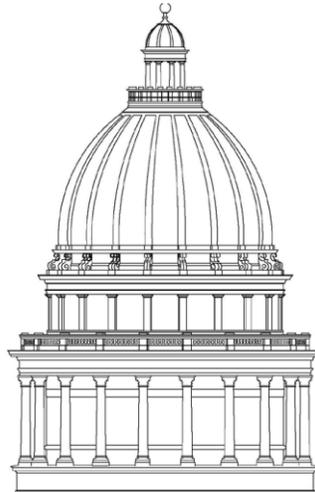


REPORT TO THE
UTAH LEGISLATURE

Number 2018-12



**A Performance Audit of
Utah's Homeless Services**

December 2018

Office of the
LEGISLATIVE AUDITOR GENERAL
State of Utah



STATE OF UTAH

Office of the Legislative Auditor General

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KADE MINCHEY, CIA, CFE
AUDITOR GENERAL

December 2018

TO: THE UTAH STATE LEGISLATURE

Transmitted herewith is our report, **A Performance Audit of Utah's Homeless Services** (Report #2018-12). A digest is found on the blue pages located at the front of the report. The objectives and scope of the audit are explained in the Introduction.

We will be happy to meet with appropriate legislative committees, individual legislators, and other state officials to discuss any item contained in the report in order to facilitate the implementation of the recommendations.

Sincerely,

A handwritten signature in black ink that reads "Kade Minchey".

Kade Minchey, CIA, CFE
Auditor General

Digest of A Performance Audit of Utah's Homeless Services

For many years Utah has worked towards a more data-driven, results-oriented approach to providing homeless services. For example, in 2004 the State Homeless Coordinating Committee (SHCC) prepared a ten-year plan to eliminate chronic homelessness. The plan states: "Evaluation will be an important part of the plan implementation. Each action will delineate specific benchmarks and outcome measures as a framework to gauge progress and report to policymakers and funders." Since that time, other groups have made similar commitments to monitor the effectiveness of services provided to the homeless. Even so, we found that Utah's homeless services system still lacks clear goals and objectives and continues to have difficulty measuring the results of the services it provides. This report offers several recommendations aimed at strengthening the oversight, planning, and accountability of Utah's homeless services system. If implemented, these recommendations should help public officials, service providers and funders prepare a clear strategy for addressing the problems associated with homelessness in Utah and measure their progress towards achieving their goals.

To ensure that our homeless service system is as efficient and effective as possible, the Legislature has asked the Auditor General to conduct three separate audits, each addressing a different set of issues. This report answers concerns about the overall efficiency and effectiveness of Utah's homeless services system. The two previous audits were:

A Limited Review of Sources of Funding and Expenditures for Homeless Initiative: This report was released in October 2017. The objective of this audit was to provide the Legislature with an understanding of the different sources and uses of funds that intended to provide services to the homeless.

A Limited Review of Three Facilities Operated by The Road Home: Released in May 2018, this audit reviewed concerns regarding health and safety at facilities operated by The Road Home.

Chapter II

Utah Lacks Oversight and Performance Measures of its Homeless System

The information presented in this chapter responds to the Legislature's request to identify which programs serving the homeless are effective at achieving their goals, or placing homeless individuals in housing. Due to problems with the data and weak management information systems, we were unable to answer either question. Although we found no shortage of information about client activities and the services provided to them, we did not find the data to be of much use in terms of monitoring program outcomes. Additionally, Utah does not utilize the data for evaluation, which allows data errors to continue without correction. Moreover, we found that the data gathered from providers by the Continuum of Care Regions (CoCs)¹ and the Utah Division of Housing and Community Development are not being used effectively to monitor performance. This chapter recommends strengthening the Homeless Management Information System (HMIS) so it can be used as an effective tool for creating a more results-driven system for serving the homeless.

Poor HMIS Data Does Not Allow for Program Performance Evaluation. Some key performance indicators drawn from the HMIS either have errors or are incomplete. In addition, there have been several changes made to the methods used to count chronic homelessness. As a result, we found it impossible to evaluate the state's success over time in serving that critical population.

Utah Does Not Consistently Utilize Performance Measures to Evaluate Contract Outcomes. The Division of Housing and Community Development (HCD or division) does not sufficiently utilize contract performance data. The performance measures that the division does collect are not consistent. However, there are a few private providers and Operation Rio Grande who have demonstrated that it is possible to evaluate outcomes.

Poor Data Resulted in Utah Erroneously Reporting A Large Decrease in Chronic Homelessness. We also found that we could not rely on past reports of the performance of Utah's homeless services system. For example, we found significant errors in reports describing the success of Utah's decade long effort to end chronic homelessness. These reports illustrate the need to develop more accurate measures of the service system's progress towards accomplishing its goals.

For example, in 2005, the SHCC announced plans to eliminate chronic homelessness by 2014 and made a commitment to measure the state's success in achieving that goal. Then, in 2015, the state reported it had largely achieved its goal and that the number of

¹Utah has three CoCs: Salt Lake County CoC (Salt Lake County), Mountainland CoC (Utah, Wasatch and Summit Counties), and the Balance of the State CoC (represents the rest of the state).

chronically homeless individuals had declined 91 percent since 2005. However, due to problems with the data, we determined that those figures were inaccurate. It should be noted, that the Department of Workforce Services also recognizes the problems with the past chronic homelessness data and has discontinued using them. Although the state has greatly expanded the housing available for the chronically homeless, Utah needs to utilize consistent and reliable data to be able to continually evaluate the performance of individual programs and the entire homeless services system.

Utah Needs A Data Driven System. This report recommends that the SHCC take steps to create a more results-oriented system for serving the homeless. Specifically, they need to strengthening the Homeless Management Information System (HMIS) so it can be used as an effective tool for monitoring the performance of individual programs as well as the homeless service system as a whole. However, to develop an effective performance monitoring system will require the SHCC to prepare a new strategic plan that includes clear, measurable goals and performance expectations first. That process is described in Chapter III of this report.

Chapter III

Utah Needs a Coordinated Response to Homelessness

Before Utah can evaluate the success of its homeless service system, it must first define what success is. This chapter describes three steps that should be taken to unite Utah's state agencies, local governments, business community, and service providers behind a common strategy and shared goals to reduce homelessness.

Better Oversight and Planning Are Needed to Improve Utah's Response to Homelessness. The first step in creating a coordinated response to homelessness is to create an oversight body that is responsible for strategic planning, goal setting, and results monitoring. Utah has its SHCC, but the committee does not have a current strategic plan or a set of measurable goals. We recommend that the Legislature consider clarifying in statute the SHCC's specific responsibilities. Among other things, they should be given responsibility for statewide oversight.

At the local level, we found a few communities which have taken initial steps to prepare a strategic plan for homeless services. However, local level oversight is fragmented among different boards and committees. For example, in Salt Lake County, oversight is provided by three different boards and a coordinating committee. To strengthen local planning and accountability, we recommend that the SHCC designate local oversight bodies for homeless services in each region of the state.

REPORT TO THE UTAH LEGISLATURE

Report No. 2018-12

A Performance Audit of Utah's Homeless Services

December 2018

Audit Performed By:

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Chapter I

Introduction

Utah is fortunate to have many different groups working to reduce homelessness. Funding for homeless services comes from numerous federal, state, and local government programs. Many religious organizations, private foundations, and businesses also provide financial support. These funds are distributed to dozens of non-profit organizations that offer a wide range of services, including temporary shelter, housing, food, medical care, and counseling. However, due to the fragmented nature of the service delivery system, questions have been raised about whether the resources are being used efficiently and whether the providers are accomplishing their goals to reduce homelessness.

To ensure that our homeless service system is as efficient and effective as possible, the Legislature has asked the Auditor General to conduct three separate audits, each addressing a different set of issues. This report answers concerns about the overall efficiency and effectiveness of Utah's homeless services system. The two previous audits were:

A Limited Review of Sources of Funding and Expenditures for Homeless Initiatives: This report was released in October 2017. The objective of this audit was to provide the Legislature with an understanding of the different sources and uses of funds that intended to provide services to the homeless.

A Limited Review of Three Facilities Operated by The Road Home: Released in May 2018, this audit reviewed concerns regarding health and safety at facilities operated by The Road Home.

Funding For Homeless Programs Comes From Many Sources and Serves Many Different Groups

Utah's homeless services system is comprised of dozens of non-profit organizations and government agencies that receive funding from many different public and private sources. We estimate that Utah spent over \$100 million in 2017 on direct and indirect costs associated with services for individuals experiencing homelessness. According to

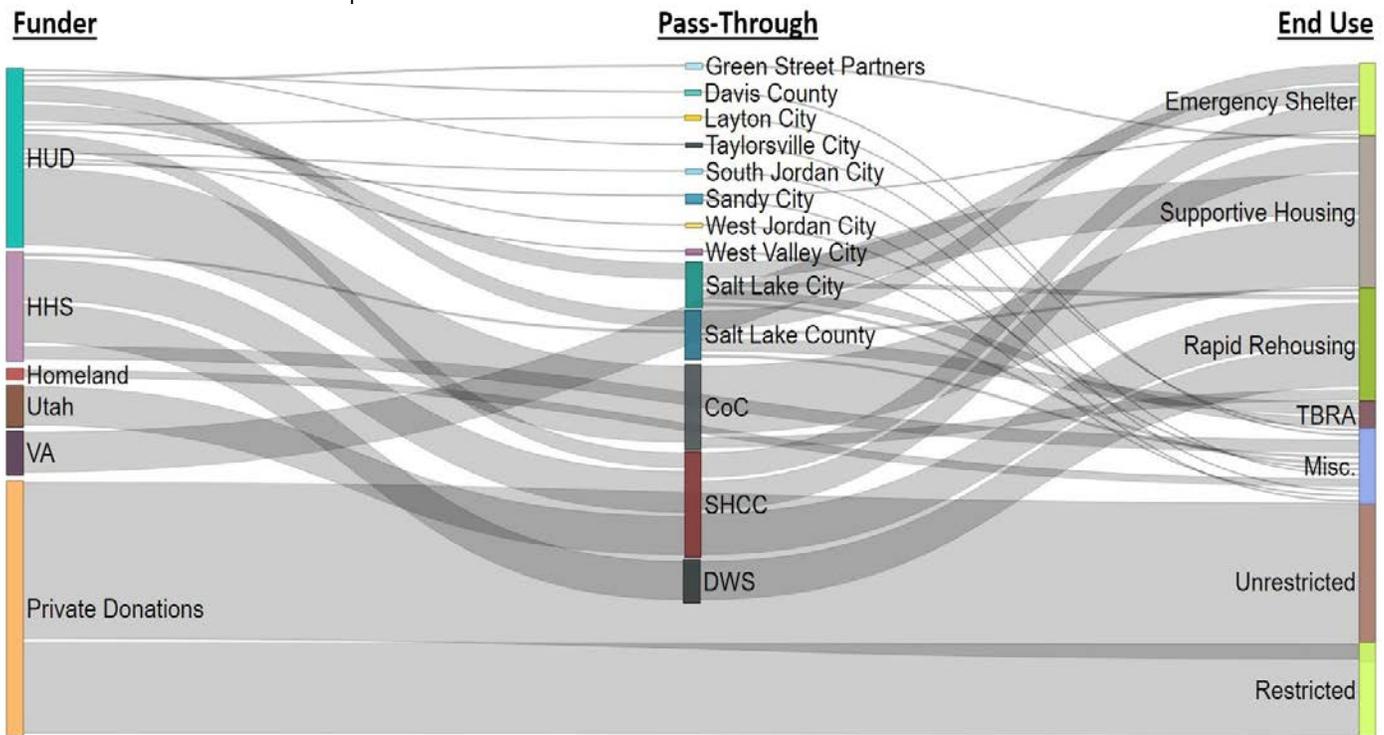
This report answers concerns about the overall efficiency and effectiveness of Utah's homeless services system.

Utah's Point-in-Time Counts, 61 percent of Utah's homeless population is single men, and contains many subpopulations, including veterans, families, and unaccompanied youth. Also of interest is the geographic distribution of Utah's homeless population. The majority of homeless people in Utah live in Salt Lake County. One likely reason is that most of the emergency shelters and supportive services are offered in Salt Lake County.

Utah Relies on a Fragmented Network of Funding Sources to Pay for Homeless Services

There are numerous funding sources, pass through entities, and service providers that all play a role in moving resources to where they can be used to benefit the homeless. However, with so many groups all trying to help the homeless, it has become challenging to understand and monitor all the sources and uses of those funds. Figure 1.1 shows the flow of funds to just one non-profit service provider.

Figure 1.1 Flow of Funding for One Service Provider. The flow of funds is a complex system flowing from multiple funders through several pass-through entities.



The provider described in Figure 1.1 has six primary sources of funding. Many of those funding sources are further divided into programs that target specific populations and service needs. For example, the funding that originates from the U.S. Department of Housing and Urban Development is allocated to 12 of the 13 pass-through entities before being put to its end use. Figure 1.1 also shows that most federal and state funding does not go directly to the provider but is passed through 13 entities that distribute the funds and monitor their use.

Figure 1.1 shows how complicated and fragmented the flow of funds can be for just one provider. Systemwide, this pattern is repeated as funds move from donors and government agencies to intermediary agencies and ultimately to dozens of different service providers. Each funding stream comes with its own set of service requirements, outcome measures, and evaluation systems. To create a true “systems” approach to homeless services, an enormous amount of leadership, cooperation, and coordination is required.

Utah Spends Over \$100 Million in Indirect and Direct Services for Individuals and Families Experiencing Homelessness

We estimate that Utah spends over \$100 million in indirect and direct services on individuals experiencing homelessness. While we did not examine the appropriations for fiscal years 2017 or 2018, we know that the Legislature increased appropriations to the State Homeless Coordinating Committee (SHCC) during these years. In 2016, the SHCC provided oversight for a total of nearly \$4.7 million. The total amount allocated by the SHCC increased to nearly \$17 million in fiscal year 2019. Figure 1.2 describes the total amount of funds for homeless services from each major governmental source.

Funding allocation to the SHCC has increased to \$17 million in fiscal year 2019.

Figure 1.2 Recent Federal, State, and Local Funding of Utah Homeless Services. Amounts are in millions of dollars.²

Fiscal Year*	Cost Category	Federal**	State	Salt Lake County	Salt Lake City	Total
2014	Direct	\$27.0	\$5.9	\$2.7	\$0.4	\$36.0
	Associated	6.9	4.1	10.0	6.7	27.6
	Total	33.9	10.0	12.7	7.1	63.6
2015	Direct	27.1	9.0	2.9	0.5	39.5
	Associated	8.6	4.9	9.8	8.7	31.9
	Total	35.7	13.9	12.7	9.2	71.5
2016	Direct	28.4	7.6	3.3	1.1	40.4
	Associated	13.5	7.2	8.9	11.2	40.8
	Total	41.9	14.8	12.2	12.3	81.2

Source: Individual federal program data, COBI 2017, Salt Lake City and Salt Lake County provided spending data; totals may not equal the sum of relevant columns and rows due to rounding

*State, county, and city figures adhere to state fiscal year, July through June. Most federal dollars adhere to federal fiscal year, October through September. Remainder of federal dollars adhere to state fiscal year.

**The US Department of Veterans Affairs provides many services for homeless veterans directly. The cost of these services is not included in this report due to the difficulty in acquiring this information from federal agencies.

The federal government is the largest government funder of homeless services and programs in Utah.

This information was presented in a prior audit report released in October 2017. It shows that the total direct financial support for services to the homeless equal \$40 million in 2016, with another \$40 million in indirect or associated costs. In addition to public spending on homeless services, there are also considerable private donations.

Private Donors also Offer Significant Financial Support. While we were unable to quantify all sources of private donations, we could identify private donations in the financial statements of 14 service providers. Our conservative estimates show that during 2017, over \$18 million in private donations were given to non-profit organizations that serve the homeless. In addition, DWS has stated private donations can make up nearly 40 percent of a provider’s budget. The estimated private donation amount, combined with the \$81 million shown in Figure 1.2 and the recent increases in appropriations from the Utah Legislature, has led us to conclude that the total funding for homeless services in Utah reached at least \$100 million in 2017 alone.

We estimate private donations total over \$18 million in 2017.

² Fiscal year 2016 is the most recent year for which we have complete data for all levels of government.

Utah's Homeless Population Includes Many Subgroups

Those benefiting from services are generally classified as belonging to one of the five key homeless populations shown in Figure 1.3.

Figure 1.3 The 2018 Point-in-Time Count of Homeless Individuals in Utah. The point-in-time count is the number of homeless identified on a single day in January each year.

Homeless Subpopulations	Count
1. Survivors of Domestic Violence	635
2. Chronically Homeless	306
3. Families	286
4. Veterans	239
5. Unaccompanied Youth	191
Other homeless not belonging to the above	1,209
Total Individuals Experiencing Homelessness	2,876
Other Characteristics of Homeless*	Count
Chronically Homeless Veterans	<26
Adults with Mental Illness	931
Adults with Substance Abuse Disorders	698
Adults with HIV/AIDS	<25

Source: State of Utah Annual Report on Homelessness 2018.
*Clients may belong to more than one subpopulation.

The data in Figure 1.3 is from the Point-in-Time count of homeless individuals taken on January 24, 2018. The Point-in-Time count is a count of homeless individuals in Utah on a single day. It includes both individuals who are living in emergency shelters and on the street. Over the course of one year, the actual number experiencing homelessness will be several times the number identified during the Point-in-Time count. The reason is that for most who suffer homelessness, it is a brief, transitional experience. In fact, we found that 51 percent of those who stay at an emergency shelter never return. On average, their one and only visit lasts 25 days. About two out of three people remain no longer than six months after their initial stay in a homeless shelter. This suggests that the current service system is effective for most people experiencing homelessness. Either through their own resources, or through the efforts of local services providers, most individuals are successful in finding housing within a few months of becoming homeless or at least did not request additional services.

We found that 51 percent of individuals who stay in an emergency shelter never return.

Utah's homeless service system appears adequate for most people experiencing homelessness.

A report drafted in 2004 by the SHCC indicated that chronically homeless people consume about 50 percent of the resources.

The most difficult population to serve, and the costliest, are the chronically homeless. These are individuals who have been homeless for at least one year and who suffer from a disability. As shown in Figure 1.3, the Point-in-Time count identified 306 chronically homeless individuals. While few in number, the chronically homeless consume a disproportionate share of public services. A report drafted in 2004 by the SHCC indicated that the chronically homeless people represent about 10 percent of all homeless individuals, and “consume about 50 percent of the resources dedicated for supporting the homeless.” Furthermore, the United States Interagency Council on Homelessness notes, “People experiencing chronic homelessness cost the public between \$30,000 and \$50,000 per person per year through their repeated use of emergency rooms, hospitals, jails, psychiatric centers, detox, and other crisis services”

Most of Utah’s Homeless Reside in Salt Lake County

Outside of Salt Lake County, only Cedar City, Ogden and St. George offer emergency shelter to the general homeless population. Other communities also have emergency shelters, but their service is limited to victims of domestic violence. Because only a few communities in Utah have emergency shelters that serve the general homeless population, and because a broad range of service options are available in Salt Lake County, many homeless individuals from other communities end up in Utah’s capital city. Figure 1.4 shows the number of homeless individuals recorded during the 2018 Point-in-Time Count for each of Utah’s three Continua of Care (CoC).

Figure 1.4 Number of Homeless Individuals During 2018. 63 percent of homeless individuals in Utah reside in Salt Lake County.

CoC Organization	Sheltered	Unsheltered	Total	Percent
Salt Lake County	1,668	136	1,804	63%
Mountainland	128	45	173	6%
Balance of State	660	239	899	31%
Total	2,456	420	2,876	100%

Source: State of Utah Annual Report on Homelessness 2018, Division of Housing and Community Development.

Figure 1.4 shows that the majority of Utah’s homeless live in Salt Lake County, with 63 percent of all homeless individuals identified in the Point-in-Time count. With only 37 percent of the state’s total

63 percent of all homeless individual identified in the Point-in-Time count reside in Salt Lake County.

population, this means Salt Lake County has a disproportionate share of the state's homeless population.

While most of Utah's homeless population lives in Salt Lake County, not all originate from Salt Lake County. During the past year, caseworkers at The Road Home have been asking new clients to identify the location where they resided for at least 90 days before they were homeless. This information is recorded in the client's enrollment record. Using HMIS data provided to us by DWS, we found that 49 percent of those served at the downtown shelter last resided in Salt Lake County. Another 39 percent came from other counties in Utah. Only 12 percent came from outside the state.

Creating a True Homeless Services System Has Required a Coordinated Effort

For many years, several boards, and committees have been working to unify Utah's homeless services system under a common strategic plan with common goals, a shared intake process, and a shared client information system. The entities working on homeless service issues include:

State Homeless Coordinating Committee. Created in 1988, the focal point for coordinating Utah's homeless services system has been the SHCC. The committee is comprised of 26 individuals who represent state and local governments, private funders, service providers, and others. In 2004, the SHCC drafted a strategic plan to end chronic homelessness by the year 2014. The focus of that plan was a strategy they called Housing First. That plan led to the creation of hundreds of housing units for the chronically homeless.

The Collective Impact Steering Committee. Created by the Salt Lake County Mayor's office in 2015, the Collective Impact Steering Committee is a local effort to unify all service providers, governments, and funders in Salt Lake County behind a common set of goals and objectives which they described as a set of "shared outcomes." The group is also working towards creating a joint "coordinated entry" process for enrolling clients in the homeless services system.

Roughly half of those residing at the downtown shelter said they previously lived some place other than Salt Lake County.

Three separate boards oversee different segments of the homeless services system in Salt Lake County.

The Three Continuums of Care. Sponsored by the United States Department of Housing and Urban Development (HUD), Utah has three CoC regions that represent local efforts to coordinate services. They include the Salt Lake County CoC, the Mountainland CoC (Utah, Wasatch, and Summit Counties), and the Balance of State CoC (serves the remaining counties). These organizations are responsible for distributing funds from various HUD programs. They also oversee the Homeless Management Information System which most service providers use to maintain a joint set of client records.

Shelter the Homeless Board. Historically, this organization has been the owner of two shelters in Salt Lake County. One is the family shelter in Midvale City. The other is the Downtown Shelter on Rio Grande Street that it has recently agreed to sell to the State of Utah. Shelter the Homeless is also building three new shelters and will contract with outside providers to operate those facilities. In addition, Shelter the Homeless is developing its own set of measures to evaluate the efficiency and effectiveness of the homeless service system.

Audit Scope and Objectives

The objective of this audit is to provide the legislature with some assurance that Utah's homeless services system is using its resources efficiently and that it is making meaningful progress towards achieving its goals to reduce homelessness. Specifically, the Economic Development and Workforce Services Interim Committee requested a:

...quantitative and qualitative analysis that identifies the following information with regards to homeless service providers that receive public funding:

- A description of the levels and sources of funding for each service provider in Salt Lake County;
- An analysis of the goals and objectives of each service provider ... and its success in achieving those goals;
- An analysis of the effectiveness of initiatives to place homeless individuals in transitional or permanent housing;

- An analysis of the role of the overlapping jurisdictions involved in the administration;
- An analysis of the impact such initiatives have on other counties in the state.

Our limited response to items one and five is described within this introductory chapter. Our response to items two and three is addressed in Chapter II. Our analysis of the problems associated with overlapping jurisdictions (item four) is described in Chapter III.

The findings described in this audit report relied heavily on information we obtained from sources outside of Utah. We identified best management practices used in other states and in Utah for providing oversight, planning, and accountability in a homeless services system. For example, we made personal visits to shelters and other homeless service providers in California, Colorado, Nevada, and Washington. We also interviewed consultants who are actively involved in helping communities develop a coordinated response to homelessness. While we did not review Operation Rio Grande, we found it to be a good example that evaluation program can be done.

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Chapter II

Utah Lacks Oversight and Performance Measures of its Homeless System

The information presented in this chapter responds to the Legislature's request to identify which programs serving the homeless are effective at achieving their goals, or placing homeless individuals in housing. Due to problems with the data and weak management information systems, we were unable to answer either question. Although we found no shortage of information about client activities and the services provided to them, we did not find the data to be of much use in terms of monitoring program outcomes. Additionally, Utah does not sufficiently utilize the data for evaluation, which allows data errors to continue without correction. Moreover, we found that the data gathered from providers by the Continuum of Care Regions (CoCs)³ and the Utah Division of Housing and Community Development are not being used effectively to monitor performance. This chapter recommends strengthening the Homeless Management Information System (HMIS) so it can be used as an effective tool for creating a more results-driven system for serving the homeless.

Poor HMIS Data Does Not Allow for Program Performance Evaluation

Some key performance indicators drawn from the HMIS either have errors or are incomplete. In addition, there have been several changes made to the methods used to count chronic homelessness. As a result, we found it impossible to evaluate the state's success over time in serving that critical population.

There are Specific Concerns With Data in HMIS

We found numerous problems with the client enrollment data in HMIS that led us to conclude that the data is not sufficiently reliable to accurately monitor program outcomes. For example, the list of clients enrolled in rapid rehousing programs includes hundreds of

³Utah has three CoCs: Salt Lake County CoC (Salt Lake County), Mountainland CoC (Utah, Wasatch and Summit Counties), and the Balance of the State CoC (represents the rest of the state).

We found numerous problems with client enrollment data in HMIS

clients who never received subsidized housing through that program. In addition, we found clients enrolled in permanent supportive housing who appear to have left the program without the exit date being recorded. Finally, we found that the information regarding a client’s exit destination is not always accurate. Based on these and other data flaws, we could not evaluate the effectiveness of programs aimed at helping the homeless find permanent housing.

Key Information for Clients Enrolled in Rapid Rehousing was Either Inaccurate or Misleading. Because of the way that some enrollment data is entered, there have been significant errors in the program performance reports. For example, the Salt Lake County CoC evaluates each program in terms of the number of clients who exit the program and return to homelessness within two years. We found one performance report that shows a rapid rehousing program that had 68 percent of its clients returning to homelessness. That is a very poor result. However, after reviewing the source data, we found the performance report was inaccurate, either because of errors or misuse of the data.

In fact, our detailed review found that 74 percent of the clients included in that program’s performance study never received subsidized housing. These clients should not have even been included in the test of program effectiveness. They were only included in the study because they had been enrolled in a rapid rehousing program for a very brief time, in some cases just for two days. Figure 2.1 describes the enrollment history for one such client.

We found that 74 percent of clients who were classified as “returning to homelessness” never received subsidized housing.

Figure 2.1. Example of One Client Who Was Briefly Enrolled in Rapid Rehousing Program. Although the client never received a subsidized apartment, and remained in emergency shelter, he was still included in a performance study of a rapid rehousing program.

No.	ENROLL DATE	EXIT DATE	PROGRAM NAME
1	12/26/2015	8/11/2016	Emergency Shelter - Case Managed
2	12/29/2015	12/29/2015	Emergency Services
3	6/28/2016	6/30/2016	Rapid Re-Housing Programs
4	8/5/2016		Shelter Plus/VASH Reporting
5	8/5/2016		Renewal Shelter plus Care
6	1/26/2017	7/11/2017	Emergency Shelter
7	3/30/2017	7/10/2017	Rapid Re-housing Program

Source – Utah HMIS

The following summarizes this client’s enrollment history described in Figure 2.1:

- Line 1: The client was enrolled in the emergency shelter from December 2015 to August 2016.
- Line 2: The client briefly received emergency services shortly after enrolling in the shelter.
- Line 3: During a brief two-day period in June 2016 while the client was living at the homeless shelter, the client was enrolled concurrently in a rapid rehousing program. Apparently, the service provider tried but failed to find this individual a subsidized home or apartment and the client remained in the shelter. However, based on the individual’s two-day enrollment in rapid rehousing, the client was included in a study of that program’s performance outcomes.
- Line 6: The client eventually enrolled in an emergency shelter. Because this was considered a homeless condition, the client was classified as a rapid rehousing client who had “returned to homelessness.”

Even though the client had never received subsidized housing through the rapid rehousing program, the individual was considered to be a client of the program who had later returned to homelessness.

Client data suggests there may be hundreds of cases in which the enrollment dates do not represent actual occupancy in a housing program. Between January 2010 and December 2017, we found just over 8,600 rapid rehousing cases. Of these cases nearly 1,100 were individuals in rapid rehousing for less than two days. The entry and exit dates were the same for over 200 cases. There is no exit date for 43 cases (excluding anyone who entered after January 2017).

Exit Dates are Also Being Used Incorrectly for Some Permanent Housing Programs. Some programs are not recording the date when a client physically exits their housing in HMIS. Unless the client’s physical exit of a housing unit is recorded, they cannot be included in a study of client outcomes.

For example, Line 5 in Figure 2.1 shows an enrollment date of August 5, 2016 when the client began to participate in Renewal

The HMIS data appears to include hundreds of cases in which the enrollment dates do not represent actual occupancy in a housing program.

Shelter plus Care, which is a permanent supportive housing program. However, there is no exit date shown. We know from other public records that the client was evicted from the housing program in January of 2017 and then relocated to the emergency shelter. As a result, the client experienced a return to homelessness which is considered a negative outcome for the program. However, the housing program would not have been held accountable for this negative result because the lack of an exit date meant the client was not included among those who left the program.

According to one large housing authority, it is their practice to not record an exit date if they are still trying to find new housing for the client. However, without an exit date, the client would not be identified as someone who left the program and had a negative outcome. Their experience would not be reflected in a study of the program's performance outcomes.

This practice of not entering an exit date when a client no longer occupies a permanent housing facility is not consistent with the HMIS data requirements. According to the United States Department of Housing and Urban Development's (HUD) 2014 *Data Standards Manual*, the exit date should represent the date when a client no longer occupies a housing unit. It defines the "exit date" as follows:

For residential projects this date would represent the last day of continuous stay in the project before the client transfers to another residential project or otherwise stops residing in the project.

Because providers have not followed the above practice recommended by HUD, we could not identify which clients had received housing and when they physically exited that housing facility. As a result, we could not identify which clients should be included in our study of the program outcomes.

We conducted a study of clients residing in permanent supportive housing during 2015. We found 317 clients with no exit date recorded. Of those, we found 62 clients (or 20 percent) whose client records suggest that they may have left the housing program even though no exit date was recorded. These records indicating the clients have left include:

- Extended stays in emergency shelter

The practice of not entering an exit date when a client no longer occupies a permanent housing facility is not consistent with HMIS data requirement.

We could not identify which clients should be included in our study of the program outcomes.

- An exit destination reported from another service suggesting they were no longer living in permanent supportive housing
- An eviction from their housing program.

Client Exit Outcomes are Often Missing or Misreported. To identify the outcome of a service, such as rapid rehousing or permanent supportive housing, service providers are asked to record the client's exit destination. A successful outcome might be when a client moves out of a subsidized housing program and rents their own apartment. A negative outcome might be when the client returns to homelessness, which would include living in an emergency shelter or any place not meant for human habitation. The exit destination should be recorded whenever a client leaves a program. It is one way that HMIS administrators can monitor client outcomes.

We could not rely on the accuracy of the exit destinations being recorded by case workers. We conducted a study of the 1,835 clients who enrolled in permanent supportive housing during 2015. Our goal was to identify the number of clients who returned to homelessness during the following two years. However, we found that caseworkers had not consistently recorded the exit destination for each client.

For example, there were 395 instances in which caseworkers reported that a client had moved from permanent supportive housing into a rental without other ongoing housing subsidies. If true, that would be considered a successful outcome. However, in 63 of those cases it appears the client had simply moved to another type of permanent housing unit. Those would not be considered positive outcomes; rather, it would be considered a neutral outcome. In addition, three clients reportedly returned to the shelter which would have been a negative outcome. As a result, 17 percent of clients who, based on the exit destination data, might have been considered to have positive outcomes but actually did not. We did not have time to test the accuracy of all reported exit destinations, but we are concerned that the errors we did uncover reflect a systematic problem with how the data is being entered into HMIS.

HMIS Data Needs to Be Evaluated to be Usable

As described in the previous section we have found numerous data concerns with HMIS. In order for HMIS to be useful for program

We could not rely on the accuracy of the exit destinations being recorded by case workers.

evaluation, the data needs to be reviewed. There are a number of possible causes for the bad data. HMIS users have blamed poor training for the inconsistent data entries. Due to these concerns we concluded that the data was not sufficiently reliable to complete our study of program outcomes.

HMIS Users Blame Lack of Training for Inconsistent Data Entries. When we showed the HMIS users the inconsistencies we found in the data, they attributed the data errors to a lack of training for the case workers who enter the data. One observed that there are over 600 active users in the system. In addition, those who manage the HMIS system have changed over in recent years. This presents a challenge for the HMIS administrators who are assigned responsibility for providing training to the users.

Other HMIS users told us they have not had time to review the accuracy of the data used to create their performance reports. For this reason, they were unaware of the problems we had found with the data. One observed that:

This level of review you have provided is certainly valuable and a need within our system, which really just highlights the amount of work that is necessary within our community/CoC/State but unfortunately goes unfunded for staffing. When the immediate HMIS needs of the providers are so critical, micro-level analysis, unfortunately, has to be pushed to the side in order to ensure that programs can operate and people can continue to be provided with services.

Clearly, a management information system is of little use if the users do not have sufficient training to enter data correctly. Another concern, raised by the above statement, is that HMIS administrators have not monitored the accuracy of the data. The HMIS will be of limited value if users of the system cannot count on the accuracy and reliability of the data.

Due to Concerns for the Quality of the Data, We Did Not Complete Our Study of Program Outcomes. One of our audit objectives was to identify the performance outcomes of individual programs that offer housing services to the homeless. With this objective in mind, we spent a considerable amount of time trying to evaluate the performance of each rapid rehousing and permanent

There are over 600 active users of HMIS.

A management information system is of little use if the users do not have sufficient training to enter data correctly.

supportive housing program. We even prepared initial drafts of reports showing the number of clients with a positive, neutral, and negative outcome after they exited each housing program. However, after finding significant problems with the data, we lost confidence in the accuracy of our results. Therefore, we could not complete the Legislature’s request for program-level performance data. We concluded that HMIS is not sufficiently reliable to identify the performance of individual programs.

We concluded that HMIS is not sufficiently reliable to identify the performance of individual programs.

HMIS Data Needs to Be Used to Evaluate Program Outcomes. We have been told that HMIS data has mainly been used to monitor client activity, not program performance. This may be the reason we had such difficulty using the data to identify program outcomes. If, in the future, the data is used to evaluate program performance, with accompanying consequences when programs do not perform, we believe the accuracy of the data will improve.

For example, if the local oversight body had truly focused on program outcomes, it would have been alarmed, as we were, by reports showing 68 percent of one program’s clients returning to homelessness. This poor result should have led to a review of the causes for such a poor level of performance. The oversight body would have found, as we did, that the poor result was mainly due to bad data. The discovery of bad data should in turn, lead the oversight body to demand more accurate data.

Utah Does Not Consistently Utilize Performance Measures to Evaluate Contract Outcomes

The Division of Housing and Community Development (HCD or division) does not sufficiently utilize contract performance data. The performance measures that the division does collect are not consistent. However, there are a few private providers and Operation Rio Grande that have shown it is possible to evaluate outcomes.

HCD does not utilize information collected to measure and evaluate contract performance.

Housing and Community Development Does Not Utilize Performance Measures

Each year, the State Homeless Coordinating Committee (SHCC) authorizes millions of dollars in contracts with non-profit organizations that offer services to individuals experiencing homelessness. These contracts require providers to gather and submit

performance data to the division each year. However, the division does not use this information to measure and evaluate whether contractors are meeting all expectations. In addition, we did not find any evidence that there were consequence for not meeting the required benchmarks.

We reviewed 21 contracts for 10 different providers and found that data collected is not used sufficiently to evaluate performance. After the data was collected, we found no evidence that the division used the data from any of the providers to evaluate programs and contracts. The division had not compiled the data in a way that could easily be used to evaluate the performance of contracts. For example, we found that 40 percent of the measures required in the contracts were not even collected. DWS has said in previous years the focus was on tracking outputs and in fiscal year 2019 they will begin tracking all outcome measures. Of measures collected, we found that only 52 percent of performance targets were achieved.

It is concerning that there was no follow up on the outcomes of targets in the contracts. Ideally, the division should have used this information to determine whether the contractor had met the state's performance benchmarks and then shared the results with the provider. Corrective action should be taken when performance is well below expectation, but we found no evidence of this occurring. While HCD provides contract oversight, we are concerned that without consistent tracking of outcomes, the division cannot sufficiently ensure funds are used effectively. Tracking outcomes will allow HCD to evaluate program effectiveness, concentrate funding on successful programs, and help less-successful providers make improvements.

Tracking outcomes will allow HCD to evaluate program effectiveness, concentrate funding, and help providers make improvements.

Contract Performance Measures Lack Consistency

We are concerned with the changes in the measures used by the SHCC to evaluate performance. In 2016, House Bill 328 was passed, requiring the SHCC to conduct a needs assessment to:

- Identify desired statewide outcomes related to minimizing homelessness
- Review data gathering... including an evaluation of:
 - the functionality of existing databases;

- the ability to expand and tailor existing databases to better serve the needs of homeless individuals and;
- ...sharing between entities
- Identify gaps between the data and the data needed to implement best practices in minimizing homelessness and achieving desired statewide outcomes
- Identify opportunities to align data gathering and reporting related to homelessness with other state efforts

To fulfill the requirements of HB 328, the Department of Workforce Services (DWS) contracted with the Department of Technology Services (DTS) to review HMIS. DTS issued a report with recommendations to improve HMIS. DTS recommended:

- Establish HMIS database standards
- Using HMIS, identify common reports, metrics, expected outcomes, develop models, and use predictive analytics.
- Exploring data sharing agreements with other state initiatives and agencies.

We agree with these recommendations and believe HCD should take steps to ensure they are implemented.

Additionally, SHCC adopted performance measures for the homeless service system. While the requirement in HB328 was fulfilled, we are concerned with the lack of follow-through to ensure state-funded homeless programs are meeting expectations. As discussed in the previous section, the performance measures were not consistently collected nor were they used to evaluate and improve outcomes. After adopting one set of performance measures, most of the staff responsible for monitoring contracts left for other employment. This has created large turnover, but they made changes to performance measures used for the fiscal year 2019 funding. We are concerned with this because these measures are not tied to a plan or an overarching goal for reducing homelessness.

Current performance measures are not tied to a plan.

The use of longer-term contracts could improve the link between evaluating provider performance and renewing their contracts.

Operation Rio Grande is a good example of utilizing baselines and key measures to evaluate success.

SHCC's use of annual contracts also makes it difficult to collect the performance data required in each service contract and to use the data to measure performance. Because the contracts that are offered are renewed annually, it is difficult to collect data and use that information to evaluate a provider's performance before the next contract must be renewed. The use of longer-term contracts would be one way to improve the link between evaluating provider performance and renewing their contracts.

While steps have been taken this past year to improve contract oversight and data collection, Utah still lacks a plan and key measures to be able to evaluate success. We have seen the use of performance measures in the state to evaluate progress. There are private providers who use planning and internal measures. Additionally, Operation Rio Grande utilizes baselines and a few key measures to evaluate the progress of the three phases of the plan. Each of the three phases has an overall outcome and a measurement to evaluate success. Operation Rio Grande also has required actions as part of each phase. In contrast, SHCC needs better oversight of contracts and performance to ensure programs serving individuals experiencing homelessness are meeting intended outcomes. We recommend an improved use of benchmarks and performance monitoring to ensure scarce resources are used efficiently and effectively.

Poor Data Resulted in Utah Erroneously Reporting A Large Decrease in Chronic Homelessness

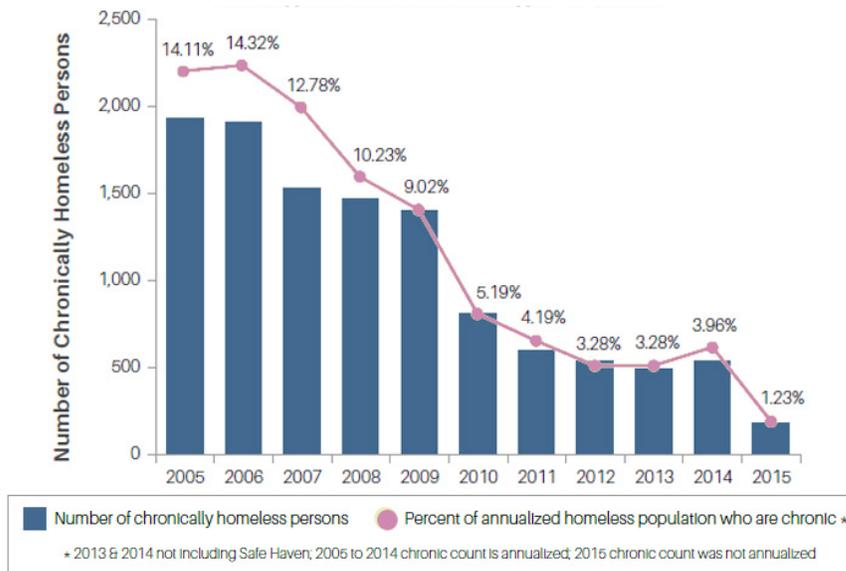
We also found that we could not rely on past reports of the performance of Utah's homeless services system. For example, we found errors in reports describing the success of Utah's decade long effort to end chronic homelessness. These reports illustrate the importance of accurate success measures of the service system in accomplishing its goals.

In 2015, Utah received national media attention when DWS announced that it had largely achieved its goal to end chronic homelessness. The report states that "Since 2005, the chronic homeless population in Utah has dropped by 91 percent." However, due to problems with the data, those figures were inaccurate. Although there is evidence that state did make some progress, due to problems with the data, it is difficult to know just how successful they

were in reducing chronic homelessness. While we acknowledge that DWS no longer uses this figure and calculation, our main concern is that the SHCC did not fulfill its commitment to develop an effective system for measuring its progress towards its goals. This information is summarized in Figure 2.2.

Utah erroneously showed a 91 percent decrease in chronic homelessness.

Figure 2.2. In 2015, Utah Erroneously Reported a 91 Percent Decline in Chronic Homelessness Over Ten Years. However, a close examination of the data shows this claim was inaccurate.



Source: Department of Workforce Services, *Comprehensive Report on Homelessness, State of Utah 2015*

While the data presented shows a significant drop in the number of chronically homeless people, much of the decrease can be attributed to changes made in the methods used to count chronic homelessness. The following describes some of these changes:

- As stated in the legend of Figure 2.2, the 2015 number is the raw data from the Point-in-Time count, while the previous years are annualized numbers. The annualized number are the point-in-time count multiplied by some factor. In addition, the method for annualizing the count has changed.
- One cause for the large reduction in chronic homelessness in 2010 is that the state stopped counting individuals in transitional housing as being chronically homeless.
- In 2015, the COC reported that it adopted a new process for verifying whether an individual is chronically homeless.

Utah needs to utilize consistent and reliable data to be able to continually evaluate program performance.

Utah needs to improve its use of data and the performance measures used to monitor outcomes.

It appears Utah officials did not consider these factors when concluding that there had been a 91 percent drop in the rate of chronic homelessness. We do not know the extent to which Utah efforts have helped reduce chronic homelessness. The construction of several permanent supportive housing facilities has helped. Utah needs to utilize consistent and reliable data to be able to continually evaluate program performance.

Utah Needs A Data Driven System

Utah currently lacks a result-oriented and data driven homeless services system. As discussed in this chapter, we are concerned that HMIS is currently not sufficiently reliable to measure program performance. Additionally, the SHCC lacks oversight and consistent performance measures. To create a truly effective, results-oriented service system, Utah needs to improve its use of data and the performance measures used to monitor outcomes.

We recommend that the SHCC do what it committed to do in its 2004 plan to end chronic homelessness. That plan describes several steps that should be taken to evaluate provider performance. The plan states that “Evaluation will be an important part of the plan implementation.” Figure 2.3 shows key steps in Utah’s plan to end chronic homelessness.

Figure 2.3 Key Steps Utah Outlined to Evaluate Implementation of Plan. Utah’s plan to end chronic homeless outlined key steps to measure performance and implementation.

“Each Action will delineate specific benchmarks and outcome measures as a framework to gauge progress and report to policy makers and funders.”

“Key to the evaluation effort will be the continued development of the homeless management information system...”

“[HMIS]...will provide a way of understanding how people who are homeless use the system of services, and the impact of these services in promoting housing stability and self-sufficiency.”

Source: Utah’s Plan to End Chronic Homelessness, 2004

While we support what was stated in the plan and believe the SHCC should follow through with this plan to create and evaluate specific benchmarks and outcome measures.

The plan emphasized statewide data collection and outcome measures, but we are concerned that accurate data collection and outcome measures are still lacking. With the passage of HB 328 during the 2016 Legislative General Session, the Legislature recognized the need to review the data management system and performance measures used by the homeless services system. This bill required SHCC to complete a study on the data system and adopt outcome measures. While a study was completed and outcome measures were adopted, we also could not find evidence that outcome measures are being used to evaluate performance.

Utah needs to ensure the data collected is consistent and accurate and can be used to measure performance pertaining to the goals and objectives outlined in a plan. Finally, Utah should ensure collected data is used to evaluate individual program performance as well as the accomplishment of the state's goals. This process will lead to better oversight of contract performance. Using benchmarks and performance measures, Utah homeless services providers should be able to demonstrate that the state's limited resources are being used efficiently and effectively to reduce homelessness. They should also be able to demonstrate the progress they are making towards accomplishing the goals described in the state plan to reduce homelessness.

Utah needs to ensure the data collected is consistent and accurate to measure performance pertaining to the goals.

Recommendations

1. We recommend that the State Homeless Coordinating Committee require the establishment of clear and measurable goals and performance benchmarks for each individual provider offering services to homeless individuals in the state.
2. We recommend that the State Homeless Coordinating Committee monitor and report on the performance of individual service providers in achieving their performance benchmarks.

3. We recommend that the Division of Housing and Community Development audit and validate data in the Homeless Management Information System on a frequent basis.
4. We recommend the Division of Housing and Community Development train Homeless Management Information System users on a frequent basis to ensure providers are entering information consistently.
5. We recommend the State Homeless Coordinating Committee create a performance measurement process to evaluate progress in achieving goals and objectives outlined in the state plan.

Chapter III

Utah Needs a Coordinated Response to Homelessness

Before Utah can evaluate the success of its homeless service system, it must first define what success is. This chapter describes three steps that should be taken to unite Utah's state agencies, local governments, business community, and service providers behind a common strategy and shared goals to reduce homelessness. These steps are based on recommendations by the U.S. Interagency Council on Homelessness (USICH), our observations of other states, and local service professionals. The steps include:

- Empowering a state coordinating council to act as the focal point for oversight, planning, and accountability.
- Drafting a strategic plan with measurable goals, strategies, and action steps for implementing the plan.
- Monitoring success in accomplishing the set goals in the plan.

In the past, Utah has made attempts to implement these steps. However, these efforts have produced only modest results. For example, Utah has had a State Homeless Coordinating Committee (SHCC) since 1988. In 2004, they drafted a strategic plan with a goal to end chronic homelessness by the year 2014. That plan called for evaluation tools to measure progress and to hold providers accountable. Unfortunately, the plan is out of date and the state's efforts to reduce homelessness are no longer guided by a set of measurable goals and strategies. The state continues to struggle to provide services through a fragmented network of funders and service providers who do not always coordinate their efforts.

Better Oversight and Planning are Needed to Improve Utah's Response to Homelessness

The first step in creating a coordinated response to homelessness is to create an oversight body that is responsible for strategic planning, goal setting, and results monitoring. Utah has its SHCC, but the committee does not have a current strategic plan or a set of

Three practices need to be implemented which will help to create a more effective homelessness delivery system.

Utah's last homeless strategic plan was created in 2004.

measurable goals. We recommend that the Legislature consider clarifying in statute the SHCC's specific responsibilities. Among other things, they should be given responsibility for statewide oversight. The SHCC should also be given authority to appoint a single oversight body to provide local oversight, planning, and accountability of homeless services provided in each region of the state.

At the local level, we found a few communities which have taken initial steps to prepare a strategic plan for homeless services. However, local level oversight is fragmented among different boards and committees. For example, in Salt Lake County, oversight is provided by three different boards and a coordinating committee.

The Oversight Role of Utah's SHCC Can be Enhanced

We found that Utah's SHCC does not perform the full range of responsibilities recommended by the USICH and by other states which are following the USICH recommendations. Utah does not have a current strategic plan, they have not set specific goals and performance standards, and they do not have a process for verifying that the state's performance goals have been achieved. We interviewed 11 of the 14 voting members of the SHCC and found the members were generally uncertain as to their role in statewide planning, oversight and accountability of homeless services. One reason may be that the *Utah Code* does not specifically direct the SHCC to perform those functions.

SHCC Members are Uncertain About Their Authority to Provide Statewide Oversight. The SHCC is comprised of the executive directors of several state agencies, local mayors, representatives from non-profit organizations, and philanthropic groups that serve the homeless. We were able to interview eleven of the fourteen members of the SHCC. We discussed their roles as a committee member and the challenges they face while trying to guide the state's efforts to reduce homelessness.

We found that the committee members are generally uncertain as to their authority and the full scope of their responsibilities. Although they understand that they have a responsibility to oversee the awarding of state funds to qualified homeless programs, they were less certain about their role in overseeing the state's homeless service system. Four members said they believe the committee should provide

The SHCC lacks a strategic plan, performance standards, and a performance review process.

Members of the SHCC do not understand their duties as board members.

statewide oversight, strategic planning and accountability of homeless services but they said the committee is not performing those functions. The following are comments made by individual committee members:

- The committee does not know what powers or responsibilities they have. They do not have a state plan and they need one. Also, the committee has not discussed what they want to accomplish this year other than to build three new resource centers. They spend most of their time on funding issues, not planning.
- There is a trend towards making the SHCC into more of an oversight body but they are currently charged with dispersing funds.
- The SHCC asked to know what service strategy would be applied at the new resource centers but did not receive a response.
- Developing a statewide plan, setting measurable goals, and identifying performance metrics is the way to go, but the committee is not doing that.
- There is a lack of coordination. All the funders of homeless services need to do better at working together to ensure they are filling the funding gaps.
- The committee does not have a plan for reducing homelessness. Instead, they only respond to the latest crisis.

During our discussions with the committee members, we also described the responsibilities performed by oversight bodies for homeless services in other states, such as strategic planning, setting goals and monitoring performance. We found that the members of Utah's SHCC were not opposed to performing those functions, if the Legislature established that as their role.

Utah Code Does Not Clearly Define the Responsibilities of the SHCC. One reason the members of the SHCC may have difficulty understanding their oversight responsibility to provide oversight of homeless services, to do strategic planning and to monitor results is that these responsibilities are not included in the section of

We found that the members of Utah SHCC were not opposed to performing strategic planning, setting goals, and monitoring.

the statute which describes the purpose of the committee. *Utah Code* 35A-8-602(a) describes the purposes of the SHCC. It states:

The Homeless Coordinating Committee shall work to ensure that services provided to the homeless by state agencies, local governments, and private organizations are provided in a cost-effective manner.

The remaining language in *Utah Code* 35A-8-602 only addresses the committee's responsibilities to allocate funds devoted to homelessness.

In our view, the language in the statute does not give the committee adequate guidance regarding their responsibilities. It does not define the scope of their authority, or the need for them to provide oversight, strategic planning, and performance monitoring of Utah's homeless services system. It is therefore not surprising that they have expressed uncertainty regarding their role of the committee.

The Legislature Should Consider Clarifying the Responsibilities of the SHCC. We found that the language contained in the statutes of five other states provide clear language regarding the responsibilities of state homeless coordinating committees in those states. The following are examples of the specific responsibilities listed in those statutes:

- **Florida:** "Develop outcome and accountability measures and promote and use such measures to evaluate program effectiveness and make recommendations for improving current practices in order to best meet the needs of the homeless."
- **Maine:** "Establishes a baseline for homelessness in the State from which improvements can be measured."
- **Washington:** Prepare a plan which must include "An implementation strategy outlining the roles and responsibilities at the state and local level and timelines to achieve a reduction in homelessness at the statewide level during periods of the five-year homeless housing strategic plan."
- **Hawaii:** "Formulate, and advise the governor on the implementation of, a unified ten-year statewide plan to address homelessness..."

Statute can be improved to include additional duties to be performed by SHCC members.

Other states list additional responsibilities that could be added in Utah's statute concerning SHCC's duties.

- **California:** “... create a statewide data system or warehouse that collects local data through Homeless Management Information Systems, with the ultimate goal of matching data on homelessness to programs impacting homeless recipients of state programs...”

In addition to considering adopting the above statutory language used by other states, Utah legislators could also consider the following list of responsibilities recommended by the USICH.

- Create a state plan to prevent and end homelessness that assesses overall needs, coordinates resources, and promotes national best practices.
- Foster the development of local community plans to end homelessness throughout the state.
- Recommend policy, regulatory and resource changes needed to accomplish the objectives outlined in the state plan.
- Ensure accountability and results in implementation strategies.
- Create a state-wide partnership with local stakeholders and local elected officials through Continua of Care.

The above list is only a starting point. Scope of responsibility given to a statewide council needs to reflect that state’s needs and conditions.

By giving the SHCC a clearer, more specific mandate, we believe the Legislature can help the SHCC provide the leadership needed by Utah’s homeless service system. Based on our conversations with members of that committee, we believe they are ready to assume that role.

The State Oversight Body Should Coordinate Efforts to Address Homelessness

In our opinion, the most effective state coordinating councils are those that have clear statutory authority to perform strategic planning, set measurable goals, and monitor results. These oversight bodies typically receive staff support from a lead agency. To address the more technical aspects of the plan, the oversight body could appoint special working groups. The following are several other strategies to help

The USICH provides a starting point for creating an effective state homeless council.

The SHCC needs to perform strategic planning, set measurable goals, and monitor results to be more effective.

Local coordinating committees can be used for implementing the state's strategic plan at the local level.

state councils become effective in leading their efforts to reduce homelessness.

Create Local Homeless Committee to Coordinate Homeless Services at the Community Level. Local homeless committees can be used to promote local implementation of the state's effort to create a coordinated response to homelessness. Many communities rely on Continuum of Care (CoC) Boards that were created for this purpose by the U.S. Department of Housing and Urban Development (HUD). Others have created homeless coordinating councils that are separate from their CoC's. In either case, whether it is CoCs or separate local councils, they work best when they have a diverse membership representing local service providers, civic leaders, and local business leaders in the community.

As discussed later in this chapter, Utah's local oversight is divided among several different boards and committees. In Salt Lake County, the following entities provide local direction:

- Shelter the Homeless Board
- The Road Home Board
- Salt Lake Continuum of Care

In communities outside of Salt Lake County, oversight is provided by the Mountainland CoC and Balance of State CoC, as well as by a few other LHCCs that also provide strategic planning and coordinate homeless services at the local level.

Select a Lead Agency to Provide Staff Support to Each State and Local Oversight Body. To be effective, an oversight body needs to focus on making high-level policy decisions, setting standards, and monitoring results. We believe the actual work of developing policy, managing data, and preparing performance reports should be administered by support staff. We found that it is not uncommon for state and local councils to select a local governmental agency that is under contract or memorandum of understanding to provide support to the oversight body.

In Utah, the Department of Workforce Services' Housing and Community Development Division provides the staff support for the SHCC. Similarly, the Salt Lake County CoC has an agreement with Salt Lake County to provide its administrative support. Additionally, United Way of Utah County provides administrative support to the

The SHCC needs to focus on high level policies, setting measurable benchmarks and reviewing outcomes.

Mountainland CoC and HCD provides it for the Balance of the State CoC.

Appoint Task Force Groups to Address Specific Issues. The support required by the oversight body is best provided by special task force groups of experts from the community. Such groups can help the oversight body formulate strategies to address the more challenging problems, such as how to address chronic homelessness or how to address mental illness and drug abuse that is common among the homeless. Some task force groups might be formed permanently and provide ongoing support on a specific issue. Other task force groups might be asked to address a special need and then be disbanded once the task is completed. In either case, task force groups should be created, and its members appointed, through a formal action by the oversight body.

We are aware of only one task force group that is currently active in Utah; the Homeless Management Information System (HMIS) Steering committee. That group is responsible for overseeing the use and management of the HMIS. In its 2004 strategic plan, the SHCC said it intended to create several task force groups to handle specific issues facing the state homeless services system. However, we found no evidence that any of those other groups are still active.

Local Oversight, Planning, and Accountability in Salt Lake County is Divided Among Several Oversight Bodies

Although we found much support for addressing the problem of homelessness in Salt Lake County, the community needs a single oversight body that can unite its efforts. Currently, Salt Lake County's homeless service system has three major oversight bodies. In addition, Salt Lake County uses a coordinating council, called the Collective Impact Steering Committee, that is attempting to unify the community's effort to reduce homelessness. Each is independently working towards addressing the problem of homelessness. Several of these groups are developing their own unique tools for measuring service outcomes. While we acknowledge the tremendous support for addressing homeless issues in Salt Lake County, we recommend the efforts of the following three groups be joined under a common local coordinating council.

Task forces can be used to help find solutions for specific issues facing the SHCC.

Oversight and planning for homeless issues in Salt Lake County are provided by three separate groups.

- **Salt Lake County Continuum of Care Board.** HUD has created regional boards throughout the nation to coordinate the planning of the service delivery system and to oversee the allocation of federal funds for homelessness. Each CoC is responsible for conducting the annual point-in-time counts of homeless individuals in their jurisdictions. The CoC also monitors the performance of providers who receive funding through HUD.
- **Shelter the Homeless Board.** Shelter the Homeless does not provide direct services but is the owner of the major shelters and housing facilities in Salt Lake County. This includes the Midvale Shelter, the downtown shelter on Rio Grande Street, and the three new resource centers. This organization is also developing its own systemwide performance monitoring tool which it describes as a “homelessness index.”
- **The Road Home Board.** The Road Home is the largest provider of shelter services, rapid rehousing, and permanent supportive housing in Salt Lake County. Much of the funding for homeless services is channeled through this organization and the use of those funds comes under the oversight of its board. As a result, The Road Home and its board play a major role in developing strategies for serving the homeless in Salt Lake County. It also has its own set of output measures that it applies to its programs and services.

In summary, we found that local oversight of homeless services in Salt Lake County is fragmented among several groups. It appears there is no single entity that is responsible for crafting an overall strategic plan, with measurable goals, and annually-reviewed performance metrics.

Utah Needs a Strategic Plan with Measurable Goals and Action Steps

The SHCC should draft a new strategic plan for reducing homelessness statewide. In our opinion, the best state plans for reducing homelessness are those that include measurable goals, performance targets and milestones for accomplishing specific tasks. In 2004, Utah drafted a strategic plan to reduce homelessness. Even though the plan emphasized the importance of accountability, we

A statewide strategic plan does not exist for reducing statewide homelessness.

found no evidence that performance measures were ever fully developed or monitored.

In 2015, the Salt Lake County Collective Impact Steering Committee took several steps towards preparing a strategic plan to reduce homelessness in Salt Lake County. However, their plan also lacks measurable goals and implementation action steps.

Utah Lacks a Strategic Plan To Reduce Homelessness

Utah's SHCC prepared a strategic plan in 2004 with several ambitious goals and objectives. However, the plan is now out of date and is no longer used. As a result, Utah's network of providers, businesses, and funders are not guided by a common strategy to reduce homelessness.

The 2004 Plan to End Chronic Homelessness is Out of Date.

In 2004, the SHCC prepared a document titled *Ten-Year Strategic Action Plan to End Chronic Homelessness*. The focus of the plan was a "permanent housing-based strategy" with the following four phases:

- "Prevention efforts to forestall homelessness for those at imminent risk;
- Rapidly re-housing those who are homeless (a Housing First approach) by increasing available, affordable housing;
- Funding of supportive services that promote housing stability and self-sufficiency; and
- Collecting and providing accurate data and measuring results."

The plan was used to generate support for the "housing first" strategy which resulted in the construction of several permanent housing facilities which currently serve hundreds of chronically homeless individuals. The plan also marked the beginning of Utah's emphasis on rapid-housing programs. However, as described in Chapter II of this report, we found that the fourth goal, to provide accurate data and measure results was not achieved.

The 2004 Plan was Updated in 2008. The updated plan stressed the importance of developing management information tools that could be used to identify "what works and what doesn't," and to

SHCC's last homeless strategic plan was created in 2004.

“track progress and make adjustments.” Although the plan led to the construction of four new housing facilities for the chronically homeless, the information systems needed to identify “what works” were never developed. The Division of Housing and Community Development tracks the state’s progress towards ending chronic homelessness. However, in 2015, as described previously in Chapter II, they incorrectly reported that the goal had largely been achieved. Since that time, the goal to end chronic homelessness, and the strategic plan to achieve that goal is no longer being used. As a result, Utah’s efforts to serve the homeless do not appear to be guided by a clear strategy and measurable goals.

The Salt Lake County Plan Lacks Measurable Goals. In 2015, service providers and community leaders in Salt Lake County formed what they call the Collective Impact Steering Committee. That body joined together in support of a document that expressed a shared vision of how they might address homelessness in their community. In our view, their efforts represent a good first step towards preparing a strategic plan. The group has also helped unite the larger community of service providers behind a common vision of success. However, to achieve that vision, the plan needs measurable goals, action steps to accomplish those goals, and a process to measure their progress.

The following are some of the shared outcomes described in the county plan:

- Successfully divert individuals and families from emergency shelter whenever possible.
- Meet the basic needs of those in crisis.
- Provide individuals and families with stabilization services when they need them.
- Ensure Salt Lake County’s housing supply meets the demand and needs of all residents.

While they are all worthy goals, the above listed items are not measurable. They are stated in such general terms that there is no objective way to determine what progress has been made towards accomplishing each goal. The following section discusses ways to make both state-wide and local goals measurable.

Salt Lake County’s goals for its homeless services system are not measurable. For this reason, it will be difficult to evaluate their progress in achieving those goals.

Best Practice is to Adopt Measurable Goals to Address Homelessness Among Specific Client Populations

To gain community support, the strategic plan should include goals and objectives that focus the community's attention on the need to address a specific aspect of homelessness. To promote accountability, the goals should also be measurable. The plan should include a list of specific strategies and action items to support the goal. Milestones should be set to monitor progress in achieving each action item.

These are the best practices we have observed in the strategic plans prepared by other states and localities. They are supported by the USICH and are consistent with the management process described in *Best Practices for Good Management*, a document published by our office. Some of these steps were also recommended to us by a retired HUD official who provided us with valuable insight into what other states have done to address homelessness. Finally, these are some of the same accountability tools that Utah's SHCC described in its 2004 strategic plan.

Begin with Goals and Objectives for Specific Target Populations. We have observed that other states typically begin the strategic planning process by identifying a set of goals and objectives for addressing homelessness among specific target populations. Ideally, the goals should be measurable or sufficiently specific so one might readily determine whether the goal has been achieved.

The following are examples of goals that we found in other state and local plans. They are either measurable or sufficiently specific to know whether they have been achieved.

- **Arizona:** Move 300 chronically homeless individuals or families into permanent housing each year for the next 5 years.
- **Houston:** End Veteran Homelessness by 2015.
- **Michigan:** Reduce Chronic Homelessness by 20 percent annually.
- **Minnesota:** Prevent and end homelessness among families with children by the end of 2020.

A strategic plan should include goals and objectives that are measurable to promote accountability.

Creating measurable goals makes accountability possible.

- **Ohio Balance of the State CoC:** Rapid Rehousing projects will have no more than 12 percent of adults who exited to permanent housing return to [homelessness] within two years of exit.

The advantage of providing measurable goals, like those described above, is that it makes accountability possible. We recommend that Utah’s SHCC select specific measurable goals that reflect the state’s priorities and the greatest needs of our community. For example, ending veteran homelessness is sometimes viewed as a good initial goal because that population is relatively small. Homeless veterans are also served through a dedicated funding stream.

Similarly, the SHCC’s goal in 2004 to “end chronic homelessness” was not unrealistic. Utah’s service providers maintain a shared list of those individuals who are known to be chronically homeless. The last point-in-time count identified 306 individuals who are known to be chronically homeless in Utah. It was not unreasonable in 2004, nor would be unreasonable today, to develop a set of strategies to reduce that number to nearly zero.

Identify Strategies and Action Steps to Accomplish the Plan’s Goals. Once a set of goals have been identified, the next step is to develop a set of strategies and action steps to accomplish each goal. Because they may be somewhat technical in nature, the SHCC and local oversight bodies should seek the input of a broad group of stakeholders and experts to help develop strategies and action steps.

We found several examples of states and localities that have prepared well-drafted strategic plans to reduce or end homelessness. These are states and a locality that were identified by a regional manager of the USICH as having made significant progress in developing their services to reduce homelessness.

Two plans we believe are models of good planning are Minnesota’s *Heading Home Together* and Houston’s *The Way Home* (See Appendices A and B). These plans have specific goals, strategies, and action step to accomplish the goals. Minnesota’s utilizes specific strategies and assigns actions steps to agencies to accomplish difference strategies. In their report, Minnesota stated that they have been able to reduce total homelessness by eight percent since 2014 and other subpopulations even more.

Once goals are created, and strategies are developed, action steps are needed in order to accomplish each goal.

The Houston plan, which began in 2012, has goals that are specific and definite. One of its goals was to end chronic homelessness by the year 2016. The plan also has specific strategies to accomplish the goal and action items to accomplish each strategy. One specific goal in the plan is to end youth homelessness by 2020, with accompanying strategies to accomplish this goal. Overall Houston reported a 57 percent decline in homelessness since 2011.

The Legislature Should Consider Directing the SHCC to Prepare a Strategic Plan

Utah should utilize strategic planning to identify goals and objectives for the state's homeless service system. Just as the 2004 plan led to broad community support for Utah's "housing first" program, a new strategic plan should generate interest in accomplishing a new set of goals. The Legislature can initiate this process by clarifying the responsibilities of the SHCC and by giving them a specific mandate to prepare a strategic plan. At a minimum, the plan should include:

- Measurable goals
- Strategies and action steps for accomplishing those goals
- Milestones for completing each action step

The plan could also address other issues that appear to be of concern to the Legislature, such as how the funding from all the different sources can best be used to cover the cost of implementing the strategic plan. The Legislature could also require that the SHCC periodically update a legislative committee on the progress made in completing the goals and objectives in the plan.

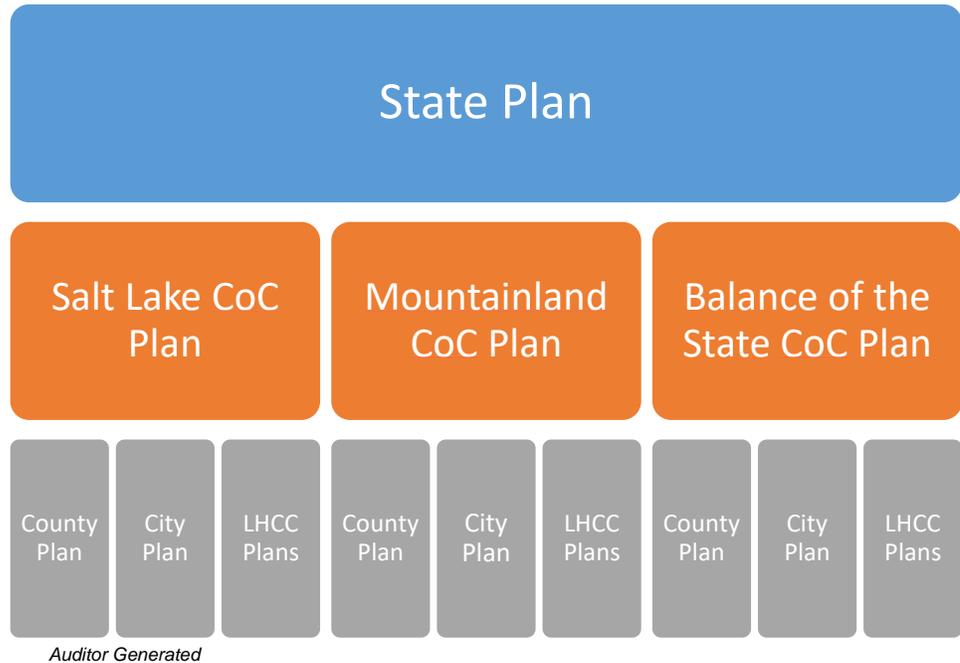
Local Plans Should Guide Community Efforts to Implement the State Plan. The Legislature should also consider requiring the SHCC to designate local planning bodies to prepare strategic plans that address the goals of the statewide plan. Local plans have been developed in the past. In addition to the three CoC's, Utah has 13 Local Homeless Coordinating Committees (LHCC) representing various regions of the state. After the SHCC prepared its 2004 strategic plan, we know that at least two of these LHCCs prepared their own strategic plans to help implement the state's goals to end chronic homelessness in their communities. Furthermore, HUD already requires each of the CoCs in Utah to work with their local communities to draft a strategic plan and monitor its progress.

A strategic plan is a good first step in bringing all parties together in a coordinated effort in reducing homelessness in the state.

There are currently 13 LHCCs throughout the state.

Representatives from the Salt Lake CoC report that they have not prepared a local plan as required. However, they express an interest in participating in that process. Figure 3.1 describes a possible relationship between the state plan and local planning and oversight bodies.

Figure 3.1 Example of a Possible Relationship Between the State Plan and Local Planning and Oversight Bodies. A State Plan should be developed by the SHCC, while local plans could be prepared by each CoC or LHCC or by other local entities.



The state level plan needs to be supported by local strategic plans.

The SHCC could rely on the HUD network of CoC’s and LHCC’s to facilitate local planning, or it could designate other local entities to do local planning. For example, it could designate the Collective Impact Steering Committee to assume responsibility for crafting a strategic plan for Salt Lake County. In either case, the state level plan needs to be supported by local strategic plans.

The SHCC Should Monitor Success in Accomplishing the Goals

Drafting a strategic plan is just one phase of an ongoing process of managing for results. Once the measurable goals are set, the next step is to gather data to monitor progress in achieving the goals. In the recent past, it has been a challenge to develop performance measures because there has been no strategic plan. Although we commend the Division of Housing and Community Development for developing its Homelessness Data Dashboard, without goals, objectives and benchmarks of performance, it is difficult to know how to interpret the data they are reporting.

The Strategic Plan is Part of a Larger Process of Managing for Results

Once a strategic plan is adopted, an oversight body should develop a set of performance measures to monitor the progress in achieving the goals described in the plan. When reported on a regular basis, the oversight body should use this information to monitor its progress towards achieving its goals. In addition, the information should help identify which strategies are more effective than others. Finally, this information should enable the oversight body to then modify its strategic plan and shift resources to those strategies found to be the most effective. Figure 3.2 illustrates the ongoing process of drafting a strategic plan, developing goals and performance measures and monitoring performance.

Creating specific goals and benchmarks are essential in creating a successful strategic plan.

Creating a strategic plan with measurable goals and evaluating them is an on-going process.

Figure 3.2 Performance Measures are Used to Evaluate an Organization’s Efforts to Implement its Goals. Strategic planning, setting goals and evaluating success in achieving those goals are three parts of the process of managing for results.



Source: Auditor Generated

Figure 3.2 shows that the oversight process does not end with the drafting of a strategic plan. Instead, managing for results is an ongoing process of developing plans, setting goals, measuring success and then modifying the plan again to reflect what has been learned about what works and what does not work. As an organization repeats this process, it should steadily produce better results.

Without Strategic Goals and Benchmarks for Performance, it is Difficult to Interpret Utah’s Measures of Homelessness. The Division of Housing and Community Development has created an online dashboard that contains a large amount of information regarding what is happening statewide to serve the homeless. The division also publishes an annual report each year describing various activities in the homeless services system. However, this information is of limited value because there are no benchmarks by which to evaluate the data. The data that is reported does not relate to specific goals and objectives. Without measurable goals with performance targets for specific activities, it is difficult to evaluate whether the state’s efforts to reduce homelessness are effective.

Figure 3.3 describes some of the information shown on the state’s homelessness data dashboard. It shows that statewide 7.27 percent of clients returned to homelessness within 6 to 12 months and 31.77 percent of clients returned to homelessness within 2 years. Individuals were homeless 75.42 days on average and 23.70 percent of homeless

Without specific State goals and benchmarks, the online dashboard is difficult to evaluate and determine effectiveness.

individuals found permanent housing. This information offers some value because it describes what is happening in the system statewide. However, the data by itself does not provide insight into the effectiveness of Utah’s efforts to reduce homelessness, or whether the state is making progress towards achieving its goals.

Measurable benchmarks are necessary to evaluate performance.

Figure 3.3 Without Goals and Benchmarks, it is Difficult to Judge the Performance of Utah’s Homeless Services Data. The Homelessness Data Dashboard provides a large amount of data about services to the homeless but is difficult to use the data to evaluate performance or progress in achieving outcomes.



Source: Homelessness Data Dashboard, Utah Department of Workforce Services, Division of Housing and Community Development. <https://jobs.utah.gov/housing/homelessness/homelessdata.html>

To be more useful, the data in Figure 3.3 needs to be compared to a set of performance benchmarks that are based on the state’s strategic goals and objectives. That is why the strategic plan and the measurable goals must be developed before the performance is measured.

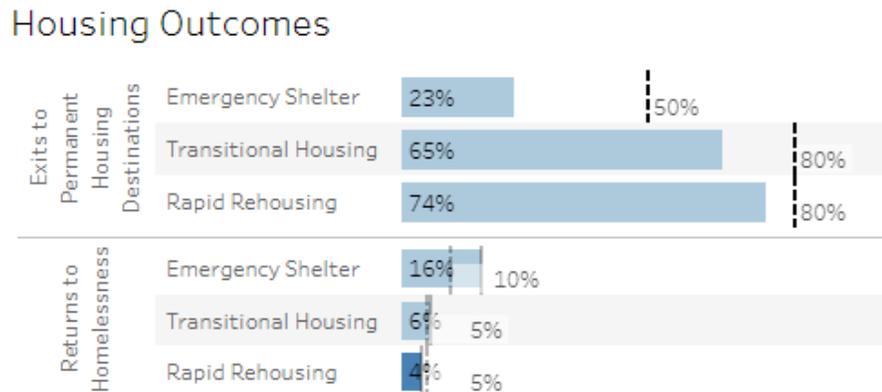
Other Entities Use Performance Benchmarks that Can Be Used to Monitor Success in Achieving Goals.

We found several entities outside of Utah that are using data to monitor progress in achieving their strategic goals. For example, Washington State, Houston Texas, and a CoC in Ohio have all developed benchmarks to monitor the performance of their homeless service system and individual service providers.

Washington State links their outcomes to specific benchmarks which allows you to evaluate how effective a program is.

Washington State’s Online Dashboard Compares Performance Against a Set of Benchmarks. Like Utah, the State of Washington has an online dashboard that includes information describing activity at both the state level and at local units. The Washington dashboard offers “county report cards” that includes data describing the performance of the operations offered by individual counties. However, unlike Utah, Washington compares each county’s actual performance against the state’s benchmarks. For example, the data in Figure 3.4 compares the performance of permanent housing programs in King County against the state benchmarks.

Figure 3.4. Washington State Compares Performance Data Against Statewide Benchmarks. The performance in King County is shown for two measures: (1) the exits to permanent housing and (2) returns to homelessness.



Source: Washington State Homeless System Performance: County Report Cards Overview

Among other things, Figure 3.4 shows that the rapid rehousing programs in King County have 74 percent of their clients exiting to permanent housing. This is close to the state benchmark of 80 percent. In contrast, only 23 percent of clients in the county’s emergency shelters are exiting to permanent housing. This is less than half the state’s 50 percent benchmark.

A Houston Report Describes the Progress Made Towards Achieving the Goals in the Strategic Plan. Houston’s Action Plan Update for 2016-2017 also provides information that can be used to monitor the CoC’s progress towards achieving its strategic goals. For example, pages six and seven of the Action Plan Update (see Appendix B) describe the progress made toward reducing homelessness among target population groups, as well as the overall system goals to reduce homelessness. Each year, they report the numbers housed and the total

A CoC in Ohio uses performance indicators and goals to monitor their performance.

reduction in homelessness since the prior year. The report describes a 57 percent reduction in homelessness over five years.

A CoC in Ohio Uses Specific Performance Measures and Measurable Goals. The Balance of State CoC in Ohio offers a good example of a service system that uses a set of performance indicators and measurable goals to monitor performance. Its Performance Management Plan includes some of the same measures displayed in Utah’s homelessness data dashboard. However, each performance measure used by this Ohio CoC is paired with a set of performance benchmarks that can be used to evaluate the effectiveness of different services provided. Appendix C shows the performance measures they apply to emergency shelters. They have similar indicators and benchmarks for other services, such as transitional housing and homeless outreach programs.

We Found Broad Support for Improved Accountability

This chapter describes the basic concepts used to create a results-oriented organization or system. They include strategic planning, setting measurable goals, and evaluating the progress made. We described these concepts to members of the SHCC, representatives of the CoC, and other organizations that serve the homeless. During those interviews, we found widespread support for greater strategic planning, goal setting and performance monitoring.

It should not be surprising that we found support for these concepts, because they are not new. They were first proposed by the SHCC in its 2004 strategic plan. The need for better data and performance measures was also described in the 2008 update to that plan. Several local boards and committees have already taken some steps towards creating local strategic plans. For whatever reason, it has been difficult to sustain these efforts. As a result, Utah still lacks a truly effective, result-oriented homeless services system. We believe the Legislature can bring about real change by clarifying the role of the SHCC, directing them to prepare a strategic plan with measurable goals, and requiring that they monitor the results.

Members of the SHCC agree that a state strategic plan along with meaningful measurable goals are needed.

Recommendations

1. We recommend that the Legislature consider clarify in statute the responsibilities of the State Homeless Coordinating Committee.
2. We recommend that the Legislature consider requiring the State Homeless Coordinating Committee to adopt a statewide strategic plan for reducing homelessness in the state.
3. We recommend the Legislature consider requiring the State Homeless Coordinating Committee to develop a system for monitoring the extent to which the goals and strategies described in the strategic plan have been achieved.
4. We recommend the Legislature consider requiring the State Homeless Coordinating Committee to report progress towards achieving goals described in their strategic plan.
5. We recommend that the State Homeless Coordinating Committee designate local oversight bodies that are responsible to (1) develop a common agenda and vision for reducing homelessness in that region, (2) craft a spending plan that coordinates the funding supplied to local stakeholders, (3) monitor the progress towards achieving state and local goals, and (4) realign funding to those projects that are improving their outcomes and targeting specific needs in the community.

Appendices

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Appendix A
Heading Home Together
Minnesota's 2018-2020 Action Plan To
Prevent and End Homelessness

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HEADING HOME TOGETHER

— Minnesota's 2018-2020 Action Plan —
to Prevent and End Homelessness

Our Commitment to Heading Home Together

Since the Minnesota Interagency Council launched our first Heading Home plan in January of 2014, we have seen remarkable results. We have witnessed the impact that commitment, coordination, and strategic investments in solutions have on people's lives.

Today there are 20 percent fewer families experiencing homelessness, thousands of people with disabilities who have been connected with housing and supports, and over 1,300 veterans who were previously homeless are now in their own homes.

While these are very promising results, we know that there is much left to do for the over 7,600 Minnesotans who currently experience homelessness on any given night. At a time when many children still do not have a home where they can do their homework, and while many men, women, children, and youth remain precariously housed in every corner of our state, the urgency of our work continues.

This plan reflects a commitment to deeper collaboration with partners in philanthropy, business, faith communities, tribal and local government, housing and service providers and people with lived experiences of homelessness. It gives us the opportunity to accelerate our progress and have a positive impact on the lives of more Minnesotans.

We are grateful to all the partners who have signed on to this plan and are committed to working across sectors to achieve our collective vision of housing stability for all Minnesotans.



Mary Tingerthal
Commissioner, Minnesota Housing



Emily Piper
Commissioner, Department of Human Services



Cathy ten Broeke
State Director to Prevent and End Homelessness

Homelessness is a problem that can be solved. In order to do this, we all have an important role to play. In a community as prosperous as ours, all should be afforded the basic dignity and stability that a home provides. Housing stability is foundational to children and youth getting an education and succeeding in life, to parents raising healthy and stable families, and to honoring our elders, individuals with disabilities, and those who've served our country. Our homes are our refuge, the center of traditions and celebrations, and where we build memories. A home is an anchor for so many facets of life.

Heading Home Together reflects a shared belief that through concerted, collaborative effort, we can effectively end homelessness in Minnesota. This new plan represents our shared vision, goals, and guiding principles while holding us all accountable to measurable results for those experiencing homelessness. It dramatically changes the way we *collectively* identify opportunities and solve challenges together, not yet another isolated effort. Most importantly, implementation of *Heading Home Together* will deepen involvement of communities who are disproportionately impacted by homelessness in the problem-solving process, recognizing that the best systemic solutions are grounded in the experience of those closest to the issue.

Through the Heading Home Minnesota Funders Collaborative, philanthropic leaders are identifying what we see as our best contribution to helping end homelessness. We have committed to aligning with the vision, goals, and principles of this plan and look forward to broadening our work with government, advocacy, faith, tribal, community leaders, and those with lived experience. We applaud state government for being the first to make their specific commitments and will identify our respective contributions in the coming months. We look forward to others joining in identifying their commitments and contributions and working together to end homelessness in Minnesota.



Brian Paulson
*Senior Program Officer, Pohlad Family Foundation
Chair, Heading Home Minnesota Funders Collaborative*

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A New Plan, A New Partnership

Heading Home Together: Minnesota's 2018-2020 Action Plan to Prevent and End Homelessness aspires to be a plan of, by, and for all Minnesotans.

The [Minnesota Interagency Council on Homelessness](#) (“the Council”) is made up of the Commissioners of 11 state agencies, the Chair of the Metropolitan Council, and the Governor’s office.

In December 2013, the Council developed and released the first version of *Heading Home*. The plan was re-issued in January 2016 with new strategies to guide efforts in 2016 and 2017. This current version of the plan includes strategies to guide efforts to end homelessness in Minnesota from 2018 through the end of 2020.

Previous versions of *Heading Home* have been the product of and guiding document for the Council and its member state agencies. This plan aspires to be something greater: to reflect a growing community understanding and emerging consensus about what is needed to prevent and end homelessness in Minnesota, and the collective, multi-sector strategies necessary to achieve that end. The specific content of the plan

This plan aspires to be something greater: to reflect a growing community understanding and emerging consensus about what is needed to prevent and end homelessness in Minnesota, and the collective, multi-sector strategies necessary to achieve that end.

reflects local practitioner knowledge, the insights of people with lived experience of homelessness, Federal policy requirements and guidance, and extensive input from stakeholders all across Minnesota. Numerous organizations have endorsed the guiding principles for the plan. These partners have also contributed substantially to shaping its strategies. Accordingly, first-person plural pronouns (“we” and “our”) used throughout this document are offered to reflect not only the Council’s perspective, but also a broader community of stakeholders who share similar views and are aligned in efforts to end homelessness.

This document articulates a shared set of goals, principles, and strategies that will help to focus and align the efforts of many partners across Minnesota to prevent and end homelessness.

Each agency on the Minnesota Interagency Council on Homelessness has made specific commitments to advance the strategies, and those specific actions are in the Council’s 2018-2020 work plan (Appendix A).

While the Council will continue to lead the work of state government, a *Heading Home Together* leadership structure is being created in partnership with the Heading Home Minnesota Funders Collaborative to increase momentum toward our shared goals. This structure will include all levels of government, philanthropy, advocates, organizations that offer support and housing, and people with lived experiences of homelessness. Ownership of implementing *Heading Home Together* will be shared. Progress will be tracked and problems will be identified and solved together. All partners are invited and encouraged to identify the specific commitments and activities that they can undertake to advance the plan’s goals, principles, and strategies. These commitments will be incorporated into the work plan over time.

Vision: Housing Stability for All Minnesotans

Heading Home Together advances the vision of housing stability for all Minnesotans. Housing stability means access to a safe and affordable place to live, as well as the resources and supports to maintain stable housing. Housing stability also means that people have choices in where they live, and if and when they move.

This plan focuses on solving the most egregious form of housing instability: homelessness. It recognizes that by preventing and ending homelessness, we will create a foundation for success for a broad spectrum of Minnesotans whose housing stability is continually at risk.

Four Population Goals

While *Heading Home Together* focuses on preventing and ending homelessness overall, focusing on four populations serves to drive and measure progress, which in turn can build momentum, capacity, and understanding to end homelessness for all Minnesotans. The four population goals of the plan are:

1. Finish the job of ending veteran homelessness.
2. Finish the job of ending chronic homelessness.
3. Prevent and end homelessness among youth and young adults unaccompanied by parents or guardians by the end of 2020.
4. Prevent and end homelessness among families with children by the end of 2020.

In addition, this plan and its principles and strategies are intended to set the path to prevent and end homelessness for any Minnesotan at risk of or experiencing homelessness. Homelessness in Minnesota reflects persistent equity disparities. According to Wilder Research's Minnesota Homeless Study, African Americans and American Indians are over-represented among people experiencing homelessness by a factor of eight, meaning there are eight times more African Americans and American Indians experiencing homelessness than would be expected based on the distribution of the general population. Among youth and young adults experiencing homelessness, lesbian, gay, bisexual, transgender, queer and questioning (LGBTQ) young people are significantly over-represented. Therefore, this plan also sets out deliberate strategies to achieve equity.

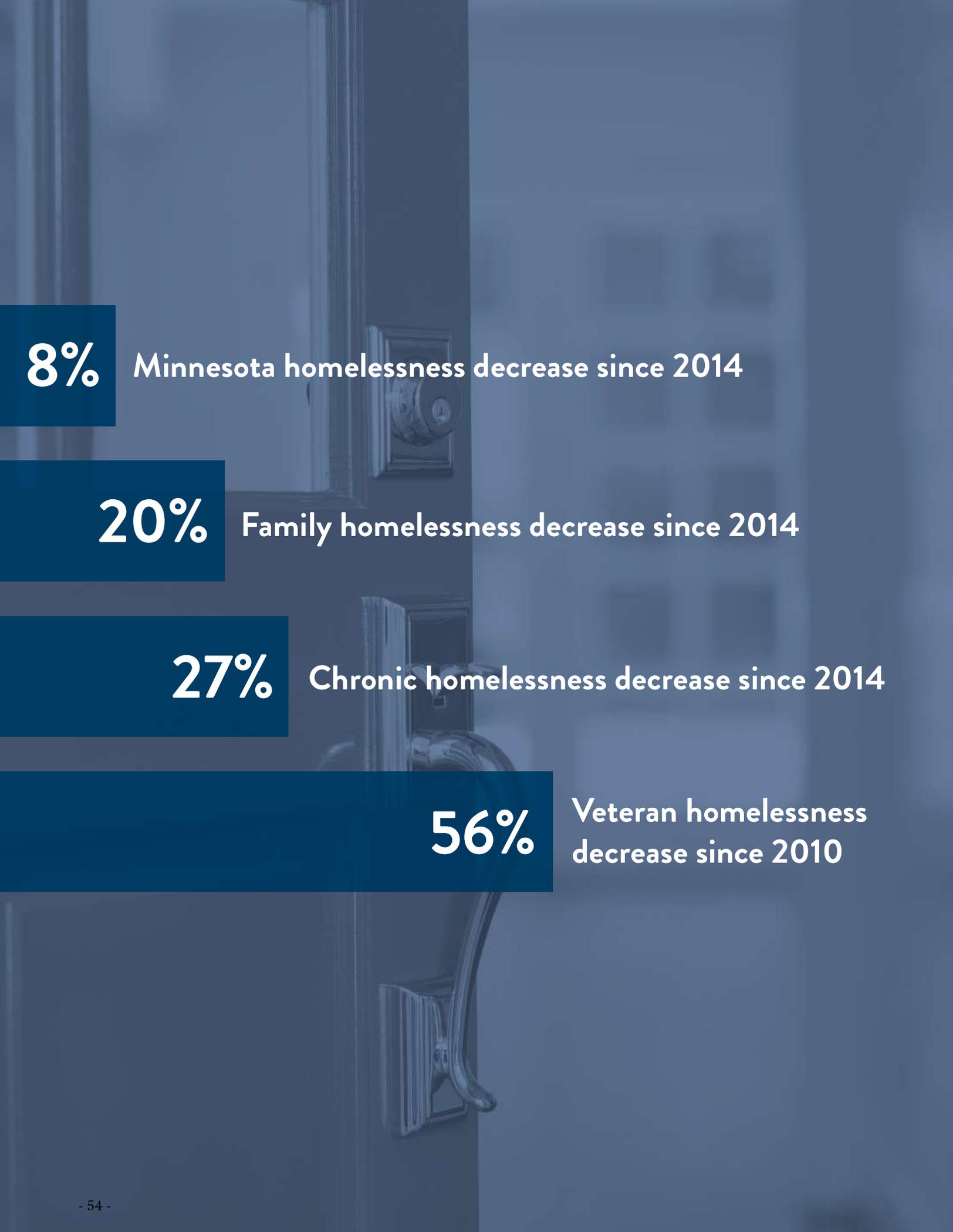
Statewide Stakeholder Engagement and Commitment

The partners who committed to align their work over the next three years with the seven principles of *Heading Home Together* are:

- Alliance Housing
- Association of Minnesota Counties
- Child Care Aware of Minnesota
- Corporation for Supportive Housing
- Emma Norton Services
- Governor's Early Learning Council
- Heading Home Minnesota Funders Collaborative
- Hennepin County Office to End Homelessness
- Hennepin County Youth Collaborative
- Minneapolis Downtown Business Council
- Minnesota Assistance Council for Veterans
- Minnesota Association for the Education of Homeless Children and Youth
- Minnesota Association of Area Agencies on Aging
 - Arrowhead Area Agency on Aging
 - Central Minnesota Council on Aging
 - Land of the Dancing Sky Area Agency on Aging
 - Metropolitan Area Agency on Aging
 - Minnesota Chippewa Tribe Area Agency on Aging
 - Minnesota River Area Agency on Aging
 - Southeastern Minnesota Area Agency on Aging
- Minnesota Association of County Social Service Administrators
- Minnesota Board on Aging
- Minnesota Coalition for the Homeless
- Minnesota Coalition for Battered Women
- Minnesota Head Start Association
- Minnesota HIV Housing Coalition
- Minnesota Housing Partnership
- Minnesota's 10 Continuums of Care
 - Southwest
 - Southeast
 - Ramsey
- Hennepin
- SMAC
- Central
- West Central
- St. Louis
- Northwest
- Northeast
- Minnesota Tribal Collaborative to Prevent and End Homelessness
- National Alliance on Mental Illness
- National Coalition for Homeless Veterans
- Oasis Central Minnesota
- The Family Place
- U. S. Dept. of Veterans Affairs medical centers:
 - Fargo VA Health Care System
 - Minneapolis VA Health Care System Homeless Programs
 - Saint Cloud Health Care System
 - Sioux Falls Veterans Administration
- Youth Services Network

We received additional feedback, insight and guidance from the following stakeholders:

- The Regional Council of Mayors
- Home and Community Based Services (HCBS) Partners Panel
- State Mental Health Advisory Council
- Metro Counties Adult Mental Health Forum
- Contracted Agency Rule 79 Forum
- MN Corrections Association Conference
- MN Coalition for the Homeless Conference
- St. Louis County youth providers (LSS Duluth, YWCA Duluth, and Lifehouse)
- Southeast CoC youth providers (LSS and Northfield Union of Youth)
- Hennepin County stakeholder group
- Anoka County stakeholder group
- Voices of Change
- The Commanders Task Force



8% Minnesota homelessness decrease since 2014

20% Family homelessness decrease since 2014

27% Chronic homelessness decrease since 2014

56% Veteran homelessness decrease since 2010

What it Means to Prevent and End Homelessness: Measuring Progress

Effectively ending homelessness does not mean that no one will ever experience a housing crisis again. Changing economic realities, the unpredictability of life, and unsafe or unwelcoming family environments may create situations where people could be at risk of or experience homelessness.

Rather, effectively ending homelessness means that we **prevent** homelessness whenever possible, and when that is not possible, the experience of homelessness is **rare, brief, and one-time**. Because each component of what it means to end homelessness is important and distinct, four **performance measures** will help monitor progress on preventing and ending homelessness:

- Reduction in the number of people who become homeless for the first time (“prevent”).
- Reduction in the total number of people experiencing homelessness (“rare”).
- Reduction in the length of time people experience homelessness (“brief”).
- Reduction in the number of people who return to homelessness (“one-time”).

Effectively ending homelessness means that we prevent homelessness whenever possible, and when that is not possible, the experience of homelessness is rare, brief, and one-time.

These performance measures will be monitored primarily through data from the Homeless Management Information System (HMIS), a statewide database used by homeless assistance programs to identify who is served and to track key outcome and performance information. In addition, the annual Point-in-Time count (PIT count) will serve as our annual measure of progress for reducing homelessness in Minnesota overall and for specific populations. PIT counts are required by the Federal government and are conducted by staff and volunteers across Minnesota on a single night each January. While counting methods and data sources continue to improve, these counts always represent a minimum estimate of the number of Minnesotans experiencing homelessness.

Because resolving disparities is integral to effectively ending homelessness in Minnesota, all of the performance measures listed above will be assessed with respect to distinct groups to ensure that Minnesota’s progress to prevent and end homelessness is equitable progress.

We will also continue to use other available data sources, including Wilder’s Minnesota Homeless Study, counts of Minnesota students identified as homeless by schools and school districts over the course of a year, data from HMIS and state data systems, and other sources of information. Often, each data source comes with its own focus and limitations, which can include differing definitions of who is considered homeless. Using multiple sources of information can help corroborate findings and identify important subpopulations of Minnesotans facing homelessness and housing instability.

Homelessness in Minnesota: Causes

Stable housing is out of reach for far too many Minnesotans. At least 7,600 Minnesotans experience homelessness on any given night, based on the annual PIT count. A much larger group of Minnesotans is precariously housed, and may be only one crisis away from homelessness. According to the 2015 American Community Survey, over 260,000 Minnesota households pay more than 30 percent of their income for housing. More than half of these households are extremely low-income (incomes below 30 percent of their local area median income). With so much of their income going towards housing, families are forced to make difficult decisions, often sacrificing meals, medicine, or safe child care for a place to live. Even with careful planning, a single health, employment, or transportation crisis could result in homelessness.

At least 7,600 Minnesotans experience homelessness on any given night.

Homelessness occurs for many reasons, many of which stem from structural, systemic, and social conditions. The circumstances for each family, young person, or individual may be unique. The Wilder Research Center, as part of its [2015 Minnesota Homeless Study](#), identified five key reasons why Minnesotans experience homelessness: lack of affordable housing; lack of employment; chronic health conditions that impede housing retention; domestic abuse and violence; and racism and other systemic inequities.

The lack of affordable housing is a challenge for communities across Minnesota, particularly for people with low or very low incomes. According to Minnesota Housing's [2017 Key Trends for Affordable Housing](#) report, about two-thirds of rental housing that is affordable for people with low incomes is "naturally occurring" affordable housing – units that are affordable but are not subsidized by any public funding. Their rents are lower than other properties in the same geographic area, often due to dated, limited, or deteriorating amenities or because they require repairs or improvements. These properties, in particular, have become attractive to real estate investors, who purchase and rehabilitate them for

increased rents, often rendering them unaffordable to their previous tenants or other low-income households. Some developers set rents above the levels that can be used with Federal or state rental assistance programs, so that even former tenants with rent subsidies end up displaced. In recent years, the number of naturally occurring affordable housing units lost to redevelopment has offset the impact of increased affordable housing production, making it difficult for communities to see meaningful improvement in their residents' access to affordable housing.

Homelessness in Minnesota: Progress and Challenges

It is a remarkable testament to the dedicated work of many Minnesotans that in the face of these challenges, homelessness in Minnesota has decreased by eight percent since 2014 when the original *Heading Home* plan was launched. That decrease represents twice the rate of improvement for the nation as a whole over the same period. Previous efforts focused on specific populations of Minnesotans also demonstrate the dramatic and rapid progress that is possible with the right commitments, partnerships, approaches, and resources.

The largest numerical decrease in homelessness in Minnesota since 2014 occurred among **families with children**, where in 2017, one-fifth fewer people in families confront homelessness compared with 2014, a decrease of nearly 1,000 people. Targeted efforts by Hennepin County through the implementation and replication of its Stable Families Initiative contributed substantially to this decrease. Hennepin County proactively identified and reached out to families that had previously been in shelter, offering those families easy access to additional support if they should encounter housing issues after their shelter stay. Many families did access this resource, which gave the county an opportunity to connect these families with a range of programs – mostly "mainstream" programs, not targeted specifically to homelessness – including employment services, county economic assistance programs, and housing supports. This approach reduced returns to shelter for these families while increasing family incomes. Hennepin County is adopting the Stable Families Initiative approach across its homelessness and human service system, and similar approaches hold promise for other

communities in Minnesota, demonstrating the kind of impact that a targeted focus and coordinated effort can have.

Another area where significant progress offers useful lessons for other populations and communities has been the coordinated effort across Minnesota to end homelessness among **veterans**. Homelessness among veterans is often measured nationally with reference to 2010. In Minnesota, veteran homelessness has decreased by 56 percent since 2010, compared with a 46 percent reduction across the country. In 2017, three of Minnesota's Continuum of Care regions representing 40 of Minnesota's 87 counties were confirmed by the Federal government to meet the criteria and benchmarks established for effectively ending veteran homelessness. These communities achieved this result through unprecedented coordination, paired with resources, focused on implementing evidence-based practice. In 2014, the Minnesota Department of Veterans Affairs, working closely with the U. S. Department of Veterans Affairs (VA) and many nonprofits and community stakeholders, launched the Homeless Veteran Registry. This tool allows any veteran experiencing a housing crisis to connect, through one short application, with a team of organizations working together closely on a veteran-by-veteran basis to find solutions to each veteran's housing issues. This approach also allowed Minnesota for the first time to have reliable information about how many veterans were successfully moving into housing and how many new veterans experiencing homelessness were being identified each month. The close collaboration – involving weekly meetings among these partners, where every veteran's path back to housing is discussed and refined – has helped to triple the rate of housing outcomes for veterans and close the gap between the new veterans being identified and the number of veterans being housed. Community efforts connected to this initiative have addressed important systemic gaps, such as the difficulty of identifying options for emergency shelter or crisis housing in many rural parts of Minnesota.

Finding stable housing for people experiencing **chronic homelessness** – that is, people with a disability who have been homeless for one year or more – has been the focus of considerable Federal, state, and local efforts since at least 2004. Since 2014, the number of people experiencing chronic homelessness has dropped by 27

percent, more than six times the rate of improvement nationally over that same period. Progress ending chronic homelessness has benefited from intentional efforts focused specifically on housing solutions for this group. Three counties have 83 percent of Minnesota's chronic homeless population: Hennepin, Ramsey, and Saint Louis counties. New approaches similar to the Homeless Veteran Registry are being used to develop collaborative housing plans for each person experiencing chronic homelessness. This holds significant potential to ensure that these Minnesotans are rapidly connected with safe and stable housing.

Southwest, West Central and Northwest CoC regions were confirmed by the Federal government to meet the criteria for effectively ending veteran homelessness.

Across Minnesota, efforts to end homelessness among **youth**, age 24 or younger, who are not accompanied by their parents or guardians, confront challenges to identify these young people reliably and to connect them quickly with responsive services and housing options. Minnesota's most recent PIT count identified 889 unaccompanied youth, a 21 percent increase compared to 2015, which may reflect improved efforts to count young people more reliably. Of these young people, 146 youth were experiencing homelessness as *minors* (under age 18). More distressingly, recent research from the Voices of Youth Count suggest that one in 10 young people experiences some form of homelessness over the course of a year, and one in 30 minors faces some form of homelessness annually, which suggests that substantially more young people may be experiencing homelessness than have been identified. In 2017, Hennepin County led a collaborative local effort, connected to a national initiative, to house 150 young people in 100 days, and to connect 75 percent of these young people with employment. At the end of this 100-day challenge, the county and its partners had housed 236 young people and connected 135 young people to employment, vastly exceeding its initial numerical targets. To focus specifically on minors experiencing homelessness, the Minnesota Department of Human Services, the

Minnesota Office to Prevent and End Homelessness, and Hennepin County are implementing a pilot initiative focused on the role that the child welfare system, in partnership with organizations serving homeless youth, can play in addressing homelessness.

Partners working to prevent and end homelessness in Minnesota have made other significant progress toward preventing and ending homelessness over the past several years:

- Since setting the ambitious goal of creating 5,000 new affordable and supportive housing opportunities by 2020, nearly half of these units have been created or are in development.
- The Homelessness Management Information System (HMIS) – a critical, statewide tool for effectively targeting homeless programs and resources, for documenting effective and promising practices, and for identifying unmet needs – has been substantially reformed resulting in greater coordination and monitoring of program and population results.
- Through HMIS, coordinated entry processes are being established to help connect people experiencing homelessness with the resources that are most responsive to their needs.
- Mainstream programs – those that are not targeted specifically to people experiencing homelessness – play a more significant role in preventing and ending homelessness in Minnesota, through specific, local efforts and through the Minnesota Interagency Council on Homelessness’ Foundational Service Practices (Appendix C), intended to make these programs work more effectively for people in the midst of a housing crisis.
- Recognizing the centrality of equity to efforts to end homelessness, the Council developed and has shared broadly a set of principles for improving equity in grant-making practices, one of the central roles of state government in supporting local progress (Appendix D).

Significant challenges remain to achieve the vision of housing stability for all Minnesotans. Unsheltered homelessness – that is, people experiencing homelessness in outdoor locations, living in vehicles, or staying in places not fit for habitation – has increased significantly in Minnesota and nationally over the past several years. Similarly, the number of single adults who are neither

veterans nor chronically homeless is going up in Minnesota and nationally. Homelessness does not affect all groups of Minnesotans equally, and these disparities must motivate specific attention and action so that as homelessness becomes rare, brief, and non-recurring overall, we also dismantle the structural inequities that create these disparities, especially for people of color, people with disabilities, and LGBTQ communities. An alarming number of adults over age 55 experience homelessness, and this population too has been growing rapidly in Minnesota. In addition, far too many people experience homelessness in Minnesota as a result of domestic or sexual violence, which must motivate stronger options so that no one remains in unsafe situations for fear of homelessness. In addition, different regions of Minnesota have experienced different levels of progress and face different challenges.

Homelessness does not affect all groups of Minnesotans equally, and these disparities must motivate specific attention and action so that as homelessness becomes rare, brief, and non-recurring overall, we also dismantle the structural inequities that create these disparities, especially for people of color, people with disabilities, and LGBTQ communities.

Heading Home Together: Minnesota’s 2018-2020 Action Plan to Prevent and End Homelessness is a direct response to these challenges. The principles and strategies laid out in this plan describe a path to preventing and ending homelessness for specific subpopulations in every region of the state. The launch of this plan marks an unprecedented level of collaboration to prevent and end homelessness between county, tribal, state and Federal governments, philanthropic organizations, nonprofits and other private sector partners, and Minnesotans with lived experience of homelessness. Our collective action will help reconnect Minnesotans facing homelessness with housing, and will substantially prevent homelessness by addressing barriers to housing stability.

The Plan:

Principles and Strategies for *Heading Home Together*

Heading Home Together is organized in two levels:

- **Seven principles identify the principle ingredients needed to prevent and end homelessness.**
- **Each principle contains several strategies that focus and guide specific activities to achieve those principles.**

Local implementation of strategies may vary from one location to another. They are intended to capture strategic work needed by multiple sectors and partners statewide. As more partners and sectors engage in this work, additional solutions may be brought to bear.

Thanks to a newly emerging understanding nationally about what it means to prevent and end homelessness, *Heading Home Together* is organized around seven principle ingredients needed for communities to achieve this result. These principles are:

1. **Identify and engage** all people experiencing homelessness.
2. Ensure that everyone experiencing or at risk of homelessness can access a safe and appropriate **crisis response** through diversion, prevention, shelter, or crisis housing with appropriate services.
3. Rapidly link people experiencing homelessness with **housing and services** tailored to their needs, prioritizing the most vulnerable.

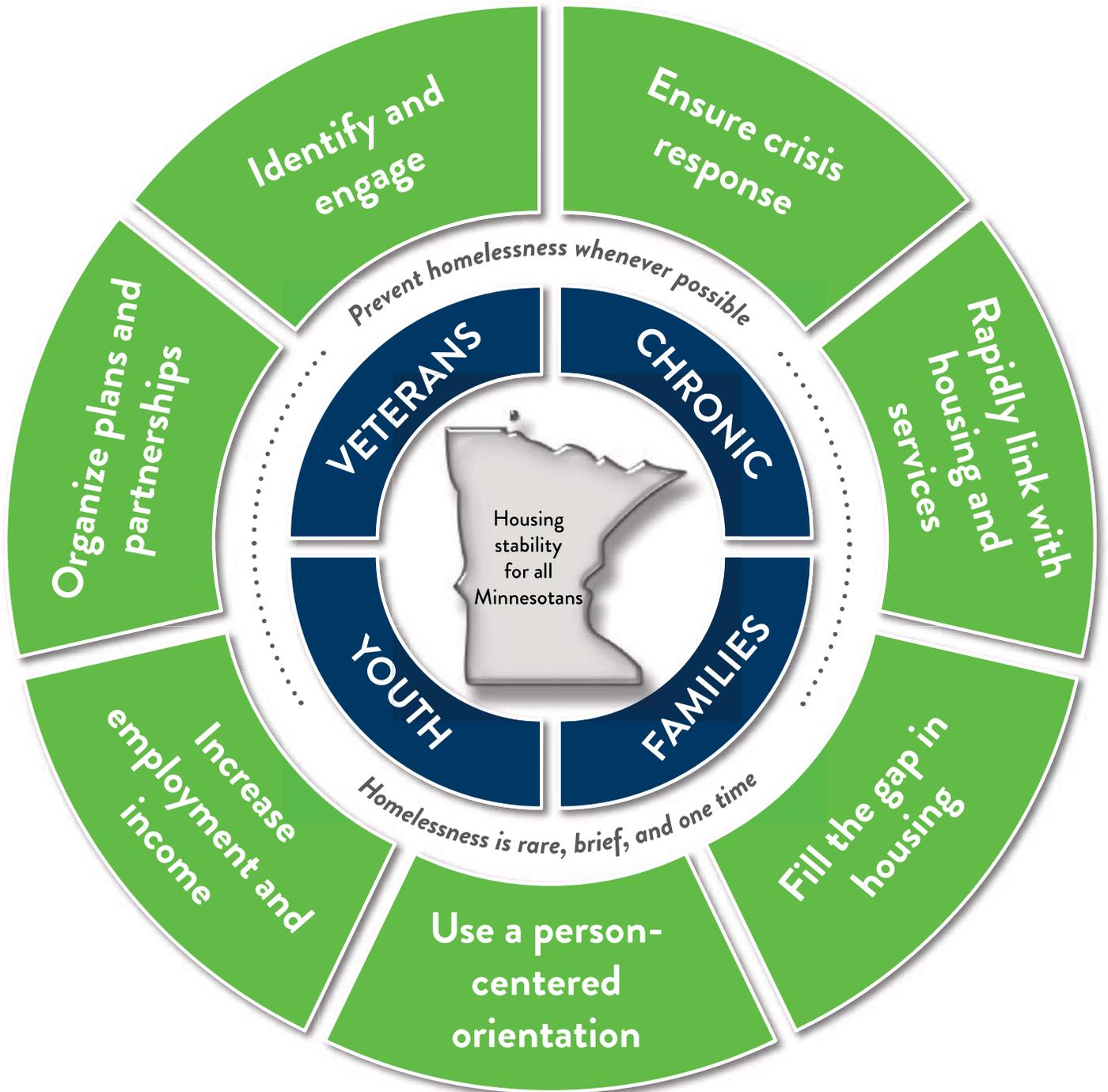
4. Prevent the loss of affordable housing and **fill the gap** in the number of affordable and supportive housing opportunities available to people at risk of or experiencing homelessness.
5. Use a **person-centered**, trauma-informed, Housing First orientation in our response to homelessness.
6. Help people experiencing or at risk of homelessness **increase employment and income.**
7. **Organize plans and partnerships** and increase system capacity to prevent and end homelessness on an ongoing basis.

Initially, these seven principles were derived from two sources of Federal guidance: the Continuum of Care system performance measures established by the U. S. Department of Housing and Urban Development (HUD) and the criteria and benchmarks established by the U.S. Interagency Council on Homelessness (USICH) and its member agencies to establish whether a community has effectively ended homelessness for specific populations. These principles have been refined through review and input from a wide variety of stakeholders, and serve as the organizing structure for the plan.

What follows is a more detailed description of each principle and the strategies needed to realize each principle.

Preventing and Ending Homelessness

Effectively ending homelessness and creating housing stability for all Minnesotans means that we prevent homelessness whenever possible, and when that is not possible, the experience of homelessness within our communities is rare, brief, and one-time. We will do this through the adoption of seven main principles—essential ingredients needed for communities to achieve this result.





Principle #1: Identify and engage all people experiencing homelessness.

Reason for this principle: We cannot effectively end homelessness if people experiencing homelessness remain unknown, invisible, or disconnected from the resources they need. Increased identification and engagement will also improve understanding of the scope of the problem and the specific needs and resources of people experiencing or at risk of homelessness.

Strategy 1A: Ensure that Minnesotans experiencing or at risk of homelessness have a low barrier way to connect with housing support and assistance.

Why? While many communities in Minnesota have some resources to respond to homelessness and housing crises, navigating these resources or knowing where to start when in crisis is often challenging. A simplified and transparent path to resources will be more responsive to the needs of people experiencing homelessness across the state. In addition, new approaches leveraging technology could improve access to support for people facing housing crises.

Strategy 1B: Ensure that every region of the state has the capacity to conduct reliable and routine outreach in areas where people are living in unsheltered settings, with the goal that everyone experiencing homelessness is connected to and known by appropriate support systems.

Why? People who are living primarily outside or in settings not fit for habitation are more likely to be disconnected from any type of supports or resources and are most vulnerable. While some parts of the state have strong outreach capacity, this is not true in many areas. Additionally, outreach staff often work in isolation and would benefit from better connections with other outreach agencies, shelter staff, homeless response systems, and mainstream programs.

Strategy 1C: Educate the public about homelessness, and support and train “natural points of contact” to identify and connect people experiencing housing crises to coordinated entry and other resources.

Why? Most Minnesotans do not have a complete understanding of who experiences homelessness and why and where someone might go for help. Someone experiencing a housing crisis does not usually seek out targeted homeless services, and may fear being stigmatized if they do. More likely, an individual or family may reach out to friends or family or will engage a system with which they are already familiar, such as schools, libraries, a faith community, or a hospital. These systems must have the information and resources to respond effectively when people in crisis come to them and to decrease stigma associated with seeking support for a housing crisis.

Strategy 1D: Expand the strategic use of statewide data systems to identify people experiencing homelessness and rapidly link people to appropriate supports.

Why? Existing data systems, including HMIS, hold helpful information about people experiencing homelessness and could be used in a more strategic way to help create better outcomes for people. In addition, initiatives that have used data well to drive interventions can inform how data can be used more broadly to address homelessness.



Principle #2: Ensure that everyone experiencing or at risk of homelessness can access a safe and appropriate crisis response through diversion, prevention, shelter, or crisis housing with appropriate services.

Reason for this principle: Too many Minnesotans face homelessness without shelter: staying outdoors, in vehicles, or in places not meant for habitation. Whenever it is possible to prevent the trauma and disruption of homelessness, we should do so. Dedicated homelessness prevention and diversion resources need to be available to stabilize housing or to identify other housing options without an episode of homelessness. We must also create immediate access for people who are unsheltered to some form of immediate shelter that is safe and supportive, and provides low-barrier access to services designed to help people quickly resolve their housing crisis.

When a community lacks sufficient emergency shelter capacity and development of new shelter capacity is not feasible or appropriate, other approaches must be put in place to reduce the trauma of homelessness and quickly help people into a more stable situation. This can include providing a crisis response, such as motel voucher programs or emergency host homes for youth, in addition to developing immediate pathways to more permanent housing.

Strategy 2A: Increase resources for prevention and diversion to avoid shelter when possible and to leverage potential housing options and natural supports prior to an episode of homelessness.

Why? When a crisis arises, avoiding homelessness from occurring in the first place is always the best outcome for families or individuals, as well as the most efficient use of resources. Currently, there is wide variation in the extent to which prevention and diversion resources exist and how they are deployed.

Strategy 2B: Increase capacity in communities to provide access to a form of low-barrier, safe, and dignified shelter or other crisis response to meet demand for everyone who needs it on a same-day basis.

Why? When shelters or other types of crisis response work well, they provide much-needed stability and safety, a place for people to engage with services and supports,

and a stable place to begin to identify a path to more permanent housing. In most parts of the state, shelter capacity (in terms of both beds and services) is limited based on available funding, rather than scaled to the capacity needed to meet the need.

Strategy 2C: Ensure that systems serving low-income or vulnerable Minnesotans are responsive to the needs of people experiencing a housing crisis and do not exit people to homelessness.

Why? Transitions out of systems like corrections, hospitals, substance use treatment, and youth foster care are common entry points into homelessness.



Principle #3: Rapidly link people experiencing homelessness with housing and services tailored to their needs, prioritizing the most vulnerable.

Reason for this principle: The available resources for ending homelessness must be used in the most efficient and impactful way possible. Doing so requires understanding the needs of people experiencing homelessness and making connections to resources that best meet those needs. Continuum of Care regions across the state have made significant progress in these connections through coordinated entry systems. Coordinated entry streamlines access and referrals to services and housing, using standardized tools and practices for everyone who requests help, allowing regions to prioritize homeless assistance for those with the greatest vulnerability or needs.

Strategy 3A: Collaborate with Continuum of Care regions and tribal nations so that all coordinated entry systems in Minnesota are trauma-informed, culturally appropriate, and meet or exceed Federal standards.

Why? Coordinated entry is new in most areas of Minnesota, but a strong foundation has been laid. We need to build on this foundation to increase coordination among regions, to integrate best practices and culturally appropriate services in these systems, and to clarify the role of these systems in response to people at risk of homelessness or transitioning from other systems.

Strategy 3B: Ensure that coordinated entry systems assess needs and provide referrals to critical mainstream programs, including mental health care and economic assistance.

Why? Resources not specific to homelessness can play an important role in ending homelessness by addressing underlying crises. Mainstream programs typically provide more people with a greater array of supports than homeless-specific programs can. Leveraging all potential resources available to a household provides better service and ensures the most efficient use of limited homeless-specific resources.

Strategy 3C: Provide navigation services to support the most vulnerable people assessed through coordinated entry and help connect them to housing and supports that best fit their needs.

Why? In some areas of the state, households can easily lose contact with the coordinated entry system after they have been assessed and placed on a waiting list, or they may not be prepared when they get a referral to housing. A navigator can maintain contact with households, help gather any documentation, make connections to other services, and assist with housing search. Even where this service exists, there is typically no stable source of funding to support these activities.

Strategy 3D: Engage communities with the highest rates of chronic homelessness to explore best ways to increase stable housing outcomes and coordinate with the work of Minnesota’s Olmstead Plan.

Why? Today, over 1,000 Minnesotans experience chronic homelessness (homeless for 12 months or more with a disability). People experiencing chronic homelessness are often extremely vulnerable and need expedited access to supportive housing or similarly intensive resources to effectively end their homelessness.



Principle #4: Prevent the loss of affordable housing and fill the gap in the number of affordable and supportive housing opportunities available to people at risk of or experiencing homelessness.

Reason for this principle: The only true cure for homelessness is housing that is affordable, accessible, and stable. It is essential that people have access to housing and, when necessary, have supports in place to ensure long-term stability.

Strategy 4A: Align efforts with the Governor’s Task Force on Housing to identify gaps in housing opportunities for Minnesotans with the lowest incomes and greatest barriers to housing and recommend actions to meet the need.

Why? At the core of the issue of homelessness is the systemic lack of affordable housing. Any efforts to prevent and end homelessness will be successful only if we act boldly to fill known gaps in the availability of affordable housing while continuously refining our understanding of the need and developing strategies to meet those needs.

Strategy 4B: Preserve existing affordable housing stock, especially naturally-occurring affordable housing.

Why? While creating new affordable and supportive housing opportunities is essential, it only works if those opportunities expand the affordable housing stock. Naturally-occurring affordable housing, in particular, represents an important, finite, and precarious resource to provide rental options for low-income Minnesotans. Today, we are losing this important housing at a rapid pace.

Strategy 4C: Develop a statewide initiative that uses an incentive-based approach to partnering with property owners and managers to increase willingness to rent to people at risk of or experiencing homelessness.

Why? Many people at risk of or experiencing homelessness are locked out of the housing market simply because property owners or landlords are not willing to rent to them. A tight rental market enables property owners to screen out anyone with a perceived risk, such as criminal background, credit issues, or poor rental history, which has a disproportionate impact on people experiencing homelessness.

Strategy 4D: Increase services available in supportive housing.

Why? Housing stability is critical to a person’s health, and when left “untreated” housing instability can result in worsened illnesses and negative health outcomes. Medicaid has recognized this connection, and provides us with an opportunity to use health care dollars to deliver services that help stabilize housing. This, in turn, will increase health and reduce health care costs.

Strategy 4E: Create a systematic way for people to move out of permanent supportive housing when they are ready to move on.

Why? Some tenants of supportive housing no longer need or want the level of support offered, but stay because financial and/or health supports are not in place to help them transition to a less intensive housing model. Addressing this issue can ensure our limited homeless-specific resources are being used as efficiently as possible, while honoring participant choice and preserving the stability that supportive housing has helped to achieve.

Strategy 4F: Reduce the use of unnecessarily restrictive tenant screening and zoning practices to increase housing access for those with criminal histories, prior evictions, or other barriers.

Why? Minnesota has seen an increase in city and local ordinances and targeted zoning practices that negatively impact those with a criminal history or a disability, and those experiencing domestic violence. These policies tend to have a disproportionate impact on people experiencing homelessness.

Strategy 4G: Increase the number of Housing Choice Vouchers, Public Housing units, and other mainstream housing resources used by people experiencing homelessness.

Why? Homeless-specific resources alone are not enough to address the amount of affordable housing needed to end homelessness. Yet, mainstream housing resources are often difficult or impossible to access for people at risk of or experiencing homelessness. Waitlists for Public Housing vouchers can be years long and are often closed. Housing Choice Vouchers go unused because many property owners are not willing to accept them. People experiencing homelessness are often screened out of Public Housing. Effectively engaging mainstream housing resources is critical to increase the rate of housing outcomes for people experiencing homelessness.

Strategy 4H: Ensure sufficient capacity for responsive and flexible housing options for youth unaccompanied by parents or guardians experiencing or at risk of homelessness.

Why? The transition to adulthood for many young people includes some degree of housing instability and often relies on shared housing or nontraditional housing settings. Homelessness programs are often premised on living arrangements for adults and have been slow to support living situations more commonly used by youth. In addition, performance expectations and eligibility requirements can often create penalties or disincentives for levels of mobility that are common and developmentally appropriate for young people.



**Principle #5:
Use a person-
centered, trauma-
informed,
Housing First
orientation in
our response to
homelessness.**

Reason for this principle: To be successful, solutions to homelessness must work for people in crisis, meet people where they are, and prioritize rapid access to housing with no preconditions or requirements. Person-centered, trauma-informed, Housing First approaches will advance these goals. These three best practices should be integrated throughout the homeless response system and other key mainstream systems. A person-centered approach means taking into account and responding to what individuals need and want, rather than organizing programs so they are easier for providers and administrators. Trauma-informed approaches recognize that homelessness is both a source of and often the product of traumatic experiences and respond intentionally and effectively to the impact of trauma. Housing First approaches reduce barriers to housing and prioritize rapid access to permanent housing when working with someone facing a housing crisis, so that housing can serve as a platform for stability. While the evidence supporting these approaches is clear, practice remains uneven.

Strategy 5A: Promote broader adoption of person-centered, trauma-informed, and Housing First approaches by providing standards, definitions, guidance, and support.

Why? For these best practices to be effectively adopted, everyone must have a clear understanding of what each means and why they are important. Funders must support providers to make any needed changes to ensure their programming is person-centered, trauma-informed, and Housing First oriented.

Strategy 5B: Ensure enough culturally-specific services, programs, and housing opportunities to better reflect the needs and preferences of people at risk of or experiencing homelessness.

Why? The racial disparities in homelessness require deliberate focus and attention to ensure that solutions to homelessness are specifically responsive to populations disproportionately impacted by homelessness, as well as better metrics to monitor progress closing disparities and providing options responsive to people's preferences.

Strategy 5C: Bolster existing information and referral services so they are able to provide useful and accurate information directly to people experiencing homelessness.

Why? People experiencing homelessness often do not know where to go for help or what resources or supports may be available to them. It is important that people have good information about their options so they can have meaningful choice in addressing their homelessness.



Principle #6:
Help people experiencing or at risk of homelessness increase employment and income.

Reason for this principle: The best way for an individual or family to achieve housing stability is to increase income, whether through wages, disability benefits, or other cash benefits. Increasing financial resources for people experiencing or at risk of homelessness also includes connecting people to benefits such as food support, child care subsidies, and health care so that more of their income can be available for housing.

Strategy 6A: Create connections to employment support and economic assistance programs as part of coordinated entry.

Why? Because stable housing is dependent on income, addressing income should be done concurrently when determining housing options. Increasing income can occur through access to jobs and to financial assistance programs like the Minnesota Family Investment Program (MFIP) or Social Security Income (SSI). Currently, coordinated entry systems typically take into account a household's income without looking at ways income could be increased and typically without connections to programs that can improve employment or provide access to benefits. Working on increasing income while also working to find stable housing can lead to more housing options and raise the likelihood of long-term stability.

Strategy 6B: Increase partnerships and alignment between homeless-specific programs and mainstream education, employment, and training services to access career pathways and increase earned income.

Why? Participants of supportive housing or other homeless programs would greatly benefit from the resources and expertise that mainstream employment and training services can offer. At the same time, mainstream employment and training services would greatly benefit

from the knowledge and insight housing and homeless programs can provide on successfully serving individuals and families experiencing homelessness.

Strategy 6C: Increase the number of families experiencing or at risk of homelessness who have access to affordable and flexible child care and after school care.

Why? The cost of quality child care is out of reach for most families experiencing homelessness. Without child care, it is extremely difficult to find and maintain employment to help afford housing. With access to affordable child care, parents are more likely to be employed and will have more of their income to put towards housing, and children are more likely to receive the early childhood education needed to create the foundation for future educational success.

Strategy 6D: Increase the number of people experiencing or at risk of homelessness who have access to affordable transportation options.

Why? Accessible and affordable transportation allows people to maintain employment, keep their health care appointments, and get their children to school—all important components of being able to maintain stable housing. Currently access to affordable transportation poses a significant challenge for many Minnesotans facing housing crises across the state.



Principle #7: Organize plans and partnerships and increase system capacity to prevent and end homelessness on an ongoing basis.

Reason for this principle: This plan calls for substantial improvements in capacity and coordination, understanding that such changes must be robust and sustainable so that momentum toward ending homelessness in Minnesota increases and progress is lasting. Sustaining the impact of these improvements must, itself, be a significant focus.

Strategy 7A: Develop a multi-sector, statewide structure to drive implementation, accountability, and oversight of this plan.

Why? Ending homelessness requires effective ways for all concerned stakeholders to work together. Each individual agency's or sector's efforts are amplified when there is a cohesive structure to guide work, leverage each other's strengths, and hold each other accountable.

Strategy 7B: Coordinate, streamline, and simplify access and requirements for funding to support responses to homelessness, particularly for communities disproportionately impacted by homelessness.

Why? Multiple application processes, reporting requirements, and monitoring procedures with varying timeframes and expectations create burdens for grantees and potentially duplicative work among funders. Funding decisions made in isolation mean that we are not addressing homelessness in a systematic way and that we lack clarity on the overall impact of funding on homelessness, particularly across programs. Finally, there is a potential for current funding strategies to inadvertently perpetuate disparities.

Strategy 7C: Use data to identify existing resources, service gaps, and ongoing resource requirements to sustainably prevent and end homelessness.

Why? High quality data and analysis drives better planning, policy, and results. Preventing and ending homelessness require a solid understanding of what resources exist, how well they are being used, and what will bridge the gap to ultimately achieve the goals in this plan.

Strategy 7D: Ensure that people with lived experiences of homelessness provide ongoing guidance to continually improve implementation of this plan.

Why? People with lived experience of homelessness have developed expertise and perspectives about responses to homelessness, what gaps or systems issues impede access to housing, and what approaches may be most (or least) effective. Leveraging this expertise can improve systems and expedite efforts to improve Minnesota's response to homelessness.

Every Minnesotan Has a Role to Play

The State has a significant role to play in preventing and ending homelessness, and this plan includes, at Appendix A, what the State has committed to do to advance this work.

The Minnesota Interagency Council on Homelessness also recognizes that state government alone cannot end homelessness. In fact, every Minnesotan has a role to play. Solving a problem of this magnitude requires Minnesota’s best thinking, contributions from every sector, and a truly collective effort. Minnesotans in many roles can play a part in ending homelessness. As this plan is being launched, work is being done to create a multi-sector Heading Home Together leadership table that will bring together all levels of government, nonprofits, and the private sector. There, we hope to gather and organize, monitor, and update, the contributions that all will make to advance this plan in the coming years. Having a solid plan is important, but implementation and course correction over the next three years will drive what we are able, together, to achieve.

Public Officials at Federal, State, Tribal, County, Regional, and Municipal Levels

- Affirm a shared vision, goals, principles, and strategies to prevent and end homelessness.
- Provide leadership and accountability for progress and linkages between government entities.
- Provide the policy framework and public investments to prevent and end homelessness.
- Support the delivery of coordinated and integrated services at the community level.
- Foster implementation of proven and promising practices, innovative research and programming, and opportunities to share knowledge about lessons learned among all stakeholders.

Continuums of Care, Housing and Services Providers, Advocates, Organizations

- Provide direct and indirect support to people experiencing or at risk of homelessness through effective, evidence-informed programs and services.
- Create strong, community-level response systems and effective programs designed to identify people experiencing or at risk of homelessness and deliver sustainable housing solutions.
- Collaborate to create, document, and share best practices, and to identify emerging trends.
- Work with government partners to identify needs and issues and to shape strategic directions.
- Inform and influence government priorities, public awareness and participation, and community approaches to solutions to homelessness.

Private Sector - Philanthropy and Business

- Provide leadership, critical resources, and shared ownership for preventing and ending homelessness.
- Convene partners to resolve challenges, maintain momentum, and sustain a shared vision.
- Provide vital economic and employment opportunities for people experiencing homelessness.
- Support broader civic engagement on the issue.

All Minnesotans

- Learn and tell the stories of children, youth, families, and individuals experiencing homelessness.
- Create community awareness of, engagement in, and responsibility for efforts to prevent and end homelessness.
- Engage policymakers at every level of government about efforts to prevent and end homelessness.
- Connect community organizations and institutions, including faith and cultural communities, in local efforts to prevent and end homelessness.
- Partner with schools and school districts to identify and support students experiencing homelessness.
- Donate resources, goods, and time to organizations serving people experiencing homelessness.

Appendix A: Council Work Plan

The following list presents the work plan that agencies of the Minnesota Interagency Council on Homelessness will use to advance the strategies, principles, and goals of this plan.

Principle #1: Identify and engage all people experiencing homelessness.

Strategy 1A: Ensure that Minnesotans experiencing or at risk of homelessness have a low barrier way to connect with housing support and assistance.

Agency	Action	Targeted Completion Date
DHS	Provide guidance to counties on child welfare best practices related to housing instability, including on the importance of proactive follow-up with families at risk of homelessness as a means of reducing repeat maltreatment.	March 2019
	Use Senior Linkage Line to identify older adults in long-term care facilities and hospitals experiencing homelessness and coordinate their services to address the complexity of health care needs among homeless older adults, including referrals to service providers, medication management, access to transportation, and mental health care.	Ongoing
MDH	Incorporate screening for social determinants in the Health Care Home rulemaking process, including housing and homelessness.	December 2019
MDVA	Audit the Homeless Veteran Registry to identify current users, and increase engagement and training to stakeholders to increase participation.	March 2018
Minnesota Housing	Implement a prevention targeting tool to prioritize those most likely to become homeless without receiving immediate assistance.	July 2019

Strategy 1B: Ensure that every region of the state has the capacity to conduct reliable and routine outreach in areas where people are living in unsheltered settings, with the goal that everyone experiencing homelessness is connected to and known by appropriate support systems.

Agency	Action	Targeted Completion Date
DHS	Ensure that homeless outreach activities prioritize people who are living in unsheltered settings and that housing access is the primary objective of the outreach.	June 2020
	Engage underserved communities with technical assistance for responding to mental health grant opportunities, and/or working with DHS partners in the technical assistance efforts.	Ongoing
MDVA	Expand purpose of the Homeless Veteran Registry by increasing capability of the Registry to include veterans at risk of homelessness.	December 2018

Strategy 1C: Educate the public about homelessness, and support and train “natural points of contact” to identify and connect people experiencing housing crises to coordinated entry and other resources.

Agency	Action	Targeted Completion Date
DHS	Ensure DHS Member Help Desk, Health Care Eligibility Operations enrollment, and case management staff have resources and talking points available to them so they can refer the call appropriately if a caller discloses homelessness and is looking for assistance.	September 2018
	Ensure programs for older adults (Senior Linkage Line, Caregiver Consultants, Cultural Consultants) and grantees (Senior Corps, Dementia grantees, Eldercare Development Partnership, and Live Well At Home) make the appropriate referrals if the individual discloses homelessness and is looking for assistance.	Ongoing
MDE	Provide professional development opportunities to Early Childhood Family Education providers about reaching out to people experiencing homelessness, offering sessions at times and locations that are accessible, and allowing for multiple methods of communication.	January 2019
	Analyze school homeless identification rates to flag potential outliers for outreach and follow-up.	January 2020
	Assist libraries and library staff to better serve people experiencing homelessness, including supporting local partnerships between libraries and community organizations, training library staff, and removing barriers to accessing library services.	January 2019
	Expand and replicate local partnerships among schools, government, and community-based organizations that have been successful in resolving student homelessness as part of the Homework Starts with Home initiative.	June 2019
	Promote McKinney-Vento services as a tool to address chronic absenteeism.	June 2020
MDH	Facilitate communication and education between primary care clinics and their partners, such as hospitals.	December 2019
MDH, OTPEH	Create a toolkit of resources and trainings for Family Home Visiting staff to access when working with the unique needs of families and children experiencing homelessness.	December 2019
	Expand the narrative of housing and homelessness to include the conditions that lead to homelessness, and the connection of housing to health.	December 2019
MDVA, DEED	Increase outreach, education, and identification of homeless and at-risk veterans through increased participation in the Mayor’s Challenge and local veteran service organization outreach.	December 2018
Minnesota Housing	Provide technical assistance to grantees to better connect people experiencing homelessness to the coordinated entry response system.	July 2019
MnDOT	Implement established policy to train MN Department of Transportation staff to have more effective interactions with people experiencing homelessness.	June 2018
OHE	Explore opportunities to train participating teachers in the Get Ready! program on how they can support students affected by housing instability.	August 2018
	Develop relationships with the McKinney Vento local homeless education liaisons in order to more effectively support students affected by housing instability.	September 2018
	Encourage other higher education leaders across the state to adopt best practices by disseminating information. Partner with institutions to implement the best practices models on identification and services for homeless college students.	October 2018
	Provide information and resources to financial aid administrators group on homelessness exemptions for independent student status.	June 2019
	Review all Office of Higher Education programs and policies to evaluate how they support students experiencing homelessness, what barriers they create, and what opportunities there are for improvement.	December 2020

Strategy 1D: Expand the strategic use of statewide data systems to identify people experiencing homelessness and rapidly link people to appropriate supports.

Agency	Action	Targeted Completion Date
DHS	Provide annual updates on legislative report on current homelessness by county.	Ongoing
	Improve data quality for living arrangement and homeless indicators in MAXIS, the system used to determine eligibility for public assistance and health care, through increased training and modification to forms.	June 2019
	Explore opportunities to improve data collection and reporting on people experiencing homelessness who may also be enrolled in a public health care program.	Ongoing
	Develop priorities and training protocols within Senior Linkage Line (web referral) and Return to Community when an individual is identified as homeless or at risk of homelessness.	June 2019
MDE	Improve quality of data collected by the Early Childhood and Family Education Program on housing status by adopting the approach used by the PreK-12 system, which captures varying degrees of housing instability.	June 2018
	Enhance how achievement gaps for homeless youth and foster youth are assessed and include this information in relevant public reporting.	January 2019
MDVA	Launch a public-facing dashboard designed to make Homeless Veteran Registry de-identified outcome data readily available to stakeholders, and to increase the ability of all stakeholders to monitor and evaluate progress, improve data literacy, and accelerate community engagement and impact.	August 2018
	Increase communication and synchronization among data collections systems (Veteran Registry-HMIS-Coordinated Entry).	December 2018
	Continue to support and advise communities as they compile and submit Homeless Veteran Registry data and evidence of reaching the federal benchmarks and criteria for ending veteran homelessness.	Ongoing

Principle #2: Ensure that everyone experiencing or at risk of homelessness can access safe and appropriate crisis response through diversion, prevention, shelter, or access to crisis housing with appropriate services.

Strategy 2A: Increase resources for prevention and diversion to avoid shelter when possible and to leverage potential housing options and natural supports prior to an episode of homelessness.

Agency	Action	Targeted Completion Date
DHS	Prioritize frequent or long term users of shelters, or other crisis services, with outreach services to help them access and remain in stable housing.	June 2020
OHE	Implement emergency grant program for students experiencing housing and food insecurity.	June 2018

Strategy 2B: Increase capacity in communities to provide access to a form of low-barrier, safe, and dignified shelter or other crisis response to meet demand for everyone who needs it on a same-day basis.

Agency	Action	Targeted Completion Date
DHS	Develop shelter protocols and standards, and provide support to shelters around low barrier access that will increase access to shelter and services promoting dignity and respect, and facilitating rapid access to housing.	December 2019
MDH	Provide Psychological First Aid for homelessness trainings for shelter staff.	December 2018
	Establish policies or practices necessary to promote safety of people experiencing homelessness during weather events or natural or man-made disasters.	December 2019
MnDOT, MDVA	Pursue better coordination across all sectors and establish a formalized process and/or system to create solutions for people living in encampments by creating more meaningful interactions with inhabitants and ensuring they are connected with needed services and opportunities for housing.	May 2018
OTPEH	Develop policies to promote safety of people experiencing homelessness during weather events or natural disasters.	January 2019

Strategy 2C: Ensure that systems serving low-income or vulnerable Minnesotans are responsive to the needs of people experiencing a housing crisis and do not exit people to homelessness.

Agency	Action	Targeted Completion Date
DHS	Identify ways for families involved in the child welfare system and experiencing housing instability to be more likely to gain housing assistance through the Keeping Families Together pilot.	December 2018
	Implement agency-wide DHS policy to emphasize the importance of stable housing within human services and provide alignment and clarity on housing-related issues.	December 2018
	Pilot a more effective response to older minor youth experiencing homelessness that would later be replicated in various forms across MN.	December 2019
	Implement Foundational Service Practices (please refer to Appendix C) in select mainstream system programs, including Adult Mental Health services and child welfare.	December 2019

Agency	Action	Targeted Completion Date
DHS	Complete pilot project with the Department of Corrections that connects people leaving correctional facilities with public assistance and healthcare programs. People in the pilot project are at high risk of recidivism and many have past histories of homelessness and most are at risk of homelessness. Use lessons learned in pilot to increase successful transitions from correctional facilities, mental health and substance use disorder treatment centers.	December 2019
	Support the Alcohol and Drug Abuse Division grant recipients that serve felony level, criminal justice involved individuals, pre-release, and recently released from incarceration, who have a substance use disorder (SUD) to ensure connections to housing opportunities.	Ongoing
	Provide guidance to counties on child welfare best practices related to resolving housing instability, including the importance of inquiring about housing stability for the purpose of connecting the family with resources.	March 2019
	Improve and enhance discharge planning for older adults at risk of homelessness by working with Community Living Specialists (Return to Community initiative) and the Office of Ombudsman for Long Term Care.	June 2019
DOC	Continue building relationships with the MN Association of Community Corrections Act Counties (MACCAC), the MN Association of County Probation Officers (MACPO), and the MN Sheriffs Association to better align and partner on strategies to help stabilize individuals at risk of or experiencing homelessness who are involved in corrections and county systems.	Ongoing
MDE	Support schools with evidence-based practices to increase consistent attendance.	June 2020
	Develop and promote Minnesota-specific guidance on expectations of McKinney-Vento liaisons.	December 2018
	Establish and deliver Indian Home School Liaison (IHSL) training on identifying and tracking American Indian homeless or at-risk students.	December 2020
	Collaborate with McKinney-Vento liaisons to assess options for strengthening liaison peer support groups.	Ongoing
	Increase the impact of early learning programs for children experiencing homelessness and their families by increasing sustained involvement with appropriate resources, improving coordination among programs and practitioners, and monitoring participation in relevant programs.	Ongoing
MDH	Ensure collaboration between Family Home Visiting and mainstream systems to increase referrals of families at risk for homelessness. For example, explore with the MN Department of Corrections whether there are ways to increase the likelihood that pregnant mothers being released from prison are connected with their local Family Home Visiting program.	December 2019
	Facilitate new opportunities for Family Home Visiting local partners to learn and share best practices related to the foundational service practices.	December 2019

Principle #3: Rapidly link people experiencing homelessness with housing and services tailored to their needs, prioritizing the most vulnerable.

Strategy 3A: Collaborate with Continuum of Care regions and tribal nations so that all coordinated entry systems in Minnesota are trauma-informed, culturally appropriate, and meet or exceed Federal standards.

Agency	Action	Targeted Completion Date
OTPEH	Create a mechanism for continuously improving coordinated entry, including routinely assessing outcome data, participant experience feedback, and assessment tools to improve coordinated entry systems and better identify community needs.	December 2019

Strategy 3B: Increase capacity in communities to provide access to a form of low-barrier, safe, and dignified shelter or other crisis response to meet demand for everyone who needs it on a same-day basis.

Agency	Action	Targeted Completion Date
OTPEH	Clarify options and requirements for how mainstream systems and programs should interact with coordinated entry to respond to housing crises faced by people at risk of homelessness.	December 2018
DHS, MN Housing	Identify and pilot options for implementing progressive engagement approaches for families experiencing homelessness using multiple funding sources.	September 2020
DHS	Build upon the work started with Substance Use providers to address gaps in access and service delivery for individuals with a severe substance use disorder (SUD) that are also at risk of or currently experiencing homelessness. This work includes ensuring connections to services through coordinated entry.	Ongoing
	Align work of Indian Elder Coordinator with MN Chippewa Tribe – Indian Area Agency on Aging to identify and develop protocols for referrals for American Indian elders who are homeless.	Ongoing
	Develop shelter protocols for older women who are also victims of abuse to address housing supports.	Ongoing
	Work with Continuum of Care Coordinators to identify opportunities to connect people assessed through the Coordinated Entry system to Emergency Assistance, Housing Support, Social Security or Minnesota Supplemental Aid (MSA) when appropriate.	December 2019

Strategy 3C: Provide navigation services to support the most vulnerable people assessed through coordinated entry and help connect them to the housing and supports that best fit their needs.

Agency	Action	Targeted Completion Date
Minnesota Housing	Evaluate the impact of utilizing state resources to fund housing navigators through the Landlord Risk Mitigation Fund Pilot Program.	December 2019
	Ensure rapid rehousing models include the components necessary to provide housing stability.	July 2019

Strategy 3D: Engage communities with the highest rates of chronic homelessness to explore best ways to increase stable housing outcomes and coordinate with the work of Minnesota’s Olmstead Plan.

Agency	Action	Targeted Completion Date
DHS	Align policies around Olmstead and the creation of affordable housing/permanent supportive housing.	Ongoing
	Ensure care coordination for individuals with a substance use disorder addresses housing issues concurrently to improve treatment outcomes.	Ongoing

Principle #4: Prevent the loss of affordable housing and fill the gap in the number of affordable and supportive housing opportunities available to people at risk of or experiencing homelessness.

Strategy 4A: Align efforts with the Governor’s Task Force on Housing to identify gaps in housing opportunities for Minnesotans with the lowest incomes and greatest barriers to housing and recommend actions to meet the need.

Agency	Action	Targeted Completion Date
DHS	Increase training and support for providers interested in developing new supportive housing options.	June 2020
	Increase use of Minnesota Supplemental Aid (MSA) Housing Assistance through expanded training and outreach and implementation of 2017 legislative changes.	June 2020
	Prioritize Live Well At Home grants (community service development dollars) for affordable, low cost, independent housing development for older adults.	December 2020
DPS	Identify the need in housing opportunities, service dollars, and staff capacity to ensure that victims of domestic violence at risk of homelessness have access to emergency and safe affordable housing.	June 2019
	Create a Domestic Violence Housing Specialist position that would act as a point of contact and expert on where the housing and homelessness systems and the domestic violence systems intersect.	September 2018
Minnesota Housing	Continue to work towards the goal of 5,000 new housing opportunities, including but not limited to new permanent supportive housing.	December 2020
Minnesota Housing, Met Council	Work with other government and non-governmental partners to align funding and policy around the issues of homelessness and affordable housing.	December 2019

Strategy 4B: Preserve existing affordable housing stock, especially naturally-occurring affordable housing.

Agency	Action	Targeted Completion Date
Minnesota Housing	Explore programs and policies to preserve housing that is not federally subsidized but otherwise affordable to low-income Minnesotans. This will be done in addition to the priority of preserving federally-assisted housing.	Ongoing
	Support the Naturally Occurring Affordable Housing (NOAH) Impact Fund and other efforts that work with landlords to preserve rental properties at risk of conversion to higher rents.	Ongoing
DHS	Educate homeless service providers on needs of older adults and explore ways to help current supportive and affordable housing providers better assist their tenants in aging in place.	Ongoing

Strategy 4C: Develop a statewide initiative that uses an incentive-based approach to partnering with property owners and managers to increase willingness to rent to people at risk of or experiencing homelessness.

Agency	Action	Targeted Completion Date
OTPEH	Identify and disseminate incentive strategies for promoting access to rental vacancies for people experiencing homelessness.	December 2018
Minnesota Housing	Explore opportunities to work with landlords and property managers to increase access to non-subsidized housing for individuals and families in need of affordable and stable housing.	Ongoing
	Continue to build on and expand the work started with the Risk Mitigation Fund Pilot to encourage landlords to house people with the greatest barriers to housing.	Ongoing
DPS	Create an "Understanding Criminal Charges" document to educate public housing providers, landlords and employers on the definitions of criminal charges and provisions in laws that protect the rights of domestic violence victims.	September 2018
MDHR	Provide education to landlords, tenants, prospective tenants, and service providers (government and nonprofit) about housing discrimination laws in Minnesota.	January 2019

Strategy 4D: Increase services available in supportive housing.

Agency	Action	Targeted Completion Date
DHS	Increase the capacity of supportive housing providers to provide Medicaid services directly or to partner with Medicaid providers.	June 2020
	Increase the flexibility of the Home and Community Based (HCBS) waiver services to support a wide array of service options in the community, including services in real-time or through remote support. The development of the Tiered Standards and the implementation of Individualized Home Supports (IHS) are working towards this goal.	December 2020
Minnesota Housing	Regularly provide informational materials on best practices related to tenant selection plans to owners and manager of properties of Minnesota Housing financed rental developments.	Ongoing

Strategy 4E: Create a systematic way for people to move out of permanent supportive housing when they are ready to move on.

Agency	Action	Targeted Completion Date
Minnesota Housing	Conduct an evaluation of the Step-Down pilot and if found effective, explore the resources needed to bring the program to scale.	December 2019

Strategy 4F: Reduce the use of unnecessarily restrictive tenant screening and zoning practices to increase housing access for those with criminal histories, prior evictions, or other barriers.

Agency	Action	Targeted Completion Date
DHS	Explore innovative housing models that increase housing access for older adults in rural communities (examples include: Golden Girls, rooming housing, etc.).	December 2019
DOC	Provide education to cities, counties, and relevant public safety entities on the impacts of local ordinances and residency restrictions on those with a criminal history.	Ongoing
MDHR	Pursue actions to limit restrictive zoning, non-safety based occupancy limits, and covenants by communities and home owners associations.	June 2018
	Identify options to address tenant screening issues (criminal histories primarily, but also credit and housing history).	January 2019
MDHR, Minnesota Housing	To increase housing access, explore options such as automatic expungement to address evictions issues, particularly evictions due to non-payment of rent.	January 2019

Strategy 4G: Increase the number of Housing Choice Vouchers, Public Housing units, and other mainstream housing resources used by people experiencing homelessness.

Agency	Action	Targeted Completion Date
Met Council	Engage with Housing Choice Voucher Administrators (HRAs, PHAs, CDAs, etc.) to identify and implement strategies to reduce voucher turnback rates, and to identify strategies to best serve those on program waiting lists who are experiencing homelessness.	December 2019
	Support local efforts around expanding Housing Choice Voucher opportunities.	December 2020
	Engage with Housing Choice Voucher Administrators to identify and implement strategies to increase the number of property owners and managers willing to participate in the Housing Choice Voucher Program.	December 2019
Minnesota Housing	Continue to prohibit properties with funding through Minnesota Housing from refusing to lease to a tenant based on the status of the tenant as a voucher-holder or recipient of similar rental assistance.	Ongoing

Strategy 4H: Ensure sufficient capacity for responsive and flexible housing options for youth unaccompanied by parents or guardians experiencing or at imminent risk of homelessness.

Agency	Action	Targeted Completion Date
DHS	Ensure consistent application of the Fostering Connections Act including the use of supervised independent living settings.	December 2018
	Prioritize and target parenting youth in foster care with housing and wrap around services to ensure stability.	July 2019
	Ensure that state homeless funds that target youth can be used to support informal housing options and youth's existing support network.	December 2019

Principle #5: Use a person-centered, trauma-informed, Housing First orientation in our response to homelessness.

Strategy 5A: Promote broader adoption of person-centered, trauma-informed and Housing First approaches by providing standards, definitions, guidance and support.

Agency	Action	Targeted Completion Date
OTPEH	Compile best practice information and guidance on person-centered, trauma-informed, and Housing First approaches and disseminate to Council agencies to use in communication with grantees, providers, and the broader community.	January 2019
DOC	Continue to refine and increase the quality of exit planning in Mental Health, Substance Use, and Criminal Justice Systems to ensure successful transitions out of institutions into stable housing. Partner and align with coordinated entry systems.	Ongoing
DHS	Provide in-person training and quarterly coaching for providers in Permanent Supportive Housing Evidence Based Practice Fidelity Standards.	December 2020
	Ensure that DHS licensing requirements of homeless youth and Safe Harbor licensed facilities are person-centered, trauma-informed, and operate from a positive youth development approach.	June 2019

Strategy 5B: Ensure enough culturally-specific services, programs, and housing opportunities to better reflect the needs and preferences of people experiencing or at risk of homelessness.

Agency	Action	Targeted Completion Date
MN Housing, DHS	Identify and implement strategies for the 2019 RFP round that will require more diverse, inclusive, and culturally competent processes and programming. This work will be undertaken by the Coordinated Grant Making Work Group. <ul style="list-style-type: none"> • These strategies will incorporate the updated Office of Grants Management policies. • Additionally, one or two universal measures will be included that aim to hold the state and partners accountable for producing equitable outcomes across programs. These additional measures will not be scored in the 2019 RFP round, but will be used to help inform and target our strategies to serve those most disproportionately impacted by homelessness. 	January 2019
DHS	Support Alcohol and Drug Abuse Division (ADAD) grant recipients that provide recovery support to persons who are also deaf, deafblind, and hearing impaired so they are able to make connections to housing opportunities.	Ongoing
	Engage MN Board on Aging Cultural Consultants to ensure culturally-specific services, programs, and housing opportunities are made available. This would better reflect preferred options and choices responsive to the needs and interest of people experiencing or at risk of homelessness.	June 2019

Strategy 5C: Bolster existing information and referral services so they are able to provide useful and accurate information directly to people experiencing homelessness.

Agency	Action	Targeted Completion Date
DHS	Educate older adults on affordable housing resources by engaging Senior Linkage Line.	Ongoing

Principle #6: Help people experiencing or at risk of homelessness increase employment and income.

Strategy 6A: Create connections to employment support and economic assistance programs as part of coordinated entry.

Agency	Action	Targeted Completion Date
DEED	Partner with the Department of Human Services on their “Integrated Delivery of Human Services” initiative to enhance the connectedness of employment and training programs with human services supports.	June 2018
	Promote collaboration strategies at the local workforce area level so that the impact is at the point of service delivery.	June 2018
	Explore broader use of the Workforce One data system by community partners so they can share data related to eligibility to better connect people to benefits and supports that will bolster their workforce readiness.	January 2019
DEED, MDVA	Expand access to disability income benefits through better identification of potentially eligible individuals and increase assistance for people in applying for those benefits. When a veteran is identified, ensure connections are made to all potential veteran benefits and the MDVA SOAR program.	January 2020
	Ensure connections are made to eligible veterans benefits for those participating in the following DEED employment initiatives: Native American Veterans Program, The Women’s Veteran’s Program, and Incarcerated Veterans Program, including veterans with significant barriers to employment.	January 2019
DHS	Partner with counties to devise a strategy to ensure all participants receiving: <ul style="list-style-type: none"> • General Assistance (GA); • MN Family Investment Program (MFIP), particularly children and those also receiving Family Stabilization Services (FSS); • Deaf and hard of hearing services; and • Foster care, particularly transition age youth are screened for Social Security benefits and referred to a Social Security disability or SOAR advocate for assistance.	December 2018
	Coordinate with the Social Security Administration (SSA), Disability Determination Services (DDS), and the Department of Human Services to enhance clarity of the Social Security and disability determination process.	Ongoing
	Align process to assist with forms completion for economic assistance programs for older adults through Senior Linkage Line, AASD grantees, and Area Agencies on Aging (Special Access Programs). This includes, but not limited to setting up a bank account, assisting with pensions, entitlement programs (social security, Medicare, and Medicaid), and other public assistance programs.	June 2020

Strategy 6B: Increase partnerships and alignment between homeless-specific programs and mainstream education, employment, and training services to access career pathways and increase earned income.

Agency	Action	Targeted Completion Date
DEED	Identify local workforce areas that are specifically doing outreach to homeless residents and spotlight their work to share with other local workforce areas as a best practice on how to engage and work with those individuals who are experiencing homelessness.	December 2018
	Host learning session(s) for DEED staff and employment providers on the Foundational Service Practices (please see Appendix C) and the Document Vault to increase access to employment programs and services.	December 2018
	Provide greater integration of services through on-site employment readiness activities to become more effective in shortening the time to become “work ready.”	January 2019
	Create better access to services and service providers for those at risk of or experiencing homelessness through the Workforce Innovation Grant project.	Ongoing
DHS	Increase the number of providers who utilize SNAP E&T reimbursement to provide employment and training services to eligible households, tailoring these services to the specific needs of homeless households and increasing their potential earned income.	December 2018
	Engage statewide MN Family Investment Program (MFIP) and Tribal Employment Service providers to ensure they have the knowledge and resources to help address housing instability and homelessness, and are collaborating with homeless service providers.	June 2019
MDVA	Partner with the MN Department of Labor and Industry to prioritize veterans who are eligible for their apprenticeship programs streamlining referral process to ensure veterans who are interested can easily apply and get connected to interested employers.	January 2019

Strategy 6C: Increase the number of families experiencing or at risk of homelessness who have access to affordable and flexible childcare and after school care.

Agency	Action	Targeted Completion Date
DHS	Provide a three-month presumptive eligibility period for childcare benefits while verifications are secured for families experiencing homelessness.	May 2018
	Identify and build upon the number of child care providers serving children experiencing homelessness and their families.	Ongoing
	Offer training to child care providers to increase use of best practices in serving children experiencing homelessness and their families.	Ongoing

Strategy 6D: Increase the number of people experiencing or at-risk of homelessness who have access to affordable transportation options.

Agency	Action	Targeted Completion Date
MnDOT	Fully implement the Regional Transportation Coordinating Councils (RTCCs) with participation from those providing services to people experiencing homelessness. Along with the RTCCs, work with transit providers to make transit services more effective through connections and collaboration.	December 2019
	Implement a public education and awareness campaign regarding the causes of homelessness and the rights of people experiencing homelessness on Metro Transit buses and light rail lines. Include information on how the public can connect people with the resources they need.	December 2019
DHS	Prioritize Senior Corps grantee and Live Well At Home funds (Community Services Development dollars) to build transportation capacity in rural communities and connect volunteer drivers to older adults.	December 2020

Principle #7: Organize plans and partnerships and increase system capacity to prevent and end homelessness on an ongoing basis.

Strategy 7A: Develop a multi-sector statewide structure to drive implementation, accountability, and oversight of this plan.

Agency	Action	Targeted Completion Date
OTPEH	Organize Council agency partnership in the development of a broad, multi-sector implementation structure.	July 2018
DHS	Explore the establishment of regional administration hubs to build capacity among providers, serve as third-party billing agencies, and provide backroom support to providers when needed.	June 2020
	Incorporate housing and homelessness into 2 Gen initiatives.	Ongoing
Minnesota Housing	Explore how geographic boundaries of programs impact the delivery of homelessness resources.	July 2019
MnDOT	Continue the ongoing alignment work with efforts to reduce barriers to transportation through the MN Council on Transportation Access, the work of the Department within the Olmstead Plan, and other initiatives that are ongoing or may be initiated within the timeframe of this plan.	Ongoing

Strategy 7B: Coordinate, streamline, and simplify access and requirements for funding to support responses to homelessness, particularly for communities disproportionately impacted by homelessness.

Agency	Action	Targeted Completion Date
Minnesota Housing, DHS	Continue implementation of coordinated grant making across homeless specific programs. This work includes developing a set of data, principles and practices to access regional need, developing universal program and service definitions, and utilizing statewide data in targeting resources to communities across the state using MNFACT 2.0 and coordinated entry data.	June 2019
OHE	Incorporate foundational service practices (please refer to Appendix C) into the guidance for the Office of Higher Education Emergency Grant Program that was established during the 2017 legislative session.	December 2018

Strategy 7C: Use data to identify existing resources, service gaps, and ongoing resource requirements to sustainably prevent and end homelessness.

Agency	Action	Targeted Completion Date
DHS	Complete pilot to combine the Homeless Management Information System (HMIS) with the DHS data warehouses for housing, income supports and health care.	December 2018
	Incorporate housing and homelessness data needs into systems modernization and Integrated Services Delivery planning.	Ongoing
	Identify people experiencing homelessness with the highest health care costs and build cost savings argument to provide housing for this group.	July 2019
	Utilize Wilder Research data to identify existing resources, service gaps, and ongoing resource requirements to develop strategic plan with partners and stakeholders to sustainably prevent and end homelessness among older adults	December 2019
	Align data from the Office of Ombudsman for Long Term Care, Adult Protection, Return to Community Expansion to identify older adults who are displaced from hospitals and long term care facilities and develop processes to sustainably prevent and end homelessness.	December 2019
DOC	Track and report on the housing outcomes for individuals discharged from corrections systems with the inclusion of housing information in the Court Services Tracking System (CSTS).	Ongoing
MDE	Analyze student achievement data for homeless students and key sub-populations including students of color, American Indian students, and students with disabilities to document school-level variations and any outliers.	January 2020
MDH	Engage Community Health Boards who have identified homelessness and/or affordable housing as a community health issues to learn about successes and challenges and compile what is learned.	December 2018
Minnesota Housing	Develop reports to measure outcomes for individual and families that have received homelessness resources to show the relationship between housing stability and indicators of well-being including health, workforce and education.	December 2020
DHS, Minnesota Housing	Incorporate common outcomes measures from the HMIS Core Report to be used as a baseline to measure impact across all homeless specific programs. This will be undertaken by the Coordinated Grant Making Work Group.	January 2019

Strategy 7D: Ensure that people with lived experiences of homelessness provide ongoing guidance to continually improve implementation of this plan.

Agency	Action	Targeted Completion Date
OTPEH	Engage people with lived experience of homelessness in the implementation of Heading Home Together in partnership with the MN Coalition for the Homeless and the MN Funders Collaborative.	Ongoing
	Create contact lists of existing advisory groups of people with lived experience of homelessness for all Council agencies to utilize and access for guidance in implementation.	December 2018
Minnesota Housing	Ensure people experiencing homelessness are engaged and consulted with for the Family Homeless Prevention and Assistance Program.	July 2019
DHS	Develop training for counties, providers, and other partners on older adult homelessness to be offered at the statewide Odyssey Conference. This includes capturing stories of homelessness and involving the experience of individuals who are at risk of being homeless.	December 2019

Appendix B: Letters of Support



Dear Cathy ten Broeke, State Director to Prevent and End Homelessness

I write on behalf of Minnesota Tribal Collaborative in support of the Minnesota Interagency Council on Homelessness State Wide Plan to End Homelessness. The Minnesota Tribal Collaborative strongly supports these 7 principal strategies and the focus on reducing homelessness among not only Minnesotans but also Native Americans living on/off reservations in Minnesota. These 7 principals remind me of the 7 Ojibwe Grandfather Teachings.

- Minwaadendamowin – Respect - Place others before yourself in your life don't look down on anyone.
- Zaagidiwin – Love - I have to love myself before I can love anyone different
- Debwewin – Truth - You have to look at yourself before you judge another's way of walking.
- Aakodewewin – Bravery - Right now to hold firm thoughts and strongly stand when you don't know what will happen
- Nibwaakawin – Wisdom - I am able to speak well and to take well (what) someone says.
- Miigwe'aadiziwin – Generosity - Ability you have and generosity to disperse to others
- Dibaadendiziwin – Humility - You are equal to others, but you are not better.

Through this letter, we acknowledge specific roles and responsibilities we will fulfill in this partnership, we would expect our role in the State Wide Plan to End Homelessness to include:

- Forming a genuine partnership to reduce homelessness in our communities
- work with the Minnesota Interagency Council on Homelessness on this effort using the 7 principle strategies
- Minnesota Tribal Collaborative will take responsibility to assist the Minnesota Interagency Council on Homelessness to reduce Homelessness in Minnesota

We look forward to working with you in reducing homelessness in our Native American communities and achieving health equity.

Sincerely,

Tammy Moreland

Minnesota Tribal Collaborative Chair

tammy.moreland@hhs.millelacsband-nsn.gov



Association of Minnesota Counties

Commissioners Mary Tingerthal and Emily Piper, Co-Chairs
Minnesota Interagency Council on Homelessness
400 Wabasha Street North, Suite 400
Saint Paul, MN 55102

January 19, 2018

Dear Commissioners Tingerthal and Piper:

Thank you for your leadership in the development of *Heading Home Together: Minnesota's Plan to Prevent and End Homelessness 2018-2020*. We affirm and support the plan's vision of "Housing Stability for All Minnesotans."

Counties are critical partners to the State of Minnesota in many ways, including ensuring our residents are safe and secure. When the people we serve experience homelessness, it directly affects progress on other areas of their lives. Stable housing leads to a healthier, better educated, and more self-sufficient population. We recognize that local and state government cannot achieve this vision alone and we agree with the Interagency Council's decision to increase its focus on partnerships between state agencies, federal agencies, counties, continua of care, philanthropic partners, business partners, faith communities and others. Our collective success on Veteran homelessness is an excellent example of results we can achieve when we align our efforts.

This letter of support does not indicate any specific financial commitments on the part of counties, but it does indicate our desire to partner together toward the pursuit of the seven principles that make up the structure of this community-wide, statewide plan and initiative:

1. Identify and engage all people experiencing homelessness.
2. Ensure that everyone experiencing or at-risk of homelessness can access a form of safe and appropriate crisis response through diversion, prevention, shelter or crisis housing with appropriate services.
3. Rapidly link people experiencing homelessness with housing and services tailored to their needs, prioritizing the most vulnerable.
4. Prevent the loss of affordable housing and fill the gap in the number of affordable and supportive housing opportunities available to people at-risk of or experiencing homelessness.
5. Use a person-centered, trauma-informed, Housing First orientation in our response to homelessness.
6. Help people experiencing or at risk of homelessness increase employment and income.
7. Organize plans and partnerships and increase system capacity prevent and end homelessness on an ongoing basis.

The Interagency Council showed the commitment to partnership early by working directly with counties on input for the upcoming *Heading Home Together Plan*; we look forward to working with you moving forward as well.

Thank you for your commitment to housing stability and to preventing and ending homelessness for all Minnesotans.

Sincerely,



Susan Morris, President
Association of Minnesota Counties



Julie Ring, Executive Director
Association of Minnesota Counties



Minnesota Association of County Social Service Administrators

December 20, 2017

Commissioners Mary Tingerthal and Emily Piper, Co-Chairs
Minnesota Interagency Council on Homelessness
400 Wabasha Street North, Suite 400
Saint Paul, MN 55102

Commissioners Tingerthal and Piper:

Thank you for your leadership in the development of *Heading Home Together: Minnesota's Plan to Prevent and End Homelessness 2018-2020*. We affirm and support the plan's vision of "Housing Stability for All Minnesotans."

Counties are critical partners to the State of Minnesota in many ways, including helping to ensure our residents are safe and well. When the people we serve experience homelessness, it directly impacts progress on other areas of their lives. Stable housing leads to a healthier, better educated, and more self-sufficient population. We recognize that local and state government cannot achieve this vision alone, and we agree with the Interagency Council's decision to increase its focus on partnerships among state agencies, federal agencies, counties, continua of care, philanthropic partners, business partners, faith communities and others. Our collective success on Veteran homelessness is an excellent example of results we can achieve when we align our efforts.

This letter of support does not indicate any specific financial commitments on the part of counties, but it does indicate our desire and intention to partner together toward the pursuit of the seven principles that make up the structure of this community-wide, statewide plan and initiative:

1. Identify and engage all people experiencing homelessness.
2. Ensure that everyone experiencing or at risk of homelessness can access a form of safe and appropriate crisis response through diversion, prevention, shelter or crisis housing with appropriate services.
3. Rapidly link people experiencing homelessness with housing and services tailored to their needs, prioritizing the most vulnerable.
4. Prevent the loss of affordable housing and fill the gap in the number of affordable and supportive housing opportunities available to people at-risk of or experiencing homelessness.
5. Use a person-centered, trauma-informed, housing-first orientation in our response to homelessness.
6. Help people experiencing or at risk of homelessness increase employment and income.
7. Organize plans and partnerships and increase system capacity to prevent and end homelessness on an ongoing basis.

The Interagency Council showed the commitment to partnership early by working directly with counties on input for the upcoming *Heading Home Together* Plan; we look forward to working with you moving forward as well.

Thank you for your commitment to housing stability and to preventing and ending homelessness for all Minnesotans.

Sincerely,

Rex A. Holzemer, President

Eric Ratzmann, Executive Director

Commissioners Tingerthal and Piper,

Thank you for your leadership in the development of *Heading Home Together: Minnesota's Plan to Prevent and End Homelessness 2018-2020*. The seven Greater Minnesota Continuum of Care (CoCs) are pleased to partner with the Minnesota Interagency Council on Homelessness (MICH) to make homelessness in Minnesota rare, brief and non-recurring.

To support alignment of our efforts, each of our respective CoCs have voted to support and incorporate the seven principles identified in the plan into our regional planning efforts. These principles are:

1. Identify and engage all people experiencing homelessness.
2. Ensure that everyone experiencing or at-risk of homelessness can access a form of safe and appropriate crisis response through diversion, prevention, shelter or crisis housing with appropriate services.
3. Rapidly link people experiencing homelessness with housing and services tailored to their needs, prioritizing the most vulnerable.
4. Prevent the loss of affordable housing and fill the gap in the number of affordable and supportive housing opportunities available to people at-risk of or experiencing homelessness.
5. Use a person-centered, trauma-informed, Housing First orientation in our response to homelessness.
6. Help people experiencing or at risk of homelessness increase employment and income.
7. Organize plans and partnerships and increase system capacity to prevent and end homelessness on an ongoing basis.

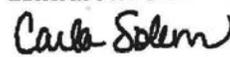
Moreover, the CoCs commit to working with MICH and other statewide partners to further develop action steps and to measure progress on each of the principles. The CoCs have long recognized that ending homelessness can only be achieved with unified efforts, so it only makes sense to further align state and regional planning and look forward to working in partnership moving forward.

Thank you for your commitment to preventing and ending homelessness for all Minnesotans.

Sincerely,



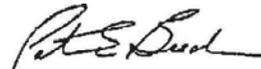
AG Huot
Central MN CoC



Carla Solem
Northwest & West Central MN CoCs



Justin Vorbach
Southwest MN CoC



Patty Beech
Northwest MN CoC



Jennifer Prins
Southeast MN CoC



Charles Obijie
St. Louis County CoC

Commissioners Mary Tingerthal and Emily Piper, Co-Chairs
Minnesota Interagency Council on Homelessness
400 Wabasha Street North, Suite 400
Saint Paul, MN 55102

Commissioners Tingerthal and Piper,

The Governor's Early Learning Council (ELC) was privileged to hear a presentation from Eric Grumdahl on Homelessness and Early Childhood Challenges, Opportunities and Resources as well as the Heading Home Together: Minnesota's Plan to Prevent and End Homelessness 2018-2020. After hearing the presentation, the ELC wholeheartedly decided to support the plan. As you can see below the Guiding Principles of the Early Learning Council concur with the plan.

GUIDING PRINCIPLES OF THE EARLY LEARNING COUNCIL

- 1) Healthy development begins prenatally;
- 2) Equitable representation is needed to advance racial equity;
- 3) Thriving families and communities depend on empowered parents and communities;
- 4) Policy should be shaped by research and authentic community input; and
- 5) A "whole family" approach should be embedded into more early childhood practices.
- 6) Safe and stable housing is essential for families to thrive.

Thank you for your commitment to preventing and eliminating homelessness and seeing that early childhood is an integral part of this issue.

Sincerely,



Nancy Jost, Chair
Governor's Early Learning Council



January 4, 2018

On behalf of the Minnesota Board on Aging, I offer my support and commitment to the *Minnesota Interagency Council on Homelessness's* plan, *Heading Home Together: Minnesota's Plan to Prevent and End Homelessness 2018-2020*, to prevent and end homelessness experienced by older adults. According to Wilder Research, in 2015 there were 843 Minnesotans age 55 or older who were homeless. We expect that this number will grow as our population overall grows older.

Through this letter, we are adopting a shared set of values, goals, principles, and strategies to implement the statewide plan. We acknowledge specific roles and responsibilities we will fulfill in this public/private collaborative effort. We expect our role in preventing and ending homelessness in older adults to include the following seven principles outlined by the Minnesota Interagency Council on Homelessness:

1. Identify and engage all people experiencing homelessness.
2. Ensure that everyone experiencing or at-risk of homelessness can access a form of safe and appropriate crisis responses through diversion, prevention, shelter or crisis housing with appropriate services.
3. Rapidly link people experiencing homelessness with housing and services tailored to their needs, prioritizing the most vulnerable.
4. Fill the gap in the number of affordable and supportive housing opportunities available to people at-risk of or experiencing homelessness.
5. Use a person-centered, trauma-informed, Housing First orientation in our response to homelessness.
6. Help people experiencing or at risk of homelessness increase employment and income.
7. Organize plans and partnerships and increase system capacity to prevent and end homelessness on an ongoing basis.

The Minnesota Board on Aging will take responsibility in the implementation of the statewide plan to prioritize a focus on older adults who are experiencing or at-risk of homelessness. We look forward to working with you in preventing and ending homelessness in our state.

Sincerely,

A handwritten signature in black ink that reads 'Don Samuelson'.

Don Samuelson
Chair



81 south 9th st
suite 260
mpls, mn 55402

February 16, 2018

Cathy ten Broeke
State Director to Prevent and End Homelessness
Minnesota Interagency Council on Homelessness
400 Wabasha Street North, Suite 400
St. Paul, MN 55102

Dear Cathy:

I am writing to offer support from the Minneapolis Downtown Council (MDC) and Downtown Improvement District (DID) for the Heading Home Together Action Plan to Prevent and End Homelessness in Minnesota. Our organization strongly endorses the Plan's Principles and Strategies, as well as the emphasis on collaboration among sectors as the most effective way to address this challenging issue for our State.

As a leading business organization in downtown Minneapolis, MDC had long prioritized mobilizing private sector support and resources to address homelessness. Effective action to end homelessness is one of ten key goals for downtown identified in our Intersections 2025 Plan. And DID, funded by commercial properties throughout the business core, has a wide range of partnerships with service organizations like St. Stephen's Human Services and Youth Link designed to support individuals and families experiencing homelessness in our community.

You can count on our organization and the business community members we represent to be an engaged and committed partner over the life of this important Plan.

Sincerely,

Steve Cramer
President and CEO

Appendix C: Foundational Service Practices

People experiencing homelessness are often unable to access and use mainstream programs that can help end or prevent homelessness.

While all low-income populations face barriers to applying for, retaining, and using the services provided by mainstream programs, these barriers are compounded by the inherent conditions of homelessness, such as transience, instability, and a lack of basic resources. Furthermore, the underlying structure and operations of mainstream programs are often not conducive to ensuring that the unique needs of homeless people are met.

Informed by interviews with key partners from around the state, in 2014 the Minnesota Interagency Council on Homelessness established five foundational service practices:

1. Know the housing status of the people you are serving.
2. Actively reach out to people experiencing homelessness.
3. Limit requirements for in-person appointments at a particular location or office.
4. Assist with the process of gathering required verifications or documentation.
5. Allow for multiple methods to communicate about benefits and services.

These practices, if implemented to the greatest extent possible, can help mainstream programs play a significant role in preventing and ending homelessness in Minnesota.

Appendix D: Grant-making Practices Checklist for Homeless-targeted Programs to Promote Equity

This checklist provides sample criteria to consider in grant-making to promote equity in homeless programs and their outcomes. These criteria could be conveyed as values and priorities in grant-making opportunities, as questions for applicants, and in the evaluation of responses (e.g., scoring).

Organizational criteria

- Composition of all staff reflecting communities affected disproportionately by homelessness
- Composition of staff in leadership reflecting communities affected disproportionately by homelessness
- Composition of board/governing board reflecting communities affected disproportionately by homelessness
- Cultural agility of staff
- Cultural agility of board/governing board
- Equity/Diversity embedded into mission statement, values, and/or strategic plan
- Whether organization's employment practices promote equity (e.g., does the organization offer cultural agility training, do they proactively do outreach to different communities)
- Whether organization's contracting practices promote equity (e.g., does the organization contract with minority-owned construction firms)

Programmatic criteria

- Whether the program can break out client and outcome data demographically
- Ability to provide culturally specific programming
- Ability to provide culturally specific outreach
- Composition of program staff reflecting communities affected disproportionately by homelessness
- Composition of program leadership reflecting communities affected disproportionately by homelessness
- Success in reducing disparate outcomes
- Ability to serve people in different languages
- Involvement of those affected in designing programming

Review process

This section identifies options to ensure that grant review processes are as equitable as possible.

- Ensuring diversity of reviewers
- Ensuring equity and cultural agility are built into the scoring/rating system
- Tracking the diversity of applicant pools vs. grantee pools. (e.g., are organizations led by people of color more or less likely to receive a grant?)
- Tracking the size of grants by organizational types. (e.g., are organizations led by the LGBTQ community more likely smaller grants?)
- Regularly reviewing applications and requirements to ensure that applications are not needlessly complicated and only ask for what is actually needed. (e.g., are application requirements creating unnecessary barriers for smaller community-based organizations for receiving grants?)
- Providing technical assistance to complete an application
- Providing technical assistance to fulfill grant terms and report on progress
- Providing funds specifically for capacity building



For more information:

Cathy ten Broeke, State Director to Prevent and End Homelessness
Minnesota Interagency Council on Homelessness
651.296.6344 | cathy.tenbroeke@state.mn.us

Appendix B
The Way Home
Changing the Path to Houston's Homeless
Action Plan 2015-2016 Update

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The Way Home

Changing the Path for Houston's Homeless

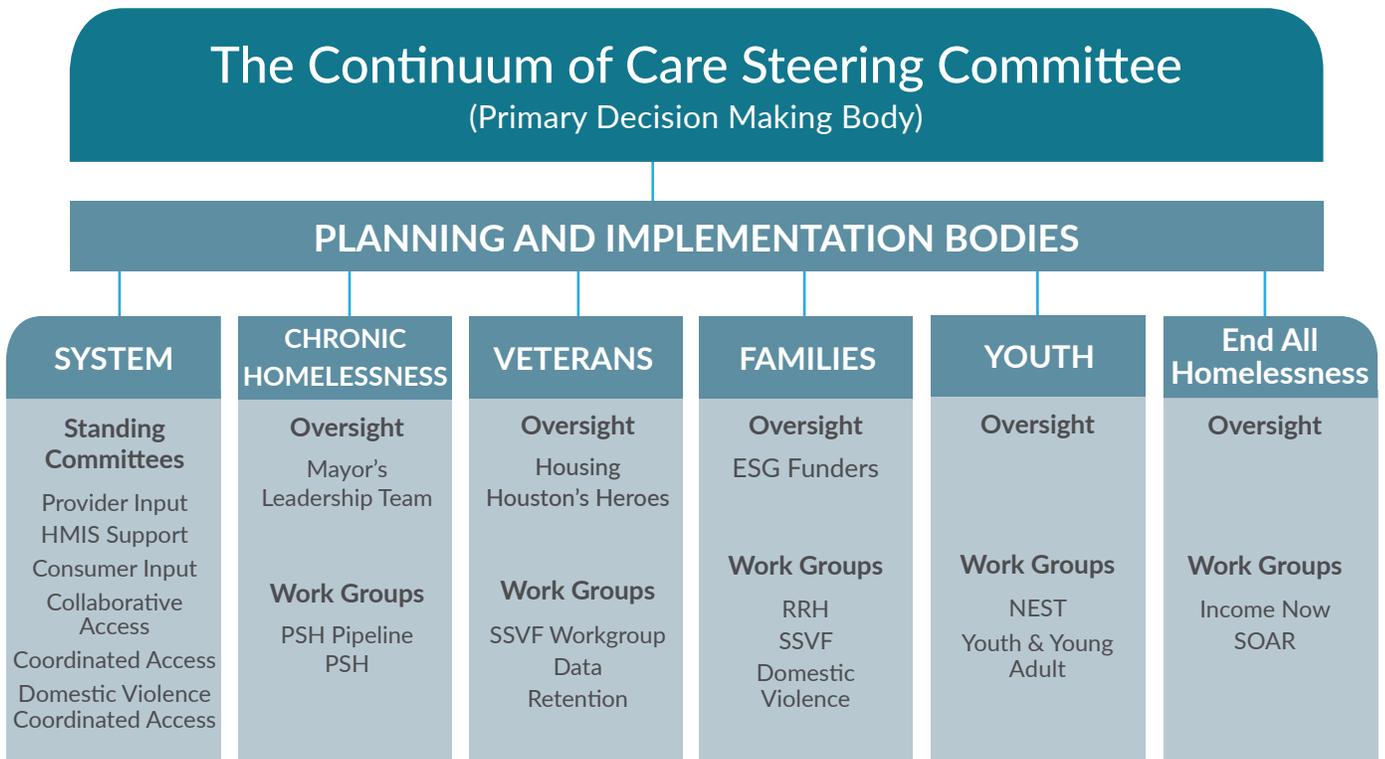
ACTION PLAN 2015-2017 UPDATE

The Way Home is the collaborative model to prevent and end homelessness in Houston, Pasadena, Conroe; and Harris, Fort Bend, and Montgomery Counties.

With this new system, we will:



We use a new governance structure to support system-wide transformation and accountability:



The Way Home Progress Overview

	2012	2013
Chronically Homeless Individuals	 Housed: 612	 Housed: 712
Homeless Veterans	 Housed: 682	 Housed: 1,397
Homeless Families	 Planning Work	 Planning Work
Homeless Youth/ Young Adults	 Planning Work	 Planning Work
Overall System Progress <i>(Point-In-Time data)</i>	 7,187 homeless individuals a 15% reduction from 2011	 6,359 homeless individuals a 12% reduction from 2012

* Defining "Success": The Way Home has two permanent housing options: Permanent Supportive Housing (PSH - for chronically homeless individuals and families, including veterans), and Rapid Re-housing (RRH - for non-chronically homeless families, including veterans). Success, also called "retention" is defined as the percentage of people who exited either PSH or RRH and are now living stably and independently, who did not re-enter homelessness. We averaged the retention rates from the 6, 12, 18, and 24 month points for each of our permanent housing options.

2014	2015	Cumulative
 <p>Housed: 865</p>	 <p>Housed: 753</p>	<p>2,942 Chronically Homeless Individuals housed since 2012</p> <p>88% success rate in Permanent Supportive Housing*</p>
 <p>Housed: 1,269</p>	 <p>Housed: 938</p>	<p>4,286 Veterans housed since 2012</p> <p>In June 2015 we announced the effective end of veteran homelessness!</p>
 <p>Planning Work</p>	 <p>Housed: 572</p>	<p>572 individuals in families housed and/or graduated to self-sufficient housing in 2015</p> <p>90% success rate in Rapid Re-Housing*</p>
 <p>Planning Work</p>	<p>Community Conversation Resulting in Strategic plan for solving Youth/Young Adult Homelessness</p>	<ul style="list-style-type: none"> • Identified strategies for solving youth homelessness: 1. Educate & Advocate, 2. Prevent & Divert, 3. Reconnect, and 4. Identify & House • Added youth/young adult Coordinated Access Hub • Obtained funding for new Youth/Young Adult Rapid Re-housing program
 <p>5,308 homeless individuals a 17% reduction from 2013</p>	 <p>4,609 homeless individuals a 13% reduction from 2014</p>	 <p>57% reduction in overall homelessness from 2011 - 2016 (from 8,471 to 3,626)</p>

Chronic Homelessness Workplan

Strategy	2012-2013	2014
<p>#1 - Identify & Connect: Identify and prioritize PSH units for the most vulnerable using the Coordinated Access System.</p>	<ul style="list-style-type: none"> • Registry Week launched the identification and prioritization of 850 chronically homeless individuals sleeping on the streets, using the Vulnerability Index tool. • Coordinated Access (CA) Workgroup developed standardized assessment and triage tools. • HMIS was updated to launch real-time, web-based system in January 2014. • Housed 1,107 chronically homeless/vulnerable individuals and families in 16 months. 	<ul style="list-style-type: none"> • Launched CA Phase 1 on January 6, 2014. <ul style="list-style-type: none"> ◆ First CA Hub located at the Beacon Day Shelter with 2 Housing Assessors and 2 Housing Navigators. ◆ 24 of 28 clients assessed in Phase 1 were housed (85%). ◆ 90 day average from assessment to move-in. • Launched Phase 2 on April 1, 2014. <ul style="list-style-type: none"> ◆ 2 CA Hubs added at VA Drop-In Center and Star of Hope Women & Family Shelter. ◆ The Beacon CA Hub expanded operations to 5 days a week, and relocated to a storefront location with office space for all staff, now a total of 3 Housing Assessors & 3 Housing Navigators. ◆ An Outreach Assessor/Navigator was added in September 2014 and a 4th Navigator added in December 2014. • CA Phone Assessment line was opened in September 2014. <ul style="list-style-type: none"> ◆ Calls were answered half days, 4 days per week, and was piloted with the Harris County Jail Diversion Project, as well as Harris Health System. • Increased housing placement rates by 20%. • Reduced average number of days from referral to move-in by 33%.
<p>#2 - House: Create 2,500 Additional Units of PSH.</p>	<ul style="list-style-type: none"> • Finalized financial model; 90% of resources were assembled to meet goal. • 56% of units were in the pipeline; 44% of those were operational. • City of Houston and Harris County released joint RFP for capital and operating dollars. 	<ul style="list-style-type: none"> • Awarded nearly \$20.8M in capital to new PSH projects through coordinated City/County RFP. • 65% of units were in the pipeline (422 added), additional 257 units were pending funding approval. • 417 project based vouchers awarded to support PSH units. • 3 new development partners were awarded funding for PSH projects.
<p>#3 - Support: Create a new Service Delivery Model linked to PSH.</p>	<ul style="list-style-type: none"> • New Service Delivery Model conceived and seed funding identified. • 1115 Medicaid Waiver DSRIP project approved to fund integrated care teams for PSH. • Service providers selected and planning phase concluded. 	<ul style="list-style-type: none"> • 2 FQHCs began offering integrated care PSH services to: <ul style="list-style-type: none"> ◆ 150 chronically homeless, frequent users of emergency rooms, across 7 multi-family properties. ◆ 69 chronically homeless and mentally ill frequent users of jail, at 1 property. • Integrated care service enhancements were added to 1 legacy PSH property (40 units).

2015	2016-2017
<ul style="list-style-type: none"> • Established standardized training for CA Assessors & Navigators. • Established standardized CA training for PSH providers. • Piloted the call center at primary CA Hub and with one off-site Housing Assessor. • Repurposed 4 community outreach teams as dedicated CA Assessors & Navigators targeted to the most resistant clients. • Created direct access to “Barrier Buster” funds via CA Navigators. 	<ul style="list-style-type: none"> • Monitor the efficacy of the assessment and matching results to ensure clients are properly matched to PSH. • Add coordination to income opportunities like SOAR and Supported Employment. • Launch CA Improvement Lab to refine triage tools, business rules, system flow, staffing, etc. • Create CA Call Center for all other providers to ensure a “No Wrong Door” approach. • Connect CA to healthcare billing services. • Publish Program & System-level CA performance dashboards that highlight referral and utilization rates. • Prepare to expand eligibility based on vulnerability rather than chronicity. • Create & utilize a System Tracker and Predictive Tool to drive toward an end to chronic homelessness. • Prepare and adjust for steady state navigation and assessor demand.
<ul style="list-style-type: none"> • Awarded 2nd round of \$20.8 M in capital for new PSH projects. • 83% of units in pipeline (added 446), an additional 162 units were pending funding approval. • Launched \$15M Capital Gap Fund campaign to accelerate the development of PSH pipeline using private investments from local and national funders, and raised \$5.1M. • Attracted 2 national developers to participate in local projects and build local development capacity for PSH and integrated developments. • Expanded partnership with a local property owner to convert an additional 122 units for PSH. 	<ul style="list-style-type: none"> • Create the remaining 258 units via conversion of existing units using housing choice vouchers – 100% of units in pipeline. • Have 94% of units in operation by the end of 2017. • Raise and distribute 100% of PSH Capital Gap Funds. • Launch round 2 of the Capital Gap Fund to support inclusionary policies and more integrated development. • Develop new relationships with at least two local property owners to accept vouchers for PSH.
<ul style="list-style-type: none"> • Doubled the number of PSH units using the integrated care service model to 219. • Created a Managed Care Workgroup that includes the participation of 4 MCOs and the TX State Medicaid Office. • Explored opportunities to launch a pilot project to pay for integrated care teams in supportive housing, using Medicaid. • Performed a data match with UnitedHealthcare to identify frequent users in need of supportive housing and integrated care. • Identified a state funding source to take the integrated care service model to scale. Pursued private match dollars. • Applied for the extension of the 1115 Medicaid Waiver to continue to expand the integrated care service model until Medicaid eligibility is secured. 	<ul style="list-style-type: none"> • Secure the private match necessary to utilize state funds to take the integrated care service model to scale – at more than 1,800 units. • Secure 3 additional FQHCs to begin providing services to new developments. • Launch pilot project with MCOs and the TX State Medicaid Office to fund the integrated care service package under Medicaid. • Expand data matching activities with new partners, including the TX State Medicaid Office and HUD, to document the cost benefits of PSH.

Veteran Homelessness Workplan

Strategy	2012-2013	2014
<p>#1 - Identify & Connect: Use Coordinated Access System to identify and connect Veterans experiencing homelessness with permanent housing and services.</p>	<ul style="list-style-type: none"> • Developed a standard triage tool to properly match homeless Veterans with proper housing options at the first interaction. • Placed a CA Assessor at the VA Drop-In Center to implement triage protocols and connect homeless Veterans with both VA and CoC services as appropriate. • Created protocols that support co-location or same-day appointments for all housing referrals. 	<ul style="list-style-type: none"> • Updated VA Drop-In Center and CoC protocols to establish CA as the front door system for HUD-VASH and SSVF. • Trained VA Drop-In Center staff to act as CA Assessors. • Trained VA Homeless Clinic social worker as a designated CA Assessor. • Updated VAMC protocols to ensure all homeless inpatient and emergency room veterans were routed to a designated CA Assessor. • Housed 1,269 homeless Veteran households in 2014.
<p>#2 - House: Target HUD-VASH vouchers to chronically homeless or vulnerable Veterans and target Supportive Services for Veteran Families (SSVF) services for Rapid Re-housing of all other homeless Veterans.</p>	<ul style="list-style-type: none"> • Implemented protocols to restrict HUD-VASH to only those meeting the HUD definition of chronically homeless or vulnerable. • Implemented mass briefings and targeted outreach to issue HUD-VASH vouchers to Veterans living on the streets in one day. • Housed 101 chronically homeless Veterans in the first 100 days. • Housed another 347 chronically homeless Veterans in another 100 days. • Completed first year of SSVF and secured an additional \$5M in SSVF to rapidly re-house homeless Veterans and their families. • Formed an SSVF Workgroup to standardize service delivery and connect with CA. • Housed 2,226 Veteran households in permanent housing from 2012-2013. 	<ul style="list-style-type: none"> • Housed 883 chronically homeless or vulnerable Veterans in HUD-VASH since January 2012. • Improved attrition rate from 50% in 2012, to 20% in 2013 and 2014. • As the system approached Steady State, the HUD-VASH target population was broadened to house the most vulnerable and prevent the return to chronic homelessness. • Reached 100% utilization of HUD-VASH. • Awarded an additional \$6.1M in SSVF resources to serve 1,271 Veteran households. • 70% of SSVF resources were targeted to Rapid Re-housing.
<p>#3 - Support: Improve and Expand VA housing stabilization support services.</p>	<ul style="list-style-type: none"> • Lowered case management ratios and added clinical staff to support retention 	<ul style="list-style-type: none"> • Added 4 Housing Navigators to the VA service teams to reduce lease up times and improve retention rates. • Created integrated VA service teams comprised of case managers, peer support specialists, clinical staff, and Housing Navigators.

2015	2016-2017
<ul style="list-style-type: none"> • Reached Steady State, ensuring every homeless Veteran has access to appropriate permanent housing. • Dedicated a VA staff person at the Drop-In Center to full-time CA activities. • Closed the side doors on SSVF referrals – all SSVF referrals come through CA. • Refined protocols to ensure HUD-VASH availability is managed in HMIS. • Used local data to refine local definition of Steady State: approximately 900 Veterans will need housing each year. • Used CA to maintain Steady State and began work in anticipation of the shift to a prevention-oriented system. 	<ul style="list-style-type: none"> • Finalize monitoring protocols for CA use and referral accountability. • Determine how to capture and manage referrals to GPD and other TH programs. • Use CA to maintain Steady State system.
<ul style="list-style-type: none"> • Refined HUD-VASH targeting to ensure full utilization of vouchers and prevention of chronic homelessness. • Continued to identify and target any remaining chronically homeless Veterans and instantly connect them to HUD-VASH. 	<ul style="list-style-type: none"> • Maximize HUD-VASH utilization and shift SSVF resources to support more prevention activities to reduce Steady State volume. • Determine how to target GPD TH beds and connect Veterans to appropriate permanent housing options. • Modify GPD inventory to match the system needs. • Refine local outcome tracking methods and standardize metrics.
<ul style="list-style-type: none"> • Used Housing Navigators and peer support specialists to provide additional supports at recertification and reduce negative attrition. • Assigned VA staff to project based HUD-VASH complexes and provided on-site services. 	<ul style="list-style-type: none"> • Develop tools to support project based service teams. • Reduce negative attrition rates. • Enhance peer engagements.

Family Homelessness Workplan

Strategy	2012-2013	2014
<p>#1 - Identify & Connect: Use Coordinated Access System to rapidly connect homeless families to permanent housing with housing stabilization services.</p>		<ul style="list-style-type: none"> • Explored the use of the Family Vulnerability Index triage and prioritization tool. • Assisted RRH providers to modify entrance criteria and determine next step assessment for all RRH referrals. • Expanded CA Hub to Star of Hope Women & Family Shelter.
<p>#2 - House: Expand funding for RRH and access to quality affordable housing.</p>	<ul style="list-style-type: none"> • Completed system mapping and identified the need for an additional 8,100 units of RRH. • CoC Steering Committee identified all available resources for RRH; ESG grantees prioritized RRH. • Updated ESG written standards to match the RRH Housing Model. • Local HUD Field Office brokered several discussions with existing HUD subsidized properties to set aside units for RRH. • Held a series of meetings with LIHTC property owners to introduce PSH, RRH, and the need for dedicated units. • Launched a pilot (HCV-TIP) project using housing choice vouchers and dedicated case management to support a transition in place RRH model. 	<ul style="list-style-type: none"> • Designed a new RRH investment and program management infrastructure that pooled \$3.5M in CoC, ESG, CDBG, and TX State HHSP funds for RRH Financial Assistance administered by the Houston Housing Authority. • Partnered with the United Way and other public and private funders to pool more than \$500K for RRH Housing Stabilization Case Management. • Funded 169 affordable housing units as part of integrated PSH projects. • Partnered with a local Property Management Firm to assist in location of units. • Met with the Houston Apartment Association to discuss opportunities for education and partnership.
<p>#3 - Support: Improve and expand housing stabilization support services.</p>	<ul style="list-style-type: none"> • RRH Funders Workgroup refined RRH Program Model and written standards to reflect universal targets, use of standardized tools, and an emphasis on housing stabilization outcomes. 	<ul style="list-style-type: none"> • RRH Funders Workgroup refined RRH Program Model and written standards to reflect universal targets, use of standardized tools, and an emphasis on housing stabilization outcomes.

2015	2016-2017
<ul style="list-style-type: none"> • Modified the Family triage tool based on locally established target populations and available resources. • Implemented the new CA workflow for families. • Launched CA for RRH within HMIS. • Began limited call center activities for families in outer areas of CoC. 	<ul style="list-style-type: none"> • Modify the triage tool and matching logic to accommodate new RRH program models. • Launch electronic referrals based on available case loads. • Update RRH Triage Tool to include income assessments within CA.
<ul style="list-style-type: none"> • Launched new standardized RRH Program and served 572 literally homeless individuals in families. • Facilitated the alignment and investment of TX State ESG funds to support the new RRH program and a DV-RRH demonstration project. • Identified and facilitated the conversion of 89 TH units into RRH. • Explored the use and availability of Tenant Based Housing Choice Vouchers for transition in place, as well as other medium to long-term RRH models. • Funded 3 dedicated Housing Specialists and secured access to 4,279 units throughout Houston for RRH. • Created a virtual map to track RRH properties by geography for use by Housing Specialists and Navigators. • Launched Landlord Outreach and Leasing Events. 	<ul style="list-style-type: none"> • Attract additional private funders to sustain and strategically expand RRH to end family homelessness and build a safety net system to prevent returns to homelessness. • Develop RRH Plus, RRH Diversion, and Prevention Program Models and align activities. • Continue Landlord Outreach and Leasing Events as well as landlord recognition and educational activities to maintain and strengthen relationships. • Use GIS mapping and data analysis to target landlord engagements. • Launch Landlord Liaison position on behalf of the homeless response system, to serve as an ombudsman for landlords participating in multiple subsidy programs.
<ul style="list-style-type: none"> • Hosted two-day housing stabilization case management training. • Launched weekly implementation and case conferencing meetings with all RRH case managers. • Explored ways to formally refer RRH clients to the United Way's THRIVE programs for ongoing supports. 	<ul style="list-style-type: none"> • Begin case management refinement process for system RRH staff. • Host a multi-day training in conjunction with Housing Innovations for RRH case managers to help stabilize RRH clients in housing. • Ensure RRH clients are connected with income via the public workforce system. • Create and launch the RRH Plus Housing Model and Program. • Explore a RRH Light Housing Model.

Youth and Young Adult Homelessness Workplan

Strategy	2012-2013	2014
<p>#1 - Educate & Advocate: Create a comprehensive plan to prevent and end youth and young adult homelessness that starts with youth-friendly environments to support early detection & intervention.</p>	<ul style="list-style-type: none"> • Participated in first Youth Count! to better understand the homeless youth/young adult population in Houston, Harris County, and Fort Bend County. • Formalized the role of youth advocacy and affinity groups within the CoC. 	<ul style="list-style-type: none"> • Participated in Youth Count! 2.0 and additional local comprehensive data collection efforts, revealing 513 homeless youth/young adults in Houston, Harris County, and Fort Bend County.
<p>#2 - Prevent & Divert: Connect with up-stream systems to help youth and young adults avoid homelessness.</p>		<ul style="list-style-type: none"> • Selected to participate in HUD's National Demonstration Project to Prevent LGBTQ Youth Homelessness, locally named "NEST." • Formalized the NEST Workgroup to lead demonstration efforts. • Hosted a community planning process to develop a plan to prevent LGBTQ youth homelessness among 72 participating agencies.
<p>#3 - Reconnect: Create alternative services to support reunification with family or other appropriate support systems.</p>		
<p>#4 - Identify & House: Use Coordinated Access to rapidly connect homeless youth and young adults to permanent housing with housing stabilization services.</p>	<ul style="list-style-type: none"> • Identified opportunities to enhance utilization rates of existing youth programs. 	<ul style="list-style-type: none"> • Formulated a partnership with public housing authorities, the child welfare system, and Hogg Foundation to target youth aging/aged out of foster care for PSH placement.

2015	2016-2017
<ul style="list-style-type: none"> • Hosted Youth Community Planning “Mini-Charrette” with more than 150 stakeholders, local and national experts, and currently or formerly homeless youth/young adults. • Participated in the White House Policy Convening to Prevent and End Youth Homelessness and A Way Home America planning meetings. 	<ul style="list-style-type: none"> • Introduce LGBTQ competency curriculum for all juvenile justice, child welfare, and homeless service provider employees. • Expand and restructure workgroups to support broader implementation of the comprehensive plan. • Conduct additional data analysis to further refine the triage tool and gain better understanding of youth/young adult risk and protective factors in matching intervention and development.
<ul style="list-style-type: none"> • Developed a year one action plan to prevent LGBTQ youth homelessness. • Engaged juvenile justice, the child welfare system, and homeless service providers to offer LGBTQ cultural competency training. 	<ul style="list-style-type: none"> • Connect local ISDs to CA system. • Explore the intersection and demographics of homeless young adults in the jail/juvenile justice systems. • Expand advocacy roles and interventions for young adults aging out of foster care.
	<ul style="list-style-type: none"> • Create Host Homes Toolkit and expand Host Homes pilot. • Create and disseminate a family reunification tip sheet for all providers. • Create a formal family unification program.
<ul style="list-style-type: none"> • Created 100 units of PSH over 4 years for youth aging/aged out of foster care. • Developed a youth triage tool in partnership with Child Protective Services to identify foster youth most at-risk of homelessness. • Developed YYA-specific program models for PSH, RRH, and TH. • Restructured CoC-funded TH to support underage youth and expand YYA RRH for those over 18. • Prioritized young adults in CA. 	<ul style="list-style-type: none"> • Add an additional 135 YYA RRH slots. • Introduce a new program model for YYA under the FUP demonstration program guidelines (PSH Light, 18-60 months). • Create a CA Hub at the YYA and overnight shelters. • Open underage youth shelter beds on the overnight campus.

Setting the Path to End All Homelessness Workplan

We know that triggers of homelessness may always exist. The Way Home will set a path to end all homelessness by creating a system that is prepared to rapidly respond to homelessness, and ensure that homelessness is rare, brief, and non-repeating. This includes forging partnerships with other systems of care.

A homeless response system can provide outreach, access to housing, and case management support; however, it should not try to replicate systems in the community that already exist. The Way Home is working to connect to other systems to ensure that individuals and families can attain and maintain housing. Connections have been created with local Managed Care Organizations, Domestic Violence organizations, and notably, the public workforce system through an initiative called Income Now (see the chart below).

Although The Way Home will always maintain a focus on housing, the partnerships we create with external systems will help us ensure that no one has to be without permanent housing for more than 30 days.

Income Now

Strategy	2015 Progress	2016-2017
#1 - Use Coordinated Access to connect households to income as quickly as possible.	<ul style="list-style-type: none"> Built income assessment tool into CA in HMIS. 	<ul style="list-style-type: none"> Refine the electronic referral process through HMIS. Achieve goal of 100% of referrals being made through CA and HMIS.
#2 - Right size Houston's income services to meet the community needs.	<ul style="list-style-type: none"> Identified income types necessary to meet needs of the population. 	<ul style="list-style-type: none"> Prepare analysis of need/gap in SOAR Services and Supported Employment Services. Build capacity in SOAR and Supported Employment Services.
#3 - Build Workforce Solutions' (the Greater Houston Area's public workforce system) capacity to serve households experiencing homelessness more effectively.	<ul style="list-style-type: none"> Awarded 2 grants to support embedded staff in both systems (public workforce system and the homeless response system). 	<ul style="list-style-type: none"> Workforce Solutions will hire 3 Income Now Employment Navigators. Workforce Solutions will hire 4 Income Now Employment Counselors to be embedded in CA Hub locations.
#4 - Shift Houston's culture towards an "Income Now, Income for Everyone" culture.	<ul style="list-style-type: none"> Awarded Heartland Alliance grant to support training series to shift ideas about employment and individuals on SSI/SSDI and those experiencing homelessness. 	<ul style="list-style-type: none"> Host an 11-session training series for partners and stakeholders. Build and administer a survey tool to assess culture shift.

Other Subpopulations

	Strategy	Implementation Status	
Non-Chronically Homeless Single Individuals	<p>#1 - Identify & Connect to Income Connect non-chronic single individuals who experience episodic homelessness to income opportunities using Coordinated Access.</p>	25% Complete	<ul style="list-style-type: none"> Partnered with Heartland Connections & Texas Workforce Commission (TWC) to create Income Now - a real-time, web-based system to assess and connect individuals to training and employment opportunities. Created an income assessment tool within CA and HMIS. All individuals now receive a housing and/or income option. Using ~\$2M in Texas Workforce Commission funds, expanded access to mainstream competitive employment in partnership with the local public workforce system (Workforce Solutions) for individuals experiencing homelessness. Embedded assessment centers and Workforce Solutions satellite offices into homeless shelters. Deployed Income Navigators to three high-volume Workforce Solutions offices in the Central Business District
	<p>#2 - Support Rapid Self-Resolution Connect Income Now to the Shelter System to accommodate rapid self-resolution and expand atypical extremely affordable housing options like hostels or bunkhouses.</p>	10% Complete	<ul style="list-style-type: none"> Working with Star of Hope and Salvation Army Shelters to modify operating guidelines to serve homeless men who are working through Income Now. Fund the expansion and renovation of Harmony House – providing needed inexpensive, pay-by-night housing.
Survivors of Domestic Violence & Human Trafficking	<p>#1 - Identify & Connect Organize as a single DV CA system to ensure all clients are connected to appropriate shelter and/or permanent housing options.</p>		<ul style="list-style-type: none"> Created a DV CA Steering Committee and Work Group to develop DV-specific program models, CA triage tools, business rules, prioritization standards, etc. Agreed to pursue redesignation as a single DV system to overcome data sharing obstacles and adopt use of a parallel, protected CA system based in HMIS. Aligning operating and program resources to support use of a single DV-specific CA system. Converting DV TH to DV RRH and expanding the spectrum of DV RRH to include diversion and non-shelter based services.
	<p>#2 - House Build a Bridge to the CoC CA system to broaden permanent housing options.</p>		<ul style="list-style-type: none"> Exploring use of deidentifiers to allow DV clients access to CoC housing options via CA. Added feature to CoC CA assessment that screens for domestic violence and connects to DV system for lethality assessment. Identifying opportunities to partner with Human Trafficking service agencies to support access to CoC housing options via CA.

Appendix C
2018 Performance Management Plan –
Ohio Balance of State Continuum of Care

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Appendix C Ohio’s Balance of State CoC Has Identified Key Performance Indicators and Measurable Goals for Each Type of Service. The indicators and goals shown are for the emergency shelters. The CoC also has benchmarks of performance for other services such as permanent housing and outreach.

Emergency Shelter Projects Performance Measures		
Indicator	Goal	How Calculated
Length of Time Homeless	1. Emergency Shelter (ES) projects will have a household average length of stay of no more than 40 days	Average length of stay for households who exited
	2. ES projects will have a household median length of stay of no more than 40 days	Median length of stay for households who exited
Exits to Permanent Housing	3. At least 40% of households in ES projects will move into permanent housing at exit	number of households who moved to PH upon exit / number of households who exited ES project
Receipt of Non-cash Benefits	4. At least 50% of households in ES projects will receive at least one source of non-cash benefits at program exit	number of households who exited with 1 or more sources of non-cash benefits / number households who exited the project
Receipt of Health Insurance	5. At least 75% of households in ES projects will receive at least one source of health insurance at program exit	number of households who exited with 1 or more sources of health insurance/ number households who exited the project
Employment and Income Growth	6. At least 18% of households in ES projects will gain or increase employment or non-employment cash income during the reporting period or at exit	number of households who either gained or increased earned income or who gained or increased non-employment cash income / number of households served by the project
Returns to Homelessness	7. ES projects will have no more than 15% of adults who exited to permanent housing return to ES, SH, TH, or Outreach within <i>six months</i> of exit	number of adults who returned to ES, SH, TH, or Outreach within 6 months of exit / number of adult leavers to permanent housing
	8. ES projects will have no more than 20% of adults who exited to permanent housing return to ES, SH, TH or Outreach within <i>two years</i> of exit	number of adults who returned to ES, SH, TH, or Outreach within 24 months of exit/ number of adult leavers to permanent housing

Source: 2018 Performance Management Plan – Ohio Balance of State Continuum of Care

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Agency Responses

Department of Workforce Services



State of Utah

GARY R. HERBERT
Governor

SPENCER J. COX
Lieutenant Governor

Department of
Workforce Services

JON S. PIERPONT
Executive Director

CASEY R. CAMERON
Deputy Director

GREG PARAS
Deputy Director

November 30, 2018

Mr. John M. Schaff, CIA
Auditor General
Office of the Legislative Auditor General
Utah State Capitol Complex
Rebecca Lockhart House Building, Suite W315
P.O. Box 145315
Salt Lake City, UT 84114-5315

RE: Report No. 2018-12

Dear Mr. Schaff:

Thank you for the opportunity to respond to the audit entitled, "A Performance Audit of Utah's Homeless Services" We recognize the efforts of the auditors and appreciate the professional manner in which they conducted the audit. Our response to each recommendation is as follows:

Chapter II Recommendations

1. We recommend that the State Homeless Coordinating Committee require the establishment of clear and measurable goals and performance benchmarks for each individual provider offering services to homeless individuals in the state.

Establishing clear and measurable goals and performance benchmarks for individual providers is a policy decision for the State Homeless Coordinating Committee (Committee). As support to the committee, we will assist with implementing this recommendation as directed by the committee.

Contact: Jonathan Hardy, Director, Housing and Community Development

2. We recommend that the State Homeless Coordinating Committee monitor and report on the performance of individual service providers in achieving their performance benchmarks.

We agree with this recommendation. We have implemented performance measures into the FY19 contracts with service providers and is currently monitoring all measures for FY19. We will report the results to the committee for appropriate action.

Contact: Jonathan Hardy, Director, Housing and Community Development



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3. We recommend that the Division of Housing and Community Development audit and validate data in the Homeless Management Information System on a frequent basis.

We agree with this recommendation. We will implement regularly occurring internal controls such as data validation, reviews and training to ensure that information in the Homeless Management Information System (HMIS) is accurate.

Contact: Jonathan Hardy, Director, Housing and Community Development

4. We recommend the Division of Housing and Community Development train Homeless Management Information System users on a frequent basis to ensure providers are entering information consistently.

We agree with this recommendation. As we review HMIS information, we will identify common user errors and design training to ensure that information is entered accurately and consistently.

Contact: Jonathan Hardy, Director, Housing and Community Development

5. We recommend the State Homeless Coordinating Committee create a performance measurement process to evaluate progress in achieving goals and objectives outlined in the state plan.

We agree with this recommendation. Creating a state plan, performance measures and evaluation process is a policy decision that we will recommend to the committee. If the committee directs us to assist with measuring and reporting progress towards the plan, we will assist the committee in implementing this recommendation.

Contact: Jonathan Hardy, Director, Housing and Community Development

Chapter III Recommendations

4. We recommend that the State Homeless Coordinating Committee designate local oversight bodies that are responsible to (1) develop a common agenda and vision for reducing homelessness in that region, (2) craft a spending plan that coordinates the funding supplied to local stakeholders, (3) monitors the progress towards achieving state and local goals, and (4) realign funding to those projects that are improving their outcomes and targeting specific needs in the community.

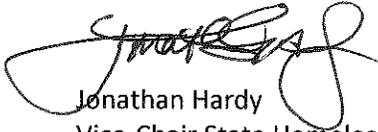
We agree with this recommendation. We have made great progress to coordinate goals and spending plans with local coordinating bodies. We will more formally establish goals, funding plans and reporting structures with local coordinating bodies and the committee.

Contact: Jonathan Hardy, Director, Housing and Community Development

We are committed to working with the stakeholders outlined in the audit to make continual improvements. Where recommendations have been made to the State Homeless Coordinating Committee, we are committed to prioritize these items for policy discussions at upcoming meetings. In addition, where recommendations are directed to the Legislature, we stand ready to help in the policy discussion to align all stakeholders to common objectives of addressing homelessness in Utah.

Should you have any further questions or concerns, please do not hesitate to contact me directly.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jonathan Hardy', with a large, stylized flourish extending to the left.

Jonathan Hardy
Vice-Chair State Homeless Coordinating Committee
Housing and Community Development Director
(801) 468-0137 or jhardy@utah.gov

Continua of Care Combined Response



11/30/18

To: The Office of the Legislative Auditor General
Utah State Capitol Complex
PO Box 145315
Salt Lake City, Utah 84114-5315

RE: Performance Audit of Homeless Services Draft Response

Dear Sir,

The leadership of the Mountainland, Balance of State, and Salt Lake Continuums of Care wish to thank the State of Utah Legislative Audit staff, and the Utah State Legislature, for this comprehensive evaluation of homeless services in the State of Utah. We are all interested in improving the lives of those experiencing homelessness, and this Legislative Audit will help our communities improve their responses to people in crisis.

We believe this report accurately reflects the complex nature of this issue, from multiple funding streams, variable data collection requirements, to a multitude of available services. It is clear from the report that there are two key areas that must be addressed in order to improve our statewide homelessness response system.

One is the Homeless Management Information System (HMIS). This is the data collection system required by HUD to gather homelessness information for all three Continua. The report indicates there are problems with this system, which we will address in more detail later in our response.

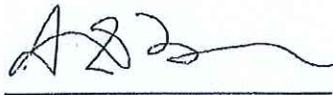
The second is the lack of a Statewide Leadership Entity, who would lead efforts to end homelessness in our state.

Regarding the HMIS system currently in use throughout the state, it should be noted the system was originally designed to meet specific HUD data collection requirements. As such, it was not designed with specific performance measures across multiple service entities (eg Health Care, Law Enforcement, etc). We also note there is a limited funding mechanism from HUD to support the HMIS activities, which has limited to scope and functionality. We appreciate the auditor's efforts in evaluating in detail the limits in functionality the current system exhibits, and we welcome the opportunity to discuss corrective options moving forward.

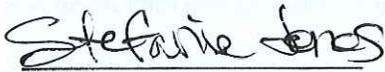
One potential solution might be to form a "Data Leadership Committee" that would work closely with the statewide homeless leadership group to evaluate, support and guide data collection efforts across the state.

Regarding the Statewide Leadership Entity, the Legislative Audit proposes structural changes to the already existing State Homeless Coordinating Committee. We support the idea of a statewide leadership group that could provide guidance and support to homeless services on a statewide level. We believe it would be critical for this group to engage in a systematic approach to the evaluation, goal setting, planning, implementation and outcome evaluation of homeless services. Given the immense scope of this task, we believe the formation of a Statewide Commission on Ending Homelessness may be the most appropriate response to this issue. This would ensure appropriate resourcing, prioritization and accountability in the efforts to end homelessness in Utah.

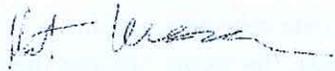
Thank you again for the opportunity to participate in the work to improve the lives of those experiencing homelessness by improving our homeless service response system.



Andrew Jackson
Mountainland COC



Stefanie Jones
Balance of State COC



Rob Wesemann
Salt Lake COC