COLORADO
Department of Local Affairs
Division of Housing

Exploring Successful Colorado Re-Entry/Recovery Housing Models
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Exploring Successful Colorado Re-Entry/Recovery Housing Models

**CHALLENGES**

- **74%**
  - ...have substance use disorders

- **25%**
  - ...are homeless upon discharge

- **50%**
  - Over 50% with behavioral health conditions recidivate to incarceration

- **10,857**
  - ...individuals were counted as homeless in the 2019 PIT

- **8,300**
  - ...individuals are discharged from corrections annually
    - Colorado ranks **43rd** in the country for overall health care need vs access.

**THE RESPONSE:**
Connect people with justice involvement to housing

**THE AIM:**
Reduce Homelessness and Justice Involvement

**HOW:**
Intentional Funding and Programming
COR3 applies the Rapid Rehousing + Care model to effectively serve individuals with prior or current justice involvement presenting with identified behavioral health issues. Rapid Rehousing + Care effectively serves individuals with multiple, co-occurring and significant barriers to housing. Principles of the Rapid Rehousing + Care Model include:

- Modeled after the federal Housing Choice Voucher (HCV) Program.
- Funded through the Homeless Solutions Program (HSP)
- Provides rental assistance and security deposit assistance.
- SHV prioritize individuals with histories of homelessness and behavioral health conditions who are frequent or high-cost consumers of public systems, including Colorado State Prisons and Mental Health Institutes.
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Colorado Rapid Re-housing for Re-Entry

Northern CO:
- Households served: 39
- Households housed: 23
- Average time to housing: 87

Denver Metro:
- Households served: 57
- Households housed: 24
- Average time to housing: 78

CO Springs:
- Households served: 14
- Households housed: 4
- Average time to housing: 14

Southern CO:
- Households served: 35
- Households housed: 20
- Average time to housing: 52
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Containment Model:

Benefits:
1) Model will establish clear roles and provide structure to communications and staffing
2) Regular communication will highlight and help eliminate areas of duplicated work, and reveal areas of need.

Tasks:
1) Identify all necessary members of model
2) Clarify roles and duties of each member
3) Establish recurring staffing meetings. Meetings may be face to face, via video or phone, but should be consistent in when and how they are conducted, e.g. every second Tuesday at the COR3 Case Manager’s office.