SUMMARY ANALYSIS

The Office of Homelessness in the Department of Children and Families (state office) provides coordination on issues relating to homelessness. DCF is required to establish local coalitions of providers, government entities, businesses and other parties which plan, network, coordinate, and monitor the delivery of services to the homeless.

Local agencies address homelessness through services planned and carried out at the local level. Many agencies also receive funding through the federal Department of Housing and Urban Development (HUD), based on a federal definition of “homeless” and compliance with various federal requirements such as regarding formation and operation of continuums of care, information technology systems, entry into services, and priority populations for use of grant funds.

The state office’s roles include but are not limited to awarding state funded grants.

HB 1353 revises the state’s approach to homelessness by adopting the federal definition for “homeless” and aligning other state requirements with HUD requirements. The bill also changes the roles of the state office and the requirements for its award of challenge grants and grants-in-aid. For instance, the bill reduces the amount of matching funds or in-kind support required for a challenge grant recipient from 100% to 25%, increases the maximum percentage of grant funds that a Continuum of Care lead agency may spend on its administrative costs from 8% to 10%, and changes preference for funding to be to lead agencies for continuums of care that have a demonstrated ability to move households out of homelessness.

The 17-member Council on Homelessness develops recommendations on how to reduce homelessness statewide and advises the state office. HB 1353 adds a representative each from the Florida Housing Coalition and the Department of Elder Affairs to the council.

The bill amends sections of law outlining two approaches to housing services, Rapid ReHousing and Housing First. It requires that individuals and families being considered for Rapid ReHousing assistance be assessed and prioritized through the continuum of care’s coordinated entry system. The bill also removes the program element indicating a benefit for an individual to have a background check and complete rehabilitation for any addiction to substances when participating in Housing First services.

The bill does not appear to have a fiscal impact on state or local government.

The bill provides an effective date of July 1, 2019.
FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Present Situation

Homelessness

There is not one standard definition of homelessness, but it generally encompasses several situations and populations. Older individuals, young adults, couples, families, and single men and women can be homeless. Homeless individuals can be unsheltered—living in places not meant for human habitation—or sheltered—staying in homeless shelters or transitional housing. Other individuals and households might be sheltered in another’s home, such as with friends or family, but are “doubled up” due to inability to afford their own housing. Individuals can be temporarily homeless or chronically homeless.\(^1\)

The federal Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 includes four broad categories of homelessness:

- An individual or family who lacks a fixed, regular, and adequate nighttime residence—living in a place not meant for human habitation, in a shelter or similar program, or, in specified circumstances, in an institution;
- An individual or family who will imminently lose housing, under certain circumstances;
- Under certain circumstances, unaccompanied youth or families with children who are consistently unstably housed and likely to continue in that state; and
- People who are fleeing or attempting to flee domestic or intimate partner violence and lack the resources to obtain other permanent housing.\(^2\)

Section 420.621, F.S., defines “homeless” an individual who lacks a fixed, regular, and adequate nighttime residence and includes an individual who:

- Is sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason;
- Is living in a motel, hotel, travel trailer park, or camping ground due to a lack of alternative adequate accommodations;
- Is living in an emergency or transitional shelter;
- Has 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;
- Is living in a car, park, public space, abandoned building, bus or train station, or similar setting; or
- Is a migratory individual who qualifies as homeless because he or she is living in circumstances described in paragraphs (a)-(e).\(^3\)

During the 2018 point in time count, 29,717 individuals who are homeless were identified in Florida. This included 17,594 sheltered individuals and 12,123 unsheltered individuals. Individuals in homeless households-including at least one adult and one child—comprised 8,300 of these individuals, or 27.9% of the total. The 2018 point in time count represents a reduction in the number of individuals who are

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\(^2\) Id., 14.

\(^3\) The term does not include an individual imprisoned pursuant to state or federal law or to individuals or families who are sharing housing due to cultural preferences, voluntary arrangements, or traditional networks of support. The terms include an individual who has been released from jail, prison, the juvenile justice system, the child welfare system, a mental health and developmental disability facility, a residential addiction treatment program, or a hospital, for whom no subsequent residence has been identified, and who lacks the resources and support network to obtain housing.
homeless from 2017, when 32,109 individuals who are homeless were counted. This count does not include individuals who are “doubled up” due to not having their own housing.

Federal Homeless Programs

Congress passed the HEARTH Act in 2009, which reauthorized the McKinney-Vento Homeless Assistance Programs. This act made a variety of changes to the federal approach to funding homeless services with which local agencies seeking federal funding must comply. These changes include but are not limited to a new definition of “homeless” and procedures for applying for and using federal funding.

The HEARTH Act also codified the continuums of care process that the U.S. Department of Housing and Urban Development (HUD) introduced in the mid-1990’s. The Continuums of Care process involves government agencies, service providers, advocates, and other stakeholders at the local level collaboratively evaluating the needs of individuals who are homeless, review performance of current efforts and prioritizing future activities.

To access federal funds, local agencies must comply with various federal requirements such as regarding formation and operation of continuums of care, information technology systems, processes for entry into services, and priority populations for use of grant funds.

Housing First

In recent years, there has been a shift in the response to homelessness toward the Housing First philosophy. Housing First provides a critical link between the emergency and transitional housing system and community-based social service, educational, and health care organizations. This approach to homelessness differs from traditional approaches by providing housing assistance, case management, and support services responsive to individual or family needs after housing is obtained and emphasizes that social services provided to enhance individual and family well-being can be more effective when people are in their own home.

Rapid ReHousing

Rapid ReHousing is a model for providing housing for individuals and families who are homeless that places a priority on moving a family or individual experiencing homelessness into permanent housing as quickly as possible, ideally within 30 days. The Rapid ReHousing model developed from the Housing First philosophy. The model initially focused primarily on people experiencing homelessness due to short-term financial crises; however, programs across the country have begun to assist individuals and families who are traditionally perceived as more difficult to serve.

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4 Supra, note 1 at 47-48. The point in time count is required by Department of Housing and Urban Development and involves a count of individuals meeting certain criteria relating to homelessness on a single night in January.
8 S. 420.6275(2)(b), F.S.
9 S. 420.6275(2)(a), F.S.
10 Supra, note 7 at 9.
11 The Florida Legislature expressed the intent to encourage homeless continuums of care to adopt the Housing First approach to ending homelessness for individuals and families in 2009. S. 420.6275(1), F.S.
12 Supra, note 10. Those perceived as more difficult to serve include people with limited or no income, survivors of domestic violence, and those with substance abuse issues.
There are three core components of Rapid ReHousing programs:

- **Housing identification services:** Households are matched to appropriate and affordable housing in the community.
- **Financial assistance for housing related expenses:** Time-limited financial assistance is provided to get individuals and families back on their feet.
- **Case management services:** Case management services are provided to help households address barriers that prevent access to or stability in stable housing.\(^\text{13}\)

In 2008, HUD expanded Rapid ReHousing through the Rapid Re-Housing for Homeless Families Demonstration program, which provided funds for pilot programs across the country.\(^\text{14}\) In 2009, Congress established Rapid ReHousing as an eligible activity for federal Emergency Shelter Grants program funds.\(^\text{15}\)

**State Office on Homelessness**

In 2001, the Florida Legislature created the State Office on Homelessness (state office) within the Department of Children and Families (DCF) to provide interagency, council, and other related coordination on issues relating to homelessness. The state office is assigned a number of duties, such as:

- Collecting, maintaining, and making available information concerning persons who are homeless or at risk for homelessness,
- Annually evaluating state and local services and resources and developing a consolidated plan for addressing the needs of the homeless or those at risk for homelessness,
- Providing technical assistance to facilitate efforts to establish, maintain, and expand local homeless assistance continuums of care,
- Developing outcome and accountability measures and promoting and using such measures to evaluate program effectiveness and make recommendations for improving current practices in order to best meet the needs of the homeless, and
- Investigating ways to improve access to participation in state funding and other programs for prevention and alleviation of homelessness to faith-based organizations, and collaborating and coordinating with faith-based organizations.\(^\text{16}\)

**Council on Homelessness**

Also in 2001, the Legislature created the inter-agency Council on Homelessness. The 17-member council develops recommendations on how to reduce homelessness statewide and advises the state office. The council includes:

- 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 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;

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\(^\text{13}\) *Supra*, note 7 at 9-10.
\(^\text{14}\) Id.
\(^\text{15}\) Id.
\(^\text{16}\) S. 420.622(3), F.S.
• The Executive Director of the Florida Housing Finance Corporation, or his or her designee;
• One representative of the Florida Coalition for the Homeless; and
• Four members appointed by the Governor.  

**Coalitions and Continuums of Care**

*Local Coalitions for the Homeless*

DCF is required to establish local coalitions to plan, network, coordinate, and monitor the delivery of services to the homeless. Groups and organizations provided the opportunity to participate in such coalitions include:

- Organizations and agencies providing mental health and substance abuse services;
- County health departments and community health centers;
- Organizations and agencies providing food, shelter, or other services targeted to the homeless;
- Local law enforcement agencies;
- Regional workforce boards;
- County and municipal governments;
- Local public housing authorities;
- Local school districts;
- Local organizations and agencies serving specific subgroups of the homeless population such as veterans, victims of domestic violence, persons with HIV/AIDS, runaway youth; and
- Local community-based care alliances.

*Continuums of Care*

Section 420.621(1), F.S., defines “continuum of care” as the community components needed to organize and deliver housing and services to meet the specific needs of people who are homeless as they move to stable housing and maximum self-sufficiency; it includes action steps to end homelessness and prevent a return to homelessness.

A local homeless assistance continuum of care is a framework for a comprehensive and seamless array of emergency, transitional, and permanent housing, and services to address the various needs of the homeless and those at risk of homelessness. The purpose of this framework is to help communities and regions envision, plan, and implement comprehensive and long-term solutions to homelessness in their own community or region.

The local homeless assistance continuum of care planning effort is an ongoing process that addresses all subpopulations of the homeless. The development of a local continuum of care plan is a prerequisite to applying for federal housing grants through HUD and makes the community eligible to compete for the state’s Challenge Grant and Homeless Housing Assistance Grant. Section 420.624(7), F.S., lists elements that a continuum of care plan should include, such as outreach, intake and assessment procedures; emergency shelter; transitional housing; Rapid ReHousing; and permanent supportive housing.

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17 S. 420.622(2), F.S.
18 S. 420.623, F.S.
19 Id.
20 Id.
21 Id.
Each local homeless assistance continuum of care plan must designate a lead agency that will serve as the point of contact and accountability to the state office. The lead agency may be a local homeless coalition, municipal or county government, or other public agency or private, not-for-profit corporation.\textsuperscript{23}

The state office may only recognize one homeless assistance continuum of care plan and its designated lead agency for a local homeless assistance continuum of care.\textsuperscript{24} Continuum of care catchment areas must be designated and revised as necessary by the state office, with the input of local homeless coalitions and public or private organizations that have previously certified to HUD and that currently serve as lead agencies for a local homeless assistance continuum of care. Designated catchment areas must not be overlapping. The designations must be consistent with those made by HUD in conjunction with the awarding of federal Stewart B. McKinney Act homeless assistance funding.

**Grants**

*Challenge Grants*

In 2001, the Florida established the Challenge Grant and authorized the state office to accept and administer moneys appropriated to it to provide Challenge Grants annually to designated lead agencies of homeless assistance continuums of care. The state office may award grants in an amount of up to $500,000 per lead agency.\textsuperscript{25} In order to qualify for a grant, the lead agency must develop and implement a local homeless assistance continuum of care plan for its designated area.\textsuperscript{26}

DCF must establish award levels for Challenge Grants specifying criteria to determine award levels and, after consultation with the Council on Homelessness, to specify the grant award levels in the notice of solicitation of grant applications.\textsuperscript{27} Any lead agency that receives a Challenge Grant must submit reports to DCF detailing its use of the grant funds.\textsuperscript{28}

**Grants in Aid**

Section 420.625, F.S., outlines the grant-in-aid program. The purpose of this program is to assist persons in their communities who have become, or are about to become, homeless, and where possible, restore the homeless living in their communities to suitable living conditions and self-sufficiency as quickly as possible.\textsuperscript{29} DCF is to develop guidelines for the development of spending plans for the evaluation and approval of spending plans, based upon such factors as:

- Demonstrated level of need for the program,
- The demonstrated ability of the local agency or agencies seeking assistance to deliver the services and to assure that identified needs will be met,
- The ability of the local agency or agencies seeking assistance to deliver a wide range of services,
- The adequacy and reasonableness of proposed budgets and planned expenditures, and the demonstrated capacity of the local agency or agencies to administer the funds sought,
- A statement from the local coalition for the homeless as to the steps to be taken to assure coordination and integration of services in the district to avoid unnecessary duplication and costs,
- Assurances by the local coalition for the homeless that alternative funding strategies for meeting needs through the reallocation of existing resources, utilization of volunteers, and local government or private agency funding have been explored, and

\textsuperscript{23} S. 420.624(4), F.S.
\textsuperscript{24} S. 402.624(6), F.S.
\textsuperscript{25} S. 420.622, F.S.
\textsuperscript{26} Id.
\textsuperscript{27} S. 420.622(4), F.S.
\textsuperscript{28} Id.
\textsuperscript{29} S. 420.625(2), F.S.
The existence of an evaluation component designed to measure program outcomes and determine the overall effectiveness of the local programs for the homeless for which funding is sought.

DCF is to allocate funds to its districts, which then distribute them to local agencies based upon recommendations of the local coalitions. These allocations are to be based upon sufficient documentation of:

- The magnitude of the problem of homelessness in the district, and the demonstrated level of unmet need for services in the district for those who are homeless or are about to become homeless.
- A strong local commitment to seriously address the problem of homelessness as evidenced by coordinated programs involving preventive, emergency, and transitional services and by the existence of active local organizations committed to serving those who have become, or are about to become, homeless.
- Agreement by local government and private agencies currently serving the homeless not to reduce current expenditures for services presently provided to those who are homeless or are about to become homeless if grant assistance is provided pursuant to this section.
- Geographic distribution of district programs to ensure that such programs serve both rural and urban areas, as needed.\(^\text{30}\)

DCF no longer has districts, having moved to a regionally-based model.

Effect of the Bill:

Many of the bill’s provisions align Florida’s approach to homeless services with federal law. Others increase the capacity of agencies to receive grant funds and administer them.

Homelessness

The bill redefines the term “homeless” to incorporate solely the conditions defined in federal regulations:

- An individual or family who lacks a fixed, regular, and adequate nighttime address, and
- An individual or family who will imminently lose their primary nighttime residence.

State Office on Homelessness

The bill revises many of the duties specified in statute for the state office. These changes:

- Remove references to individuals at risk of homelessness;
- Change references from “coalitions for the homeless” to “continuums of care”;
- Focus on ending homelessness instead of addressing the needs of the homeless;
- Specify that the state office must have input from continuums of care when conducting or promoting research on the effectiveness of current programs and proposing pilot projects, which must be aimed at ending homelessness rather than improving services, as is required by existing statute,
- Require the state office to use summary data from databases and charts required by HUD instead of developing its own outcome and accountability measures; and
- Require the state office’s technical assistance to support and strengthen continuums of care rather than establish, maintain, and expand them.

\(^{30}\) S. 420.625(6), F.S.
Council on Homelessness

HB 1353 adds two new members to the Council, bringing the total to 19 members. These two members would be the Secretary of the Department of Elder Affairs or his or her designee and one representative from the Florida Housing Coalition.

The Florida Housing Coalition is a statewide, nonprofit membership organization which consults on affordable housing and related issues and advocates for policies, programs and use of funding resources that maximize the availability and improve the quality of affordable housing in Florida.\(^{31}\)

The bill also encourages representatives of the Council to have had experience in the provision of services to persons experiencing homelessness.

Coalitions and Continuums of Care

HB 1353 repeals s. 420.623, F.S., regarding local coalitions for the homeless, and s. 420.624, F.S., regarding local homeless assistance continuums of care.

The bill redefines “continuum of care” to be solely a group organized to carry out the responsibilities imposed under ss. 420.621-420.628, F.S., to coordinate, plan, and pursue ending homelessness in a designated catchment area. It lists possible member organizations such as nonprofit homeless providers, victim service providers, faith-based organizations, governments, and businesses. The bill removes language including action steps as an element of a continuum of care.

HB 1353 specifies that the purpose of a continuum of care is to coordinate community efforts to prevent and end homelessness in its catchment area and to fulfill the responsibilities set forth in ch. 420. The bill makes the “collaborative applicant” for HUD the lead agency for state purposes and requires the state office to align its catchment areas for continuums of care with HUD’s.

The bill requires each continuum of care to create a continuum of care plan which implements an effective and efficient housing crisis response system to prevent and end homelessness in the continuum of care catchment area. Each continuum of care must also promote participation by all interested individuals, acting in a nondiscriminatory manner, and must coordinate and integrate with other mainstream health, social services and employment programs for which homeless populations may be eligible.

Grants

Challenge Grants

The bill:

- Requires that services provided with grant funds must be implemented through the continuum of care’s entry coordinated system,
- Increases the grant amount award that continuum of care lead agencies can receive from $500,000 to $750,000,
- Reduces the required matching funds or in-kind support provided by a Continuum of Care lead agency to receive a Challenge Grant to 25% from 100%,
- Increases the maximum percentage of grant funds that a Continuum of Care lead agency may spend on its administrative costs from 8% to 10%,
- Changes preference for funding to be for lead agencies for continuums of care that have a demonstrated ability to move households out of homelessness, instead of giving such preference to lead agencies that provide quality services and effectively leverage federal

and other sources of funding and to areas with the greatest need for housing and homeless services,

- Removes the requirement for lead agencies to give the state office a thorough evaluation of the grant-funded program’s performance related to households that are no longer homeless, rate of recidivism, and number of persons who obtain gainful employment, and instead requires the state office to use performance measures it establishes to evaluate the performance of lead agencies which receive state grant funds.

**Grants in Aid**

The bill repeals s. 420.625, F.S., regarding grants-in-aid and creates a new section on grants-in-aid. The new section removes the preference for targeting the new and temporary homeless. It removes as the purpose helping homeless individuals find suitable living conditions and self-sufficiency and instead includes as the purpose to assist individuals who are or may become homeless, and to help homeless households move to permanent housing as quickly as possible.

HB 1353 allows a continuum of care to use grants-in-aid funding for any component of their continuum of care plan, with funding to be awarded on a competitive basis and granted to agencies based on the recommendations of lead agencies in accordance with their plans. The bill removes the criteria in law for the evaluation and approval of spending plans and instead allows the state office to develop the criteria.

**Rapid Re-Housing**

The bill revises existing legislative findings on Rapid ReHousing to emphasize its cost effectiveness. It requires that individuals and families being considered for Rapid ReHousing assistance be assessed and prioritized through the continuum of care’s coordinated entry system. HB 1353 also changes the objective of Rapid ReHousing services from the recipients’ not developing a dependency on the assistance to their attaining stability and integration into the community as quickly as possible.

**Housing First**

HB 1353 amends statute to emphasize the permanent, stable nature of the housing provided through the Housing First approach. It removes the element of Housing First service provision involving an individual having a background check and complete rehabilitation for any addiction to substances. It also removes reference to linkages between Housing First and emergency and transitional housing systems and instead states that the links are with community-based social service and health care organizations.

**Discharge Policies**

HB 1353 amends s. 420.626, F.S., to require hospitals and inpatient medical facilities, crisis stabilization units, residential treatment facilities, assisted living facilities, and detoxification centers to communicate with programs to whom clients or patients might be discharged to determine their capability to serve these individuals and if they will be accepted into the programs.
B. SECTION DIRECTORY:

Section 1: Amends s. 420.621, F.S., relating to definitions.
Section 2: Amends s. 420.622, F.S., relating to State Office on Homelessness; Council on Homelessness.
Section 3: Creates s. 420.6225, F.S., relating to continuum of care.
Section 4: Creates s. 420.6227, F.S., relating to grant-in-aid program.
Section 5: Repeals s. 420.623, F.S., relating to local coalitions for the homeless.
Section 6: Repeals s. 420.624, F.S., relating to local homeless assistance continuum of care.
Section 7: Repeals s. 420.625, F.S., relating to grant-in-aid program.
Section 8: Amends s. 420.626, F.S., relating to homelessness; discharge guidelines.
Section 9: Amends s. 420.6265, F.S., relating to Rapid ReHousing.
Section 10: Amends s. 420.6275, F.S., relating to Housing First.
Section 11: Amends s. 420.507, F.S., relating to powers of the corporation.
Section 12: Provides an effective date of July 1, 2019.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

   None.

2. Expenditures:

   The bill does not affect the level of state funding, but rather it revises the framework for the award of Challenge Grants and grants-in-aid. To the extent that lead agencies may increase their withholding of grant award for administrative purposes (from 8% to 10%), the funding available for direct services may decrease since an appropriation is limited. Also, lead agencies may experience a different funding level than in years prior due to the increase of allowable grant award.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

   None.

2. Expenditures:

   None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

   See Fiscal Comments.

D. FISCAL COMMENTS:

   While the bill does not contain an appropriation, it alters the criteria by which programs addressing homelessness are funded and how recipients spend grants and other state funds. The department notes that both the decrease in required in-kind match and the increase to the maximum award level for a Challenge Grant are more comparable than the present situation for similarly-sized grants.
III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:
   Not applicable. This bill does not appear to affect county or municipal governments.

2. Other:
   None.

B. RULE-MAKING AUTHORITY:
   None.

C. DRAFTING ISSUES OR OTHER COMMENTS:
   None.

IV. AMENDMENTS/ COMMITTEE SUBSTITUTE CHANGES

On March 20, 2019, the Children, Families, and Seniors Subcommittee adopted two amendments that:

- Specify criteria that the State Office on Homelessness must at a minimum use when determining award of homeless housing assistance grants. These criteria consider quality of services, ability to leverage other funding, need for services, and performance in maintaining housing.
- Remove intent language regarding Rapid ReHousing and Housing First.

The bill was reported favorably as a committee substitute. The analysis is drafted to the committee substitute as passed by the Children, Families, and Seniors Subcommittee.