

Journey from Homelessness: The Power of Permanent Supportive Housing

In late October 1994 David Woledge received an early release from Erie County Prison with no place to call home. For 9 months he lived on the streets of Erie - through the winter and into the summer. For the next 4 years, Mr. Woledge continued to battle his illness while receiving mental health care from different community resources including the Hamot Behavioral Health Institute, an emergency shelter and Safe Harbor Behavioral Health, Inc. Finally, staff of Stairways, Inc. a nonprofit housing and service provider, helped him find an apartment and for 2 years subsidized the rent and provided him with support to successfully manage his own place. As a result of having a stable housing environment, Mr. Woledge was able to afford market rent while continuing to reduce the amount of services he needed from Stairways. He has since purchased a home with a mortgage obtained through the Pennsylvania Housing Finance Agency. As David Woledge reports, "I've been living in my own owned home for 3 years and anticipate staying here for many more years."

Executive Summary

Agenda for Ending Homelessness in Pennsylvania

November 2005

Background

On the night of January 26, 2005, 15,353 homeless people were identified in Pennsylvania. Of this total, just over half, 7,926 were families members with children and 7,427 were individuals, of whom, 1,787 were "chronically homeless" experiencing disabling conditions with multiple episodes or long-term periods of homelessness.

Vision

The Pennsylvania Interagency Council on Homelessness proposes the following vision for the future:

Pennsylvania envisions a state where there are no homeless individuals or families. Each person will have the support services needed to live as independently as possible in permanent housing of his or her choice. The mainstream services will be adequate, well-coordinated, consumer driven, and recovery-oriented. All housing and services will be offered with dignity and respect, and will provide hope.

Principle-Based Approach

The Commonwealth has adopted a set of principles to fulfill this vision. Those principles are summarized into essentially three statements:

1. Provide and assure access to a continuum of housing and supportive service.

- Assure that the Commonwealth of Pennsylvania provides a continuum of services, coordinated and delivered by organizations, which offers homeless consumers choices in the assistance they need to achieve and maintain their maximum level of independence.
- Assure access to supportive services and affordable housing in all areas of the state.
- Assure that the quantity and quality of affordable housing and services meets the needs of people who are homeless.
- Assure that the state departments and agencies identify outcomes and strategies to monitor those outcomes.

2. Nurture and expand creative use of resources.

- Seek creative ways to utilize current resources and to leverage new resources to prevent homelessness and to assist people who are homeless including people who are chronically homeless.
- Develop and maintain state and local intergovernmental relationships to coordinate and manage resources to assure access by homeless families and individuals.
- Develop community partnerships with private sector businesses, foundations, lenders, civic organizations, hospitals, childcare, and community based social and treatment services to address local homeless needs.

3. Develop an administrative structure and delivery mechanisms to effectively implement this plan.

- Assure that each state department and agency, in conjunction with the Interagency Council on Homelessness, devises plans and strategies designed to prevent homelessness and address the needs of people who are homeless that are consistent with the vision statement and guiding principles.
- Assure the prevention of homelessness through improved discharge planning and other prevention techniques and by expanding the number of affordable accessible housing options.

Strategies, Goals, and Action Steps

Pennsylvania will pursue its homeless strategies by providing housing, supportive services and prevention of homelessness through a comprehensive set of goals and action steps that are summarized below:

- Establish an Interagency Council on Homelessness
The Commonwealth completed this step in 2004 by assigning this responsibility to the Governor's Housing Cabinet, including the ability to review relevant departmental policies, plans and budgets to ensure consistency with the guiding principles and steps outlined in this plan.
- Support an "Engagement Approach" in the development of supportive housing to assist local projects as a means to identify barriers to creating housing options.

- Investigate barriers to accessing and developing permanent supportive housing using existing resources and programs.
 The above two steps are being accomplished through the Supportive Housing Demonstration Program, which designates a team of state agency experts to engage representative local projects in a ‘laboratory.’ The intent of the Demonstration is to simultaneously expand production of supportive housing and address the need for systematic, policy, and program changes.

- Leverage new resources and better utilize existing resources through creative strategies and better use of data.
 This step will be pursued through a variety of approaches including:
 - developing data studies through the Commonwealth’s Homeless Management Information System and other sources to demonstrate cost effective strategies,
 - improving access to mainstream resources,
 - pursuing underutilized federal funding such as Food Stamp training funds,
 - exploring options for a state administered rental assistance program,
 - seeking to shift McKinney funded Continuum of Care costs from renewal of supportive services costs to implementing new projects, and
 - continued discussions with housing authorities to expand their role in providing permanent supportive housing options.

- Improve transition planning to prevent homelessness among high risk groups.
 This step will focus primarily on ex-offenders returning to the community and youths who are aging out of the variety of child caring systems such as foster care and child welfare programs. Better planning for housing options for people leaving institutions together with community based service programs will help shut the entrance door to homelessness.

- Connect education and workforce development resources to address homelessness.
 Two significant, yet underutilized, partners among the resources to assist people who are homeless are the educational and workforce development systems. Education is needed to promote the stability and health of homeless children and youth, and increasing income is a critical step to ending homelessness. Both systems are entering the state and regional planning processes to improve access to education and employment for homeless families and individuals.

The full document can be obtained by going to the following website:

www.newpa.com/default.aspx?id=225

Then, click on “Agenda for Ending Homelessness in Pennsylvania”.

Agenda for Ending Homelessness in Pennsylvania

November 2005

Background

In the early to mid 1990's the Commonwealth of Pennsylvania initiated an aggressive campaign to combat homelessness. In addition to state dollars, many of Pennsylvania's larger communities were receiving substantial federal dollars for homeless housing and services. However, many of the state's rural areas were unable to tap into the federal resources due to limited capacity.

In response, Pennsylvania initiated the Regional Homeless Assistance Process (RHAP) in 1997 to cover the 51 rural counties that comprised the "balance of the state." The process began with the formation of the RHAP Steering Committee, with representation from the Department of Community and Economic Development, the Department of Public Welfare's Office of Social Programs and Office of Mental Health and Substance Abuse Services, the Pennsylvania Housing Finance Agency; and the Department of Military and Veterans Affairs.

The Steering Committee then formed four separate regional "Continuums of Care" to cover the participating counties: Northeast, Southwest, Northwest, and Central-Harrisburg. Each region established a Regional Homeless Advisory Board (RHAB) of representatives of 10-15 local entities involved in housing and homeless services.

In 2000, the Chairs of all four RHABs became Steering Committee members. From 2001 to 2003 representatives of the PA Rural Development Council, the Center for Rural Pennsylvania, the PA Department of Health, Division of HIV/AIDS, the Department of Corrections, the Department of Labor and Industry, the Office of Children, Youth and Families, and the Pennsylvania DCED Regional Directors were added to the Steering Committee to round out representation among all relevant state agencies. During that time three more counties also joined the Regional Homeless Assistance Process, bringing the total number of counties participating to 54. Finally, in 2004 an Entitlement Committee was established to bring the 13 Participating Jurisdictions (PJ's) into the state process. This Committee meets regularly to discuss issues of interest, and the Chair sits on the Steering Committee, which now means that there is now representation from the urban and suburban as well as the rural communities.

The PA Homeless Steering Committee manages the overall Continuum of Care planning process for all four regions, carrying out the following specific roles. It:

- Serves as a forum for information sharing;
- Formulates policy;
- Reviews and develops procedures for the RHAP Continuum of Care application process;
- Facilitates the collection of data on homelessness; and
- Directs and provides technical assistance to the regional Continuums of Care and individual project applicants.

HUD Policy Academies

Pennsylvania was one of ten states selected to participate in the May 20-22, 2003 Policy Academy in Chicago entitled "Improving Access to Mainstream Services for People Experiencing Chronic Homelessness." Subsequent to that Policy Academy, Pennsylvania developed a draft Action Plan

to End Homelessness. In April 2005 the Commonwealth participated in a second Policy Academy in Texas which resulted in drafting a plan to address homelessness among families and children. These two plans have been merged and elaborated to create the Agenda for Ending Homelessness in Pennsylvania.

Interagency Council on Homelessness

At the 2003 Policy Academy and in correspondence from the Secretary of Health and Human Services, it was recommended that Pennsylvania develop a state Interagency Council on Homelessness to further coordinate state initiatives. In response, at its June 2004 meeting, the newly created Governor's Housing Cabinet, which is responsible for policy formulation and coordination of all systems related to housing in the Commonwealth, agreed to serve as the Pennsylvania Interagency Council on Homelessness. Members of the Cabinet include:

- Executive Director of the Governor's Office of Housing and Community Revitalization
- Secretary of Banking
- Secretary of Community and Economic Development
- Secretary of Environmental Protection
- Secretary of Labor and Industry
- Secretary of Public Welfare
- Secretary of Transportation
- Secretary of Aging
- Governor's Chief of Staff or Designee
- Governor's Director of Policy or Designee
- Executive Director of the PA Infrastructure Investment Authority

In addition, the Executive Director of the PA Housing Finance Agency, the Secretary of the Department of Corrections, and the Chair of the Pennsylvania Board of Probation and Parole are serving on the Cabinet. In its capacity as the Interagency Council on Homelessness, the Cabinet is responsible for oversight of the Agenda for Ending Homelessness in Pennsylvania.

The purview of the Housing Cabinet as Interagency Council includes a review of all relevant departmental policies, plans and budgets to ensure consistency with the guiding principles listed above, including but not limited to the following: Continuums of Care; Community Services, Mental Health, and Substance Abuse Block Grants; County MH/MR Plans; state and local Consolidated Plans; Workforce Investment Act Plans; PHFA tax credit allocation plans; and Homeless Assistance Program plans. The Council also has the authority to review the performance of all relevant state agencies in advancing the state's mission and conforming to the guiding principles.

The Housing Cabinet will be the focus for coordination and linkage of both existing and emerging initiatives addressing the homeless population including but not limited to: the PATH program, Forensic Committees, MISA pilot projects, the Fairweather Lodge TA Project, and Workforce Investment Act Initiatives. It will also serve as the link to statewide advocacy organizations that address homeless issues including the Pennsylvania Housing Alliance and the Community Support Program.

At its June 2004 meeting the Cabinet approved formation of the People First Housing Work Group as one of three Cabinet subcommittees. Its role is to address housing issues related to

homeless families and individuals, people with disabilities and other groups needing supports as well as affordable housing. In this capacity the People First Work Group takes the lead on specific issues related to homelessness and serves as the link between the Cabinet /Interagency Council and the Steering Committee. The Steering Committee serves as their working arm and DCED and other state agencies provide staff support.

Vision and Guiding Principles

The following vision and guiding principles were reviewed and approved by the Interagency Council on Homelessness in June 2004. This vision and principles guide the Agenda for Ending Homelessness in Pennsylvania.

Vision Statement:

Pennsylvania envisions a state where there are no homeless individuals or families. Each person will have the support services needed to live as independently as possible in permanent housing of his or her choice. The mainstream services will be adequate, well-coordinated, consumer driven, and recovery-oriented. All housing and services will be offered with dignity and respect, and will provide hope.

The Commonwealth's Guiding Principles for Ending Homelessness:

1. Provide and assure access to a continuum of housing and supportive service.

- Assure that the Commonwealth of Pennsylvania provides a continuum of services, coordinated and delivered by organizations, which offers homeless consumers choices in the assistance they need to achieve and maintain their maximum level of independence.
- Assure access to supportive services and affordable housing in all areas of the state.
- Assure that the quantity and quality of affordable housing and services meets the needs of people who are homeless.
- Assure that the state departments and agencies identify outcomes and strategies to monitor those outcomes.

2. Nurture and expand creative use of resources.

- Seek creative ways to utilize current resources and to leverage new resources to prevent homelessness and to assist people who are homeless including people who are chronically homeless.
- Develop and maintain state and local intergovernmental relationships to coordinate and manage resources to assure access by homeless families and individuals.
- Develop community partnerships with private sector businesses, foundations, lenders, civic organizations, hospitals, childcare, and community based social and treatment services to address local homeless needs.

3. Develop an administrative structure and delivery mechanisms to effectively implement this plan.

- Assure that each state department and agency, in conjunction with the Interagency Council on Homelessness, devises plans and strategies designed to prevent

- homelessness and address the needs of people who are homeless that are consistent with the vision statement and guiding principles.
- Assure the prevention of homelessness through improved discharge planning and other prevention techniques and by expanding the number of affordable accessible housing options.

Strategies:

The Agenda for Ending Homelessness in Pennsylvania is based on three state-driven strategies to end homelessness throughout Pennsylvania. These strategies serve as the backbone for the implementation of the Plan's Action Steps, which will occur at both the state and local levels.

1- To improve coordination between state agencies and promote targeting of resources consistent with the state vision and guiding principles

A central part of the Agenda is to assess the effectiveness of the current state and local housing and human service delivery systems and to ensure that they support the above vision and guiding principles. By breaking down the "silos" through which resources are currently being funneled, Pennsylvania will be better able to ensure that resources are targeted to where they are most needed and most effective. In addition to key state departments and agencies, it is recognized that the support of county commissioners and other local officials is critical to the success of this effort. Therefore, financial and other incentives will be necessary to create a targeted approach to preventing and addressing homelessness.

The primary mechanism through which the state is addressing this strategy is through the implementation of the Supportive Housing Demonstration Program. Approved by the People First Housing Work Group, the demonstration project has three objectives:

- 1) To provide a laboratory for improving coordination among state agencies and removing systemic obstacles to the development of supportive housing;
- 2) To maximize federal, state and local resources by targeting state resources; and
- 3) To expand local capacity to develop and operate supportive housing.

Fifteen supportive housing projects submitted letters of interest in participating in the demonstration, representing a cross section of urban and rural areas, geographic regions of the state, type and experience level of sponsors, and population targeted. The projects were divided into four groups: Chronically Homeless/Co-Occurring Disorders; Criminal Justice Re-entry; Youth in Transition; and Survivors of Domestic Violence. Each group, which is composed of members from all relevant state agencies, has been meeting with the project sponsors to identify critical issues and obstacles to the development of supportive housing and to formulate strategies for improved coordination and targeting of resources.

2- To foster and support local efforts to ending homelessness

Given the size and diversity of the Commonwealth, the health of the local network of homeless housing and service providers is a critical factor in successfully implementing the Agenda for Ending Homelessness in Pennsylvania. Since every region of the state is different, the Plan must be designed to support local participation while accommodating regional differences. Training

and technical assistance are needed in order to build local capacity, especially in areas of the state where resources are limited. Currently, this is being done to a limited degree through the Office of Mental Health and Substance Abuse Services (OMHSAS), which provides technical assistance in forming and building Local Housing Option Teams (LHOTs) and other initiatives to address homelessness. OMHSAS also provides training for the state's Mental Health Housing Specialists who work out of the County Mental Health/Mental Retardation Offices to expand housing options for people with mental illness.

A significant state effort to increase local capacity will take place on November 30, 2005, when a full day will be devoted to "Practical Solutions to Homelessness" as part of the statewide housing conference "Homes within Reach." Homeless housing and service providers from throughout the Commonwealth will gather to network and to hear about best practices used in other communities and in other states to end homelessness.

3- To promote "recovery-oriented housing" and services for chronically homeless individuals

The Commonwealth of Pennsylvania and its Office of Mental Health and Substance Abuse Services has embraced the recovery model for the provision of housing and services to individuals served through the Mental Health System, including homeless individuals and families. The National Association of State Mental Health Program Directors' "Position Statement on Housing and Supports for People With Psychiatric Disabilities" provides the conceptual model. The statement reads:

Housing Options

It should be possible for all people with psychiatric disabilities to have the option to live in decent, stable, affordable and safe housing that reflects consumer choice and available resources. These are settings that maximize opportunities for participation in the life of the community and promote self-care, wellness and citizenship. Housing options should not require time limits for moving to another housing option. People should not be required to change living situations or lose their place of residence if they are hospitalized. People should choose their housing arrangements from among those living environments available to the general public. State mental health authorities have the obligation to exercise leadership in the housing area, addressing housing and support needs and expanding affordable housing stock. This is a responsibility shared with consumers and one that requires coordination and negotiation of mutual roles of mental health authorities, public assistance and housing authorities, and the private sector.

Provision of Services

Necessary supports, including case management, on-site crisis interventions, and rehabilitation services, should be available at appropriate levels and for as long as needed by persons with psychiatric disabilities regardless of their choices of living arrangements. Services should be flexible, individualized and promote respect and dignity.

We in Pennsylvania are taking this position statement seriously. The Office of Mental Health and Substance Abuse Services has recently established a Housing Work Group with the charge of developing specific goals, objectives, priorities and strategies for expanding recovery-oriented housing options. This document will be included as part of the Commonwealth's "Call to Action." The following goals and objectives for preventing and ending chronic and episodic

homelessness reflect the state's commitment to the recovery model for all people with serious mental illness.

Organization of this Document

Pennsylvania recognizes the importance of meeting HUD's goal of ending chronic homelessness by 2012. HUD defines the chronically homeless as "unaccompanied individuals with disabilities who have been continuously homeless for twelve months or more or who have had four episodes of homelessness in a three-year period." Although national studies indicate that these individuals typically comprise only 10% of the homeless population, on any given day they comprise 50% of adult shelter users. They also frequent emergency hospital beds, psychiatric beds, prisons and hospitals. An estimated 70% are substance abusers, 21% are people with mental health issues, and 85% have physical health problems. A high percent have co-occurring disorders. The premise is that ending homelessness among this population will free up critical resources that can be used to prevent and end homelessness among other populations. In Pennsylvania, the 2005 Point in Time Survey estimated 397 chronically homeless individuals in the four regional Continuums of Care, or approximately 16.5% of the total number of homeless on the night of January 26, 2005.

However, Pennsylvania is also keenly aware of the thousands of families and individuals who are episodically or transitionally homeless and in dire need of housing and services. National research indicates that the episodically homeless comprise 10% of the homeless population. They have a high incidence of substance abuse (60%) and mental health issues (17%) and tend to go in and out of shelters, drug rehabilitation programs and prison. They are often living on the streets and require residential treatment. Although this population does not necessarily use as many shelter nights as the chronically homeless, they have similar characteristics and also need supportive housing.

By far the largest group nationally, comprising approximately 80% of the homeless population, is transitionally or situationally homeless. Typically these individuals are homeless for the first time, usually following an extended period of economic and/or familial crisis. They have often been doubled up with relatives or friends for some time before entering a shelter. They may be victims of domestic violence or fire, people who are underemployed or seasonally employed, young adults with few job skills, or people whose illness led to job loss and eviction. Two-thirds of the transitionally homeless are children. When the emergency is over the transitionally homeless move on and rarely return for service.

Based on the Commonwealth's desire to meet HUD's goal of ending chronic homelessness by 2012 as well as its recognition of the importance of addressing homelessness among Pennsylvania's families and children, this Agenda addresses all three of the above homeless populations. The document is divided according to three key components: Homeless Prevention, Supportive Services, and Housing. Each component has goals, objectives and action steps, including responsible parties and target dates for completion. The specific subpopulation targeted is designated for each goal.

Agenda for Ending Homelessness in Pennsylvania

Homeless Prevention:

Goal 1: To prevent homelessness through maximum use of mainstream resources

Objective A: Improve access to and utilization of COMPASS (COMPASS provides PA citizens with information, screening, and application for social services and benefits over the internet, First Step (US Dept. of Health and Human Services tool to assist homeless access mainstream resources) and GovBenefits.gov (US Dept. of Labor's on-line resource to determine eligibility to receive benefits).

Target Population: ___ Chronic/Episodic ___ Families with Children X All

A-1: Work with the US. Dept. of Housing and Urban Development (HUD) and the US Dept. of Health and Human Services (HHS) to link COMPASS with First Step.

PA Dept of Public Welfare (DPW) Year 1

A-2: Provide training to case managers on the use of COMPASS, First Step and GovBenefits.gov so that they can assist occupants of public housing, subsidized housing, transitional housing, shelters and users of other social service programs in the use of these resources.

DPW Year 1

A-3: Provide all 23 State Correctional Institutions with access to COMPASS, First Step and GovBenefits.gov.

DPW and PA Dept. of Corrections Year 1

A-4: Provide information on how to use COMPASS, First Step and GovBenefits.gov to the RHABs

DPW Year 1

A-5: Provide information to County Correctional Institutions on how to use COMPASS, First Step, and GovBenefits.gov

RHABs Year 1

A-6: Implement "One Economy" broadband internet connections in newly developed affordable housing units.

PA Housing Finance Agency (PHFA) Year 1

A-7: Link COMPASS, First Step, and GovBenefits.gov to the PHFA Affordable Apartment Locator.

PHFA Year 1

Goal 2: To prevent homelessness among individuals who have been discharged from publicly-funded institutions

Goal 2-1: Correctional Institutions

Objective A: To determine the number and characteristics of the individuals who have been discharged from a correctional institution and then became homeless.

Target Population: ___ Chronic/Episodic ___ Families with Children ___ X All

A-1: Customize the HMIS to provide the following data:

- The number of people being served through the homeless services system who had previously been incarcerated.
- Whether they served in a county, state, or federal correctional facility.
- Whether they “maxed out” or were paroled.
- What subpopulations are represented (seriously mentally ill, substance addicted, HIV/AIDS, Veterans, Youth)

PA Dept. of Community and
Economic Development (DCED) Year 1

A-2: Develop a profile of the housing and service needs of individuals leaving correctional institutions who have become homeless.

DCED Year 2

A-3: Use the profile to inform transition planning for correctional facilities.

PA Dept of Corrections (DOC) Year 3

Objective B: To identify barriers to accessing housing encountered by individuals being discharged from correctional institutions or who have a criminal record.

Target Population: ___ Chronic/Episodic ___ Families with Children ___ X All

B-1: Analyze the Criminal Justice Re-Entry projects that are participating in the Supportive Housing Demonstration Program to determine the systemic and other barriers faced by the target population.

Criminal Justice Re-Entry Team of the
Supportive Housing Demonstration Project Year 1

B-2: Identify specific strategies for addressing each of the barriers identified

Criminal Justice Re-Entry Team of the
Supportive Housing Demonstration Project Year 2

B-3: Identify funding sources for the Criminal Justice Re-Entry demonstration projects

Criminal Justice Re-Entry Team of the
Supportive Housing Demonstration Project Year 2

B-4: Remove systemic obstacles to the development of housing opportunities for individuals exiting the criminal justice system

People First Housing Work Group/
DOC/Probation & Parole

Year 3

B-5: Create additional housing opportunities for 60 individuals based on the results of the demonstration.

Housing Providers

Years 4-10

Objective C: To improve discharge/transition planning from state correctional institutions

Target Population: ___Chronic/Episodic ___ Families with Children ___X All

C-1: Revise the Housing Options Training Curriculum developed in 2004 based on information obtained from the data analysis and Permanent Supportive Housing Demonstration projects.

PA Dept of Corrections (DOC)

Year 4

C-2: Develop an MOU between DCED and DOC on the implementation of Housing Options Training

DCED and DOC

Year 5

C-3: Test the Housing Options Training Curriculum in two State Correctional Facilities (1 male and 1 female)

DOC

Year 6

C-4: Review and revise the curriculum.

DOC

Year 7

C-5: Implement the curriculum throughout the State Correctional System and in all counties.

DOC

Years 8 to 10

Objective D: To engage the correctional institutions in homeless planning at the regional level.

Target Population: ___Chronic/Episodic ___ Families with Children ___X All

D-1: Educate county jail representatives about the Regional Homeless Assistance Process (RHAP) and obtain one representative on each the Regional Homeless Advisory Board (RHAB).

RHABs

Year 1

Objective E: To analyze existing programs/protocols currently used in County correctional institutions to assist individuals with mental health needs.

Target Population: ___X___Chronic/Episodic ___ Families with Children ___ All

E-1: Analyze the results of the survey of county mental health housing specialists on local initiatives that link criminal justice to mental health programs.

OMHSAS

Year 1

E-2: Identify effective models for linking mental health services with the Criminal Justice System.

OMHSAS Year 1

E-3: Present models at a Statewide meeting

OMHSAS Year 1

E-4: Feature models in the *Housing Choices* newsletter

OMHSAS Year 1

E-5: Develop a process to replicate the most effective programs in other counties as part of PA OMHSAS’s agenda for Recovery-Oriented services.

OMHSAS Years 2-5

Objective F: To improve access to Public Housing and Housing Choice (Section 8) Vouchers for ex-offenders.

Target Population: ___Chronic/Episodic ___ Families with Children X All

F-1: Meet with those PHAs that in the statewide housing authority survey expressed a willingness to investigate strategies to provide housing options for ex-offenders.

DCED Year 1

F-2: Develop a demonstration project with one PHA in each region.

DCED Years 2 -3

F-3: Evaluate the results of the demonstration project

DCED Years 4-5

F-4: Based on the evaluation, design program prototypes to be replicated by at least two other PHAs in each region

DCED Year 10

Goal 2-2: Child Service System:

Objective A: To determine the number and characteristics of the individuals who have been discharged from the foster care, children’s mental health, and/or juvenile justice system and then become homeless.

Target Population: ___Chronic/Episodic X Families with Children ___ All

A-1: Customize the HMIS to provide the following data:

- The number of people being served through the homeless services system who had previously been in the child service system.
- Whether they were served by the foster care, the children’s mental health and/or the juvenile justice system.
- What subpopulations are represented (seriously mentally ill, substance addicted, HIV/AIDS, Veterans)

DCED Year 1

A-2: Develop a profile of the housing and service needs of individuals who have been served by the child service system and have become homeless.

DCED Year 2

A-3: Use the profile to inform transition planning for the child service system.

PA Children and Youth, OMHSAS,
Juvenile Justice Year 3

Objective B: To identify barriers to accessing housing encountered by individuals being discharged from the child service system.

Target Population: ___Chronic/Episodic ___X___ Families with Children ___ All

B-1: Analyze the three Youth in Transition projects that are participating in the Supportive Housing Demonstration Project to determine the systemic and other barriers faced by the target population.

Youth in Transition Team of the
Supportive Housing Demonstration Project Year 1

B-2: Identify specific strategies for addressing each of the barriers identified

Youth in Transition Team of the
Supportive Housing Demonstration Project Year 2

B-3: Identify funding sources for the Youth in Transition projects

Youth in Transition Team of the
Supportive Housing Demonstration Project Year 2

B-4: Remove systemic obstacles to the development of housing opportunities for individuals transitioning from the child service system.

People First Housing Work Group & DPW Year 3

B-5: Create 112 additional housing opportunities based on the results of the demonstration.

Housing Providers Years 4-10

Objective C: To prevent homelessness through effective discharge planning for youth exiting the child service system

Target Population: ___Chronic/Episodic ___X___ Families with Children ___ All

C-1: Examine the discharge policies for youth exiting the mental health system.

OMHSAS Year 1

C-2: Examine the discharge policies for youth exiting the juvenile justice system.

Juvenile Justice Year 1

C-3: Examine the discharge policies for youth exiting the foster care system

PA Dept of Children and Youth Services Year 1

C-4: Identify issues beyond the Supportive Housing Demonstration that need to be addressed either by an existing body or by a newly formed task force.

DPW

Year 2

Objective D: *To expand county Children & Youth use of transitional living programs & supervised independent living programs (for youths still in the system) to prevent homelessness among youth leaving the foster care system.*

Target Population: ___ Chronic/Episodic X Families with Children ___ All

D-1: Determine utilization of existing transitional living beds.

DPW

Year 1

D-2: Examine incentive/disincentives for counties to keep youth in substitute care (defined as transitional living, foster care, group home residential, etc.) or supervised independent living programs until age 21.

DPW

Year 1

D-3: Investigate setting aside a portion of Chaffee room and board funds at the state level for youth discharging on or after age 18.

DPW

Year 2

D-4: Determine a goal for increased use of county transitional living and supervised independent living beds.

DPW

Year 2

D-5: Determine a goal for number of youth remaining in care until age 21.

DPW

Year 2

D-6: Expand transitional and supervised independent living placements to all counties.

DPW

Year 5

D-7: Implement a requirement for discharge planning prior to releasing all youth from care.

DPW

Year 5

Goal 3: To prevent homelessness for individuals with mental illness and/or co-occurring substance addiction

Objective A: *To expand the use of alternative housing options for individuals with mental illness and/or co-occurring substance addiction who are at risk of becoming chronically homeless.*

Target Population: X Chronic/Episodic ___ Families with Children ___ All

A-1: Research and summarize alternative housing models for the target population.

Steering Committee

Year 1

A-2: Determine applicability and feasibility of using these models for the target population

Chronic Homeless Team of the

Supportive Housing Demonstration Project

Year 2

- A-3:** Develop strategies for using models for individuals being discharged from state hospitals
Pa Dept of Mental Health and Substance
Abuse Services (OMHSAS) Year 3
- A-4:** Provide TA to the State Hospital Service Area Planning Teams on planning recovery-oriented community housing and supports
OMHSAS On-Going
- A-5:** Work with housing authorities, landlords and other housing providers to increase the number of rental subsidies and public housing units for individuals with mental illness.
County Mental Health Housing Specialists On-going
- A-5:** Disseminate information on successful innovative housing options through newsletters, web and training
OMHSAS On-going

Supportive Services:

Goal 1: To develop state level policy changes to increase funding available for supportive services for homeless individuals and families.

Objective A: To shift Continuum of Care supportive services funding renewal costs to other sources.

Target Population: ___ Chronic/Episodic ___ Families with Children ___ X All

A-1: Analyze the supportive services costs in all Supportive Housing Program (SHP) projects to determine the annual renewal burden for services, the types of services, and the subpopulations served.

Steering Committee

Year 1

A-2: Determine which renewal projects can be funded in whole or in part through other resources.

PA Dept. of Public Welfare (DPW),
Office of Mental Health and Substance
Abuse Services (OMHSAS)

Year 1

A-3: Shift SHP renewal costs to other mainstream resources with the goal of 20% in Year 2 and 100% by Year 5.

DPW

Years 2-5

Goal 2: To develop and implement a recovery-oriented service system to end chronic homelessness throughout Pennsylvania.

Objective A: Expand capacity to address the mental health, substance abuse and other special needs of the chronically homeless

Target Population: X Chronic/Episodic ___ Families with Children ___ All

A-1: Identify “best practices” in recovery-oriented services throughout the state.

OMHSAS Consultant

Year 1

A-2: Use findings to develop training materials and materials for distribution

OMHSAS Consultant

Year 2

A-3: Present findings at OMHSAS Housing Specialist Meeting/Conference

OMHSAS Consultant

Year 2

A-4: Identify obstacles to applying best practices in rural areas

Chronic Homeless Team of the

Supportive Housing Demonstration Project

Year 2

A-5: Develop strategies to overcome obstacles

Chronic Homeless Team of the
Supportive Housing Demonstration Project Year 2

A-6: Develop training module on strategies
OMHSAS Year 3

A-7: Present training at Statewide Best Practices Conference and/or other appropriate venues
OMHSAS Year 3

Goal 2: To increase the effectiveness of case managers at homeless provider agencies in addressing chronic homelessness.

Objective A: To increase effectiveness in case management by case managers at homeless provider agencies, especially in small and rural communities

Target Population: Chronic/Episodic Families with Children All

A-1: Establish a Homeless Case Management Committee
Steering Committee Year 1

A-2: Determine best practices in case management for the chronically homeless
Homeless Case Management Committee Year 1

A-3: Present initial models at the Statewide Practical Solutions to Homelessness conference.
Homeless Case Management Committee Year 1

A-4: Develop principles for standardizing case management procedures for case managers of homeless provider agencies
Homeless Case Management Committee Year 2

A-5: Present training and principles at statewide Best Practices Conference and/or other appropriate venues
Homeless Case Management Committee Years 2-4

Goal 3: To ensure access to employment and training services for homeless persons.

Objective A: To work with the Dept of Labor and Industry (L&I) to encourage Workforce Investment Boards (WIBs) to target homeless persons and acknowledge them as part of the workforce

Target Population: Chronic/Episodic Families with Children All

A-1: Steering Committee will meet with L&I to identify actions needed to encourage WIBs to serve homeless persons.
Dept of Labor and Industry (L&I) Year 1

A-2: Educate/inform the state boards for WIA about the employment needs of homeless adults.

L&I Year 2

A-3: Identify obstacles to WIB's/CareerLink offices meeting the employment and training needs of homeless persons.

L&I Year 2

A-4: Develop strategies to address obstacles identified.

L&I Year 2

A-5: Present sessions on homeless as workforce at the annual workforce investment conference.

L&I Year 2

A-6: Present workshops on the resources available through the CareerLink at homeless shelters.

CareerLink staff Years 2- 10

A-7: Establish collaboration through an MOU between CareerLinks and Office of Vocational Rehabilitation for intervention services.

L&I Year 3

A-8: Promote cooperation and liaison between CareerLinks and Homeless Veterans' Reintegration Programs.

L&I Year 3

Objective B: To seek 50% federal match for employment and training for food stamp recipients.

Target Population: ___ Chronic/Episodic ___ Families with Children ___ X All

B-1: Identify state funding sources that could serve as match.

DPW Year 1

B-2: Set a goal for a specific percentage increase for employment and training programs with food stamps match.

DPW Year 1

B-3: Target or expand employment and training for homeless families and those at risk of homelessness

DPW Year 2

Objective C: To modify TANF Employment and Training RFP funded projects so that they used more of their funding to assist homeless families.

Target Population: ___ Chronic/Episodic ___ X Families with Children ___ All

C-1: Meet with the Employment & Training program director to discuss and explore priorities included in the annual process of awarding these funds.

DPW Office of Income Maintenance Year 1

C-2: Determine the allocation of TANF Employment and Training funds that are currently provided for homeless and obtain more information on the program and its relationship to this population

DPW Office of Income Maintenance Year 1

C-3: Set a goal for a percentage increase of the program's resources which will be targeted for homeless and the number of homeless people to be placed into employment.

DPW Office of Income Maintenance Year 1

C-4: Implement program with revised priorities

DPW, Office of Income Maintenance Year 2

Goal 4: To understand and address the educational needs of homeless children and youth.

Objective A: To determine the extent to which early intervention programs, including Head Start, are being accessed by homeless children.

Target Population: ___ Chronic/Episodic X Families with Children ___ All

A-1: Determine whether the HMIS has appropriate data fields to capture utilization of educational services, including Head Start and early intervention.

DCED Year 1

A-2: Collect data and conduct an analysis of the utilization of early intervention programs by homeless children.

DCED Year 2

A-3: Develop procedures to increase utilization of early intervention programs by homeless children.

PA Dept of Education (PDE) Year 3

A-4: Provide training and TA to service providers in how to access early intervention programs for homeless children.

PDE Years 3-10

A-5: Provide training and TA to early intervention programs in working with homeless children.

PDE Years 3-10

Objective B: To develop a connection between the educational system, including Head Start, and the RHABs/Steering Committee.

Target Population: ___ Chronic/Episodic X Families with Children ___ All

B-1: Have a Homeless Children's Initiative Project site coordinator meet with each RHAB to improve coordination between service providers and the schools/Head Start

PA Dept of Education Homeless Liaison (PDE) Year 1

B-2: Increase awareness of PDE homeless liaisons about Continuums of Care and RHABs
PDE Year 1

B-3: Inform homeless service providers about homeless education liaisons
RHABs Year 1

B-4: Provide information to homeless providers about Head Start and early intervention
resources and determine if it is used by homeless agencies
Steering Committee Year 2

B-5: Identify whether the nutritional needs of homeless children are met or could be improved
through educational system food programs (e.g., school and summer lunch, Head Start, backpack
program)
PDE Year 2

HOUSING

Goal 1: To assess the need for additional permanent supportive housing for chronically homeless individuals.

Objective A: To determine the number, characteristics, and location of chronically homeless individuals in the four rural regions.

Target Population: Chronic/Episodic Families with Children All

A-1: Using data from the HMIS, develop a profile of the chronically homeless individuals who are using the homeless services system.

DCED

Year 1

A-2: Conduct a street count of the homeless in at least 2 counties per region, including identifying the number and location of unsheltered chronically homeless individuals.

RHAB

Year 2

A-3: Increase by 100% the number of counties in each region that conduct a street count of the homeless.

RHAB

Years 2,4,8,10

A-4: Using data from Street Counts of the homeless, develop a county by county profile of the unsheltered homeless.

DCED

Years 2,4,8,10

Objective B: To determine the number and location of permanent supportive housing units available to chronically homeless individuals.

Target Population: Chronic/Episodic Families with Children All

B-1: Using the HMIS, determine the number of units of permanent supportive housing targeted to chronically homeless individuals in each county and region.

DCED

Each year

B-2: Analyze the geographic distribution of chronically homeless individuals and the location of permanent supportive housing to determine where and how many additional units are needed.

Steering Committee

Each year

Goal 2: To expand permanent supportive housing for chronically homeless individuals.

Target Population: Chronic/Episodic Families with Children All

Objective A: To identify barriers to accessing housing encountered by chronically homeless individuals.

Target Population: Chronic/Episodic Families with Children All

A-1: Analyze the two Chronically Homeless projects that are participating in the Supportive Housing Demonstration Project to determine systemic and other barriers faced by the target population.

Chronic Homeless Team of the
Supportive Housing Demonstration Project Year 1

A-2: Identify specific strategies for addressing each of the barriers identified

Chronic Homeless Team of the
Supportive Housing Demonstration Project Year 2

A-3: Identify funding sources for the Chronically Homeless Demonstration Projects

Chronic Homeless Team of the
Supportive Housing Demonstration Project Year 2

A-4: Remove systemic obstacles to the development of housing opportunities for chronically homeless individuals.

People First Housing Work Group & DPW Year 3

A-5: Develop adequate additional housing opportunities to meet the housing needs of the chronically homeless (as determined under Goal 1).

Housing Providers Years 4-10

Objective B: To expand the use of alternative housing options for chronically homeless individuals.

Target Population: X Chronic/Episodic ___ Families with Children ___ All

B-1: Research and summarize alternative housing models for the chronically homeless

Steering Committee Year 1

B-2: Determine applicability and feasibility of using these models for the chronically homeless (shared housing, domiciliary care, Fairweather Lodges, etc.)

Chronic Homeless Team of the
Supportive Housing Demonstration Project Year 2

B-3: Work with housing authorities, landlords and other housing providers to increase the number of rental subsidies and public housing units for the chronically homeless

DCED On-going

B-4: Develop demonstration to increase admission among this population

DCED with RHABs Year 2

B-5: Disseminate information on successful innovative housing options through newsletters, web and training

DCED Year 3

Objective C: To expand the number of permanent supportive housing options funded with McKinney Vento dollars

Target Population: X Chronic/Episodic ___ Families with Children ___ All

C-1: Continue to work with Local Housing Option Teams, CoC's and other housing coalitions to address housing needs of chronically homeless
OMHSAS Consultant On-going

C-2: Submit applications to HUD for at least 4 new permanent supportive housing programs for the chronically homeless, one in each region, in those counties with the greatest need for additional units.
Project Sponsors Years 1- 10

Goal 3: To expand access to housing for homeless families & children.

Objective A: To bring public housing authorities (PHAs) to the table to increase use of Housing Choice Vouchers and public housing units targeted to homeless families and to increase their participation in Continuum of Care projects.

Target Population: ___ Chronic/Episodic X Families with Children ___ All

A-1: Continue the dialogue started at the 2005 PAHRA Conference to engage more PHAs in actively serving homeless families.
DCED On-going

A-2: Determine the number of PHAs that actively serve the homeless in each Region.
RHABs Year 1

A-3: Increase participation by encouraging 5 to 10 additional PHAs to actively serve homeless families and individuals.
RHABs Year 2

A-4: Engage all PHAs in serving homeless families
DCED Year 10

Goal 4: To develop more permanent service-enriched (supportive) housing for homeless families requiring services.

Objective A: To examine the feasibility of providing mobile case management within affordable housing developments, including identification of a dedicated funding stream for housing support and services

Target Population: ___ Chronic/Episodic X Families with Children ___ All

A-1: Identify state and federal funding sources for services.
PA Dept of Public Welfare (DPW) Year 1

A-2: Engage the Corporation for Supportive Housing or another TA Firm to assist with developing a plan for PA to increase the number of permanent supportive housing units available for homeless families.
Governor's Office of Housing and Community Revitalization (GOHCR) Year 1

- A-3:** Review findings and recommend approaches for PA
Steering Committee Year 2
- A-4:** Present recommendations to the People First Housing Work Group
Steering Committee Year 2
- A-5:** Discuss recommendations
People First Housing Work Group
(PFHWG) Year 2
- A-6:** Develop a plan for expanding non-McKinney resources for supportive services in PA based
on approved recommendations
Steering Committee Year 2
- A-7:** Implement plan for mobile case management.
Steering Committee Year 3

Goal 5: To establish a statewide rental assistance subsidy program to supplement Housing Choice Vouchers.

Objective A: To identify potential funding sources for rental subsidies.

Target Population: ___Chronic/Episodic ___ Families with Children X All

- A-1:** Create an inventory of resources that could be used to create a TBRA.
Governor's Office of Housing and
Community Revitalization (GOHCR) Year 1
- B-2:** Determine whether to request federal TA from the Policy Academy on options and
program ideas.
DCED Year 2
- B-3:** Make recommendations to People First Housing Work Group.
DCED Year 2
- B-4 :** Implement demonstration projects or programs.
OHCR Year 3

Goal 6: To determine the cost of homelessness among families.

Objective A: To undertake data studies to look at the cost of homelessness among families

- A-1:** Formulate goals and objectives of the study
DCED Year 1
- A-2:** Request TA to find and undertake a study
DCED Year 1
- A-3:** Define how a data study would be structured to develop policy
DCED Year 2

- A-4:** Look at the potential to use/enhance the HMIS
DCED Year 2
- A-5:** Implementation of data study
DCED Year 2
- A-6:** Use the data to determine priorities for state/federal resources and potential redirection of funds.
Steering Committee and GOHCR Year 3