

Action Plan for Ohio's Chronically Homeless

PRIORITY ONE: Create a foundation and forum to implement the vision.						
Strategy(-ies)	Action(s)	Manager¹	Implementer²	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 1.1 Collect data and information to guide decision making that impacts services to the homeless	Action 1.1.1 Create an initial "snap shot" of the homeless population	Sally		Have a current picture of chronic homelessness in Ohio	Draft document Final document	April 1, 2004 May 15, 2004
	Action 1.1.2 Identify comprehensive data	Sally	Jeannette Nick Ellen Paul Scott Debby	A document that identifies data essential for guiding policy making	Draft created and circulated for comment	June 1, 2004
	Action 1.1.3 Develop a framework to collect comprehensive data	Scott Lisa	TBD State Agencies	Interagency sharing of useful and accurate data	A proposed framework	December 1, 2004
Strategy 1.2 Create an Interagency Council on Homelessness in Ohio	Action 1.2.1 Design the organizational structure	Lisa	Bill Karen	A structure that the Governor and Lt Governor support	Research potential structures Draft a white paper with the structure that works best for Ohio	Jan 04 Feb 29, 2004
	Action 1.2.2 Educate key stakeholders about issues	Lisa	Policy Team members	Support built within participating agencies and advocate groups		Feb 29, 2004
	Action 1.2.3 Governor/Lt. Governor formalizes	Lisa	Karen	An official endorsement like an executive order from the Governor	Presentation to the governor and Lt Governor	March 30, 2004
Strategy 1.3 Identify and analyze mainstream program for opportunities to	Action 1.3.1 Inventory current federal and state resources and programs	Jeannette	Lisa Nick	Discover where gaps and overlaps are in existing programs	A comprehensive list of federal and state programs	July 15, 2004

Action Plan for State

increase access to mainstream services	Action 1.3.2 Each agency will analyze federal and state programs for barriers	Jeannette		Programs will identify and then instate procedures that allow for greater access	Increasingly accessible programs	June 15, 2004
	Action 1.3.3 Develop a template for each agency to use for cost benefit analysis for proposed policy changes	Jeannette	Michelle	System that will allow cost benefit analysis to be performed uniformly	Draft Template Final Template	July 15, 2004 October 15, 2004
Strategy 1.4 Develop and implement a plan/process to evaluate results	Action 1.4.1 Create a template for all departments to measure impact of policy change/program implementation	Shari		An outcome management plan.	Develop draft outcome management plan and submit to advisory committee for feedback. Final plan	February 27, 2004 March 31, 2004
	Action 1.4.2 Establish a feedback process to policy stakeholders	Shari		An outcome management plan.	Develop draft outcome management plan and submit to advisory committee for feedback. Final plan	February 27, 2004 March 31, 2004
Progress to Date		Barriers and/or Situational Changes			Immediate Next Steps (including potential technical assistance needs)	

¹ The Manager is the individual responsible for coordinating each action.

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Action Plan for State

PRIORITY TWO: To improve access for persons who are chronically homeless to mainstream services						
Strategy(-ies)	Action(s)	Manager	Implementer	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 2.1 Improve access to public assistance	Action 2.1.1 Partner with Bureau of Disability Determination (BDD)/Social Security Administration (SSA)	Lisa Nick		BDD and SSA reps will join our team.	Reps begin participating on the team Feb. '04	Feb. 28, '04
	Action 2.1.2 Develop Ohio process and expertise in SSI expedited and presumptive eligibility	Tom	Tom Michelle Ellen BDD and SSA rep	Established process for expedited benefit eligibility determination/receipt. Qualified staff at various sites trained by SSA/BDD to assist potentially eligible individuals with disability documentation and able to make presumptive eligibility recommendations	1. Working group to identify best practices, existing efforts & secure T.A. 2. Working group to develop plan, including training, identification of local partner agencies and SSA/BDD contacts, etc. 3. Begin implementation.	1. May 2004 2. August 2004 3. October 2004
	Action 2.1.3 Examine relationship between SSI eligibility and automatic eligibility for Medicaid and linkage	Paul	Medicaid rep	Coordinated process for enrollment in Medicaid for SSI recipients (without reduction in current service provision via spend down program)	Recommendations to council for implementation	July 1, 2004

Action Plan for State

	Action 2.1.4 Examine required documentation for eligibility determination for public assistance (food stamps & DA)	Paul		Keep requirements to a minimum without increasing state's error rate.	Understanding of current requirements Recommendations to council to consider	October 1, 2004
	Action 2.1.5 Examine status of out-stationed eligibility workers in disproportionate share hospitals and clinics	Paul	Debby Medicaid rep	Understanding of current status. Increase access points for customers.	Report on current status of Ohio vs. requirement	October 1, 2004
	Action 2.1.6 Explore use of Medicaid waivers to maximize current resources	Paul	Medicaid rep	Understanding of the types of waivers available. Maximize the use of federal fund in services provision.	Recommendation to appropriate state agency or council to consider.	Ongoing
	Action 2.1.7 Examine annual vs. 6-month eligibility re-determination for Medicaid	Paul	Medicaid rep	LT health care coverage for population w/in current budgetary constraints	Understanding. Recommendation, as appropriate, to council to consider.	July 1, 2004
	Action 2.1.8 Educate providers and customers about county veterans financial benefits	Gov's Office of Veterans Affairs		Greater understanding and access to eligible veterans services for chronically homeless vets	Education plan developed by Gov's Vets office Plan implemented	April, 2004 June 2004
	Action 2.1.9 Explore "suspended" vs. "terminated" Medicaid eligibility for persons in institutions	Paul	Ellen Dave Nick	Continuation of health care coverage upon release from institution into the community.	Understanding of Ohio policy. Recommendation(s) to council to consider.	December 1, 2004
Strategy 2.2 To improve access for persons who are chronically homeless to employment mainstream services	Action 2.2.1 Partner with state Workforce Investment Act (WIA) Policy Board	Lisa Amy		Dialogue with Board Director	Set up meeting	Jan 14, 2003

Action Plan for State

	<p>Action 2.2.2 Partner with Rehabilitation Services Commission (RSC) and Ohio Department of Mental Health (ODMH) Collaborative</p>	<p>Sally Shari</p>	<p>Nick</p>	<p>Acquire buy in for the plan and a commitment to expand employment and training opportunities for individuals who are chronically homeless</p>	<p>Rep from RSC on Policy Team</p> <p>Survey ORSC services (employment, training) that are most appropriate for individuals who are chronically homeless</p> <p>Develop statewide protocol for how ORSC responds to the needs of chronically homeless</p> <p>Develop mutually agreed upon criteria for defining success</p>	<p>May 1, 2004</p> <p>Sept 1, 2004</p> <p>TBD</p> <p>TBD</p>
	<p>Action 2.2.3 Explore option of including chronic homelessness in WIA state plan as a “special population”</p>	<p>Lisa Amy</p>		<p>Chronically homeless will be a targeted group for the WIA state plan</p>	<p>Meet with Director of Board Attend board meeting Participate in plan</p>	<p>Jan 14, 2004</p>
<p>Strategy 2.3 Prioritize services that are evidenced based</p>	<p>Action 2.3.1 Develop a process to review and revise state funding policies that require or preference evidenced based services</p>	<p>Nick</p>	<p>Carol</p>	<p>Written process, including definition of evidence based, is developed.</p>	<p>Definition of evidenced based is agreed upon by the team March 1, '04</p> <p>Process is developed and written April 1, '04</p> <p>Process is agreed upon by team June 1, '04</p>	<p>June 1, '04</p>

Action Plan for State

	<p>Action 2.3.2 Build support for funding projects that include research components that evaluate effectiveness of promising practices</p>	Bill	Nick Sally	Set asides or additional eligibility for planning and research around housing and services for the homeless	<p>Look nationwide to identify states that allow planning and research</p> <p>Present a model of funding planning and research within existing programs to the council</p>	
	<p>Action 2.3.3 Support the implementation of evidenced based practices such as Assertive Community Treatment (ACT) as a newly named mental health service in the State of Ohio; the Supported Employment Tool Kit; expedited SSI benefit enrollment; outreach and engagement strategies; Integrated Dual Diagnosis Treatment</p>	Nick	Policy Team	<p>Educate council members on evidence based practices</p> <p>Present model for funding practices to implement within current programs.</p>	<p>Education strategy developed July '04</p> <p>Funding strategy developed August '04</p>	September '04
	<p>Action 2.3.4 Each state agency will be responsible for identifying evidenced based practices in their disciplines applicable to this population for consideration</p>	Nick	Carol		<p>Present to team (state agency reps) June '04</p> <p>Reps bring back information August '04</p>	August '04
<p>Strategy 2.4 Ensure access to comprehensive health related services including behavioral healthcare</p>	<p>Action 2.4.1 Increase utilization of mainstream healthcare services</p>	Debby	Nick	Identification of available health services and how to access those services	Draft Document	December, 2004
	<p>Action 2.4.2 Educate and train mainstream providers in the culture of homelessness and the importance of rapid and responsive engagement</p>	Debby	Rick Nick	Develop a mechanism for training mainstream providers on the culture of homelessness	Draft Document	September, 2004

Action Plan for State

	Action 2.4.3 Educate and train homeless providers about how to navigate and access mainstream services and processes	Debby	Rick Nick Ellen	Develop a mechanism for training providers on how to navigate mainstream services and processes	Draft Document	October, 2004
Progress to Date		Barriers and/or Situational Changes			Immediate Next Steps (including potential technical assistance needs)	

PRIORITY THREE: Expand housing options to address critical needs of the chronically homeless						
Strategy (-ies)	Action(s)	Manager¹	Implementer²	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 3.1 Significantly increase units of permanent supportive housing under development across the state by means of collaborative partnerships at the state level within two years	Action 3.1.1 Allocate funds from Housing Trust Fund for capital and operating expenses	Michael Sean Lisa	Sally Bill Scott	Implement program (new or existing) that is acceptable to Council	Planning meeting Draft proposal	Feb 2004 Mar 2004
	Action 3.1.2 Re-evaluate Qualified Allocation Plan (QAP) for 2005 for incentivizing permanent supportive housing projects	Michael Sean	Sally Bill	Modified 2005 QAP	Planning meeting Draft proposal	Feb 2004 Mar 2004

Action Plan for State

	<p>Action 3.1.3 Establish agreements among state agencies that serve chronically homeless persons to commit resources for services and operating funds in permanent housing and staff for project reviews</p>	<p>Scott Lisa</p>	<p>Karen Sally</p>	<p>MOUs between agencies</p>	<p>Identify potential resources in agencies Establishment of Interagency Council Put action agenda for discussion by council Educate agencies on value of supportive services</p>	<p>March 2004 March 30, 2004 May 2004</p>
	<p>Action 3.1.4 Increase Housing Development Assistance Program (HDAP) for non-tax credit projects that house chronically homeless</p>	<p>Michael Sean</p>	<p>Sally</p>	<p>Modified 2005 HDAP guideline</p>	<p>Planning meeting Draft proposal</p>	<p>Sept 2004 Sept 2004</p>
	<p>Action 3.1.5 Investigate the maximizing of the following federal programs: 811; Special vouchers; Continuum of Care bonus dollars; Collaborative Notices of Funding Availability (NOFA's); DOL services targeting chronic homeless and disabled populations; Shelter + Care; SRO's; U.S. Department of Veterans Affairs, etc.</p>	<p>Lisa Michael</p>	<p>Sally Bill Carol Tom</p>	<p>Increase resources for Ohio</p>	<p>Research current status of each program to determine areas for improvement Develop plan to maximize Implement plan</p>	<p>April 2004</p>

Action Plan for State

<p>Strategy 3.2 Develop coordinated application process for unified funding opportunities for projects serving the chronically homeless</p>	<p>Action 3.2.1 The Ohio Department of Development (ODOD) and the Ohio Department of Mental Health (ODMH) will educate other state level partners on their unified process for new housing opportunities for chronically homeless, with the expectation of replication</p>	<p>Scott Nick</p>			<p>Via team agency reps, identify agency staff that needs to be educated February '04.</p> <p>Educate other state agencies March '04</p>	<p>April '04</p>
	<p>Action 3.2.2 Request staff from each department to assist in review of projects as appropriate</p>	<p>Scott Nick</p>			<p>Via team agency reps, identify agency staff that will review projects February '04. Begin with review of Continuum of Care '04</p>	<p>Ongoing</p>
<p>Strategy 3.3 Educate mainstream systems so that they understand their role and responsibility in addressing chronic homelessness</p>	<p>Action 3.3.1 Include housing permanency as outcome measure in all mainstream systems</p>	<p>Rick</p>		<p>Fewer mainstream systems contribute to chronic homelessness</p>	<p>a. Design housing permanency outcome framework b. Incorporate framework c. Measure for accountability</p>	<p>July 1, 2004</p> <p>December 31, 2004 July, 2005</p>
	<p>Action 3.3.2 Align resources, programs, and policies toward their role in addressing chronic homelessness</p>	<p>Rick</p>		<p>Chronic homelessness will be addressed in a more comprehensive manner</p>	<p>a. Examine current programs and/or policies to identify potential opportunities b. Implement revised programs and/or policies</p>	<p>December 31, 2004</p> <p>July 1, 2005</p>
<p>Progress to Date</p>		<p>Barriers and/or Situational Changes</p>			<p>Immediate Next Steps (including potential technical assistance needs)</p>	

Action Plan for State

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Action Plan for State

PRIORITY FOUR: Maximize prevention strategies to minimize chronic homelessness						
Strategy(-ies)	Action(s)	Manager	Implementer	Expected Outcomes	Benchmarks	Completion Date (Estimated)
Strategy 4.1 Post discharge planning will occur for all persons leaving institutions (i.e. prisons, jails, mental health, hospitals, emergency rooms, AOD's)	Action 4.1.1 Build into state and local contracts the requirement for discharge planning before release	Ellen	Dave Nick Shari Debby	Discharge plan for all Individuals released from institutions –“No Discharge to homelessness”	Written procedure/protocols for release	June 2005
	Action 4.1.2 Develop Memorandum of Agreements (MOA's) between institutions and community-based systems	Debby		Research and develop a draft memorandum of agreement that can be used by the institutions and the community based agencies	Draft Document for testing	Draft Document for testing
	Action 4.1.3 Utilize the employment readiness and discharge planning requirement in Ohio's Department of Rehabilitation and Corrections (ODRC's) Ohio Plan for Productive Offender Reentry and Recidivism Reduction	Ellen	Dave Bill Tom Debby	Model/guide for other institutions/agencies in release preparation	Circulation of the Ohio Plan/A proposed framework	December 2004
	Action 4.1.4 Educate hospitals' social work staff on best practices in immediate access to permanent housing	Nick	Shari Debby		Investigate willingness to be educated March '04 Educate Social Work Staff May '04	Ongoing
	Action 4.1.5 Explore regulatory and statutory remedies that require appropriate discharge planning beginning at intake	Sally	Debby Ellen Dave Nick	Legal, functioning mechanisms in place to hold agencies accountable for appropriate discharge planning		September 2004 February 2005

Action Plan for State

<p>Strategy 4.2 Increase the capacity and understanding of community resources to ensure access to housing for persons at risk of becoming chronically homeless</p>	<p>Action 4.2.1 Identify best practices around local access to homelessness prevention and housing resources</p>	Lisa	Tom	<p>Best practices will be presented to the council</p> <p>Ways to promote those best practices will be discussed with the council so that agencies can implement within existing programs.</p>			
	<p>Action 4.2.2 Promote best practices through State policy and local initiatives</p>	Carol	Tom	<p>Define best practices using NAEH Best Practice Directory at http://www.endhomelessness.org/best/ as recommendations to Departments when doing any RFP that may affect homelessness. Also ask departments to submit their own best practices as an Ohio list. Another suggestion is to ask COHHIO to solicit ideas/suggestions of best practices to consider/replicate</p>	<p>The benchmarks are:</p> <ul style="list-style-type: none"> - Definition of "best practice" - Solicit Ohio best practices. - Compile our list and distribute it with a request to consult it when composing RFPs or relevant policy 	<p>by May.</p> <p>by August</p> <p>in Sept</p>	
	<p>Action 4.2.3 Identify risk factors and other populations at risk of chronic homelessness (i.e. youth aging out of the child welfare system)</p>	Bill	Sally				
<p>Progress to Date</p>		<p>Barriers and/or Situational Changes</p>			<p>Immediate Next Steps (including potential technical assistance needs)</p>		

Action Plan for State

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