

**THE WISCONSIN INTERAGENCY COUNCIL
ON HOMELESSNESS**

**PLAN TO END HOMELESSNESS
IN WISCONSIN**

“HOMEWARD WISCONSIN”

July 2007

TABLE OF CONTENTS

WISCONSIN INTERAGENCY COUNCIL ON HOMELESSNESS ACTION PLAN

Vision Statement	3
Appointment of Interagency Council on Homelessness	3
Development of the State Plan to End Homelessness	4
Homelessness in Wisconsin: Comparison Charts 1995-2006	5-7
The Plan - “Homeward Wisconsin”: List of Priorities	8

PRIORITIES AND STRATEGIES

Priority 1: Affordable housing is available for everyone.	9
Priority 2: Maximize prevention to minimize homelessness.	10
Priority 3: Improve service effectiveness and opportunities.	11-12
Priority 4: Implement no wrong door strategy for eligibility and benefits.	13
Priority 5: Promote ownership of Homeward Wisconsin.	14




VISION STATEMENT

The people of Wisconsin ensure that everyone has a home and the opportunity to succeed in their community.



INITIAL APPOINTMENT OF THE INTERAGENCY COUNCIL


In 2003, Governor James Doyle appointed representatives to attend the Sixth Policy Academy on Chronic Homelessness sponsored by the federal Interagency Council on Homelessness. The representatives appointed and subsequently attending the Policy Academy included:


-  **Governor's Policy Assistant;**
-  **Department of Health and Family Services, Division Administrator of Disability and Elderly Services; Administrator, Division Administrator of Health Care Financing; and Bureau Director of Mental Health and Substance Abuse Services;**
-  **Department of Commerce, Section Chief for Special Needs Housing and Community Services Specialist in the Bureau of Supportive Housing;**
-  **Wisconsin Housing and Economic Development Authority, Product Development Officer;**
-  **Department of Veteran's Affairs, Division Administrator of Veterans Services;**
-  **Department of Workforce Development, Executive Assistant;**
-  **Department of Corrections, Regional Chief in the Division of Community Corrections;**
-  **HealthCare for the Homeless/Milwaukee, Executive Director;**
-  **Milwaukee Continuum of Care Consultant;**
-  **Hebron House of Hospitality, Waukesha, Executive Director; and**
-  **A formerly homeless person's representative.**


THE DEVELOPMENT OF THE STATE PLAN


In August 2004, Governor Doyle issued Executive Order 66, which created the Interagency Council on Homelessness and charged the Council with the development of a plan to end chronic homelessness in the state. Members of the Council included all of the members of the Policy Academy team, as well as representation from the Department of Public Instruction and homeless program representatives from the Center for Veteran’s Issues and North Central Community Action Program. The Council’s collaborative planning process included all state departments working with programs affecting persons experiencing or at risk of homelessness.


With the data provided by participating departments, the Council developed evidence-based strategies and outcomes addressing key homelessness issues. The resulting plan, known as “Homeward Wisconsin”, was developed with the following five principles in mind:

-  First, strategies developed should reduce the occurrence of homelessness and the recidivism characteristic of chronic homelessness.**

-  Second, reducing homelessness not only enhances the quality of life of the individual, but also strengthens the community in which the person or family resided.**

-  Third, strategies developed should focus on improving collaboration to utilize existing funding more effectively and addressing issues comprehensively at the time of the first homeless episode.**

-  Fourth, State Departments should work together to implement plan recommendations and serve as an example of collaboration for governments and communities.**

-  Fifth, Council members should work to educate state and local leadership, providers of services, and the public on homelessness issues, including the need to work together in assisting households to access needed services and to intervene in the cycle of poverty and eventual homelessness.**

HOMELESSNESS IN WISCONSIN: 1995-2006

A statewide plan to end homelessness is necessary to prevent homelessness from growing, to address chronic homelessness and deal with the increasing need for shelter and services.

As shown in Figure 1, the number of shelters funded over the last ten years through the State Shelter Subsidy Grant (SSSG) and the federal Emergency Shelter Grant (ESG) has increased significantly. The number of agencies receiving funds increased from 23 facilities in 1995 to 122 facilities in 2006. This 530% increase in the number of funded shelter facilities took place without any increase in State Shelter Subsidy dollars and only a 6% increase in Emergency Shelter Grant funds.

While the number of homeless program provider agencies has increased to meet needs almost everywhere in the state it is especially noticeable in the less urban areas of Wisconsin. There has been a gradual increase in the amount of proportionate homeless shelter nights provided in these areas and consequently an increase in state administered homeless program funds awarded (from 33% to 49% over the last ten years) in areas outside of Dane County and Milwaukee County.

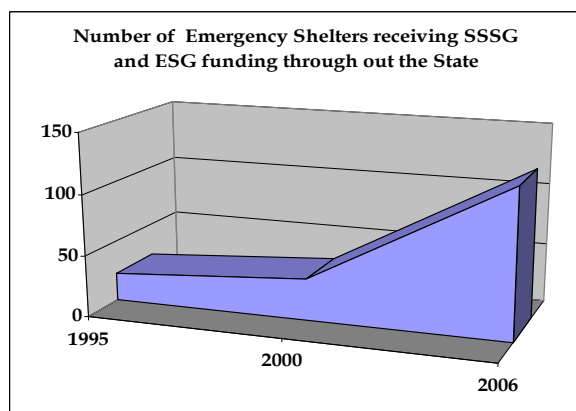


Figure 1*: Increase in number of emergency shelters and housing services funded in the past ten years.

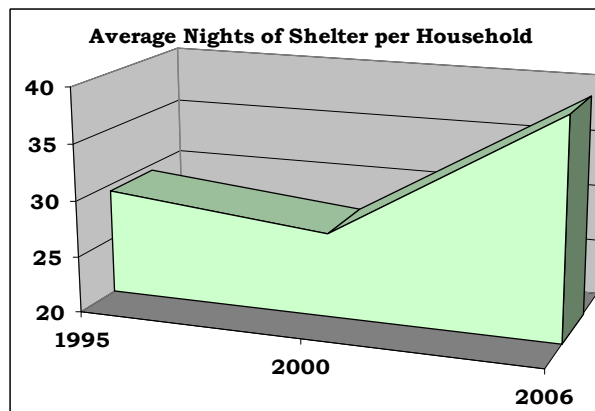


Figure 2*: Increase in the length of stay in "emergency shelter programs" in the last ten years.

* Data provided by the Bureau of Supportive Housing

In addition to the increase in homeless programs, the length of stay in emergency short-term homeless shelter and voucher programs has increased by an average of ten nights per household, a 34% increase from 1995 (see Figure 2). The increase may also be due in part to the unavailability of affordable rental housing.

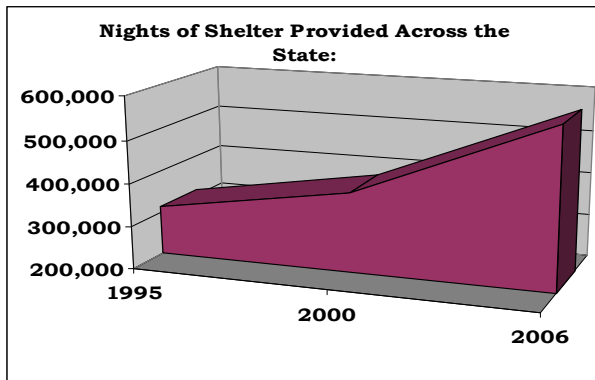


Figure 3*:
Increase in nights of shelter.

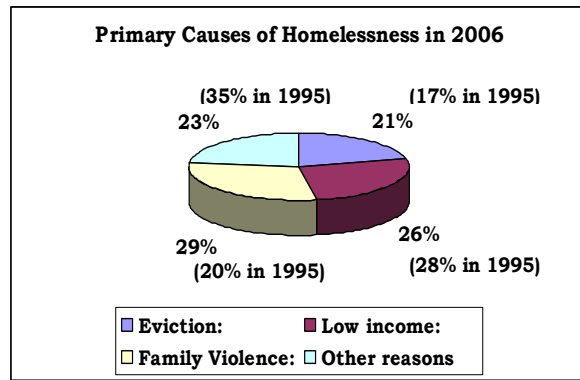


Figure 4*:
The primary causes for homelessness

As shown in Figure 3, as the number of programs and the average length of stay increases, the number of nights of shelter has also increased from roughly 300,000 nights in 1995 to over 500,000 in 2006.

While the number of emergency shelter beds has remained relatively constant over the past several years, the number of persons turned away or placed on waiting lists because shelters were at capacity has increased. Recently, however, the focus on and redirection of funds towards homelessness prevention has begun to slow the increase.

Despite the increases in homeless programs and the increased demand for homeless shelter, the primary causes of homelessness remain the same: lack of income, eviction and domestic/family violence (see Figure 4).

Households leaving shelter continue to experience difficulties in finding affordable housing. In Wisconsin, the Fair Market Rent (FMR) for a two-bedroom apartment is \$666. In order to afford this level of rent and utilities, without paying more than 30% of income on housing and therefore incurring an excessive housing burden, a household must earn at least \$2,219 monthly or \$26,633 annually. Assuming a 40-hour work week, 52 weeks per year, this level of income translates into a Housing Wage of \$12.80. A minimum wage worker earns an hourly wage of \$6.50. To afford the FMR for a two-bedroom apartment, a minimum wage earner must work 79 hours per week, 52 weeks per year, or a household must include two full-time minimum wage earners working year-round.

The importance of safe, affordable housing in building strong communities and families and maintaining stable employment has left many providers and homeless advocates focusing on what can be done to prevent homelessness. Specifically, what will help households that are at risk of becoming homeless stabilize their housing situation?

As the Council worked at developing Homeward Wisconsin, agencies, service providers and other Council representatives have already successfully implemented a number of its key recommendations. For example, a very successful pilot has been initiated in Waukesha County to assist homeless persons with disabilities in applying for Social Security Income, and several

programs linking rent assistance with necessary supportive services have been initiated in rural Wisconsin. Other initiatives are still in progress or have not yet begun.






To be successful, “Homeward Wisconsin” will require continued leadership and increased collaboration between the State, its agencies, service providers, local government officials and communities.



THE PLAN - “Homeward Wisconsin”

“Homeward Wisconsin” focuses on changes that can be made on a state level that will encourage and support county-wide system level changes. Each county, city, village or township is encouraged to use this plan as a stepping stone to implementing each community’s plan to end homelessness and to encourage development of affordable housing opportunities for all.

Homeward Wisconsin’s recommendations to the Governor are based on the following five priorities:

-  Affordable housing is available for everyone**
-  Maximize prevention to minimize homelessness**
-  Improve service effectiveness and opportunities**
-  Implement “no wrong door” strategy for eligibility and benefits**
-  Promote ownership of “Homeward Wisconsin”**

The Interagency Council on Homelessness hopes that the Governor will find the “Homeward Wisconsin” plan feasible, albeit challenging, and that the Governor will encourage acceptance and implementation of “Homeward Wisconsin” by all State Departments and elected officials to the best of their abilities.

Specific Strategies and Action steps to accomplish each priority are listed on the following pages:

Priority 1: Affordable housing is available for everyone.

Strategies	Actions
<p>Strategy 1.1 Prioritize homeless population for existing housing programs.</p>	<p><u>1.1.1</u> Encourage larger housing authorities to designate homelessness as a priority for housing assistance.</p> <p><u>1.1.2</u> Target HOME Tenant Based Rent Assistance (TBRA) for homeless households with an emphasis on chronic homelessness.</p> <p><u>1.1.3</u> Department of Health and Family Services and the Department of Commerce coordinate funding for Community Support Programs and Mental Health programs that serve chronically homeless households.</p> <p><u>1.1.4</u> Develop a pilot project to determine a waiver process for Housing Authorities to provide access to Public Housing and Section 8 for persons with criminal histories who have completed their sentences.</p> <p><u>1.1.5</u> State Consolidated Plan targets chronically homeless households.</p> <p><u>1.1.6</u> Explore needs and opportunities for housing homeless youth (under 18 population)</p>
<p>Strategy 1.2 Utilize innovative strategies to fund additional housing stock for households at 30% County Median Income.</p>	<p><u>1.2.1</u> Link Program to Assist in Transition from Homelessness (PATH) and Community Support Programs (CSP) with Shelter plus Care (S+C) for 2006.</p> <p><u>1.2.2</u> Every Continuum of Care obtains maximum bonus for permanent housing projects.</p> <p><u>1.2.3</u> WHEDA Foundation works with other sources for match pool for assisted housing projects. WHEDA Reviews sources and uses of funding.</p> <p><u>1.2.4</u> Initiate legislation to develop a State Housing Trust Fund.</p>
<p>Strategy 1.3 Preserve existing affordable housing stock for households at 30% of County Median Income Strategy. Preserve existing affordable housing stock for households at 30% of County Median Income</p>	<p><u>1.3.1</u> Non-profit tax exemption legislation for real estate taxes.</p> <p><u>1.3.2</u> Explore master leasing for permanent housing alternatives. (Note that HUD Technical Assistance funds can be used to investigate feasibility)</p>
<p>Strategy 1.4 Develop bridge funding for housing assistance.</p>	<p><u>1.4.1</u> Use Homelessness Prevention Program (HPP) to bridge for rental assistance until longer term rental assistance is available.</p> <p><u>1.4.2</u> Explore local funding sources to provide funds for bridge rent assistance.</p> <p><u>1.4.3</u> Encourage landlords to maintain property in compliance with local codes.</p>

Priority 2: Maximize prevention to minimize homelessness.

Strategies	Actions
<p>Strategy 2.1 Establish collaborative discharge/release planning from institutional settings and foster care.</p>	<p><u>2.1.1</u> Implement collaborative strategies across state agencies to improve successful prisoner re-entry outcomes.</p> <p><u>2.1.2</u> Improve outcomes, including reduced homelessness for children aging out of foster care.</p> <p><u>2.1.3</u> Administer Former Foster Care Youth Grant in Milwaukee</p> <p><u>2.1.4</u> Ensure that individuals discharged from state mental health institutes have stable housing and benefits for which they are eligible.</p>
<p>Strategy 2.2 Promote diversion from crisis and emergency housing services to stable housing.</p>	<p><u>2.2.1</u> Identify frequent service users, perform housing security and health risk assessment.</p> <p><u>2.2.2</u> Establish partnerships with care management organizations and homeless service providers.</p> <p><u>2.2.3</u> Refer to appropriate case management organization business partners.</p> <p><u>2.2.4</u> Develop a plan that demonstrates successful transition from emergency shelter to a Housing First or Rapid Re-housing system.</p> <p><u>2.2.5</u> Assign priority for housing subsidy programs and resource limited mental health and AODA programs.</p> <p><u>2.2.6</u> Place participants in stable housing.</p> <p><u>2.2.7</u> Increase case management and other necessary services to enable households to keep their existing housing.</p> <p><u>2.2.8</u> Improve relationships between homeless programs, homeless populations, and landlords to educate about landlord/tenant responsibilities.</p> <p><u>2.2.9</u> Explore the expansion of educational programs including Even Start Family Literacy, financial education, GED/HSED.</p> <p><u>2.2.10</u> Support efforts of domestic violence programs to promote housing transitions for victims of domestic violence/sexual assault to avoid homelessness.</p>
<p>Strategy 2.3 Preserving housing and benefits for institutionalized persons.</p>	<p><u>2.3.1</u> Suspend rather than terminate Medical Assistance eligibility for maximum duration during incarceration.</p> <p><u>2.3.2</u> Provide rent assistance funding during period of hospitalization.</p> <p><u>2.3.3</u> Re-activate SSI prior to release for incarceration less than 1 year.</p>
<p>Strategy 2.4 Establish stable funding for evidence-based prevention programs and expand to post-release.</p>	<p><u>2.4.1</u> Establish the business case (state and county costs for pre-release care planning).</p> <p><u>2.4.2</u> Identify and measure cost savings in mainstream programs.</p> <p><u>2.4.3</u> Secure stable, recurring funding for pre-release programs.</p>
<p>Strategy 2.5 Provide referral information regarding community youth programs for unaccompanied and runaway youth to school districts and community social service agencies.</p>	<p><u>2.5.1</u> Request the Department of Public Instruction (DPI) send a contact list of Runaway Programs to each school district homeless liaison and provide this information on the DPI's Education for Homeless Children and Youth (EHCY) Program webpage.</p> <p><u>2.5.2</u> Ensure the DHFS and DPI provide a contact list of Runaway Programs to each of their regional and community-based offices and homeless liaisons.</p>

Priority 3: Improve service effectiveness and opportunities

Strategies	Actions
<p>Strategy 3.1. Expand revenue sources and funding for “mainstream services.”</p>	<p><u>3.1.1</u> Expand the federal 330 Program (Community Health Centers) sites & services.</p> <p><u>3.1.2</u> Include Job Service outreach to chronically homeless households and persons transitioning from homelessness.</p> <p><u>3.1.3</u> Extend Milwaukee Transitional jobs program targeted to homeless persons and people at risk of homelessness.</p> <p><u>3.1.4</u> Pilot strategies for engaging chronically homeless persons in employment programs through mainstream programs (esp. child support & Food Stamps).</p>
<p>Strategy 3.2 Promote systematic approach to collaborative services from the state level down.</p>	<p><u>3.2.1</u> Cabinet members develop statewide coordination of definitions, eligibility criteria, best practices & data gathering.</p> <p><u>3.2.2</u> Develop a foster care interdepartmental team.</p> <p><u>3.2.3</u> Promote the use of the Wisconsin Front Door web site.</p> <p><u>3.2.4</u> Incorporate McKinney/Vento Act actions into interagency agreements between DHFS and DPI.</p> <p><u>3.2.5</u> Encourage homeless service agencies to work with public school district homeless liaisons.</p>
<p>Strategy 3.3 Create outreach to homeless SSI population and linkages to managed care.</p>	<p><u>3.3.1</u> Expand SSI managed care to improve access to health and mental health services.</p> <p><u>3.3.2</u> Provide access to federal funding for MH and AODA services.</p> <p><u>3.3.3</u> Identify Homelessness as a priority for Mental Health Block Grant funding.</p> <p><u>3.3.4</u> Identify Homelessness as a priority for AODA Block Grant funds.</p> <p><u>3.3.5</u> Implement the federally funded MH Transformation grant.</p>
<p>Strategy 3.4 Increase use of evidence-based, best practice models in treatment service provisions.</p>	<p><u>3.4.1</u> Identify effective rural service models.</p> <p><u>3.4.2</u> Develop integrated treatment for dually diagnosed persons—funding through Coordinated Community Services (CCS) rule (MA reimbursement.) Intent is that state policies are not barriers to collaboration.</p> <p><u>3.4.3</u> Through the use of existing funding develop jail and prison diversion programs to address AODA and MH needs.</p>
<p>Strategy 3.5 Increase access to mainstream resources through more coordinated agency linkages.</p>	<p><u>3.5.1</u> Link DVR services with homeless services.</p> <p><u>3.5.2</u> Develop jail diversion program and identify resources to pay for Mental Health & Substance Abuse services.</p>
<p>Strategy 3.6 Ensure people have transportation for work and services.</p>	<p><u>3.6.1</u> Expand current Jump Start (Automobile purchase program utilizing private resources).</p> <p><u>3.6.2</u> Research and disseminate information on developing non-vehicle owner transportation options.</p>
<p>Strategy 3.7 Increase availability of shelter and services for homeless and runaway youth.</p>	<p><u>3.7.1</u> Explore the expansion of services to underserved counties and counties not receiving services.</p> <p><u>3.7.2</u> Expand transitional living programs for both 16 -18 and 18-21 homeless youth through the use of federal supportive housing funds.</p> <p><u>3.7.3</u> Encourage family shelters to allow adolescent males to remain with their families in shelter.</p> <p><u>3.7.4</u> Determine the need for Second Chance Homes throughout the state.</p>

<p>Strategy 3.8 Increase street outreach programs to address needs of homeless youth.</p>	<p><u>3.8.1</u> Using existing funding to expand and strengthen existing street outreach programs.</p> <p><u>3.8.2</u> Explore the expansion of outreach programs like A-Net to allow identification and provision of services to homeless families or youth.</p>
<p>Strategy 3.9 Provide access to lists of quality child care, Head Start and early education services to homeless households at emergency shelters and transitional housing.</p>	<p><u>3.9.1</u> Improve access to information about licensed and certified child care providers to help parents identify quality child care.</p> <p><u>3.9.2</u> Identify local resources to establish reduced child care subsidy co-pays or no co-pays at all for homeless families.</p> <p><u>3.9.3</u> Require Child Care Resource and Referral agencies to send contact information to shelters and transitional housing programs.</p>

Priority 4: Implement “no wrong door” strategy for eligibility and benefits.

Strategies	Actions
<p>Strategy 4.1 Children aging out of the foster care system will have all benefits for which they are eligible.</p>	<p><u>4.1.1</u> Provide youth aging out of foster care with all benefits for which they are eligible.</p> <p><u>4.1.2</u> Track number of benefits acquired to monitor progress and show cost benefit.</p>
<p>Strategy 4.2 Individuals leaving the corrections system will have all benefits for which they are eligible.</p>	<p><u>4.2.1</u> Implement suspension of MA and SSI benefits for incarcerated people.</p> <p><u>4.2.2</u> Implement assertive outreach and presumptive eligibility for SSI and MA for persons leaving prisons.</p> <p><u>4.2.3</u> Develop a system that inventories all benefits and eligibility requirements that can be used to address strategies.</p> <p><u>4.2.4</u> Explore the possibility of creating a benefit specialist position for one DOC region that that combines funding from DOC and is matched with MA Outreach.</p>
<p>Strategy 4.3 Individuals who are high users of crisis and emergency services will have all benefits for which they are eligible.</p>	<p><u>4.3.1</u> Implement and incorporate mental health and AODA expertise and establish disability benefit specialists in aging and disability resource centers for MH/AODA redesign.</p> <p><u>4.3.2</u> Incorporate benefit specialist and clinical detectives to establish presumptive eligibility for homeless persons with a disability.</p> <p><u>4.3.3</u> Identify costs of frequent hospital ER use to justify Return on Investment for investing in benefit acquisition.</p> <p><u>4.3.4</u> Work with local faith-based organizations to expand the Parish Nurse Program throughout the state, utilizing this model of health/care advocacy with shelter, transitional housing programs, and in all community locations that serve homeless populations.</p> <p><u>4.3.5</u> Increase access to medical and dental health services in community health centers for homeless populations and promote preventive care.</p>
<p>Strategy 4.4 Individuals eligible for WI federal and state VA benefits are aware of available benefits.</p>	<p><u>4.4.1</u> Identify and increase outreach to agencies regarding WI Department of Veteran’s Affairs Veteran’s Assistance Program homeless program and the Milwaukee Housing Voucher Program.</p> <p><u>4.4.2</u> Increase the provision of Veteran’s Benefit information to all social service agencies including workforce development boards and faith based organizations.</p> <p><u>4.4.3</u> Veteran Service Officer (VSO) Claims Officers or the County VSO visit correctional facilities and provide claims development prior to release from incarceration.</p> <p><u>4.4.4</u> DWD Job Service personnel or contractor provide incarcerated persons with job assessment and evaluation prior to release.</p> <p><u>4.4.5</u> Request the USDVA to allow Readjustment Services Contracts for mental health counseling to be permitted in all parts of the state.</p>
<p>Strategy 4.5 Mental Health discharge planners collaborate with counties to identify and apply for benefits that discharged patients are eligible for.</p>	<p><u>4.5.1</u> Discharge planners develop a system of collaboration with county human service providers to ensure continuity of services for person discharged from mental health facilities.</p>

Strategy 4.6 Streamline SSI application process in WI to increase approval rate on initial application.	<u>4.6.1</u> Extend successful SSI/SSDI Outreach, Access and Recovery (SOAR) program pilot to other counties.
---	--

Priority 5: Promote ownership of “Homeward Wisconsin”

Strategies	Actions
Strategy 5.1 Form the Wisconsin Interagency Council on Homelessness, incorporating the Plan to End Homelessness.	<u>5.1.1</u> Ensure funding to adequately staff and support the Interagency Council, utilize existing staff resources, and apply for federal Homeless Technical Assistance funding. <u>5.1.2</u> Appoint stakeholders, including Legislators to Council. <u>5.1.3</u> Clarify charge of the Council—include all homeless populations. <u>5.1.4</u> Encourage agencies to coordinate efforts.
Strategy 5.2 Increase ownership of the homelessness issue across departments and agencies.	<u>5.2.1</u> Identify target homeless individuals, youth, and household populations within each agency’s service area populations. <u>5.2.2</u> Develop coordinated cross agency grant application and advocacy processes.
Strategy 5.3 Senior officials highlight homelessness.	<u>5.3.1</u> Present plan to Governor, collaborating Secretaries and key Legislators. <u>5.3.2</u> Share information/relevant data outlining the homelessness issue and potential solutions in WI.
Strategy 5.4 Advocate for change in federal policy to increase state flexibility and control over resources.	<u>5.4.1</u> Repeat actions in 5.3.1 and 5.3.2 for Congressional delegation. <u>5.4.2</u> Apply for demonstration grants that allow flexible, coordinated collaboration between federal, state and local agencies. <u>5.4.3</u> Stay current with successful strategies being implemented by other states to address homelessness.
Strategy 5.5 Build critical mass of support to end homelessness in Wisconsin.	<u>5.5.1</u> Market program outcomes. <u>5.5.2</u> Develop a cost benefit analysis to reveal impact of homelessness in WI. <u>5.5.3</u> Develop and implement public information plans to address the issue of homelessness and solutions proposed.