

STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES

P. O. Box 339
Honolulu, Hawaii 96809-0339

December 27, 2018

The Honorable Ronald D. Kouchi
President and Members of the Senate
Thirtieth State Legislature
State Capitol, Room 409
Honolulu, Hawaii 96813

The Honorable Scott Saiki
Speaker and Members of the House
of Representatives
Thirtieth State Legislature
State Capitol, Room 431
Honolulu, Hawaii 96813

SUBJECT: Report In Accordance with the Provisions of Section 346-381(9), Hawai'i Revised Statutes, and Parts I and II, Act 209, Session Laws of Hawai'i 2018, Relating to the Ohana Zones, Emergency Department Assessment, and Medical Respite Pilot Programs

Dear President Kouchi, Speaker Saiki, and members of the Legislature,

Attached is the following report submitted in accordance with:

- Provisions of Section 346-381(9), Hawai'i Revised Statutes, and Parts I and II, Act 209, Session Laws of Hawai'i 2018, Relating to the Ohana Zones, Emergency Department Assessment, and Medical Respite Pilot Programs.

In accordance with section 93-16, HRS, copies of these reports have been transmitted to the Legislative Reference Bureau Library and the reports may be viewed electronically at <http://humanservices.hawaii.gov/reports/legislative-reports/>.

Sincerely,

Pankaj Bhanot
Director

Ecopy only:

Office of the Governor
Office of the Lieutenant Governor
Department of Budget & Finance

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Legislative Auditor

Senator Russell E. Ruderman, Chair, Senate Committee on Human Services

Representative Joy A. San Buenaventura, House Committee on Human Services &
Homelessness

Report to the Thirtieth Hawai'i State Legislature 2019

**In Accordance with the Provisions of
Section 346-381(9), Hawai'i Revised Statutes,**

and

**Parts I and II, Act 209, Session Laws of Hawai'i 2018, Relating to the Ohana
Zones, Emergency Department Assessment, and Medical Respite Pilot Programs**

**Hawai'i Interagency Council on Homelessness
Governor's Coordinator on Homelessness
Department of Human Services
December 2018**

INTRODUCTION

The 2018 statewide homeless Point in Time (PIT) count estimated 6,530 individuals experienced homelessness on any given night in Hawai'i. Over half (53%) of the estimated number of individuals experiencing homelessness are unsheltered – meaning that they are living on beaches, in parks, on sidewalks, or in other areas not meant for human habitation. The number of individuals estimated to be experiencing unsheltered homelessness in Hawai'i is 58 out of every 10,000 individuals, which, behind California, is the second highest per capita rate of unsheltered homelessness among the 50 states.¹

While the rate of homelessness in Hawai'i remains high, there has been positive milestones: In the last two consecutive years there has been a steady decrease in the number of homeless individuals in the state between 2016 and 2018. Between 2017 and 2018, the number of individuals experiencing homelessness in Hawai'i declined by 690 (9.6%), which is the fourth largest numeric decrease in homelessness during this period behind California, Florida, and Michigan.

The Hawai'i Interagency Council on Homelessness (HICH) addresses homelessness statewide through implementation of its 10-year strategic plan and framework. The council's efforts have resulted in a series of systemic changes that have contributed to recent statewide decreases in homelessness. These changes include retooling State contracts for homeless services with performance measures, implementation of system-wide performance metrics, an emphasis on bringing permanent supportive housing to scale, and increased effort to coordinate with the healthcare and criminal justice systems.

Legislation has supported the work of the HICH. In the last two years, the Legislature provided increased levels of state funding to address homelessness. The 2018 Legislature appropriated \$30 million for the establishment of Ohana Zones, and an additional \$2 million for the establishment of an Emergency Department Assessment Pilot Program and Medical Respite Pilot Program. These funds represent funding for new services, though the funds are non-recurring. The Ohana Zones, Emergency Department Assessment, and Medical Respite programs will strengthen and build upon the 10 years of planning, system building, and service delivery improvements lead by the HICH.

¹ U.S. Department of Housing and Urban Development (2018). The 2018 Annual Homeless Assessment Report (AHAR) to Congress. Retrieved from: <https://www.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>

This report provides information on the work of the HICH during the 2018 calendar year and details plans to implement the three new pilot programs established by the 2018 Legislature. A list of key definitions and terms related to homeless services is provided at the end of this report.

PART I:

REPORT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 346-381(9), HAWAI'I REVISED STATUTES, RELATING TO THE HAWAI'I INTERAGENCY COUNCIL ON HOMELESSNESS

The Hawai'i Interagency Council on Homelessness (HICH) is an advisory body that serves as a statewide homelessness planning and policy development entity with broad representation from state and county government and the community.

Section 346-381(9), Hawai'i Revised Statutes (HRS), requires the HICH to submit a report to the Legislature on the progress of its activities, including formation and progress of the ten-year statewide plan to address homelessness, no later than twenty days prior to the convening of the regular session.

This report highlights the following key points:

- Overview of the HICH, including its membership, mission and responsibilities, historical background, and staffing and organizational structure;
- Status of homelessness in Hawai'i;
- Ten-year statewide plan and framework to address homelessness; and
- 2018 HICH Activities.

A record of HICH meetings convened in 2018, including meeting agendas and minutes, can be found online at the [Department of Human Services \(DHS\) website](#).

I. Overview of the Hawai'i Interagency Council on Homelessness (HICH)

A. Mission and Purpose

The mission of the HICH is to prevent and end homelessness in Hawai'i. The HICH achieves this through coordination of governmental and private entities statewide, including federal, state, and local government agencies; private foundations; the business community; the faith-based community; homeless service providers; and persons experiencing homelessness. The specific duties and responsibilities of the HICH are outlined in section 346-381, HRS. The HICH is

modeled after the [United States Interagency Council on Homelessness \(USICH\)](#) and is the first state interagency council on homelessness to be formally established in statute.

B. Membership and Quorum

The HICH is chaired by the Governor’s Coordinator on Homelessness (GCH) and consists of 27 members, including a mixture of state government representatives, legislators, federal and county government representatives, homeless service providers, and representatives from the private faith-based and business sectors. Certain members of the HICH are designated by the mayor of their respective county, while others are either designated by the governor or requested to serve by the governor. A majority of members on the HICH – 14 out of 27 members – constitutes a quorum to do business and validate any decision or act of the council. The following is a list of HICH members and alternate members as of December 2018:

- Mr. Scott Morishige, Governor’s Coordinator on Homelessness (Chair)
- Mr. Pankaj Bhanot, Director of Human Services
- Mr. Harold Brackeen III, Administrator of the Homeless Programs Office of the Department of Human Services (DHS)
- Mr. Bruce Anderson, Director of Health
- Mr. Leonard Hoshijo, Director of Labor & Industrial Relations
- Mr. Nolan Espinda, Director of Public Safety
- Ms. Mary Alice Evans, Acting Director of Business, Economic Development, and Tourism
- Ms. Jobie Masagatani, Chairperson of the Hawaiian Homes Commission
- Major General Arthur “Joe” Logan, Adjutant General
- Ms. Colette Machado, Chairperson of the Board of Trustees of the Office of Hawaiian Affairs
- Mr. Russell Suzuki, Attorney General
- Dr. Christina Kishimoto, Superintendent of Education
- State Representative John Mizuno (Primary) and State Representative Cedric Gates (Alternate)
- State Senator Breene Harimoto
- Mr. Hakim Ouansafi, Executive Director of the Hawai’i Public Housing Authority
- Mayor Kirk Caldwell, City & County of Honolulu
- Mayor Harry Kim, County of Hawai’i
- Mayor Derek Kawakami, County of Kaua’i
- Mayor Alan Arakawa, County of Maui
- Mr. Sam Millington, Continuum of Care for the City & County of Honolulu
- Ms. Brandee Menino, Continuum of Care for County of Hawai’i

- Ms. Crystal Caday-Bargayo, Continuum of Care for County of Kaua’i
- Ms. Maude Cumming, Continuum of Care for County of Maui
- Mr. Andy Dahlburg, U.S. Department of Veterans Affairs
- Mr. Mark Chandler, U.S. Department of Housing and Urban Development
- Pastor Daniel Kaneshiro, Faith-based Representative
- Mr. Dave Rolf, Business Community Representative

C. Historical Background

The HICH has existed in various forms for over a decade, though its specific duties and organizational structure have evolved as the HICH transitioned from a voluntarily established entity to a formal advisory entity established in statute. The HICH was first established in 2004 as an informal voluntary council. In 2011, then-Governor Neil Abercrombie signed Executive Order No. 11-21, that formally established the HICH and designated the Governor as chair and the Governor’s Coordinator on Homelessness as vice chair. In 2012, the HICH was formally adopted in statute through Act 105, Session Law of Hawai’i, (SLH) 2012. The statute relating to the HICH was later amended through Act 76, SLH 2013, to add the director of the Hawai’i Public Housing Authority (HPHA) as an additional member of the council, and to provide for the appointment of a member from the House of Representatives and from the Senate to serve as alternate members of the council.

D. Organizational Structure and Staffing

The HICH is established within the Department of Human Services (DHS) for administrative purposes, and is chaired by the Governor’s Coordinator on Homelessness (Coordinator). Staff support for the HICH is provided by the Coordinator’s staff. While physically located within the Office of the Governor, the Coordinator and staff are employees of DHS.

II. Status of Homelessness in Hawai’i

A. Homeless Population Trends

The HICH reviews homeless population trends as one performance measure to evaluate the effectiveness of its strategic plan and framework.

Between 2017 and 2018, the number of homeless individuals in Hawai’i decreased by 690 individuals (9.6%). The decrease was one of the largest numeric decreases in homeless population in the country, only exceeded by decreases in California, Florida, and Michigan.

This recent decrease is the second consecutive decrease in homelessness in Hawai’i – representing an overall 18% reduction since 2016. In addition to decreases in overall homelessness, Hawai’i has seen significant reductions in key homeless sub-populations between 2016 and 2018:

- 22% reduction in homeless families.
- 29% reduction in children experiencing homelessness.
- 21% reduction in veteran homelessness.
- 19% reduction in unsheltered homelessness.
- 12% reduction in chronic homelessness.
- 38% reduction in unaccompanied homeless youth.

In addition to declines in statewide homelessness, the City and County of Honolulu and the counties of Hawai'i, Kaua'i, and Maui each experienced decreases in their respective homeless populations between 2016 and 2018:

- 9% reduction in the City & County of Honolulu.
- 38% reduction in the County of Hawai'i.
- 34% reduction in the County of Kaua'i.
- 24% reduction in the County of Maui.

These decreases in homelessness came after seven years of steady increases in homelessness statewide as illustrated in the chart on the following page.

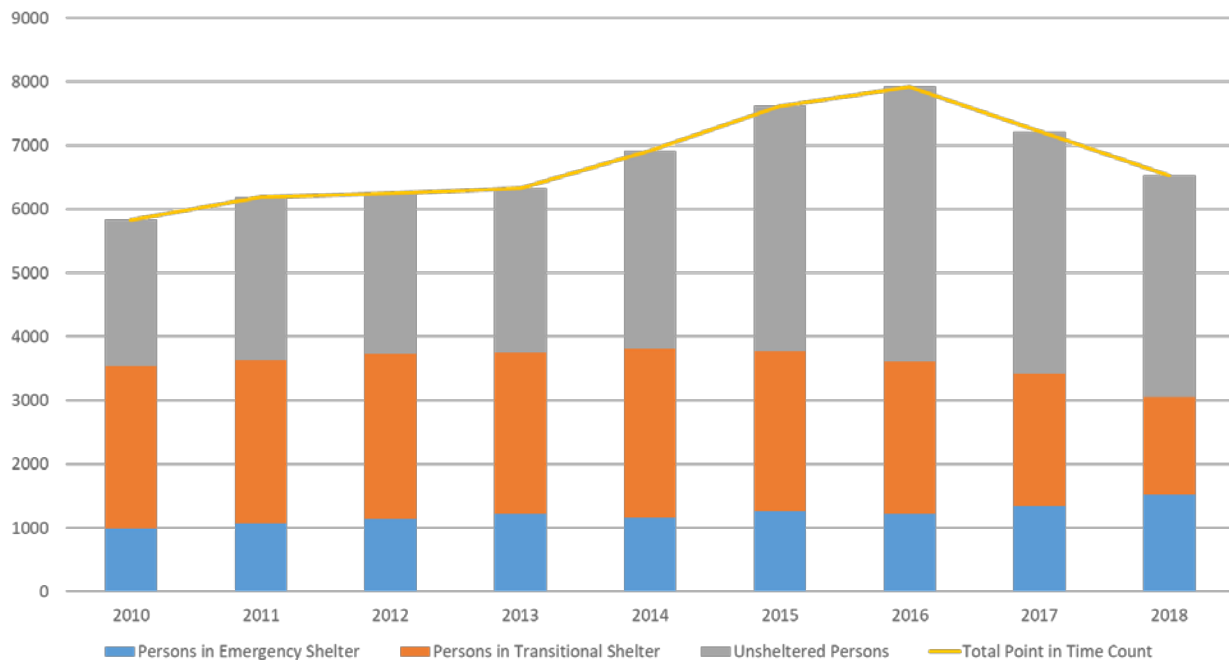


Figure 1. 2010-2018 Point in Time Count Data. Source: U.S. Department of Housing and Urban Development, Homeless Population and Sub-Population Report.

While Hawai'i continues to have the highest per capita rate of homelessness among the 50 states, the rate of homelessness has decreased from 54.9 homeless persons per 10,000 people in 2016 to 46 homeless persons per 10,000 people in 2018. More than half of the homeless

population in Hawai'i were unsheltered in 2018, and Hawai'i is one of only three states in which over 35% of homeless individuals are chronically homeless.² Consequently, Hawai'i has the highest percentage of unsheltered chronically homeless individuals (87%), followed by California (85%), and the third highest percentage of unsheltered unaccompanied homeless youth (73.5%).

Based on a review of homeless population trends, HICH is working to refine its current framework to focus more specifically on the needs of the unsheltered and chronically homeless sub-populations, as well as the needs of unsheltered unaccompanied homeless youth.

B. Overview of Shelter and Permanent Housing Beds for Persons Experiencing Homelessness.

The bed capacity of the homeless service system is another key component to understanding the current state of homelessness in Hawai'i. As the number of individuals experiencing homelessness in Hawai'i has decreased over time, the number of beds to address homelessness has increased. This information is captured in the annual Housing Inventory Count (HIC), which is a report provided to the U.S. Department of Housing and Urban Development (HUD) each year.

The HIC categorizes homeless service beds into six main types:

1. Emergency Shelter;
2. Transitional Shelter (also known as Transitional Housing);
3. Safe Haven;
4. Rapid Rehousing;
5. Permanent Supportive Housing; and
6. Other Permanent Housing.

Emergency shelter, transitional shelter, and safe haven beds are considered temporary beds. Meanwhile, rapid rehousing and permanent supportive housing beds are long-term, permanent beds.

² "Chronically homeless" is defined as a person who is chronically homeless is a homeless person with a disability who has been homeless continuously for at least 12 months, or has been homeless on at least four separate occasions over the past three years. The combined length of time in those four or more occasions must be twelve months or more, as specified in the Final Rule on the definition of "chronically homeless" issued by HUD in December 2015. A chronically homeless family is a family with an adult head of household who meets the definition for a chronically homeless person.

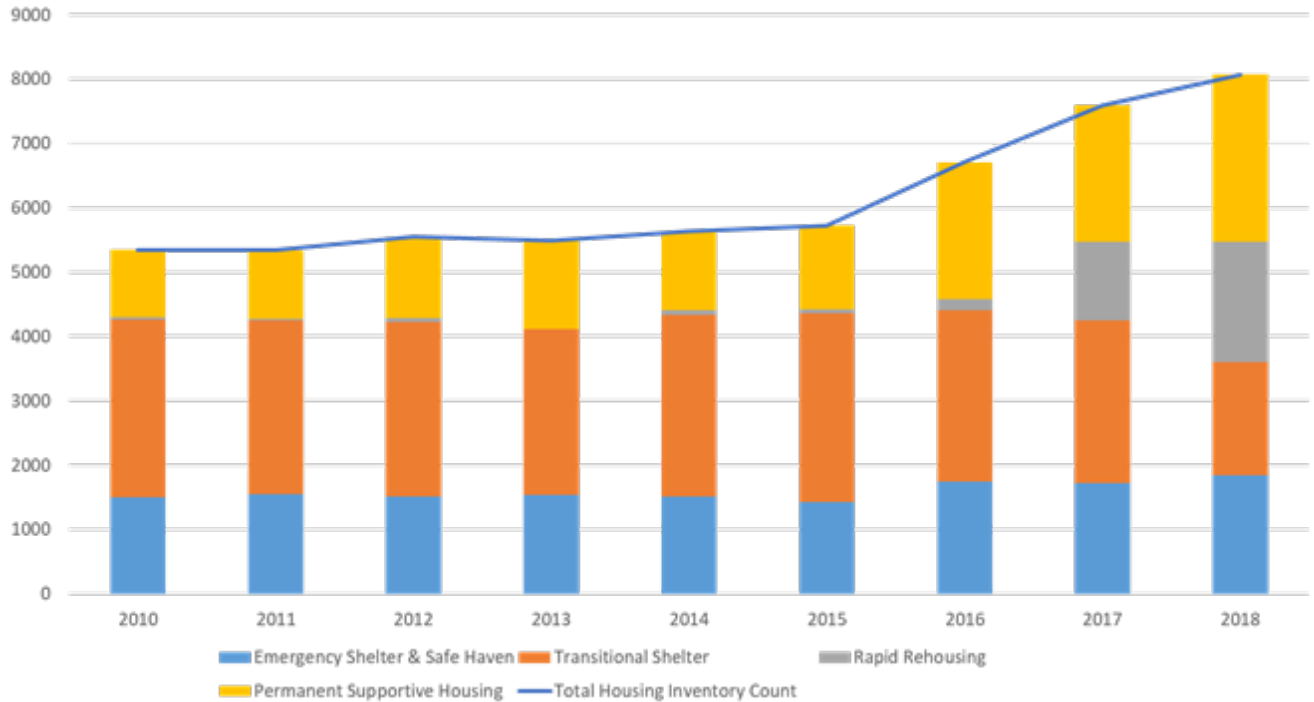


Figure 2. 2010-2018 Housing Inventory Count Data. Source: U.S. Department of Housing and Urban Development, Housing Inventory Count.

Between 2015 and 2018, the total number of temporary and permanent beds increased significantly from 5,700 to 8,008. In 2018, the number of permanent beds exceeded the number of temporary beds in the HIC for the first time, with a total of 4,409 permanent beds compared to 3,599 temporary beds. This increase in permanent beds correlates with increases in State and local funding for shelter and permanent supportive housing programs, such as the State's Housing First program, during this same period.

While the number of Rapid Rehousing and Permanent Supportive Housing beds increased between 2015 and 2018, the number of transitional shelter beds decreased significantly. The shift in resources from temporary to permanent reflects the housing-focused approach of the HICH strategic plan and framework.

An overview of the homeless service system – including services for both the shelter and unsheltered homeless populations – is summarized in **Figure 3** below.

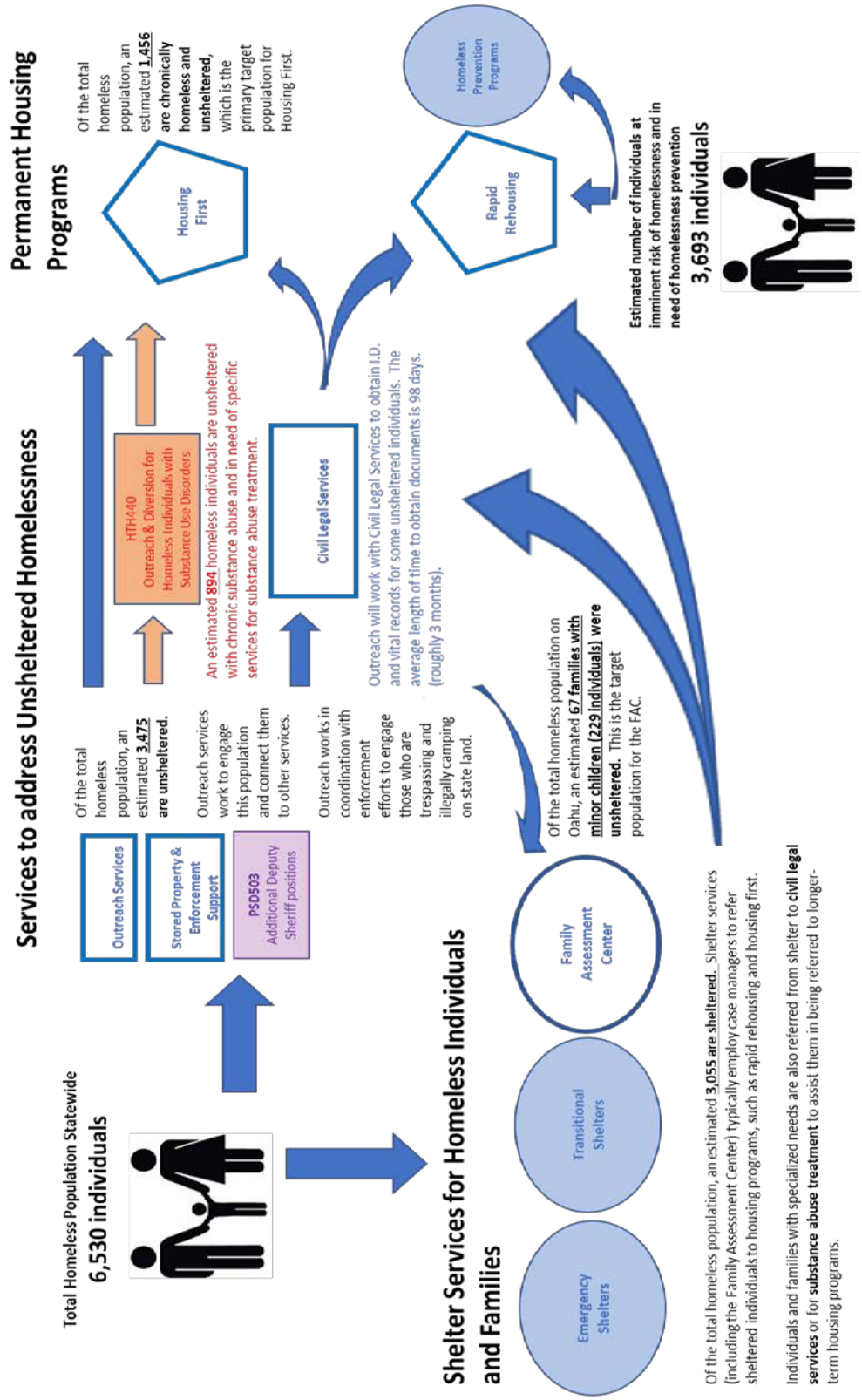


Figure 3. Overview of the homeless service system by program type, including services for the sheltered and unsheltered homeless populations, as well as for individuals that are housed but at imminent risk of homelessness.

C. Measures of Success - Exits to Permanent Housing and Length of Stay.

Per the HICH strategic plan and framework, and as instructed by the Legislature, DHS executed new contracts for all homeless service programs in February 2017, with a focus on tying funding to performance metrics that reflect a system where homelessness is a rare, brief, and non-recurring occurrence. Two specific metrics that are captured in the new homeless services contracts are the number of exits to permanent housing, and total length of stay in homeless programs.

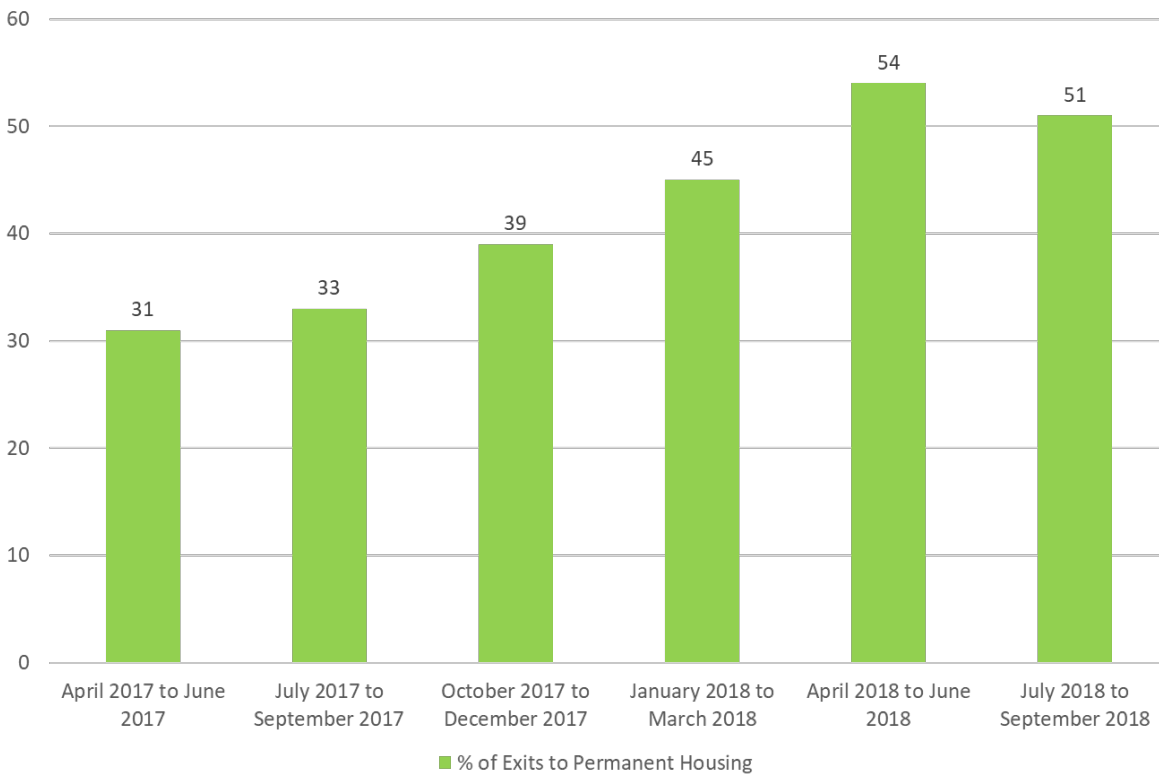


Figure 4. April 2017 to September 2018, Percentage of Individuals Exiting Homeless Programs to Permanent Housing. Source: Homeless Management Information System, Exit Data Reports.

The percentage of homeless individuals exiting a homeless service program to permanent housing has increased since the new DHS contracts began nearly two years ago. In the second quarter of calendar year 2017, the percentage of individuals exiting to permanent housing was 31%. In the most recent quarter (July 2018 to September 2018), over half (51%) of all individuals exiting homeless services were exiting to permanent housing.

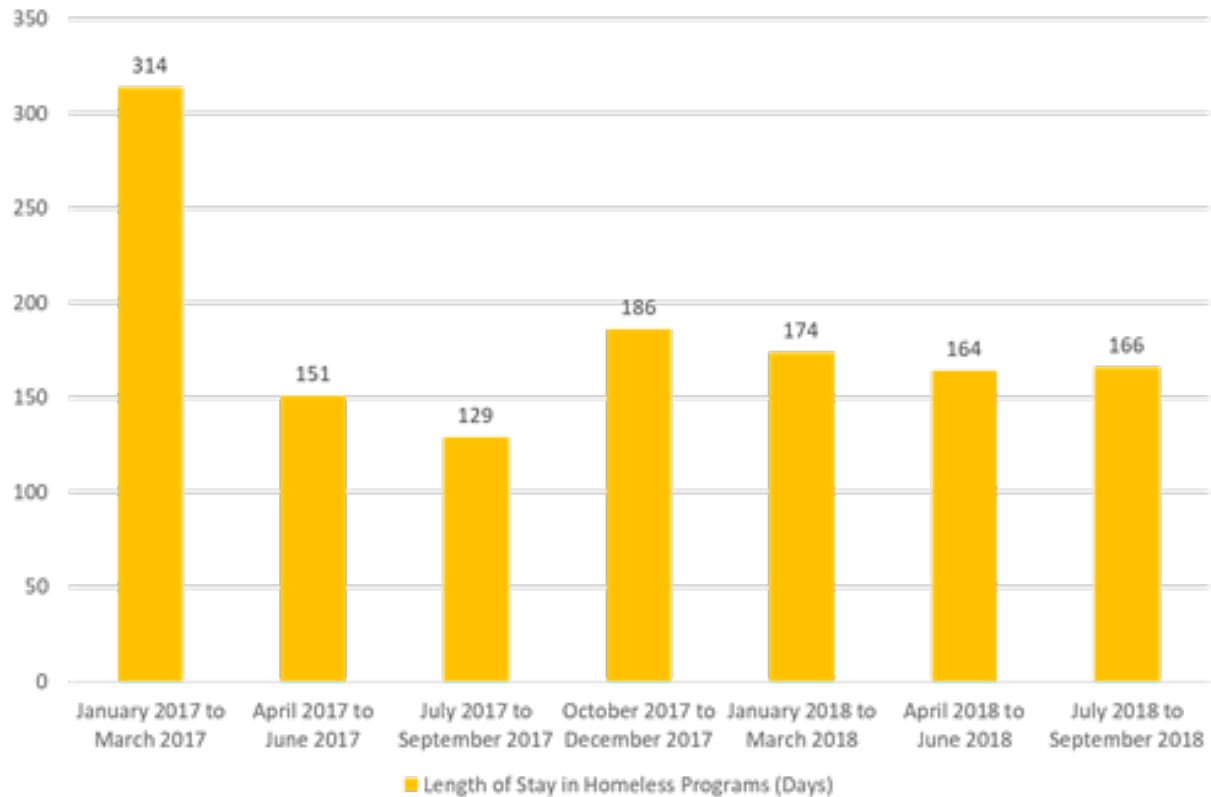


Figure 5. January 2017 to September 2018, Average Length of Stay in Homeless Programs in Days. Source: Homeless Management Information System, Monthly Monitoring Reports (Census/Timeliness/Length of Stay/Consent Report).

The average number of days enrolled in homeless programs has also decreased with the new performance metrics. In the first quarter of calendar year 2017, the average number of days enrolled in homeless programs was 314 days – nearly a full year. In the most recent quarter (July 2018 to September 2018), the average number of days enrolled in homeless programs had been reduced by nearly half to 166 days.

Length of stay in homeless programs is a key measure of efficiency in the homeless services system. The average length of stay in emergency shelter is currently at 101 days, and for transitional shelter is 243 days. By moving individuals more quickly through the homeless service system to permanent housing, the system can see a reduction in costs per person and a larger number of persons served for the same level of overall funding for a specific service.

III. **Ten-Year Statewide Plan and Framework to Address Homelessness**

A. Statutory Mandate

Section 346-381(a), HRS, tasks the HICH to “formulate, and advise the governor on the implementation of, a unified ten-year statewide plan to address homelessness in all Hawai’i Counties.” Additionally, the HICH is required to “report annually to the governor, the legislature, and the mayor of each county on the progress of its activities, including formulation and progress of the ten-year plan.”

B. Ten-Year Strategic Plan to End Homelessness

The HICH formally adopted the Ten-Year Statewide Plan to End Homelessness (“Ten-Year Plan”) on September 10, 2012. The plan was developed following a twelve-month strategic planning process, which included receiving input from service providers and key stakeholders in all four counties.

The Ten-Year Plan identifies four specific goals, and outlines specific objectives and strategies to achieve each goal. The four goals outlined in the plan are:

- **Goal 1: Retool the Homeless Crisis Response System**
This includes refocusing homeless services into a crisis response system that prevents homelessness and rapidly returns people experiencing homelessness to stable housing. A retooled homeless crisis response system also prioritizes critical services for funding, and ensures that information systems are integrated to improve effectiveness and efficiency of service provision.
- **Goal 2: Increase Access to Stable and Affordable Housing**
This includes the production and preservation of affordable housing, as well as the specific creation and preservation of permanent supportive housing options. In addition, this goal aims to eliminate barriers to government-funded affordable housing, including public housing and the Section 8 Housing Choice Voucher Program.
- **Goal 3: Increase Economic Stability and Self-sufficiency**
This includes increasing meaningful and sustainable employment for people experiencing homelessness, as well as improving access to appropriate mainstream programs and services that reduce financial vulnerability.

- **Goal 4: Improve Health and Stability**

This includes integrating primary and behavioral health care services with homeless and housing assistance programs. In addition, this includes a focus on health and stability for youth aging out of foster care and juvenile systems, as well as for people experiencing homelessness who have frequent contact with hospitals and the criminal justice system.

The full text of the Ten-Year Plan can be found on the [DHS website](#).

C. Hawai'i State Framework to Address Homelessness

In August 2016, building upon the Ten-Year Plan and previous plans, the HICH adopted a formal Hawai'i State Framework to Address Homelessness ("State Framework") to move Hawai'i forward in a way that is *pono* (Hawaiian for good, upright, righteous, correct, or proper). The State Framework was developed based on input received from federal, state, and local governments, service providers and other private sector representatives. The framework establishes that by 2020 the homeless response system will complete the transition to a Housing First system that connects people experiencing homelessness with the opportunity to move quickly into permanent housing.

Based upon 'Ohana Nui, a multigenerational approach that invests early and concurrently in children and families, the State Framework strategically presses on three levers to address homelessness:

- **Affordable Housing** – Hawai'i must build more affordable housing and maximize the use of existing inventory.
- **Health and Human Services** – Hawai'i will implement best practice approaches for services that are evidence-based and move homeless persons quickly into permanent housing, including close monitoring of the results of these services.
- **Public Safety** –Hawai'i will coordinate public safety efforts alongside homeless outreach, so that homeless persons are not simply asked to vacate a specific area, but are approached with respect and given personalized options to quickly connect to appropriate services and housing.

Clear, measurable objectives were established for each lever of change in the framework. An executive summary of the State Framework can be found on the [Office of the Governor](#) website.

Table 1. Objectives for State Framework to Address Homelessness, 2016-2020.

	Affordable Housing	Health & Human Services	Public Safety
Short term (2016)	Maximize the use of rental subsidies by convening landlord summits in every county and recruiting landlord participation.	Issue a new RFP for state homeless contracts, which are coordinated, performance-based, and focused on permanent housing.	Implement statewide policy to address homeless encampments on state lands.
Medium term (2018)	Streamline housing development by aligning rules and processes among state housing agencies.	Maximize efficiency by utilizing Medicaid and other funding streams for permanent supportive housing.	Divert homeless persons from the criminal justice system.
Long term (2020)	Build 10,000 new housing units by 2020.	Reduce the number of unsheltered people to functional zero by 2020.	Reduce to functional zero the number of encampments on state lands by 2020.

D. Implementation of the Ten-Year Plan and State Framework

In 2018, HICH staff and its membership moved forward with implementation of the Ten-Year Plan and State Framework with the following key achievements:

- **Goal 1: Retool the Homeless Crisis Response System**
 - **Ongoing monitoring for homeless systems performance** – DHS contracted with C. Peraro Consulting to produce monthly monitoring reports for homeless services statewide, including outreach, emergency and transitional shelter, rapid rehousing, and permanent supportive housing. The system monitoring reports are produced on a monthly basis and posted online at [Hawai'i Homeless Programs HMIS – Reports & Publications](#).
 - **Increased coordination for homeless outreach, including new partnerships with law enforcement and substance abuse treatment providers** – New partnerships were formed with law enforcement agencies to identify homeless individuals that would otherwise be at risk of being charged with low level offenses; instead, these individuals are linked with homeless outreach providers to ensure a connection with services, such as shelter or substance abuse treatment. The Law Enforcement Assisted Diversion (LEAD) program is being expanded beyond Honolulu to Hawai'i, Maui, and Kaua'i counties. In addition, the Department of Health (DOH) recently contracted the Hawai'i Substance Abuse Coalition (HISAC) to administer a statewide coordinated entry system for individuals seeking access to residential drug treatment or detox services.
 - **Advocacy to bring Permanent Supportive Housing to scale** – As part of the Hawai'i Pathways Project, DOH worked with the Corporation for Supportive



Figure 6. The Hawai'i Health & Harm Reduction Center provides training to Department of Land and Natural Resources conservation officers on the Law Enforcement Assisted Diversion (LEAD) program and other homeless outreach programs as part of a training academy for new officers. Partnerships such as LEAD are one of many recent changes to the homeless service system.

Housing to begin initial financial modeling work to estimate the cost and number of units necessary to have sufficient permanent supportive housing to address the number of people experiencing chronic homelessness in Hawai'i. The council is currently working with the Hawai'i Appleseed Center on Law and Economic Justice to build upon this initial work and to utilize the financial modeling data to advocate for state, local, and private funding to scale permanent supportive housing sufficiently.

- **Continued changes to the paradigm of homeless shelter** – The City and County of Honolulu's Hale Mauiola housing navigation center at Sand Island, and the State's Family Assessment Center in Kaka'ako both opened within the past two years and include a focus on rapid placement to permanent housing. The Family Assessment Center has a 91% housing placement rate, with families moving from intake to housing placement in an average of 81 days.
- **Alignment of multiple funding efforts** – Staff from the Governor's Coordinator on Homelessness, City & County of Honolulu, Partners in Care, Bridging the Gap, the Hawai'i Community Foundation, and Aloha United Way continued to meet as part of a Homeless Funders Hui. The group is working to align federal, state, local and philanthropic funding efforts, and to increase communication and collaboration.
- **Implemented efforts to address unauthorized encampments on state lands** – The Governor's Coordinator on Homelessness worked together with State departments to implement a coordinated approach to addressing encampments on state lands, which includes offering consistent outreach services and housing support to unsheltered homeless individuals and families. Between January 2018 and November 2018, nearly 400 individuals were identified and connected to shelter or other stable placements because of these coordinated efforts.

- **Goal 2: Increase Access to Stable and Affordable Housing**
 - **Increased overall housing production** - About 5,300 new housing units were produced in the last three years, with another 1,400 units under construction and 4,500 in various stages of planning. These efforts are supported by a combined appropriation of over \$400,000,000 over three years for the Rental Housing Revolving Fund and Dwelling Unit Revolving Fund.
 - **Partnerships with the Counties and private sector to increase permanent housing options for homeless families** – The State partnered with the counties and the private sector to increase permanent housing options for homeless individuals and families statewide. For example, the State provided land to the City and County of Honolulu and private sector stakeholders opened the Kahauiki Village project in January 2018. Kahauiki Village project adds 30 new housing units to serve 120 homeless individuals. The State also partnered with Hawai'i County to provide land in Kona for a long-term housing project for homeless individuals and families.
 - **Partnerships with local landlords and the faith-based community to maximize inventory** – Landlord summits have been convened in every county to expand the number of landlord, property managers, and rental supply of homes. In addition, faith-based summits were convened on O'ahu and Hawai'i Island to discuss opportunities for partnership with local churches and faith-based leaders.

- **Goal 3: Increase Economic Stability and Self-Sufficiency**
 - **Initiation of Job Training programs in partnership with emergency shelter** - The Next Step shelter provides job training opportunities to shelter residents in partnership with HCDA, which includes shelter residents to assist in providing janitorial and maintenance services for the Kaka'ako area parks. DHS contracts for homeless shelter also include specific performance metrics related to employment services and support for homeless families.
 - **Address the needs of children and families early and concurrently** – The 'Ohana Nui multi-generational approach to services has resulted in increased collaboration between the DHS and DOH. An example of the 'Ohana Nui approach is the Family Assessment Center, which involves a wide network of community partners – including DHS, DOH, Department of Education (DOE), Catholic Charities Hawai'i, Honolulu Community Action Program, Hawai'i H.O.M.E. Project, Partners in Development, and many others – to address the needs of families in the facility.

- **Goal 4: Improve Health and Stability**
 - **Strengthened intersection between healthcare and housing** – The Center for Medicare and Medicaid Services (CMS) recently approved DHS request to amend the state's existing 1115 Medicaid waiver to enable tenancy support services for chronically homeless individuals. DOH continues to work with the Queen's Medical Center and the HPD to administer an Intensive Case Management (ICM)

pilot program to assist homeless individuals with serious mental illness that experience a high rate of emergency room utilization. In addition, DHS is in the process of contracting with Queen’s Medical Center to implement two new pilot programs pursuant to Act 209 (SLH 2018) – the Emergency Department Homelessness Assessment and Medical Respite pilot programs.

- **Continued to pilot new models for Permanent Supportive Housing (PSH)** – The State and City and County of Honolulu continue to explore ways to utilize City owned properties for site based permanent supportive housing. The State will provide Ohana Zone funds to the City and County to pilot site-based permanent supportive housing at three City owned properties on O’ahu.
- **Continued to address discharge planning and transition of inmates exiting from incarceration** – DPS established MOAs with DOH and DOT to streamline the process for offenders to obtain birth certificates and state identification prior to discharge pursuant to Act 56 (SLH 2017). In addition, a partnership between DPS, Waikiki Health, and DHS has helped to ensure that offenders maxing out of the longest jail/prison sentences are enrolled in the Med-QUEST program for health coverage prior to discharge.
- **Expanded youth shelter and outreach capacity** – The Office of Youth Services and Hawai’i Youth Correctional Facility (HYCF) leased a portion of the HYCF campus for use as a homeless shelter for unaccompanied youth ages 18-24; this expansion of the population HYCF may serve is in recognition of the needs of unaccompanied homeless youth, and the passage of Act 208 (SLH 2018) that continues to move the state's juvenile justice system to a therapeutic model to support youth and young adults at risk of homelessness or involvement with the criminal justice system. The use of the campus for this purpose addresses a critical need identified by the 2018 Street Youth Study, and responds to the high percentage of unaccompanied youth identified in the statewide Point in Time Count.
- **Strengthened homeless coordination services for youth enrolled in public schools** – The Legislature provided additional full-time positions within the DOE for homeless concerns liaisons statewide. The DOE is currently in active recruitment for these positions.

IV. 2018 Activities of the Hawai’i Interagency Council on Homelessness (HICH)

A. Regular Meeting Schedule

The HICH convened four times in calendar year 2018. Meetings were held on the following dates: March 19, 2018; June 18, 2018; September 17, 2018; and December 17, 2018. Quorum was established at all four meetings. Agendas and Minutes for HICH meetings are available at the [DHS website](#).

B. Presentations to the HICH

The HICH provides a unique opportunity to connect with local and national experts addressing homelessness, and to share information and resources with HICH members and the public. Meetings convened in 2018 included presentations by the following organizations and individuals:

- **United States Interagency Council on Homelessness (USICH)** – Regional Coordinator Ms. Katy Miller attended the June 18, 2018 and December 17, 2018 meetings. Ms. Miller presented on the federal framework to address homelessness at the June 18th meeting, and provided an update on the USICH strategic plan at the December 17th meeting. Ms. Miller emphasized the importance of implementing low-barrier shelters and housing programs. Ms. Miller shared that Hawai'i's efforts to better coordinate outreach services are consistent with national guidance to utilize coordinated outreach strategies to address encampments located on public lands. In addition, Ms. Miller noted that the revised USICH strategic plan aligns with the HICH strategic plan and framework, and that both plans place an emphasis on increasing affordable housing, as well as focusing on economic mobility for people exiting homelessness.
- **University of Hawai'i Center on the Family and Hawai'i Pathways Project partners (Department of Health and Helping Hands Hawai'i)** – Dr. Sarah Yuan from the University of Hawai'i Center on the Family presented findings on the final evaluation of the Hawai'i Pathways Project at the March 19, 2018 meeting. Key findings of the Hawai'i Pathways Project evaluation included a 90 percent housing retention rate, decreases in frequency of health care utilization, and an average reduction in health care costs of \$6,197 per client per month. At the systems policy level, the Hawai'i Pathways Project engaged the Corporation for Supportive Housing to provide technical assistance to the DHS Med-QUEST Division in requesting an amendment to the state's existing 1115 Medicaid waiver. With the technical assistance, the Center for Medicare and Medicaid Services (CMS) approved the state's 1115 Medicaid waiver amendment in October 2018. DHS is currently working on implementation plans for the waiver amendment. In addition to technical assistance related to Medicaid, the Hawai'i Pathways Project engaged the Corporation for Supportive Housing to complete initial financial modeling work to determine the level of resources necessary to bring permanent supportive housing to scale. This work is currently being built upon by the Hawai'i Appleseed Center for Law & Economic Justice (Hawai'i Appleseed).
- **Law Enforcement Assisted Diversion (LEAD) Hawai'i Hui** – Ms. Heather Lusk, then-Executive Director of Hawai'i Health and Harm Reduction Center (HHHRC) presented at the March 19, 2018 meeting on the LEAD pilot project and the work of the LEAD Hawai'i Hui. In Hawai'i, LEAD is guided by a hui (network) of over-30 community organizations, which includes both private and governmental agencies. The pilot project is designed to reduce public costs related to criminal justice, such as the costs for court hearings, prosecution, and incarceration. In other communities, LEAD demonstrated positive

results, and an independent evaluation of the Seattle LEAD project found cost savings of \$350 per month per participant, and that 40% of homeless participants obtained permanent housing. The Hawai'i LEAD pilot will focus on the Chinatown area on O'ahu, and includes partnerships with both the Honolulu Police Department and the Hawai'i Department of Public Safety, Sheriffs Division. Ms. Lusk shared that the Hawai'i LEAD pilot will include an evaluation component by the University of Hawai'i at Manoa, College of Social Sciences.

- **Residential Youth Services and Empower (RYSE), Hale Kipa, and Waikiki Health Youth Outreach** – At the June 18, 2018 meeting, Ms. Carla Houser of RYSE, Mr. Alike Campbell of Hale Kipa, Mr. Kent Anderson of Waikiki Health, and Dr. Sarah Yuan from the University of Hawai'i Center on the Family presented key findings of the Street Youth Study Report. The Street Youth Study surveyed a total of 151 youth, with over 75% between the ages of 18-24. Key findings included that the average age at first experience of homelessness was 14.1 years and most youth had their first experience of homelessness with family. Prominent factors for youth homelessness identified in the study included abuse, family-based risk factors, and negative interactions with foster care and the juvenile detention systems. The Street Youth Study can be found on the University of Hawai'i's Center on the Family website [here](#).
- **American Civil Liberties Union (ACLU)** – ACLU Staff Attorney Jongwook 'Wookie' Kim presented at the September 17, 2018 meeting on the role of the ACLU relating to homelessness. Mr. Kim reviewed the following legal terms and concepts that commonly apply when the courts consider the constitutionality of laws relating to homelessness – Eighth amendment prohibitions against cruel and unusual punishment; volitional conduct; equal protection; substantive rights (e.g. right to travel/freedom of movement, etc.); procedural due process; vagueness and arbitrary enforcement; and overbreadth. Mr. Kim also shared the ACLU's analysis of a recent Ninth Circuit Court of Appeals decision in *Martin v. Boise*, which clarified that the availability of shelter space during an enforcement action must be considered from a practical standpoint. Specifically, the mere number of vacant beds within a city is not sufficient, and cities must ensure that available beds are realistically available to an individual, including shelter rules, distance, and time limits on length of stay. Mr. Kim informed the council that the interpretation of laws requires striking a tough balance between the rights of all people, including considering the balance of constitutional harm being done to people experiencing homelessness.
- **Puuhonua O Waianae and Dynamic Community Solutions** – Ms. Twinkle Borge of Puuhonua O Waianae and Mr. James Pakele of Dynamic Community Solutions provided a brief presentation at the September 17, 2018 meeting on the status of the Puuhonua O Waianae encampment located near the Waianae Small Boat Harbor. Ms. Borge and Mr. Pakele shared that the long-term goal of the Puuhonua O Waianae is to purchase a piece of property to establish communal living, which will include centralized kitchens and bathrooms with tiny homes in the surrounding area. Mr. Pakele shared that cost

estimates for the tiny homes are around \$4,600 per unit without plumbing or electrical connections, and the goal is to keep monthly operating costs per household between \$100 to \$120 per month. The Puuhonua O Waianae is working together with the Department of Land & Natural Resources on a long-term transition plan to relocate the encampment to privately-owned lands. Ms. Borge encouraged the council to seek continued input from people with lived experience of homelessness, and emphasized the importance of addressing trauma when working with individuals transitioning from homelessness to housing.

- **Partners in Care and Bridging the Gap** – Leadership of Partners in Care and Bridging the Gap, the Continua of Care for O’ahu and the neighbor islands respectively, provided presentations at the June 18, 2018 and December 17, 2018 meetings. The continua provided an updated on the 2018 statewide Point in Time count results, and planning efforts for the 2019 statewide Point in Time count. In the 2018 count, every county experienced a decrease in its homeless population, with Kaua’i recording the highest percentage decrease. The 2019 count will be conducted between January 22-25, 2019 and dates have been coordinated between the two continua. Partners in Care also presented to the council on its advocacy efforts during the 2018 session, and presented proposed advocacy priorities for 2019 for the council’s consideration. In addition, Partners in Care shared that it hired a new Executive Director Sam Millington who started work in December 2018. Partners in Care and Bridging the Gap will continue to coordinate efforts related to the Point in Time Count, advocacy, and oversight of federal funding to ensure alignment between O’ahu and the neighbor islands.
- **Honolulu Police Department, Community Outreach Division** – Captain Mike Lambert and Sergeant Joseph O’Neal of the Honolulu Police Department (HPD) presented at the September 17, 2018 meeting and shared information about the new Health, Efficiency, and Long-term Partnerships (HELP) program, which connects HPD officers with homeless service providers to better coordinate outreach efforts for unsheltered individuals. Between April 2018 to August 2018, a total of 127 homeless individuals have been connected to shelter or other placements through coordinated outreach efforts led by HELP – this includes 20 individuals sheltered during daytime efforts, and 107 individuals sheltered during nighttime efforts. HELP conducts two mini outreach efforts each week during the daytime, and one large monthly outreach during the evening. Sergeant O’Neal explained that a new Joint Outreach Center (JOC) is a critical component of HELP and is a collaboration between HPD, the Hawai’i Homeless Healthcare Hui (H4), Institute for Human Services, Kalihi-Palama Health Center, HHHRC, and the H.O.M.E. Project. The JOC provides urgent care services to divert homeless individuals from hospital emergency department services and is estimated to save approximately \$100,000 per week in emergency room costs. HPD plans to expand HELP in 2020 and will request funding for two additional sergeants and eight additional officers in the budget.

- **Hawai'i Appleseed Center for Law & Economic Justice** – Mr. Gavin Thornton, Co-Executive Director of Hawai'i Appleseed presented at the September 17, 2018 meeting. Specifically, Mr. Thornton shared financial modeling efforts to bring permanent supportive housing to scale, which built upon initial financial modeling efforts started by the Hawai'i Pathways Project and the Corporation for Supportive Housing. Based on interviews with housing developers and service providers statewide, as well as a review of 2018 Point in Time count data, Mr. Thornton estimates that \$766 million is needed to fund permanent supportive housing over the next ten years to create enough housing for people experiencing chronic homelessness. Although the cost is high, Mr. Thornton estimates that bringing permanent supportive housing to scale will result in \$2.16 billion cost savings to the public, primarily in reductions to health care costs if the chronically homeless population is stably housed. As part of its analysis, Hawai'i Appleseed determined that new permanent supportive housing should include both scattered site and site-based models. Following the September 2018 presentation, HICH member Mr. Dave Rolf shared Hawai'i Appleseed's initial projections with business sector stakeholders and is working with Hawai'i Appleseed to further flesh out the numbers and ground truth key assumptions.

C. Actions of the HICH

As an advisory council, the HICH has the authority to make recommendations regarding policy and programming to address homelessness. The HICH Chair also participates in national conferences and work groups to share best practices from Hawai'i with other communities, as well as to learn from the experience of other communities. In 2018, the following are key actions taken by the HICH and its Chair:

- **Adopted legislative priorities for the 2019 session** – The HICH voted to adopt a set of legislative priorities for the 2019 session, which includes a focus on increasing the development of low-income housing and permanent supportive housing, sustaining funding for core homeless programs and services (e.g. Housing First, Rapid Rehousing, Family Assessment Center, etc.), aftercare services for homeless families exiting shelter to permanent housing, mental health treatment and case management, and establishing the position of the Governor's Coordinator on Homelessness in statute. The priorities reflect the goals and priorities established by the ten-year statewide plan and framework to address homelessness.
- **Presented on the topic of 'sanctioned encampments' at a national conference** – The Chair was selected by the National Alliance to End Homelessness (NAEH) to present at its national conference in July 2018 regarding the issue of sanctioned encampments. The Chair shared the approach that Hawai'i used to evaluate the effectiveness of sanctioned encampments as a strategy to address homelessness, and provided information about the state's experience in administering safe zones. The Chair received positive feedback for the presentation, and the Chair's office was invited to participate in a similar panel at another NAEH national conference on unsheltered homelessness in February 2019.

- **Participated in two national convenings on unsheltered homelessness** – The Chair was selected by the USICH and HUD to participate in two national convenings to provide feedback as USICH and HUD developed technical assistance strategies to address unsheltered homelessness. Specifically, the Chair provided information about several efforts, including the adoption of performance metrics in DHS homeless service contracts, the efforts to amend the 1115 Medicaid waiver to include tenancy supports, and coordinated outreach and diversion partnerships with law enforcement.
- **Supported local efforts to bring permanent supportive housing to scale** – The council worked with DOH and the Hawai'i Pathways Project to engage the Corporation for Supportive Housing to begin initial financial modeling work related to scaling permanent supportive housing, and recently partnered with Hawai'i Appleseed to further build upon these initial efforts.
- **Solicited input on revision of the strategic plan and framework to address homelessness** – A Permitted Interaction Group (PIG) was formally established in 2017 pursuant to section 92-2.5, HRS. The PIG continues to meet and solicit input to recommend revisions to the strategic plan and framework to address homelessness. The PIG has initiated further discussion with the full council to specifically address the unsheltered and unaccompanied youth sub-populations of homeless individuals, as well as additional initiatives to expand permanent supportive housing inventory. The PIG plans to recommend revisions to the plan and framework to the full council in early 2019.

V. Conclusion

The HICH continues to make progress in implementing the four goals of the Ten-Year Plan, as well as the three levers of the State Framework. A key indication of this progress is that the estimated number of homeless individuals statewide continues to decrease, including decreases among all four counties and key homeless sub-populations (e.g. unsheltered homeless individuals, chronically homeless individuals, homeless youth, homeless families, and homeless children under age 18). According to the 2018 statewide Point in Time (PIT) count, the number of homeless individuals statewide decreased by 18% between 2016 and 2018 – a decrease of over 1,400 individuals.

The HICH will continue its work to maintain forward momentum to establish and scale partnerships between the public and private sectors. The HICH is committed to utilizing its diverse membership to discuss policy issues, and build solid partnerships that continue to move the needle to address this complex statewide challenge.

Homelessness in Hawai'i remains a complex challenge that requires a complete system approach, a significant commitment of time, resources, and a high level of resiliency by all involved. For more information on state efforts to address homelessness, please contact the Governor's Coordinator on Homelessness at (808) 586-0193 or gov.homelessness@hawaii.gov.

PART II:

ACT 209 (SLH 2018) OHANA ZONES PILOT PROGRAM

Act 209 (SLH 2018), Part I, Section 4, requires the Governor’s Coordinator on Homelessness to submit a report to the Legislature regarding the efforts of the Office of the Governor and executive branch agencies to develop and implement the Ohana Zones pilot program, including a summary of the process used to identify possible locations, a monthly timetable of milestones, and performance measures for the pilot program.

This report highlights the following key points:

- Definition of Ohana Zones;
- Criteria and process used to identify potential Ohana Zone locations;
- Listing of Ohana Zone sites, including level of funding for each proposed location;
- Performance measures to evaluate the pilot program, including evaluation criteria and process used to review the success and sustainability of Ohana Zones;
- Monthly timetable of milestones for the pilot program; and
- Monitoring and oversight controls to prevent possible fraud, waste, and abuse and ensure compliance with local, state, and federal laws.

The Ohana Zone pilot program is consistent with Goals 1, 2, and 4 – Retooling the Homeless Crisis Response System, Increasing Access to Stable and Affordable Housing, and Improving Health and Stability - of the HICH 10-year strategic plan, and is consistent with the housing-focused approach of the HICH framework to address homelessness.

I. Definition of Ohana Zones.

An "Ohana Zone" is defined in Act 209 (SLH 2018) as “a place: (1) That has a program to address basic needs of individuals experiencing homelessness; and (2) Where wrap-around services, social and health care services, transportation, and other services may be offered with the goals of alleviating poverty and transitioning individuals experiencing homelessness into affordable housing.”

The Act further provides that, “the use of the term ohana is not meant to suggest that the use of an ohana zone is limited to nuclear families or people related by blood, but rather that an ohana zone provides a welcoming, safe haven where individuals experiencing homelessness and those who serve them treat each other as an extended family.”

To be clear, an Ohana Zone is not the same as a ‘safe zone,’ a ‘sanctioned encampment,’ or a ‘tent city.’

Both the U.S. Interagency Council on Homelessness (USICH) and the U.S. Department of Housing and Urban Development (HUD) have expressed concerns about the establishment of safe zones and sanctioned encampments. Specifically, the USICH acknowledge in a 2015 report that the formation of encampments does not represent an end to homelessness, and can “serve to

distract communities from focusing on what is most important – connecting people to safe, stable, permanent housing.” In 2017, when the HICH established a working group to examine the concept of safe zones, the HUD representative on the working group clarified that “HUD generally does not support the creation of safe zones . . . more commonly referred to as tent cities.”

II. Criteria and Process Used to Identify Ohana Zone Sites.

The criteria to determine Ohana Zone sites is partially outlined in Act 209 (SLH 2018), Part I, Section 3, and states that Ohana Zones “shall be situated on public lands; provided that the designated agencies shall identify at least three sites on O’ahu and one site on each of the islands of Hawai’i, Kaua’i, and Maui.”

State or County properties with existing facilities and infrastructure were prioritized for consideration for the Ohana Zone pilot program due to the reduced length of time necessary to convert an existing facility for use as compared to properties with no infrastructure or properties requiring extensive site work and development.

Relevant data relating to the current state of homelessness in Hawai’i was also reviewed to determine key sub-populations of homeless individuals that could most benefit from the Ohana Zone pilot program. According to 2018 statewide Point in Time Count data, two key sub-populations are chronically homeless individuals and unaccompanied homeless youth. As mentioned previously in this report, Hawai’i has high rates of both unsheltered homelessness and chronic homelessness.

Finally, there is a need to develop more site-based permanent supportive housing projects that are fixed at a specific location. The HICH strategic plan and framework to address homelessness were factors in prioritizing potential Ohana Zone sites and accompanying services. A key focus of HICH meetings has been the need to scale the available level of permanent supportive housing to meet the number of unsheltered chronically homeless individuals. Although the number of permanent housing beds has increased significantly in recent years, there continues to be a shortfall of available permanent supportive housing beds compared to the estimated number of chronically homeless individuals. Because the majority of permanent supportive housing programs are provided through a scattered site voucher method, predominantly through the private housing market, with the Ohana Zones funding, more site-based permanent supportive housing has become an additional housing option. Accordingly, sites that demonstrated potential to increase capacity for permanent supporting housing or emergency shelter were given high priority.

III. Listing of Ohana Zone Sites.

The Office of the Governor announced an initial list of Ohana Zone sites, and funds are being transferred to DHS, DOH, and the Office of Youth Services to oversee contracts for services at the identified locations. A list of the identified sites is provided in **Table 2** below. The initial list

of sites is on track to exceed the minimum number of Ohana Zone sites required by Act 209 (SLH 2018).

In addition to the identified sites, the Office of the Governor is engaged in continued discussion with the DOH and the Counties of Hawai'i, Maui, and Kaua'i, and the City & County of Honolulu to identify additional sites and projects to be considered for the Ohana Zone pilot program. One of the potential projects being explored is the designation of an Ohana Zone site where individuals may be diverted to from Law Enforcement Assisted Diversion (LEAD) or similar diversion programs established in the various counties.

IV. Performance Measures.

A summary of performance measures established for the Ohana Zone pilot program is found in **Table 3** below. In addition to the funding allocated for Ohana Zone sites in **Table 2**, \$150,000 is being set aside for a final program evaluation, that will include an evaluation of the current homeless system. The evaluation and performance measure data will be utilized to determine the success and sustainability of the pilot program, as well as to inform HICH.

Table 2. List of Ohana Zone locations as of December 2018.

LOCATION	DESIGNATED STATE AGENCY	PROJECT NAME	NO. OF OHANA ZONE SITES	BRIEF DESCRIPTION OF PROJECT	ANNUAL FUNDING	TOTAL FUNDING OVER 3 YEARS
O'ahu	DHS	Permanent Supportive Housing for Chronically Homeless Individuals	3	The City & County of Honolulu will operate three sites on the island of O'ahu that will provide a total of 60 units of site-based permanent supportive housing.	\$1,500,000 (\$500,000 per site)	\$4,500,000
O'ahu	DHS	Villages of Maili	1	Catholic Charities Hawai'i will operate an 80-unit facility in Leeward O'ahu that will provide 48 units of permanent supportive housing, and 32 units that will serve as an assessment center for homeless individuals and families. The project will serve an estimated 340 homeless people per year.	\$2,500,000	\$7,500,000
O'ahu	OYS	Youth Shelter Services	1	RYSE (Residential Youth Services & Empowerment) will expand its existing youth shelter to increase capacity to a total of 30 beds for homeless youth, ages 18-24. Ohana Zone funds will fund medical and outreach services to support the shelter program.	\$600,000	\$1,800,000
O'ahu	DHS	Renovations to existing shelter facilities on State-owned land	2	Ohana Zone funds will support renovations at two State-owned shelter facilities located at Kalaeloa on O'ahu. The renovations will enable the continuation of shelter services for homeless individuals and families.	----	\$2,000,000
Hawai'i County	DHS	Na Kahua Hale O Ulu Wini	1	The County of Hawai'i will enhance its existing services at Ulu Wini in West Hawai'i by converting 13 units at the project to be used as permanent supportive housing, and 10 units at the property to be used as emergency shelter.	\$500,000	\$1,500,000
		TOTAL NUMBER OF OHANA ZONE SITES ESTABLISHED	8	TOTAL LEVEL OF FUNDING	\$5,100,000 per year	\$17,300,000 over three years

Table 3. Performance Measures for Ohana Zone Pilot Program.	PSH	Shelter
1. Length of Time (LOT)		
1.1 Total and average # of days in program: Measured from program enrollment to exit	✓	✓
2. Recidivism		
2.1 Total # and % of those permanently housed who remain housed for more than 3 months, 6 months	✓	✓
2.2 # of those returning to homelessness in less than 6 months, 12 months, 24 months after being successfully housed	✓	✓
2.3 Total # and % of those in <i>permanent supportive housing</i> that remained permanently housed from initial entry	✓	
2.4 Total # and % of those who exited <i>PSH</i> for positive reasons and have not returned to homelessness	✓	
3. Access/Coverage		
3.1 # and % of eligible homeless in program with VI-SPDAT assessment	✓	✓
3.2 # and % of total unsheltered homeless contacted that are engaged/enrolled in the program		
3.3 % of beds and units being utilized/occupied	✓	✓
4. Successful Housing Placement		
4.1 Total # and % of homeless persons/households served who exited into permanent housing	✓	✓
4.2 Total # and % of homeless persons/households who exited into institutions	✓	✓
4.3 Total # and % of homeless persons/households who exited into temporary destinations	✓	✓
4.4 Total # and % of homeless persons who exited and were successfully reunited with family (youth only)		✓

V. Monthly Timetable of Milestones.

A timetable of key milestones for the Ohana Zone pilot is provided in **Table 4** below.

VI. Monitoring and Oversight Controls.

The departments administering Ohana Zone funds will contract with qualified service providers that will provide services at each designated Ohana Zone site. The services provided will be monitored according to the terms of the contract, and the service provider will provide regular fiscal and programmatic reports to ensure oversight over program funding and that the performance measures for the pilot program are met.

Table 4. Timetable of Key Milestones.

Quarter	Milestone
July 2018 to September 2018	Development of criteria for potential Ohana Zone locations.
	Development of timetable for key milestones and deliverables.
	Initial determination of agencies to administer Ohana Zone funds.
	Begin vetting of potential Ohana Zone locations.
October 2018 to December 2018.	Identification of agencies administering Ohana Zone funds.
	Development of performance measures for pilot program.
	Announcement and selection of initial Ohana Zone locations.
	Submit initial legislative report with status of implementation.
January 2019 to March 2019	Finalize contracts for initial Ohana Zone locations.
	Continue vetting and selection of additional Ohana Zone locations.
	Begin monitoring and program evaluation for initial Ohana Zone locations.
April 2019 to June 2019	Continue monitoring and program evaluation for initial Ohana Zone sites.
	Begin monitoring and program evaluation for new sites established during the prior quarter.
	All Ohana Zone sites are identified, and all contracts are executed prior to June 30, 2019.
July 2019 to September 2019	Continue monitoring and program evaluation for all Ohana Zone locations.
October 2019 to December 2019	Continue monitoring and program evaluation.
	Submit annual legislative report with status of implementation, an evaluation of whether performance objectives have been met or exceeded, any proposed changes necessary to adjust performance measures, and an assessment on program impact on homelessness in Hawai'i.
January 2020 to March 2020	Continue monitoring and program evaluation.
April 2020 to June 2020	Continue monitoring and program evaluation.
July 2020 to September 2020	Continue monitoring and program evaluation.

Table 4. Continued.

Quarter	Milestone
October 2020 to December 2020	Continue monitoring and program evaluation. Submit annual legislative report with status of implementation, an evaluation of whether performance objectives have been met or exceeded, any proposed changes necessary to adjust performance measures, and an assessment on program impact on homelessness in Hawai'i.
January 2021 to June 2021	Continue monitoring and program evaluation. Submit final report on the status of the program and performance over the three-year pilot period.

VII. Conclusion.

The Ohana Zone pilot program offers a unique opportunity to build upon the ten-year statewide plan and framework to address homelessness that HICH has been leading since 2012. While HICH has been focused on efforts to scale the number of available permanent supportive housing beds, the introduction of the Ohana Zone program is the first new funding to develop new site-based permanent supportive housing projects.

As we acknowledge the coordinated effort required to achieve two consecutive years of decrease in the statewide homeless population, including one of the largest numeric decreases in homelessness between 2017 and 2018, we know that we still have more to learn and to improve upon as the rate of unsheltered homeless individuals – and particularly the rate of unsheltered chronically homeless individuals – remains high.

There is clear evidence that the Housing First programs work; that permanent supportive housing is effective at addressing the needs of chronically homeless individuals; and that permanent supportive housing can also result in significant reductions in public cost (e.g. healthcare and criminal justice related costs) over time. The Governor's Coordinator on Homelessness will continue to work with the Office of the Governor, DHS, DOH, and other executive branch agencies to vet additional sites and uses of Ohana Zone funds. In alignment with both the USICH and Hawai'i strategies to address homelessness, a continued focus will be on improving interventions that ensure homelessness will be brief and non-recurring event in the lives of individuals and families.

PART III:
**ACT 209 (SLH 2018) EMERGENCY DEPARTMENT HOMELESSNESS
ASSESSMENT AND MEDICAL RESPITE PILOT PROGRAMS**

Part II, Act 209 (SLH 2018), requires DHS to establish two separate pilot programs that will cease to exist on June 30, 2019:

1. An **Emergency Department Homelessness Assessment** pilot program that shall consist of multidisciplinary teams that shall (1) Identify patients experiencing homelessness or those at risk of homelessness with high utilization of emergency department services; (2) Assess the patient's current circumstances; and (3) Coordinate and refer these patients to appropriate and available wrap-around supports and community resources along the entire continuum of care with a goal of reducing costs and with chronic use of hospital emergency departments; and
2. A **Medical Respite** pilot program that shall provide emergency housing for eligible individuals experiencing homelessness who are discharged from the participating hospital and provide, at minimum, meals, case management, and medical, nursing, and psychiatric care, provided that the facilities shall comply with DOH standards of accessibility, sanitation, and other requirements, as determined by DOH for facilities of similar use.

Act 209 (SLH 2018), part II, sections 7(c) and 9(c), require DHS to submit a report to the legislature regarding findings and recommendations related to the two pilot programs, including any proposed legislation. Specifically, DHS is required to summarize and provide an explanation of the data regarding the efficacy of emergency department intervention by the Emergency Department Homelessness Assessment pilot program in mitigating the number of unnecessary emergency department visits by patients experiencing homelessness or patients at risk of experiencing homelessness.

DHS selected the Queen's Medical Center as the contractor for both the Emergency Department Homelessness Assessment and the Medical Respite pilot program. The Queen's Medical Center was selected because the center has an established Emergency Department Homelessness Assessment and Medical Respite program and has demonstrated the ability to provide a privately funded match for government funding. As of the date of this report, the parties are actively engaged in contract negotiations.

Since the two pilot programs have not yet been initiated and to avoid the lapse of the non-recurring funds, one recommendation is for Act 209 (SLH 2018) to be amended to extend the sunset date for the pilot programs. If the sunset date for the programs are not extended, there will not be enough time for the Queen's Medical Center to implement the pilots and DHS will be unable to sufficiently evaluate the effectiveness of the programs and make recommendations to continue, modify, or terminate either program.

KEY TERMS AND DEFINITIONS

Affordable housing—In general, housing is considered “affordable” when the cost is less than 30 percent of a household’s income. When housing costs exceed this amount, a household is considered to be housing-cost burdened. With an estimated 57.5% of renters paying more than one-third of their income to rent, Hawai‘i has the second highest number of cost-burdened renters in the nation.³ The households who face the most severe lack of affordable housing are the extremely low income, who earn less than 30% Area Median Income (AMI), or less than \$28,750 per year for a household of four in Honolulu.

Chronically Homeless—A person who is chronically homeless is a homeless person with a disability who has been homeless continuously for at least 12 months, or has been homeless on at least four separate occasions over the past three years. The combined length of time in those four or more occasions must be twelve months or more, as specified in the Final Rule on the definition of “chronically homeless” issued by HUD in December 2015.⁴ A chronically homeless family is a family with an adult head of household who meets the definition for a chronically homeless person. State law also defines "chronically homeless individual" to mean a homeless individual who has an addiction or a mental illness, or both. Section 346-378(e), HRS.

Continuum of Care (CoC)—A CoC is a regional or local planning body that coordinates housing and services funding from HUD for homeless families and persons. In Hawai‘i there are two CoCs – Partners in Care for the island of O‘ahu, and Bridging the Gap for the balance of the state. Each CoC includes membership from government agencies, homeless service providers, funders, and other interested members of the community. Each CoC is responsible for submitting an annual application for federal homeless assistance funds. The federal funding for homeless services are sometimes also referred to as “CoC funds.” In addition to applying for funding, the CoC is also tasked with administering the annual Point in Time Count (PIT) of the homeless population and the annual Housing Inventory Count (HIC). These counts provide an overview of the state of homelessness in a CoC.

Coordinated entry system—Coordinated entry is a process to ensure 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. A coordinated entry system helps communities to prioritize housing and homeless assistance based on a homeless person’s vulnerability and the severity of their needs, so that people who need assistance the most can receive it in a timely manner. Federal law requires that CoCs establish a coordinated entry system.

Emergency shelter—An emergency shelter generally is a facility with overnight sleeping accommodations that provides short-term, temporary shelter for homeless persons and does not require occupants to sign a lease or occupancy agreement. Emergency shelters differ from

³ Corporation for Enterprise Development. *Assets & Opportunity Score Card, Housing Cost Burden – Renters*. Available at: <http://scorecard.assetsandopportunity.org/latest/measure/housing-cost-burden-renters>. Accessed April 25, 2016.

⁴ Homeless Emergency Assistance and Rapid Transition to Housing: Defining “Chronically homeless.” 80 Fed. Reg. 75791. (December 4, 2015).

transitional housings (also known as transitional housing) that typically allows a maximum stay of up to 24 months.

Functional zero—This is a point where a community has both sufficient and appropriate housing resources to assist homeless persons encountered in their community. Functional zero does not mean that there is zero homelessness; instead Functional Zero means that a community has the full capacity and resources needed to connect people to shelter or permanent housing.

Homeless Management Information System (HMIS)—The HMIS is a local information technology system used to collect client-level data, and data on the provision of housing and services to homeless persons and families, as well as persons at immediate risk of homelessness. The HMIS system is owned and administered by the Continuum of Care—Partners in Care and Bridging the Gap. HUD requires communities receiving certain federal funds to maintain a HMIS.

Homeless Service Utilization Report—The utilization report is an annual report produced by the University of Hawai'i Center on the Family and the HPO. The report provides an analysis of homeless service programs that input data into the HMIS. The utilization report typically focuses on data captured within a state fiscal year.

Homeless outreach—The work of homeless outreach includes meeting homeless persons on streets or sidewalks, or in remote rural areas that includes beaches and valleys. Outreach providers assist with the completion of program applications, the determination of program eligibility, housing search and placement, and work with the person to obtain identification and other vital documents (e.g., birth certificate or social security card).

Housing First—Housing First is a philosophy and approach that centers on providing homeless people with housing quickly and then providing services as needed. In a Housing First approach, there is an immediate and primary focus on accessing and sustaining permanent housing for all homeless populations. In addition, the term is used to refer to specific permanent supportive housing programs operated by the State and the City and County of Honolulu. The State and City Housing First programs adopt the philosophy, and also specifically target chronically homeless households for services.

Housing Inventory Count (HIC)—The HIC is a Point-In-Time inventory of programs within a Continuum of Care that provide beds and units dedicated to serve persons who are homeless. The HIC includes beds for emergency shelter and transitional housing, as well as permanent housing beds.

Permanent supportive housing (PSH)—PSH is a service delivery model that combines low-barrier affordable housing, health care, and supportive services to enable homeless persons to attain and maintain permanent housing. PSH programs typically target chronically homeless persons, or homeless persons who experience multiple barriers to housing and are unable to maintain housing stability without supportive services. PSH programs have positive impact on housing status, and also result in cost savings to various public service systems, including health

care. The State and City & County of Honolulu Housing First programs that target chronically homeless persons are both examples of a PSH program.

Point-In-Time (PIT) Count—A PIT Count is an unduplicated count on a single night of the people in a community who are experiencing homelessness, and includes both the sheltered and unsheltered populations. HUD requires communities receiving federal funds for homeless services conduct a PIT Count at least every other year. During these counts, communities are required to identify whether a person is an individual, a member of a family unit, or an unaccompanied youth under the age of 18. In addition, communities must identify if a person is chronically homeless.

Rapid Rehousing—Rapid Rehousing places a priority on moving a family or individual experiencing homelessness into permanent housing as quickly as possible. The duration of financial assistance provided in a rapid Rehousing program can include either short-term (up to 3-months) or medium-term (6-months to 24-months) support. In general, the core components of rapid Rehousing are housing identification, rent and move-in assistance, and case management.

Section 8 Housing Choice Voucher Program— “Section 8” refers to Section 8 of the Fair Housing Act (FHA) as Title VIII of the Civil Rights Act of 1968, as amended, that authorizes the payment of rental housing assistance to private landlords for low-income households. A common form of Section 8 assistance is the HUD Housing Choice Voucher Program, also known as the Section 8 Housing Choice Voucher Program, which provides direct rental payment to the landlord. Typically, a Section 8 voucher recipient will pay one-third of their income towards rent, with the remaining balance of rent provided by the Section 8 voucher payment. A Section 8 voucher typically provides a full rental subsidy, as opposed to a shallow rental subsidy.

Shallow rental subsidy—Shallow rental subsidy or shallow subsidy refers to financial assistance for housing costs that cover only a fixed portion of the rent for a period of time, as opposed to the full cost of the entire rent on an ongoing basis. The Rapid Rehousing program and the special rent supplement program are two different examples of a shallow rental subsidy.

Transitional housing—Transitional housing, also referred to as transitional housing, is designed to provide homeless persons and families with temporary stability and support, so that they can eventually move to and maintain permanent housing. Transitional housing is generally for a period of up to 24 months of housing with accompanying supportive services.

Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT)—The VI-SPDAT is a common tool used to assess the level of need for homeless persons seeking housing assistance. There are different versions of the VI-SPDAT for use with individuals, families with minor children, and for youth. The tool triages homeless persons into three levels of need— permanent supportive housing, Rapid Rehousing, and diversion. The continua of care in Hawai‘i —both on O‘ahu and the neighbor islands—have adopted the VI-SPDAT as a common assessment tool for the state’s homeless service system.

Please direct questions regarding this report to the Governor’s Coordinator on Homelessness at (808) 586-0193 or gov.homelessness@hawaii.gov.