

WEST CENTRAL MN CONTINUUM OF CARE HOMELESS TO HOUSED TASK FORCE  
PLAN TO END CHRONIC HOMELESSNESS

**I. Prevention of Chronic Homelessness**

- A. Retain and Strengthen currently funded programs to:
1. Encourage housing projects to adjust budgets in order to align project funding so housing funds come from housing agencies (HUD/MHFA) and supportive services funds come from service agencies (OEO/DHS);
  2. Encourage Family Homeless Prevention and Assistance Programs to designate increased dollars specifically to prevent eviction or home loss for individuals with SMI, CD or MI/CD;
  3. Support and encourage agencies in speaking with their political leaders/representatives about how vital it is to continue funding housing and supportive services for the Chronic homeless;
  4. Designate a percentage of RHASP budget to provide deposit and first months rent to the Chronic Homeless in shelters;
  5. Designate an increased percentage of case management services to decrease the reoccurrence of homelessness and increase stabilization;
  6. Encourage agencies to utilize AmeriCorp volunteers and college interns to supplement case management services for persons who have been homeless for 1 year or more.
- B. Create Crisis Intervention Teams (CIT) in each community that will respond 24/7 to housing emergencies of MI/CD and SMI, providing an immediate case management plan and emergency housing that does not include shelters or the streets.
- C. Encourage development of Homeless Coalitions in each community to build collaborative relationships and enhance services for persons who are homeless.
- D. Discharge Planning: Reduce/eliminate discharge to streets and shelters by completing the following:
1. Model and expand the CAP Integrator, an integrated intake and assessment tool being piloted by Regional Community Action Agencies in June 2005;
  2. Work with Region IV and WC Mental Health Initiatives to create discharge plans that do not age youth out of foster care/detention or release people from facilities to the streets or shelters;
  3. Provide awareness to perpetuating homelessness through shelter discharges and developing alternative plans;
  4. Work with Re-Entry Services through the Joint Powers Collaborative to ensure housing for children aging out of foster care or being released from detention;
  5. Work with regional foster care programs to encourage comparable models;
  6. Encourage development and expansion of Transitional Programs for people with mental health issues: Matthew House and My Fathers House.
- E. Early intervention: Target adolescents who likely may become chronic homeless (with MI and/or CD and family history of homelessness) to strive to stop the cycle of homelessness and prevent chronic homelessness. Early intervention steps include:
1. Encourage budgeting/life skills/tenant education/emotional intelligence education in alternative schools;
  2. Create transitional housing projects for homeless youth in communities without such services;

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3. Create drop in centers for at-risk youth where: outreach, education, and supportive services are available;
4. Build relationships w/ landlords to rent to children prior to being 18;
5. Develop volunteer programs to work with at-risk youth, including Salvation Army, Meals on Wheels, etc. Give children a stake in their community;
6. Develop programs within agencies where volunteerism of children ages 17-21 would result in the agency paying 15% of their rent. Build relationships with landlord who might provide comparable rent decrease;
7. Research funding for truancy programs; and
8. Seek and advocate for funds for after school programming.

**II. Implementation of Housing and Supportive Services for Chronic Homeless:**

- A. Create Assertive Community Treatment (ACT) Teams in each county to increase the safety and stability of chronically homeless. Teams will deliver comprehensive and flexible treatment, support, and services to individuals who have the most serious and intractable symptoms of severe mental illness and who, consequently have the greatest difficulty with basic daily activities.
- B. Implement Homeless Outreach Pilot Project in Clay County, funded by The Ending Long-Term Homelessness Advisory Council and the Dept. of Human Services Office of Economic Opportunity. The goal of the project is to reduce recidivism and promote stronger communities through street and shelter outreach by building a bridge to stable housing and linking individuals with mainstream services. Outreach services will be targeted to, but not limited to, people experiencing chronic homelessness who have had repeated interactions with law enforcement. Outreach services will provide intervention strategies linking people to housing and services as an alternative to arrest. The project will promote community collaboration with local law enforcement, city/county, services providers, and other organizations to address homelessness.
- C. Implement Housing First Pilot Project: Pilot a Housing 1<sup>st</sup> program that can immediately (24/7) respond to emergencies of individuals with SMI and MI/CD with supportive services and housing that is not shelters or streets. Action steps include:
  1. Form housing first team/council to include; landlords, HRA/PHA's, city and county, developers, law enforcement, service providers, and advocates;
  2. Advocate for the expansion of Section 8 vouchers to reduce waiting lists;
  3. Encourage the development of increased permanent affordable housing;
  4. Provide single point of contact; and
  5. Educate/ coordinate with law enforcement and medical facilities for 24/7 reaction capacity.
- D. Expand the availability of permanent affordable housing:
  1. Use zoning/codes to encourage development of 0-40% median housing;
  2. Educate city councils on need for PSH/affordable housing;
  3. Encourage new housing projects to reserve 25% of units for 0-30% median income; and
  4. Educate cities on use of tax credits.

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- F. Develop/support low interest or interest free programs for landlords to bring rental properties up to code by:
1. Working with cities, counties and local banks to provide incentive programs;
  2. Utilizing MN bonding bill for low income housing; and
  3. Encouraging/support local businesses in building – obtaining bonding.

**III. Long Term Maintenance of Chronic Homeless Plan:**

- A. CoC will schedule region-wide annual forum beginning in September 2006 to review and monitor the progress of the existing plan.
- B. FHPA and CoC will form a PR team to educate and inform the media, cities, schools, housing providers, businesses, counties, etc. on the plan and CH issues.
- C. Housing 1<sup>st</sup> team will expand participation/education of Housing 1<sup>st</sup> concept; specifically to employers and employment service agencies.