



EVALUATION OF THE
Conrad N. Hilton Foundation
Chronic Homelessness Initiative
PHASE I EXECUTIVE SUMMARY & DASHBOARD

October 2016



Phase I Initiative: Executive Summary and Outcomes Dashboard

In 2011, the Conrad N. Hilton Foundation partnered with Abt Associates Inc. to conduct an evaluation of the Hilton Foundation's Chronic Homelessness Initiative, with the goal of answering the overarching question: **Is the Chronic Homelessness Initiative an effective strategy to end and prevent chronic homelessness in Los Angeles County?** This final evaluation report provides an overview of the community's progress on selected metrics over five years, January 2011 through December 2015.

Although the community, with support from the Foundation, has made substantial progress in furthering support for permanent supportive housing (PSH) as a solution to chronic homelessness, significant challenges remain. In the January 2016 point-in-time count, 14,058 individuals were reported as experiencing chronic homelessness within LA County. This represents an increase of nearly 5,000 from the point-in-time count conducted in January 2011 at the start of the Initiative, despite the high number of housing placements during this same time period. Economic conditions, insufficient and shrinking availability of affordable housing, and unmet need for mental health and supportive services are credited not only with cancelling out the effect of the housing placements but also with adding to the count within the collaborative system.

We do not believe that these challenges and the increasing numbers of chronically homeless people suggest that the community's strategy on chronic homelessness is failing. Rather, the growth in numbers suggests that the new systems that coalesced through the work of Phase I of the Initiative are needed more than ever as of the end of 2015. Many stakeholders consider LA to be at a possible turning point, with significant new commitments of funding to address chronic homelessness and more alignment on the issue among elected officials and leaders of the key local government agencies.

There is no question that the landscape shifted between 2011 and 2015 and that the community reached a new standard for collaboration as of January 2016. Strong systems were in place, and public agencies had embraced new responsibilities. As the Foundation looks ahead to the next phase of the Initiative, the challenges of getting to the scale needed to end chronic homelessness will require all to take stock of their roles and assess their best fit within the collaborative system.

Progress on Initiative goals, 2011-2015

Build demonstrated action by elected and public officials to support addressing chronic homelessness.



Leadership groups have become increasingly involved in addressing chronic homelessness. Immediately after the conclusion of Phase I of the Initiative, the City and County each passed comprehensive, aligned strategies to address homelessness at the scale necessary.

Leverage \$205 million for PSH.



The Home For Good Funders Collaborative leveraged the Foundation's seed investment to raise more than \$562.1 million (\$18.9 million in private funds and \$543.2 million in public funds) for permanent supportive housing (PSH) and related service.

Create 5,000 units of PSH.



The Foundation supported the development or commitment of more than 7,300 project- and tenant-based housing units. Community-wide during that period, more than 15,700 housing units were created through development or commitment of housing vouchers to PSH.

Establish a system of prioritizing chronically homeless persons for PSH



A coordinated entry system (CES) was established with Foundation support to identify and prioritize individuals who are chronically homeless for PSH. The Los Angeles Homeless Services Authority has adopted CES as a key mechanism for determining priority access to PSH.

Increase capacity of developers and providers to effectively provide PSH.



The Foundation has supported technical assistance to develop capacity to produce PSH in underserved areas of the county such as the San Gabriel Valley, the Gateway Cities, and South LA.

House 2,000 of the most vulnerable chronically homeless or at risk persons in PSH.



From 2011 through 2015, more than 18,000 chronically homeless and vulnerable individuals were placed in PSH, including more than 6,000 individuals placed by Hilton-supported grantees.

Chronic Homelessness Initiative | Phase I Dashboard

Coordinated Entry System Model

- 1 Outreach Model**

Most SPAs have implemented coordinated outreach team meetings to case conference and ensure coverage of the entire service planning areas (SPAs), a requirement of the 2014 RFP.
- 2 Assess Clients**

CES leadership selected the VI-SPDAT to assess and prioritize those who are identified as "high acuity" for permanent supportive housing resources. As part of the transition into HMIS, HUD's universal data elements have been merged with the VI-SPDAT.
- 3 Housing Navigation**

The RFP provided a pool of flexible resources that can be used to help the highest priority people obtain documents, find transportation, apply for housing and utilities, and connect to services and benefits.
- 4 Access Bridge Resources**

Some SPAs were able to negotiate commitments of interim housing/shelter beds for prioritized individuals to use while awaiting placement in housing. Recently, the CoC modified its Emergency Solutions Grant (ESG) RFP to require participation in CES and to provide funding for bridge housing.
- 5 Match to Housing**

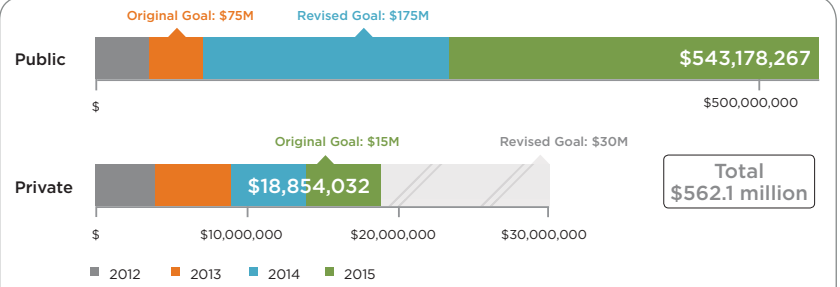
Due to issues with the HMIS implementation, matches have mostly been made manually. LAHSA and partner agencies have worked to automate the process but are still struggling to find the best mechanism for doing so.
- 6 Supportive Services in Housing**

Supportive service providers have started working with clients before they are placed into housing. The system is still resolving how to handle warm handoffs to on-site services connected with matched housing.
- 7 Permanent Housing**

Major housing providers, including Housing Authorities, DMH, and LAHSA, are engaged in aligning their housing resources with CES. LAHSA is also planning to coordinate the CES alongside the Family and Transition-Age-Youth CES to ensure consistent, appropriate prioritization approaches across populations.

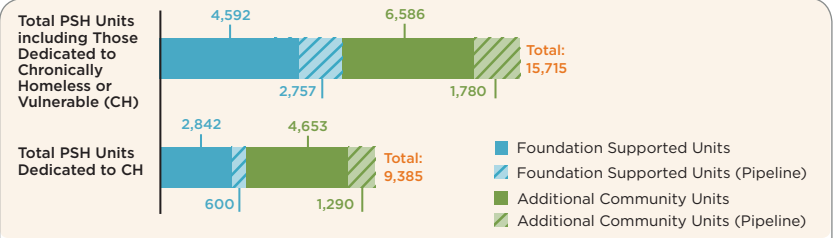
Sources: Interviews, United Way

Private and Public Funding Aligned Through Funders Collaborative for PSH, 2011-2015



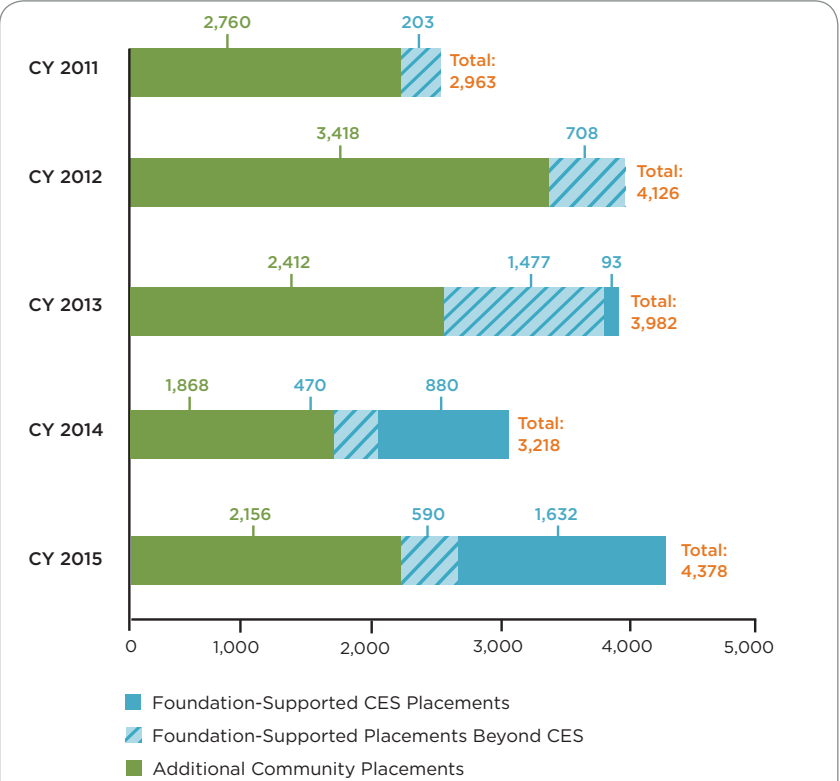
Source: Home For Good Funders Collaborative (Commitments made January 2011–December 2015)

New PSH Units for Individuals, 2011-2015



Sources: LAHSA Housing Inventory Chart, HACLA, HACoLA, Department of Health Services, CSH

Placements of Vulnerable, At-Risk, and Chronically Homeless People in PSH, 2011-2015

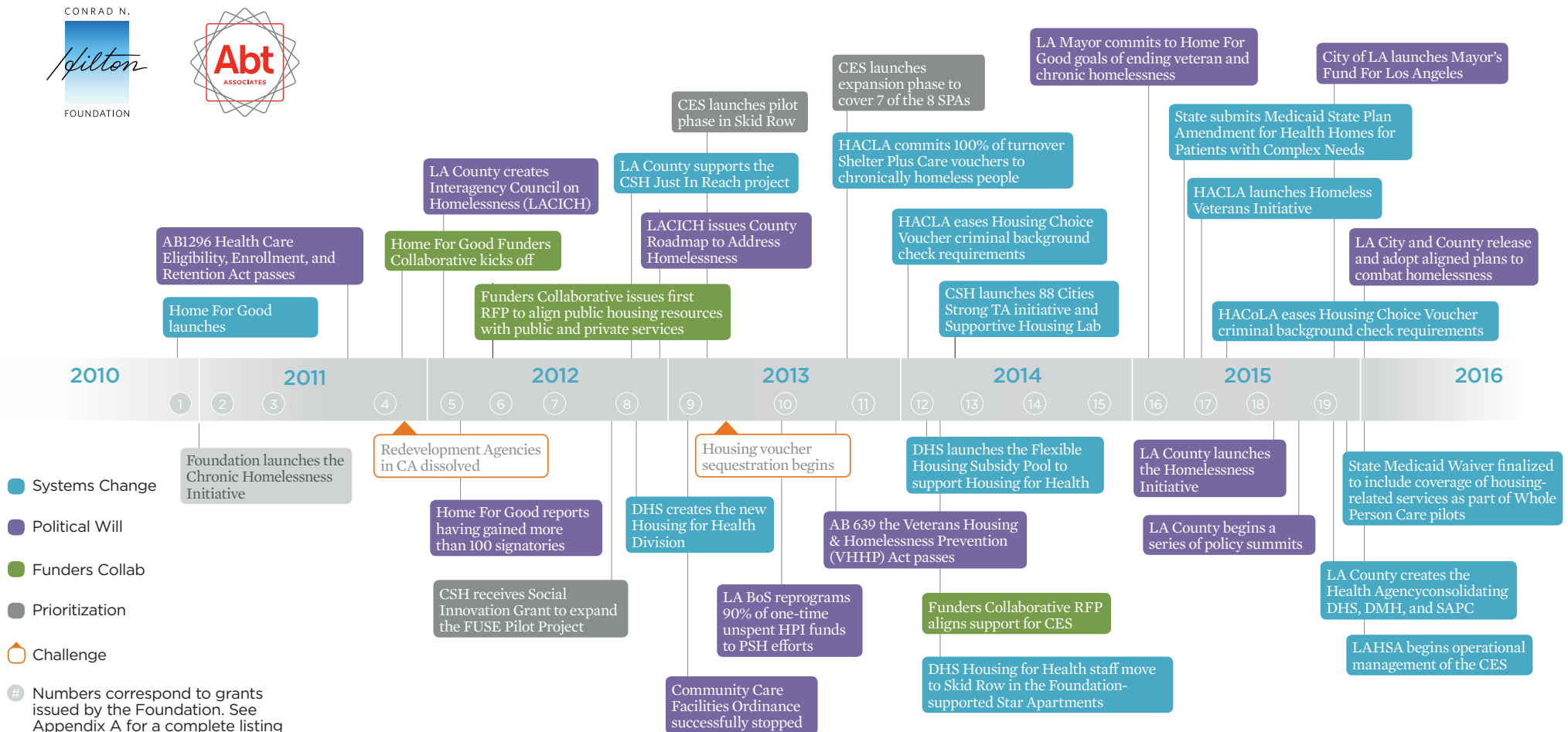


Sources: Home For Good Homelessness Analysis Collaborative, Funders Collaborative, CSH



CHRONIC HOMELESSNESS INITIATIVE PHASE 1 • Community Milestones

The following points represent key milestones for LA County in the first five years of the Conrad N. Hilton Foundation Chronic Homelessness Initiative. Most are significant community achievements, while others represent challenges the community has faced. Not all of the accomplishments listed here are directly attributable to the Foundation or its grantees, but many are. Foundation system change partners worked closely with and strongly influenced critical community players, advocating for engagement from local, state, and federal lawmakers and departments. Program grantees stretched to develop and pilot new strategies to serve the most vulnerable clients, forming the bedrock of the coordinated entry prioritization system and partnerships with mainstream service providers. These grantees also helped to educate policymakers at the local, state, and federal levels about the need for policy reforms to sustain and replicate effective programs. Knowledge dissemination grantees shared findings with the community to refine service models and development capacity. In all, the Foundation awarded 58 Phase I grants to 33 agencies with total funding of more than \$64 million. A complete list of the grantees that received Foundation support during Phase I of the Initiative is shown in Exhibit A of the final evaluation report.





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