

HSD Provider Conference

June 16, 2026

Notes from Session: Best Practices from Rapid Rehousing (RRH)

Presenters: Claudia Sharygin (she/her) – Homeless Services Department,
Hana Gossett & Mandy Gawf (she/her) – Focus Strategies

Moderators: n/a

Notetaker: Alexa Smith-Rommel

-Main Points from Session Overview/Presentation (high level; detail not required):

- Want to elevate what works in RRH programming, make our programs more effective at helping people meet their housing goals.
- Three components of RRH: housing identification, financial assistance, case management and services. Even if these services are not implemented by the same organization, participants benefit most when these components are speaking to each other and thoughtfully coordinated.
- Research shows that RRH reduces the amount of time people spend homeless, helps to achieve long term outcomes, and is more cost effective than something like TH. Help families exit shelter faster. Also, families with RRH just as likely to be as stable as those in more intensive (eg, PSH) programs.
- Best practice that RRH shouldn't have screening practices based on readiness, disability, income, or any other assumptions about whether or not they won't succeed. Income isn't required, but households need a sustainable housing plan at exit.
- Housing First, not Housing Only: need tailored supports. Housing case management can be Housing First aligned when done in a way that is supportive of participant and their goals.
- Programs that are most effective are intentional about how staff roles are structured.
 - Housing Navigators (search and placement, short term)
 - Case Managers/Housing Stability Specialists (stability, long term)
- Staff should assume households can succeed; they will be more committed to problem solving with them
- Need manageable case loads that match support needed (smaller case loads when more frequent contacts needed)
- Housing identification

- Need a network of landlords, regular communication even when there are no issues; landlord assistance (bonuses, damage funds); relationship building
- Progressive assistance
- Preparing for exit
 - Start early
 - Develop a clear plan for rent affordability, income pathways, budgeting
 - Strengthen landlord relationships
 - Facilitate warm handoffs
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-Questions/Answers (summarization):

- The presentation named services offered as a best practice, but County doesn't require them. Is there a contradiction? Answer from FS that it's a tough line to walk, should be offered but not required.
- How will HSD be using this information? Providers are looking for more day to day supports, things/tools case managers can use to work through RRH implementation.
 - Evaluation included a survey of providers, looking to understand how RRH is being implemented HSD wide
 - Will be hosting focus groups with provider staff
 - Also focus group with program participants
 - Program question not fully spoken to
- A Home for Everyone - combo of eviction prevention and RRH. Will this be coming back? Hopefully if/when we aren't in a very constrained environment. Unlikely we'll be starting up new programs in the immediate term.
- Adult/Youth data distinction? Not seen in the data used for the brief.
- Did the studies look at high cost markets specifically? Given the high rent in Portland. Flags that some data considered was from HCOL communities. Brief is starting point and meant to be viewed through lens of specific community needs, market, etc.
- Can we consider services for older adults experiencing homelessness, specifically those who are locked out of job market, on very low fixed income, who are growing % of our community? Also compounded by long waitlists. Challenging to create stable housing plan for these folks.
- How is Best Practice defined, and why is it used? Is it a scientific term? Response: Things referenced are based on studies completed, information gathered from current and former participants, and information from what

program staff saw as successful approaches over time. Also informed by NAEH, federally funded research, etc.

-Main Discussion Points not captured above:

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-Takeaways or Follow-Ups for HSD

(expectations/priorities/recommendations/etc):

- Some of the recommendations shared in this presentation aren't fully aligned with our system or the resources we have. I think it would be helpful to follow up in a way that is specific to our community and actually gives guidance to folks that is grounded in what is possible?
- Asks for more day to day supports, things/tools case managers can use to work through RRH implementation, including more aligned RRH guidance.