness. Since there is no time limitation, participants may live in their homes as long as they meet the basic obligations of tenancy. While participation in services is encouraged, it is not a condition of living in the housing. Housing affordability is ensured either through a rent subsidy or by setting rents at affordable levels. PSH has proven particularly successful for those that are considered chronically homeless and/or other highly vulnerable individuals and families. There are three primary forms of supportive housing—single-site housing, scattered-site housing, and mixed housing. PSH is considered a Housing First strategy.

¹⁴ “Rapid Re-Housing,” <https://www.usich.gov/solutions/housing/rapid-re-housing>.

¹⁵ “Permanent Supportive Housing,” <https://www.usich.gov/solutions/housing/permanent-supportive-housing>.

Housing First Housing Options

The ultimate goal of Housing First is to place every individual and family into housing as quickly as possible, realizing that a household can become stable much more easily once basic needs are met. Housing First housing must be non-time limited and stably maintained. This is different than transitional housing, which is a time-limited housing program that can offer support to households for up to two years.

Permanent (Non-Time Limited) Housing Options

LEAST

Amount of Assistance

MOST

Independent Housing

Supportive Housing

Permanent Supportive Housing

Maintained by the household without ongoing additional assistance.

Combines and links permanent, affordable housing with flexible, voluntary support services designed to help tenants stay housed and build the necessary skills to live as independently as possible.

Examples include:

Rapid Re-Housing

A housing program that provides temporary financial assistance to households experiencing housing instability.

Public Housing

A federally funded housing program for low-income households administered by HUD and operated locally by housing authorities.

This most comprehensive housing program is usually reserved for the most chronically homeless households. Tenants may live in their homes as long as they meet basic obligations of tenancy, such as paying rent; have access to the support services that they need and want; and have a private and secure place to make their home, just like other members of the community, with the same rights and responsibilities.

THE PLAN

Addressing and Preventing Homelessness in Weld County for Veterans, Families, Individuals (Chronic) & Youth

Weld's Way Home addresses and prevents homelessness in Weld County through reliance on a Housing First model with an aligned continuum of services. Individuals and families experiencing homelessness will move along this continuum to the extent needed until they return to permanent (supportive or independent) housing. There are seven areas of focus along the continuum. Developing, improving, and aligning these seven areas will offer an accessible path back into housing for individuals or families experiencing homelessness.

The plan includes three broad areas of systematic activity—Assess, Assist, and Assign—each of which contains sub-activities.

Assess

Identification of individuals and families experiencing homelessness and determination of their vulnerability.

- 1. Identification:** Locate and identify those experiencing homelessness.
- 2. Emergency Assessment:** Initial assessment of time-sensitive immediate needs including food, shelter, clothing, threat assessment, etc.

Assist

Ensuring that any individual or family that is identified is connected so that they may be quickly housed.

- 3. Emergency Housing:** A location to shelter people immediately while further plans are made.
- 4. Stabilization Assessment:** A more detailed assessment of client needs to determine resources needed to achieve and maintain stability.

Assign

Matching an individual or family with the most appropriate housing.

- 5. Transitional and Permanent (non-time limited) Housing Options:** Helping clients identify longer-term housing that was deemed most appropriate through the stabilization assessment.
- 6. Case Management:** Client(s) meet with a case manager to create comprehensive, holistic care plans including, but not limited to, housing needs.
- 7. Wraparound Services:** Ensuring that services are available that extend beyond housing and toward self-sufficiency, as agreed upon with a case manager.

Weld County’s homeless response success to this point has been largely because of the hard work of individual agencies assisting those that are experiencing homelessness. Moving forward, the development of an aligned continuum will standardize the way that people experiencing homelessness are identified and supported, and increase the resources and options available to them and their case managers throughout the continuum. The following recommendations will help align the work county-wide, so that there may be a comprehensive, accessible continuum of services that will help to re-house people in permanent (non-time limited) housing as quickly and effectively as possible.

Please note, the following seven work areas address the challenges of the four homeless populations mentioned previously—Veterans, Families, Individuals (Chronic), and Youth (unaccompanied minor and aged 18+). In the following charts three colors are used that communicate priority:

Red – highest priority
Yellow – second priority
Blue – lowest priority

The seven areas of focus, types of work to be accomplished in each area, and prioritization of work were determined through a shared community conversation including direct and indirect service providers and generalist community leaders. An “X” in a box on the following pages signals that a needed resource is applicable to the specified population.



Identification

Identification of individuals and families experiencing homelessness can be particularly difficult. This is especially true of families living doubled-up, as well as youth, who are especially vulnerable and therefore invisible. People may be embarrassed by their situation, or may prefer not to live in permanent (non-time limited) housing.

There are currently several ways that Weld County is able to identify individuals and families experiencing homelessness, with the most common identification method being self-identification at locations across the county including, but not limited to, the Salvation Army and other locations for free meals, local houses of worship, school districts, health clinics and hospitals, local law enforcement and service centers such as the Carbon Valley Help Center. Self-referral to local homeless shelters and through 2-1-1 Information and Referral are common.

Identification is a key component of Housing First. Without identification of people who are homeless, our community cannot assist those in need to find and maintain housing.

The following additions to the continuum will better help individuals and families experiencing homelessness. For a detailed implementation plan that addresses several of these needed resources, please see the attached work plans.

Needed Resource	Veterans	Families	Individual (Chronic)	Unaccompanied Minor (0-17)	Youth (18-24)
Discharge Planning (for those in the foster care system, those incarcerated, those in medical care, etc.)	X	X	X		X
Coordinated information sharing, including a shared assessment/intake process and database	X	X	X		X
Creating and staffing a full-time street outreach program	X	X	X	X	X
Community education, including informing individuals where they can direct others to resources, and where they can go in the event they experience homelessness themselves	X	X	X	X	X
Educating all potential points of contact (e.g. service providers, outreach staff/volunteers, 2-1-1, etc.) on how to ask if a person is experiencing homelessness	X	X	X	X	X
Increased coordination with 2-1-1; continual updating of their database, ensuring that new services and resources are quickly brought to 2-1-1's attention	X	X	X	X	X

Red – highest priority
 Yellow – second priority
 Blue – lowest priority

Emergency Assessment

Once an individual or family has been identified as being homeless, an assessment of their situation is necessary to determine which steps a service provider/street outreach worker could offer to ensure that the people involved are out of harm’s way and no longer in imminent risk of danger. This emergency assessment, or the assessment of the lack of immediate basic needs, should happen immediately after a family or individual has been identified.

Emergency assessment is currently being completed separately by Weld County homeless serving agencies. Once this assessment is complete, each agency determines whether or not the individual or family would be a good fit for their program. If they are a good fit, they will be admitted, or placed on a waiting list. If they are not a good fit, they will be referred to another agency that may be able to better serve them. The positive relationships and communication among agencies in Weld County have helped this system place people into the most appropriate housing (temporary or permanent). However, coordinating and formalizing this referral and support process will ensure that each individual or family who becomes homeless will receive equal assessment and opportunity for assistance.

A coordinated tool for assessing individuals and families experiencing homelessness is a key component of a Housing First model. While the same assessment tool may not be necessary for all four populations, it is essential that people within each specific population are assessed using a consistent tool. For example, all families should be assessed using the same tool, but this might be a different tool than what is used to assess veterans. Using a single assessment tool for each population group will help determine vulnerability and priority of access to services as well as which type of housing will be best suited for the individual or family in need.

The following additions to the continuum will better help individuals and families experiencing homelessness. For a detailed implementation plan that addresses several of these needed resources, please see the attached work plans.

Needed Resource	Veterans	Families	Individual (Chronic)	Unaccompanied Minor (0-17)	Youth (18-24)
Navigation Center	X	X	X		X
Uniform tool for coordinated assessment	X	X	X	X	X
Virtual emergency assessment tool	X	X	X	X	X
Engagement and alignment of faith-based community to coordinate with homelessness efforts for the involvement and development of solutions	X	X			
Warm hand-offs for most appropriate resource (if agency is unable to help)	X	X	X	X	X
Increased cooperation and communication amongst faith-based organizations	X	X			X

Red – highest priority
 Yellow – second priority
 Blue – lowest priority

Emergency Housing

After an individual or family has been assessed, they will be offered available emergency housing, if deemed necessary, and if no other permanent or non-time limited housing option is immediately available. This emergency sheltering ensures that any individual or family who falls into homelessness will have a safe place to stay while next steps are identified and carried out. If permanent (non-time limited) housing is available, an emergency housing option will not be necessary.

Currently, the local emergency housing system is beyond capacity. All of the emergency shelters in Weld County have regular waiting lists that can be 15-plus people/households long. Because there is a lack of affordable, permanent housing, the current emergency sheltering options are being used more like transitional housing, with extensions regularly being granted beyond the normal allotted 90-day stay. Usage of these emergency sheltering options has increased in the past few years, which has stretched the capacity of existing shelters.

Informal sheltering options have also developed, including at the North Range Behavioral Health Crisis Response Center, the North Colorado Medical Center Emergency Department, detoxification programs and jail. These “sheltering” locations are costly to the community, and divert the time and resources of professionals who have other primary responsibilities and whose location may not be the best fit for a homeless individual or family.

While diverting from emergency shelter options is the ultimate goal of Housing First, it is not always feasible. Ideally, people experiencing homelessness should stay in Emergency Shelter no longer than 30 days before moving into permanent housing. This goal, while ambitious, is standard for communities utilizing the Housing First approach.

The following additions to the continuum will better help individuals and families experiencing homelessness. For a detailed implementation plan that addresses several of these needed resources, please see the attached work plans.

Needed Resource	Veterans	Families	Individual (Chronic)	Unaccompanied Minor (0-17)	Youth (18-24)
Permanent overnight sheltering options across Weld County	X	X	X	X	X
A more sustainable motel voucher system	X	X	X		X
Temporary cold weather shelter locations across Weld County	X	X	X	X	X
Emergency shelters leveraged to encourage those in need of mental health or other treatment to seek it	X	X	X	X	X
Interfaith Hospitality Network model—interfaith and community provision of sheltering programs, meals, and comprehensive assistance; houses of worship and other organizations collaborate and share responsibilities on a rotating basis	X	X			X
Raising community awareness of cold weather shelter and increasing referrals thereto	X	X	X		X
Family sheltering options where parents do not need to be split up	X	X			X
Transportation to Emergency Shelter options	X	X	X		X

Stabilization Assessment

After an individual or family is in emergency housing (if non-time limited housing is not available) a more detailed assessment of their needs will be completed. This will ensure that the clients will be placed in housing and referred to services that will help them become most stable. Such a stabilization assessment will further define what housing and supportive services are needed in a long-term recovery plan. Such stabilization assessment tools are being used by case managers at emergency shelters and resource centers here in Weld County. However, there is not one uniform tool that all agencies use to make this assessment. By better coordinating and formalizing this system, a greater number of those who experience homelessness will receive equal assessment and opportunity for assistance.

A key part of Housing First is assisting individuals and families with any needs they may have beyond their housing needs. A stabilization assessment tool will help service providers determine what needs the individual or family may have that will help them to maintain their housing.

The following additions to the continuum will better help individuals and families experiencing homelessness. For a detailed implementation plan that addresses several of these needed resources, please see the attached work plans.

Needed Resource	Veterans	Families	Individual (Chronic)	Unaccompanied Minor (0-17)	Youth (18-24)
Widespread use of Homeless Management Information System (HMIS) at agencies throughout the county to ensure sharing of information	X	X	X	X	X
Coordinated form for assessment of stability and self-sufficiency	X	X	X	X	X
Robust virtual resource guides (expansion of 2-1-1 database)	X	X	X	X	X

Transitional and Permanent (Non-Time Limited) Housing Options

Once the stabilization assessment is complete, the most appropriate housing option will be agreed upon with the individual or family experiencing homelessness. A transitional or permanent (non-time limited) housing solution will be offered. For a full list of current, available Weld County transitional and permanent housing options please see “Current Available Resources” on page 18.

Immediate access to permanent housing with no readiness requirements is the most important aspect of Housing First. Permanent housing will not be time limited, meaning that an individual or family can stay in the housing for as long as they see fit and can maintain the requirements of living in the unit. All individuals and families should be considered for non-time limited housing first before transitional housing is considered as an option, though transitional housing may be more appropriate for a youth. The appropriate independent, supportive, or permanent supportive housing placement for an individual or family will be determined on a case-by-case basis. Consumer choice of several different permanent housing options is key to Housing First, as some locations may be more appealing, or may be a better fit than others, depending on the individual or family.

Transitional housing, while not considered a Housing First tool, may be appropriate in some circumstances. It has been found to be most successful for families and youth, though on certain occasions may be deemed appropriate for a single individual. Recent studies have shown that transitional housing has only marginally successful outcomes for families. It is most successful for families that have high barriers/needs and require more support than an independent housing option provides. The goal of a transitional housing program is to move the client(s) into permanent housing. Because of the high cost of transitional housing, there should only be a limited number of transitional housing units available for families and youth in Weld County.

Youth are a population for which transitional housing has been found to be particularly beneficial. Often because youth do not have any rental history/experience, a transitional housing setting may be more appropriate. In this setting, they will be able to acquire rental history and credit, which may help them to maintain permanent (non-time limited) housing in the future.

The following additions to the continuum will better help individuals and families experiencing homelessness. For a detailed implementation plan that addresses several of these needed resources, please see the attached work plans.

Needed Resource	Veterans	Families	Individual (Chronic)	Unaccompanied Minor (0-17)	Youth (18-24)
Construction of new units of affordable housing	X	X			X
Increased number of Permanent Supportive Housing units	X		X		
Alternative housing units (such as tiny houses, etc.)	X		X		
Additional Rapid Re-Housing assistance	X	X			X
Streamlined application process for all public and supportive housing (i.e. a consistent application form for all units)	X	X			X
Increased number of foster care homes				X	
Increased number of Family Unification Program (FUP) housing vouchers	X				
Landlord outreach	X	X	X		X
Implementation of a Host Homes model, including soft landing homes				X	
Long-term affordable housing for persons with disabilities	X	X	X		X
Having additional rental assistance available	X				X
Housing units tied to case management	X	X	X		X
Risk Mitigation Fund for landlords	X				X
Changes in public policy to increase financial viability of affordable housing options	X	X	X		X
Employer partnerships to help workers own their own homes	X	X	X		
One Congregation, One Family model—mentors from faith-based, community-based, and private sector organizations are paired with families experiencing housing instability to help families achieve stability and build community support systems	X	X			X
Adopt-an-Apartment model—individuals or businesses commit to adopting an apartment, meaning they help to get it move in ready (by furnishing, cleaning, etc.) for homeless families and individuals	X	X	X		X
Just One Unit model—advocating for large apartment complexes to dedicate just one unit to housing a homeless individual or family	X	X	X		X

Case Management

Once a housing location (beyond emergency housing) has been established, it will be critical to assist the individual or family to participate in case management. It is necessary to create a comprehensive, holistic care plan that extends beyond housing needs, and encompasses mental/emotional well-being, physical health, expanding education and general life skills. Case management is key to ensuring individualized and client-driven supports with a recovery orientation.

Case management is a key component of Housing First that not only helps individuals and families find the appropriate housing option, but also helps them once they are in housing with additional supports needed to maintain stable housing. In some cases, the case manager may also help mediate tenancy issues that may arise between a tenant and landlord. Once a case manager helps reach stabilization, social and community integration should be a key area of focus for the case manager.

Currently, all of the supportive sheltering options in Weld County require a willingness to participate in case management. There are also numerous case management programs that are not tied to housing, but that focus on self-sufficiency, substance abuse, mental/emotional well-being, and in some cases, holistic care management. However, in order to ensure that all at-risk individuals that need case management are able to attain it, the current capacity of the case management system should be expanded.

The following additions to the continuum will better help individuals and families experiencing homelessness. For a detailed implementation plan that addresses several of these needed resources, please see the attached work plans.

Needed Resource	Veterans	Families	Individual (Chronic)	Unaccompanied Minor (0-17)	Youth (18-24)
Coordinated case management standards, unique to each housing model	X	X	X		X
Case management for Housing Choice Voucher (Section 8) participants	X	X			
Additional case management that addresses behavioral health needs			X	X	X
Individual Development Accounts—savings accounts for low-income families which are used for long-term asset building, usually matching deposits from a third party sponsor (often a financial institution)—tied to case management and/or financial literacy classes	X	X			X
Apartment dweller complaint resolution procedure	X				X
Increased number of SUD-VASH specialists	X				
Peer Navigation Program	X				X
A case management program which remains committed to an individual or family for an extended duration and is focused on long-term success, not emergency response	X	X	X	X	X
General life skills programming			X	X	X
A collaborative catch-all case management program that provides assistance with resource navigation and financial literacy		X	X	X	X
Leverage and/or incentivize to increase and maintain program participation			X	X	X

Wraparound Services

Once a permanent (non-time limited) housing placement is found, wraparound services will accompany any individual or family that may need them. Some individuals or families will need more intensive services than others. Such assistance (beyond housing and basic needs) is meant to help individuals and families move closer to stabilization and self-sufficiency.

Currently, there are many different partners in Weld County that provide wraparound services that focus on holistic care, including but not limited to physical/mental/emotional health, continuing/furthering education, financial management, relationship management, job placement/security, justice system navigation, etc. Suggestions as to which services may be most beneficial for an individual or family are made by local case managers. All services may be sought individually, or with the assistance of the case manager.

A network of wraparound services is key to any successful Housing First model. A variety of services can help those that secure stable housing to maintain it. Every individual and family will require different wraparound services, so it is important that any and all supportive service options be explored when requested by an individual or family.

The following additions to the continuum will better help individuals and families experiencing homelessness. For a detailed implementation plan that addresses several of these needed resources, please see the attached work plans.

Needed Resource	Veterans	Families	Individual (Chronic)	Unaccompanied Minor (0-17)	Youth (18-24)
Financial support resources	X	X	X		X
A partnership with nearby communities to help individuals and families from elsewhere return home and reunite with their support base		X	X		X
Accessible and affordable child care	X	X		X	X
Job training	X	X	X	X	X
Transportation options	X	X	X	X	X
A tenant education program which makes potential tenants who might be deemed as high-risk more acceptable to landlords	X	X	X		X
Special courts for housing and homelessness (“homeless court”)	X		X		

Red – highest priority
 Yellow – second priority
 Blue – lowest priority

NEXT STEPS: A PLAN FOR PRIORITIZATION OF NEEDED RESOURCES

In order to decrease homelessness and housing instability so that every Weld County citizen has access to safe, adequate, and affordable housing, the aligned continuum of services laid out above is needed. Due to resource constraints and the natural flow of work not every task can be accomplished at once.

In an attempt to provide guidance to the work, the Weld's Way Home planning committee prioritized the above identified needed resources based on perceived 1) Urgency of Community Need, 2) Feasibility of Implementation, and 3) Return on Investment, providing first steps for plan implementation. The following focus areas were determined to be the most critical as Weld County better the current continuum of services.

These areas of focus will be a starting point for Weld's Way Home. *Over time work will be done, goals met, and of necessity, re-prioritization will occur.* This Next Steps section of the plan will be reviewed at least annually.

The below eight areas are what the community has prioritized to focus on for the first years of work. Each area has an attached work plan, which identifies key tasks and activities, who is responsible for completing each task/activity, the current status of said task/activity, resources needed to accomplish these tasks/activities, and additional comments.

WELD'S WAY HOME 8 PRIORITIES

Community Education

Creating community-wide awareness of available resources, both for the sake of those experiencing homelessness and for those who want to help.

Cold Weather Shelter

Offering bed space on the coldest nights of the year to reduce the likelihood of death and irreparable harm.

Shared Intake and Assessment

Developing a Coordinated Assessment and Housing Placement System available to all homeless serving providers.

Navigation Center

Providing a place for connection with resources and case management and meeting of ongoing needs such as a mailing address, laundry, shower, etc.

Discharge Planning

Assisting those more likely to become homeless as they leave the hospital, corrections, foster care, etc., in determining next steps.

Expanded Case Management Services

Working in-depth with people that are homeless but not part of programs offered by homeless serving agencies.

Street Outreach

Discovering those experiencing homelessness, providing immediate assistance as needed and connecting them with resources.

Affordable Housing with Case Management

Building affordable housing connected with supportive services to reduce the re-occurrence of homelessness.

Work Plan for Community Education

Monitored by: Weld's Way Home Executive Council

Tasks	Specify key activities and their details (Subtasks)	Who?	Resources needed	Comments
1st Task: Inform individuals where they can direct others to resources	1a: Make sure all downtown businesses have 211 cards readily available	UWWC	Printing/marketing costs; staff and volunteer time	
	1b: Community Campaign: Give a Hand Up, not a Hand Out	UWWC	Printing/marketing costs; staff and volunteer time	
	1c: Include this information in community feedback sessions	Weld Homeless Coalition	Staff Time	Our community will host meetings for a period of community comment/ feedback on the plan. At these meetings we will educate people about what to do if they see an individual experiencing homelessness.
	1d: Inform community members when the CAHP System is put into place; where to direct individuals and families so that their situation may be assessed	CHAPS Coordinator/ agencies involved	Printing/Marketing/ Communication materials; staff time for a press release, website updates; mileage for meetings outside of Greeley	
2nd Task: Inform members of the community where they can go in the event they experience homelessness	2a: Make sure 2-1-1 database is updated with all possible sheltering options	UWWC	Staff Time	
	2b: Inform community members when the CAHP System is put into place; where to direct individuals and families so that their situation may be assessed	CAHPS Coordinator/ agencies Involved	Printing/Marketing/ Communication materials; staff time press release, website updates; mileage for meetings outside of Greeley	
3rd Task: Create outreach materials to inform various groups about Weld's Way Home	3a: Outreach for Government Entities	UWWC	Printing and mailing budget; mileage for community meetings; Staff Time	
	3b: Outreach for Business	UWWC	Printing and mailing budget; Staff Time	
	3c: Outreach for Medical Facilities	UWWC	Printing and mailing budget; Staff Time	
	3d: Outreach for Faith-Based Agencies	UWWC	Printing and mailing budget; Staff Time	
	3e: Coordinate Outreach for Community Input/Feedback	UWWC	Space to host focus groups, food (if provided)	
4th Task: Create and maintain web presence	4a: Create webpage	UWWC	Funds for hosting site; Staff Time	
	4b: Create and maintain social media platforms	UWWC	Staff/Volunteer Time	
5th Task: Mass media initiatives	Develop collateral including but not limited to press releases, community signage and local TV and radio slots	UWWC	Staff/Volunteer Time	
6th Task: Engage municipal and county representative to help end Veteran Homelessness	Invite all Weld County mayors to become a part of the Mayor's Challenge to End Veteran Homelessness	Volunteers of America, VA, and UWWC	Staff/Volunteer Time	

Work Plan for Shared Intake and Assessment

Monitored by: Weld's Way Home Executive Council

Tasks	Specify key activities and their details (Subtasks)	Who?	Resources needed	Comments
1st Task: Hire CAHPS Coordinator		UWWC and UWLC	\$73,000 per FTE; staff mgt time; space to house, desk, shared support costs	This will be a joint staff person facilitating work in Larimer and Weld counties.
2nd Task: Determine how to ensure a common assessment	2a: Determine a common assessment/prescreening tool for entire community	NoCO CoC	Staff/Committee Time	
	2b: Train all providers on use of the assessment tool	CAHPS Coordinator and Committee	Staff/Committee Time; incentive to encourage use	
	2c: Develop and implement data sharing agreements	CAHPS Coordinator and Committee	Staff/Committee Time	Develop an MOU and ROI.
3rd Task: Determine how to do case conferencing	3a: Determine if anyone else in the county is doing this	CAHPS Coordinator and Committee	Staff/Committee Time	
	3b: Determine which organizations will be involved	CAHPS Coordinator and Committee	Staff/Committee Time	
	3c: Determine which technology/database will help complete task	CAHPS Coordinator and Committee	Staff/Committee Time; \$ to purchase software	
	3d: Determine if this will be in-person, online, or both	CAHPS Coordinator and Committee	Staff/Committee Time	
	3e: Determine how often the group will meet	CAHPS Coordinator and Committee	Staff/Committee Time	
	3f: Determine what will be covered and how prioritization protocol and by-name lists will be used in case conferencing	CAHPS Coordinator and Committee	Staff/Committee Time	
4th Task: Determine who will be the Community Coordinator		CAHPS Coordinator and Committee	Staff/Committee Time	This person maintains a bird's eye view of the by-name list and makes sure no client is falling through the cracks as they become document ready for permanent housing.
5th Task: Determine who will serve as Housing Navigators	5a: Determine who are the staff working at sites already doing assessments that can also serve as Housing Navigators	CAHPS Coordinator and Committee	Staff/Committee Time	
	5b: Determine who else should be serving as Housing Navigators	CAHPS Coordinator and Committee	Staff/Committee Time	
	5c: Determine how to get those not already on board to join	CAHPS Coordinator and Committee	Staff/Committee Time	
	5d: Determine how to train everyone	CAHPS Coordinator and Committee	Staff/Committee Time	
6th Task: Determine how to pair Housing Navigators with clients	Determine how to ensure that only one organization is providing the client with navigation services	CAHPS Coordinator and Committee	Staff/Committee Time	Case by case basis? By where the assessment is done?
7th Task: Determine who will be the Housing Matcher		CAHPS Coordinator and Committee	Staff/Committee Time	Leads process to match clients to vacancies in the system, responsible for communicating with providers regarding pending client-vacancy match, facilitates communication between providers and housing navigators once client is selected as a potential match.
8th Task: Determine who can conduct an assessment	Inventory the resources (orgs/staff/volunteers) we have for outreach and assessment and where best to deploy them	CAHPS Coordinator and Committee	Staff/Committee Time	Can each organization contribute one staff member to do X number of assessments? Per week? Month? Commit to a certain # of hours?

Work Plan for Shared Intake and Assessment

Monitored by: Weld's Way Home Executive Council

Tasks	Specify key activities and their details (Subtasks)	Who?	Resources needed	Comments
9th Task: Determine how to operationalize the assignment process	9a: Determine how the matcher communicates with housing providers and navigators	CAHPS Coordinator and Committee	Staff/Committee Time	
	9b: Determine how to ensure open communication/client confidentiality	CAHPS Coordinator and Committee	Staff/Committee Time	
	9c: Determine how clients' needs and preferences are taken into acct	CAHPS Coordinator and Committee	Staff/Committee Time	
	9d: Determine how to operationalize prioritization protocol	CAHPS Coordinator and Committee	Staff/Committee Time	
	9e: Determine how to make the process as efficient as possible	CAHPS Coordinator and Committee	Staff/Committee Time	
10th Task: Determine how to develop a by-name list	10a: Develop a system to ensure that all assessment data goes to the same place once collected	CAHPS Coordinator and Committee	Staff/Committee Time	
	10b: Determine steps needed to ensure data sharing among providers	CAHPS Coordinator and Committee	Staff/Committee Time	
	10c: Determine how to ensure client confidentiality	CAHPS Coordinator and Committee	Staff/Committee Time	
	10d: Develop protocol to ensure that list updates are live, or close to live?	CAHPS Coordinator and Committee	Staff/Committee Time	
	10e: Develop protocol/policy to ensure that every veteran, family, youth & chronic individual is added to list, no matter where they currently live	CAHPS Coordinator and Committee	Staff/Committee Time	
11th Task: Determine how to prioritize our resources	11a: Determine if assessment tool will be only guideline for prioritization of housing	CAHPS Coordinator and Committee	Staff/Committee Time	
	11b: Determine how to operationalize these protocols county-wide	CAHPS Coordinator and Committee	Staff/Committee Time	
12th Task: Determine how to coordinate outreach geographically	Determine the best way to organize outreach efforts so that all relevant portions of the community are covered	CAHPS Coordinator and Committee	Staff/Committee Time	Can each organization contribute one staff member to do X number of assessments? Per week/month? Commit to a certain # of hours?
13th Task: Determine where the housing will come from	13a: Determine which providers need to be educated and engaged	CAHPS Coordinator and Committee	Staff/Committee Time	
	13b: Determine how to get program based housing providers to participate	CAHPS Coordinator and Committee	Staff/Committee Time	
	13c: Determine how to get private housing providers to participate	CAHPS Coordinator and Committee	Staff/Committee Time	
	13d: Determine the agreements that need to be in place to make 10b/10c happen	CAHPS Coordinator and Committee	Staff/Committee Time	
	13e: Develop a list of all current housing resources available	CAHPS Coordinator and Committee	Staff/Committee Time; database to track current housing resources	
14th Task: Determine how to develop a real time vacancy list	14a: Determine which database to use to develop real-time list of housing vacancies/service openings in RRH/PSH programs	CAHPS Coordinator and Committee	Staff/Committee Time; \$ to purchase database	
	14b: Determine who will be responsible for keeping/updating	CAHPS Coordinator and Committee	Staff/Committee Time	
	14c: Determine how providers will update the list	CAHPS Coordinator and Committee	Staff/Committee Time	

Please note: A CAHP System has already been put into place for veterans experiencing homelessness across Larimer and Weld counties. Individuals that were a part of establishing the Veterans CAHP System should also be a part of implementing the CAHP System for Families, Individuals (Chronic), and Youth.

Work Plan for Discharge Planning

Monitored by: Weld's Way Home Executive Council

Tasks	Specify key activities and their details (Subtasks)	Who?	Resources needed	Comments
1st Task: Create a working group of providers and professionals that will research and implement discharge plans	1a: Determine which providers/ professionals are affected by and should be planning for discharge of individuals experiencing homelessness	UWWC	Staff time	
	1b: Research discharge plans currently being implemented by various providers in Weld County	Discharge Planning Group	Staff/Volunteer Time	
2nd Task: Determine which discharge planning best practices fit most with Weld County demographics	2a: Research discharge planning best practices for areas with similar demographics to Weld County	Discharge Planning Group	Staff/Volunteer Time	
	2b: Analyze best practice strategies and current discharge planning to determine which model most fits our community's needs	Discharge Planning Group	Staff/Volunteer Time	
3rd Task: Create discharge plan for Weld County	3a: Finalize strategies that will best fit Weld County's needs and create plan with clear action steps	Discharge Planning Group	Staff/Volunteer Time	
	3b: Create plan for disseminating information throughout the county to all providers dealing with discharge of homeless individuals	Discharge Planning Group	Staff/Volunteer time; print, mail costs for advertising materials	
	3c: Ensure that Weld's Way Home plan aligns with HUD guidelines for discharge planning	WWH Coordinator and Discharge Planning Group	Staff/Volunteer Time	
	3d: Determine structure for sustainability of discharge plan	Discharge Planning Group	Staff/Volunteer Time	
	3e: Determine evaluation methods to ensure discharge plan is working successfully	Discharge Planning Group	Staff/Volunteer Time	
4th Task: Implement discharge plan		WWH Coordinator	Staff Time	

Work Plan for Street Outreach

Monitored by: Weld's Way Home Executive Council

Tasks	Specify key activities and their details (Subtasks)	Who?	Resources needed	Comments
1st Task: Determine which street outreach model is most appropriate for Weld County	1a: Research volunteer outreach model	Weld Homeless Coalition	Staff/Volunteer Time	Visit Homeless Gear in Fort Collins.
	1b: Research paid outreach model	Weld Homeless Coalition	Staff/Volunteer Time	
2nd Task: Hire outreach workers	2a: Determine where street outreach workers will be housed	Weld Homeless Coalition	Staff/Volunteer Time	Navigation Center? Already established non-profit in the community?
	2b: Develop Job Description	Staff Managing Agency	Staff Time	
	2c: Secure funding to staff outreach workers for 3 years	Staff Managing Agency	\$50,000 per FTE; staff oversight	Will need to determine how many staff workers will be necessary. Will any be outside of Greeley/Evans?
	2d: Hold interviews	Staff Managing Agency	Staff Time	
	2e: Hire Staff	Staff Managing Agency	Staff Time	
	2f: Orientation and training for newly hired staff	Staff Managing Agency	Staff Time	
3rd Task: Launch Street Outreach program	Coordinate outreach for community input/feedback	Staff Managing Agency	Staff Time	
4th Task: Evaluation of Street Outreach program		Staff Managing Agency; Board of Directors/ Advisory Board	Staff Time	



Work Plan for Cold Weather Shelter

Monitored by: Weld's Way Home Executive Council

Tasks	Specify key activities and their details (Subtasks)	Who?	Resources needed	Comments
1st task: Establish/ determine need	1a: Determine which population we want to serve	Cold Weather Committee (CWC)	Staff/Volunteer Time	Will we still chose to only serve single men? Is there a better option for women and children? Youth?
	1b: Research how many people GCC has served historically	CWC	Staff/Volunteer Time	
2nd task: Explore option of Cold Weather Shelter and Navigation Center being combined		CWC and Navigation Center Committee	Staff/Volunteer Time	Will this be in the same building the first year? The second year? Ever?
			Staff/Volunteer Time	
3rd task: Determine model that best suits our community's needs (i.e. single vs. multi- ple locations)	3a: Research single location model	CWC	Staff/Volunteer Time	
	3b: Research multiple location model	CWC	Staff/Volunteer Time	
4th task: Draft business plan	4a: General Description/Purpose/ Need	CWC	Staff/Volunteer Time	
	4b: Consumer analysis	CWC	Staff/Volunteer Time	
	4c: Competitive analysis	CWC	Staff/Volunteer Time	
	4d: Products and services to be offered	CWC	Staff/Volunteer Time	
	4e: Marketing Plan	CWC	Staff/Volunteer Time	
	4f: Operational Plan	CWC	Staff/Volunteer Time	
	4g: Management and organization	CWC	Staff/Volunteer Time	
	4h: Start-up expenses and capitalization	CWC	Staff/Volunteer Time	
	4i: Financial Plan	CWC	Staff/Volunteer Time	

Work Plan for Cold Weather Shelter

Monitored by: Weld's Way Home Executive Council

Tasks	Specify key activities and their details (Subtasks)	Who?	Resources needed	Comments
5th Task: Secure location	5a: Answer: Will this be combined with Navigation Center building?	CWC	Staff/Volunteer Time	Will this require a capital campaign?
	5b: Answer: Will this be located in one building, or in several different buildings?	CWC	Staff/Volunteer Time	Who will manage these separate locations? How will they communicate with one another?
	5c: Research existing buildings, and possibility of starting a new capital project	CWC	Resources needed will be determined after question in 5a/5b is answered	
	5d: Determine an optimal location	CWC		
	5e: Secure funding for renovations or capital project	CWC		
	5f: Complete agreement for building use	CWC		
6th Task: Determine staffing structure	6a: Answer: Who will manage? How many staff will we need? Salary?	CWC	Staff/Volunteer Time	This will be dependent on numbers served.
	6b: Write Position Description	Staff Managing Agency	Staff Time	
	6c: Secure funding for staff	CWC and Staff Managing Agency		
	6d: Hold Interviews	Staff Managing Agency	Staff Time	
	6e: Hire staff	Staff Managing Agency	Staff Time	
	6f: Orientation and training for new staff	Staff Managing Agency	Staff Time	
7th Task: Open Cold Weather Shelter for 2016-2017 season		Staff Managing Agency	General Operating Costs	

Work Plan for Navigation Center

Monitored by: Weld's Way Home Executive Council

Tasks	Specify key activities and their details (Subtasks)	Who?	Resources needed	Comments
1st Task: Determine services that will be available for access	1a: Identify services already being accessed	Navigation Center Committee (NCC)	Staff/Volunteer Time	
	1b: Determine which services being accessed would be more appropriate in one central location	NCC	Staff/Volunteer Time	
2nd Task: Determine tool for assessment	2a: Research available tools	CWC	Staff/Volunteer Time	
	2b: Look at what other communities are using	NCC	Staff/Volunteer Time	
	2c: Commit to using one tool	NCC	Staff/Volunteer Time	
3rd Task: Determine staffing structure for administering assessment	3a: Determine which agencies will administer the assessment	NCC	Staff/Volunteer Time	
	3b: Grant access for agency representatives to administer assessment	NCC	Staff/Volunteer Time	
	3c: Train staff on how to administer assessment	NCC	Staff/Volunteer Time; resources for assessment (i.e. computers, mobile phones, internet platform, etc.)	This task will not be accomplished until right before the Navigation Center opens.
4th Task: Establish need/determine size of population to be served	4a: Based on which services will be housed here, ask how many guests they serve daily	NCC	Staff/Volunteer Time	
	4b: Calculate for combined presence	NCC	Staff/Volunteer Time	
	4c: Calculate for unforeseen guests	NCC	Staff/Volunteer Time	
5th Task: Create a business plan	5a: General Description/Purpose/Need	NCC	Staff/Volunteer Time	
	5b: Consumer analysis	NCC	Staff/Volunteer Time	
	5c: Competitive analysis	NCC	Staff/Volunteer Time	
	5d: Products and services to be offered	NCC	Staff/Volunteer Time	
	5e: Marketing Plan	NCC	Staff/Volunteer Time	
	5f: Operational Plan	NCC	Staff/Volunteer Time	
	5g: Management and Organization	NCC	Staff/Volunteer Time	
	5h: Startup expenses and capitalization	NCC	Staff/Volunteer Time	
6th Task: Secure building to locate services in	6a: Research best location for building to be located	NCC	Staff/Volunteer Time	
	6b: Determine whether already existing infrastructure can be used, or if a new building is needed	NCC	Staff/Volunteer Time	Total capital cost will be determined after this sub-task is accomplished.
	6c: Plan for space to hold Cold Weather Shelter?	NCC	Staff/Volunteer Time	Could eventually mean additional funding and contracts.
7th Task: Grand Opening		NCC	Event costs, including advertisement, food, staff/volunteer time, etc.	

Work Plan for Expanded Case Management Services

Monitored by: Weld's Way Home Executive Council

Tasks	Specify key activities and their details (Subtasks)	Who?	Resources needed	Comments
1st Task: Determine which organizations are already engaging in case management services	Create a list of all available case management opportunities, and criteria for being involved in each	Weld Homeless Coalition, CAHPS Coordinator and CAHPS Agencies	Staff/Volunteer Time	Case management services do not only have to be tied to housing opportunities.
2nd Task: Determine where there are gaps in services regarding case management services	Consider possible case management for all populations	Weld Homeless Coalition, CAHPS Coordinator and CAHPS Agencies	Staff/Volunteer Time	Are there gaps for specific populations?
3rd Task: Determine where there is duplication of services regarding case management	Consider available case management for all populations	Weld Homeless Coalition, CAHPS Coordinator and CAHPS Agencies	Staff/Volunteer Time	Pay particular attention to individuals or families that are accessing several services in our community. Could one case manager be helping them do everything?
4th Task: Determine if there is already a suitable agency that can provide case management where there are gaps		Weld Homeless Coalition, CAHPS Coordinator and CAHPS Agencies	Staff/Volunteer Time	Is any agency willing to expand their services to provide additional case management?
5th Task: Research case management for those that are not connected to housing services	Determine: which model is best suited for our community and our population?	Weld Homeless Coalition, CAHPS Coordinator and CAHPS Agencies	Staff/Volunteer Time	Mobile case management? Connect with street outreach?
6th Task: Research case management tied to Public Housing Authority units		Weld Homeless Coalition, CAHPS Coordinator and CAHPS Agencies	Staff/Volunteer Time	
7th Task: Research case management assistance for veterans not eligible for SSVF and HUD-VASH		Weld Homeless Coalition, CAHPS Coordinator and CAHPS Agencies	Staff/Volunteer Time	
8th Task: Develop a plan for implementing expanded case management services in Weld County		Weld Homeless Coalition, CAHPS Coordinator and CAHPS Agencies	Staff/Volunteer Time	

Work Plan for Affordable Housing with Case Management

Monitored by: Weld's Way Home Executive Council

Tasks	Specify key activities and their details (Subtasks)	Who?	Resources needed	Comments
1st Task: Market-based survey of available affordable housing units, and deficit of available units		Weld Homeless Coalition	TBD (cost based upon research firm's estimate/bid); Staff Time	What is the need in Weld County? Do we have a goal of # of affordable housing units developed by X date?
2nd Task: Revitalize board of directors for High Plains Housing Development Corporation		Weld Homeless Coalition	Staff/Volunteer Time	
3rd Task: Hire High Plains Housing Development Corporation Executive Director		Board of Directors of the HPHDC	\$70,000 per FTE	HPHDC will need to reapply for its CHDO status
4th Task: Determine who is already working to plan out affordable housing developments across Weld County		ED of HPHDC	Staff Time	
5th Task: Research affordable housing options	5a: Research Tiny Houses	ED of HPHDC	Staff Time	
	5b: Research Permanent Supportive Housing	ED of HPHDC	Staff Time	What is the # of PSH units needed?
	5c: Research subsidized family housing	ED of HPHDC	Staff Time	How many more units do we need?
	5d: Research zoning variances for higher density developments	ED of HPHDC	Staff Time	
	5e: Research workforce housing	ED of HPHDC	Staff Time	
	5f: Research congregate living models	ED of HPHDC	Staff Time	
6th Task: Advocate for the use of CDBG dollars to be used for more affordable housing development	6a: Find out: when are the allocations made?	Weld Homeless Coalition and ED of HPHDC	Space to host focus groups, food (if provided)	
	6b: Research/create marketing materials for why funds should be used in this way	Weld Homeless Coalition and ED of HPHDC	Funds for hosting site; Staff Time	
	6c: Contact and meet with government officials who oversee the process of allocating CDBG Funds	Weld Homeless Coalition and ED of HPHDC	Staff/Volunteer Time	
	6d: Encourage community members to advocate for this use of CDBG funds	Weld Homeless Coalition and ED of HPHDC	Staff Time	
	6e: Research other creative uses for CDBG Funds*	ED of HPHDC	Staff Time	
7th Task: Advocate for state legislation to allow condominiums to be a more realistic possibility for developers	7a: Research the historic reason for why this legislation passed	ED of HPHDC	Staff Time	
	7b: Research to see if an amendment has been brought up in recent sessions	ED of HPHDC	Staff Time	
	7c: Advocate with local/state legislators to bring a revision to the bill in the next session	ED of HPHDC	Staff Time	

* https://www.hudexchange.info/community-development/project-profiles/?utm_source=HUD+Exchange+Mailing+List&utm_campaign=1e54596d95-CDBG_Project_Profiles&utm_medium=email&utm_term=0_f32b935a5f-1e54596d95-19353017.

EVALUATION AND SUSTAINABILITY

Evaluation

All work that is completed by the Weld Homeless Coalition and various task forces associated with the prioritized areas of focus will be monitored on the Thriving Weld Dashboard, Weld County's tool to measure community-wide shared goals and outcomes. Progress made on all tasks on the work plans will be visible to the public on www.thrivingweld.com and will be monitored by the Weld's Way Home Executive Council.

Progress on each work plan will be reviewed at the end of each program year (June 30). Once tasks/work plans are completed, the Weld's Way Home Executive Council and the Weld Homeless Coalition will re-prioritize areas of focus, based on need. Established need will, first and foremost, be based on the feedback and requests of the people served. Then, the needs of homeless-serving agencies and other partner agencies, any comments/observations made by the general public, and national and state trends (including but not limited to evidence-based best practices, legislation, and funding trends) will be considered.

The following data points will prove useful in evaluating efforts. While it may not be possible to collect all of this data at first, over time developing means of collection will help those implementing the plan determine a level of success in addressing homelessness, and also in helping to prevent it.

- # of individuals or families entering the system
- #/% of individuals or families permanently housed
- length of time in the system by housing type (Emergency Shelter, Rapid ReHousing, Transitional Housing, Permanent Supportive Housing, etc.)
- bed/unit utilization rate
- % veteran, family, individuals (chronic), youth, unaccompanied minor of total homeless persons
- living situation before entering the system (temporary, permanent, institutional, unsheltered, other)
- % increase income while in system, by program type (Emergency Shelter, Rapid ReHousing, Transitional Housing, Permanent Supportive Housing, etc.)
- % adults with non-cash benefits
- # days from entered into HMIS to permanent housing placement
- # of affordable housing units in development
- total # affordable housing units needed
- total # affordable housing units available

In addition to the above measures, Weld's Way Home will also track the following performance measures, as mandated by HUD:

- # of persons homeless (sheltered and unsheltered)
- % first time homeless
- length of time homeless
- successful permanent housing placement and retention
- returns to homelessness
- job and income growth

Progress Toward Measurable Goals

The above section presented a number of goals by which Weld's Way Home efforts can be measured. Next steps will include finalizing the list, setting target values, determining the duration of efforts and designing measurement tools. Then the period of evaluation begins. After every program year, the work plans and prioritized areas of focus will be reevaluated by the Weld's Way Home Executive Council and the Weld Homeless Coalition and other service providers, as well as investors and the community at large.

Sustainability

Affordable Housing Development

The heart of sustainability for Weld's Way Home will be the development of more affordable housing in Weld County. The solution to homelessness is housing. In high priced housing environments like northern Colorado, cost of housing outstrips the available means to pay, and homelessness is inevitable for some. Affordable housing can include single-family dwellings, multi-family developments, tiny homes, permanent supportive housing and more. More affordable housing opportunities for people regardless of income amount need to be made available for homelessness in Weld County to be addressed.

Additional Resources to Address Housing Instability

While creating a sufficient stock of affordable housing will contribute to long-term Weld's Way Home sustainability, it is equally important to develop short-term strategies that will add to household stability. These include programs that will prevent households from experiencing homelessness and efforts that will help move households back into stable housing more efficiently. Prevention strategies include: expanding rental assistance programs, creating landlord outreach/relations so as to mediate issues that might otherwise result in evictions and offering financial case management services aimed at addressing challenges that might lead to housing crises for unstably housed individuals and families. Strategies for helping households efficiently move back into housing include: creating self-sufficiency programs, expanding employment searching/training programs, offering tenant training to increase likelihood that households are accepted into open units and increasing nontraditional education options. These strategies will not only help to shrink the number of households living in homelessness, but will also help to create an effective and functional continuum that will contribute to reductions in numbers in sustainable ways.

Public Support

If the general public, community leaders, and elected Weld County officials do not support Weld's Way Home, both emotionally and financially, then it will not gain traction let alone become sustainable. Town by town, municipality by municipality, jurisdiction by jurisdiction, a sense of urgency must be felt by those who hold public office, business and educational and nonprofit leaders, and many everyday citizens. Sustainability will be possible and even likely if the vision of addressing homelessness is embraced by those who may experience homelessness, which includes us all.

Facilitating Staff Support

The work of strategic plan implementing staff will be most important if Weld's Way Home is to succeed. Resources are needed for wages, office space, supplies, mileage, continuing education and much more. The sustainability of this plan and eventual community transformation require paid and well-supported facilitating staff, which is employed and housed at United Way of Weld County.

Northern Colorado Continuum of Care Integration

Larimer and Weld counties form a planning region that will likely double in population over the next 20 years. Like transportation or economic development, health and human services efforts should plan for this growth and the increasing population movement that it will bring, including a more mobile homeless population. Already Weld County is part of the Northern Colorado Continuum of Care (NoCO CoC), a US Department of Housing and Urban Development planning area that is coordinating homelessness efforts. The NoCO CoC includes Larimer and Weld counties. While Weld County having its own plan to address homelessness and housing instability is essential, embracing and acting upon its role in the larger region will increase the sustainability of Weld's Way Home efforts. This will be the case in any of the areas of planned work, from coordinated assessment and housing placement, to affordable housing development.

CONCLUSION

Weld's Way Home is dedicated to decreasing homelessness and housing instability through an aligned continuum of catalyzing services. The vision is that every Weld County citizen has access to safe, adequate and affordable housing.

Those on Weld's Way Home are determined to bring to our community an efficient, timely and cost-effective solution to re-house any individual or family who falls into homelessness. We are confident that such a system will bring about life-changing and measurable results and are dedicated to resourcing and helping our community achieve the goals of the plan laid out above.

We will continue to work together, across all sectors, to find creative, practical, and personalized solutions to each individual or family's experience of homelessness. We are aware of the challenges that lay ahead, and yet are unwavering in our confidence that we as a community can overcome these barriers so that every citizen in Weld County has a safe place to call home.

This is Weld's Way Home.



A CALL TO ACTION

Your Role in Addressing and Preventing Homelessness in Weld County

	Service Providers	Public Sector/ Government	Philanthropy and Foundations	Public Housing Authorities and Landlords	Business Community	Faith Community
Assess (Identify at-risk and homeless individuals)	<ul style="list-style-type: none"> Participate in Coordinated Assessment and Housing Placement System (CAHP System) in order to leverage all available community resources and ensure more successful outcomes for clients Ensure that all data is being submitted to the local CAHP System, and HMIS/HOMES 	<ul style="list-style-type: none"> Require grantees to participate in CAHP System in order to achieve maximum impact Invest discretionary and general fund dollars to fill in key resource gaps such as plan execution staffing, individual plan component start-up, and ongoing planning Align funding with the Weld's Way Home priority areas to ensure maximum leverage and return on investment 	<ul style="list-style-type: none"> Require grantees to participate in CAHP System in order to achieve maximum impact Invest discretionary and general fund dollars to fill in key resource gaps such as plan execution staffing, individual plan component start-up, and ongoing planning Align funding with the Weld's Way Home priority areas to ensure maximum leverage and return on investment 	<ul style="list-style-type: none"> Refer any individual or family who is homeless or may become homeless (i.e. has an eviction notice) to the CAHP System 	<ul style="list-style-type: none"> Develop a relationship with your local CAHP System Coordinator to better understand how you can contribute to your community's fight to ending homelessness Cultivate volunteers for tasks such as administering the CAHP System assessment tool, raising awareness and participating in community awareness-raising events, etc. 	
Assist (Help make individuals' and families' move into permanent, non-time limited housing as easy as possible)				<ul style="list-style-type: none"> Spread awareness of the issue and solutions to end homelessness to members of your local chamber of commerce, especially the need for affordable housing and landlord/realtor relationships 	<ul style="list-style-type: none"> Inform applicants of documents needed for housing before the application process begins, so that they may be better prepared for move in 	<ul style="list-style-type: none"> Cultivate volunteers to help accompany homeless individuals and families to appointments that will help them prepare for housing (i.e. helping secure ID's and essential documents, attend housing meetings, etc.)
Assign (Settle into permanent, non-time limited housing)				<ul style="list-style-type: none"> Set aside units specifically for individuals and families experiencing homelessness that are looking for housing and are a part of the CAHP System 	<ul style="list-style-type: none"> Encourage a team of employees to "Adopt a House" 	<ul style="list-style-type: none"> Don't end involvement upon successful housing placement—continue to welcome those that have moved into permanent housing into your community

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GLOSSARY AND DEFINITIONS

100,000 HOMES - The 100,000 Homes Campaign is a national movement of over 175 communities working together to find permanent homes for 100,000 chronic and medically vulnerable homeless Americans. Powered by Community Solutions and supported by a broad base of national and local partners, the Campaign helps communities turn their services systems into solution systems capable of ending street homelessness for good.

2-1-1 RESOURCE AND REFERRAL LINE (ALSO CALLED 2-1-1 COLORADO) - A collaborative effort of more than 40 member organizations throughout the state. The mission is to ensure the citizens of Colorado have easy access to the 2-1-1 phone number and an online database of comprehensive health and human services. 2-1-1 is an easy to remember three-digit telephone number assigned by the Federal Communications Commission for the purpose of providing quick and easy access to information.

AFFORDABLE HOUSING - Housing for which the occupant is paying no more than 30 percent of his or her income for gross housing costs, including utilities. See Appendix E for more information about housing affordability in Weld County.

AREA MEDIAN FAMILY INCOME - The median income of a certain geographic region defined annually by the US Department of Housing and Urban Development (HUD). HUD uses these amounts to determine income limits for assisted housing projects every fiscal year.

AT-RISK OF HOMELESSNESS - On the edge of becoming homeless, often because of extremely low incomes and having to pay a large percent (typically 50 percent or more) of the adjusted gross household income for housing expenses. See Appendix E for more information about housing affordability in Weld County.

CASE MANAGEMENT - Services focused on identifying goals, developing action plans and coordinating resources to assist clients in attaining greater self-sufficiency.

CHRONIC HEALTH CONDITION - A condition that is persistent or otherwise long-lasting in its effects or a disease that comes with time. The term chronic is often applied when the course of the disease lasts for more than three months.

CHRONICALLY HOMELESS FAMILY - A family unit experiencing homelessness in which one or members of the family meets the definition of chronic homelessness. See Appendix B for more details about the definitions of each homeless population.

CHRONICALLY HOMELESS INDIVIDUAL (AS DEFINED BY HUD) - A homeless individual with a disabling condition (a physical or mental impairment that substantially limits one or more major life activities, such as caring for oneself, speaking, walking, seeing, hearing, or learning) who has either been continuously homeless for a year or more OR has had at least four episodes of homelessness in the past three years. See Appendix B for more details about the definitions of each homeless population.

COLD WEATHER SHELTER - A shelter that is only operational during the coldest months in a year; without this shelter, individuals sleeping outside are extremely likely to suffer from weather-related injuries including but not limited to hypothermia, frost bite, and death.

COLORADO COALITION FOR THE HOMELESS (CCH) CCH is the administrator for the Balance of State Continuum of Care, which currently includes Weld County and 56 other Colorado counties.

COLORADO COUNTS INITIATIVE - As part of the 100,000 Homes Initiative, Colorado communities joined forces as a state to create Colorado Counts, a housing initiative through the governor's office that aligns with the 100,000 Homes campaign.

CONTINUUM OF CARE - A community's response plan to homelessness; it is a comprehensive system for delivery of services to the homeless and often includes outreach and identification, emergency shelter, transitional housing, permanent housing and any additional wraparound services needed.

COORDINATED ASSESSMENT AND HOUSING PLACEMENT SYSTEM (CAHP SYSTEM) - A system that assures all households experiencing homelessness are assessed in the same way with the same tools, and then placed in the housing placement that most fits their specific needs, and offers additional services as necessary.

DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT (HUD) - The federal agency responsible for the implementation and administration of government housing and urban development programs including low-rent public housing, mortgage insurance for residential mortgages (FHA), equal opportunity in housing, energy-efficient mortgages, and research and technology.

DISCHARGE PLANNING - Activities designed to facilitate and coordinate the release and aftercare needs of individuals from any publicly funded institutions or systems of care following any length of stay to prevent homelessness.

DOMESTIC VIOLENCE - Violent or aggressive behavior within the home, typically involving the violent abuse of a spouse or partner, but can also include any physical or emotional abuse to any member of the household.

DOUBLED-UP - When families and households are forced to live together out of necessity (unaffordable housing costs, loss of a job, etc.), the household whose name is not on the lease is considered homeless.

EMERGENCY ASSESSMENT - An assessment of an individual or family's situation necessary to determine which next steps a service provider/ street outreach worker would need to take in order to ensure that the people involved are out of harm's way and no longer in imminent risk of danger.

EMERGENCY SHELTER - Any facility, the primary purpose of which is to provide temporary or transitional shelter for the homeless in general or for specific populations of the homeless (for example, domestic violence shelters).

FAMILY UNIFICATION PROGRAM (FUP) VOUCHERS

A program under which Housing Choice Vouchers (HCVs) are provided to two different populations. First, families for whom the lack of adequate housing is a primary factor in the imminent placement of the family's child or children in out-of-home care, or the delay in the discharge of the child or children to the family from out-of-home care are eligible. There is no time limitation on FUP family vouchers. Second, youth at least 18 years old and not more than 21 years old who left foster care at age 16 or older and who lack adequate housing can also access FUP vouchers. FUP vouchers used by youth are limited, by statute, to 18 months of housing assistance.

HOMELESS EMERGENCY ASSISTANCE AND RAPID TRANSITION TO HOUSING ACT OF 2009 (HEARTH ACT)

The HEARTH Act is the legislation that amended the McKinney-Vento Act in 2009 with many substantial changes and now operates as the main guiding legislation in HUD's work on homelessness.

HOMELESSNESS MANAGEMENT INFORMATION SYSTEM (HMIS) - A coordinated computer database utilized to compile demographic data and track homeless clients through service delivery.

HOST HOMES - An arrangement between a community member and a service provider in which the community member provides homeless youth with shelter, food, and sometimes transportation, while the service provider provides program coordination, host support, and case management services; an alternative to foster care.

HOUSEHOLD EXPERIENCING HOMELESSNESS (PER HUD) - A household (individual or group that identifies as a unit) sleeping in a place not meant for human habitation, in an emergency shelter; or transitional housing for homeless persons who originally came from the street or an emergency shelter or being released from an institutional situation having resided in the institution for more than 30 days and having no fixed permanent residence to which they can return. If being released from an institution and having stayed less than 30 days, they must have been homeless before entering the institution to be considered homeless upon release.

Glossary and Definitions (Cont.)

HOUSEHOLD EXPERIENCING HOMELESSNESS (PER MCKINNEY-VENTO) - In the instance when two households are living together in the same residence and this is not by choice, the household that does not have its name on the lease or mortgage is considered homeless.

HOUSING CHOICE VOUCHER (HCV) (PREVIOUSLY KNOWN AS SECTION 8 HOUSING) - The federal government's major program for assisting very low-income families, the elderly, and the disabled to afford decent, safe, and sanitary housing in the private market through rental assistance vouchers.

HOUSING COST BURDENED - Any household that spends more than 30% of their income on housing costs (including utilities) is considered housing cost burdened and is more susceptible to housing crises.

HOUSING FIRST - Housing First is a whole-system response that offers non-time limited, affordable housing as quickly as possible for individuals and families experiencing homelessness while providing the level of supportive services people need to keep their housing and avoid returning to homelessness. The approach begins with an immediate focus on helping individuals and families to move back into housing. Income, sobriety, and/or participation in treatment or other services are not required as a condition for getting housing. See Appendix F for more information on Housing First.

HOUSING INSTABILITY - A household experiencing housing instability may currently have a place to live but face multiple on-going difficulties, both personal and economic, associated with maintaining that residence. In other words, the family may lack the financial resources and support networks to remain in their existing housing and, if they must leave their current housing situation, they may not have identified an appropriate subsequent housing option.

INDEPENDENT HOUSING - Any market-based housing that is maintained by the household without ongoing additional assistance.

LITERALLY HOMELESS - An individual or family who lacks a fixed, regular, and adequate night-time residence (per HUD). See Appendix A for more details on the definitions of homelessness.

MIXED HOUSING - A housing program that is a combination of single site housing and scattered site housing.

MOTEL VOUCHERS - Vouchers, often given to families, for motel stays when there are no spaces in the shelters for that household so that they do not have to sleep on the streets.

NON-CASH BENEFITS - Any benefit that an employer pays for an employee that is of a private nature. For example as part of an employee's contract they may be provided with a rent free house and a vehicle for private use.

NORTHERN COLORADO CONTINUUM OF CARE (NOCO COC) - The NoCO CoC is a local planning region within the Balance of State Continuum of Care, which is run by Colorado Coalition for the Homeless and includes 57 Colorado Counties. The NoCO CoC includes only Larimer and Weld counties.

PEER MENTORSHIP/NAVIGATION PROGRAM
Programs that pair individuals and families experiencing homelessness with others that have experienced homelessness in the past. These mentors provide understanding and support that contributes to quicker success in regaining permanent housing and also help navigate the homelessness services systems, which can be very difficult to maneuver for recipients.

PERMANENT (NON-TIME LIMITED) HOUSING - Any housing that can be stably maintained; this looks different for every household but the underlying theme of permanence is imperative as this housing is aimed at reduced housing instability; these units can be subsidized or offered through various housing programs or completely maintained without additional housing assistance.

PERMANENT SUPPORTIVE HOUSING - The most comprehensive housing program usually reserved for the most chronically homeless households. In these programs, tenants may live in their homes as long as they meet the basic obligations of tenancy, such as paying rent; have access to the support services that they need and want to retain housing; and have a private and secure place to make their home, just like other members of the community, with the same rights and responsibilities.

POINT-IN-TIME COUNT - A count of sheltered and unsheltered homeless persons on a single night in January. HUD requires that Continuums of Care conduct an annual count of homeless persons who are sheltered in emergency shelter, transitional housing and safe havens on a single night.

PROJECT BASED HOUSING - A government-funded program that provides rental housing to low-income households in privately owned and managed rental units. The subsidy stays with the building; when you move out, you no longer have the rental assistance.

PUBLIC HOUSING - A federally funded housing program for low-income households administered by HUD and operated housing authorities. The amount of rent paid by the tenant is determined by the affordability of the adjusted household income. This subsidy moves with the tenant.

RAPID RE-HOUSING - A housing program that provides temporary financial assistance to households experiencing housing instability. The program is aimed at rapidly removing households from instable housing situations (homelessness prevention) and helping minimize time spent without a home.

READINESS REQUIREMENTS - Also called “Housing Readiness,” this term defines programs that only offer housing placements to individuals and families after specific program requirements are met. This program design has been largely replaced with Housing First strategies, which have been shown to be more effective.

RISK MITIGATION FUND - A common fund created to provide financial assurance to landlords willing to waive or lower their housing criteria (for example: criminal background check rules, income requirements, etc.) to house unstable households. Landlords are able to pay for any damages that might have occurred during tenancy. This plan helps to increase the stock of attainable housing units without having to build new complexes.

SAFE HAVEN - A form of supportive housing that serves hard-to-reach homeless persons with severe mental illness who come primarily from the streets and have been unable or unwilling to participate in housing or supportive services.

SCATTERED SITE HOUSING - A form of housing in which publicly funded, affordable, low-density units are scattered throughout diverse, middle-class neighborhoods. It can take the form of single units spread throughout the city or clusters of family units and is often associated with supportive services.

SELF-SUFFICIENCY - When a household reaches self-sufficiency, they no longer rely on any outside assistance to maintain and manage daily living needs.

SHELTERED VS. UNSHELTERED INDIVIDUALS
Sheltered individuals live in shelters, safe havens, and other housing programs. Unsheltered individuals can live anywhere not meant for human habitation, including but not limited to the outdoors, vehicles, abandoned buildings, etc.

SINGLE SITE HOUSING - A housing program in which all living units are located in a single building or complex.

STABILIZATION ASSESSMENT - A uniform tool that is used to determine more detailed descriptions of client needs in order to best match them to a housing program.

Glossary and Definitions (Cont.)

STREET OUTREACH - Programs aimed at creating trusting relationships with individuals experiencing homelessness. Outreach workers often provide necessary survival items and connect individuals with previously unknown community resources. These workers also aim to create relationships with individuals that may not want housing placement due to a lack of trust in the system. These individuals will more easily connect to resources if directed by a trusted outreach worker.

SUBSTANCE USE DISORDER- VETERANS AFFAIRS SUPPORTIVE HOUSING (SUD-VASH) SPECIALISTS
The Department of Housing and Urban Development administers Veterans Affairs Supportive Housing (VASH) housing vouchers through the Department of Veterans Affairs. These vouchers can be associated with case management services for individuals with additional needs. Substance Use Disorder (SUD) specialists work with VASH recipients to ensure healthy living and housing stability are maintained.

SUPPLEMENTAL SURVEY - During Point-in-Time counts, Weld County collects more data than is required by the federal government. This data is collected through an additional survey (the supplemental survey) and helps providers gain a clearer picture of our homeless population's needs, challenges, etc., so as to better serve them. The 2016 supplemental survey was developed by the University of Northern Colorado's Social Research Lab.

SUPPORTIVE HOUSING - Combines and links permanent, affordable housing with flexible, voluntary support services designed to help tenants stay housed and build the necessary skills to live as independently as possible.

SUPPORTIVE SHELTERING OPTIONS - Programs that offer services beyond simple shelter are considered supportive sheltering options. These services (also known as wraparound services) exist to offer additional support to families and individuals that is often essential to successfully exit homelessness.

TINY HOMES - A home, often between 100 and 400 square feet and mobile, that has been offered as an alternative housing option to assist those experiencing homelessness.

TRANSITIONAL HOUSING - One type of supportive housing used to facilitate the movement of homeless individuals and families to permanent housing. It is housing in which homeless persons live for up to 24 months and receive supportive services that enable them to live more independently. The supportive services may be provided by the organization managing the housing or coordinated by them and provided by other public or private agencies.

TRI-MORBIDITY - An individual is considered tri-morbid if they suffer from a chronic physical disability, a mental health challenge, and a substance abuse disorder.

UNACCOMPANIED MINOR - Youth (age 0-17) experiencing homelessness while not in the physical custody of a parent or guardian. See Appendix C for a full break down of homeless students by school district in Weld County.

VULNERABILITY INDEX SURVEY - A tool used to determine the measure of exposure to hazards that result in a person experiencing vulnerability in their living situations. The survey assigns a vulnerability number to survey takers and can help to prioritize housing placements to those most vulnerable.

WARM HAND-OFFS - A process in which a service provider directly introduces a client to another provider in order to receive services from that provider. This can help a person to trust the new provider and more quickly begin a healthily working relationship. It also helps to navigate the often confusing system of available community services.

WELD PROJECT CONNECT - A one-day event hosted by United Way of Weld County that gathers service providers from all over the county so that individuals and families can receive multiple needed services from one location.

WRAPAROUND SERVICES - A system of services designed specifically for the individual receiving assistance. Each case plan is created uniquely for that person by a team of providers that work to ensure client success of case plan implementation and evaluate success over time.

YOUTH - The federal government defines youth as ages 0-24; anyone under the age of 25 is considered a youth. 0-17 year olds are considered minors and 18-24 year olds are considered youth in transition into adulthood. See Appendix B for details about the definitions of each homeless population.

ABBREVIATIONS

CoC - Continuum of Care

CAHPS or CAHP System - Coordinated Assessment and Housing Placement System

CCH - Colorado Coalition for the Homeless

FUP Voucher - Family Unification Program Voucher

HCV - Housing Choice Voucher

HEARTH Act - Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009

HMIS - Homeless Management Information Systems

HUD - Department of Housing and Urban Development

NoCO CoC - Northern Colorado Continuum of Care

PIT Count - Point-in-Time Count

SUD-VASH - Substance Use Disorder Veterans Affairs Supportive Housing

Appendix A

US DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT Homeless Emergency Assistance and Rapid Transition to Housing: Defining “Homeless”

Homeless means:

- (1) An individual or family who lacks a fixed, regular, and adequate night-time residence, meaning:
 - a. An individual or family with a primary night-time residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
 - b. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals); or
 - c. An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;
- (2) An individual or family who will imminently lose their primary night-time residence, provided that:
 - a. The primary night-time residence will be lost within 14 days of the date of application for homeless assistance;
 - b. No subsequent residence has been identified; and
 - c. The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;
- (3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:
 - a. Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e–2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C. 2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);
 - b. Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;
 - c. Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and
 - d. Can be expected to continue in such status for an extended period of time because of chronic disabilities; chronic physical health or mental health conditions; substance addiction; histories of domestic violence or childhood abuse (including neglect); the presence of a child or youth with a disability; or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment; or
- (4) Any individual or family who:
 - a. Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual’s or family’s primary night-time residence or has made the individual or family afraid to return to their primary night-time residence;
 - b. Has no other residence; and
 - c. Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.

https://www.hudexchange.info/resources/documents/HEARTH_HomelessDefinition_FinalRule.pdf

**THE MCKINNEY-VENTO HOMELESS ASSISTANCE ACT
AS AMENDED BY S. 896 THE HOMELESS EMERGENCY ASSISTANCE AND RAPID TRANSITION TO
HOUSING (HEARTH) ACT OF 2009**

IN GENERAL.—For purposes of this Act, the term “homeless”, “homeless individual”, and “homeless person” means—

- (1) an individual or family who lacks a fixed, regular, and adequate nighttime residence;
- (2) an individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground;
- (3) an individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing);
- (4) an individual who resided in a shelter or place not meant for human habitation and who is exiting an institution where he or she temporarily resided;
- (5) an individual or family who—
 - a. will imminently lose their housing, including housing they own, rent, or live in without paying rent, are sharing with others, and rooms in hotels or motels not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, as evidenced by—
 - i. a court order resulting from an eviction action that notifies the individual or family that they must leave within 14 days;
 - ii. the individual or family having a primary nighttime residence that is a room in a hotel or motel and where they lack the resources necessary to reside there for more than 14 days; or
 - iii. credible evidence indicating that the owner or renter of the housing will not allow the individual or family to stay for more than 14 days, and any oral statement from an individual or family seeking homeless assistance that is found to be credible shall be considered credible evidence for purposes of this clause;
 - b. has no subsequent residence identified; and
 - c. lacks the resources or support networks needed to obtain other permanent housing; and
- (6) unaccompanied youth and homeless families with children and youth defined as homeless under other Federal statutes who—
 - a. have experienced a long term period without living independently in permanent housing,
 - b. have experienced persistent instability as measured by frequent moves over such period, and
 - c. can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse, the presence of a child or youth with a disability, or multiple barriers to employment.

DOMESTIC VIOLENCE AND OTHER DANGEROUS OR LIFE-THREATENING CONDITIONS.—Notwithstanding any other provision of this section, the Secretary shall consider to be homeless any individual or family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in the individual’s or family’s current housing situation, including where the health and safety of children are jeopardized, and who have no other residence and lack the resources or support networks to obtain other permanent housing.

INCOME ELIGIBILITY.—

- (1) IN GENERAL.—A homeless individual shall be eligible for assistance under any program provided by this Act, only if the individual complies with the income eligibility requirements otherwise applicable to such program.
- (2) EXCEPTION.—Notwithstanding paragraph (1), a homeless individual shall be eligible for assistance under title I of the Workforce Investment Act of 1998.

EXCLUSION.—For purposes of this Act, the term “homeless” or “homeless individual” does not include any individual imprisoned or otherwise detained pursuant to an Act of the Congress or a State law.

PERSONS EXPERIENCING HOMELESSNESS.—Any references in this Act to homeless individuals (including homeless persons) or homeless groups (including homeless persons) shall be considered to include, and to refer to, individuals experiencing homelessness or groups experiencing homelessness, respectively.

<https://www.hudexchange.info/resources/documents/HomelessAssistanceActAmendedbyHEARTH.pdf>

Appendix B

HOMELESS SUB-POPULATION DEFINITIONS

Chronically homeless means:

- (1) A “homeless individual with a disability,” as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:
 - a. Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
 - b. Has been homeless and living as described in paragraph (1)(a) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(a). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;
- (2) An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or
- (3) A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

<https://www.hudexchange.info/resources/documents/Defining-Chronically-Homeless-Final-Rule.pdf>

Children and Youth and HUD’s Homeless Definition

HUD receives questions on a regular basis about how homeless youth qualify for assistance from HUD’s homeless assistance grants programs and particularly for emergency shelter. To assist providers and stakeholders that serve homeless youth and have questions about eligibility, this document provides an overview of HUD’s definition of homelessness, how it affects eligibility for emergency shelter and other resources, and the documentation that HUD requires.

The safety of individuals, especially children and youth, is the top priority for emergency shelter programs. Although HUD requires that its providers document homeless status, HUD does not require third-party documentation before a household is admitted to an emergency shelter, receives street outreach services, or immediately receives services provided by a victim service provider.

Following are several hypothetical examples that illustrate how youth might qualify under HUD’s definition of homelessness:

1. A 20-year old is sleeping in his car because his family was evicted from their home.
2. A family, with a 3-year old daughter, is staying in a hotel room paid for by their church, and the family is unable to afford the security deposit for an apartment.
3. A 15-year old has been staying with her best friend, but the friend’s father tells her that she cannot stay with them any longer and must leave tomorrow. An acquaintance has offered to let her stay with him, but she does not feel safe there. She cannot go home and she has nowhere else to go.
4. A 14-year old is staying with a family friend who has said she can stay as long as she likes, but recently the family friend has started physically abusing her. The 14-year old lacks any safe resources or support networks to move.
5. A 9-year old and his mother have been staying different nights with different family and friends, but do not have the resources to obtain their own housing and cannot stay with the current friend past the end of this week.

All of these households would be eligible to access emergency shelter, which is how most people first access homeless assistance. Furthermore, because accessing emergency shelter is crucial for the safety of people experiencing homelessness, the burden of documenting homeless status falls almost exclusively on the shelter provider.

<https://www.hudexchange.info/resources/documents/HUDs-Homeless-Definition-as-it-Relates-to-Children-and-Youth.pdf>

Appendix C

WELD COUNTY MCKINNEY-VENTO HOMELESS YOUTH DATA*

2012-2013 Weld County McKinney-Vento Homeless Youth Data

District	Homeless children and youth by primary nighttime residence					Unaccompanied Homeless Youth
	Shelters, transitional housing, awaiting foster care	Doubled-up	Unsheltered	Hotels/Motels	Total	Unaccompanied Youth
Weld RE-1 (Gilcrest)	1	31	0	5	37	0
Weld RE-2 (Eaton)	0	45	0	0	45	0
Weld RE-3J (Keenesburg)	2	104	0	4	110	4
Weld RE-4 (Windsor)	0	59	2	0	61	0
Weld RE-5J (Johnstown-Milliken)	4	4	0	0	8	1
Greeley-Evans School District 6	54	527	11	30	622	165
Weld RE-7 (Platte Valley)	0	5	0	0	5	1
Weld RE-8 (Ft. Lupton)	0	26	0	5	31	3
Weld RE-9 (Ault-Highland)	4	25	1	1	31	4
Weld RE-10J (Briggsdale)	0	0	0	0	0	0
Prairie RE 11J	0	0	0	0	0	0
Pawnee RE-12	3	0	0	0	3	0
TOTAL	68	826	14	45	953	178

2013-2014 Weld County McKinney-Vento Homeless Youth Data**

District	Homeless children and youth by primary nighttime residence					Unaccompanied Homeless Youth
	Shelters, transitional housing, awaiting foster care	Doubled-up	Unsheltered	Hotels/Motels	Total	Unaccompanied Youth
Weld RE-1 (Gilcrest)	35	27	0	4	66	1
Weld RE-2 (Eaton)	3	29	0	0	32	0
Weld RE-3J (Keenesburg)	1	117	0	4	122	4
Weld RE-4 (Windsor)	0	46	0	0	46	8
Weld RE-5J (Johnstown-Milliken)	32	6	0	0	38	0
Greeley-Evans School District 6	820	441	35	50	1346	89
Weld RE-7 (Platte Valley)	2	21	3	0	26	4
Weld RE-8 (Ft. Lupton)	7	26	2	0	35	3
Weld RE-9 (Ault-Highland)	1	25	3	0	29	2
Weld RE-10J (Briggsdale)	0	0	0	0	0	0
Prairie RE 11J	2	0	0	0	2	0
Pawnee RE-12	0	1	0	0	1	0
TOTAL	903	739	43	58	1743	111

** September 2013: flooding displaced Weld and Boulder county households, causing a spike in the number of homeless children and youth.

2014-2015 Weld County McKinney-Vento Homeless Youth Data

District	Homeless children and youth by primary nighttime residence					Unaccompanied Homeless Youth
	Shelters, transitional housing, awaiting foster care	Doubled-up	Unsheltered	Hotels/Motels	Total	Unaccompanied Youth
Weld RE-1 (Gilcrest)	9	20	0	0	29	0
Weld RE-2 (Eaton)	0	6	0	0	6	0
Weld RE-3J (Keenesburg)	0	174	8	1	183	0
Weld RE-4 (Windsor)	0	62	3	4	69	2
Weld RE-5J (Johnstown-Milliken)	6	9	0	0	15	0
Greeley-Evans School District 6	103	431	36	52	622	105
Weld RE-7 (Platte Valley)	0	4	0	0	4	0
Weld RE-8 (Ft. Lupton)	0	29	0	7	36	2
Weld RE-9 (Ault-Highland)	2	37	10	0	49	2
Weld RE-10J (Briggsdale)	0	0	0	0	0	0
Prairie RE 11J	0	0	0	0	0	0
Pawnee RE-12	0	0	0	0	0	0
TOTAL	120	772	57	64	1013	111

* The St. Vrain Valley School District (SVVSD), which is currently is the 8th largest school district in Colorado, is located in both Weld and Boulder counties. SVVSD staff estimate that 1/3 of McKinney-Vento students are located in Weld County. Recent totals for SVVSD:

2012-2013 - 944

2013-2014 - 1,597**

2014-2015 - 841

http://www.cde.state.co.us/dropoutprevention/homeless_data

Appendix D

LIST OF SOBER LIVING FACILITIES IN NORTHERN COLORADO

Name	Contact Info	Address	Website
Firestone Sober Living Facility	(888) 737-0761	629 Second Street Firestone, CO 80520	www.soberlivinghalfwayhouse.com/firestone-co-80520
House of Rest Men's Program	(970) 978-4016	1020 9th Street Greeley, CO 80631	www.lamministry.org/index.php/spirtual-development
LAM Sober Living Apartments	(970) 978-4016	1020 9th Street Greeley, CO 80631	www.lamministry.org
Oxford House Union Sober Living House	(970) 573-5058	1402 10th Avenue Greeley, CO 80361	www.transitionalhousing.org/li/oxfordhouseunion
Serenity House	(970) 667-4272	217 W 4th Street Loveland, CO 80357	www.serenity-houses.org
The Light House	(970) 631-8902	709 Wagner Drive Fort Collins, CO 80521	www.thelighthouse-fortcollins.org
Victory Outreach	Men: (970) 534-1937 Women: (970) 351-6544	2626 11th Avenue, Unit B Greeley, CO 80631	www.victoryoutreachgreeley.org/#!ministries

Appendix E

2013 SNAPSHOT HOUSING AFFORDABILITY



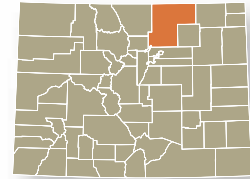
**THE PITON
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at Gary Community
Investments



Brought to you by The Data Initiative

Weld County

Housing consumes one of the highest shares of household budgets. Since coming out of the recession many households are experiencing challenges due to rising costs in housing. This brief presents the state of housing affordability in Weld County. Analysis was conducted to determine the availability, or lack of housing that is affordable, by income level. Ultimately, it identifies the potential revenue implications to government in the form of lost spending opportunity on taxable-based goods.



Population & Households

	2010	2013	2010-2013 Growth
Total Population	254,052	269,785	15,733
Total Households	89,848	95,363	5,515
Housing Units	96,454	99,317	2,863

New Households to New Housing Ratio* = 1.9

*In stable markets one would expect new households and new housing to track closely to each other.

Source: Census 2010, US Census Bureau, Colorado State Demography Office, Draft 2013 Estimates

Housing Inventory

Total Units
99,317

Vacancy Rate
5.9%

Subsidized Units*
3,056

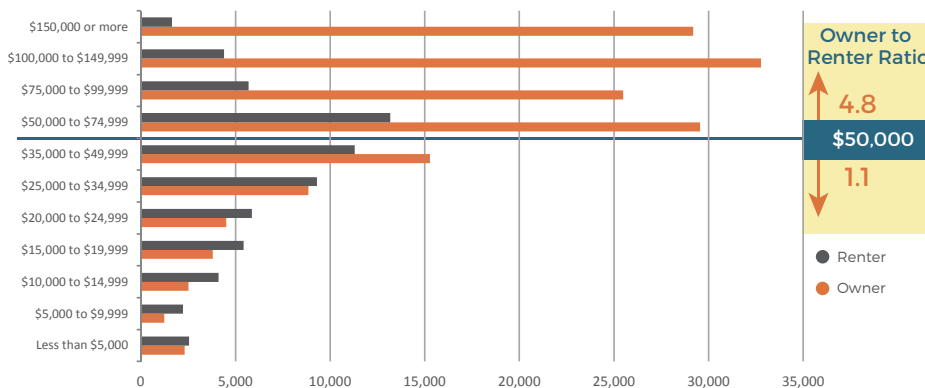
Subsidized Share
3.1%

*Publicly funded rental units, no vouchers.

Owner vs. Renter Dynamic

It is helpful to look at the ratio of owners to renters above and below a moderate income level (e.g. \$50,000) to understand at a high level both the tendencies of households to own or rent, and the type and availability in housing stock to either own or rent. Typically households that earn more own their own homes, while households that earn less rent. The results in the chart below should be used as framing for the information on page 2.

Weld County Tenure by Household Income 2013



Source: American Community Survey 2013 (1-year), US Census Bureau

Household Composition



73%
Families



22%
Single



27%
18 and younger



11%
Over 65

Forecast

By 2035, Weld County will add
253,169 residents,
or a **100% increase**
since 2010

Source: Colorado State Demography Office, Population Forecast



The Housing Gap

Income Level (AMFI) \$66,300	Weld County		Colorado*	
	Units: Surplus <Deficit>	Owners	Units: Surplus <Deficit>	Owners
Below 30%	<3,866>	6,733	<99,841>	124,839
31 - 50%	2,490	1,931	<2,520>	71,787
51 - 80%	4,360	5,103	144,099	78,240
81 - 100%	9	4,586	32,783	62,021
101 - 120%	231	3,131	10,462	33,483
Over 120%	<2,900>	<21,202>	<72,991>	<363,124>

Source: American Community Survey 2013 (1-year); US Census Bureau | *Colorado AMFI = \$571,100

The figures in the table above are based on an analysis of what households are paying at their current location. It accounts for owner households that locked into payments years ago, and now reflect a very affordable payment. The rental figures are more timely.

Household Income Distribution

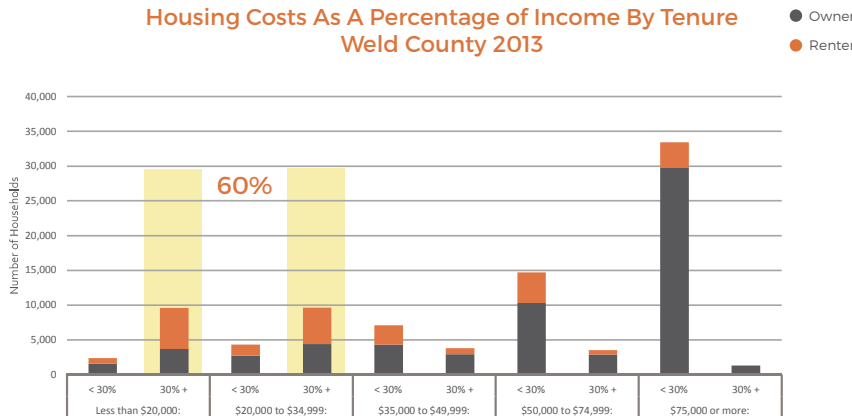
Income Level (AMFI) \$66,300	Share of Households
Below 30%	10.0%
31 - 50%	12.0%
51 - 80%	15.8%
81 - 100%	10.4%
101 - 120%	8.5%
Over 120%	43.2%

Source: American Community Survey 2013 (1-year); US Census Bureau

AMFI: Area Median Family Income

Housing Cost-Burdened Picture

Housing Costs As A Percentage of Income By Tenure
Weld County 2013



Source: American Community Survey 2013 (1-year); US Census Bureau

The number of households that are housing cost-burdened has impact on many levels. For the household, the lower the income level the higher the pressure to cut out other basic needs such as health care, food, and apparel and services. From the perspective of government finance, this crowding out matters. This translates to the revenue implications below, in the form of crowded-out spending. Each additional dollar a household spends on housing represents a potential reduction of the local sales tax base.

Revenue Implications

Crowded-Out Household Spending: Additional dollars spent on housing that could otherwise go to taxable-based goods.

\$86 million
Weld County

\$2 billion
Colorado

Source: Analyst calculation from 2013 American Community Survey and 2012/2013 Consumer Expenditure Survey data

Housing Cost-Burdened Households Earning <\$50,000

2 in 10 of all households
In Weld County in 2013,



or **23,066 households**

Source: Analyst calculation from 2013 American Community Survey and 2012/2013 Consumer Expenditure Survey data

Housing Cost-Burdened Household: Any household that spends more than 30% of its income on housing.

The Cost of Housing

Median Home Values

\$195,200

County

vs.

\$240,500

State

Median Rent

\$833 vs. \$971

County

State

Source: American Community Survey 2013 (1-year); US Census Bureau

Appendix F

HOUSING FIRST RESOURCES

“Five core principles of Housing First”

<http://www.homelesshub.ca/solutions/housing-accommodation-and-supports/housing-first>

- 1. Immediate access to permanent housing with no housing readiness requirements.** Housing First involves providing clients with assistance in finding and obtaining safe, secure and permanent housing as quickly as possible. Key to the Housing First philosophy is that individuals and families are not required to first demonstrate that they are “ready” for housing. Housing is not conditional on sobriety or abstinence. Program participation is also voluntary. This approach runs in contrast to what has been the orthodoxy of “treatment first” approaches whereby people experiencing homelessness are placed in emergency services and must address certain personal issues (addictions, mental health) prior to being deemed “ready” for housing (having received access to health care or treatment).
- 2. Consumer choice and self-determination.** Housing First is a rights-based, client-centered approach that emphasizes client choice in terms of housing and supports.
 - Housing - Clients are able to exercise some choice regarding the location and type of housing they receive (e.g. neighborhood, congregate setting, scattered site, etc.). Choice may be constrained by local availability and affordability.
 - Supports - Clients have choices in terms of what services they receive, and when to start using services.
- 3. Recovery orientation.** Housing First practice is not simply focused on meeting basic client needs, but on supporting recovery. A recovery orientation focuses on individual well-being, and ensures that clients have access to a range of supports that enable them to nurture and maintain social, recreational, educational, occupational and vocational activities.

For those with addictions challenges, a recovery orientation also means access to a harm reduction environment. Harm reduction aims to reduce the risks and harmful effects associated with substance use and addictive behaviors for the individual, the community and society as a whole, without requiring abstinence. However, as part of the spectrum of choices that underlies both Housing First and harm reduction, people may desire and choose “abstinence only” housing.

- 4. Individualized and client-driven supports.** A client-driven approach recognizes that individuals are unique, and so are their needs. Once housed, some people will need minimum supports while other people will need supports for the rest of their lives (this could range from case management to assertive community treatment). Individuals should be provided with “a range of treatment and support services that are voluntary, individualized, culturally-appropriate, and portable (e.g. in mental health, substance use, physical health, employment, education)” (Goering et al, 2012). Supports may address housing stability, health and mental health needs, and life skills.

Income supports and rent supplements are often an important part of providing client-driven supports. If clients do not have the necessary income to support their housing, their tenancy, health and well-being may be at risk. Rent supplements should ensure that individuals do not pay more than 30% of their income on rent.

It is important to remember that a central philosophy of Housing First is that people have access to the supports they need, if they choose. Access to housing is not conditional upon accepting a particular kind of service.

- 5. Social and community integration.** Part of the Housing First strategy is to help people integrate into their community and this requires socially supportive engagement and the opportunity to participate in meaningful activities. If people are housed and become or remain socially isolated, the stability of their housing may be compromised. Key features of social and community integration include:
 - Separation of housing and supports (except in the case of supportive housing).
 - Housing models that do not stigmatize or isolate clients. This is one reason why scattered site approaches are preferred.
 - Opportunities for social and cultural engagement are supported through employment, vocational and recreational activities.

While all Housing First programs ideally share these critical elements, there is considerable variation in how the model is applied, based on population served, resource availability, and other factors related to the local context. There is no “one size fits all” approach to Housing First.

The Application of Housing First

In order to fully understand how Housing First is applied in different contexts, it is important to consider different models. While there are core principles that guide its application, it is worth distinguishing Housing First in terms of: a) a **philosophy**, b) a systems approach, c) program models, and d) team interventions. As a philosophy, Housing First can be a guiding principle for an organization or community that prioritizes getting people into permanent housing with supports to follow. Housing First can be considered embedded within a **systems approach** when the foundational philosophy and core principles of Housing First are applied across and infused throughout integrated systems models of service delivery. Housing First can be considered more specifically as a **program** when it is operationalized as a service delivery model or set of activities provided by an agency or government body. Finally, one needs to consider Housing First **teams**, which are designed to meet the needs of specific target populations, defined in terms of either the characteristics of the sub-population (age, ethno-cultural status, for instance), or in terms of the acuity of physical, mental and social challenges that individuals face. This can include:

ACT teams (Assertive Community Treatment) are designed to provide comprehensive community-based supports for clients with challenging mental health and addictions issues, and may support individuals in accessing psychiatric treatment and rehabilitation. These teams may consist of physicians and other health care providers, social workers and peer support workers.

ICM teams (Intensive Case Management) are designed to support individuals with less acute mental health and addictions issues through an individualized case management approach. The goal of case management is to help clients maintain their housing and achieving an optimum quality of life through developing plans, enhancing life skills, addressing health and mental health needs, engaging in meaningful activities and building social and community relations.

What kind of housing?

A key principle of Housing First is **Consumer Choice and Self-Determination**. In other words, people should have some kind of choice as to what kind of housing they receive, and where it is located. The Pathways model prioritizes the use of **scattered-site housing** which involves renting units in independent private rental markets. One benefit of this approach is that it gives clients more choice, and may be a less stigmatizing option (Barnes, 2012). It is in keeping with consumer preferences to live in integrated community settings. From a financial perspective, there is a benefit to having the capital costs of housing absorbed by the private sector. In other cases the use of **congregate models of housing**, where there are many units in a single building, the benefits of which may include on-call supports, and for some may provide a stronger sense of community. In some national contexts (Australia, many European nations), **social housing** is more readily used to provide housing for individuals in Housing First programs. In such contexts, there is a more readily available supply of social housing, and living in buildings dedicated to low income tenants may not be viewed in a stigmatized way. Finally, for some Housing First clients whose health and mental health needs are acute and chronic, people may require **Permanent Supportive Housing (PSH)**, a more integrated model of housing and services for individuals with complex and co-occurring issues where the clinical services and landlord role are performed by the same organization.

What kinds of support?

Housing First typically involves three kinds of supports: **Housing supports**: The initial intervention of Housing First is to help people obtain and maintain their housing, in a way that takes into account client preferences and needs, and addresses housing suitability. Key housing supports include: finding appropriate housing; supporting relations with landlords; applying for and managing rent subsidies; assistance in setting up apartments. **Clinical supports** include a range of supports designed to enhance the health, mental health and social care of the client. Housing First teams often speak of a recovery-oriented approach to clinical supports designed to enhance well-being, mitigate the effects of mental health and addictions challenges, improve quality of life and foster self-sufficiency. **Complementary supports** are intended to help individuals and families improve their quality of life, integrate into the community and potentially achieve self-sufficiency. They may include: life skills; engagement in meaningful activities, income supports, assistance with employment, training and education, and community (social) engagement.

Does Housing First work?

In just a few short years the debate about whether Housing First works is over. The body of research from the United States, Europe and Canada attests to the success of the program, and it can now truly be described as a “Best Practice.”

The At Home/Chez Soi project, funded by the Mental Health Commission of Canada is the world’s most extensive examination of Housing First. They conducted a randomized control trial where 1000 people participated in Housing First, and 1000 received “treatment as usual.” The results are startling: you can take the most hard core, chronically homeless person with complex mental health and addictions issues, and put them in housing with supports, and you know what? They stay housed. Over 80% of those who received Housing First remained housed after the first year. For many, use of health services declined as health improved. Involvement with law enforcement declined as well. An important focus of the recovery orientation of Housing First is social and community engagement; many people were helped to make new linkages and to develop a stronger sense of self.

The *Housing First in Canada* book highlights eight Canadian case studies that attest to Housing First’s general effectiveness, especially when compared to “treatment first” approaches. There are key questions that remain in developing Housing First practices, philosophies, programs and policies.

- **How effectively do Housing First programs demonstrate fidelity to the principles of the model?** There is increasing pressure for communities to adopt a Housing First model. It is important to examine issues of fidelity to the core principles (as noted above) to ensure that communities are doing Housing First, as opposed to “housing, first.”
- **What is the relationship between Housing First and the Affordable Housing Supply?** While the case studies in *Housing First in Canada* have shown that it is possible to develop a successful Housing First program even in a tight rental housing market, they were primarily successful through the use of rent supplements to increase affordability. Partnerships with existing private landlords were also shown to be very important. At the core though, there is a housing shortage in Canada—especially safe, secure and affordable housing. A concurrent investment in affordable housing is necessary to ensure an end to homelessness.
- **How are the needs of sub-populations met through Housing First?** It is clear from existing research that one size does not fit all. However, Housing First can be adapted to suit most communities and sub-populations. Unique needs require unique answers. What will work in one city may not work in another. What works for single adults may not work for youth. Adapting the program to meet the needs of a particular sub-population is key to ensuring success. A period of transition may be required to help certain sub-populations make the adjustment from the streets/shelters to housing.
- **What is the duration and extent of supports, and who is responsible for funding them?** In some cases Housing First programs provide a time-limited investment in supports, ranging from one to three years. For those who need ongoing supports, effective models for continued engagement with mainstream services need to be explored.
- **Once housed do people have adequate income to meet basic needs on an ongoing basis?** A goal for most communities is that people who are housed should pay no more than 30% of their income on rent. The use of rent supplements is key to ensure that people are able to survive and thrive in housing. In many cases, people are able to “graduate” from a Housing First program in so far as they no longer require active supports, but they still need ongoing financial assistance.

“Four Clarifications about Housing First”

By: Richard Cho, USICH Senior Policy Director, 06/18/2014

<https://www.usich.gov/news/four-clarifications-about-housing-first>

I must make a confession. When I first came to Washington to work for the United States Interagency Council on Homelessness (USICH), I was a bit skeptical about how sold the Federal government was on Housing First. I knew that Housing First was mentioned in *Opening Doors*, but did the Federal government truly embrace it? After all, it was not so long ago that terms like “harm reduction” were considered four-letter words by the Federal government.

So imagine my happy surprise when I discovered that I was flat-out wrong. In the first of what I learned would be many interagency meetings on chronic homelessness, Housing First adoption was discussed as a primary strategy for accelerating progress. And one of the very first tasks I was given was to help provide a clear, operational definition of Housing First. The result of that work is USICH’s Housing First Checklist, a tool that communities can use to adopt Housing First across their programs and overall community response. Not only does this Administration fully believe in Housing First, but it is working to make Housing First the underlying approach behind every community’s response to homelessness.

Ironically, while Housing First is at the forefront of the Federal government’s response to homelessness, I’ve learned that many communities are still engaged in the so-called “Housing First debate.” Communities continue to examine whether Housing First is the right way to address homelessness, saying things like, “We already have a Housing First program, we don’t need any more.” Or “One size doesn’t fit all. Housing First isn’t for everyone.” Or even, “It’s immoral and harmful to put people who drink into housing.”

But does anyone really think homelessness is safer than housing? What I take from these “debates” is that Housing First is still misunderstood. So, as a representative of USICH I offer this attempt to provide some clarifications on Housing First.

1. Housing First is not a “program.” It is a whole-system orientation and response.

I often hear Housing First referred to as a program or a particular model, as in, “We just started a Housing First program.” Or “We don’t have a Housing First program in our community yet, just transitional housing.” In these instances, the term “Housing First” is most often used to mean a permanent supportive housing program that uses a Housing First approach. Although I see it as a sign of progress that permanent supportive housing and Housing First are being conflated—it wasn’t long ago that Housing First was a new and radical concept in supportive housing circles—I think it’s incorrect to think of Housing First as a permanent supportive housing model, or as a program at all for that matter.

When we think of Housing First as a program, it creates the illusion that Housing First is just one among many choices for responding to homelessness. This sets up a dynamic in which individual programs are pitted against one another. The discussion ends up being about whether we should choose this program or that program, and whether one program is right and another one wrong. It leads to an absurd debate about whether permanent housing or emergency shelters are the solution to homelessness, when both play important but completely different roles. Thinking about Housing First as a program leads to divisions, factions, and conflicts—none of which are helpful in the effort to end homelessness. Instead, Housing First is a whole-system orientation, and in some cases, a whole-system re-orientation. To borrow a phrase, it is about “changing the DNA” of how a community responds to homelessness. This change enables the community as a whole to:

- make occurrences of homelessness rare and brief,
- help people who experience homelessness obtain permanent housing quickly,
- help people access the care and support needed to maintain their housing and achieve a better quality of life.

Some of you may have heard about the Triple Aim of health reform. Consider these the “Triple Aim” of ending homelessness.

Achieving these aims is impossible for one program alone. Rather, it requires a variety of programs and services including homeless outreach, emergency shelter, permanent supportive housing, affordable housing, rapid re-housing, along with case management supports, health care, income supports, employment services, and more. But it’s also not enough for these programs to simply exist; they need to work as part of a whole system to help people achieve these aims. That means that the focus of all programs must be to help people obtain permanent housing quickly and without conditions and contingencies. Programs should empower people to overcome barriers to obtaining permanent housing, access the right kinds of supports and care to keep their housing, and improve their quality of life.

Housing First also requires that communities constantly examine their overall set of programs to determine if they have the capacity to achieve the three aims above. Again, this is not about choosing this program or that program, but looking at whether the system as a whole is effective.

Consider the following thought experiment. Let’s imagine for a moment that we could hit a magic “Housing First reset button” and start all over in building our community responses to homelessness. Would you wind up with the same set of programs and models that you have now? Would you even create discrete program models?

Now let’s imagine that we had enough resources to create the system we really need to achieve the three aims of ending homelessness. Let’s imagine we had a way to accurately assess housing and service needs at any point in time. What if we could provide different levels of housing assistance and different levels of services to people based on their needs? And what if we could actually adjust the level of assistance to people as their needs change in real-time without forcing people to move around?

That’s the system of response I would build. Unfortunately, we don’t have a Housing First reset button. Rather than adjustable and flexible levels of assistance, we have distinct programs and models that are often unconnected, preventing people from receiving personalized levels of assistance. The funding systems that support our programs don’t always allow for this level of flexibility. Even in the face of these issues, I still believe we can pursue a more flexible and dynamic system of response. Getting there starts with the adoption of a Housing First system orientation. Meanwhile, USICH and HUD have been encouraging communities to ensure that their inventory of programs includes the types of assistance at different levels of intensity—permanent supportive housing, affordable housing, rapid re-housing, etc.—targeted through a coordinated assessment process.

2. Housing First is a recognition that everyone can achieve stability in (real) housing. Some people simply need services to help them do so.

There is confusion about whether Housing First means providing housing with services or housing alone. I hear comments like, “We want to do Housing First, but don’t have a way to pay for supportive services,” or “It’s not responsible to do Housing First when people have chronic health challenges.” Some people believe Housing First is always service intensive. Others believe Housing First is not service intensive enough. So who’s right?

The short answer is both and neither. The problem goes back to thinking about Housing First as a program model. When we instead think of Housing First as an approach and a whole system orientation, it allows us to get away from “one-size-fits-all” solutions, and focus on matching the right level of housing assistance and services to people’s needs and strengths. There are some who might just need a bit of a financial boost and help with finding housing. Others may need a long-term rental assistance subsidy and support with their housing search, but not ongoing case management. And some people need permanent supportive housing, including long-term rental assistance or affordable housing coupled with case management supports.

It’s a basic equation where the constant is the goal of helping people obtain and maintain permanent housing. The

variables are what level and duration of housing assistance and supportive services people need to stay in housing. So yes, if a community doesn't have a way to pay for supportive services, they won't be able to provide the right help to people who need ongoing case management. They should look to efforts across the country to increase Medicaid's role in paying for case management supports in housing. And it's also true that providing permanent housing without services to people who have chronic health challenges may be irresponsible. Let's just remember that not everyone needs ongoing case management to maintain housing stability.

3. Housing First is about health, recovery, and well-being. Housing itself is the foundation and platform for achieving these goals.

The idea that programs within a Housing First approach sometimes require "intensive" services should not be taken to mean that the focus of services is on therapeutic or treatment goals. In fact, the Housing First approach emphasizes services that focus on housing stability, then using that housing as a platform for connecting people to the types of services and care that they seek and want. It's based on the basic premise that if people have a stable home, they are in a better position to achieve other goals, including health, recovery and well-being than when they are homeless.

This is true for many reasons. It's hard to comply with any kind of health care or treatment regimen when you have no certainty about where you are going to sleep. A person infected with TB will have a hard time completing a course of antibiotic treatment when they are bouncing from one shelter to another. It's also hard to focus on recovery from addiction when you don't have the certainty that you have a permanent place where you can stay each day, surrounded by supportive people. And for people who've experienced trauma, it can be impossible to shift away from a "fight-or-flight" mindset that comes with PTSD when they continue to live a rough life on the streets.

Let it be known, once and for all, that Housing First is about health and well-being. Housing First is about recovery. And connecting people to substance abuse or mental health treatment is entirely consistent with Housing First. The difference is that Housing First recognizes that health and recovery are so much more attainable when people have a safe and stable home. A Housing First approach recognizes that there are many paths to recovery and well-being—some of which are direct and some of which are long and indirect. But all of those paths start with a home.

4. Housing First is about changing mainstream systems.

Housing First is, and always has been, about changing mainstream systems. The approach emerged as a reaction to traditional mental health treatment modality, which thought that the way to address the needs of people with psychiatric symptoms on the street was to get them into psychiatric treatment, typically at an inpatient facility. Housing First was about changing the mental health system's paradigm to recognize that housing is foundational to mental health recovery.

Housing First's role in changing mainstream systems should not stop with the mental health system. Housing is just as foundational to addiction recovery and psychical well-being as it is to mental health. The new frontiers of systems change are to engage the substance abuse treatment system and the mainstream health care system around housing. Substance abuse treatment systems are integrating housing priorities alongside states like New York and New Jersey by adopting supportive housing as part of their own systems responses. Meanwhile, there are enormous opportunities to engage the mainstream health care system (Medicaid, managed care, and hospital systems) around housing, given the systems transformations underway through the Affordable Care Act.

There is a hunger to achieve health reform's Triple Aim of improved health outcomes, improved healthcare experiences, and lower costs. Those of us who've been working to end homelessness know that affordable and supportive housing are part of that solution. It's going to take engagement and persistence to make the health system aware of this. Luckily, this is precisely the kind of engagement and persistence that Housing First does so well.

Appendix G

INFOGRAPHIC SOURCES

Inside Cover	<p>“up to 3,000 Weld County families live doubled up with others not by choice” – Homeless Service Provider Estimate</p> <p>“homeless youth are 7x more likely to die from AIDS because they may be forced to engage in risky sexual practices in return for food and shelter” – https://www.nn4youth.org/wp-content/uploads/FactSheet_Unaccompanied_Youth.pdf</p>
Page 2	<p>“each change of school costs a child 3 TO 6 MONTHS of learning” – http://bostonhern.org/about/facts/</p>
Page 3	<p>“100+ homeless veterans on a combined Larimer/Weld County VA housing wait list (September 2016)” – Northern Colorado Continuum of Care, September 2016</p>
Page 4	<p>“\$86 MILLION the amount of taxes lost in Weld County because people spent too much on housing and couldn’t support local businesses (2015)” – “Housing Affordability in Weld County”</p>
Page 5	<p>“1,013 Weld County homeless students during the 2014-2015 school year” – Weld County McKinney-Vento School Representatives</p>
Page 6	<p>“AT LEAST 9% of homeless are Veterans” – http://www.endhomelessness.org/library/entry/fact-sheet-veteran-homelessness</p>
Page 7	<p>“26% of the homeless in Weld County have resided here for at least 21 years” – 2016 Annual Point-in-Time Count of Individuals Experiencing Homelessness in Weld County</p> <p>“60% of Weld County homeless have resided here for 2 or more years” – 2016 Annual Point-in-Time Count of Individuals Experiencing Homelessness in Weld County</p>
Page 9	<p>“In January 2016 30 Weld County families were living in homeless shelters” – 2016 Annual Point-in-Time Count of Individuals Experiencing Homelessness in Weld County</p> <p>“40% of Weld County homeless population are women” – 2016 Annual Point-in-Time Count of Individuals Experiencing Homelessness in Weld County</p>
Page 10	<p>“In January 2016 41% of Weld County shelter residents were children” – 2016 Annual Point-in-Time Count of Individuals Experiencing Homelessness in Weld County</p>
Page 11	<p>“an individual has to work 80 HOURS a week at minimum wage to afford a 1 bedroom apartment in Colorado” – http://nlihc.org/oor/colorado</p>
Page 12	<p>“25% of Weld County homeless population have been homeless for at least 12 months and have a disabling condition” – 2016 Annual Point-in-Time Count of Individuals Experiencing Homelessness in Weld County</p>
Page 16	<p>“the life expectancy for those who are stably housed is 77 vs 41 YEARS for those who are homeless” – www.mhponline.org/files/AffordableHousingImpact-CommunitiesandHouseholds.pdf</p>
Page 19	<p>“1.2 MILLION students in the United States are homeless” and “75% live doubled up with other families” – http://www.ascd.org/publications/educational-leadership/mar15/vol72/num06/Homeless%E2%80%9494And-Doubled-Up.aspx</p>
Page 20	<p>“74% of Weld County homeless moved here for work or to be near family” – 2016 Annual Point-in-Time Count of Individuals Experiencing Homelessness in Weld County</p>
Page 21	<p>“\$31,545 SAVED per individual on emergency services when utilizing the HOUSING FIRST method” – Denver Housing First Cost Benefit Analysis</p>
Page 22	<p>“SUCCESS RATE: 88% Housing First Model; 50% Transitional Housing Programs” – HomeforGood (http://homeforgoodla.org/)</p>
Back Cover	<p>“AT LEAST 9% of homeless are Veterans” – http://www.endhomelessness.org/library/entry/fact-sheet-veteran-homelessness</p> <p>“80 HOURS an individual has to work a week at minimum wage to afford a 1 bedroom apartment in Colorado” – http://nlihc.org/oor/colorado</p> <p>“homeless youth are 7x more likely to die from AIDS because they may be forced to engage in risky sexual practices in return for food and shelter” – https://www.nn4youth.org/wp-content/uploads/FactSheet_Unaccompanied_Youth.pdf</p> <p>“stable housing reduces moving and changing schools, saving children 3 TO 6 MONTHS of learning” – http://bostonhern.org/about/facts/</p> <p>“the life expectancy for those living in a home is 77 vs 41 YEARS for those who are homeless” – www.mhponline.org/files/AffordableHousingImpact-CommunitiesandHouseholds.pdf</p> <p>“more affordable housing options enable people to spend less on rent/mortgage and more at local businesses generating an additional \$86 MILLION in tax revenue for Weld County” – “Housing Affordability in Weld County”</p>

HOMELESSNESS IS COSTLY TO US ALL

For too many families, homelessness leads to decreased health and life expectancy. For too many seniors, rising housing costs and decreasing living assistance causes homelessness. For too many students, homelessness has interrupted their education. Too many veterans return home without a safety plan, and their neighbors do not know how to help them.

homeless youth are **7x**

more likely to die from AIDS because they may be forced to engage in risky sexual practices in return for food and shelter

AT LEAST

9%

of homeless are Veterans

an individual has to work

80 HOURS

a week at minimum wage to afford a 1 bedroom apartment in Colorado

HERE'S WHAT YOU CAN DO ABOUT IT

stable housing reduces moving and changing schools, saving children

3 TO 6 MONTHS of learning

the life expectancy for those living in a home is

77 vs 41 YEARS for those who are homeless

It is OK to encourage someone to pull themselves up by their bootstraps, but not everyone in Weld County has boots. By joining together, you can help provide the bootstraps that will save your neighbors from experiencing the trauma of living without a safe place to call home.

more affordable housing options enable people to spend less on rent/mortgage and more at local businesses generating an additional

\$86 MILLION in tax revenue for Weld County

Together we can solve homelessness in Weld County. Our families want hope; our service providers deserve support; our community needs action. Now is the time for Weld County to join together.

THIS IS WELD'S WAY HOME.

Sign the pledge. Read the plan. Unite for change.

As a community-wide effort led by United Way of Weld County, Weld's Way Home has numerous opportunities for your involvement. You can **Give**. You can **Advocate**. You can **Volunteer**.

Visit www.weldswayhome.org to do something today!

United Way of Weld County

www.unitedway-weld.org | 970-353-4300

814 9th Street - Greeley

330 Park Avenue - Fort Lupton

