County of Los Angeles
CHIEF ADMINISTRATIVE OFFICE
713 KENNETH HAHN HALL OF ADMINISTRATION • LOS ANGELES, CALIFORNIA 90012
(213) 974-1101
http://cao.co.la.ca.us

DAVID E. JANSSEN
Chief Administrative Officer

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Fifth District

REVISED
ATTACHMENT INCLUDED

October 13, 2005

To: Supervisor Gloria Molina, Chair
Supervisor Yvonne B. Burke
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: for David E. Janssen
Chief Administrative Officer

OPTIONS FOR MORE EFFECTIVE ADMINISTRATION OF HOMELESS SERVICES AND PROGRAMS (JUNE 20, 2005 MOTION) REPORT

On June 20, 2005, your Board appropriated funds for emergency shelters and operations and directed my office to work with the Community Development Commission (CDC) to research and evaluate dedicated revenue sources for homeless programs; and to work with CDC, the Auditor-Controller, County Counsel, and the City of Los Angeles to develop options for more effective administration of homeless services and programs in Los Angeles County. We provided your Board with a 60-day report in response to your request on August 25, 2005. This provides you with an update as to where we are today.

Los Angeles Homeless Services Authority (LAHSA) Fiscal/Contract Operations Assessment Update

The following identifies activities and or updates to the information included in our August 25, 2005 report:

- The LAHSA Commission unanimously approved the creation of the Finance, Contracts, and Grants Management Committee. The following four LAHSA Commissioners sit on this Committee: Larry Adamson, Chair; Veronica Brooks; Sarah Dusseault; and Ruth Schwartz. The Committee convened its first meeting in early August 2005, and continues to meet twice monthly in an effort to address the recommendations put forth in the July 19, 2005, joint City/County report entitled, "Assessment of Current Fiscal Operations of the Los Angeles Homeless Services Authority."

- County, City, and LAHSA representatives continue to meet regularly with the U.S. Department of Housing and Urban Development to keep them apprised of the progress to date, and to seek their guidance and input to ensure that the proposed methodologies utilized to resolve outstanding issues meet their standards.

- CDC has revised its process for issuing Independent Living Program (ILP) funds to LAHSA for pass-through to contract providers. The revision mandates LAHSA to provide CDC with extensive documentation related to the payment requests in addition to the contract provider's invoices. This revision of the process is seen as a way to better monitor ILP dollars and to ensure that funds are being utilized as intended.

- A Request for Proposals (RFP) has been issued to replace Tarzana Treatment Center ILP beds; the final date for filing proposals is October 24, 2005. The maximum amount of the RFP is $371,000 and will serve to provide Emergency and Transitional shelter beds for emancipating foster youth.

Governance Structures

Governance structures across the country were researched by staff of my Service Integration Branch. The research indicates that many jurisdictions have established governance structures in response to the Federal government's goal to end homelessness (ten-year plan to end homelessness). In order for the governance to be successful, however, it is important that the structure be responsive to local needs and conditions, as well as the Federal goals. Given the fact that local needs may change over time, it is also important to ensure that the governance structure is reviewed from time to time to test its relevance to local conditions. A synopsis of the research is contained in the attached matrix. Some key findings of the research are as follows:

- Governance structures utilized by jurisdictions across the country are based on a regional approach/involvement.

- A key component for most of the governance structures is the use of an oversight body with representation from both elected and appointed officials of government agencies (state, county, and city), community-based organizations, faith-based organizations, homeless advocates, current and former homeless persons, economic and community development experts, law enforcement, and educational institutions.

- Many jurisdictions' governance structures have a sub-committee component; the sub-committees function under the larger oversight body. Examples of the sub-committees are: executive vested with operational capacity, funding, discharge planning, permanent supportive housing, mainstream supportive services (health, mental health, substance abuse), and job training/employment.

Operational Issues Related to Governance:

- One California county, Contra Costa, has created an Office of Homeless Programs under their Health Services Department. This Office provides staff support to the County's Homeless Inter-Jurisdictional/Inter-Departmental Work Group.

- Several jurisdictions are in the process of developing Homeless Management Information Systems to provide an electronic system of navigating homeless and housing services.

If you have any questions or need additional information, please contact me, or your staff may contact Lari Sheehan at (213) 893-2477, or lsheehan@cao.co.la.ca.us.

DEJ:LS
MDC

Attachment

c: Raymond G. Fortner, Jr., County Counsel
J. Tyler McCauley, Auditor-Controller
Bryce Yokomizo, Director, Department of Public Social Services
Carlos Jackson, Executive Director, Community Development Commission
Deputy Mayor Bud Ovrum, City of Los Angeles
Mercedes Marquez, General Manager, City Housing Department
Mitchell Netburn, Executive Director, Los Angeles Homeless Services Authority
Members, Los Angeles Homeless Services Authority

OVERVIEW OF CHRONIC HOMELESSNESS INITIATIVES

The United States Interagency Council on Homelessness (ICH) developed a template for creating a Ten-Year Plan to End Chronic Homelessness. The following 23 government entities (except for San Diego) present a plan on the ICH Web site (www.ich.gov). The matrix briefly provides an overview of each entity's governance structure to implement the plan, as well as highlights of the plan's goals and strategies. The first column includes the writer of the report if shown in the plan. Eight plans that provide more specific strategic planning and action steps are indicated with a check mark.

Government Entity	Governance Structure	Highlights of Action Plan/10-Year Plan Goals
Anchorage, Alaska	Five member Oversight Board appointed by Mayor to track progress and implementation of the Mayor's Task Force on Homelessness. Task Force consisted of 24 members appointed by the Mayor to represent various sectors of the community. The community sectors represented were: homeless individuals; local, state, and Federal governments; educational institutions; social service providers; neighborhoods; businesses; law enforcement; communities of faith; health care; and funders. Task Force was formed as a subcommittee of the existing Housing and Neighborhood Development Commission, and is staffed by the Division of Community Development, Office of Economic and Community Development.	Plan includes short- and long-term action steps with performance measures (table provided in plan). Action steps: 1. Community/neighborhood impact. 2. Seamless community approach to service delivery and analysis. 3. Funding. 4. Social service/case management. 5. Housing production and preservation. 6. Subsidized housing.
Asheville, North Carolina Charlotte Caplan, Community Development	Asheville City Council and the Buncombe County Commission formed a steering committee, in which 33 local business, non-profit, and government leaders developed a Ten-Year Plan to End Homelessness. City and County staff provided support.	Goals: 1. Reduce the number of people who become homeless. 2. Increase the number of homeless people placed into permanent housing. 3. Decrease the length and disruption of homeless episodes. 4. Provide community-based service and supports that prevent. homelessness before it happens and diminish opportunities for homelessness to recur. Strategies: 1. Designating a lead entity. 2. Developing the infrastructure – Homeless Management Information System (HMIS). 3. Prevention. 4. Housing First. 5. Housing Plus.
Atlanta, Georgia ✓ Deloitte Consulting, United Way	Mayor Shirley Franklin asked the United Way of Atlanta to establish a Commission on Homelessness. The 16-member Commission includes private and public sector leaders and experts to develop a plan to end homelessness. More than 90 individuals representing 64 organizations participated in one or more of 18 work group sessions. The *Blueprint* recommends a public authority to implement the plan.	Detailed action plan provides recommendations to specific issues. Each issue and related projects, partners, purpose, action steps, and measurable outcomes are described. Best practices are also provided. A timeframe to meet goals and budget allocations are presented. Strategies: 1. Prevention. 2. Outreach/intake/assessment. 3. Emergency shelter. 4. Transitional housing. 5. Permanent support. 6. Support services. 7. Permanent affordable housing. 8. Systems strategies.
Chattanooga, Tennessee	The Chattanooga Regional Interagency Council on Homelessness will integrate the Chattanooga region's many effective, but often isolated, service and housing programs for	Organized, detailed plan with specific outcomes/goals. Emphasis on coordination, systems change.

✓	homeless people into a coordinated system of homeless services and housing. The Council includes government, nonprofit and faith-based agencies serving homeless people to collaborate on a comprehensive regional response to homelessness. The Council will improve data collection and analysis, establish service standards, measure program performance, coordinate case management, and establish annual numerical targets for the reduction of homelessness.	Goals: 1. Reduce the number of people who become homeless. 2. Increase the number of homeless people placed into permanent housing. 3. Decrease the length and disruption of homeless episodes. 4. Provide community-based services and supports that prevent homelessness before it happens and diminish opportunities for homelessness to recur. Strategies: 1. Expand permanent housing opportunities. 2. Increase access to services and supports. 3. Prevent homelessness. 4. Develop a mechanism for planning and coordination.
City of Chicago	Chicago Continuum of Care is a consortium of community organizations, private and public, not-for-profit and for-profit entities.	Strategies: 1. Prevention. 2. Housing First. 3. Wraparound services.
Columbus, Ohio	Franklin County and Columbus Continuum of Care Steering Committee includes representation from public and nonprofit agencies.	A matrix shows for each goal, the action steps, participating organizations, target dates, and mainstream resources (funding). Goals: 1. Prevention. 2. Intervention. 3. Infrastructure. 4. Manage for results. 5. Other.
Contra Costa County, CA ✓	Homelessness Inter-Jurisdictional Inter-Departmental Work Group (HIJIDWG) with support of County Office of Homeless Programs within the Health Service Department will implement this Ten-Year Plan. The group will create the Annual Implementation Blueprint, oversee development of HMIS, and work with the Continuum of Care Advisory Board to oversee the development of public education and fundraising campaigns designed to enhance understanding of homelessness.	Detailed strategies are proposed to fill gaps in the current system. Five priorities are outlined with further analysis of the issue, suggested response, and implementation strategies/action steps to achieve change. Goals: 1. Housing First. 2. Wraparound services. 3. Employment. 4. Link chronically homeless to housing, treatment, and services. 5. Prevent homelessness.
Denver, Colorado ✓	Mayor Hickenlooper formed the Denver Commission to End Homelessness with representatives from social service and government agencies, neighborhood associations, businesses, and people who are homeless. The Commission is led by the Denver Department of Human Services (DDHS) and meets every six months, four subcommittees meet more frequently: Implementation Team, Evaluation Team, Fund Raising Team, Oversight Committee (includes DDHS, Denver Office of Economic Development, Executive Director of the Denver Commission on Homelessness and other Commission members and agency staff).	Examines system changes to decrease homelessness. Targeted costs and specific outcomes are outlined. Tables describing each goal, list specific actions, expected time frame, proposed partners, cost, and funding status. Goals: 1. Permanent and transitional housing. 2. Shelter system. 3. Prevention. 4. Services. 5. Public safety and outreach. 6. Education, training, and employment. 7. Community awareness and coordinated responses. 8. Zoning, urban design, and land use.

Indianapolis, Indiana	Mayor Peterson designated a subcommittee of the Housing Task Force to develop the Blueprint to End Homelessness. Consultants, work teams, and project teams of local providers participated. Report recommends implementation group to include: city government, the Indianapolis Housing Agency, other local and state officials, philanthropies, and other community leaders. Those involved in the Blueprint process have concluded that responsibility for the implementation of the Blueprint should reside with Coalition for Homelessness Intervention and Prevention (CHIP). CHIP is a nonprofit organization that provides information to an extensive network of provider agencies and others; acts as an information source on homelessness and housing issues; collects information regarding the needs and demographics of the homeless population, available resources, and examples of effective self-sufficiency programs; acts as a partner in community planning efforts related to the various service needs of homeless persons and those at risk of becoming homeless; assists in resource development; and acts as a broker of partnerships among various community planning efforts, working committees, and networking sessions.	The plan mentions a 211 system to coordinate services. Cost estimates and broad recommendations are provided in the action plan. Strategies: 1. Addressing housing needs. 2. Preventing homelessness. 3. Accessing and coordinating housing and services. 4. Enhancing services. 5. Coordination of services for special populations.
Maricopa County, AZ	The Maricopa Association of Governments coordinates the activities of the Regional Continuum of Care Committee on Homelessness. The Committee is organized into five subcommittees and includes community members, organizations (public, private), and providers. The Planning and Finance Subcommittees develop recommendations for the Committee. Three other groups are: Application Ad Hoc Group, Gaps Analysis Ad Hoc Group, and HMIS Advisory Group.	The plan presents a gap analysis to assess unmet need and four strategies are discussed. Strategies: 1. Increase funding. 2. Prevent homelessness. 3. Remove barriers to accessing services (includes system change). 4. Improve data collection and outcomes.
Memphis, Tennessee ✓ Blueprint prepared by Partners for the Homeless, Pat Morgan, Executive Director	City of Memphis Mayor Herenton and Shelby County Mayor Rout jointly appointed the Mayors' Task Force on Homelessness in July 2001. Task Force is designated entity for planning and facilitating implementation of a more comprehensive, more highly coordinated system of services and housing options to break the cycle of homelessness. The Mayors' Task Force on Homelessness, co-chaired by Robert Lipscomb, Director of the City's Division of Housing and Community Development and the Memphis Housing Authority, and Peggy Edmiston, Director of Shelby County's Community Services, consists of senior-level public and private policymakers, grantmakers, directors of vital mainstream programs for disadvantaged people, and representatives of providers of services to homeless people, the faith community, and business leaders. Numerous providers of services to homeless and other disadvantaged people participated in focus groups and working groups to form recommendations for addressing the structural issues and individual risk factors that contribute to homelessness.	Memphis/Shelby County's planning process for developing the Continuum of Care system has earned a best practice award from the U.S. Department of Housing and Urban Development (HUD). This Blueprint, which builds on, yet goes beyond the Continuum of Care planning process, represents this community's movement to the next level. Goals with specific strategies are included in the Blueprint. Priorities and barriers are also identified. Goals: 1. Maximize Use of Mainstream Programs by Homeless and Precariously Housed People and Providers of Services 2. Increase Efficiency and Coordination of Service Delivery Among. Service Provider Organizations. 3. Fill Gaps in Services and Housing Options for Chronically Homeless Individuals with Mental Illness and/or Chemical Dependencies. 4. Improve/Increase Efforts to Prevent Homelessness. 5. Improve Coordination and Increase Involvement of the Faith Community in Developing More Comprehensive and Effective Measures to Break the Cycle of Homelessness and Prevent Future Homelessness. 6. Leverage the Expertise and Resources of the Business/Corporate Community. 7. Address Remaining Structural Barriers to Breaking Homelessness and Preventing Future Homelessness.

Mercer County, New Jersey www.merceralliance.org (609) 989-9417 Dennis Micai, Alliance Chairman and Director of the Mercer County Board of Social Services	The Mercer Alliance to End Homelessness (The Alliance) is a collaboration of government agencies, nonprofit organizations, elected officials, corporations, congregations, community groups, and individuals who have come together to create comprehensive strategies to end homelessness. Each committee (see short-term goals) will be responsible for the implementation and oversight of its respective goals, which will be determined at the start of each new year. Details of each committee's goals, the steps they will take to achieve them, and the persons responsible for oversight are included in the report.	Long-term goals: 1. Preventing homelessness or "closing the front door" by providing a financial safety net to protect those who have housing, but are in danger of losing it. Equally necessary is ensuring that government institutions do not discharge people into homelessness. 2. Housing First or "opening the back door" by coordinating provider systems so that people who become homeless move into safe, affordable, and permanent housing as soon as possible. 3. "Building a foundation" by actively working with other groups to promote truly affordable housing, decent wages, and/or increasing income and work supports, and ensuring case management, treatment options and access to government and private services. Short-term goals and actions: The goals are divided into five focus areas that align with respective committees. 1. Making safe and affordable housing available and ending poverty in communities. 2. Establishing a seamless safety net. 3. Developing and implementing income strategies. 4. Implementing discharge planning. 5. Raising public awareness of the issues.
Nashville, Tennessee Management Solutions Group	Mayor Purcell appointed a 26 member task force to develop Nashville's ten-year plan that will meet the Federal government's goal to end chronic homelessness. Members include advocates for the homeless, representatives of the faith community, downtown property owners, government officials, business, and political leaders. The task force divided the planning into four work groups: Housing, Health, Economic Stability, and Systems Coordination.	Each of the four work group sections includes gaps and barriers, best practices, and recommendations in the plan. Current and past efforts in Nashville to impact chronic homelessness, as well as recommended goals for the ten-year, plan are included. Next steps include engaging more community representatives and adding action steps. Funding strategies, estimated costs, gap analysis, recommendations, and outcome measures are included.
New York, New York Uniting for Solutions Beyond Shelter planning committee, call (212) 361-8000 or E-mail Planningcommittee@dhs.nyc.gov	Mayor Bloomberg convened a group of public, private, and nonprofit leaders to develop a ten-year, multi-sector strategy to address homelessness concerns and strengthen the city's response. A 41-member coordinating committee, as well as hundreds of task force participants and experts, convened from November 2003 through April 2004 to produce a nine-point strategy. Following the release of this plan, a full implementation strategy will be developed. This will identify responsible authorities for each task, as well as a work plan with timeframes. The strategy will include targets and milestones, which will gauge progress in achieving the following key indicators (see next column). The city's 311 number is linked to services for the homeless: 1) 24-Hour Mobile Street Outreach is available to help someone in need on the street; 2) Emergency Shelter Hotline is the resource for emergency shelter; and 3) DHS' Office of Client Advocacy is utilized for those currently receiving services and need assistance.	Strategy aims to: 1. Overcome street homelessness. 2. Prevent homelessness. 3. Coordinate discharge planning. 4. Coordinate city services and benefits. 5. Minimize disruptions to families whose homelessness cannot be prevented. 6. Minimize duration of homelessness. 7. Shift resources into preferred solutions. 8. Provide resources for vulnerable populations to access and afford housing. 9. Measure progress, evaluate success, and invest in continuous. improvement Key Indicators: 1. Decrease the number of individuals living on city streets. 2. Decrease the number of people who need shelter through prevention efforts. 3. Increase the number of people leaving shelter for permanent housing. 4. Decrease the time that individuals and families remain in shelter. 5. Decrease the total number of people in shelters. 6. Increase the supply of affordable, service-enriched, and supportive housing.
Portland, Oregon	Housing Commissioner on Portland City Council established, with the endorsement from the Chair of Multnomah County, the	A table shows each of nine action steps with tasks, participating organizations, and outcomes.

✓	Citizens Commission on Homelessness (CCOH). This body was comprised of elected officials, business and community leaders, neighborhood association chairs, and persons experiencing homelessness. CCOH was intentionally set up without representation of government or nonprofit agency staff to allow for an external process that would help develop broad community support for a plan. A second planning body was established to continue the necessary coordination and planning with nonprofit agencies and multiple parties with interests in homelessness. The Plan to End Homelessness Coordinating Committee (PTEHCC) represents a different constituency of nonprofit agencies, "mainstream" agencies, such as County Community Justice, health and mental health departments, and the Housing Authority of Portland serving homeless people, representatives from other planning bodies, and homeless and formerly homeless people. Staffing for these bodies came primarily from the City of Portland's Bureau of Housing and Community Development. Liaison staff provided support to these bodies from Multnomah County's Housing Office, Office of School and Community Partnerships, Department of County Human Services, and Department of Community Justice, as well as the Housing Authority of Portland. Nonprofit agency staff and community partners also committed numerous hours to planning. Current day-to-day responsibilities: Multnomah County Offices, The City of Portland Bureau of Housing and Community Development (BHCD).	1. Move people into Housing First. 2. Stop discharging people into homelessness. 3. Improve outreach to homeless people. 4. Emphasize permanent solutions. 5. Increase supply of permanent supportive housing. 6. Create innovative new partnerships to end homelessness 7. Reorganize rent assistance to increase efficiency and effectiveness. 8. Increase economic opportunity for homeless people. 9. Implement new data collection technology throughout the homeless system. In an effort to increase coordination and support systems change across the silos of the four homeless systems (adult, youth, domestic violence and family systems), eight new work groups were established across functions of the continuum of homeless services. Some will continue to oversee ongoing planning and implementation work while others completed their charge. Eight work groups: 1. Discharge Planning. 2. Short-term Rent Assistance. 3. Chronic Homelessness. 4. Outreach and Engagement. 5. Facility-Based Transitional Housing. 6. Consumer Feedback. 7. Shelter and Access. 8. Bridges to Housing. In addition to these work groups, many others contributed to the Ten-Year Plan to End Homelessness, including: Housing and Community Development Commission (HCDC); Population-Specific Planning Groups; Policy Advice on Services; Commission on Children, Families, and Community (CCFC); Regional Blue Ribbon Committee on Housing Resource Development; Special Needs Committee; and Poverty Reduction Framework.
Quincy, Massachusetts Tatjana Meschede, Ph.D., Senior Research Associate at CSP	Quincy Leadership Council on Chronic Homelessness Quincy-Weymouth Continuum of Care, designated by HUD, joined together with the Leadership Committee to create this ten-year plan. The plan identifies the critical areas and action steps necessary toward ending chronic homelessness. The Leadership Committee will continue to meet quarterly throughout the next ten years to ensure the implementation and success to end homelessness in Quincy. The Leadership Committee is comprised of community leaders from the private and public sectors.	An evaluation consultant has contributed to the plan and included information on data gathering. Goals, actions steps, and outcomes are shown for each critical area toward ending homelessness. Budget information is also provided. Critical areas: 1. Prevention and discharge planning. 2. Data gathering. 3. Affordable supportive housing. 4. Supportive services. 5. Self-sufficiency through job/vocational training and job placement. 6. Cost-benefit analysis. 7. Political will.
Raleigh, North Carolina ✓ Anne Lezak ADL Consulting Susan Milstrey Wells Researcher/Writer	The City of Raleigh, Wake County, Wake Continuum of Care, and Triangle United Way formed a Planning Team to develop Ending Homelessness: The Tten-Year Action Plan, a Steering Committee of business, faith, academia, and service representatives provided ongoing guidance. To ensure broad-based community participation, the Partnership (Planning Team plus Steering Committee) held five public forums attended by more than 150 people each, conducted six focus groups with people who are homeless, and convened eight community leadership forums. In addition, two additional initiatives will have an impact on homelessness in the near future: HMIS and	This plan focuses on building partnerships within communities and empowering residents to participate in planning and implementation. Information on cost estimates, benchmarks, and overall team structure is shown in the plan. Goals: 1. Prevent homelessness from happening in the first place. 2. Engage individuals who are the most reluctant to accept help, connecting or reconnecting them to needed housing, health and behavioral health care, and social services. 3. Housing, employment/education, and supportive services for people who are homeless or at risk of homelessness. 4. To gain or regain a life in the community, individuals need to become

	Healing Place for Women and Children. The Leadership Council will provide guidance and objective perspectives to the many efforts being undertaken. Leadership Council membership will include human services, faith, education, business, government, and citizen leaders as well as consumers. The Leadership Council will offer the Action Plan Work Group insight as to direction, new efforts needed, and will serve as a base of community support. This group will meet quarterly to ensure that goals, objectives, and strategies of the Ending Homelessness Action Plan are being met. At least one meeting per year will serve as a public forum for the community at large. These annual forums will provide the Leadership Council, the Action Plan Work Group, and the Action Teams an opportunity to update the community on plan actions and to reaffirm community direction and support as the Action Plan evolves and new strategies are adopted.	self-sufficient to the extent possible. 5. Educate the community about the problems of people who are homeless and effective strategies to address their needs. Objectives with Strategies (includes benchmarks): 1. Prevention. 2. Engagement. 3. Housing. 4. Employment/Education. 5. Services and Supports. Five Community Partnership Action Teams will each address one of the five key Action Plan objectives, will develop and refine actions and strategies for implementation, and will serve as liaisons to the agencies, groups, and individuals that will carry out the action steps. Working members of these teams will represent a cross-section of organizations, interest groups, and individuals who will "own," develop, and carry out parts of the plan with unique insight from a variety of community perspectives. Teams will meet regularly to ensure that actions and strategies are being formulated and carried out effectively and in coordination with one another. A leader from each of the five action teams will serve on the Action Plan Work Group.
San Diego, California Deborah Lester and John Thelen Regional Task Force on the Homeless	Regional Task Force meets monthly, with a board of 35 members and various committees representing the City and County of San Diego, the United Way, local jurisdictions, business and community improvement groups, homeless service providers, and homeless advocates from throughout the region. A seven member Steering Committee reviews the Task Force work plan. It is the mission of the Task Force to work toward a countywide system of services. Task Force is implementing a standardized data collection system for tracking homeless clients and developing policies, plans, resources, and programs for reducing homelessness.	A Regional Homeless Snapshot was published in July 2003. The report discusses implementation of a Regional HMIS. Through enhanced collaboration, service delivery and data collection capabilities, the San Diego Regional Task Force on the Homeless aims to create a more integrated approach across the region. The software application *ServicePoint* records and manages client data.
San Francisco, California A writing committee, lead by Barbara Meskunas, met for several weeks to organize the committee recommendations. The writing committee included Council members Mike DeNunzio, Fred Martin, Ann Marks, Paul Boden, Dr. Francis Rigney, and Chair Angela Alioto. Lauren Hall of the Corporation for Supportive Housing also contributed.	Former Board of Supervisors President Angela Alioto, Chair of a diverse, nonpartisan working group was appointed by Mayor Newsom to lead the Ten Year Planning Council. Several committees were involved with planning; Finance Committee; Prevention and Discharge Planning Committee; Mainstream Health and Employment Committee; Outreach, Assessment and Behavioral Health Committee; and Permanent Supportive Housing Committee. More than 785 individuals representing over 400 organizations participated in one or more of these 85 meetings, and provided valuable contributions of information, funding, meeting space, and time. The San Francisco Foundation provided fiscal sponsorship of the Council's work, and contributed accounting services to facilitate payment of expenses.	Much of the plan discusses current services and supports in place, and the number receiving services. Specific recommendations are provided with outcomes measures. For each goal, actions steps, responsible organizations, and target dates are included. Goals: 1. Permanent housing. 2. Prevention. 3. Housing – Direct access program. 4. Emergency shelters – ensure access for people with special needs. 5. Integrated services (access substance abuse services). 6. Integrated services (Treatment on Demand recommendations). 7. Integrated services – Medi-Cal and SSI advocacy.
Scranton/Lackawanna County, PA	The Scranton/Lackawanna County Ten Year Plan to End Chronic Homelessness is supported by the City of Scranton, Mayor Chris Doherty and Lackawanna County through the Office of Human Services (John Nalevanko). Many agencies and individuals have had an active part as well as many homeless and formerly homeless assisted in planning.	Goals are provided with objectives and action steps. 1. Prevention – prevent evictions, increase wages, and income stability, develop strategy to address root causes of homelessness, reduce number of women who become chronically homeless as a result of domestic violence. 2. Intervention – know who is chronically homeless, make permanent housing available, reduce barriers that prevent chronically homeless persons from getting permanent housing. 3. Build the infrastructure to end homelessness – end homelessness by

		housing the homeless, provide service needed for people to get and maintain housing, support efforts to create wages, and benefits to allow households to pay for basic expenses, especially housing.
Washington, D.C.	The Interagency Council will create cross-systems strategies within D.C. government to end homelessness and publish an annual report on the plan's progress. A new homeless policy planning group co-chaired by deputy mayors responsible for the city's health and human services agencies (the Office of the Deputy Mayor for Children, Youth, Families and Elders or ODMCYFE) and its housing, economic development, and planning agencies will participate. The Focus Group engaged a broad spectrum of city and business leaders, homeless providers and advocates, and homeless people in planning discussions. Subcommittees of the Focus Group produced comprehensive recommendations, including: replacing wornout shelters with new facilities; developing new interagency approaches to delivering wraparound mainstream services; and creating new public and private financing tools to underwrite an increase in the stock of permanent affordable housing for the homeless and low-income households at risk of becoming homeless. An additional committee also delivered recommendations for reforming the legal framework of homeless services.	The plan is designed to be a guiding framework and statement of policy direction rather than as a detailed roadmap of how it will be achieved. Financing sources and a gap analysis with target numbers are included. Three central policy directives: 1. Increase homeless prevention efforts using local and Federal resources. 2. Develop and/or subsidize at least 6,000 new units of affordable, supportive permanent housing by 2014. 3. Actively coordinate mainstream social services for homeless Continuum of Care residents. In order to achieve these goals, three implementation strategies will guide the work of the District government and the community-based organizations with which it partners. 1. Interdepartmental coordination and cross-system policy implementation. 2. Community education and community outreach to gain support for the ten-year plan and the "Housing First" and "Housing Plus" approaches. 3. Advocacy for reduction of Federal and other barriers to delivering services and housing that can prevent and end homelessness.
State of Maine Written by Michael R. DeVos, Chairperson	The Subcabinet on Homelessness oversees efforts and consists of one member from the Maine State Housing Authority (MSHA), Department of Corrections (DOC), Department of Behavioral and Development Services (DBDS), and Department of Health Services (DHS). Twelve members of the Interagency Task Force on Homelessness partnered with the Subcabinet to develop a State Action Plan to End Homelessness. The Task Force coordinates information, identifies gaps in delivery services, reviews and monitors plans. The 12 members of the Senior Staff Committee to End Homelessness report to the Subcabinet. In addition to these groups from state government offices, an Advisory Council includes members from nonprofits and the Local Homeless Working Group includes constituent groups.	The primary goal of the Subcabinet on Homelessness is to achieve better integration across state agency systems – MSHA, DOC, DBDS, and DHS. MSHA may become the lead agency and additional agencies will be brought in as needed. The report acknowledges further planning is necessary for evaluation and data collection. Outline of work plan: 1. Data analysis/ongoing measurement system (also HMIS). 2. Medicaid Waivers/Links to Income Benefits. 3. Effectiveness of Housing Vouchers/Tenant Based Rental Assistance/Security Deposits. 4. Case Managers/Housing Counselors/Advocates, and Transportation.
State of Minnesota ✓	The Minnesota Legislature, at the request of Governor Pawlenty, directed the State Commissioners of Human Services, Corrections, and Housing Finance to convene a broad representative working group to address the issue of homelessness in Minnesota. The Working Group consisted of 30 members representing counties, state agencies, the Federal government, philanthropic organizations, local housing and redevelopment authorities, nonprofit organizations, faith-based organizations, developers, and business interests. Approximately 200 other stakeholders, representing 100 organizations, provided valuable input. In addition, a number of less formal meetings with service providers, local governments, developers, architects, contractors, property owners and landlords, and persons currently experiencing homelessness provided valuable input into the process. Finally, a committed group of knowledgeable state agency and department staff from Human Services, Corrections, Housing Finance, Employment	Applying a business plan model, the plan examines existing resources and recognizes gaps in funding by region. A financing plan to leverage other sources and efforts to maintain accountability are reviewed. Findings from a statewide survey are presented to provide an overview of the state's homelessness issue. Furthermore, best practices and examples from efforts to decrease homelessness in Minnesota are described. A systems change approach is incorporated in this plan. Goals: 1. Reduce the number of Minnesota families and individuals that experience long-term homelessness. 2. Reduce the inappropriate use of emergency health care, shelter, chemical dependency, corrections, and similar services. 3. Increase the employability, self-sufficiency, and other social outcomes for individuals and families experiencing long-term homelessness.

	and Economic Development, and Finance met regularly to review data, plan agendas, draft reports, and keep the process moving. A long-term homeless director without new bureaucracy is recommended to coordinate implementation of the business plan. The director should report to the Commissioners of Human Services, Housing Finance, and Corrections. In addition, and also within existing resources, the Department of Human Services intends to offer technical assistance for service planning for housing with support service projects. A broadly representative advisory body like the Working Group should be established to assist in implementation of the business plan and track progress. The state agencies also should continue their work to develop creative funding strategies that allow a more natural "system" to develop to provide for the development of supportive housing.	The Need: Provide housing with support service opportunities to 4,000 additional households. The Strategy: Cost effective reforms for providing housing and support services.
State of Utah	The Homeless Coordinating Committee for Utah (HCC) was created in 1988 by the legislature and is comprised of gubernatorially-appointed members from a consortium of community organizations, private and public, not-for-profit, and for-profit entities. The primary activities of the HCC have been the annual homeless count and allocating funds for homeless programs. The HCC has recently been refocused with new appointments and assigned responsibilities to implement this ten-year business plan. The implementation will include: a) coordinating all activities serving the homeless, b) establishing outcome measures to determine resource utilization effectiveness supported by a statewide homeless management information system, c) the establishment of funding priorities, and d) securing additional resources from the Federal government, private investors, the State, and public. With policy level members on the HCC, these actions will be done in a collaborative and integrated approach.	The state's business plan provides a needs assessment and gap analysis. Goals (aligned with 5 committees): 1. Discharge Planning – Representatives from service agencies and those working with prisoners, mentally ill, foster children, and medical hospitals, will establish statewide guidelines and coordinate efforts to reduce the flow into homelessness. On a national level, this is referred to as "closing the front door." Three subcommittees have been established to develop detailed measurable action plans to place those released from prisons and jails, mental health institutions and hospitals, and those aging out of foster care and Juvenile Justice Services in permanent supportive housing. 2. Affordable Housing – Representatives from financial institutions, housing authorities, developers, providers, and planners who will develop statewide guidelines and measurable actions for the identification, placement, funding, and construction of affordable housing units. 3. Supportive Services – Representatives from homeless providers, case managers, Workforce Services, educators, researchers, legal, Veteran's Administration, Social Security Administration, and substance abuse counselors, who will identify, develop, and implement statewide best practices for comprehensive case management services. 4. Information Systems – Agency providers, researchers, businesses, and investors who will define statewide data collection and outcome measures. 5. Implementation Infrastructure – Representatives from the seven State Association of Governments, the League of Cities and Towns, planning commissions, mayors, county commissioners, and public officials who assist each AOG or subAOG in creating a local Homeless Coordinating Committee with the appropriate membership.