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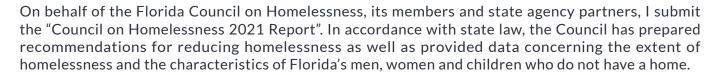
INTRODUCTION LETTER TO GOVERNOR DESANTIS FROM CHAIRPERSON

FLORIDA'S COUNCIL ON HOMELESSNESS

June 30, 2021

Governor Ron DeSantis 400 South Monroe Street Tallahassee, Florida 32399-0001

Dear Governor DeSantis,



For ten straight years, Florida has had a decrease in the number of people experiencing "literal homelessness" and seen the number of individuals experiencing literal homelessness decrease by more than 50% since 2010. This is due to the continued implementation of evidence-based practices, dedication of resources and coordinated efforts at the local and state level.

Unfortunately, over the past ten school years, the number of public school students identified as homeless, including those that are "doubled-up" and living in motels, has increased by 41%; this indicates more families are dealing with housing instability and are at risk of becoming literally homeless. While factors such as displacement due to natural disasters such as hurricanes has been a contributing factor, this increase is largely due to the fact that housing cost have increased at a faster rate than wage growth, especially among renter households.

In response to the COVID-19 pandemic Florida received an unprecedented amount of federal resources dedicated to preventing and ending homelessness. Because of these one-time resources, families that would have otherwise faced literal homelessness were able to remain safe at home.

Florida's success in addressing homelessness demonstrates that it is not an intractable issue—with sustained, targeted efforts we can continue to work toward a time when all Floridians have a safe, affordable place to call home. Florida must remain focused on serving those with the greatest need – those experiencing "literal homelessness" – while implementing strategies to reduce housing instability and prevent future homelessness.

There is no doubt that effective private and public collaboration at the State and local levels, combined with strong community participation, are key to solving homelessness. The Council appreciates your continued support of these efforts.

If you would like any additional information regarding this report or homelessness in Florida, please do not hesitate to contact me.

Thank you,

Shannon Nazworth

Chairperson for the Council on Homelessness



EXECUTIVE SUMMARY

The formation of the State of Florida's Interagency Council on Homelessness (The Council), created in 2001, has since become a nationally recognized best practice. The Council unites leadership across a spectrum of statewide systems to convene stakeholder meetings, develop policy, and make recommendations on how to prevent and end homelessness across the state. Pursuant to section 420.622(9), Florida Statutes, the Council submits its Annual Report to the Governor and Legislature, providing the current landscape of homelessness in Florida and offering recommended actions to address the challenge.

In Florida the number of people experiencing homelessness has decreased every year over the last 10 years. This significant reduction in homelessness is due to numerous factors, including but not limited to:

- A focus on evidence-based permanent housing solutions;
- The embrace and implementation of Housing First by Homeless Continuums of Care (CoCs);
- Increased collaboration and investment across systems of care to expand permanent housing solutions:
- Leadership from the State of Florida's Office on Homelessness;
- A favorable economic environment; and
- The commitment by direct service providers using best practices.

The base cause of homelessness is the inability to afford housing; other issues may exacerbate avoiding or exiting homelessness, but housing affordability is the primary driver.

Florida lacks a housing stock that is attainable and affordable to extremely low-income (ELI) households, demonstrated by the state's deficit of 368,506 affordable and available rental homes for households earning up to 30 percent of the area median income (AMI).¹ To make the issue worse, it is estimated that by 2030 over 35,000 of Florida's existing affordable housing units are at risk of being lost.² Resources must be deployed now to preserve and increase the stock of affordable housing and help individuals and families obtain and maintain housing.

Florida's Affordable Housing Trust Fund dollars have been used to increase the supply of housing affordable to low-income households through rental development and housing subsidies. These resources are increasingly used to create housing for homeless and special needs households. At the local level, partnerships encouraging the development and preservation of housing affordable to low-income persons, paired with evidence-based strategies that support at-risk households, are successfully serving the most vulnerable Floridians including: veterans, students experiencing homelessness, persons experiencing chronic homelessness, persons with disabilities, older adults, and other special needs households.

Building upon Florida's successes, the Council believes it is imperative the State of Florida dedicate adequate resources to the creation of housing affordable to extremely low-income households, those experiencing homelessness and persons with special needs.

Many Floridians are housing cost burdened, with 875,259 low-income households paying more than 50 percent of their incomes for housing.³ Floridians who earn minimum wage need to work 92 hours per week to afford a one-bedroom unit listed at Fair Market Rent.⁴ When these already cost-burdened, income-restrained families experience a job loss, reduced work hours, or a medical emergency, it is frequently the catalyst for a family's entering the housing crisis response system.

EXECUTIVE SUMMARY

Florida's Point in Time Count (PIT) data included in this report and presented in Appendix VI provides a snapshot of homelessness in Florida. This data reflects the 10-year trend that the number of people experiencing homelessness decreased among both sheltered and unsheltered categories. However, due to the pandemic, the 2021 PIT Count is not directly comparable to prior years' counts. Typically, Continuums of Care (CoCs) conduct a PIT Count of both sheltered and unsheltered households. This year, due to COVID-19 related safety concerns, only six of the 27 CoCs conducted such a count; 10 CoCs did not conduct an unsheltered count; and others conducted a modified form of the unsheltered count. All CoCs conducted a sheltered PIT count. For those that did not conduct an unsheltered count, the CoCs reported zero unsheltered persons, resulting in an undercount of total homelessness.

Due to the COVID-19 pandemic, this year saw an unprecedented infusion of federal funding to address homelessness and housing instability. With these funds appropriated by Congress, the State, local governments, CoCs, and partner agencies have invested in solutions to homelessness, including rent and utilities assistance, sheltering, outreach, supportive services and more. While these resources have increased Florida's capacity to prevent and end homelessness, the federal funds have strict restrictions on how the funds may be used; they are not interchangeable with the Challenge and Staffing grants provided to CoCs by the State of Florida. State funding remains critical to addressing homelessness in Florida, especially in rural areas and for the many programs that cannot be funded by federal resources due to their restrictions. State funding helps ensure a broad range of programs in Florida, as well as increase the capacity of the CoCs to administer the federal funding and other resources.

In this report, the Council provides an overview of homelessness in Florida, including extensive data on subpopulations, geographic areas, and trends. Additionally, a synopsis is provided reviewing the solutions working to prevent and end homelessness. Based on the data, trends, and best practices, the Council provides specific recommendations for the State's consideration.



2021 POLICY RECOMMENDATIONS

SUMMARY OF 2021 POLICY RECOMMENDATIONS

- 1. Continue to invest in affordable housing by appropriating full funding for the recurring State and Local Government Housing Trust Funds and appropriate additional nonrecurring funding of \$40 million to address the ongoing critical need for housing to support Florida's most vulnerable households, including but not limited to persons experiencing homelessness, those with special needs, and households with extremely low incomes.
- 2. Continue to appropriate full funding for the recurring State of Florida Challenge and Staffing Grants.
- 3. Embrace and incentivize the use of best practices.
- 4. Incentivize local governments to invest resources for the development and expansion of permanent housing opportunities for people experiencing homelessness.
- 5. Continue to support enhanced, strategic collaborations among Florida's systems of care serving people at risk of, or currently experiencing, homelessness.
- 6. Prioritize permanent housing resources to those who are most vulnerable, including those most vulnerable to COVID-19, people experiencing homelessness with chronic health conditions, older adults, and unsheltered individuals and families.

COMPREHENSIVE 2021 POLICY RECOMMENDATIONS

1. Continue to invest in affordable housing by appropriating full funding for the recurring State and Local Government Housing Trust Funds and appropriate additional nonrecurring funding of \$40 million to address the ongoing critical need for housing to support Florida's most vulnerable households, including but not limited to persons experiencing homelessness, those with special needs, and households with extremely low incomes.

The State of Florida 2021 legislative session resulted in a new landscape for State funding of affordable housing. First, Senate Bill 2512 (SB 2512) statutorily permanently reduced the State and Local Government Housing Trust Funds by changing the percentage of documentary stamp tax revenue to be directed to housing. At the same time, SB 2512 guarantees an end to sweeps of the State and Local Government Housing Trust Funds and establishes the Housing Trust Funds as a recurring budget line item. The collective impact of these changes resulted in an appropriation of \$209.2 million in Housing Trust Funds for fiscal year 2021-2022, the largest appropriation in more than ten years. The Council applauds the State's commitment to affordable housing that resulted in the guarantee of no sweeps and recurring funding.

The Council recommends that the State stay the course consistent with the guarantees of SB 2512 by not sweeping the State and Local Government Housing Trust Funds and continuing to appropriate full

funding for the recurring Housing Trust Fund allocations. This reliable source of funding for affordable housing in Florida is necessary to preserve and increase the stock of housing available to lower income households. The Council also recommends that the State of Florida appropriate \$40 million to address the need for construction of affordable housing. These resources remain available in the State Housing Trust Fund after Governor DeSantis vetoed a sweep of these funds.

In addition, the Council recommends increasing the allocation that is dedicated for those with the greatest needs – persons experiencing homelessness, those with special needs, and households with extremely low incomes. This approach will build upon the success of past efforts by the State.

As outlined in this report, the lack of affordable housing is a fundamental driver of enduring homelessness in Florida. According to the 2019 Rental Market Study, Homeless and Special Needs households represent 23 percent of the overall rental housing need in the state.⁵ The lack of affordable housing options available (prior to COVID-19) was already limited at best with only 28 affordable and available homes per 100 extremely low-income households.⁶ It is imperative that funding is increased so more permanent rental housing for these vulnerable households can be developed.

2. Continue to appropriate full funding for the recurring State of Florida Challenge and Staffing Grants.

Beginning in the 2019 Legislative session, the State of Florida has supported the homeless continuum of care system in the state by providing \$6.1 million in recurring state general revenue. The Council recommends that the State continue to appropriate full funding for both Continuum of Care (CoC) Staffing Grants, as authorized by Florida Statute 420.622(10), and Challenge Grants, as authorized by Florida Statute 420.622(4).

While the majority of homelessness funds come from the Federal Government, without these critical State dollars, the CoC system would not be capable of meeting the needs of homeless individuals and families with children. Homeless Continuums of Care (CoCs) are responsible for creating a plan to prevent and end homelessness in their local geographic area, implementing that plan, collecting and using data to assess needs and effectiveness of programs, and coordinating local community stakeholders to achieve the plan's goals. This work is challenging and cannot be executed effectively without the support of the State of Florida.

During the 2021 Legislative Session, \$3.181 million in Challenge Grants and \$3 million in Staffing Grants were appropriated. This support has been integral to local efforts to reduce homelessness and bring millions of dollars in federal grants to Florida. The Challenge Grant provides a flexible source of funding for CoCs. Most government funding comes with a robust set of regulations. Challenge Grants allow CoCs to fill the gap where other grants cannot be used and respond to their unique and pressing needs. The Challenge Grant provides an opportunity to serve those that do not meet the strict eligibility requirements of the grants received from Federal sources. It also provides an opportunity to fund programs that are outside of the components of Federal funding. Some examples include programs to divert individuals from homelessness and other supportive programs to support the acute health, mental health, transportation, and educational needs of those experiencing or at risk of becoming homeless. The Challenge Grant funding allows CoC to provide assistance where there is no other resource available. In addition, the Staffing Grant provides administrative funding that CoCs can leverage to build their capacity to create effective crisis response systems and draw down tens of millions of dollars in federal funding.

In addition, the State provides pass-through funding for the Emergency Solutions Grant (ESG) programs which allow communities to provide street outreach services to unsheltered individuals; emergency shelter for literally homeless persons; short- and medium term rental assistance and housing relocation and stabilization services that are provided through rapid rehousing and homelessness prevention supports; as well as funding for the Homeless Management Information System (HMIS); and a small percentage for administrative activities.

However, federal pass-through funding is not sufficient to meet the needs of people experiencing homelessness, nor is it flexible enough to fund the range of programs needed. The Challenge and Staffing Grants are critical to meeting those needs that federal funding does not address. The CoC lead agencies utilized State funding to prevent and reduce homelessness, and as leverage for federal funding of nearly \$99 million of HUD CoC funding in 2020. However, with HUD CoC funding largely concentrated in metropolitan areas, state homelessness funding provides an especially critical resource for the CoCs that serve Florida's rural communities.

3. Embrace and incentivize the use of best practices.

Florida has made progress in reducing the number of persons experiencing homelessness because communities across the state embraced evidence-based and best practices. All state agencies should ensure their programs and policies implement best practices and support these proven practices at the local level.

Best practices for effectively ending homelessness include:

- Housing First programs and policies geared at helping households move into stable permanent housing as quickly as possible, followed by the provision of appropriate support services;
- Service providers that offer increased income and employment opportunities;
- Permanent Supportive Housing (PSH) for chronically homeless households and those with the greatest needs;
- Rapid Re-Housing (RRH) to quickly exit households out of homelessness and into permanent housing;
- Diversion of those for whom the homeless system does not offer the best solution;
- Prevention Services to keep people at imminent risk of homelessness stably housed;
- Coordinated Entry to ensure data-sharing and appropriate prioritization for housing interventions;
- Data-driven decision making to ensure that resources are being used effectively and efficiently; and,
- A focus on system-wide performance outcomes so the system works well to effectively end homelessness for the community.

The Council recommends the specific State actions to meet the needs of Florida's most at-risk households:

• State agencies represented on the Council on Homelessness, as well as the Office on Homelessness, take a leadership role in modeling and sharing proven best practices at the state level to ensure all entities using state resources to end homelessness are implementing best practices;

- The Office on Homelessness continue to use a system to gather data, assemble performance outcome measures, and accurately report on statewide progress toward the goals adopted by the Council;
- The Office on Homelessness continue to incentivize the adoption of best practices at the local level through housing-focused funding application requirements and monitoring processes administered by the Office.
- Reestablish funding for the homeless training and technical assistance efforts, formerly funded through the Housing Trust Fund.
- 4. Incentivize local governments to invest resources for the development and expansion of permanent housing opportunities for people experiencing homelessness.

To ensure that homelessness is rare, brief, and one-time, a community-wide effort is required. Local governments, like CoCs, have limited financial resources to increase the supply of housing targeted to special populations. State agencies should incentivize local governments to strategically partner with CoCs to implement strategies that create permanent housing options for people experiencing homelessness. This type of multi-system coordination is encouraged and documented as a best practice by the United States Interagency Council on Homelessness (USICH). As quoted from the USICH 2018 Home, Together: Federal Strategic Plan for Preventing and Ending Homelessness, "Achieving these shared goals is not possible through federal action alone—it requires strategic focus, effort, and investments from both the public and the private sectors and across all levels of government."

Further, as part of its annual funding application, the U.S. Department of Housing and Urban Development (HUD) evaluates CoCs on their ability to increase the number of permanent housing units for homeless households within their local community. This requires the support of external funding sources to leverage state and local funding with federal dollars, thus increasing the capacity for development and rental assistance and creating permanent housing solutions to end homelessness. Local governments have the ability to incentivize best practices at the local level and can maximize their impact on ending homelessness by investing in CoCs and stakeholders that adopt best practices.

Therefore, the Council recommends creating incentives for local governments to direct resources to expand housing opportunities for people experiencing homelessness. Incentives can include using local government participation as a scoring criteria or preference in competitive awards; agencies can also establish goals to fund programs and partnerships in communities in which local governments are participating. And there are many other strategies state agencies can consider and develop.

5. Continue to support enhanced, strategic collaboration among Florida's systems of care serving people at risk of, or currently experiencing, homelessness.

Increasing coordination and leveraging financial resources to expand housing opportunities are proven successful strategies for ending homelessness. There are several subpopulations at risk of or experiencing homelessness, including youth, people with behavioral health disorders, older adults, youth exiting foster care, people fleeing domestic violence or human trafficking, and people exiting institutions like jail or hospitals. These individuals and families often intersect with many systems of care. When these systems work in collaboration by sharing data and resources, the services are more effective, reducing duplication, and resulting in a significant decrease in costs.

Developing a collaborative effort between Florida's Department of Children and Families and the state's Community Based Care Lead Agencies, Managing Entities, and CoCs; the Agency for Health Care Administration and the state's Managed Care Organizations; Public Housing Authorities; the Florida Department of Elder Affairs and the state's 11 Area Agencies on Aging; Florida Housing Finance

Corporation; Department of Corrections; local law enforcement; housing developers and providers; and other local community-based providers will increase Florida's and communities' capacity to strategically identify multi-system consumers experiencing or at risk of homelessness and coordinate housing and services aimed at housing stabilization and retention. The Council supports being forward thinking, vigilant, and flexible so as to increase collaboration aimed at strategically preventing and ending homelessness throughout Florida; as well as braiding resources so as to use government funds as efficiently as possible.

The Council recommends that the State support a more inclusive relationships across the variety of systems of care organizations. This should be done at the state level by requiring state agencies to consider how their programs and policies impact homelessness as well as how they can coordinate with other state agencies and systems to increase efficiencies, as well as at the local level through participation in local Continuums of Care and other systems of care impacting homelessness. This will help better coordinate services, including discharge planning and sharing data and resources to help reduce duplication of services, and better address the needs of shared clients in a variety of systems of care.

6. Prioritize permanent housing resources to those who are most vulnerable, including those most vulnerable to COVID-19, people experiencing homelessness with chronic health conditions, older adults, and unsheltered individuals and families.

Florida's communities continue to respond to the increase in housing instability individuals and families face due to unemployment, loss of income, education challenges, and COVID-19 related health issues. While COVID-19 has brought overwhelming challenges, it also provided for strategic local, state and national responses to offer relief to households experiencing housing and instability and homelessness.

The Council on Homelessness looks to best practices across the state and nation when making recommendations for successful short and long-term solutions in response to COVID-19. Several national partners came together to provide "The Framework for an Equitable COVID-19 Homelessness Response" which assessed the rollout of unprecedented amounts of rental assistance and provided recommendations for a more equitable response.

These recommendations include:

- 1. Ensure rehousing strategies for people experiencing homelessness are prioritized when homelessness-funding sources are administered.
- 2. Target prevention to households most in need, ensuring those at risk of homelessness are able to access assistance.
- 3. Design programs that reach neighborhoods and communities with the greatest risks and needs for assistance.

Housing funds dedicated to COVID-19 should be put to best use, aligning with the US Department of Housing and Urban Development's (HUD) emphasis on Housing First and permanent housing interventions, which create long-term solutions to end homelessness throughout Florida. With the anticipated increase of households needing homeless prevention assistance, Florida must recognize the importance of funding Permanent Supportive Housing (PSH) and Rapid Re-housing (RRH) interventions, which has resulted in a significant and consistent decrease in homelessness over the last 10 years. COVID-19 funds should not be diverted from these best practices. The Council recommends stakeholders at all levels in Florida implement best practices to continue successfully administering rental assistance to those most in need.

AN OVERVIEW OF HOMELESSNESS

Homelessness occurs when a person lacks a home. While conceptually simple, state statutes and federal regulations dictate what it means for an individual or family to be defined as homeless. It is important to recognize that various systems may identify more specific criteria, sometimes causing systems to become more complex and difficult to navigate for those who need it most. A household's eligibility for housing and services is often tied to definitions outlined by the funding source. Technical and varying definitions can create unintentional barriers to resolving an individual or family's housing crisis.

WHAT IS A HOMELESS CONTINUUM OF CARE?

One of the most coordinated efforts to prevent and end homelessness was the establishment of the Continuum of Care (CoC) model by HUD. A CoC comprises all stakeholders in a geographic area that are working together to prevent and end homelessness. The State of Florida has 27 CoCs of varying sizes and geographic areas. Some CoCs may serve one county, while another spans eight counties.

In alignment with best practice, the CoC is composed of a broad array of stakeholders across multiple systems in the community, extending beyond nonprofits that provide homeless-specific services. To prevent and end homelessness, it is necessary to take a multi-disciplinary approach, encouraging participation in action planning to support activities that address homelessness in local communities. CoCs work to engage multiple sectors, including philanthropy, local government, housing developers, realtors, health care systems, child welfare, criminal justice, and so on. These efforts strengthen collective impact when addressing the needs of people experiencing or at risk of homelessness. These partnerships can assist CoCs to strengthen the housing crisis response system, expand funding opportunities, increase economic opportunity, and incorporate perspectives that help build a more effective system of care.

Prior to the development of the current CoC model, homeless services organizations worked individually and applied directly to HUD for funding. Currently, as required by the federal HEARTH Act,⁷ the CoC establishes a local planning body to organize and deliver housing and services to meet the needs of people experiencing homelessness. The planning body is typically a CoC Board or Council comprising community leaders and representatives of multiple stakeholder groups. The CoC also designates a "CoC Lead Agency."⁸

CoCs are now required to submit an annual consolidated application to HUD for CoC Program funding. Most CoCs have a designated Lead Agency that serves as this collaborative applicant. The CoC Lead Agency provides staff leadership for the system, submits funding applications on behalf of the CoC to HUD and the State of Florida, and has a wide range of responsibilities to ensure that the local system is effectively ending homelessness. CoC Lead Agencies are tasked with leading coordination of community efforts that include a diverse group of stakeholders.

The State of Florida supports this vital work of the Lead Agency through CoC Staffing Grants. The CoC geographic areas are agreed upon by the local communities and HUD and are recognized by the State. The Florida CoC geographic areas are provided in Appendix VIII and the contacts for the CoCs are in Appendix IX.

DEFINING HOMELESSNESS

While the term "homeless" can paint various pictures for people, it is important to understand there is no one defining characteristic of a household experiencing homelessness outside of lacking a stable place to live. Communities are tasked with addressing homelessness among a wide variety of households, including people who are unsheltered, living in places not meant for human habitation, fleeing domestic violence, aging out of foster care, staying in a homeless emergency shelter, and more.

The housing crisis response system is tasked with resolving homelessness among widely varied populations and is often the final net that catches people after they fall through the gaps of other systems. The system responds to the impact of housing shortages, unemployment, and more. With the diverse characteristics of the households experiencing homelessness, it is critical for the right stakeholders from every sector to be at the table to make decisions.

As alluded to throughout this report, there are varying definitions of homelessness dependent upon sources of funding and state and federal funding or agencies. The report utilizes the HUD definition of homelessness, unless specified otherwise. This section describes some of the varying definitions.

US DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT (HUD)

HUD defines homelessness among four categories to provide a defined scope that ensures individuals and families at the greatest risk are served with the limited resources available.

- **1. Literally Homeless.** Individuals and families who live in a place not meant for human habitation (including outdoors or in their car), emergency shelter, transitional housing, and motels paid for by a government or charitable organization.
- **2. Imminent Risk of Homelessness.** Individuals and families who will lose their primary nighttime residence within 14 days and have no other resources or support networks to obtain other permanent housing.
- **3. Homeless Under other Federal Statutes.** Unaccompanied youth under 25 years of age, or families with children and youth, who do not meet any of the other categories are homeless under other federal statutes, have had a lease, and have moved two or more times in the past 60 days, and are likely to remain unstable because of their special needs or barriers.
- **4. Fleeing or Attempting to Flee Domestic Violence.** Individuals or families who are fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking, and who lack resources and support networks to obtain other permanent housing.

CoCs rely on these definitions to determine who is eligible for assistance in HUD-funded projects including emergency shelter, Rapid Re-Housing (RRH), or Permanent Supportive Housing (PSH). Even though other individuals and families may be unstably housed or living in unaffordable housing, they likely will not qualify for assistance from CoCs and must turn to other community supports. Given the scarcity of resources, CoCs are tasked with assisting the most vulnerable households who lack the resources to self-resolve their housing crisis. Those who meet the criteria to receive assistance through the CoC are aided with supports to create a foundation of housing.

Florida is home to an estimated 21,218 people experiencing homelessness on any given night, which includes people who live in places not meant for human habitation (e.g., on the streets, in cars, wooded areas, or abandoned buildings) or staying in emergency shelters or transitional housing until they find stable permanent housing of their own.

While there are others that are on the verge of becoming homeless or living in unstable housing, the housing crisis response system cannot meet that larger demand. Diversion from homelessness is a critical strategy that works to help persons experiencing a housing crisis with identifying alternative, safe options outside of emergency shelter or unsheltered locations.

Another type of household that falls under federal definitions outside of HUD, but within the McKinney-Vento Homeless Assistance Act (subsection VII-B), are sometimes referred to as "doubled-up," and due to their economic and housing crisis these households lack the resources to maintain a lease in their own name. Some of these home-sharing arrangements are relatively stable; in other cases, people, especially young people, may be "couch-surfing" and moving from one place to another in quick succession. Further, some people who do not have their own permanent housing live in motels and similar places that are overcrowded, ill-equipped, and impermanent.

Over the last few years, youth homelessness has received the attention of HUD, and for good reason. This is evidenced by the Youth Homelessness Demonstration Project (YHDP) which is designed to reduce homelessness among youth, unaccompanied youth, and pregnant and parenting youth. Youth-specific programs are invaluable because young people who are trying to resolve an episode of homelessness may have additional barriers, including being too young to legally execute a lease, experiencing significant trauma, and oftentimes lacking natural supports. Youth-centric programs better serve youth experiencing homelessness, often by incorporating other youth with lived experience of homelessness, and tailored support services and financial assistance to promote housing stability.

HUD's special purpose Family Unification Program (FUP) serves youth transitioning out of the foster care system. FUP provides a Housing Choice Voucher administered by a local Public Housing Authority in partnership with Public Child Welfare Agencies. In additional to rental assistance, support services are also offered. Participating youth receive the voucher and support services for up to 18 months generally, and in some cases, for up to five years.

Unaccompanied homeless youth can be composed of households with only children, representing persons under 18 years old, including children in one-child households, adolescent parents and their children, adolescent siblings, or other household configurations composed only of children. Additionally, the Runaway Homeless Youth Act identifies persons not more than 21 years of age who lack the resources to self-resolve or have no alternative living environment. This definition is utilized under the US Department of Health and Human Services programs.



US DEPARTMENT OF EDUCATION

Subtitle VII-B of the McKinney-Vento Homeless Assistance Act (MVA) prescribes a definition of homelessness that more broadly accounts for the traumatic impact of housing instability on children and youth and the impact of that trauma on their education and development.

Homeless children and youth are defined as Individuals who lack a fixed, regular, and adequate nighttime residence and includes:

- 1. Children and youth who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; or are abandoned in hospitals; or are awaiting foster care placement;
- 2. Children and youth who have 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;
- 3. Children and youth who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and
- 4. Migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described above in (1) through (3).

Subtitle VII-B of the MVA also defines unaccompanied youth as follows: The term "unaccompanied youth" includes a youth not in the physical custody of a parent or guardian.

Schools identify homeless children and youth throughout the year, as opposed to the single night of the Point in Time Count. During the 2019-2020 school year, 79,949 students experienced homelessness at some point during the school year in Florida¹⁰ (see FDOE Homeless Students Count information in Appendix VII). The MVA programs conduct multiple counts during each school year, differing from the HUD Point in Time Count, which occurs on a single day. Both the HUD and MVA measures are valid measurement procedures but offer challenges to data comparison. It is important to note that the living situation designations of school districts are recorded only at the time that a school determines that the student meets McKinney-Vento eligibility criteria.

HOMELESSNESS AMONG CHILDREN AND YOUTH

The annual Point in Time (PIT) Count required by HUD offers a snapshot of people experiencing literal homelessness but does not account for all types of homelessness among students and other youth subpopulations. The Department of Education uses a broader definition of homelessness to include youth who "lack a fixed, regular, and nighttime residence." The larger numbers of homelessness in this section reflect the broader definition. Despite a reduction of 11,726 homeless students since the 2018-2019 school year, Florida Department of Education (FDOE) is reporting that 79,949 students experienced homelessness in the 2019-2020 school year; with the root cause the deficit of housing that is affordable.

Homelessness among students is not limited to only those in households with a parent or guardian; there are also 6,952 Florida students identified as Unaccompanied Homeless Youth who are experiencing homelessness not in the physical custody of a parent or legal guardian. Though the majority of these

youth are not living in emergency shelters or places not meant for human habitation, any type of housing insecurity and lack of regular nighttime setting is a traumatic experience and is proven to cause disruption to a young person's academic pursuits, as documented by disparities in standardized test scores and graduation rates.¹²

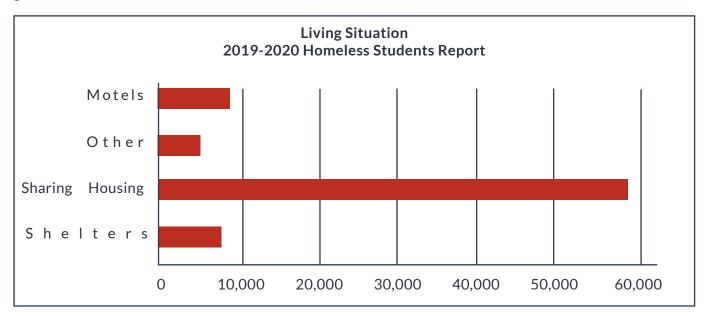


Figure 1: Florida Department of Education. Homeless Students Report, 2019-2020

Solutions to address homelessness among students in Florida's school system mirror successful interventions in the housing crisis response system which include developing cross-sector collaborations, employing a person-centered approach to services, and advocating for additional funding aimed at affordable housing. To achieve success, there must be an increase of stock in housing that is affordable and available. For schoolchildren and their families who lack stable housing, it takes a multi-system approach, including leveraging local, state, and federal resources, to satisfy the need for housing options. When students and their families have access to stable housing, decent wages, and natural supports they can thrive.

THE EDUCATION OF HOMELESS CHILDREN AND YOUTH

The McKinney-Vento Homeless Assistance Act (MVA), the driving policy for homeless education, is incorporated into the Federal education code as Title IX, Part A of Every Student Succeeds Act (ESSA).¹³ The basic tenants of the MVA are that homeless children and youth:

- Have equal access to the same free, appropriate public education, including a public preschool education, as other children and youth;
- Have barriers to identification of homeless children and youth, their attendance and participation in school, and their academic achievement identified and removed;
- Are assured that they will not be separated from the mainstream school environment; and
- Have access to the educational and related services that they need to enable them to meet the same challenging State academic standards to which all students are held.

While all public school districts are required to comply with the McKinney-Vento Act, the bulk of funding comes from a set-aside of Title I, Part A (TIPA) funds at the local level. These set-asides range from less than one percent of the total TIPA allocation to five percent. Congress does provide funds to expand and

enhance local school district efforts through a competitive procurement process. Currently 55 Florida school districts receive sub-grants through this process for three-year projects which will end on June 30, 2021. Initial grants range from \$25,000 to \$150,000, depending on the number of homeless children and youth identified by the school district. School districts in the path of Hurricane Michael received additional funds, from this source, in the 2019-2020 school year. School districts also leverage other district and community services and financial support.

Partnerships are critical, as they assure that as many students as possible are identified and have the material, supplies, school uniforms, shoes, clothing, hygiene products, and academic support to be successful in their education. Partnerships, as well as funds, are an essential resource for a successful Homeless Education Program. School district Homeless Liaisons develop relationships with organizational partners with specific purposes to identify homeless children and youth, remove barriers that prevent regular school attendance, and support academic achievement.

FDOE's Strategic Plan assures the academic progress of all students, including those experiencing homelessness. It is within the context of this vision that Florida's schools and school districts work to identify and support children and youth who lack stable housing. FDOE's Homeless Education Program works with school districts to assure that children and youth who are homeless in Florida are consistently identified, enrolled quickly in eligible schools and programs in their best interest, and are fully participating and achieving in available education programs. All school districts emphasize the achievement of three outcomes in their program:

- 1. Identification of all homeless children and youth in their community,
- 2. Identification and removal of barriers to regular school attendance and full participation in school programs and activities, and
- 3. Continued academic progress of students experiencing homelessness.

The MVA requires each school district to designate a Homeless Education Liaison to implement services to focused on these outcomes. Florida's Homeless Liaisons are very resourceful in their ability to garner tangible support within the school district and from their communities. These liaisons are responsible for referring students experiencing homelessness and their families to available housing, health, and behavioral health services; providing assistance to unaccompanied youth to complete the types of tasks that parents would typically do; assisting to obtain documentation for school enrollment, including medical records; and verifying the independent status of unaccompanied high school graduates who are homeless so they can qualify for college financial aid.

To ensure equal access to all students, the MVA guarantees that children and youth who are experiencing homelessness can obtain parallel educational opportunities to all other students. Under MVA, students can also participate in any school programs and receive any school services for which they qualify in addition to their rights¹⁴ listed below.

- 1. Continue to attend the school they last attended before they lost their housing (their school of origin), if that is the parent/guardian's choice and is in the child's best interest, or the school which is zoned for their temporary residence (zoned school);
- 2. Enroll and attend classes immediately while the school arranges for the transfer of school and immunization records and other required enrollment documents;
- 3. If necessary, enroll and attend classes in the school selected by the parent/guardian (school of origin or zoned school), while the school and the parent/guardian seek to resolve a dispute over which school is in the best interest of the child, noting that this does not mean any school in the district, only the school of origin or zoned school; and

4. Receive transportation to the school of origin (if a parent/guardian request such transportation).

Recognizing the impact that homelessness has on schoolchildren, Florida Housing Finance Corporation committed to providing rental assistance and case management services that assist with housing stabilization with the goal of improving educational success and permanent housing retention among the participants. This project, the Housing Stability for Homeless Schoolchildren Initiative, is achieving positive outcomes and a project update can be found in the next section of this report.

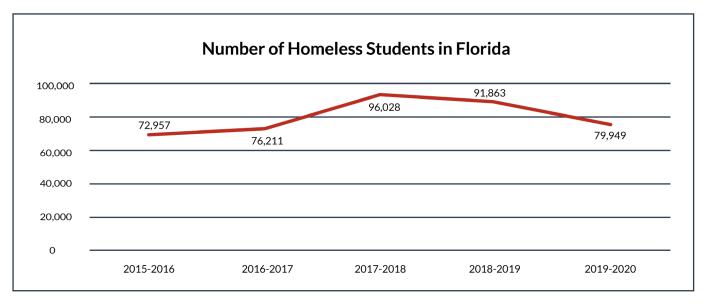


Figure 2: Florida Department of Education, Homeless Students Count 2015-2020. Available at: http://www.fldoe.org/policy/federal-edu-programs/title-x-homeless-edu-program-hep.stml

The living situations of homeless students tend to be fluid. Over the course a school year, many families live in a variety of situations. Anecdotal evidence from school district homeless liaisons suggests that when families experience extended periods of homelessness, it is common for them to live with others for a while, then move into a motel, then into a public shelter or transitional living situation. Some families even end up living in unsheltered situations. The variations in definition and methodology for counting result in a data set that can be confusing. However, when considered in a broader context, and with other data sets, they provide opportunities for a dynamic understanding of the barriers to stable housing and suggest solutions for removing those barriers.

One thing we know is that for children and youth who lose their housing, the experience is traumatic. Loss of housing requires most of a child's attention and emotional energy to understand what is happening to them and their family. Family routines are different and their neighborhood relationships, the foundation of childhood security, are gone. Further, another primary source of emotional security and relationships – their school – is threatened. The academic performance of children and youth who also change schools due to loss of housing tends to drop sharply. When families have a stable place to call home, it promotes the wellbeing of children in the family.

PROGRESS IN FLORIDA

Efforts to prevent and end homelessness throughout Florida are producing positive outcomes. While the national conversation brings attention to an increasing number of people experiencing homelessness in certain locales, Florida has seen a significant decrease due in large part to the increase of permanent housing solutions and a pivot toward evidence-based strategies. These evidence-based strategies include implementation of Housing First programs, employment and training opportunities for persons at risk of or experiencing homelessness, Permanent Supportive Housing (PSH) and Rapid Re-Housing (RRH) interventions, diversion from homelessness, and targeted homelessness prevention services.

Applying these best practices, an emphasis on affordable housing, organized leadership at all levels, and increased effort among all systems of care has reduced homelessness every year over the last 10 years, based on Point in Time (PIT) Counts. However, as noted previously, comparisons with the 2021 PIT Count must be made with caution. Safety concerns associated with COVID-19 caused some CoCs to forgo a count of those who are unsheltered and caused others to conduct a modified unsheltered count.

	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
Total	55,170	47,862	41,542	35,900	33,559	32,190	31,030	28,328	27,487	21,218
Families	6,333	5,806	4,550	3,053	3,031	2,831	2,436	2,171	2,294	1,687
Chronic	10,054	9,647	7,989	6,540	6,079	5,120	5,230	5,727	5,182	2,778
Veterans	5,331	5,505	4,552	3,926	2,902	2,789	2,515	2,472	2,436	2,153

Figure 3: Department of Children and Families State Office on Homelessess

DEPARTMENT OF CHILDREN AND FAMILIES STATE OFFICE ON HOMELESSNESS

The State of Florida's Department of Children and Families State Office on Homelessness (the State Office) has spearheaded coordination of local efforts, bringing together CoCs for regular calls, statewide evaluation of system performance measures, and encouraging the use of best practices such as Housing First to make homelessness rare, brief, and one-time.

As the state-approved agency for administering funding for homeless-related activities, the State Office moved all of its state funding to one Unified Funding Application (UFA) that incorporates four resources: Emergency Solutions Grant (ESG), Temporary Assistance to Needy Families (TANF) Homelessness Prevention Grant, Challenge Grant, and Staffing Grant. The three-year unified contract process combined these funding sources into one application, simplifying the process and making consistent expiration for all funding sources ending June 30, 2022. Understanding that CoC Lead Agencies are applying for various funding opportunities, the simplification of this process allows CoCs to shift time and energy to managing the housing crisis response system and leveraging state dollars.

COUNCIL ON HOMELESSNESS

The Council on Homelessness is tasked with a significant role in making homelessness rare, brief, and one-time in Florida. Members of the Council take an active role in developing policy, coordinating a multi-system response to homelessness, and advocating for the implementation of effective practices and programs for low-income, homeless, and special needs households throughout Florida. The public and private agency representatives who comprise the Council recognize the importance of working in coordination to prevent and end homelessness, which is especially essential for persons who overlap among these systems. The Council represents a broad perspective, integrating missions, visions, data, definitions, funding sources, and populations across federal, state, and local systems.

IMPLEMENTING BEST PRACTICES

Florida CoCs have embraced and implemented best practices to be successful in preventing and ending homelessness. Pairing best practices for service delivery with permanent housing solutions is essential in reducing the number of people experiencing homelessness. CoCs have been implementing much more robust Rapid ReHousing (RRH) and Permanent Supportive Housing (PSH) programs with a Housing First approach, which quickly transitions people out of homelessness and into permanent housing that is affordable. The impact of these strategies has exhibited tremendous results in the reduction of homelessness. As shown in Figure 4, the number of people experiencing homelessness nationally has been steadily increasing over the past four years. In contrast, in Florida the numbers have continued to decrease.

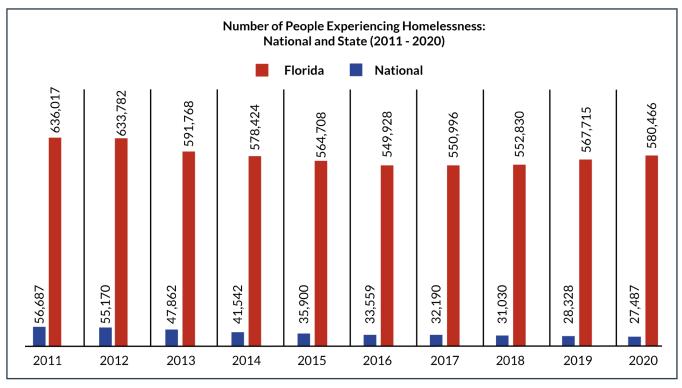


Figure 4: US Department of Housing & Urban Development Point in Time Count Estimates https://www.hudexchange.info/programs/coc/coc-homeless-populations-and-subpopulations-reports/

PERMANENT HOUSING SOLUTIONS

An increased focus on permanent housing has been adopted and implemented by CoCs, local governments, nonprofits, housing developers, and funders. CoCs are focused on increasing their supply of housing through collaborations with external systems, braiding funding sources, and in some cases, developing housing. CoCs also coordinate their efforts with local governments, which provide a critical source of funding for housing and homelessness with sources such as the state appropriated State Housing Initiatives Partnership (SHIP) and other housing-related formula grants from HUD such as the Community Development Block Grant (CDBG) and HOME. These funds can provide rental assistance, subsidies, homelessness prevention assistance, and other strategies to help people obtain and maintain stable housing that is safe, decent, and affordable.

Florida has moved to a Housing First philosophy that identifies housing as the foundation of a person's recovery and wellness. The implementation of the Housing First model removes the assumption that people experiencing homelessness are "less than" and requiring proof of readiness to live under a roof, and supports creating a foundation of housing and safety where a person can stabilize once their housing crisis has ended and move toward self-sufficiency.

Permanent housing is not only the most effective way to end homelessness, but is also cost effective, as demonstrated by the Florida High Needs High Cost Pilot Project. In 2014 Florida Housing Finance Corporation awarded \$10 million in development financing through a competitive application process to three nonprofit developers to create permanent supportive housing properties. The target population at the three properties was extremely low-income persons experiencing chronic homelessness who were high users of publicly funded crisis services. The key findings¹⁵ of the pilot were: (1) supportive housing for persons experiencing chronic homelessness with high needs can save local and state governments money; (2) moving into permanent supportive housing (PSH) reduces interactions with the criminal justice system; (3) resident stability in housing usually decreases supportive services costs over time; (4) PSH is successful in helping persons experiencing chronic homelessness with high needs achieve and sustain housing stability; and (5) most pilot residents who had formerly experienced chronic homelessness successfully retained their housing.

To augment the existing data, FHFC is supporting a Needs Assessment for Homeless/Special Needs Households that will "Identify the rental housing needs of Special Needs and Homeless populations with incomes at or below 60 percent of the AMI, and perform financial modeling to provide access to the number of units required to meet the various housing needs determined by the needs assessment." The completed needs assessment is anticipated to be available late 2021.

POINT IN TIME COUNTS AND SYSTEM PERFORMANCE MEASURES

HUD continues to refine its strategy to measure performance, advancing the CoC housing crisis response systems' ability to manage and improve their systems through targeted, data-driven decision making. Data-driven decision making is essential in identifying what interventions are successfully preventing and ending homelessness. When there are well-performing projects that are successful at housing people and helping them remain housed, it is valuable to identify what is effective and replicate that effort.

The Homeless Management Information System (HMIS), required by HUD, is used by CoCs to collect client-level data, documenting persons experiencing homelessness and their engagement in housing and services. The data collected is used in many ways, including informing Congress on the landscape

of homelessness in America, reflecting what housing and service providers are doing that is working, and driving community-wide decisions to continuously improve the crisis response system.

This section highlights the Point in Time Count, HUD System Performance Measures, Longitudinal System Analysis (LSA), and Stella Performance. Applying the data from HMIS and these instruments, CoCs are improving their ability to make homelessness rare, brief, and one-time. As data continues to prove, housing is the solution to ending homelessness.

HUD requires that CoCs conduct an annual census, coined the Point in Time Count (PIT Count), of persons experiencing homelessness, which are divided into unsheltered and sheltered population categories. Not only are people living on the streets counted, but so are those residing in Emergency Shelters, Safe Havens, and Transitional Housing units. Conducting a PIT Count is challenging and requires many volunteers and a great deal of coordination, mapping, and data entry. While PIT Counts provide valuable information, it is understood that they are likely undercounts of homelessness due to the inherent difficulty of locating every person that is homeless in a community, and the count only offers a snapshot because it is completed on a single night in January.

The PIT Count provides a "one-day snapshot" of the persons experiencing homelessness on a given night and should not be interpreted as a measure of the number of people who experience homelessness over the course of a year. In the following sections, we describe homelessness based on PIT data. First, overall homelessness is summarized. It should be noted that, although CoCs are required to follow specific HUD standards for the PIT Counts, the methodology and coverage may vary from year to year in some geographic areas due to changing resources. The detailed PIT Count data on CoCs, including specific subpopulations, homeless characteristics, and more are provided in Appendix VI, Tables 1-7.

HUD's focus at the federal level has shifted to evaluating performance on a system level, seeking to identify how each piece of the housing crisis response system contributes to the effectiveness of the system as a whole. Rather than focusing on individual service providers, HUD uses System Performance Measures (SPM) to help the CoC evaluate the continuum's overall effectiveness and efficiency in making homelessness rare, brief, and one-time. The PIT Count is a simple way to measure increases or reductions in a community's overall number of persons experiencing homelessness. By contrast, HUD's SPMs offer a more comprehensive and complete picture of how long people are experiencing homelessness, how many households are entering and exiting throughout the year, and housing outcomes.

These SPMs measure the following:

- 1. Length of time persons remains homeless
- 2. The extent to which persons who exit homelessness to permanent housing destinations return to homelessness within 6, 12, and 24 months
- 3. Number of homeless persons
- 4. Employment and income growth for homeless persons in CoC Program-funded projects
- 5. Number of persons who become homeless for the first time
- 6. Homelessness prevention and housing placement of persons defined by Category 3 of HUD's homeless definition in CoC Program-funded projects
- 7. Successful placement from street outreach and successful placement in or retention of permanent housing.

According to 2020 Fiscal Year Florida SPM data,¹⁷ there were 48,877 persons who experiencing sheltered homelessness in Florida throughout the year, while the 2020 Florida PIT Count snapshot identified 14,815 persons residing in either Emergency Shelter or Transitional Housing¹⁸ on a given night. Housing is the solution to homelessness and is measured by evaluating the number of persons who exit street outreach, temporary housing, and institutional settings to a permanent housing destination. HUD measures exits from homelessness to permanent housing destinations. Below are some of the SPM for the Florida CoCs for 2020.

- In 2020, of the 11,956 who exited Street Outreach services, 1,759 enrollees (14.7%) exited to a permanent housing destination.
- The number of individuals who exited shelter interventions (Emergency Shelter, Transitional Housing, Safe Haven) to permanent housing destinations in 2020 totaled 17,990 individuals (41.9%).
- Of the persons exited from the housing crisis response system to permanent housing, 96.4% of those persons were successful exits to, or retention of, permanent housing.
- In 2020, 36,188 persons (69.2%) who entered the system (Emergency Shelter, Safe Haven, Transitional Housing, and Permanent Housing projects) within the reporting year did not have entries in HMIS within the 24 months prior, an indication of first-time homelessness.

Another component of this measure is to show an increase of those who exit to and retain of permanent housing. HUD continues to improve the ways in which the data is captured and the way it is utilized. HUD introduced Longitudinal System Analysis (LSA) to enhance the CoCs' ability to evaluate data based on mapping households throughout various stages in the crisis response system.

Illustrating the data captured from the LSA, HUD's Stella Performance (or Stella P.) creates visuals that show how households are moving through the crisis response system while also highlighting disparities of persons served. Stella P. also evaluates past and current performance, identifies areas of improvement, and focuses on three primary performance measures being: (1) number of days homeless, (2) exits from the homeless system to permanent destinations, and (3) returns to the homeless system after exits to permanent destinations. ¹⁹ An example of a Stella P. System Performance Overview is provided here.



System Preference Overview

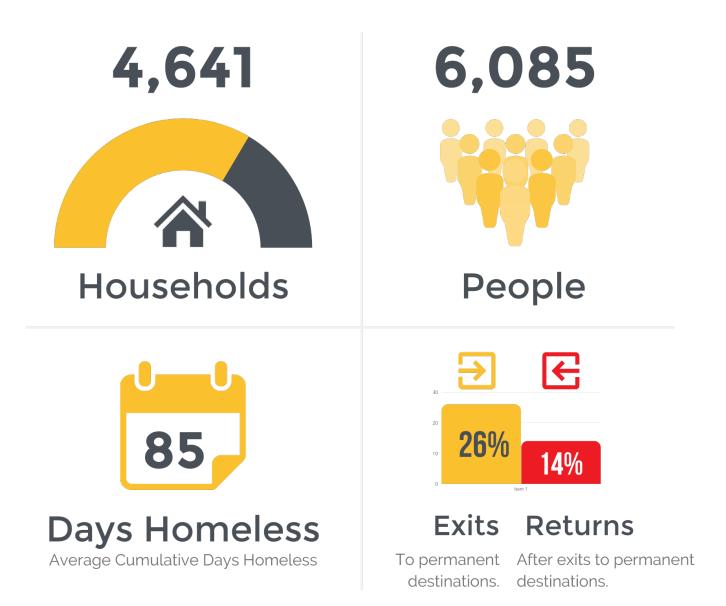


Figure 5: Sample visualization of a Stella P. generated System Performance Overview.

This Stella P. platform offers system mapping, evaluation of trends, population-focused, and allows for demographics of households and limited information about individuals. Using the HMIS data, the system maps project participants in Emergency Shelter, Safe Haven, Transitional Housing, RRH, and PSH projects. Rather than looking at individual project performance, Stella P. provides an overview of the entire system's performance.

The advancement of technology solutions to enable better, real-time data greatly enhances the housing crisis response system's ability to adapt quickly to the changing needs of people experiencing homelessness. System mapping allows communities to pinpoint where gaps exist and people's needs are unmet. The technology comes with a bit of a learning curve, but ultimately it will truly be the path forward to preventing and ending homelessness.

FLORIDA'S RESPONSE TO COVID-19 AND THE IMPACT ON HOUSING AND HOMELESSNESS

COVID-19 directly impacted housing stability and homelessness. The impact on persons experiencing homelessness and housing cost-burdened renters cannot yet be measured. However, resources are being delivered throughout the state to meet the need.

The State Office on Homelessness is administering nearly \$86 million of Emergency Solutions Grant – Coronavirus (ESG-CV) CARES Act funding through CoCs in Florida. In addition, local jurisdictions received almost \$103 million in ESG-CV resources. ESG-CV is being used throughout the state for emergency shelter, rapid rehousing, street outreach, and more; it has significantly increased the capacity of CoCs and partner agencies to directly assist homeless households.

In June 2020, Governor DeSantis awarded a portion of the Coronavirus Relief Funds (CRF) – a subset of funding from the CARES Act – to Florida Housing Finance Corporation (FHFC). This funding was dedicated to the addressing affordable housing needs for impacted households during the pandemic. FHFC immediately targeted three strategies to meet the housing stabilization needs across the state by partnering with many of the state's affordable housing providers in addition to 119 local governments.

FHFC utilized the state's existing infrastructure of local government housing offices to provide rental and mortgage assistance relief to households impacted by the COVID-19 pandemic. One hundred nineteen (119) local governments utilized these CRF dollars to provide rental assistance, utility assistance, and mortgage assistance for households with incomes less than 120 percent of the AMI for their respective communities. Local government housing offices were able to support more than 33,000 households (totaling \$133.5 million); allowing COVID-impacted individuals and families to remain safely and stably housed through 2020.

A second strategy implemented to ensure housing stability for COVID-impacted households provided critical rental assistance to households that were already in affordable housing units, to stave off evictions and prevent many of these households from entering the homelessness system. FHFC found that 373 affordable housing properties identified households in their respective developments who could benefit from this assistance. Together FHFC and these affordable housing providers were able meet the housing stabilization needs of these participating households and provide \$13.3 million of assistance covering rental costs for these households through December 2020.

In addition to providing direct rental and mortgage assistance to COVID-impacted households, FHFC set aside a small portion of the funding to provide ongoing operational supports for Florida's most vulnerable special needs populations. This micro-targeted strategy provided supportive housing developments that serve persons with special needs financial assistance to purchase products and services such as, extra staffing, personal protective equipment; cleaning supplies; shelf-stable groceries to limit community exposure; and technology to address social distancing needs including the ability to coordinate telehealth appointments and allow virtual communication with families and loved ones.

The U.S. Treasury Department provided Florida more than \$1.4 billion of Emergency Rental Assistance Payments (ERAP), of which more than \$871 million is being administered by the Department of Children and Families. The ERAP funds are currently being deployed in Florida communities to provide rent and utilities assistance to households impacted by COVID-19, preventing housing instability and homelessness. The households assisted must have incomes of less than 80 percent of the AMI, with a preference for those below 50 percent of the AMI, targeting the most vulnerable households in Florida.

In addition, ARPA allocated \$5 billion nationally for homelessness assistance through supplemental HOME allocations. The State of Florida has been allocated almost \$72 million while local jurisdictions will be receiving almost \$180 million. These funds can be used for rental assistance and supportive services, to develop affordable rental housing, and to help acquire non-congregate shelter to be converted into permanent affordable housing or used as emergency shelter. These funds will primarily benefit households experiencing homelessness and those with a high risk of housing instability.

ARPA also authorized Emergency Housing Vouchers (EHVs) to be targeted to households experiencing or at risk of homelessness. The EHVs were allocated to 40 Public Housing Agencies in Florida, for a total of 3,168 vouchers. These vouchers provide tenant-based rental assistance to prevent and end homelessness of households. The PHAs will work with CoCs and accept referrals through the CoCs' Coordinated Entry Systems.

For homeowner relief, ARPA established a Homeowner Assistance Fund (HAF) totaling more than \$9.96 billion, with approximately \$676 million allocated to Florida. The purpose of the HAF is to prevent mortgage delinquencies and defaults, foreclosures, loss of utilities, and displacement of homeowners experiencing financial hardship after January 21, 2020. Funds from the HAF may be used for assistance with mortgage payments, homeowner's insurance, utility payments, and certain other purposes.

While these new resources have increased the capacity of the State, local governments, and CoCs to prevent and end homelessness, federal funds are not interchangeable with the Challenge and Staffing grants provided to CoCs by the State of Florida. State funding remains critical to addressing homelessness in Florida, especially in rural areas and for the many programs that cannot be funded by federal funding due to its restrictions. The State funding helps ensure a broad range of programs in Florida, as well as increase the capacity of the CoCs to administer the federal funding and other resources.



APPENDICES

APPENDIX I: 2020 POLICY RECOMMENDATION UPDATES

1. Appropriate 100 percent of Affordable Housing Trust Fund monies for affordable housing and increase the allocation that is dedicated for Persons Experiencing Homelessness and Persons with Special Needs.

In 2020, the Florida legislature passed a budget that appropriated 100 percent of Sadowski State and Local Government Housing Trust Fund monies for affordable housing. However, Governor DeSantis vetoed that appropriation due to uncertainty related to the economic impact of COVID. In the 2021 Legislative Session, the statute was revised to provide recurring funding for affordable housing out of the State and Local Government Housing Trust Fund, however the amount dedicated to affordable housing is now 9.70254% of the Trust Fund with the remaining balance shared between the Resilient Florida Trust Fund and the Water Protection and Sustainability Program Trust Fund.

- 2. Continue strengthening the capacity of Homeless Continuums of Care by appropriating full annual funding for Challenge Grants and Continuum of Care Lead Agency Staffing Grants.

 Challenge Grants and CoC Lead Agency Staffing Grants were fully funded at the recurring levels in State Fiscal Year 2020-2021 and again in State Fiscal Year 2021-2022.
- 3. Embrace best practices and incentivize the use of best practices at the local level. Reward local governments that invest local, state, and federal funding sources toward the development and expansion of permanent housing opportunities for people experiencing homelessness. Florida's CoCs have continued to focus on utilizing best practices, which has played a major role in successfully reducing homelessness in Florida over the last ten years.
- 4. Support increased collaboration between Florida's housing and various service systems of care. There has been increased collaboration across systems of care in Florida. For example, CoCs are working more closely with Managing Entities, Community Based Care lead agencies, and Managed Care organizations.
- 5. Florida's housing crisis response systems must not divert focus from permanent housing solutions for persons experiencing current and chronic homelessness and should continue implementing evidence-based best practices while simultaneously addressing the influx of new households experiencing first-time homelessness and housing insecurity due to the economic impact of COVID-19.

There was a continued focus on permanent housing solutions and evidence-based best practices, even as systems addressed immediate needs and the economic impact of COVID-19. Evidence-based practices implemented include, but are not limited to, Housing First, Rapid Re-housing, Permanent Supportive Housing, and Diversion.

APPENDIX II: SPECIAL FEATURES FROM LOCAL COMMUNITIES

FLORIDA HOUSING FINANCE CORPORATION EXPANDING HOUSING OPPORTUNITIES FOR HOMELESS FAMILIES

In 2018, Florida Housing Finance Corporation (FHFC) launched a pilot program in Santa Rosa County aimed at stabilizing families experiencing homelessness with school-aged children. Using federal HOME Tenant Based Rental Assistance (TBRA) funding, FHFC sought to create and foster a holistic approach to helping these families facilitate housing stability, continuity in the children's educations, and strive toward greater self-sufficiency for the family. Key community partners identified include the homeless education liaison from local School System, staff with the local Homeless Continuum of Care lead agency, the Public Housing Authority, and a local case management entity.

The goal of the program was to learn whether the benefits of these resources would allow for greater assistance of homeless families in rural and smaller counties compared to traditional FHFC practices in larger urban areas. The Santa Rosa County pilot program immediately found that once the families had established housing and assistance specific to their needs, the majority of families' incomes stabilized or increased. Additionally, when evaluating school-based outcomes, these same families saw increases in academic performance and decreases in chronic absenteeism.

In January 2020, the Housing Stability for Homeless Schoolchildren Initiative added a second pilot in Hernando County that also included the county's Health and Human Services Department coordinating case management services for eligible households.

By late 2020 FHFC had funded additional expansions of this Initiative into Alachua, Bay, and Charlotte counties and to further assist families identified by local school districts based on children who are already participating in the Homeless Education Programs. Each of these communities received \$500,000 to provide limited rental assistance for the participating families. Local partners provided wrap-around supports for participating families to ensure housing stability and do what is possible to prevent future episodes of homelessness. In the spring of 2021, FHFC offered a second expansion of this Initiative and will welcome additional counties that will begin supporting eligible families in the fall of 2021.

To date, at least three participating households who entered the pilot programs without a safe, stable place to sleep at night have achieved their dream of purchasing a house and guaranteeing their children have a place they can call "home."

REDUCING YOUTH HOMELESSNESS IN PALM BEACH COUNTY

In 2019, Palm Beach County received federal funding to develop and implement a coordinated community response to youth and young adult homelessness. The Youth Homeless Demonstration Program (YHDP) aims to address the needs of youth aged 18 -24 experiencing homelessness in the areas of stable housing, education and employment, permanent community connections, and overall well-being. Additionally, the program brings youth into the planning and oversight of the program through a Youth Advisory Board.

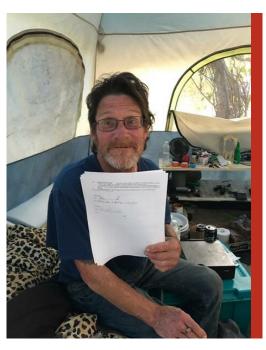
Supports that may be provided to eligible youth include housing assistance (identifying and obtaining housing, providing monetary assistance with rent, utilities, deposits, etc.). In addition, youth may receive assistance with skills in home and budget management and connections to education, employment, mental health, and behavioral health supports; early care and education services for pregnant and parenting youth and their children; and more.

The Palm Beach County YHDP project has multiple programs, including diversion, transitional housing, rapid rehousing, and permanent supportive housing. The particular program a young person enters depends on the youth's preferences and needs. Since launching in October 2020, the project has served a total of 79 unaccompanied homeless youth, the majority served through diversion and rapid rehousing.

EFFECTIVELY ENDING CHRONIC HOMELESSNESS IN CHARLOTTE COUNTY

Charlotte County met the federal benchmarks required to effectively end chronic homelessness. This means that long-lasting and recurring homelessness was essentially eliminated in the community. While new instances of homelessness will never be completely erased, according to the United States Interagency Council on Homelessness (USICH), an end to homelessness means that a community will have a comprehensive response in place that ensures homelessness is a rare, brief, and one-time experience. Specifically, a small community like Charlotte County will have met the criteria for ending chronic homelessness on the initial date in which the total number of individuals experiencing chronic homelessness is three or less.

Since 2017, the local homeless services team, known as One Charlotte, has re-tooled their strategy and response system to meet the unique needs of persons experiencing chronic homelessness. In December of 2020, the community hit the threshold required for declaring an end to chronic homelessness. Between April 2017 and December 2020, the One Charlotte Team housed more than 150 chronically homeless persons and, of those housed, more than 85 percent have remained permanently housed.



This is Kevin holding his signed lease of 12/31/20. He was the last unhoused chronically homeless person in Charlotte County Florida.

Charlotte County has achieved this success because they are committed to providing health, housing, and financial stability for the community's most vulnerable through an Integrated Care Model. This model ensures clients served have improved access to health care, communication and coordination of care, health status, housing options and financial sustainability through access to benefits and employment.

Partners in this effort included the Virginia B. Andes Volunteer Community Clinic, Charlotte County Homeless Coalition, Charlotte Behavioral Health Care, Gulf Coast Partnership, Jesus Loves You Street Outreach, Jewish Family and Children's Services, Saint Vincent de Paul CARES, Charlotte County Human and Veteran's Services, Punta Gorda Police Department, and Charlotte County Sheriff's Office. These partners work collaboratively to ensure there are resources, optimal care, and treatment of the community's most vulnerable. Critical funding was provided by the State of Florida Department of Children and Families Office on Homelessness, United Way of Charlotte County, Gulf Coast Community Foundation, Truist Bank, and the Charlotte Community Foundation.

SARASOTA'S HOMELESS OUTREACH TEAM

Since 2016, the City of Sarasota's Homeless Outreach Team (HOT) with the assistance of partners has placed 522 individuals into permanent housing through the "housing first" strategy approved and adopted by the City Commission. The HOT teams continue to focus on a client-focused case management approach to connecting chronically homeless individuals with programs and social services. The HOT program has become a national model for cities seeking jail diversion programs.

The City has an agreement with The Salvation Army with 20 beds reserved for chronic homeless individuals engaging with case management who need shelter, as well as 5 bridge beds for those enrolled in Rapid Rehousing projects and on a path to permanent housing. The City has successfully implemented many of the strategies to address homelessness that are consistent with the U.S. Interagency Council on Homelessness (USICH) national plan and has been working to implement all parts of the "Creating an Effective Homeless Crisis Response System" by the Florida Housing Coalition that was adopted by both the City and County Commissions in 2017.

Over the past year, those entering a HOT dedicated shelter bed totaled 112 individuals; 40 of them entered permanent housing; an additional 56 had another positive outcome (substance abuse treatment, living with family, temporary housing, etc.); and of those exiting to housing, 60% of them remain housed one year later. This is in comparison to a 3% housing rate prior to the implementation of HOT Teams.

HOT combines outreach with dedicated shelter beds, Rapid Rehousing projects and Permanent Supportive Hosing placements to produce effective solutions to homelessness for chronic and long-term homeless individuals. Partners and/or funders in these activities include the Suncoast Partnership to End Homelessness, the State of Florida Department of Children and Families, Salvation Army of Sarasota, philanthropic organizations, and HUD-funded provider agencies.

WORKING TOWARD FUNCTIONAL ZERO FOR VETERAN HOMELESSNESS IN ST. JOHNS COUNTY

St. Johns County is a community passionate to end homelessness and the CoC has worked in collaboration with Built for Zero to reach functional zero for Veteran homelessness by March 31, 2021. In the 2020 Point in Time Count, there were 26 possible Veterans experiencing homelessness. Of the 26 Veterans identified, 8 were identified as chronically homeless, meaning the Veteran has a disabling condition and has been homeless for a year or longer. Working with this fragile population, St. Johns realized it was vital to have an organized and effective process in place to meet the Veterans where they were and engage them with immediate and wrap around care.

The coordinated entry process ensures that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed for, referred, and connected to housing and assistance based on their strengths and needs. The Housing Navigator and Outreach Case Managers meet biweekly to review assessments, hold case conferences, assign supports, and provide referrals for housing.

Having the coordination and management of a crisis response system in place, Flagler Health+ Care Connect has screened 365 housing assessments during 2020, with 23 identified as Veterans. As a result of successful coordination and community collaboration, since March 2020 the St. Johns County CoC housed 16 veterans. There are now only nine veterans still experiencing homelessness in St. John's County. Funding for this effort was provided by the State of Florida Department of Children and Families Office on Homelessness, HUD, the Veterans Administration, and Flagler Health+.

ADDRESSING COVID IN MIAMI-DADE

A year ago, the Miami-Dade County Homeless Trust, in partnership with the State of Florida, began rapidly developing and implementing an emergency infrastructure to protect persons experiencing homelessness from COVID-19.



The Miami-Dade Homeless Trust has:

- Administered more than 15,226 COVID-19 tests to sheltered and unsheltered households experiencing homelessness. The positivity rate is at 1.5%, significantly below the countywide positivity rate (5.9%). Test kits and processing were provided in partnership with the Florida Department of Health in Miami-Dade and the Florida Division of Emergency Management.
- Stood up five quarantine and isolation sites for COVID-19 positive and suspected households experiencing homelessness, including a single site dedicated to seniors 65+ experiencing homelessness. More than 3,446 placements have been made into quarantine and isolation sites to date.
- Partnered with Florida Department of Health in Miami-Dade and Jackson Health Systems to begin vaccinating clients and staff 65 and older for COVID-19, including unsheltered persons. More than 1,300 people have been provided appointments to date.
- Prioritized people at highest risk for severe illness for permanent housing using Emergency Solutions Grant provided through the Florida Department of Children and Families and other

permanent housing resources provided through federal, state and local funding. More than 553 extremely low-income homeless households have been referred to housing to date.

- Widely marketed homeless prevention resources at libraires, public transit sites, churches, food distribution sites and other nonprofit community-based organizations. Homeless eviction prevention postcards continue to be mailed to every residential household in Miami-Dade County facing eviction. Homeless prevention resources continued to be targeted to those most at risk of entering shelters and the street.
- Housing prioritization policies for both Homeless Prevention and Rapid Rehousing resources were developed with an emphasis on ensuring equity and eliminating racial disparities.

In addition to Miami-Dade County Homeless Trust, partners in these efforts included the State of Florida Department of Children and Families Office on Homelessness, the Florida Department of Health, and the Florida Division of Emergency Management. Funding critical to the success was provided by the Miami-Dade Homeless Trust, Emergency Solutions Grants (State and local), Jackson Health Systems, and the Miami-Dade Office of Emergency Management.





EVICTION PREVENTION IN PINELLAS COUNTY

The Pinellas Eviction Diversion Program is a newly launched initiative of the Community Law Program designed to assist qualified tenants and landlords who have been financially affected by the COVID-19 pandemic by providing mediation, access to rental assistance, and guidance on navigating housing alternatives. For households that are not able to be mediated, the Homeless Leadership Alliance of Pinellas (CoC Lead Agency) provides housing navigation and financial assistance to get the household rehoused in a new permanent housing unit quickly. The Homeless Leadership Alliance of Pinellas received 62 referrals from legal aid entities been November 2020 and February 2021, and one-third of those households have been successfully rehoused as of the end of February. CARES Act funding provides financial support for the program.

DEPLOYING CARES ACT FUNDING IN LEE COUNTY

The Lee County Continuum of Care took a comprehensive look at gaps within its homelessness response system in 2020, and made a focused effort to address those gaps with the influx of CARES related funding.

The CoC began by diversifying its portfolio of Rapid Re-Housing service providers by awarding funds to four providers that were not previously funded by the Lee County CoC. This new opportunity not only engaged new providers but also provided an opportunity for a non-profit from a surrounding county to expand their services into Lee County.

The CoC also identified the need for increased capacity in Street Outreach and Coordinated Entry. Community Development Block Grant and Emergency Solutions Grant funds were used to support creation and implementation of outreach teams in partnership with six local law enforcement organizations, and Centerstone, a local behavioral health provider. These teams were deemed the Housing, Outreach and Treatment (HOT) teams to signify their intent within the CoC. This partnership expanded outreach capacity throughout the CoC's geographic area.

To improve services available after regular business hours, the CoC also contracted with Center for Progress and Excellence, the local operator of the Mobile Crisis Unit, to offer 24/7/365 access to the CoC's Coordinated Entry process. The expansion of outreach also provided for different opportunities to engage those experiencing homelessness. As a result of the expansion, a Severe Weather Outreach Plan was created to assist those interested in shelter gain access due to colder temperatures or more inclement weather conditions (e.g., tropical storm warning).

As interest grew in our expanded services, there was a demand for streamlining data and improving universal templates for outreach interviews. Two different surveys were created in ArcGIS Survey123. One survey allowed for outreach teams throughout Lee County to collect data during Severe Weather and targeted outreach events. Another survey allowed the department to engage the community at large in creating a snapshot of what homelessness looks like in Lee County in a 24-hour period. The creation of Homeless Impact 24 allows for a 24-hour period of time, each month, to collect data throughout Lee County by observations and interviews.

Beginning December 1, 2020, the CoC launched a housing surge campaign to house 100 households in 100 days. The campaign ended March 11, 2021, and the CoC surpassed its goal by helping 124 households move into permanent housing in 100 days. The housing initiative has also served to increase emergency shelter availability, as households are moving out and shelter and into housing at a faster pace. An online dashboard was created to share the results with the community and track housing placements by each agency.

CHANGING HOMELESSNESS:

GOOD ENDINGS AND BRIEF SUMMARIES COMING FROM OUR TEMPORARY BRIDGE SHELTER:

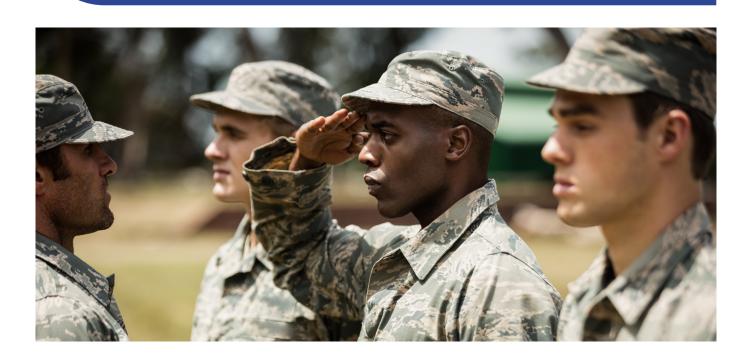
#5287 - Client has been in the system since 2014. In LINK program last year. Found transitional housing that way. Was in Ability Housing before that. Was eating dinner at Salvation Army during the PIT count and I talked with him then. I talked with him Friday evening and he couldn't stop smiling because not only is he going to Liberty Center this week, he heard from the Housing Authority that his 1.5 year-old application for public housing has been approved and he is receiving paperwork at the Urban Rest Stop to get a voucher. Now he has a plan.

#125723 - Client has been in foster care since 14 and is now 20. About to lose his extended foster care benefit. Case manager had lost track of him in pandemic. Shelter staff contacted Family Support Services and they picked him up, placed him in housing with behavioral supports. He signed paperwork for the extended benefit and got off the street.

#123708 - With help of bridge shelter staff, this 61 year-old veteran got re-connected with his SSVF case manager, and admitted into Sulzbacher's vet dorm on 3/24.

#83404 - Client moved into a rooming house. He was an original tent city resident. He also got a job while living at the bridge shelter through connections to staffing agencies.

#126856 - Low-functioning client got meds at Sulzbacher and housed within a program that will provide the client with additional case management support as well as counseling services.



SPECIAL FEATURES FROM BREVARD HOMELESS COALITION'S PROVIDERS

From Brevard Homeless Coalition's Provider Catholic Charities:

The client, a single became blind several years ago as he was finishing course work in IT. Due to his medical condition, he had to stop working. Relying on only SSD, he was paying his rent and basic needs, with some help from family. Then in late 2019, the mother of his children falsified documents (his signature was forged) stating he would pay extra child support from his Social Security disability. He has been battling the issue with the help of a lawyer. Because of the pandemic, all courts shut down before he had an opportunity to resolve his case. After they reopened, there has been a backlog of cases. He is still waiting for his court date to resolve the issue. During the same time period, he has had two eye surgeries, requiring co-pays. His rent is \$725 per month, his SSD after the child support is \$388. The client had been paying what he could after paying for some necessities, but the total, in the end, came to 9 months in arrears. Using a combination of ESG COVID funds and Catholic Charities USA COVID funds, the client's back rent was made current. It was determined that the client, should his SSD be reinstated to a higher amount would still have issues paying the rent. He had exhausted what financial assistance he could get from family members. The client is very frugal and has no expenses besides those needed for food, housing, and medical. The case manager was able to obtain a Sec. 8 voucher for the client through a special program of the local housing authority. The client is now stably housed and is no longer undergoing anxiety for fear of becoming homeless in the streets as a blind man.

From Brevard Homeless Coalition's Provider Housing for Homeless:

A family of three (grandmother, son, and granddaughter) was referred to our agency after experiencing a trauma that led them to homelessness. The family was residing in a home with the son's girlfriend and her nephew. The nephew (age 16) sexually assaulted the granddaughter (age 5). The grandmother, son, and granddaughter left the home after the trauma occurred with nowhere to go. The grandmother is disabled and has a compromised immune system, COPD, Lupus, etc. She receives SSDI income and the son was working a full time job. The son ended up losing his job due to the time he had to take off work to take his daughter to counseling as well as other factors relating to the trauma. With Emergency Shelter CV funding, our agency was able to place this family in a hotel while searching for a permanent housing solution. During the family's emergency shelter, we were able to secure CV Rapid Rehousing funds. The family has been approved for Permanent Supportive Housing and will sign their lease at the end of this week. Without the availability of these CV funds, this family would likely still be living in their van while coping with their granddaughter's horrendous trauma and putting the grandmother at great risk for catching the virus.

SPECIAL FEATURES OPENING DOORS OF NORTHWEST FLORIDA

An expectant, single female parent with one minor child presented to Opening Doors Northwest Florida as a referral from the Department of Children and Families. The beneficiary was living out of her vehicle when she engaged with an Opening Doors Coordinated Entry Specialist. At the application date, the mother had no work and was seeking rental deposit assistance and the first month's rent. The household became homeless as the result of marriage dissolution and her young child was living with a grandparent due to the beneficiary's homelessness. Due to her vulnerable state (pregnancy) and in response to mitigating the spread and exposure to COVID-19, Opening Doors quickly placed the young mother in an emergency shelter using a homeless motel voucher for 1 week. Within the week, the beneficiary had obtained a stable job. Further, with the aid of housing navigators at Opening Doors, the beneficiary was able to identify affordable and habitable housing in Escambia County and move the family into their new home.

Services Provided: 8 nights of emergency hotel stay. Rental Deposit Assistance, First Month's Rent, and Last Month's Rent.

We are assisting the beneficiary with moving furniture donated by a local school teacher into the home. We intend to continue supporting this family through housing stability case management and occasional financial assistance, if necessary -- as long as the family is still eligible and willing to participate.

SPECIAL FEATURES UNITED WAY OF SUWANNEE VALLEY SUCCESS STORIES:

1. The client just left a very abusive situation. She is mentally unstable. When the client entered the program she was staying in her vehicle outside of her ex-in-law's property. The client was scared her ex-husband would show up. The client had several animals including two dogs, a donkey, several chickens, and two horses. The dogs stayed with the client in her vehicle and the rest of the animals were on the property until she could find a place. Her ex-husband already threatened to take the animals. The client makes extra money from the animals, such as selling the chicken eggs. This supplements her SSD.

SPECIAL FEATURES UNITED WAY OF SUWANNEE VALLEY SUCCESS STORIES:

On several occasions we discussed her giving up the animals, but they are the client's support system. She would go hysterical and said without them she will definitely have a nervous breakdown. The client seeks counseling at a local clinic. We worked with the client to be sure she went to her appointments.

After months of house searching, the client was becoming more depressed. Anything available was either too expensive or would not let her have the animals. The landlords were not even letting her keep her dogs, even though they were service dogs, because they were a killer breed - German Shepherds. The client came in contact with a couple who has three acres of land with a "Tiny" house on it. They agreed to rent the house for \$500 per month which included all utilities. The landlord allowed all of the animals to stay on the property. The client loves her new home. We purchased household items for the client. The property is out in the country which the client loves. Due to her mental issues the client cannot drive in town because she has anxiety attacks when she is around too many people. The client has a ticket to work. She would love to work on someone's farm. The client stated she prefers to be around animals over people. Even though the client drives, she never had a valid license. We gave the client the highway patrol book to study. Hopefully she will get her license next month.

2. In early October, a single parent of three children applied for our financial assistance program due to a house fire. He had no homeowners insurance and no savings. His home was destroyed and most of his belongings were not salvable. Our client had limited family assistance as they had their own troubles. Our client was in between jobs and just went through a divorce. We were able to place our client into a hotel for approximately 2 weeks. Luckily, within that period our client was able to find an apartment big enough for his children and himself. We wanted to get some normalcy back into the children's life before the holidays so we got them into their home. We were able to give him resources to get assistance with furniture, bedding and household supplies. All his deposits were paid and was given resources to get food in his home.

Soon after he settled into his place, our client got a call after several interviews he was offered a full time position. Finally, things were looking up for him and his family. Our client was able to start making partial payments toward his rent and paying all of his electric and water. Now, our client is making it completely sustainable, able to follow his budget and feels good about doing it all on his own. He has made several statements that he has been grateful for our assistance throughout the process.

SPECIAL FEATURES

CORNERSTONE RESOURCE ALLIANCE HAS HAD MANY SUCCESS STORIES, BUT A FEW THAT STAND OUT ARE:

We were able to assist a family who had lost work in the service and construction industry. They have three children, and even though they had resumed work under new regulations, they were really struggling. We were able to pay their back rent due and give them a fresh start to be able to stay in their housing.

We were able to assist a local artisan and worker who had lost the ability to sell her art at Mallory Square and also lost her other job at a local retail store. We were able to assist her with rent, and due to the relief of not having that huge bill to face, she was able to move forward in to a new job! She also has since been able to resume making and selling her artwork:)

We were able to assist a single mother with two children. She was employed with a popular water sports agency as a captain for their sandbar and sunset sails. She wasn't able to work due to COVID shutting down the tours. She fell behind more than she was going to be able to catch up, and was fearful of being homeless with her two young children. We were able to pay her back rent which enabled her to stay in her housing with her kids.



SPECIAL FEATURES

VOLUSIA / FLAGLER COUNTY COALITION FOR THE HOMELESS FLAGLER CARES:

We were all hoping that 2021 would lead to more stability for families as they transitioned through COVID. Many families have been able to get back to their regular lives and activities as COVID's grip seemed to be letting go, if only just a bit. However, for some families dealing with COVID was just one more complication in their long health journey.

Ms. Stream was laid off in 2020 and the business eventually closed. During this time, she was diagnosed with COVID. She used her federal stimulus payments, unemployment, and food stamps to support her and her children. She was able to locate a new job and was on her way to making 2021 a year that she could focus on other needs for her and her children. Shortly after starting her new job, she was diagnosed with cancer and had to miss many days of work for treatments. During this time, she was not eligible for benefits from her new employer and was not eligible for unemployment. This is when she fell behind on rent.

Ms. Stream was still able to make partial payments for her rent but was not able to get the past 3 months paid completely. Ms. Stream had filed the CDC Eviction Moratorium papers and did not fear being evicted as the property manager was working with her. What she failed to realize is that her lease was going to expire on April 1 and the property management company was not going to renew her lease if she was not current.

When Ms. Stream applied for Flagler Care's ESG Homeless Prevention-COVID program she qualified under the program requirements. With confirmation that if we were able to pay her past-due rent, she was offered a new 1-year lease. By helping Ms. Stream negotiate with the property manager, we were able to pay her past-due rent and the property manager provided a new 1-year lease for her family.

The program got her long-term housing stability and Flagler Cares will also be able to pay one more month of rent for Ms. Stream as she continues to undergo additional cancer treatments and focus on wellness in this new year.

SPECIAL FEATURES

HALIFAX URBAN MINISTRIES -HOPE PLACE ESG SUCCESS STORY:

KW arrived at Hope Place in February of 2020 as a single mother with 4 children. She became homeless when she could not afford her rent after a relationship break-up. Shortly after arrival, KW obtained employment, and at the end of her first day of employment was found overdosing in the Hope Place parking lot. EVAC was called and KW was taken to the hospital. Her children were placed with a grandparent.

KW returned two days later and was immediately staffed with the Hope Place treatment team. Instead of an immediate discharge, she was allowed to remain at the emergency shelter because of her sincerity regarding her desire to remain clean. The team called a local doctor that is well known for helping pregnant or post-partum women get sober by placing them on a maintenance medication. KW was accepted by the doctor and remained at Hope Place 6+ months before moving to permanent housing with the assistance of ESG funding.

KW and her children reside in Port Orange. Her oldest son works part time and goes to school. The other 3 children are attending public school and doing well. KW obtained employment at Publix shortly after being housed. Assistance with rent and utilities are still being provided by Halifax Urban Ministries because she is not full time.

As with all of the families, KW receives case management services after being placed into permanent housing. The support services can last up to 12 months if needed. KW was assisted by Hope Place with gifts for Christmas in 2020. In addition to clothes and shoes that her children asked for, they also received a washer and dryer provided by a local Bank of America branch. The washer and dryer was on the wish list of KW's 12-year-old son. That was the only gift he wanted. His wish list stated, "I want a washer and dryer so that my mom doesn't have to take us to a laundry mat every week to clean our clothes."

KW has been in permanent housing for six months, all of her children are doing well in school. Supportive services are provided at least monthly. She is currently looking for a second job as her hours have not increased at Publix. There has been no use of drugs since her overdose. The children are always clean and happy at home visits. She continues to aspire to independent housing for herself and her children without further financial assistance.

SPECIAL FEATURES HOMELESSNESS AND HOUSING ALLIANCE (HHA) SUCCESS STORIES:

P.B., a 75 year old woman who had never been homeless before was referred by the police department and DCF APS. She had been staying with her son that did extensive damage to the unit and her name was on the lease. Her son was a threat to her. We had to pay for a motel for almost two months. No shelter was available. HHA's Housing Navigator found a landlord willing to give her a chance and found a furnished apartment for her to move into. She does receive SSI/SSDI and after paying the initial deposit, first month's rent and utilities, P.B. was able to pay a portion of her second and third month rent.

Hired a street outreach worker that accompanies Fort Walton Beach Police Department to corespond to most vulnerable and provide phones, vaccine/testing information, transportation assistance, etc.

J.S. family of five. One child is disabled. Family was unable to locate unit willing to accept them because they had an eviction. HHA used ESG-CV landlord incentives to move them into an affordable unit. All children are now back in school regularly and both parents are employed.

H.R. family of five. They had never been late on their rent until they lost hours due to Covid-19. Met landlord at the landlord Coffee and Connect and the landlord made the referral. We were able to connect them with food resources and clothes and assist with back rent. Husband has returned to work and wife will be returning after a medical procedure. Continuing follow ups each month.

M.B. single, lost job due to Covid but returning part time this month. We were able to help her catch up before the amount became extensive. Landlord is willing to work with her and HHA to ensure she remains stably housed. Continuing follow ups.



SPECIAL FEATURES FLORIDA KEYS OUTREACH COALITION, NEECE CENTER MEN'S PROGRAM:

Detric came into the program with literally the clothes he was wearing and a long history of drug abuse with the typical problems that comes with it. Family was finished with him, lost everything, jail, probation and nowhere to go but back to jail because he didn't have an address. When he entered the program we began to work together. He needed help with navigating the legal problems so he had an address now, we attended meetings with his probation and assisted him with a plan. He needed a job so we helped him create a resume, purchased clothes though funding and gave him some leads but at the same time allowing him to put the work in himself and not just handing him everything. Now Detric works at Home Depot, received his chip for being sober for 120 days, stands in front of a judge who is congratulating him on his progress and if he goes more than a couple days without calling his mom she is calling us to fuss at him.

SPECIAL FEATURES HUNGER AND HOMELESS COALITION OF COLLIER COUNTY:

We have a story of a single mother of three; nineteen, fourteen, and six years old. We will call her Beth to protect her identity, who lost her children through her addiction and gained housing and reunification via ESG CV.

Beth suffered from drug and alcohol addiction. Through her addiction she lost her children to DCF CPS; she remained in addiction for several years after losing her children but never gave up on getting them back. She was introduced to our community's recovery program St Matthews House. Lindsey entered into the shelter portion of the program waiting for her opportunity to join the recovery phase and was granted that after several months in shelter.

She spent the next five months in the recovery transition portion of the program. She eventually graduated into the 2 year transitional supportive housing component and began working with DCF to regain her children. She complied with every step and request made her, she continued to grow stronger in her recovery along the way. At the end of her 2 year program Beth met with the Outreach Coordinator from the Hunger & Homeless Coalition of Collier County (HHC) who himself had addiction recovery as a "lived experience" and together they put a plan in place for permanent housing.

Beth worked the plan diligently by getting all of the paperwork together, continuing her focus on her new job, and partnering with DCF CPS; along came the award to HHC for ESG CV RR funds and Beth and children found a home and ESG CV paid her first/last/and security. Today Beth and family are thriving and have sent a note to HHC thanking us for partnering with her to get a housing plan in place where she could take her children home.

APPENDIX III: PREVENTING, REDUCING, AND ENDING HOMELESSNESS

MAKING HOMELESSNESS RARE, BRIEF, AND ONE-TIME

The State of Florida's Council on Homelessness promotes the implementation of nationally recognized best practices that have been proven effective in making homelessness rare, brief, and one-time. CoCs throughout Florida actively pursue training for implementation and use of best practices, such as Housing First, Rapid Re-Housing (RRH), and Permanent Supportive Housing (PSH). The systematic shift to person-centered, housing-focused approaches has resulted in the significant reduction of people experiencing homelessness in Florida. It has been proven that reduction is homelessness is directly connected to housing.

Ensuring that all individuals and families who are experiencing a housing crisis are evaluated for housing and services in a uniform process, the HUD-mandated Coordinated Entry System (CES) is required for all CoCs. Rather than the first come, first served process that simply addresses the easiest to serve consumers; CoCs implemented a coordinated effort to increase access for persons who do not always seek out services. Through implementation of a coordinated process to prioritize and streamline assessments, all people experiencing homelessness are triaged using standardized assessment tools and are prioritized for all services based on severity of service need. Although it would be easier to address needs of lower need people who are seeking out services, it has been proven that addressing homelessness in the first come, first served method leaves out those who are most in need and lacking supports to resolve their homelessness.

One of the most important best practices that has proven effective is the Housing First model. Implementing Housing First means a full shift in philosophy where providers are changing their processes, moving away from requiring people to earn a roof over their head to adopting practices that reflect the idea that housing is the foundation of recovery. As the United States Interagency Council on Homelessness detailed in their strategic plan, "The only true end to homelessness is a safe and stable place to call home." From this, it is understood that people, while experiencing a housing crisis, may not have the capacity to address issues like trauma, substance use, and unemployment.

Helping a person move into stable, permanent housing as quickly as possible – and then offering supportive services tailored to the person's individualized needs – is most effective in ending homelessness. These services can include assisting with housing retention, life skill building, employment or benefits acquisition, or supports linked to behavioral health needs. Tailored supports take into consideration that not everyone requires the same level of services, services for the same length of time, or same type of services. This method, termed "progressive engagement," ensures that people are not under- or over-served.

Street outreach is a critical component of identifying and engaging people experiencing unsheltered and/ or chronic homelessness. Often sleeping in places not meant for human habitation and in unsheltered locations, people experiencing chronic homelessness are frequently disengaged and can be less likely to engage in services. Prior to the system pivoting to identify and house the most acute, these individuals and families would be left without help. Now, however, these households are prioritized for housing because they have the greatest needs. Once housed, individuals and families receive voluntary supportive services that focus on helping them obtain and maintain stable housing.

Permanent housing interventions result in the likely success of permanently ending an episode of homelessness. There are two permanent housing interventions implemented within housing crisis response systems, Permanent Supportive Housing (PSH) and Rapid Re-Housing (RRH).

Reserved for households with the most intensive service needs and long-term homeless histories, Permanent Supportive Housing (PSH) offers a long-term housing subsidy in conjunction with individualized, voluntary supportive services. PSH is an evidence-based practice with extensive data documenting best practices and fostering the increased independence of persons living in PSH. This intervention can be project-based or tenant-based and offers a deep subsidy allowing the household to contribute no more than 30 percent of their income for rent. As persons stabilize, the level of services required can diminish.

Rapid Re-Housing (RRH) is a shorter term permanent housing intervention that can be used to serve households experiencing homelessness. While RRH can quickly resolve homelessness for households with moderate and serious needs, it is sometimes used to target households who just need a "light touch" of financial assistance and support services. While RRH does offer supportive services, it is focused on housing stabilization as opposed to a more clinical approach. The RRH case manager should be linking the program participants to longer-term supports in the community such as employment opportunities, education, and other types of community supports that improve the potential of housing retention once the program ends. The financial assistance is re-evaluated as the program progresses to increase the household's contribution to rent and other household expenses while the program phases out. The premise of this program is that, through progressive engagement strategies of offering financial assistance and services tailored to the household's need, the household will be able to maintain the lease with the landlord once the household successfully exits from RRH assistance.

IMPORTANCE OF AFFORDABLE HOUSING FOR EXTREMELY LOW-INCOME AND SPECIAL NEEDS HOUSEHOLDS

There is a severe housing shortage for ELI renters, leaving only 25 affordable and available units per every 100 ELI renter households. This deficit of housing options that are affordable to persons within the ELI range directly impacts the 28 percent of adults in Florida living with a disability. In addition, 33 percent of renters at 30 percent of the AMI or less include older adults and those with disabilities who are unemployed or out of the labor force, once again proving there is a significant need for housing options that accommodate limited, fixed income. Without the resources available to assist households obtain housing that is affordable and accommodates their special needs, homelessness would increase.

Older adult households, many of whom rely on a fixed amount of monthly income, are a vulnerable population throughout Florida and benefit from a broad service array to meet their needs and help them maintain independent, stable housing. Often, older adults overlap into other service systems, requiring intensive care coordination among providers. In 2020, the Florida Department of Elder Affairs (DOEA) identified 51 percent of persons registered for services with DOEA, or 81,825 consumers, ²³ were living with income below poverty level, which makes housing options that are affordable even more critical.

While it takes housing subsidies from all types of funding sources to make housing affordable for various income levels, one of the most prominent is the HUD Housing Choice Vouchers (HCV) program administered through Public Housing Authorities (PHAs). HCVs are intended to address housing disparities among persons with disabilities, older adults, and very low-income households, ensuring consumer choice of where the housing participant wants to live and promising decent, safe, and affordable housing in the private market. Through the use of scattered-site, market rate rentals, the federally funded programs can help deconcentrate poverty and encourage inclusion for vulnerable populations.

PHAs across Florida also administer special purpose vouchers that include Family Unification Program (FUP), Mainstream Vouchers, Non-Elderly Disabled (NED) Vouchers, and HUD Veterans Affairs Supportive

Housing (HUD-VASH). Despite these varied resources, housing subsidies are challenging to obtain due to long waitlists and hard-to-find housing units that are within the payment standards allowed by the PHA. As seen by the long wait lists for subsidized housing, these programs only satisfy a small portion of those who need for housing supports that allow people to live independently and within the community of their choosing.

HUD Program	Total Vouchers in FL	# of PHAs	Targeted Population
Family Unification Program (FUP)	1,746	23	Families whose 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. Transition-age youth (18 to 24 years old) who have left foster care, or will leave foster care within 90 days, and is homeless or is at risk of becoming homeless at age 16 or older.
Housing Choice Vouchers (HCV)	115,536	97	Income eligible households comprised of older persons, persons who have a disability, and family households with or without dependents.
HUD-VASH (Veterans Affairs Supportive Housing)	7,869	45	Veterans experiencing chronic homelessness.
Mainstream	3,981	32	Persons under 62 with disabilities who are transitioning out of institutional or other segregated settings, at serious risk of institutionalization, currently experiencing homelessness, previously experienced homelessness and currently a client in a PSH or RRH, or those at risk of experiencing homelessness.
Non-Elderly Disabled (NED)	1,835	15	Persons with disabilities who are not over 62.
Project- Based Vouchers	7,389	26	Vouchers for eligible households attached to specific housing projects.

Figure 6: US Department of Housing and Urban Development. HUD Housing Choice Voucher Data Dashboard. https://www.hud.gov/program_offices/public_indian_housing/programs/hcv/dashboard

There are 345,482 renter households in Florida whose income is 30 percent of the AMI or less.²⁴ Despite the 115,536 Housing Choice Vouchers, and the 284,900 assisted units,²⁵ there remains a significant deficit of assisted housing units that are affordable and available to meet the current need of households whose income is 30 percent of the AMI or less. With a lack of housing available and affordable to a spectrum of income ranges, there is increased pressure on the market, which causes limited availability and rents to increase. The scarcity of deeply subsidized housing units and housing vouchers cannot be overemphasized.

APPENDIX IV: NEEDS IN FLORIDA: EMPLOYMENT AND INCOME OPPORTUNITIES, AND ACCESS TO HEALTH CARE

THE NEED FOR EMPLOYMENT AND STRONGER INCOME OPPORTUNITIES

Over the past several years, the number of people experiencing an episode of homelessness in Florida has declined steadily and, in some years, significantly. This reduction is due, in large part, to an improved economy and job growth in Florida. Income plays an essential role in a household's ability to obtain and maintain secure housing. Despite a growing economy, not everyone benefits, and low wage workers are disproportionately impacted by housing crises.

The National Low Income Housing Coalition's Out of Reach 2020 report states that it takes \$41,077 annually to afford a one-bedroom apartment in Florida, while the estimated renter median household income is \$39,740 annually and an ELI household income is only \$20,601.²⁶ Of the Top Ten Occupations throughout Florida,²⁷ the majority overlap with renter households at or below 60 percent of the AMI. This data tells us that of the most common jobs, none of them pay enough to afford a rental unit in Florida's current rental market. As an example, 73 percent of the 60 percent of the AMI or less renter households are employed but earn low wages in the service industry.²⁸

There are 650,324 housing cost-burdened households headed by persons ages 65 or older in Florida.²⁹ Although some seniors can participate in the Senior Community Service Employment Program (SCSEP), Florida's older adult households remain cost burdened and vulnerable to housing insecurity. The SCSEP serves unemployed low-income individuals ages 55 and older who have poor employment prospects. The program provides participants with the skills necessary to transition to unsubsidized employment and individuals are paid for their participation in SCSEP.

With due recognition of the challenges faced by households that include wage-earners, the difficulty is even more severe for special needs households. A single individual with a disability, whose sole source of income is disability benefits from either Supplement Security Income (SSI) or Social Security Disability Income (SSDI), receives on average between \$794 for SSI and \$1,310 for SSDI³⁰ which is approximately 17% and 28% of the Florida median household income.³¹ In Florida there are an estimated 104,273 households living on a disability-related income source who are cost burdened³² and 611,553 low-income households that have members with one or more disabilities.³³ Because market-rate affordable housing does not exist for a household living solely on disability income, subsidized housing must be created to meet this need.

Implementation of the SSI/SSDI Outreach, Access, and Recovery (SOAR) model, under the direction of the Department of Children and Families (DCF) Office of Substance Abuse and Mental Health and carried out by community organizations, including behavioral health providers, increases access to SSDI and/or SSI benefits. Eligible individuals must be at risk of or experiencing homelessness and have a serious mental illness, medical impairment, and/or a co-occurring disorder. While disability benefits provide a critical source of income, it is often far from sufficient.

THE NEED FOR GREATER ACCESS TO BEHAVIORAL HEALTH CARE: THE INTERSECTION BETWEEN HOUSING AND BEHAVIORAL HEALTH RECOVERY

Housing is a significant determinant of health, and insufficient housing is a major public health issue.³⁴ The COVID-19 pandemic has exacerbated housing instability especially for low-income households. In effect, the pandemic has triggered high rates of unemployment, worsened pre-existing behavioral health disorders, and increased stress, anxiety and depression for others. Increased rates of unemployment also contribute to increasing the prevalence of behavioral health disorders, resulting in more suffering and deaths.³⁵ Prior to the pandemic, America's affordable housing crisis was already expected to get worse.³⁶ The ELI housing crisis is evidenced by the fact that people with disabilities are forced to live in segregated and institutional facilities (e.g., nursing homes, state institutions, etc.) and experience homelessness. Many of these individuals need Permanent Supportive Housing.³⁷

According to the National Alliance on Mental Illness, the lack of safe and affordable housing is one of the most challenging barriers to recovery. Many people with a serious mental illness live on Supplemental Security Income (SSI), which averages just 18% of the median income and can make finding an affordable home very difficult. When this basic need is not met, people cycle in and out of homelessness, and publicly funded crisis services such as jails, shelters, and hospitals.

The Department of Children and Families, Office of Substance Abuse and Mental Health (SAMH) is the Single State Authority on substance use and mental health. SAMH is responsible for the oversight of a statewide system of care for the prevention, treatment, and recovery of children and adults with serious mental illnesses and/or substance use disorders who are indigent, uninsured, or underinsured. SAMH contracts with private, not-for-profit intermediaries called Managing Entities to manage substance use and mental health resources including block grants, other federal grants, and state general revenue funding. The Office of SAMH acknowledges the importance of social determinants of health and is working hard to address housing barriers.

The Projects for Assistance in Transition from Homelessness (PATH) grant provides funding to connect individuals with mental health or co-occurring disorders who are experiencing or at risk of homelessness to housing resources, treatment, and recovery supports. Behavioral health providers and some CoCs in Florida serve as PATH grant recipients, utilizing the funding to provide eligible services such as street outreach, case management, substance use services, referrals for primary health care, job training, housing services and one-time rental payments to prevent eviction.

The Office of Substance Abuse and Mental Health continues to advocate for affordable, supportive, and recovery housing, and recovery services to aid individuals with substance use, mental health or co-occurring disorders, including opiate use disorders, and those experiencing or at risk of homelessness.

APPENDIX V: coc funding

APPENDIX V, TABLE 1: COC FUNDING FROM FEDERAL AND STATE SOURCES

				SF	Y20-21			FFY20		
CoC Number	СоС	Challenge (State)	Emergency Solutions Grant (State)	TANF Homelessness Prevention (State)	Staffing (State)	ESG-CV (State)	State Total	HUD CoC (Federal)	Total (State & Federal)	
FL-500	Sarasota, Bradenton/Manatee, Sarasota Counties CoC	\$119,000.00	\$172,000.00	\$38,000.00	\$ 107,142.85	\$2,000,897.00	\$2,437,039.85	\$1,340,466.00	\$3,777,505.85	
FL-501	Tampa/Hillsborough County CoC	\$86,000.00	\$151,000.00	\$ -	\$107,142.85	\$4,729,241.70	\$5,073,384.55	\$7,224,219.00	\$12,297,603.55	
FL-502	St Petersburg, Clearwater, Largo/Pinellas County CoC	\$148,500.00	\$200,000.00	\$46,582.00	\$107,142.85	\$2,955,032.00	\$3,457,256.85	\$4,769,867.00	\$8,227,123.85	
FL-503	Lakeland, Winter Haven/Polk County CoC	\$119,000.00	\$172,000.00	\$34,683.00	\$107,142.85	\$1,427,276.00	\$1,860,101.85	\$2,281,569.00	\$4,141,670.85	
FL-504	Deltona, Daytona Beach/Volusia, Flagler Counties CoC	\$148,500.00	\$200,000.00	\$46,582.00	\$107,142.85	\$2,144,120.00	\$2,646,344.85	\$1,739,247.00	\$4,385,591.85	
FL-505	Fort Walton Beach/Okaloosa, Walton Counties CoC	\$148,500.00	\$257,000.00	\$38,000.00	\$107,142.85	\$3,386,915.00	\$3,937,557.85	\$706,323.00	\$4,643,880.85	
FL-506	Tallahassee/Leon County CoC	\$86,000.00	\$150,000.00	\$32,250.00	\$107,142.85	\$2,197,121.00	\$2,572,513.85	\$1,807,333.00	\$4,379,846.85	
FL-507	Orlando/Orange, Osceola, Seminole Counties CoC	\$148,500.00	\$200,000.00	\$46,582.00	\$107,142.85	\$5,946,937.02	\$6,449,161.87	\$9,530,007.00	\$15,979,168.87	
FL-508	Gainesville/Alachua, Putnam Counties CoC	\$86,000.00	\$257,000.00	\$32,250.50	\$107,142.85	\$5,179,877.00	\$5,662,270.35	\$866,230.00	\$6,528,500.35	
FL-509	Fort Pierce/St Lucie, Indian River, Martin Counties CoC	\$148,500.00	\$300,000.00	\$ -	\$ 107,142.85	\$1,864,000.00	\$2,419,642.85	\$1,949,653.00	\$4,369,295.85	
FL-510	Jacksonville-Duval, Clay Counties CoC Pensacola/Escambia,	\$148,500.00	\$172,000.00	\$46,582.00	\$ 107,142.85	\$4,083,896.40	\$4,558,121.25	\$5,789,520.00	\$10,347,641.25	
FL-511	Santa Rosa Counties CoC	\$119,000.00	\$257,000.00	\$38,000.00	\$107,142.85	\$3,899,652.00	\$4,420,794.85	\$800,458.00	\$5,221,252.85	
FL-512	St Johns County CoC	\$86,000.00	\$226,000.00	\$32,250.00	\$107,142.85	\$1,702,728.00	\$2,154,120.85	\$131,973.00	\$2,286,093.85	
FL-513	Palm Bay, Melbourne/Brevard County CoC	\$119,000.00	\$257,000.00	\$32,250.00	\$107,142.85	\$4,868,438.00	\$5,383,830.85	\$727,743.00	\$6,111,573.85	
FL-514	Ocala/Marion County CoC	\$86,000.00	\$172,000.00	\$38,000.00	\$107,142.85	\$1,570,639.46	\$1,973,782.31	\$467,937.00	\$2,441,719.31	
FL-515	Panama City/Bay, Jackson Counties CoC	\$86,000.00	\$226,000.00	\$32,250.00	\$107,142.85	\$3,272,000.00	\$3,723,392.85	\$57,321.00	\$3,780,713.85	
FL-517	Hendry, Hardee, Highlands Counties CoC	\$86,000.00	\$226,000.00	\$ -	\$107,142.85	\$1,664,773.00	\$2,083,915.85	\$287,774.00	\$2,371,689.85	
FL-518	Columbia, Hamilton, Lafayette, Suwannee Counties CoC	\$119,000.00	\$257,000.00	\$38,000.00	\$107,142.85	\$2,361,000.00	\$2,882,142.85	\$379,892.00	\$3,262,034.85	
FL-519	Pasco County CoC	\$119,000.00	\$172,000.00	\$ -	\$107,142.85	\$1,654,960.00	\$2,053,102.85	\$1,360,174.00	\$3,413,276.85	
FL-520	Citrus, Hernando, Lake, Sumter Counties CoC	\$119,000.00	\$257,000.00	\$38,000.00	\$107,142.85	\$3,248,910.00	\$3,770,052.85	\$568,755.00	\$4,338,807.85	
FL-600	Miami-Dade County CoC	\$148,500.00	\$200,000.00	\$46,582.00	\$107,142.85	\$9,056,658.00	\$9,558,882.85	\$35,333,463.00	\$44,892,345.85	
FL-601	Fort Lauderdale/Broward County CoC	\$119,000.00	\$194,019.00	\$ -	\$107,142.85	\$4,035,920.00	\$ 4,456,081.85	\$11,813,070.00	\$16,269,151.85	
FL-602	Punta Gorda/Charlotte County CoC	\$148,500.00	\$300,000.00	\$46,582.00	\$107,142.85	\$2,547,230.32	\$ 3,149,455.17	\$276,790.00	\$3,426,245.17	
FL-603	Fort Myers, Cape Coral/Lee County CoC	\$148,500.00	\$105,525.00	\$46,582.00	\$107,142.85	\$1,652,808.00	\$2,060,557.85	\$1,997,727.00	\$4,058,284.85	
FL-604	Monroe County CoC	\$119,000.00	\$257,000.00	\$32,250.00	\$107,142.85	\$2,314,372.00	\$2,829,764.85	\$536,697.00	\$3,366,461.85	
FL-605	West Palm Beach/Palm Beach County CoC	\$86,000.00		\$38,000.00	\$107,142.85	\$2,270,023.00	\$2,501,165.85	\$5,840,946.00	\$8,342,111.85	
FL-606	Naples/Collier County CoC	\$86,000.00		\$ -	\$107,142.85	\$1,177,235.00	\$1,370,377.85	\$406,485.00	\$1,776,862.85	
	Total	\$3,181,500.00	\$ 5,337,544.00	\$820,257.50	\$2,892,856.95	\$83,212,659.90	\$95,444,818.35	\$98,991,639.00	\$194,436,457.35	

State HUD ESG - Federal Emergency y Solutions Grant (ESG) funding allocated to the State of Florida by the Department of Housing and Urban Development, to be used for homeless-related housing interventions, outreach shelters, and more.

State TANF-HP - Federal Temporary Assistance to Needy Families (TANF) funding that is allocated to the State of Florida, which is utilized for Homelessness Prevention HP) services.

State Staffing - Funding appropriated by the State of Florida legislature to build capacity in local homeless Continuums of Care (CoCs).

State Challenge - Funding appropriated by the State of Florida legislature, and allocated from the Local and State Government Housing Trust Fund, to provide a variety of homelessness-related services and housing.

HUD CoC - Federal Continuum of Care funding granted to local homeless Continuums of Care (CoCs) on a competitive basis to coordinate programs, provide housing interventions, and collect and manage data related to homelessness.

State HUD ESG-CV - Federal Emergency Solutions Grant Coronavirus-related (ESG-CV) funding allocated to the State of Florida by the Department of Housing and Urban Development, to be used for homeless-related housing interventions, outreach, shelters, and other activities to prevent, prepare for, and respond to the coronavirus.



APPENDIX VI: POINT IN TIME COUNT DATA

APPENDIX VI, TABLE 1: TOTAL HOMELESS, 2017-2021

CoC#	CoC Name	2017	2018	2019	2020	2021*
FL-500	Suncoast Partnership to End Homelessness	1,447	1,192	1,135	1,044	526
FL-501	Tampa Hillsborough Homeless Initiative	1,549	1,795	1,650	1,452	870
FL-502	Pinellas County Homeless Leadership Board	2,831	2,612	2,415	2,226	2,307
FL-503	Homeless Coalition of Polk County	512	552	563	612	385
FL-504	Volusia/Flagler County Coalition for the Homeless	753	683	875	904	694
FL-505	Homelessness & Housing Alliance	401	495	399	351	73
FL-506	Big Bend Continuum of Care	1072	909	966	805	621
FL-507	Homeless Services Network of Central FL	2,074	2,053	2,010	2,007	1,544
FL-508	United Way of North Central FL	819	756	804	880	677
FL-509	Treasure Coast Homeless Services Council	1,732	1,542	1,499	1,379	814
FL-510	Changing Homelessness	1,869	1,794	1,654	1,366	1,222
FL-511	Opening Doors of NWFL	758	632	518	746	794
FL-512	Flagler Hospital - St Augustine	445	342	356	367	420
FL-513	Brevard Homeless Coalition	845	734	815	940	432
FL-514	Marion County Homeless Council	725	571	475	523	512
FL-515	Doorways of NWFL	336	381	488	385	101
FL-517	Heartland Coalition for the Homeless	609	453	403	403	61
FL-518	United Way of Suwannee Valley	502	493	538	578	69
FL-519	Coalition for the Homeless of Pasco County	2,512	1,356	894	898	857
FL-520	Mid FL Homeless Coalition	635	711	677	703	638
FL-600	Miami-Dade County Homeless Trust	3,721	3,516	3,472	3,560	3,224
FL-601	Broward County Homeless Initiative Partnership	2,450	2,318	2,803	2,211	2,561
FL-602	Gulf Coast Partnership	222	164	156	169	154
FL-603	Lee County Human & Veteran Services	431	728	630	444	394
FL-604	Monroe County Homeless Services CoC	631	973	501	421	242
FL-605	Palm Beach County Division of Human Services	1,607	1,309	1,397	1,510	458
FL-606	Hunger & Homeless Coalition of Collier County	621	653	498	603	568
	Totals	32,109	29,717	28,591	27,487	21,218

^{*}The 2021 Point in Time Count numbers are not comparable to the previous years' counts. Typically, Continuums of Care (CoCs) conduct a PIT Count of both sheltered and unsheltered households. This year, due to COVID-19 related safety concerns, only six of the 27 CoCs conducted such a count; 10 CoCs did not conduct an unsheltered count; and others conducted a modified form of the unsheltered count. All CoCs conducted a sheltered PIT count. For those that did not conduct an unsheltered count, the CoCs reported zero unsheltered persons, resulting in an undercount of homelessness.

APPENDIX VI, TABLE 2: SHELTERED AND UNSHELTERED, 2021

CoC#	CoC Name	Sheltered	Unsheltered*	Total*
FL-500	Suncoast Partnership to End Homelessness	526	O ¹	526
FL-501	Tampa Hillsborough Homeless Initiative	870	O ¹	870
FL-502	Pinellas County Homeless Leadership Board	1,305	1,002 ²	2,307
FL-503	Homeless Coalition of Polk County	385	O ¹	385
FL-504	Volusia/Flagler County Coalition for the Homeless	359	335 ²	694
FL-505	Homelessness & Housing Alliance	73	O ¹	73
FL-506	Big Bend Continuum of Care	530	91³	621
FL-507	Homeless Services Network of Central FL	1544	O ¹	1,544
FL-508	United Way of North Central FL	313	364³	677
FL-509	Treasure Coast Homeless Services Council	121	693²	814
FL-510	Changing Homelessness	992	230 ²	1,222
FL-511	Opening Doors of NWFL	211	583 ²	794
FL-512	Flagler Hospital - St Augustine	129	291 ²	420
FL-513	Brevard Homeless Coalition	432	O ²	432
FL-514	Marion County Homeless Council	302	210 ²	512
FL-515	Doorways of NWFL	101	O ¹	101
FL-517	Heartland Coalition for the Homeless	61	O ¹	61
FL-518	United Way of Suwannee Valley	69	O ¹	69
FL-519	Coalition for the Homeless of Pasco County	334	523³	857
FL-520	Mid FL Homeless Coalition	313	325 ³	638
FL-600	Miami-Dade County Homeless Trust	2,332	892 ³	3,224
FL-601	Broward County Homeless Initiative Partnership	794	1,7672	2,561
FL-602	Gulf Coast Partnership	93	61 ²	154
FL-603	Lee County Human & Veteran Services	177	217 ²	394
FL-604	Monroe County Homeless Services CoC	242	O ¹	242
FL-605	Palm Beach County Division of Human Services	458	O ¹	458
FL-606	Hunger & Homeless Coalition of Collier County	424	144³	568
	Totals	13,490	7,728	21,218

^{*}The 2021 Point in Time Count numbers are not comparable to the previous years' counts. Typically, Continuums of Care (CoCs) conduct a PIT Count of both sheltered and unsheltered households. This year, due to COVID-19 related safety concerns, only six of the 27 CoCs conducted such a count; 10 CoCs did not conduct an unsheltered count; and others conducted a modified form of the unsheltered count. All CoCs conducted a sheltered PIT count. For those that did not conduct an unsheltered count, the CoCs reported zero unsheltered persons, resulting in an undercount of homelessness.

¹Did not conduct an unsheltered PIT Count.

²Conducted a modified unsheltered PIT Count.

³Conducted a full unsheltered PIT Count.

APPENDIX VI, TABLE 3: HOMELESS POPULATION CHARACTERISTICS, 2020-2021*

The 27 local Continuum of Care planning agencies have reported the following information on the makeup of people experiencing homelessness in Florida. They captured this information from direct interviews or from agency data on persons experiencing homelessness served as entered into the HMIS. The current 2021 data is compared to reported 2020 data. Reported characteristics are based the individuals own self-report and may not have been verified.

Gender

Gender	2020 Number	2020 Percentage	2021 Number	2021 Percentage
Female	9,743	35.4%	6,886	37.3%
Male	17,670	64.3%	11,494	62.3%
Transgender	52	0.2%	30	0.2%
Gender Nonconforming	22	0.1%	39	0.2%
Total	27,487	100.0%	18,449	100.0%

Age

Age Range	2020 Number	2020 Percentage	2021 Number	2021 Percentage
Under 18	4,637	16.9%	3,568	19.4%
18-24	1,588	5.8%	966	5.2%
Over 24	21,262	77.4%	13,945	75.7%
Total	27,487	100.0%	18,419	100.0%

Ethnicity

Ethnicity	2020 Number	2020 Percentage	2021 Number	2021 Percentage
Hispanic/Latino	4,045	14.7%	2,738	14.8%
Non-Hispanic/Non-	23,442	85.3%	15,711	85.2%
Latino				
Total	27,487	100.0%	18,449	100.0%

Race

Population Category	2020 Number	2020 Percentage	2021 Number	2021 Percentage
American Indian or Alaska	328	1.2%	970	4.8%
Native				
Asian	128	0.5%	85	0.4%
Black or	11,042	40.2%	7,699	38.1%
African American				
Multiple Races	814	3.0%	603	3.0%
Native Hawaiian or Pacific	73	0.3%	80	0.4%
Islander				
White	15,102	54.9%	10,779	53.3%
Total	27,487	100.0%	20,216	100.0%

Household Composition

Household Type	2020 Number	2020 Percentage	2021 Number	2021 Percentage
People in households with	7,143	26.0%	5,322	29.8%
at least one adult and one				
child				
People in households	20,344	74.0%	12,358	69.2%
without children				
People in households with	207	0.8%	186	1.0%
only children				
Total	27,487	100.0%	17,866	100.0%

Military Veterans

Served/Active Duty			2021 Number	2021 Percentage
Yes	2,436	8.9%	2,153	10.1%
No or Not Reported	25,051	91.1%	19,065	89.9%
Total	27,487	100.0%	21,218	100.0%

Other Characteristics

Condition	2020 Number	2020 Percentage	2021 Number	2021 Percentage
Substance Use Disorder	3,214	11.7%	3,047	14.4%
Severely Mentally III	4,732	17.2%	2,705	12.7%
HIV/AIDS	445	1.6%	232	1.1%
Survivors of Domestic	2,165	7.9%	1,204	5.7%
Violence				
None or Not Reported	16,931	61.5%	14,030	66.1%
Total	27,487	100.0%	21,218	100.0%

*The 2021 Point in Time Count numbers are not comparable to the previous years' counts. Typically, Continuums of Care (CoCs) conduct a PIT Count of both sheltered and unsheltered households. This year, due to COVID-19 related safety concerns, only six of the 27 CoCs conducted such a count; 10 CoCs did not conduct an unsheltered count; and others conducted a modified form of the unsheltered count. All CoCs conducted a sheltered PIT count. For those that did not conduct an unsheltered count, the CoCs reported zero unsheltered persons, resulting in an undercount of homelessness.



APPENDIX VI, TABLE 4: CHRONIC HOMELESSNESS, 2017-2021

CoC#	CoC Name	2017	2018	2019	2020	2021
FL-500	Suncoast Partnership to End Homelessness	285	250	246	188	72
FL-501	Tampa Hillsborough Homeless Initiative	235	262	264	266	64
FL-502	Pinellas County Homeless Leadership Board	690	434	722	592	213
FL-503	Homeless Coalition of Polk County	77	84	80	78	22
FL-504	Volusia/Flagler County Coalition for the Homeless	85	90	89	76	24
FL-505	Homelessness & Housing Alliance	92	119	269	183	18
FL-506	Big Bend Continuum of Care	112	151	152	192	197
FL-507	Homeless Services Network of Central FL	182	272	478	489	177
FL-508	United Way of North Central FL	284	272	261	225	179
FL-509	Treasure Coast Homeless Services Council	134	64	51	45	0
FL-510	Changing Homelessness	286	327	301	71	5
FL-511	Opening Doors of NWFL	132	78	52	184	41
FL-512	Flagler Hospital - St Augustine	42	65	14	43	71
FL-513	Brevard Homeless Coalition	153	116	206	245	15
FL-514	Marion County Homeless Council	137	173	181	130	156
FL-515	Doorways of NWFL	38	98	34	43	3
FL-517	Heartland Coalition for the Homeless	283	259	235	98	2
FL-518	United Way of Suwannee Valley	34	38	41	65	0
FL-519	Coalition for the Homeless of Pasco County	418	495	265	265	361
FL-520	Mid FL Homeless Coalition	40	36	68	58	42
FL-600	Miami-Dade County Homeless Trust	294	384	378	524	690
FL-601	Broward County Homeless Initiative Partnership	581	641	914	654	208
FL-602	Gulf Coast Partnership	29	45	48	23	3
FL-603	Lee County Human & Veteran Services	65	132	110	93	57
FL-604	Monroe County Homeless Services CoC	83	62	36	31	24
FL-605	Palm Beach County Division of Human Services	252	164	215	241	61
FL-606	Hunger & Homeless Coalition of Collier County	77	119	61	80	73
	Totals	5,12 0	5,23 0	5,77 1	5,18 2	2,778

^{*}The 2021 Point in Time Count numbers are not comparable to the previous years' counts. Typically, Continuums of Care (CoCs) conduct a PIT Count of both sheltered and unsheltered households. This year, due to COVID-19 related safety concerns, only six of the 27 CoCs conducted such a count; 10 CoCs did not conduct an unsheltered count; and others conducted a modified form of the unsheltered count. All CoCs conducted a sheltered PIT count. For those that did not conduct an unsheltered count, the CoCs reported zero unsheltered persons, resulting in an undercount of homelessness.

APPENDIX VI, TABLE 5: HOMELESSNESS AMONG VETERANS, 2017-2021

CoC#	CoC Name	2017	2018	2019	2020	2021*
FL-500	Suncoast Partnership to End Homelessness	149	108	111	105	51
FL-501	Tampa Hillsborough Homeless Initiative	172	171	149	160	134
FL-502	Pinellas County Homeless Leadership Board	329	281	316	265	285
FL-503	Homeless Coalition of Polk County	35	26	38	46	19
FL-504	Volusia/Flagler County Coalition for the Homeless	52	44	61	73	25
FL-505	Homelessness & Housing Alliance	27	30	21	31	3
FL-506	Big Bend Continuum of Care	110	108	91	83	92
FL-507	Homeless Services Network of Central FL	218	181	177	190	195
FL-508	United Way of North Central FL	126	114	126	155	115
FL-509	Treasure Coast Homeless Services Council	72	61	50	68	67
FL-510	Changing Homelessness	125	121	118	177	170
FL-511	Opening Doors of NWFL	117	103	64	89	107
FL-512	Flagler Hospital - St Augustine	40	30	25	26	31
FL-513	Brevard Homeless Coalition	187	169	182	119	189
FL-514	Marion County Homeless Council	72	69	81	80	61
FL-515	Doorways of NWFL	34	34	54	18	1
FL-517	Heartland Coalition for the Homeless	16	18	1	18	4
FL-518	United Way of Suwannee Valley	43	41	29	39	22
FL-519	Coalition for the Homeless of Pasco County	215	186	92	92	92
FL-520	Mid FL Homeless Coalition	57	45	57	28	60
FL-600	Miami-Dade County Homeless Trust	167	120	169	163	145
FL-601	Broward County Homeless Initiative Partnership	197	189	219	157	182
FL-602	Gulf Coast Partnership	55	40	43	51	30
FL-603	Lee County Human & Veteran Services	13	18	25	17	33
FL-604	Monroe County Homeless Services CoC	87	67	50	61	29
FL-605	Palm Beach County Division of Human Services	65	130	30	100	0
FL-606	Hunger & Homeless Coalition of Collier County	9	11	5	27	11
	Totals	2,789	2,515	2,384	2,436	2,153

^{*}The 2021 Point in Time Count numbers are not comparable to the previous years' counts. Typically, Continuums of Care (CoCs) conduct a PIT Count of both sheltered and unsheltered households. This year, due to COVID-19 related safety concerns, only six of the 27 CoCs conducted such a count; 10 CoCs did not conduct an unsheltered count; and others conducted a modified form of the unsheltered count. All CoCs conducted a sheltered PIT count. For those that did not conduct an unsheltered count, the CoCs reported zero unsheltered persons, resulting in an undercount of homelessness.

APPENDIX VI, TABLE 6: FAMILY HOMELESSNESS, 2017-2021

CoC#	CoC Name	2017	2018	2019	2020	2021*
FL-500	Suncoast Partnership to End Homelessness	245	238	160	199	141
FL-501	Tampa Hillsborough Homeless Initiative	479	602	456	379	400
FL-502	Pinellas County Homeless Leadership Board	365	359	381	350	372
FL-503	Homeless Coalition of Polk County	170	198	189	160	151
FL-504	Volusia/Flagler County Coalition for the Homeless	198	199	301	300	199
FL-505	Homelessness & Housing Alliance	154	147	80	56	39
FL-506	Big Bend Continuum of Care	262	269	215	215	109
FL-507	Homeless Services Network of Central FL	732	713	745	657	659
FL-508	United Way of North Central FL	120	113	129	163	95
FL-509	Treasure Coast Homeless Services Council	982	688	745	570	181
FL-510	Changing Homelessness	425	384	289	375	247
FL-511	Opening Doors of NWFL	139	165	45	75	24
FL-512	Flagler Hospital - St Augustine	150	123	120	97	84
FL-513	Brevard Homeless Coalition	262	213	211	222	160
FL-514	Marion County Homeless Council	126	129	110	161	145
FL-515	Doorways of NWFL	51	68	34	39	18
FL-517	Heartland Coalition for the Homeless	232	161	161	143	53
FL-518	United Way of Suwannee Valley	130	106	84	205	32
FL-519	Coalition for the Homeless of Pasco County	1696	552	209	211	152
FL-520	Mid FL Homeless Coalition	191	285	178	180	191
FL-600	Miami-Dade County Homeless Trust	1,175	1,091	1,160	1,299	1,011
FL-601	Broward County Homeless Initiative Partnership	413	462	462	435	329
FL-602	Gulf Coast Partnership	57	34	25	32	32
FL-603	Lee County Human & Veteran Services	114	305	334	136	102
FL-604	Monroe County Homeless Services CoC	50	249	32	24	14
FL-605	Palm Beach County Division of Human Services	326	345	264	276	230
FL-606	Hunger & Homeless Coalition of Collier County	119	102	168	184	152
	Totals	9,363	8,300	7,287	7,143	5,322

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APPENDIX VI, TABLE 7: POINT IN TIME COUNTS BY COUNTY, 2017-2021

County	2017	2018	2019	2020	2021*
Alachua	702	641	714	657	521
Baker	N/A	N/A	N/A	N/A	N/A
Bay	316	372	470	378	185
Bradford	6	33	4	N/A	12
Brevard	845	734	815	815	432
Broward	2,450	2,318	2,803	2,312	2,561
Calhoun	4	0	2	N/A	0
Charlotte	222	164	156	169	122
Citrus	175	169	262	171	221
Clay	84	62	74	74	57
Collier	621	653	498	603	568
Columbia	292	485	316	312	60
DeSoto	178	104	104	104	N/A
Dixie	N/A	N/A	N/A	N/A	N/A
Duval	1,643	1,640	1,494	1,494	1,137
Escambia	693	598	504	504	770
Flagler	75	62	130	73	37
Franklin	N/A	N/A	N/A	7	0
Gadsden	25	6	2	14	8
Gilchrist	1	0	0	N/A	0
Glades	44	36	34	34	N/A
Gulf	N/A	2	4	2	0
Hamilton	44	N/A	45	45	0
Hardee	81	82	70	70	N/A
Hendry	61	45	45	45	N/A
Hernando	189	182	151	151	169
Highlands	172	136	102	102	N/A
Hillsborough	1,549	1,795	1,650	1,650	870
Holmes	2	3	0	N/A	0
Indian River	592	447	486	486	261
Jackson	14	2	5	3	0

Totals	32,109	29,717	28,590	27,679	21,141
Washington	N/A	2	7	2	0
Walton	99	173	27	27	0
Wakulla	25	0	4	N/A	0
Volusia	678	621	745	839	657
Union	N/A	N/A	N/A	N/A	N/A
Taylor	N/A	N/A	9	11	6
Suwannee	142	8	150	182	9
Sumter	29	48	10	24	25
Seminole	313	288	252	372	209
Sarasota	877	647	594	594	341
Santa Rosa	65	34	13	13	24
St. Lucie	642	784	708	708	287
St. Johns	445	342	356	368	420
Putnam	72	56	59	178	106
Polk	512	552	563	565	385
Pinellas	2,831	2,612	2,415	2,209	2,307
Pasco	2,512	1,356	894	894	857
Palm Beach	1,607	1,309	1,397	1,510	458
Osceola	239	226	214	234	173
Orange	1,522	1,539	1,544	1,401	1,162
Okeechobee	73	50	48	48	N/A
Okaloosa	302	322	372	372	73
Nassau	142	92	86	86	28
Monroe	631	973	501	437	242
Miami-Dade	3,721	3,516	3,472	3,472	3,224
Martin	498	311	305	305	266
Marion	725	571	475	523	512
Manatee	570	545	541	466	185
Madison	N/A	N/A	N/A	N/A	0
Liberty	N/A	N/A	N/A	45	0
Levy	38	26	27	27	38
Leon	1022	903	951	761	539
Lee	431	728	630	444	394
Lake	242	312	254	254	223
Jefferson Lafayette	N/A 24	N/A N/A	N/A 27	27	0

N/A = Not Available

*The 2021 Point in Time Count numbers are not comparable to the previous years' counts. Typically, Continuums of Care (CoCs) conduct a PIT Count of both sheltered and unsheltered households. This year, due to COVID-19 related safety concerns, only six of the 27 CoCs conducted such a count; 10 CoCs did not conduct an unsheltered count; and others conducted a modified form of the unsheltered count. All CoCs conducted a sheltered PIT count. For those that did not conduct an unsheltered count, the CoCs reported zero unsheltered persons, resulting in an undercount of homelessness.

APPENDIX VII: FLORIDA DEPARTMENT OF EDUCATION HOMELESS STUDENT DATA

APPENDIX VII, TABLE 1: FLORIDA DEPARTMENT OF EDUCATION HOMELESS STUDENT COUNT, 2019-2020

District	District Name	Living Situation at the Time the Student was Identified as Homeless			Total	Unaccompanied Homeless Youth	
Number	District Name	Shelters	Sharing Housing	Other	Motels	Homeless	(UHY)
01	Alachua	139	830	<11	67	1,045	39
02	Baker	<11	92	<11	<11	103	<11
03	Bay	264	2,246	1,115	149	3,774	260
04	Bradford	<11	117	<11	14	140	<11
05	Brevard	112	1,230	80	194	1,616	189
06	Broward	410	3,925	325	434	5,094	355
07	Calhoun	35	127	107	<11	271	<11
08	Charlotte	35	290	20	43	388	97
09	Citrus	63	503	47	24	637	73
10	Clay	37	633	17	130	817	167
11	Collier	67	1,058	11	29	1,165	345
12	Columbia	64	359	11	28	462	38
13	Miami-Dade	1,495	6,623	796	524	9,438	429
14	Desoto	0	117	<11	<11	125	<11
15	Dixie	0	66	0	<11	68	<11
16	Duval	228	2,817	30	277	3,352	433
17	Escambia	125	1,524	<11	168	1,820	58
18	Flagler	22	368	21	34	445	90
19	Franklin	15	105	<11	11	140	<11
20	Gadsden	23	115	<11	<11	149	<11
21	Gilchrist	0	<11	<11	0	<11	0
22	Glades	0	33	<11	0	35	<11
23	Gulf	<11	19	<11	<11	30	<11
24	Hamilton	0	278	<11	<11	285	<11
25	Hardee	<11	241	<11	0	255	14
26	Hendry	13	375	50	<11	446	54
27	Hernando	27	569	35	65	696	107
28	Highlands	31	375	<11	13	426	18
29	Hillsborough	445	3,407	236	695	4,783	347
30	Holmes	<11	49	<11	<11	58	<11
31	Indian River	65	392	29	43	529	28
32	Jackson	11	359	<11	15	389	<11
33	Jefferson	0	26	0	0	26	<11
34	Lafayettee	0	91	112	0	203	<11
35	Lake	74	1,181	111	159	1,525	91
36	Lee	104	864	49	223	1,240	159
37	Leon	124	623	25	65	837	60
38	Levy	22	176	<11	<11	211	12
39	Liberty	<11	50	<11	0	52	<11

40	Madison	0	140	46	0	186	<11
41	Manatee	100	1,026	41	116	1,283	85
42	Marion	101	696	77	213	1,087	146
43	Martin	93	523	27	26	669	39
44	Monroe	33	208	26	<11	276	21
45	Nassau	<11	454	35	19	513	139
46	Okaloosa	106	521	31	75	733	53
47	Okeechobee	<11	336	<11	<11	352	28
48	Orange	297	3,025	141	1,337	4,800	136
48d	UCP Charter	<11	13	0	<11	16	0
49	Osceola	82	1,642	108	793	2,625	76
50	Palm Beach	279	3,721	204	296	4,500	261
50d	South Tech	0	38	0	<11	42	<11
51	Pasco	180	1,384	75	246	1,885	380
52	Pinellas	547	3,046	182	481	4,256	455
53	Polk	212	2,723	147	587	3,669	434
	Lake Wales						
53D	Charter	<11	202	27	20	251	22
54	Putnam	66	408	34	17	525	113
_55	St. Johns	76	505	29	51	661	145
56	St. Lucie	41	1,160	44	184	1,429	125
57	Santa Rosa	53	642	48	54	797	60
_58	Sarasota	98	529	<11	95	731	103
59	Seminole	56	1,217	49	277	1,599	168
60	Sumter	12	69	<11	15	99	19
61	Suwannee	<11	261	<11	11	279	21
62	Taylor	<11	88	16	<11	109	<11
63	Union	0	73	0	0	73	0
64	Volusia	175	2,041	67	384	2,667	292
65	Wakulla	0	59	<11	<11	63	14
66	Walton	<11	286	18	34	340	16
_67	Washington	15	204	<11	<11	231	19
_68	DEAF/BLIND	<11	25	0	<11	27	<11
_71	FLVIRTUAL	<11	34	<11	<11	55	<11
72	FAU LAB SCH	0	21	0	0	21	<11
73	FSU LAB SCH	0	<11	0	<11	<11	0
74	FAMU LAB SCH	0	14	0	0	14	0
75	UF LAB SCH	<11	<11	0	0	<11	<11
99	STATE TOTAL	6,720	59,593	4,823	8,813	79,949	6,952
% OF T	OTAL HOMELESS	8.4%	74.5%	6.0%	11.0%		8.7%

- Shelters: Living in emergency or transitional shelters
- Sharing: Sharing the housing of other persons due to loss of housing, economic hardship or a similar reason; "doubled-up"
- Unsheltered: Living in cars, parks, campgrounds, public spaces, abandoned buildings, substandard housing, bus or train stations
- Motels: Living in hotels or motels
- UHY: Homeless AND NOT in the physical custody of a parent or legal guardian, i.e., an Unaccompanied Homeless (Child or) Youth

APPENDIX VII, TABLE 2: FLORIDA DEPARTMENT OF EDUCATION, HOMELESS STUDENT COUNT BY SCHOOL DISTRICT 5-YEAR TOTALS, 2015-2020

DISTRICT NAME	2015-2016	2016-2017	2017-2018	2018-2019	2019-2020
Alachua	785	840	1,021	1,026	1,045
Baker	41	11	97	55	103
Bay	1,506	1,583	1,523	5,725	3,774
Bradford	212	180	155	160	140
Brevard	1,973	2,262	2,763	2,261	1,616
Broward	2,262	2,742	4,903	5,424	5,094
Calhoun	99	71	73	202	271
Charlotte	436	458	435	364	388
Citrus	600	592	669	619	637
Clay	840	557	728	983	817
Collier	808	900	1,367	1,030	1,165
Columbia	553	504	671	507	462
Dade	6,103	8,046	8,957	9,949	9,438
Desoto	329	263	134	155	125
Dixie	44	67	80	53	68
Duval	2,256	3,348	5,817	3,770	3,352
Escambia	1,869	1,618	1,909	1,936	1,820
Flagler	509	550	529	556	445
Franklin	268	286	290	289	140
Gadsden	519	307	287	252	149
Gilchrist	<11	<11	13	13	<11
Glades	63	49	39	45	35
Gulf	16	<11	16	108	30
Hamilton	335	364	335	347	285
Hardee	192	160	147	178	255
Hendry	424	545	1,231	346	446
Hernando	522	612	653	577	696
Highlands	461	492	651	465	426
Hillsborough	3,316	3,210	4,859	4,240	4,783
Holmes	94	76	71	56	58
Indian River	311	302	416	441	529
Jackson	140	124	158	2,861	389
Jefferson	<11	<11	38	34	26
Lafayette	199	166	198	204	203
Lake	2,433	2,395	2,269	1,999	1,525
Lee	1,293	1,499	2,071	1,275	1,240
Leon	866	866	790	1,352	837
Levy	190	227	210	256	211
Liberty	47	25	29	34	52

Madison	150	159	169	227	186
Manatee	1.581	1.907	1.679	1.406	1.283
Marion	2,494	2,426	2,649	2,150	1,087
Martin	265	477	482	620	669
Monroe	387	360	696	352	276
Nassau	445	566	543	546	513
Okaloosa	849	686	449	1,132	733
Okeechobee	375	487	520	432	352
Orange	6,853	6,130	9,692	6,118	4,800
UCP	NA	<11	17	21	16
Osceola	3,562	3,341	5,212	3,489	2,625
Palm Beach	3,759	4,311	4,407	4,465	4,500
SOUTH TECH	NA	12	11	39	42
Pasco	2,092	1,976	2,232	1,908	1,885
Pinellas	3,509	4,019	4,233	4,371	4,256
Polk	3,856	3,331	4,626	3,517	3,669
Lake Wales	705	236	273	177	251
Putnam	275	701	634	537	525
St. Johns	816	886	872	732	661
St. Lucie	718	742	1,585	1,512	1,429
Santa Rosa	1,312	1,101	1,034	1,141	797
Sarasota	867	794	832	833	731
Seminole	1,898	1,539	2,268	1,590	1,599
Sumter	144	144	148	127	99
Suwannee	355	469	285	307	279
Taylor	127	126	124	100	109
Union	116	68	98	61	73
Volusia	2,171	2,318	2,718	2,744	2,667
Wakulla	54	61	83	94	63
Walton	241	218	346	465	340
Washington	200	199	197	211	231
SCHOOL	16				
DEAF/BLIND		18	17	19	27
FL VIRTUAL	98	60	89	38	55
FAU - LAB					
SCHOOL	<11	<11	24	20	21
FSU - LAB	0				
SCHOOL		<11	<11	<11	<11
FAMU - LAB					
SCHOOL	<11	19	<11	16	14
UF LAB SCH	0	0	0	<11	<11
STATE TOTAL	72,957	76,211	95,860	91,675	79,949

APPENDIX VIII: COC GEOGRAPHIC AREAS AND LEAD AGENCIES



APPENDIX IX: DESIGNATED COC LEAD AGENCY CONTACT INFORMATION

CoC #	Contact	Continuum of Care	Counties Served
FL- 500	Chris Johnson P: 941-955-8987 F: 941-209-5595 chris@suncoastpartnership.org www.suncoastpartnership.org	Suncoast Partnership to End Homelessness 1750 17 th Street, Bldg. C-1 Sarasota, FL 34234	Manatee, Sarasota
FL- 501	Antoinette Hayes-Triplett P: 813-223-6115 F: 813-223-6178 tripletta@thhi.org www.thhi.org	Tampa Hillsborough Homeless Initiative 601 East Kennedy Boulevard, 24th Floor Tampa, FL 33602	Hillsborough
FL- 502	Amy Foster P: 727-582-7919 afoster@hlapinellas.org www.pinellashomeless.org	Homeless Leadership Alliance of Pinellas 647 1 st Avenue, North St. Petersburg, FL 33701	Pinellas
FL- 503	Laura Lee Gwinn P: 863-687-8386 F: 863-802-1436 lgwinn@polkhomeless.org www.polkhomeless.org	Homeless Coalition of Polk County 328 W Highland Drive Lakeland, FL 33813	Polk
FL- 504	Jeff White P: 386-279-0029 F: 386-279-0028 jwhite@vfcch.org www.vfcch.org	Volusia/Flagler County Coalition for the Homeless Mailing Address: P.O. Box 309 Daytona Beach, FL 32115- 0390 Physical Address: 324 North Street Daytona Beach, FL 32114	Volusia, Flagler
FL- 505	Sarah Yelverton P: 850-362-7429 sarah@hhalliance.org www.hhalliance.org	Homelessness and Housing Alliance P.O. Box 115 Ft. Walton Beach, FL 32549	Okaloosa, Walton
FL- 506	Amanda Wander P: 850-792-5015 F: 850-488-1616 awander@bigbendcoc.org www.bigbendcoc.org	Big Bend Continuum of Care 2507 Callaway Road Tallahassee, FL 32303	Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor, Wakulla
FL- 507	Martha Are P: 407-893-0133 F: 407-893-5299 martha.are@hsncfl.org www.hsncfl.org	Homeless Services Network of Central Florida 4065 L.B. McLeod Road Unit 4065-D Orlando, FL 32811	Orange, Osceola, Seminole

CoC #	Contact	Continuum of Care	Counties Served
FL- 508	Amber Miller/Patrick Dodds P: 352-333-0856/352-333-0866 amiller@unitedwayncfl.org pdodds@unitedwayncfl.org www.unitedwayncfl.org	United Way of North Central Florida 6031 NW 1 st Place Gainesville, FL 32607	Alachua, Bradford, Gilchrist, Levy, Putnam
FL- 509	Louise Hubbard P: 772-567-7790 F: 772-567-5991 irhsclh@aol.com www.tchelpspot.org	Treasure Coast Homeless Services Council, Inc. 2525 St. Lucie Avenue Vero Beach, FL 32960	Indian River, Martin, St. Lucie
FL- 510	Dawn Gilman P: 904-354-1100 F: 866-371-8637 dgilman@changinghomelessness.org www.changinghomelessness.org	Changing Homelessness 660 Park Street Jacksonville, FL 32204	Clay, Duval, Nassau
FL- 511	John Johnson P: 850-439-3009, ext. 106 F: 850-436-4656 johnj@openingdoorsnwfl.org www.openingdoorsNWFL.org	Opening Doors Northwest Florida Mailing Address: P.O. Box 17222 Pensacola, FL 32522 Physical Address: 1020 North New Warrington Road Pensacola, FL 32506	Escambia, Santa Rosa
FL- 512	John Eaton P: 904-819-4425 John.eaton@flaglerhospital.org	Flagler Hospital 400 Health Park Boulevard St. Augustine, FL 32086	St. Johns
FL- 513	Amber Carroll P: 321-285-6640 admin@brevardhomelesscoalition.org www.brevardhomelesscoalition.org	Brevard Homeless Coalition 300 N. Cocoa Boulevard Cocoa, FL 32922	Brevard
FL- 514	Lisa Rice P: 352-671-8770 F: 352-671-8769 Lisa.rice@marioncountyfl.org	Marion County Board of County Commissioners 2710 E. Silver Springs Blvd Ocala, FL 34470	Marion
FL- 515	Yvonne Petrasovits P: 850-481-5446 director@doorwaysnwfl.org www.doorwaysnwfl.org	Doorways of NWFL P.O. Box 549 Panama City, FL 32402-0549	Bay, Calhoun, Gulf, Holmes, Jackson, Washington
FL- 517	Brenda Gray P: 863-453-8901 or 863-657-2637 F: 863-453-8903 Brenda.gray@heartlandhomeless.com www.heartlandhomeless.com	Heartland Coalition for the Homeless Mailing Address: P.O. Box 1023 Avon Park, FL 33826-1023 Physical Address: 752 U.S. Highway 27 North Avon Park, FL 33825	DeSoto, Glades, Hardee, Hendry, Highlands, Okeechobee

CoC #	Contact	Continuum of Care	Counties Served
FL- 518	Jennifer Anchors P: 386-752-5604 F: 386-752-0105 Jen@unitedwaysuwanneevalley.org www.unitedwsv.org	United Way of Suwannee Valley 871 SW State Road 47 Lake City, FL 32025-0433	Columbia, Hamilton, Lafayette, Suwannee
FL- 519	Don Anderson P: 727-842-8605 F: 727-842-8538 don@pascohomelesscoalition.org www.pascohomelesscoalition.org	Coalition for the Homeless of Pasco County 5652 Pine Street New Port Richey, FL 34655	Pasco
FL- 520	Barbara Wheeler P: 352-860-2308 F: 352-600-3374 mfhc01@gmail.com www.midfloridahomeless.org	Mid Florida Homeless Coalition 104 E Dampier Street Inverness, FL 34450	Citrus, Hernando, Lake, Sumter
FL- 600	Victoria Mallette P: 305-375-1491 F: 305-375-2722 vmallette@miamidade.gov www.homelesstrust.org	Miami-Dade County Homeless Trust 111 NW 1st Street Suite 27-310 Miami, FL 33128	Miami-Dade
FL- 601	Rebecca Mcguire P: 954-357-5686 F: 954-357-5521 RMcguire@broward.org www.broward.org/homeless	Broward County Homeless Initiative Partnership 115 S. Andrews Avenue Room A-370 Ft. Lauderdale, FL 33301	Broward
FL- 602	Angela Hogan P: 941-626-0220 F: 941-347-8154 angela.hogan@gulfcoastpartnership.org www.gulfcoastpartnership.org	Gulf Coast Partnership 408 Tamiami Trail Unit 121 Punta Gorda, FL 33950	Charlotte
FL- 603	Mark Tesoro P: 239-533-7958 F: 239-533-7960 MTesoro@leegov.com leegov.com/dhs	Lee County Human and Veteran Services 2440 Thompson Street Fort Myers, FL 33901	Lee
FL- 604	Mark Lenkner P: 305-440-2315 mark.lenkner@monroehomelesscoc.org www.monroehomelesscoc.org	Monroe County Homeless Services CoC P.O. Box 2410 Key West, FL 33045	Monroe
FL- 605	Wendy Tippett P: 561-355-4772 F: 561-355-4801 smcnair@pbcgov.org PBCHHA@pbcgov.org	Palm Beach County Division of Human Services 810 Datura Street Suite 350 West Palm Beach, FL 33401	Palm Beach
FL- 606	Michael Overway P: 239-263-9363 F: 239-263-6058 executivedirector@collierhomelesscoalition.org www.collierhomelesscoalition.org	Hunger & Homeless Coalition of Collier County Mailing Address: P.O. Box 9202 Naples, FL 34101 Physical Address: 1791 Trade Center Way Naples, FL 34109	Collier

APPENDIX X: COUNCIL MEMBERS

420.622 State Office on Homelessness; Council on Homelessness:

(2) "The Council on Homelessness is created to consist of 19 representatives of public and private agencies who shall develop policy and advise the State Office on Homelessness. The council members shall be: the Secretary of Children and Families, or his or her designee; the executive director of the Department of Economic Opportunity, or his or her designee, who shall advise the council on issues related to rural development; the State Surgeon General, or his or her designee; the Executive Director of Veterans' Affairs, or his or her designee; the Secretary of Corrections, or his or her designee; the Secretary of Health Care Administration, or his or her designee; the Commissioner of Education, or his or her designee; the Executive Director of CareerSource Florida, Inc., or his or her designee; one representative of the Florida Association of Counties; one representative of the Florida League of Cities; one representative of the Florida Supportive Housing Coalition; one representative of the Florida Housing Coalition; the Executive Director of the Florida Housing Finance Corporation, or his or her designee; one representative of the Florida Coalition for the Homeless; the secretary of the Department of Elder Affairs, or his or her designee; and four members appointed by the Governor."

Statutory Position (Agency)	Represented By
Agency for Health Care Administration	Kim Smoak
CareerSource Florida, Inc.	Warren Davis
Department of Children and Families	Suzette Fleischmann
Department of Corrections	Cassandra Moore
Department of Economic Opportunity	Isabelle Potts
Department of Education	Courtney Walker
Department of Elder Affairs	Cheryl Townsend
Department of Health	Patricia Boswell
Department of Veterans' Affairs	Don Stout
Florida Association of Counties	Claudia Tuck, Vice-Chair
Florida Coalition to End Homelessness	Daniel Ramos
Florida Housing Coalition	Amanda Rosado
Florida Housing Finance Corporation	Bill Aldinger
Florida League of Cities	Rick Butler
Florida Supportive Housing Coalition	Shannon Nazworth, Chair

Ex-Officio Appointees	Represented By
Children's Home Society Pensacola	Lindsey Cannon
US Department of Veteran Affairs	Nikki Barfield

	Represented By
Governor's Appointees	Andrae Bailey
	Steve Smith

APPENDIX XI: GLOSSARY

Affordable Housing – In general, housing for which the tenants are paying no more than 30 percent of their income for housing costs, including utilities. Affordable housing may either be subsidized housing or unsubsidized market housing. A special type of affordable housing for people with disabilities who need services along with affordable housing is "Permanent Supportive Housing."

Area Median Income (AMI) – The household in a certain region that is in the exact middle in terms of income compared to other households will set the AMI for their region (the household size is a factor taken into account; there are different AMIs for households of different sizes in the same region). This number is calculated every year by HUD. HUD focuses on a region, rather than a single city, because families and individuals are likely to look outside of cities to surrounding areas when searching for a place to live.

Chronically Homeless – In general, a household that has been continually homeless for over a year, or one that has had at least four episodes of homelessness in the past three years, where the combined lengths of homelessness of those episodes is at least one year, and in which the individual has a disabling condition. (See 24 CFR 578.3)

Continuum of Care (CoC) – A local geographic area designated by HUD and served by a local planning body, which is responsible for organizing and delivering housing and services to meet the needs of people who are homeless as they move to stable housing and maximum self-sufficiency. The terms "CoC Governing Body" or "CoC Board" have the same meanings. In some contexts, the term "continuum of care" is also sometimes used to refer to the system of programs addressing homelessness. The geographic areas for the Florida CoCs are provided in Appendix VIII. (See 24 CFR 578.3 and F.S. 420.621)

CoC Lead Agency – The local organization or entity that implements the work and policies directed by the CoC. In Florida, there are 27 CoC Lead Agencies, serving 64 of 67 Florida counties. The CoC Lead Agency typically serves as the "Collaborative Applicant," which submits annual funding requests for HUD CoC Program funding on behalf of the CoC. The contacts for the CoC Lead Agencies are provided in Appendix IX.

Coordinated Entry System – A standardized community-wide process to perform outreach and identify homeless households, enter their information into HMIS, use common tools to assess their needs, and prioritize access to housing interventions and services to end their homelessness. Sometimes referred to as a "triage system" or "coordinated intake and assessment." (See 24 CFR 578.3)

Council on Homelessness – The Council on Homelessness was created in 2001 to develop policies and recommendations to reduce homelessness in Florida. The Council's mission is to develop and coordinate policy to reduce the prevalence and duration of homelessness, and work toward ending homelessness in Florida. (See F.S. 420.622)

Diversion – A strategy that prevents homelessness for people seeking shelter by helping them stay housed where they currently are or by identifying immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. This strategy is used in order to keep individuals from entering the homelessness system in their county.

Effectively Ending Homelessness – Effectively ending homelessness means that the community has a comprehensive response in place to ensure that homelessness is prevented whenever possible, or if it cannot be prevented, it is a rare, brief, and non-recurring phenomenon. Specifically, the community will have the capacity to: (1) quickly identify and engage people at risk of or already experiencing homelessness; (2) intervene to prevent the loss of housing and divert people from entering the homelessness services system; and (3) when homelessness does occur, provide immediate access to shelter and crisis services, without barriers to entry, while permanent stable housing and appropriate supports are being secured, and quickly connect people to housing assistance and services—tailored to their unique needs and strengths—to help them achieve and maintain stable housing. (Source: USICH)

Emergency Shelter – A facility operated to provide temporary shelter for people who are homeless. HUD's guidance is that the lengths of stay in emergency shelter prior to moving into permanent housing should not exceed 30 days. (See 24 CFR 576.2)

Emergency Solutions Grant (ESG) – HUD funding that flows through state and certain local governments for street outreach, emergency shelters, rapid re-housing, homelessness prevention, and certain HMIS costs. (See 24 CFR 576)

Extremely Low-Income (ELI) – Household income that is 30 percent or less of the AMI of the community. (See F.S. 420.004)

Florida Housing Finance Corporation – Florida Housing Finance Corporation was created by the Florida Legislature 40 years ago to help Floridians obtain safe, decent, affordable housing that might otherwise be unavailable to them. The corporation provides funds for the development of housing. (See F.S. 420.501-420.55)

The Homeless Emergency and Rapid Transition to Housing (HEARTH) Act – Federal legislation that, in 2009, amended and reauthorized the McKinney-Vento Homeless Assistance Act. The HEARTH/McKinney Vento Act provides federal funding for homeless programs, including the HUD ESG funds and the HUD CoC Grant funding. (See https://files.hudexchange.info/resources/documents/S896_HEARTHAct.pdf)

Homeless – There are varied definitions of homelessness. Generally, "homeless" means lacking a fixed, regular, and adequate nighttime residence and living in temporary accommodations (e.g., shelter) or in places not meant for human habitation. Households fleeing domestic violence and similar threatening conditions are also considered homeless. For purposes of certain programs and funding, families with minor children who are doubled-up with family or friends for economic reasons may also be considered homeless, as are households at imminent risk of homelessness. (See 24 CFR 578.3)

Homeless Management Information System (HMIS) – A web-based software solution and database tool designed to capture and analyze client-level information including the characteristics, service needs, and use of services by persons experiencing homelessness. HMIS is an important component of an effective Coordinated Entry System, CoC planning efforts, and performance evaluation based on program outcomes. (See 24 CFR 578.3)

Homelessness Prevention – Short-term financial assistance, sometimes with support services, for households at imminent risk of homelessness and who have no other resources to prevent homelessness. For many programs, the household must also be extremely low-income, with income at or less than 30 percent of the AMI, to receive such assistance. (See 24 CFR 576.103)

Housing or Permanent Housing – Any housing arrangement in which the person/tenant can live indefinitely, as long as the rent is paid, and lease terms are followed. Temporary living arrangements and programs – such as emergency shelters, transitional programs, and rehabilitation programs – do not meet the definition of housing.

Housing First Approach – An approach to ending homelessness that centers on providing people experiencing homelessness with housing as quickly as possible and, once the person is housed, then providing services to help the person remain stably housed. This approach is consistent with what most people experiencing homelessness need and want. Housing first is recognized as an evidence-based best practice, is cost effective, and results in better outcomes as compared to other approaches. The Florida Legislature encourages CoCs to adopt the housing first approach to reduce homelessness.

State Housing Trust Funds – Florida's Sadowski Act Affordable Housing Trust Funds receive funding from dedicated revenue from real estate doc stamps. In Florida, the Housing Trust Funds are used for affordable housing when appropriated for that use by the State Legislature. Housing Trust Funds may also be funded by general revenue and government bonds.

The Department of Housing and Urban Development (HUD) – HUD provides funding to states and local communities to address homelessness. In addition, this department supports fair housing, community development, and affordable housing, among other issues.

HUD CoC Funding – Funding administered by HUD through local CoC Collaborative Applicant (i.e., CoC Lead Agency) entities. Eligible uses for new projects include permanent supportive housing, rapid re-housing, coordinated entry, HMIS, and CoC planning.

Longitudinal System Analysis (LSA) – The Longitudinal System Analysis for the Annual Homeless Report is one part of HUD's annual report to Congress. The LSA report is produced from a CoC's HMIS and is submitted annually to HUD. This report provides information about how people who are experiencing homelessness are using their housing crisis response system.

Office on Homelessness – Created in 2001, the Office on Homelessness was established as a central point of contact within state government on matters related to homelessness. The Office coordinates the services of the various state agencies and programs to serve individuals or families who are homeless or are facing homelessness. Office staff work with the Council on Homelessness to develop state policy. The Office also manages targeted state grants to support the implementation of local homeless service CoC plans. The Office is responsible for coordinating resources and programs across all levels of government, and with private providers that serve people experiencing homelessness. (See F.S. 420.622)

Outreach – A necessary homeless system component that involves interacting with unsheltered people who are homeless in whatever location they naturally stay (e.g., in campsites, on the streets), building trust, and offering access to appropriate housing interventions. (See 24 CFR 576.101)

Permanent Supportive Housing (PSH) – Safe and affordable housing for people with disabling conditions, legal tenancy housing rights, and access to individualized support services. PSH that is funded through HUD CoC funding should prioritize people who are chronically homeless with the longest terms of homelessness and the highest level of vulnerability/acuity in terms of health issues and service needs. (See 24 CFR 578.3)

Point in Time (PIT) Count – HUD requires CoCs to count the number of people experiencing homelessness in their geographic area through the Point in Time (PIT) Count on a given day. Conducted by most CoCs during the last ten days in January, the PIT Count includes people served in shelter programs every year, with every other year also including people who are un-sheltered. Data collected during the PIT Counts is critical to effective planning and performance management toward the goal of ending homelessness for each community and for the nation as a whole. A one-night snapshot of homelessness in a specific geographic area, the PIT Count data are presented in Appendix VI. (See 24 CFR 578.3)

Rapid Re-Housing (RRH) – A housing intervention designed to move a household into permanent housing (e.g., a rental unit) as quickly as possible, ideally within 30 days of identification. Rapid Re-Housing typically provides (1) help identifying appropriate housing; (2) financial assistance (deposits and short-term or medium-term rental assistance for 1-24 months), and (3) support services as long as needed and desired, up to a certain limit. (See 24 CFR 576.104)

Services or Support Services – A wide range of services designed to address issues negatively affecting a person's quality of life, stability, and/or health. Examples include behavioral health counseling or treatment for mental health and/or substance use issues, assistance increasing income through employment or disability assistance, financial education, assistance with practical needs such as transportation or housekeeping, and connections to other critical resources such as primary health care.

Sheltered/Unsheltered Homelessness – People who are in temporary shelters, including emergency shelter and transitional shelters, are considered "sheltered." People who are living outdoors or in places not meant for human habitation are considered "unsheltered."

Stella P. – Used as a tool to visualize system performance based on LSA data, Stella P. provides an illustrative approach to a housing crisis response system's data by reporting the number of days homeless, exists from the homeless system to permanent destinations, and returns to homelessness. Stella P. develops data visualization elements to describe trends, population characteristics, performance, and comparisons based on official HUD data sets.

Transitional Program – A temporary shelter program that allows for moderate stays (3-24 months) and provides support services. Based on research on the efficacy and costs of this model, this type of program should be a very limited component of the housing crisis response system, due to the relative costliness of the programs in the absence of outcomes that exceed rapid re-housing outcomes. Transitional housing should be used only for specific subpopulations such as transition-age youth.

United States Interagency Council on Homelessness (USICH) – A federal Council that co-ordinates the federal response to homelessness, working in partnership with Cabinet Secretaries and senior leaders from nineteen federal member agencies.

APPENDIX XII: REFERENCES

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- $\frac{\text{https://www.ecfr.gov/cgi-bin/text-idx?SID=8ed95da3254c35cd41c95dfdd2aa239a\&mc=true\&tpl=/ecfrbrowse/Title24/24cfrv3_02.tpl\#0}{\text{ecfrbrowse/Title24/24cfrv3_02.tpl}\#0}$
- ⁸The terms "CoC Lead Agency" and "Collaborative Applicant" are often used interchangeably in Florida. The Collaborative Applicant is the CoC-designated organization, sometimes called the CoC Lead Agency, that submits funding proposals to HUD on behalf of the CoC. A Collaborative Applicant may be either a local government or a local nonprofit organization. See F.S. 420.621, 420.6225, and 420.6227. Available at: https://www.myfloridahouse.gov/Statutes/2020/Chapter420/Part_VI/
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