Ending Homelessness Now: Creating New Partnerships for Change
Ten Year Plan
Allegheny County, Pennsylvania
July 2005

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## **Ending Homelessness Now: Creating New Partnerships for Change Executive Summary**

In response to The United States Interagency Council on Homelessness's call for ten-year plans to end chronic homelessness across the nation, Allegheny County Chief Elected Official Dan Onorato committed Allegheny County to implementing a ten-year plan to address the array of homeless issues occurring within the county. Through the work of the Allegheny County Homeless Alliance in partnership with Allegheny County, the city of Pittsburgh, the city of McKeesport and the municipality of Penn Hills, this plan was developed utilizing Future Search methodology<sup>1</sup>, data and concepts generated from annual reports, national research, local trends and public hearings.

The common ground concept that came forth from the Future Search conference was that "Everyone has Value." This concept must be at the center of all that is done in relationship to homelessness. People have value regardless of their living arrangements. Homeless and formerly homeless individuals and families who received assistance from the system want to be a part of the community-wide efforts to end homelessness.

It is very important to note that homelessness is a condition that is generally not caused by a single issue. There are usually multiple contributing factors that can perpetuate the situation. These can include: lack of affordable housing, lack of a housing/living wage, credit history, employment, domestic violence, disease of addiction, mental health, health issues, physical disabilities, and criminal history.

Since multiple issues cause the condition of homelessness, the plan must be able to address these complex issues. Eight recommendations were endorsed in the plan to be implemented over the next ten-year period. These recommendations include:

- Recommendation 1: To reduce the number of homeless individuals and families entering the system by (1) educating individuals and families on the warning signs of homelessness (2) educating community/social services agencies and organizations on these warning signs so they are better positioned to intervene early with their consumers to avert homelessness and (3) providing county-wide information on how to access resources and assistance in a timely way to avoid a housing crisis.
- Recommendation 2: To increase the affordable housing supply that is accessible to the chronically homeless and homeless over the next ten years by 1000 units and preserve existing low-income housing units where feasible.
- Recommendation 3: To develop, implement and maintain, as long as there is a demonstrated need, a comprehensive approach to ending chronic homelessness through three major components. They are: an Engagement Center System, Harm Reduction Housing and expansion of Housing First Programs.

<sup>&</sup>lt;sup>1</sup> See Attachment A for Description of Future Search.

- Recommendation 4: To improve how homeless consumers are accessing and receiving housing and or supportive services through the network.
- Recommendation 5: To co-locate homeless services within designated regional centers where a variety of community-related programs and opportunities for resource dissemination, volunteering and socialization, regardless of housing status, is the focal point.
- Recommendation 6: To develop short-term and long-term Public Awareness and Education Programs on Homelessness.
- Recommendation 7: Establish a central repository for financial contributions from private sources. Annually distribute these funds through the homeless network based upon performance, quality of program and responsiveness to identified needs in the continuum of care.
- Recommendation 8: To advocate for comprehensive health and behavioral health services that are accessible, reliable and effective for people experiencing homelessness.

Allegheny County is the designated entity for human services for the entire geographic area. With this authority, the Allegheny County Chief Elected Official, Dan Onorato, is committed to implementing the plan through the Allegheny County Department of Human Services (ACDHS). The Office of Community Services, which is a division of ACDHS, will have the authority to implement the plan. The Allegheny County Homeless Alliance, as a partner in the process, will be responsible for:

- 1. Assisting in implementation and evaluation towards achieving the recommendations set forth in the plan and modifying the plan, as adjustments are required over the ten-year period.
- 2. Promoting collaboration and partnerships through Continuum of Care;
- 3. Appointing representatives to be a part of the annual evaluation process to rank;
- 4. Reviewing the data generated by HMIS System in order to evaluate the progress made towards achieving the goals established by the Continuum of Care and the Ten Year Plan;
- 5. Reviewing policy and advocate for changes in public policy related to homelessness;
- 6. Endorsing the Annual Submission of the Continuum of Care.

The Homeless Alliance has continued to work on their goal of ending homelessness. Since 2003 when the Homeless Alliance was re-formulated, they have focused on providing effective programs with positive outcomes for homeless persons. The Future Search Conference that focused on developing this plan was a valuable experience for the members and now there is a plan to carry the work forward. The mission of the Homeless Alliance is a public/private partnership formed to assist Allegheny County, the City of Pittsburgh, the City of McKeesport and the municipality of Penn Hills in eliminating homelessness and reviewing public policy, programs, activities, data and all other efforts that will improve the well being of homeless persons and families.

## **Ending Homelessness Now: Creating New Partnerships for Change** Ten-Year Plan to End Homelessness in Allegheny County Pennsylvania

The United States Interagency Council on Homelessness is encouraging each community across the country to develop a plan to end homelessness, specifically focused on ending chronic homelessness. The United States Department of Housing and Urban Development is strongly encouraging each governmental entity, under its continuum of care process, to develop such a plan. Both the National Association of Counties and the U.S. Conference of Mayors adopted resolutions in 2003 that endorsed the Bush Administration's national goal of ending chronic homelessness in ten years. Communities are strongly urged to develop a plan to both prevent and end chronic homelessness.

Allegheny County has a long history of working with the homeless. Building on this history, the Allegheny County Homeless Alliance, a private public partnership consisting of providers, governments from the Continuum of Care, consumers, business/developers, faith-based organizations and the academic community, adopted the development of a ten-year plan to end homelessness as a goal for 2004. The Homeless Alliance appointed an Ad Hoc Committee to oversee the development of a conference, which would bring together a microcosm of the community. The Ad Hoc Committee chose the Future Search model as the process to reach common ground and move toward the development of a plan. Funding for the conference was received from The Forbes Fund, The Pittsburgh Foundation, Giant Eagle and Federal Home Loan Bank. (Description of Future Search and the Committee Membership can be found in Attachment A.)

A conference entitled "Ending Homelessness Now: Creating New Partnerships for Change" was held October 13, 14 and 15, 2004 with sixty-five participants representing consumers, providers, government, private and public funders, business, faith-based, academic and training and housing developers. (See Attachment B for list of participants and scribes.) As a result of this conference, work groups were formed around common ground and continue to contribute to ending homelessness now and moving these issues forward. In addition, other participants from the community have joined in this effort to end homelessness now.

### **Overview of Homelessness**

Over the past twenty-two years, Allegheny County has been striving to provide homeless services to the community. Through a network of over 44 providers, an infrastructure has arisen and provides housing and services through an array of funding sources. These sources include: U.S. Department of Housing and Urban Development (HUD), Health and Human Services (HHS), U.S. Department of Veterans Administration (VA), Pennsylvania Department of Public Welfare (DPW), PA Department of Health, Allegheny County Act 137, McKinney- Vento Federal Emergency Management Agency (FEMA), foundations and private fundraising. Annually, Allegheny County Department of Human Services directly receives 15.6 million dollars in federal, state and local funding to support this network of housing and supportive services. In addition, the Allegheny County Department of Economic Development, the City of Pittsburgh, City of McKeesport and the Municipality of Penn Hills receive smaller grants from HUD to support homeless services. The provider community must raise \$2.3 million annually

from foundations and private resources in order to match the HUD allocation they receive through the County annually. (The \$2.3 million excludes any dollars utilized to acquire or rehabilitate new housing units.)

Homelessness has been increasing despite the effort of an extensive homeless system with a wide array of housing options and services. The current housing and service mix includes: street outreach, emergency shelters (both seasonal and year round), bridge housing/transitional housing, PennFree Bridge Housing, Safe Haven, Shelter Plus Care Permanent Housing for Persons with Disabilities, case management, Supportive Services Only, Health Care for the Homeless, Mental Health, Veterans Services, Mortgage Assistance and Rental Assistance. As a part of their annual planning process, Allegheny County conducts point in time studies semi-annually. In comparing the number of homeless in December 2000 and June 2004 there has been a significant increase in the number of families. The number of children increased 57%. The average age of a homeless person is 43 years old. The average age of a child who is homeless is 8.5 years old. (The average age has remained consistent over the last four year. The average age of adults was between the ages of 40 and 44 and for children the ages were between 7 and 9 years old.) About 21.5 % of the persons on June 16, 2004 were homeless for a year or more. This percentage represents both single adults and adults with children.

Category	December 2000*	June 2004*	Difference
Single Women	389	369	-20
Single Men	858	728	-130
Women with	259	310	59
Children			
Men with Children	13	87	74
<b>Total Adults</b>	1519	1494	-25
Total Children	400	693	293
Total	1919	2187	276

<sup>\*</sup> In December 2000 there were 82 programs reporting data while in June 2004 there were 100 programs reporting data.

In comparing the number of persons served by gender and family composition from the point in time studies of 2000 and 2004, the greatest increase was in families especially men with children. There is a significant decrease in the number of single adults who participated in the point in time survey.

In a study by the University of Pittsburgh, Graduate School of Public and International Affairs by Angela Williams Foster, Ph.D. and David Y. Miller, Ph.D. entitled "A Study of Affordable Housing: Supply and Demand in Allegheny County" found "Affordable Housing rents at or below 30% of household income were moderately or severely inadequate." The study further estimates that 15,000 households within Allegheny County are in an affordable housing crisis. This housing crisis can be seen in the number of adults with children who are now facing homelessness because of income and housing costs. The National Low Income Housing Coalition in a 2004 study estimates the housing hourly wage within Allegheny County to be \$12.29. When the national minimum wage is \$5.15 an hour, it is easy to see the housing crisis that we are currently encountering.

## **Defining Homelessness**

Homelessness is a condition and not a class of people. As the flooding from Hurricane Ivan demonstrated on September 17, 2004 in Allegheny County, anyone can become homeless whether it is from natural disaster, a decline in economics, domestic violence, disease of addiction, health and/or mental health related issues. A basic overriding concept that came forth from Future Search conference was "Everyone has Value." This concept must be at the center of all that is done in relationship to homelessness. People have value regardless of their living arrangements. Homeless and formerly homeless individuals and families who participated in the conference and hearings clearly stated they want to be a part of the community-wide efforts to end homelessness.

It is very important to note that homelessness is a condition that is not caused by one issue. There are usually multiple contributing factors that can perpetuate the situation. These can include: lack of affordable housing, lack of a housing wage, credit history, employment, domestic violence, disease of addiction, mental health, health issues, physical disabilities, and criminal history. In reviewing the point in time data for adults from June 16, 2004, 28% had substance abuse, 28% had a serious mental illness, 26% were dually diagnosed with drug /alcohol and mental illness, 19% had a history of domestic violence, 15% had a physical disability, 2% had HIV/AIDS and 2% had a developmental disability. (These conditions were self-reported by the consumers. Consumers could have checked more than one disability.) In addition, 21% of the consumers were veterans of which 3% were female veterans.

Many definitions exist across regulatory bodies and service providers. Both HUD and the Commonwealth of Pennsylvania have definitions of homelessness and near homelessness. For the purposes of this document, the following definitions are being utilized from the state and federal regulations:

**Chronically Homeless:** An individual who has been sleeping in one or more places not meant for human habitation or in one or more emergency homeless shelter for over one year or who has had four or more periods of homelessness over three years.( U.S. Department of Housing and Urban Development)

**Homeless Person:** A person sleeping in a place not meant for human habitation or in an emergency shelter; a person in transitional or supportive housing for homeless persons who originally came from the street or an emergency shelter. In addition a homeless person may be living in a "doubled up" arrangement for six months or less or a temporary basis; or living in housing in which the physical plant presents life and/or health threatening conditions, or is living in a condemned building. (U.S. Department of Housing and Urban Development)

**Near Homeless:** a person or family facing eviction, having received either written or verbal notification from the landlord that they will lose their housing unless some type of payment is received. Verbal notification must be followed up with a written documentation. (PA Department of Public Welfare)

### **Current Status of Homeless Services**

Currently the Allegheny County Continuum of Care includes Allegheny County, the City of Pittsburgh, the City of McKeesport and the Municipality of Penn Hills. The continuum includes an array of housing options. They are: a Severe Weather Emergency Shelter which operates from December to March, Emergency Shelters, Bridge Housing/PennFree Bridge Housing/Transitional Housing, Safe Haven, Permanent Housing for Persons with Disabilities, Single Room Occupancy, Shelter Plus Care and Rental Assistance. Over 44 providers collaborate to link consumers with mainstream services such as food stamps, Social Security, Social Security Disability, Supplemental Security Income (SSI), Medical Assistance, Employment and Training, Veterans benefits and other sources as individual and family needs are identified. The continuum also utilizes a variety of Supportive Services Only programs, Outreach, Case Management, an Innovative Service Program, health care services, mental health services and collaborations with many other services and agencies in order to assist consumers. (See Attachment E for Housing Services and Attachment F for Services from the 2005 Continuum of Care for a listing of housing resources and description of services.)

Despite these efforts, gaps exist between housing resources, services, eligibility criteria and the consumer's ability to manage the system. Providers will assist consumers with accessing mainstream services; however, the consumer must be willing to actively participate in the process. Collaboration is voluntary among providers but strongly encouraged and recommended by all funding sources.

The U.S. Department of Housing and Urban Development was mandated by congress several years ago to require entities receiving federal funding for the homeless to implement and maintain a data management system for the continuum of care. This requirement was passed onto the entities receiving funding under the continuum of care process. To address this requirement, Allegheny County designed and implemented a Homeless Management Information System (HMIS) in October 2004. Data available to date is very limited and cooperation is needed by all agencies receiving HUD Supportive Housing Program and Pennsylvania Department of Public Welfare Homeless Assistance Program funds.

The HMIS must be maintained and enhanced to assure that accurate and current data is maintained for planning, reporting and evaluating homelessness within the continuum of care. HMIS will play a critical part in tracking needs and maintaining records in addressing the tenyear plan recommendations. Prior to October 2004, some of the emergency shelters were providing daily information into the county's eCAPS system. Point in Time studies are conducted semi-annually and housing data is maintained on an on-going basis. The HMIS system will provide a mechanism by which the continuum can gauge the progress on ending homelessness in Allegheny County.

#### Plan

"Ending Homelessness Now: Creating New Partnerships for Change" is the focus on addressing homelessness in a comprehensive manner over the next ten years. This focus began with the planning for the Future Search Conference when new entities from the broader community were

a part of the Future Search Conference. The conference served as the impetus to reach common ground and move the process forward. The common principles from the Future Search were utilized to develop the ten-year plan. The basis for the plan was the common ground components of the conference, data gathered from various sources over the past five years and input from the community. A series of four public forums were held on March 4, March 15, March 30 and April 12, 2005.

The ultimate responsibility for implementing the plan is with the Allegheny County Chief Elected Official, Dan Onorato. Mr. Onorato has designated the Allegheny County Department of Human Services, Office of Community Services as the lead entity on implementation since they currently have the responsibility for the annual HUD Supportive Housing Program Continuum of Care application and the PA Department of Public Welfare Homeless Assistance Program. The Allegheny County Homeless Alliance will continue to review the plan implementation and evaluate its progress through county support. The Future Search process allowed non-traditional organizations to become infused in the process, which has strengthened the Allegheny County Homeless Alliance committee structure.

Over the next ten years, Allegheny County will focus on activities and commitments necessary to end homelessness for both the chronically homeless and the homeless. Committees have already have begun to address the following recommendations:

- To reduce the number of homeless individuals and families entering the system by (1) educating individuals and families on the warning signs of homelessness (2) educating community/social services agencies and organizations on these warning signs so they are better positioned to intervene early with their consumers to avert homelessness and (3) providing county-wide information on how to access resources and assistance in a timely way to avoid a housing crisis.
- To increase the affordable housing supply that is accessible to the chronically homeless and homeless over the next ten years by 1000 units and preserve existing low-income housing units where feasible.
- To develop, implement and maintain, as long as there is a demonstrated need, a comprehensive approach to ending chronic homelessness through three major components. They are: an Engagement Center System, Harm Reduction Housing and expansion of Housing First Programs.
- To improve how homeless consumers are accessing and receiving housing and or supportive services through the network.
- To co-locate homeless services within designated regional centers where a variety of community-related programs and opportunities for resource dissemination, volunteering and socialization, regardless of housing status, is the focal point.
- To develop short-term and long-term Public Awareness and Education Programs on Homelessness.
- Establish a central repository for financial contributions from private sources. Annually distribute these funds through the homeless network based upon performance, quality of program and responsiveness to identified needs in the continuum of care.

• To advocate for comprehensive health and behavioral health services that are accessible, reliable and effective for people experiencing homelessness.

Each recommendation has a series of actions that needs to be implemented in order to achieve the desired outcome over the next ten years. The plan may need to be adjusted and revised as the years advance. The recommendations and actions will require leadership, commitment by the entire community, collaboration from within the homeless network as well as from outside the network, funding both public and private and in some cases the realignment of scarce resources in order to better address the issues. This will mean systems change and redesign will need to occur.

#### Recommendations

Recommendation 1: To reduce the number of homeless individuals and families entering the system by (1) educating individuals and families on the warning signs of homelessness (2) educating community/social services agencies and organizations on these warning signs so they are better positioned to intervene early with their consumers to avert homelessness and (3) providing county-wide information on how to access resources and assistance in a timely way to avoid a housing crisis.

**Problem:** Although the warning signs of crisis may be apparent months prior to becoming homeless, many households make no attempt to avert this crisis. A few examples of persons who are at risk of homelessness include: those living with another person in a "doubled-up" situation; persons in debt who are unable to pay their rent, utilities or mortgage(s); those living in residences that have been condemned or present health hazards; and persons who have lost their jobs and are living off of temporary income. For those who are at imminent risk of becoming homeless, supports can be developed to prevent the housing crisis from occurring in the first place. Prevention efforts currently in place within Allegheny County are: rental assistance, budget counseling, utility assistance and mortgage assistance and employment and training.

The current need within the county greatly exceeds the amount of funds available to assist individuals with forestalling eviction or sheriff sales. The Urban League of Pittsburgh annually depletes their yearly rental assistance allocation three to four months before the end of the fiscal year. The amount of assistance is limited to one month's rent and security deposit in a two-year period. Budget counseling is available through a two-hour session with the individual or family. ACTION Housing and the Urban League of Pittsburgh, through the HEMAP funded by the Commonwealth of Pennsylvania, provide mortgage assistance on a limited basis. In both the rental assistance and mortgage assistance programs, the need of the consumers exceeds the funding base.

#### Actions to be taken:

- Creation of an early warning system and hotline linking individuals/families receiving foreclosure, evictions and shut-off notices to service providers in order to prevent a housing crisis
  - o Identify all of the available resources for consumer counseling in the community.

- Invite organizations with resources to be a part of a coordinated effort to avert homelessness and coordinate existing resources in a more concentrated effort.
- Development of a Toolkit on the Eviction Process in order to assist a person's comprehension of the process. (This toolkit and support component is already under development by the HUD Tenant Association which is working in collaboration with the Prevention Committee.)
- With participation of individuals, families, agencies and community organizations, develop a protocol to identify potential individuals and families who may be heading for a homeless crisis and refer them to appropriate public resources.
- Lobby organizations that fund community redevelopment to require in their statement of work that any grantee of redevelopment funds be responsible for developing with the individual or family to be displaced, a feasible housing plan.
- Advocate for a Life Long Learning on Financial Management and Responsibilities Curriculum in the school system
  - Advocate to improve school curricula so children can secure living wage employment
  - This curriculum should include extra supports for homeless children so that they will not fall behind and be at risk of homelessness in their future or adult life.
  - Advocate for education and training opportunities for adults at all stages.
- Support and collaborate with the efforts of other advocacy groups and legal practices regarding an anti-predatory-lending policy.
- Establish expansion of the Vendor Payment Program for private landlords' participation. Some examples for achieving this are direct deposits or online payments to landlords.
- Advocate and create a system by which individuals and families needing a representative payee on a limited or fulltime basis can receive this assistance at a minimum or at no cost to the consumer regardless of age or disability.
  - o Identify the resources currently available for rep-payee.
  - o Identify gaps in the rep-payee system.
  - O Develop a plan to address the unmet needs.
  - o Distribute the information on the resources.
- To develop a comprehensive system to link individuals utilizing public social services to housing and supportive services especially those in the following systems: Children, Youth and Families, County Jail, state hospitals, state prisons and other regional healthcare facilities.
- Development or expansion of a service component within the three housing authorities to assist people in finding a solution to their dilemma before they are evicted from a unit.

Recommendation 2: To increase the affordable housing supply that is accessible to the chronically homeless and homeless over the next ten years by 1000 units and preserve existing low-income housing units where feasible.

**Problem:** The affordable housing supply of the County presents several challenging issues for those in need of housing. These challenges include: the lack of affordable housing units, the lack of units for persons with disabilities who are homeless and funding to develop affordable housing.

A study by the University of Pittsburgh, Graduate School of Public and International Affairs by Angela Williams Foster, Ph.D. and David Y. Miller, Ph.D. entitled "A Study of Affordable Housing: Supply and Demand in Allegheny County" found "Affordable Housing rents at or below 30% of household income were moderately or severely inadequate." The study further estimates that 15,000 households within Allegheny County are in an affordable housing crisis. Over the past five years, Point in Time studies have indicated the growing need of housing units for the homeless. On June 16, 2004, 1494 adults and 693 children needed a safe, affordable unit in which to live. In order for consumers to move to self-sufficiency, they must have an income to support their housing. Consumers have a difficult time locating units that they can afford to rent when they are earning \$5.15 an hour.

Allegheny County has many units that are not accessible for persons with physical disabilities. The housing stock in the area is old. Units are frequently not easily accessible because of steps, hallways and bathrooms. There is no central source for locating units that are accessible in the free market. Housing Authorities and the Pennsylvania Housing Finance Agency do maintain a list of available units in their systems. Within the homeless network, few units are available for persons physically disabled. As a result, housing sources are scarce to address this need and have presented consumers and service providers with challenging efforts to secure permanent affordable housing.

Safe affordable housing units for the low or moderate income are hard to find within Allegheny County. Both the consumer and provider find it difficult to secure quality housing in safe areas. Providers, who lease units from landlords under the HUD Supportive Housing Program and the DPW Homeless Assistance Program, report that it is difficult to locate units that will accommodate their consumers. Housing units that will accommodate individuals or families, which have a physical disability, are also difficult to locate. Landlords are reluctant to accept Section 8 when vouchers are available. Most low-income housing development has been within the city of Pittsburgh and not evenly distributed throughout the County.

Housing units, which are affordable for the consumer, are sometimes removed from the realm of affordability or are lost to other developments. Wood Street Commons is one example of affordable single-room occupancy units in the downtown area. The feasibility of this building continuing to provide affordable housing to very low or no income individuals is in jeopardy. A plan needs to be established to save this type of low-income housing, as well as other housing which is threatened throughout the county by changes in economics.

Homeless providers and developers are willing to partner to develop new housing opportunities. The greatest impediments are the complex maze to fund the development and the resistance by neighborhoods to this type of housing development. Over the past five years, three development projects failed to complete their projects due to lack of funding for the projects and three projects were subjected to Not in My Backyard (NIMBYism). Three projects currently are struggling to meet the HUD match requirements and raise the funds needed to begin the development. The complex nature of these projects can take two to three years before construction can begin while consumers' needs for housing is immediate.

#### Actions to be taken:

- To review the data available regarding the current housing and supportive service need.
- To identify specific areas where consumers want to live and match them to development projects.
- Based upon the identified needs and areas, over the next ten years develop 1000 new
  units of housing. These housing units would include the following: Housing First Model
  for single adults and families, Safe Haven for the Chronically Homeless, Single Room
  Occupancy units for both men and women, Permanent Housing for Persons with
  Disabilities and the Fairweather Lodge Model.
- To match developers with service providers to work on specific projects listed above and to design units that address the need for persons with physical disabilities.
- To utilize the Local Housing Option Teams (LHOT), as a vehicle to develop specific affordable housing projects and work as a community to locate the necessary funding to make the specific project a reality.
- To preserve and maintain current housing, which permanently houses low-income individuals and families.
- To establish a Housing Trust Fund to begin working towards the development of 15,000 housing units needed for the low-income individuals and families. Support Federal legislation that would support the Housing Trust Fund concept. In addition, this concept should also be developed on the state and local level.
- To advocate for legislation to adopt universal design for new units.
- To review the current usage of Transitional Units and convert 10% to Permanent with Disabilities or Housing First models over the next 5 years. Review this progress and determine if additional units should be converted after the first three years.

Recommendation 3: To develop, implement and maintain, as long as there is a demonstrated need, a comprehensive approach to ending chronic homelessness through three major components. They are: an engagement center, Harm Reduction Housing and expansion of Housing First Programs.

**Problem:** Currently, chronically homeless individuals live on the streets or from shelter to shelter if they are able to access a shelter. There is no permanent emergency shelter currently providing a Harm Reduction Housing Model. Shelters will not accept persons who are actively using drugs and or alcohol.

Currently, there is no permanent location to engage the chronic homeless or to offer a safe housing alternative when they are actively using. There is a need to engage this chronic homeless population, encourage trust and begin to work towards housing options. The Severe Weather Emergency Shelter (SWES) is open from December 1 to March 31 based upon weather conditions. Every Wednesday night during this period of time, an array of health, mental health and case management services are provided to the chronic homeless at this site. This model has demonstrated success in engaging the chronic homeless to receive assistance. The SWES operates as a Harm Reduction Housing Model that includes low threshold approaches to engagement. Persons actively using drugs and or alcohol are admitted; however, they do not use on the premises. Once the shelter closes in March, it is more difficult to engage this population.

An attempt to open an engagement center and shelter was not successful in the past for a variety of reasons including zoning and funding issues. Currently, the Homeless Outreach Coordinating Committee (HOCC) is actively planning a collaborative approach of providing an Engagement Center with supportive housing. As a part of this process, HOCC is reviewing models of Harm Reduction Housing as well as other Housing First Models to address the chronic homeless consumer.

#### Action to be taken:

- HOCC will visit other cities, which provide multi-faceted approaches to chronic homelessness:
- Develop a plan through HOCC for a multi-level system of Engagement, Harm Reduction housing and Housing First should be a part of the alternatives to the chronic homeless to secure housing and/or services. The plan will specifically identify leadership roles and collaborations that will occur.
- Establish a location. Determine whether it will be leased or owned space. Ensure the community is a part of the planning process and that zoning is appropriate.
- Develop a financial plan of housing and services including sources of funding on a short-term and long-term basis.
- Submit project to funding sources.
- Become operational within two years of development.
- Evaluate the progress of the engagement and housing models to address the chronic homeless issues.

## Recommendation 4: To improve how homeless consumers are accessing and receiving housing and or supportive services through the network.

**Problem:** Through consumer input at the Future Search Conference and at the Public Hearings, it was voiced that the current service delivery system is often driven by the provider agency and the individual program staff's opinion of what the consumer "needs". The system needs to empower the consumer to determine their needs and work with them to develop a realistic plan to move from homelessness.

In the past, there was a strong street outreach effort by formerly homeless individuals who voluntarily reached out to their "brothers and sisters" on the street. Over the years this effort has

slowly decreased resulting in primarily formal networks of service providers providing street outreach.

#### Actions to be taken:

- Change the "driver of the bus" from service providers to the individual/family that has a need for housing or prevention services.
- To investigate models of Peer Counseling Programs for chronically homeless and homeless individuals and families and establish a program that is managed by formerly homeless individuals and families.
- To re-establish the volunteer network of formerly homeless to conduct outreach on the streets to assist their "brothers and sisters".
- To establish a quality case management program across the homeless system with case management education and consumer input.
- To research and develop a mechanism of resource mapping for housing and services
  - o Identify all housing and service resources available within given geographic areas.
  - Provide a web-based link for homeless providers and consumers to housing and social service support in order to avoid duplication and match consumers to housing opportunities, which address their specific needs and wants.
  - o Include non-traditional companies and agencies that may be able to provide support services or housing opportunities outside of the traditional homeless provider network. (i.e. On the website there may be a link to PHFA who has a listing of their developed units.)

Recommendation 5: To co-locate homeless services within designated regional centers where a variety of community related programs and opportunities for resource dissemination, volunteering and socialization regardless of housing status is the focal point.

**Problem:** Accessing and receiving information and services can be very complex, frightening and frustrating to a person. The barriers of going to an unfamiliar place, dealing with people you do not know, asking questions that are complex can be difficult to a person in crisis regardless of whether the crisis is lack of housing or other related issues. To access the social service system benefits and services such as Social Security, SSI, Food Stamps, Medical Assistance, mental health services, child nutrition programs, day care, employment and training, housing and other services can often be time consuming and complex. The consumer can find it to be fragmented and isolated from the other programs. A person may have to go to a variety of places before all of their needs may be addressed.

Efforts have been made on a small scale to begin to co-locate programs. Under a SAMHSA grant the Allegheny County Department of Human Services and Health Care for the Homeless have co-located mental health providers and health care in order to holistically address consumer needs. Other providers are collaborating by sharing space where housing and employment services, mental health and health services are provided in one location. The SWES Wednesday night clinic is a collaboration of space where the consumer can come to one location to receive a variety of services including housing.

In conjunction with Recommendation 4 designing a consumer friendly system, the system could be re-designed in providing an access point where anyone needing a particular service or wanting to volunteer for a specific activity could go; the stigma of being "homeless" would disappear. By offering a human service center as a Regional Center, all people needing a service or wanting to volunteer regardless of need or disability could receive and provide information, housing opportunities, services, volunteer opportunities or socialization without the stigma of being "a homeless program" or a "mental health program" or a "senior program".

#### **Action to be taken:**

- Designate Regional Centers
  - o Conduct a systems design analysis of the current homeless network.
  - o Research and identify models that might be utilized in re-tooling such as the settlement house concept or partnerships with existing service centers.
  - Co-locate homeless services, where possible, in designated Regional sites in order for multiple services and purposes to be provided without the stigma of homelessness.
  - o Expand on work being done on systems design and tying in existing services and structures. Recruit the universities to participate and assist in the process.
  - o Create and maintain a homeless web page for anyone wanting information on availability of resources and issues related to homelessness and the Ten Year Plan
  - o Explore Creating a Cyber Center for homeless assistance.

## Recommendation 6: To develop short-term and long-term Public Awareness and Education Programs on Homelessness.

**Problem:** Currently the tendency is to focus on the negative aspects of homelessness rather than attempting to understand homelessness as a community-wide issue. People see the panhandlers in a variety of locations in Downtown Pittsburgh and do not know how to react other than to give money. When someone would like to assist in a given situation, they do not know where to turn.

#### **Actions to be taken:**

Short Term Goals

- O Compile information for distribution to public concerning homeless issues through agency and community newsletters.
- Educate government officials and other civic leaders on homeless issues and the programs already in operation by sending them copies of newsletters; meeting minutes, updates on the Futures Search Conference and the 10 Year Plan, etc.
- o Maintain/cultivate the relationship with multiple local media outlets to further publicize homelessness and the Ten Year Plan.
- O Develop personal stories of at least five homeless individuals who will serve as the "faces of homelessness" for use in the public awareness campaign.
- o Public Awareness Campaign
  - Identify target audiences with a specific message
  - Identify visible distribution locations for literature and speaking engagements
  - Identify partners to help produce materials, videos, and billboards.

### Long Term Goals

Educate the Public on Homelessness as a joint effort between the Homeless Alliance, business community and government.

- o Create Public Services announcements (PSA's) related to homeless issues in simplified language to provide basic information.
- Create ads to be placed in public transportation, movie theatres, hotels, etc.; design flyers to be inserted into playbills at various cultural and entertainment events.
- o Have advertising located in various locations with information about homeless issues.
- o Establish a speaker's bureau of homeless and formerly homeless consumers so they can tell their stories to the public.
- o Offer seminars about issues of unemployment and homelessness
- Update existing listings of where to get help for someone who is homeless or atrisk of homelessness
- Offer a centralized system for the Public to help make a difference in homelessness by contributions (both cash and in-kind), volunteering, etc.
- o Panhandling
  - Research current legislation and trends
  - Education of the public on panhandling and how to deal with it
- o Homeless Programs often face "Not in My Backyard (NIMBYism)" when it comes to programs related to homelessness. Many times the individual/family came from the neighborhood that is saying no to them. Educational awareness and legal action needs to be a part of plan to overcome this issue.

Recommendation 7: Establish a central repository for financial contributions from private sources. Annually, distribute these funds through the homeless network based upon performance, quality of program and responsiveness to identified needs in the continuum of care.

**Problem:** The current provider network must raise, as a whole, over 2 million dollars a year as match for the HUD Supportive Housing. These funds must be in hard cash and not in-kind. Local tax dollars are not available to support this match requirement. A few agencies over the past two years have chosen to relinquish programs to HUD or have transferred programs to other agencies that may be in better financial stability to administer the programs. Some agencies must spend valuable time focusing on fundraising instead of providing services to consumers.

#### **Action to be taken:**

- Advocate to HUD to change their regulation concerning match to include in-kind services as an allowable alternative to hard cash.
- To establish a central repository at a foundation in order for private individuals, organizations and corporations to make financial contributions. On an annual basis, funds would be dispersed to those agencies receiving public funding who are maintaining a

- quality program. The foundation would work in coordination with the County in the distribution of the funds.
- In conjunction with the establishment of the Homeless Fund, at least one annual event would be held to assist in bolstering the fund. This could be in the form of an annual dinner to honor consumers who have succeeded or providers and or staff who have made a difference in relationship to the homeless.

Recommendation 8: To advocate for comprehensive health and behavioral health services that are accessible, reliable and effective for people experiencing homelessness.

### **Problem:**

Currently, strides have been made to co-locate mental health clinics and primary health care for the homeless clinics through a SAMHSA grant from the U.S. Department of Health and Human Services. This process has allowed consumers who are experiencing homelessness, especially chronic homelessness, the ability to receive services in a more comprehensive and streamlined manner. Records are shared and the consumer receives both health and behavioral health services on site. This project is limited and does not address all the needs that exist. For example, a chronically homeless person diagnosed with the flu has no place to go to recover from the illness. A comprehensive strategy needs to be developed and implemented to identify the barriers to care, barriers to both physical and behavioral health care. Additionally, a plan needs to be developed to meet the educational needs of the consumer and providers concerning health care needs and health service responses.

#### Actions to be taken:

- Identify the barriers that still exist to accessing basic health and behavioral health services by the following:
  - o Concentrating on mobility of the service providers to meet the homeless needs instead of the homeless coming to them.
  - o Mapping out how the providers are providing the care and what data is being collected.
  - o Researching best practice models regarding the delivery of services and apply those models or pieces of models to our county, if appropriate.
- The Health Resources and Service Delivery Committee will identify basic health care needs that are to be addressed over the next year by means of the following:
  - Continue to hold regularly scheduled meetings for health reviewing data obtained through the SAMHSA grant and other health data sources and to identify new and recurring problems as presented by the committee members.
  - o Assess the health survey data collected in 2002 with assessment of the instrument used for this survey for accuracy and validity of the data.
  - o Increase participation in the committee's work though an enlarged committee membership or through appropriate collaborations for the development of data collection methods to better capture information about health care needs.
- Develop a reporting plan for Allegheny County Homeless Service providers as to how they provide health care or link their consumers to appropriate health care.
- Identify the basic educational needs of the consumers and providers for prevention and service delivery and develop a plan for the implementation of educational services.

- To investigate possibilities for the establishment of an effective, responsive respite care system for those who are homeless in need of respite care and follow-up with recommendations for plans to be developed and implemented for such care.
- Review discharge policies of health care institutions for patients identified as homeless, and develop an action plan to increase awareness, addressing findings and recommending changes where necessary and appropriate.

## Moving the Plan Forward

The best plan is only a plan written on paper until there is the commitment of community and the commitment of leadership to move it forward.

Allegheny County is the responsible entity for human services for the entire geographic area. With this authority, the Allegheny County Chief Elected Official, Dan Onorato, is committed to implementing the plan through the Allegheny County Department of Human Services. The Office of Community Services will have the authority to assist in implementing the plan. The Allegheny County Homeless Alliance, as a partner in the process and through the work of their committees, will be responsible for:

- 1. Assisting in implementation and evaluation towards achieving the recommendations set forth in the plan and modifying the plan, as adjustments are required over the ten-year period.
- 2. Promoting collaboration and partnerships through Continuum of Care;
- 3. Appointing representatives to be a part of the annual evaluation process to rank;
- 4. Reviewing the data generated by HMIS System in order to evaluate the progress made towards achieving the goals established by the Continuum of Care and the Ten Year Plan;
- 5. Reviewing policy and advocate for changes in public policy related to homelessness;
- 6. Endorsing the Annual Submission of the Continuum of Care.

The Homeless Alliance has continued to work on their goal of ending homelessness. Since 2003 when the Homeless Alliance was re-formulated, they have focused on providing effective programs with positive outcomes for homeless persons. The Future Search Conference that focused on developing this plan was a valuable experience for the members and now there is a plan to carry the work forward. The mission of the Homeless Alliance is a public/private partnership formed to assist Allegheny County, the City of Pittsburgh, the City of McKeesport and the Municipality of Penn Hills in eliminating homelessness and reviewing public policy, programs, activities, data and all other efforts that will improve the well being of homeless persons and families.

The committee structure has never stopped moving ahead on improving the plight of the homeless. They have been operating and working on issues before the Future Search Conference. Since the conference, three more committees have been added to the structure of the Homeless Alliance. These committees include the following: Housing Development, Homeless Prevention and Public Education and Awareness.

There are a total of eight working committees of the Homeless Alliance that continue to endorse the fundamental concepts of "Everyone has Value" and "Ending Homelessness Now: Creating

New Partnerships for Change." Individuals, agencies, businesses, corporations, government, foundations, medical community, the faith-based community, the education community and other entities are encouraged to join in this effort through one of the eight committees which will be focusing on implementing the various recommendations in the plan. The following committees are continuing their work through the assistance of government:

Name of Committee	Meeting Location	Focus/Goals				
Advocacy	Second Thursday of Each Month	Review current legislation and				
Chairperson:	Noon	policies on federal, state and local				
Theresa Chalich	Bethlehem Haven	levels				
	905 Watson Street	Advocating for system improvement				
	Pittsburgh	and change				
Health Resources and Service	First Tuesday of Each Month	To advocate for comprehensive				
Delivery	1 PM	health and behavioral health services				
Co-Chairpersons:	7227 Tioga Street	that are accessible, reliable and				
Karen Peterson	Homewood	effective for people experiencing				
Diane Johnson		homelessness.				
Homeless Outreach Coordinating	Fourth Thursday of Each Month	To better serve the hard to reach				
Committee (HOCC)	1 PM	chronic homeless who live on the				
Chairperson:	374 Lawn Street,	street				
Chris Laemmle	Oakland					
Housing Development	Committee meets every six weeks at	To create new units of affordable				
Chairperson:	various locations	housing				
Jeff Lengel						
Housing	Second Friday of Each Month	Address the barriers regarding				
Chairperson:	9:30 AM	housing				
Jerry Stradford	United Way Building (Lower Level)	Improve the quality of care for				
	One Smithfield Street	consumers in supportive housing				
	Pittsburgh					
Supportive Services	Third Wednesday of Each Month	Focusing on developing collaborative				
Chairperson:	9:30 AM	relationships between homeless and				
Cathy Dutko	United Way Building (Lower Level)	non-homeless providers				
	One Smithfield Street	To focus on a consumer friendly				
	Pittsburgh	driven system to better serve				
		consumers				
Prevention	First Wednesday of the Month	Improve and expand educational and				
Co-Chairpersons:	9AM	service opportunities that assist				
Linda Rae Kilderry	United Way Building (Lower Level)	persons/families before they become				
Meg Balsamico	One Smithfield Street	homeless or minimize the duration				
	Pittsburgh	and/or impact of homelessness on				
		individuals and families				
Public Awareness and Education	First Thursday of the month	Create public awareness around				
Chairperson:	9:30 AM	homelessness including the definition				
Sue Scheuring	Christian Associates	of homelessness, the people affected				
-	Corner of Butler and 37 <sup>th</sup> Streets	by it and its impact on the local				
	Lawrenceville	community.				
		Disseminate information to the public				
		that presents opportunities, strategies				
		to engage in the goal of ending				
		homelessness.				

Each committee will provide a quarterly report to be incorporated into an Annual Report on the plan's progress. This report will be available in September each year. The cycle for the report will be July 1 to June 30. This report will be placed on the Allegheny County Department of Human Services website with the quarterly reports. In addition, an annual report on the plan will be made at the Homeless Advisory meeting held on the first Friday in September at St. Joseph

House of Hospitality, Bedford Avenue, Pittsburgh by the chairperson of the Allegheny County Homeless Alliance.

After a 45-day public comment period and three public hearings, the plan was finalized and sent to Phil Mangano, Executive Director of the U.S. Interagency Council on Homelessness, in July 2005. Recommendations from this draft plan have been incorporated into the 2005 submission to HUD for McKinney Vento funding. As the plan moves forward, the elements will continue to be a part of the HUD process as well as a part of the documents submitted to the PA Department of Public Welfare. Refinement and change will occur and will be monitored by the county, the Homeless Alliance and the community at large.

## Future Search Model Attachment A

The Future Search model works in four basic ways:

- 1. To bring together all stakeholders (the "whole system");
- 2. To think globally, act locally;
- 3. To find common ground/desired futures;
- 4. To self-manage discussions and action plans.

The model has been used to enable there to be breakthroughs when dealing with complex socio-economic and health problems, environmental, employment and education issues, and health care concerns as they relate to and affect the desired outcome or "future." Small group tasks allow for all perspectives to be heard and to build on skills and knowledge that people already have. Everybody confronts our past, present and future in dialogue with others.

The five conference agenda components or tasks are:

- 1. The Past: Society, Self, Homelessness in Allegheny County
- 2. The Present: Trends Affecting Homelessness in Allegheny County
- 3. "Prouds" and "Sorries" regarding Us and Homelessness in Allegheny County
- 4. The Future: Desired Scenarios
- 5. Consensus and Action Planning

Source: Marvin R. Weisbord. *What is a Future Search Conference*. Flyer. SearchNet. Resources for Human Development, Inc. Philadelphia, PA

Ten Year Plan Committee List									
Name	Agency								
Lois Campbell	Campbell & Associates								
Tony Duckett	Former Consumer								
Don Green	Christian Associates of SW PA								
Gerry Gorelick	Gerald Gorelick& Associates								
Terri Laver	Allegheny County Dept. of Human Services								
Jeff Lengel	Residential Resources								
Mac McMahon	Northside Common Ministries								
Phil Pappas	Retired Activist								
Karen Peterson	Chairperson, Health and Service Delivery Committee								
Susan Scheuring	City of Pittsburgh Dept. of Planning								
Lara Sebolt	Allegheny County Dept. of Human Services								
Marilyn Sullivan	Bethlehem Haven								

## Future Search Participants Attachment B

Name	Agency	Address	Phone Number		
Aggazio, Frank	Allegheny County Housing Authority	625 Stanwix Street Pittsburgh, PA 15222	412 402-2450		
Balsamico, Meg	Municipality of Penn Hills	12245 Frankstown Rd. Pittsburgh, PA 15235	412 798-2129		
Barricella, Judith	Disability Connection Allegheny County Dept. of Human Services	United Way Building One Smithfield Street Pittsburgh, PA 15222	412 350-2769		
Bauer, Bethany Budd	City of McKeesport	201 Lyle Blvd. McKeesport, PA 15132	412 675-5060 ext 605		
Bendel, John	Federal Home Loan Bank of Pittsburgh	601 Grant Street Pittsburgh, PA 15219-4455	412 288-3820		
Bray, Schelarise	Sistersplace	460 Reed Street Clairton, PA 15025	412 233-3903 412 226-1918		
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Daniels, Lynn	U.S. Department of Housing and Urban Development	US Dept of Housing and Urban Development 339 Sixth Avenue Pittsburgh, PA 15222-2515	412 644-2999		
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Dickson, Mary Jo	Dept of Human Services	Wood Street Commons, 304 Wood Street, Pittsburgh, PA 15222	412 350-4293		
Downing, Jane	The Pittsburgh Foundation	One PPG Place 30th Floor Pittsburgh, PA 15222-5401	412 394-2645		
Duckett, Tony	Strength	700 E. Seventeenth Avenue Munhall, PA 15120	412 462-4439		
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Fenton, Patrick	ACTION Housing Inc.	Regional Enterprise Tower 425 Sixth Avenue Suite 950 Pittsburgh, PA 15219-1819	412 829-3910		
Flaherty, Michael, Ph.D.	IRETA	Regional Enterprise Tower 425 Sixth Avenue Suite 1710 Pittsburgh, PA 15219	412 391-4449		

Freyder, Paul	Salvation Army	865 W. North Avenue Pittsburgh, PA 15233	412-231-0500
Glacken, Gary	Veterans Administration	VA Pittsburgh Health Care System 122B-H 7180 Highland Drive Pittsburgh, PA 15206	412 365-5792
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Green, Rev. Dr. Donald B.	Christian Associates of SW PA	204 37th Street, Suite 201 Pittsburgh, PA 15201	412 688-9070
Hairston, Renee	Homeless Children's Ed. Fund	2100 Smallman St. 2nd Floor Pittsburgh, PA 15222	412 562-0154
Hanley, Kevin	South Side Local Development Co.	50 South 14th Street Pittsburgh, PA 15203	412 481-0651
Hannigan, John	Diocese of Pittsburgh	111 Blvd of Allies Pittsburgh PA 15222	412 456-3162
Harris, Peggy	Three Rivers Youth	2039 Termon Ave., Pittsburgh, PA 15212	412-766-2215
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Hockenberry, Susan	Local Government Academy	800 Allegheny Ave. Suite 402, Pittsburgh, PA 15233	412 237-3171
Hogan, Ernie	East Liberty Development	115 1/2 N. Highland Avenue Pittsburgh, PA 15206	412 361-8061
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	T		Τ
Phifer,William	Allegheny County Dept of Human Services	United Way Building Fourth Floor, Pittsburgh, PA 15222	
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Snipe, Rich	URA	200 Ross Street Pittsburgh, PA 15219	412 255 6586
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Thompson, Ken	University of Pittsburgh and Clinician, WPIC	200 Lothrop Street Pittsburgh, PA 15213	
Vislay, Robert	Methodist Union of Social Agencies	131 E. 9th Avenue Homestead, PA 15120	412 583-4944 412 461-1800
Walnoha, Adrienne	Community Human Services	3201 Craft Pl., 3rd fl., Pittsburgh, PA. 15213	412-621- 6513x101
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Yoo, Seunghyun, Dr.	University of Pittsburgh Graduate School of Public Health	Dept of Behavioral and Community Health Sciences, 231 Parran Hall, 130 DeSoto St Pittsburgh, PA 15261	412 624-3613
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	Human Services	Street Pittsburgh, PA 15222	

## Scribes/Staff and Consultants for Conference

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Susan Scheuring	City of Pittsburgh Dept. of Planning	412 255-2669
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## Allegheny County Homeless Alliance Attachment C

The Allegheny County Homeless Alliance, the conference sponsor, is a private-public partnership established in 2003 to prevent and address homelessness through an organized, sustained collaborative effort. The Homeless Alliance focuses on the needs of the homeless and near homeless of Allegheny County, the City of Pittsburgh, the City of McKeesport and the Municipality of Penn Hills. Current membership includes representation from the following categories of membership:

- Municipality of Penn Hills
- City of McKeesport
- City of Pittsburgh
- Allegheny County Department of Human Services
- Allegheny County Department of Economic Development
- Allegheny County Office of Behavioral Health
- Veterans Programs
- Pittsburgh Police Department
- Homeless Service Agencies and Consumers
- Healthcare Providers
- Public Health
- Business
- Residential Cultural Trust
- Foundations
- Pittsburgh Downtown Partnership

The Homeless Alliance is structured with co-chairs and standing committees. The standing committees are as follows:

- Health Resources and Service Delivery Committee
- Advocacy and Public Policy Committee
- Housing Committee
- Homeless Outreach and Coordinating Committee
- Supportive Services

An Ad-hoc Committee, Future Search Conference Committee, was established a year ago for the purpose of planning this conference. Committees meet regularly and report to the larger Alliance body at its regular meetings.

The Allegheny County Department of Human Services, Office of Community Services, Bureau of Hunger and Housing Services provides staff support to the Homeless Alliance for meeting notifications and staffing of the meetings and for maintaining and distributing meeting minutes.

## Historical Perspective of Homeless Committees in Allegheny County Attachment D

Since the early 1980's, there has been a broad spectrum of community leaders working together to address the issues of homelessness. Funding began in 1983 from the Commonwealth of Pennsylvania to assist Emergency Shelters. With this funding, a joint county and city taskforce was appointed to study and recommend ways to combat the many issues of homelessness in the county. As a result of the taskforce report, a steering committee was appointed and operated from 1984 to 1996. This group was dissolved when new commissioners were elected in 1996. The primary goals of the Steering Committee were reducing shelter beds while increasing the number of programs that would move the homeless from emergency shelters toward permanent housing. While alternative types of housing were developed, panhandling increased and the levels of drug and alcohol and mental health issues increased.

In response to the growing issues, in 1994-95 there was a broader community group formed known as the Allegheny County/ Pittsburgh Initiative. The overall goal of the initiative was to elevate 500 homeless individuals over a five-year period to the highest level of self-sufficiency possible. The five-year plan was developed that addressed Prevention, Outreach, Drop-in Centers and Intake, Treatment and Housing Permanent Supportive Housing, Training and Jobs, Benefits Advocacy and Networking Information Systems. After the release of the Initiative, the electorate voted in new leadership on the Board of Commissioners and the HUD Continuum of Care application of 1996 was submitted. The Initiative agenda was not a priority due to other pressing issues within the county.

In conjunction with the Steering Committee and then with Allegheny County/Pittsburgh Initiative, the Homeless Advisory Committee was formed and continues to meet on a quarterly basis. The Homeless Advisory Committee began meeting in 1983 to discuss issues, bring trends and problems to the group in order to find alternative solutions or share solutions that a given agency may have found to be a problem. This group meets the first Friday of March, June, September and December to network and share issues of concern.

In 1997, the Homeless Alliance was formed utilizing three separate committees, which reported to the Allegheny County Department of Human Services on homeless issues. The three committees were primarily providers and government representatives. The three committees were: the Continuum of Care Committee, Permanent Housing Committee and Health and Service Delivery. These committees assisted in developing the framework for submission of applications under the HUD SuperNOFA Continuum of Care Process, identified and addressed housing issues and health-related issues of the homeless. Specific projects were developed and implemented as a result of the hard work of Homeless Alliance Committees. However there was no overall structure for these committees to receive guidance and to provide input. The membership within the committees was limited and needed to be broader, as well as more extensive long-term planning was needed. Annually, under the HUD Continuum of Care, an 18-month plan is submitted. Currently, there is no long-term plan to address homelessness.

As a result of the tragic murder of a child on the Northside of Pittsburgh by a homeless man, the Mayor of Pittsburgh, Tom Murphy, appointed a Task Force in late 2000 to bring together law enforcement officials, social service providers, neighborhood residents and business owners to understand the causes and effects of homelessness and related public safety issues of life in the streets; to develop solutions that are effective in helping individuals move to self-sufficiency; to improve the quality of life, safety and economic viability of our neighborhoods

and communities; and accomplish this with sustained leadership and accountability. As a result of this task force, the following recommendations were suggested: (1) a Street Behavior Initiative Demonstration Project was implemented. This pilot project was suspended after one year of operation. (2) additional supports and services needed by street behavior initiative be developed such as alternative housing such as a safe haven or wet shelter and finally to effectively meet the needs of those still homeless and effectively address the problems of street behavior; (3) improve quality of life in the community by establishing a public safety committee to study and promulgate existing ordinances or refine those ordinances as needed to achieve the goals of the street behavior initiative and (4) to establish an advocacy organization to study existing or impending changes in the social support systems, monitor the trends that might predict emerging problems and provide overall coordination and comprehensive planning of efforts to service the homeless and others in need of similar services in our community.

In 2003, the Homeless Alliance was reformulated into a formal working public private partnership, which broadly represents not only government and providers but also consumers, faith based organizations, business and other community individuals and organizations. The mission of the Homeless Alliance is a private public partnership to prevent and address homelessness through an organized, sustained collaborative effort. The needs of the homeless and near homeless of Allegheny County, the City of Pittsburgh, the City of McKeesport and the Municipality of Penn Hills will be addressed by the Homeless Alliance.

# Attachment E Housing Units From 2005 Continuum of Care

Exhibit 1: Continuum o	Housing Units From 2005 Continuum of Care  Exhibit 1: Continuum of Care Housing Activity Charts												
Fundamental Com					Activity Cha	ırt							
EMERGENCY SHELTER	?												
		HMIS				Targe	et Pop.	20	05 Year-Re Units/Bed				Other leds
Provider Name	Facility Name	Part. Code	Ye Rot	ber of ar- and ds	Geo Code	A	В	Family Units	Family Beds	Individu al Beds	Total Year- Round	Season al	
Current Inventory			Ind.	Fam.									
Allegheny Valley Council of Churches	Emergency Shelter	A		14	429003	M		4	14		14		
Alle Kiski Hope Center	Emergency Shelter	N		23	429003	M	DV	12	23		23		
Bethlehem Haven	Emergency Shelter	A	27		425529	SF				27	27		
Community Human Services	Emergency Shelter	N	32		425529	SMF				32	32		
Community Human Services	Severe Emergency Shelter	A			425529	SMF					0	110	
East End Cooperative Ministries	Emergency Shelter	S	24		425529	SM				24	24		5
East End Cooperative Ministry	Orr Compassionate Care Center	S	12		425529	SMF				12	12		
FamilyLinks	Emergency Shelter	A	18		425529	YMF				18	18	4	
Light of Life Ministries	Emergency Shelter	A	35		425529	SM				35	35		5
Northside Common Ministries	Pleasant Valley Emergency Shelter	A	25		425529	SM				25	25		
Primary Care Health Services	Emergency Shelter	A		20	425529	FC		9	20		20		
Salvation Army	Family Crisis	N		35	425529	FC		20	35		35		
Womanspace East Inc	Emergency Shelter	A		18	425529	M		8	18		18		
Womansplace	Emergency Shelter	N		24	424086	M	DV	7	24		24		
Womens Center & Shelter	Emergency Shelter	N		34	425529	M	DV	12	34		34		
YMCA McKeesport	Emergency Shelter	A	25		424086	SMF				25			

198 168

TOTALS

TOTALS

Transitional Housing	omponents in CoC										
Transmonal Housing		HMIS				Tai	rget	2005 Year-Ro	ınd Unit	ts/Beds	
		-				P	op				
Provider Name	Facility Name	Part. Code	#Yr. F	Round	Geo Code	A	В	Family Units	Family Beds	Indivi dual Beds	Total Year- Round Beds
Current Inventory			Ind	Fam							
Alle Kiski Hope Center	Transitional Program	N		15	429003	М	DV	5	15		15
East End Cooperative Ministry	Bridge Housing Program	N	12		425529	SM				12	12
East End Cooperative Ministry	Penn Free Bridge Housing	N		36	425529	FC		36	36		30
First Step Recovery Homes	Transitional Program	N	14		424086	SM				14	14
First Step Recovery Homes	Bridge Housing Program	N	5		424086	SM				5	
Light of Life Mission	Bridge Housing Program	A	30		425529	SM				30	30
Light of Life Mission	Penn Free Bridge Housing	A		45	425529	FC		15	45		45
Light of Life Mission	CMI Program	N	8		425529	SM				8	8
Salvation Army/Harbor Light	Bridge Housing Program	N	3		425529	SM				3	3
Salvation Army/Harbor Light	Penn Free Bridge Housing	N	6		425529	SM				6	(
Strength Inc	Bridge Housing Program	A	6		429003	SM				6	(
Bethlehem Haven	Step Up Program	A	10		425529	SF				10	10
Miryams	First Step Project	N	10		425529	SF				10	10
Miryams	Next Step	N	6		425529	SF				6	(
Miryams	Project Believe	N	4		425529	SF				4	4
Miryams	CMI Program	N	10		425529	SF				10	10
YMCA of McKeesport	Bridge Housing Program	A	14		424086	SM F				14	14
St Vincent de Paul	Michael's Place	A	9		425529	SM				9	Ģ
Community Human Services	Wood Street Commons CMI	A	15		425529	SM F				15	1:
Pittsburgh AIDS Task Force	Transitional Program	A	10		429003	SF M	AID S			10	10
UPMC/WPIC	Neighborhood Living Program	A		55	429003	M		55	55		55
UPMC/WPIC	Supportive Housing Program	A		8	429003	M		5	8		8

Veterans Leadership Program	Transitional Program	A	25		429003	SM F	VE T			25	25
Veterans Leadership Program	Bridge Housing Program	A	7		429003	SM F	VE T			7	7
Veterans Leadership Program	Penn Free Bridge Housing	A	16	2	429003	M	VE T	1	2	16	18
FamilyLinks	Penn Free Bridge Housing	A		12	429003	FC		12	12		12
Family Health Council	Healthy Start House	A		18	429003	FC		6	18		18
Bridge to Independence	Debra House	A		30	429003	FC		16	30		30
Bridge to Independence	Families First	A		16	429003	FC		8	16		16
Bridge to Independence	Families Focus	A		20	429003	FC		4	20		20
Bridge to Independence	Penn Free Bridge Housing	A		35	429003	FC		15	35		35
Goodwill Industries	Heart House	A		7	425529	M		3	7		7
House of Crossroads	Residential	A		10	425529	FC		5	10		10
House of Crossroads	Village II	A		20	425529	FC		20	20		20
McKeesport Collaborative	McKeesport Collaborative	N		16	425529	FC		8	16		16
HEARTH	HEARTH	A		45	425529	FC		15	45		45
Mercy/ACTION Housing	Housing Plus I	A	18	4	429003	M		2	4	18	22
Primary Care Health Services	Open Arms	A		36	425529	FC		9	36		36
Primary Care Health Services	Penn Free Bridge Housing	A	2	2	425529	M		1	2	2	4
Primary Care Health Services	Bridge Housing Program	A		22	425529	FC		12	22		22
Salvation Army	Family Crisis Center	N		10	425529	M		5	10		10
Sisters Place	Transitional Program	A		19	429003	FC		8	19		19
Sojourner	Sojourner House	Z		14	425529	FC		14	14		14
UPMC/WPIC	Dan Robinson Project	N	10		429003	M				10	10
Womanspace East	Bridge Housing Program	A		10	425529	FC		5	10		10

Womanspace East	Transitional Program	A		20	425529	FC		10	20		20
YWCA of McKeesport	Transitional Program	A		4	424086	FC		2	4		4
YWCA of McKeesport	Bridge Housing Program	A		10	424086	FC		5	10		10
YWCA of Greater Pittsburgh	Bridge Housing Program	A		37	429003	M		16	37		37
	TOTALS		250	578		TOT	ALS	318	578	250	828
Under Development	Anticipated Occupancy Date										
Rodman Street Baptist Church	Transitional Program	2006			425529	FC		5	10		10
Auberle	Movin' On	2005			429003	SM				10	10
						TOT	ALS	5	10	10	20

Fundamental Components in CoC System - Housing Activity Chart  Permanent Supportive Housing											
Permanent Supportive H	ousing	HMIS				Target Pop		2005 Year-Round Units/Beds			
Provider Name	Facility Name	Part. Code	#Yr. R	ound	Geo Code	A	В	Family Units	Family Beds	Individual /CH Beds	Total Year- Round Beds
Current Inventory			Ind	Fam							
East End Cooperative Ministry	Samaritan House	A	8	0	425529	SM	СН	0	0	8/CH8	8
WPIC/UPMC	Mathias Project	N	14		425529	SM	СН			14/CH14	14
Northside Common Ministries	Permanent Housing Program	A	11		425529					11	11
ACTION Housing	Housing Plus 2	A	11		429003	SMF				11	11
Hosanna House	New Foundations	N		65	425529	FC		20	65		65
Light of Life Mission	Tripoli Street	A	12		425529	SM				12	12
Veterans Leadership Program	Permanent Housing Program	A	5		429003	SMF	VET			5	5
Veterans Leadership Program	Permanent Housing Program	A	10	15	429003	M	VET	5	15	10	10
Pittsburgh AIDS Task Force	Choice 2	A	10	13	429003	M	AIDS	5	13	10	23
Pittsburgh AIDS Task Force	Choice 1	A	10	13	429003	M	AIDS	5	13	10	23
Primary Care Health Services	Sankofa	A		22	425529	FC		11	22		22
House of Crossroads	Delores Howze	S	4	16	425529	M		8	16	4	20
House of Crossroads	Village 1	S		29	425529	FC		10	29		29
YWCA of Greater Pittsburgh	WISH	N		60	429003	FC		15	60		60
Community Human Services	Families United	A		63	429003	M		18	63		63
Sisters Place	Permanent Housing Program	A		56	429003	FC		15	56		56
Residential Resources	Braddock Apartments	S		13	429003	FC		3	13		13
Sojourner	Mom's House	A		21	425529	FC		6	21		21
Veterans Leadership Program	Project Valor	A	4	18	429003	M	VET	6	18	4	22
	mom i r		99	40.4		TO	TATO		0		400
TOTALS				404		10	TALS		404	99/22CH	
<b>Under Development</b>			cipated O	ccupancy						77	
Bethlehem Haven	SOAR	2005			425529		CH			16/CH 16	16
Parental Stress	Family Empowerment Housing Project	2005			425529			5	10		10
Strength Inc	Generations	2006			429003	SM				10	10

U	Permanent Housing Program	2005	425529	FC		6	12		12	
				TOTALS		11	22	26/16CH	48	

## Attachment F

## Exhibit 1: Continuum of Care 2005 Continuum of Care Service Activity Chart

Describe the fundamental service components of your Continuum of Care system currently in place, and any additional services being planned. Describe how homeless person's access or receive assistance under each component other than Outreach. (Counts as one page.)

#### Fundamental Components in CoC System -- Service Activity Chart

Component: Prevention

<u>Services in place</u>: Pennsylvania and County Homeowners Emergency Mortgage Assistance Programs provides emergency mortgage assistance due to economic downsizing and job loss

Service Providers: Urban League of Pittsburgh and ACTION Housing

Component: Prevention

Services in place: Protection of housing for low-income people, assistance with assurance of uninterrupted essential utility service, improving client knowledge of housing and utility laws and of community resources for persons throughout the Neighborhood Legal Services Service (NLSA) Area. The program provides assistance with eviction from Public, Section 8, subsidized or private housing, mortgage foreclosure, filing bankruptcies to protect a residence, denial or termination of public or subsidized housing benefits, tax sales of residence, and other meritorious housing cases depending upon program resources and or administrative approval. Also provides legal information, brief advice and referrals for people of limited means and persons may set up appointments to attend either the family law or debt advice clinics each of which is held on Wednesday evenings at NLSA Offices.

Service Providers: Neighborhood Legal Services Service (NLSA)

Component: Prevention

<u>Services in place</u>: Housing Choice Voucher Program links low-income Housing Choice Voucher participants and homeowners who pay their own utilities to Conservation Consultants Inc. that promote the responsible use of home energy and money-saving strategies that reduce utility costs.

Service Providers: Conservation Consultants, Inc.

Component: Prevention

<u>Services in place</u>: Rental Assistance Program provides for the following elements: security deposits and first month's rent to persons who are homeless or near homeless living with a relative or friend; prevents eviction for persons who owe back rent to landlord. Program.

Service Providers: Urban League of Pittsburgh

Component: Prevention

Services in place: Through the Allegheny County Department of Services Children Youth and Families, the Urban League has a contract to pay rent for families in danger in losing their apartment and their children. The family must have an active CYF case and the landlord must be willing to keep the family once the back rent is paid. The Urban League provides budgeting classes for the family and works with the family to establish a budget plan.

Service Providers: Children and Youth Services and Urban League of Pittsburgh

Component: Prevention

<u>Services in place</u>: Family Self-Sufficiency Program is administered to assist persons over a five-year period toward securing a more permanent residence.

<u>Service Providers</u>: Urban League of Pittsburgh and ACTION Housing in conjunction with the Housing Authorities

Component: Prevention

<u>Services in place</u>: Forensic Jail Re-Integration Program provides inmates with mental health and drug and alcohol issues to receive case management and housing assistance prior to and after discharge from state and county prisons/jail. The program assists the consumer with linkages to the supportive services and housing re-integrating the person to the community. Service Providers: WPIC, Goodwill, Michael's Place, Strength, First Step Recovery Homes,

Component: Prevention

<u>Services in place</u>: A directory of financial information to assist consumers in a variety of issues including predatory leading, foreclosures, mortgages, etc. This document was distributed to the homeless provider network to help them help their consumers. Training will be scheduled for providers on budgeting and related financial issues.

Service Providers: Federal Reserve Bank of Cleveland

Component: Prevention

<u>Services in place</u>: Service Planning/Case Management Counseling, Life Skills Education, respite Child Care, and Crisis Intervention for individuals and families especially families with children at risk for substance abuse, child abuse and neglect, delinquency and eviction residing primarily in the Hill District, Bluff, Oakland and Garfield.

Service Providers: Addison Behavioral Care Inc.

Component: Prevention

<u>Services in place</u>: Counseling, Life Skills Education, Service Planning, Case Management, Transportation and Homemaker services for low-income adults residing in Lawrenceville, Bloomfield, East Liberty, Garfield, the Hill District, Homewood –Brushton, Lincoln - Larimer, North Side, Northview Heights, Polish Hill, East Hills, and the Addison Terrace, Aliquippa Terrace, and Bedford Dwellings public housing communities.

Service Providers: Catholic Charities of the Diocese of Pittsburgh, Inc.

Component: Prevention

<u>Services in place</u>: Individual, family, and group therapy for children and their caretakers who have had a family member murdered or who have witnessed a violent crime. Also provides community awareness and training programs.

Service Providers: Center for Victims of Violence and Crime

Component: Prevention

<u>Services in place</u>: Food Stamp Outreach and Emergency Food Network for individuals and families

Service Providers: Hunger Services Network through the Urban League of Pittsburgh, Inc.

Component: Prevention

<u>Services in place</u>: Counseling, Employment and Service Planning/ Case Management services for female offenders.

Service Providers: The PROGRAM for Female Offenders, Inc.

Component: Prevention

Services in place: Employment Support Services for Veterans enrolled in the Jobs for

Veterans Program

Service Providers: Veterans Leadership Program

**Component:** Veterans Outreach

Outreach in place: Highland Drive Veterans Administration Center provides a comprehensive outreach program to veterans under the Veterans Administration Comprehensive Homeless Centers Program. Workers from the Highland Drive Center will visit emergency shelters, transitional housing, SROs and do street outreach in collaboration with Community Human Services, WPIC, Health Care for the Homeless, Operation Safety Net or Operation Save a Life to connect Veterans with services. On a monthly basis, a Stand Down Clinic is held at the Northside Salvation Army for the homeless. This offers an opportunity for the homeless vets to begin discussing issues with either the VA Highland Drive staff or staff from the Veterans Leadership Program. This method allows both the sheltered and unsheltered veteran to be approached in a non-threatening manner and a trust element can be developed.

<u>Service Providers</u>: Dept. of Veterans Administration Homeless Outreach Program and Veterans Leadership Program

Component: Medical Outreach

<u>Outreach in place</u>: Operation Safety Net provides medical outreach and services to homeless on the streets and in shelters. A van funded by HUD provides mobile on-site medical evaluation. In addition, formerly homeless work with a medical team to attend to homeless reluctant to go to the van.

Service Providers: Mercy Health System Operation Safety Net

Component: Domestic Violence Outreach

Outreach in place: There are three major domestic violence information and referral hotlines and shelters in Allegheny County. These providers are located in the central city, the northern area of the county and the southern area of the county. These programs also provide prevention activities along with their outreach components.

Service Providers: Alle Kiski Hope Center, Woman's Center and Shelter and Womansplace

Component: HIV/AIDS Outreach

Outreach in place: The Pittsburgh Aids Task Force actively outreaches to the substance abuse and gay/lesbian community. An information and referral hotline is in place. Calls are screened and assessed for appropriateness. In addition, a case manager is funded through HSDF funds to provide active outreach in the community with substance abuse issues. Homeless providers receive training and information on services available through PATF. Homeless providers are making this connection in order to utilize scarce resources. PATF also has several HUD grants to provide transitional and permanent housing to this population.

Service Providers: Pittsburgh AIDS Task Force

Component: *Outreach* 

Outreach in place: Two agencies have street outreach workers who locate youth on a regular basis on the street. Three Rivers Youth has a Drop-In Center in the Strip District, a "hot" area for the youth. Many of the youth sleep in abandoned buildings in the Strip and they will come in to THE HUB on a daily basis. Case Managers and the Program Director work with the youth to connect them to services and to find assistance. FamilyLinks operates a homeless shelter near the downtown area. This facility is well known to the street youth.

Service Providers: FamilyLinks and Three Rivers Youth

Component: Supportive Services

<u>Services in Place</u>: Case Management is provided by many of the shelters, all of the transitional and permanent housing with disabilities programs. In addition, generic case management is provided to the street homeless and those that fall through the cracks of the system. Currently, Allegheny County has contracts with two agencies to provide case management services to the homeless persons who are doubled up, evicted or living on the streets.

<u>Service Providers:</u> Primary Care Health Services/Health Care for the Homeless Kids Start Program and ACTION Housing

Component: Supportive Services

Services in Place: A state funded Innovative Service Program was developed and began operations in April 2002. In an effort to streamline the services offered by the agency and to provide a consistent outreach worker and case manager for the street homeless, case managers were assigned to follow the consumer from initial contact until the person no longer needed services. The program provides any and all of the services that the consumer may need. This may include: case management, housing, food, furniture, first month's rent, life skills, etc.

Service Providers: Community Human Services Corporation

Component: Supportive Services

<u>Services in Place</u>: Drug and Alcohol Services provide emergency services, day treatment, outpatient services, in-patient services, partial hospitalization, non-hospital residential treatment, and transitional living through a network of drug and alcohol providers. Service Providers: Sojourner, Gateway, UPMC Braddock Hospital, Mercy Behavioral

Health

Component: Supportive Services

<u>Services in Place</u>: County Behavioral Health funds and PATH McKinney Act support behavioral health services to the homeless on the street and in the housing components. Mobile Crisis Units are available when those services are needed.

Service Providers: Mercy Behavioral Health and WPIC.

Component: Supportive Services

Services in Place: Regional Service Centers offer employment opportunities to individuals qualifying under the various Welfare to Work Programs. Eligible participants include individuals receiving welfare benefits or having children on welfare and also other unemployed or underemployed individuals needing information or referral to other community services including CareerLink services. Skills training and job placement are provided. The Regional Service Centers provide the following services: universal access to job seekers, employed as well as unemployed, for job search and job matching utilizing the state CareerLink system, client orientations and workshops designed to enhance their job search activities, adult literacy and GED preparation classes and an out-of-school youth program operated by Hill House Association. Homeless providers are required to report the number of monthly referrals made to the Regional Services Centers. There are four Regional Service Centers. They are: Downtown Regional Service Center, McKeesport Regional Service Center, Braddock Regional Service Center, and the Wilkinsburg Regional Service Center. Homeless providers are required to report the number of consumers who are linked with the Regional Service Centers.

Service Providers: Hill House Association, Allegheny County Dept. of Human Services,

Component: Supportive Services

Services in Place: Allegheny County has three CareerLink Centers operating in Downtown Pittsburgh, Alle-Kiski and McKeesport. CareerLink offers a variety of workshops on site with flexible hours designed to help registered job seekers work on job interviewing techniques, resumé writing skills, career exploration, acquiring upgraded computer software skills and other vocational enhancements. CareerLinks is organized in partnership with a variety of government agencies and community organizations to deliver seamless services to both the employer and the job seeker. A feature of the program is the one-on-one help the client receives when he/she walks in the door and the fact that employers have on-site access to jobseekers at these facilities. Homeless providers refer and take consumers to the CareerLink Centers when working on employment and training issues.

<u>Service Providers</u>: Allegheny County Department of Human Services through district offices regionally placed.

## <u>Component: Supportive Services</u>

<u>Services in Place</u>: Veterans Leadership Program receives funding from the Department of Labor to provide an employment and training program for veterans who are homeless. The program works with consumers based upon their individualized goal plans and establishes a program to meet their needs. This is a part of their transitional and permanent housing programs.

Service Providers: Veterans Leadership Program

Component: Supportive Services

<u>Services in Place</u>: Bethlehem Haven and Duquesne University receive funding from the Welfare to Work and Allegheny County Act 137 funds to provide an employment and training program to chronically homeless consumers. The program works with consumers based upon their individualized goal plans and establishes a program to meet their needs. <u>Service Providers</u>: Bethlehem Haven and Duquesne University

Component: Supportive Services

<u>Services in place</u>: Three Rivers Table food redistribution program for surplus prepared and perishable foods.

Service Providers: Greater Pittsburgh Community Food Bank

Component: Supportive Services

<u>Services in place</u>: Food Distribution to over 250 pantries and 40 homeless providers in Allegheny County.

Service Providers: Greater Pittsburgh Community Food Bank

Component: Supportive Services

<u>Services in place</u>: Case management to assist individuals and families in increasing self-sufficiency.

Service Providers: North Hills Community Outreach Inc.

Component: Supportive Services

<u>Services in place</u>: Case management to assist individuals and families in increasing self-sufficiency.

Service Providers: Rainbow Kitchen Community Services

Component: Supportive Services

Services in Place: Over the past several years, HUD has funded seventeen Supportive Service Only. All of these programs are not traditionally funded by other sources and frequently cross-categorical funding. These programs have assisted single adults, families and children in families to cope with the issues of homelessness and move towards successful transition to permanent housing. Over the past year, 939 individuals and 303 families have moved from homelessness to permanent housing. Of these individuals, 748 moved from shelter to permanent housing and 173 families moved from shelter to permanent housing. Programs have established or purchased services for child day care, case management, life skills education, employment and training, transportation, drug and alcohol treatment and mental health treatment. These efforts specifically included:

Service Provider	Services in Place	Population Served	Capacity
Women's Center and	Case Management	Women/Children	30
Shelter		with Domestic	
Safe Spaces		Violence	
Women's Center &	Case Management	Women/Children	20
Shelter Home Find		with Domestic	
Program		Violence	
Womanspace East	Case Management	Women/Children	5
Outreach Program			
UPMC/WPIC	Children's Case	Women/Children	22
Mathilda Theiss Center	Management and		
	Development		
	Program		
Bethlehem Haven	Case Management	Women	200
902 Team	Mental Health		
	Services		
Bethlehem Haven	Case Management	Women	10
STAR Program			
Miryam's	Case Management	Women	33
Project Home			
Mercy Hospital	Case Management	All Populations	45
Operation Safety Net			
From the Streets Up			
Community Human	Case Management	All Populations	26
Services Corp.			
Supportive Relocation			
Program			
Strength, Inc.	Case Management	Men	22
Certain Futures			
Veterans Leadership	Case Management	Veterans	100
Program			
Case Management			
YWCA of Greater	Case Management	Women and	10
Pittsburgh		Children	
Family Advocacy			

Program			
Allegheny Valley	Case Management	Families	20
Council of Churches			
Sisters Place	Social Worker	Women and	29
	providing	Children	
	Counseling		
Society of St Vincent De	Case Management,	Men	9
Paul	Outreach Health		
Michael's Place	Services, Food		
	Clothing and		
	Employment		
	Services		
Alle-Kiski Hope Center	Life Skills	Single Women,	43
	Education and	Women and	
	Employment	Children	
	Counseling		

Component: Supportive Services

Services in place: Community Recovery Services focused on drug and alcohol addiction and

recovery services.

<u>Service Providers</u>: East Liberty Family Health Care Center

Component: Supportive Services

<u>Services in place</u>: Case Management, Supportive Life Skills Mentoring, Children's Program Service Providers: The East Side Community Collaborative/Primary Care Health Services

Component: Supportive Services and Prevention

Services in place: Intensive Case Management for incarcerated/post release low-income

women to assist them in stabilizing their lives.

Service Providers: Lydia's Place

Component: Supportive Services

Services in place: Life skills Education focused on HIV/AIDS risk reduction among

substance abusing individuals.

Service Providers: Pittsburgh AIDS Task Force

Component: Supportive Services

Services in place: Intensive Case Management for low income women/families in the Mon

Valley who are at risk of becoming or already are HIV/AIDS

Service Providers: Mon Yough Community Services, Inc.

**Component:** Supportive Services

<u>Services in Place</u>: Primary Care Health Services provides access to comprehensive health care services through on-site congregate clinics in shelters, transitional housing sites and permanent housing. They have 18 satellite locations throughout Allegheny County.

Service Provider: Primary Care Health Services Clinic Sites

Clinic Site	Type	Population
Bethlehem Haven	Medical and	Women
Uptown	Dental	
Birmingham	Medical	Adults
Clinic		
Salvation Army		
South Side		
The HUB	Medical	Youth
Strip District		
The Intersection	Nursing Medical	Adults and
McKeesport	_	Children
Jubilee Kitchen	Medical	Adults and
SoHo District		Children
Operation Safety	Medical	Adults and
Net		Children
Pittsburgh		
St Joseph's House	Nurse	Men
of Hospitality		
Hill		
Miryam's	Medical	Women
Uptown		
Light of Life	Medical	Men
Rescue Ministry		
Northside		
Salvation Army	Medical	Adults and
Family Crisis	Pediatrics	Children
Center		
Downtown		
Salvation Army	Medical	Adults
Northside	VA	Veterans
	Medical Nurse	
D14 37 11	M - 1:1	Man
Pleasant Valley	Medical	Men
Shelter Northside	M - 1'1	X/ 41-
FamilyLinks	Medical	Youth
Shelter		
Uptown	M - 1'1	37 41-
FamilyLinks	Medical	Youth
McKeesport	M - 1'1	A 114-
Wood Street	Medical	Adults
Commons	Nurse	
Downtown Control Avenue	Numa	A dulta
Centre Avenue YMCA	Nurse	Adults
Hill		

Women's Ctr. &	Medical	Women &	
Shelter		Children	
Pittsburgh			
Wilkinsburg	Medical	Women &	
YWCA		Children	
Wilkinsburg			

Component: Supportive Services

<u>Services in place</u>: Mental Health Counseling for Low-Income women as well as providing counseling, group and individual counseling to women of Bethlehem Haven.

Service Providers: YWCA of Greater Pittsburgh

Component: Supportive Services

Services in Place: The Homeless Children's Education Fund has established the Learning Centers Program with shelters and transitional housing facilities to help supplement homeless children's public school education and ensure them access to the same educational opportunities as their peers. Learning Centers encourage developmental programs in homes of children and youth through the use of computers loaded with educational software, printers, and sites for after-school tutoring designed to supplement and compliment the public school education. Several hundred children have been served in the eight operational Learning Centers. Salvation Army Family Crisis Center, The HUB (Three Rivers Youth)' Womanspace East, Inc., Women's Center & Shelter of Greater Pittsburgh, YWCA of McKeesport, HEARTH (formerly North Hills Affordable Housing); Primary Care Health Services and YWCA Bridge Housing of Greater Pittsburgh.

<u>Service Providers</u>: Salvation Army Family Crisis Center, The HUB (Three Rivers Youth)' Womanspace East, Inc., Women's Center & Shelter of Greater Pittsburgh, YWCA of McKeesport, HEARTH (formerly North Hills Affordable Housing); Primary Care Health Services and YWCA Bridge Housing of Greater Pittsburgh.

Component: Supportive Services

<u>Services in Place</u>: The Homeless Children's Education Fund has established the Mini-Grants for Educational Innovation Program. Shelters and drop-in centers serving homeless children and youth in Allegheny County may apply for a grant to fund their own ideas for innovative educational programming. \$12,000 is available for Mini-Grants for the 2005-2006 school year.

Service Providers: Grants have not been determined for this year yet.

Component: Supportive Services

<u>Services in Place</u>: Soup Kitchens/Drop-In Centers offer a place for homeless and near homeless to receive food, clothing, some social services and a variety of supportive assistance. Outreach teams regularly visit with these sites to work with homeless individuals and families who frequent these locations. They include all of the outreach teams and providers listed previously in the Continuum of Care.

Service Providers:

Agency	Location	Type of Facility
Jubilee Kitchen	Uptown/Soho	Soup Kitchen
Rainbow Kitchen	Homestead	Soup Kitchen
Focus on Renewal	McKees Rocks	Soup Kitchen

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East End Cooperative	East End	Soup Kitchen/Drop In	
Ministry		Center	
Intersection	McKeesport	Soup Kitchen	
Salvation Army	Northside	Soup Kitchen	
Northside Corp.			
The Red Door	Downtown	Soup Kitchen	
Miryam's	Uptown	Drop In Center	
The HUB/Three Rivers	Strip District	Drop In Center	
Youth			
Bethlehem Haven	Uptown	Drop In Center	
Wellspring			

<u>Component: Supportive Services</u>

<u>Services in Place</u>: Project Employ recruits eligible homeless or formerly homeless individuals and assists them with life skills, Education and Career Preparation, Job Readiness, Job Search, Job Placement, Retention Services and Supportive Services. <u>Service Providers</u>: Collaboration between Duquesne University and Bethlehem Haven

**Component:** Supportive Services

<u>Services in Place</u>: Through the Homeless Children's Education Fund's Pack to School Program, the goal is to provide a backpack containing school supplies for each child starting the school year in a homeless shelter in Allegheny County. At the start of the 2004-2005 school year, the fund distributed over 500 backpacks.

<u>Service Providers</u>: Emergency Shelters, Transitional Housing, Bridge Housing facilities, which serve households with children.

Component: Supportive Services

Services in Place: Allegheny County Housing Authority, through an agreement with Allegheny County Department of Human Services, is providing an accessible two-bedroom apartment for a homeless family. This unit is available to families, which have special needs, and there are no other units available in the homeless network. This is a demonstration program. Supportive Services are provided by homeless providers who have case management or supportive services grants.

<u>Service Providers</u>: Allegheny County Housing Authority and Allegheny County Department of Human Services.

**Component:** Supportive Services

<u>Services in Place</u>: Family Savings Account Program offers financial literacy classes, budgeting skills, credit counseling and other workshops aimed at the specific goal of the consumer. The program assists consumers to save \$1,200 to \$2000 from 13 to 24 months as determined by their specific needs. Funds can be used for down payment for a home, education, and to pay off debt or for the purchase of a car.

Service Providers: ACTION Housing Inc.

Component: Supportive Services

<u>Services in Place</u>: Severe Weather Emergency Shelter Clinic for the chronic homeless is open from December to March every Wednesday to address the health and behavioral health needs of the chronic homeless.

<u>Service Providers</u>: Mercy Hospital Operation Safety Net, Bethlehem Haven 902 Clinic, WPIC, Primary Care Health Services

**Component:** Supportive Services

Services in Place: Homeless Children's Initiative provides comprehensive services to homeless children and youth in 43 school districts, 19 homeless shelters and related community agencies. The program provides educational/enrichment programs that encourage school attendance, reduce the number of disruptions to the education of homeless children and youth and facilitates services that are linked to the achievement of the challenging state performance standards for children and youth.

Service Providers: Homeless Children's Initiative

**Component:** Supportive Services

<u>Services in Place</u>: Homeless can access mental health services through collaboration between the behavioral health providers and Health Care for the Homeless. Clinics are held in a variety of locations which homeless frequent. Individuals can access help with their mental and behavioral health issues as well as support with prescription costs.

<u>Service Providers</u>: WPIC Neighborhood Living Project, East End Cooperative Ministry Drop In Center, Salvation Army Northside, Salvation Army Birmingham, Miryam's and Jubilee Kitchen.

**Component:** Supportive Services

<u>Services in Place</u>: Emergency Housing and Supportive Services Program for Youth offered through a grant from HHS offers the opportunity for FamilyLinks to work with youth age 17 and under for 15 days prior to turning them over to Children and Youth Services. This program helps youth reconnect with families and stabilize.

Service Providers: FamilyLinks

Component: Supportive Services

<u>Services in Place</u>: Psychosocial assessment, care coordination, community resource planning, psychological evaluation, family therapy, case management, home assessment to evaluate possible family/environmental problems and information and referral for vocational/career guidance for Sickle Cell Disease patients.

Service Providers: Sickle Cell Society, Inc.

## Allegheny County Homeless Alliance Structure Attachment G

**Mission:** The Homeless Alliance is a public/private partnership formed to assist Allegheny County, the City of Pittsburgh, the City of McKeesport and the Municipality of Penn Hills in eliminating homelessness and reviewing public policy, programs, activities, data and all other efforts that will improve the well-being of homeless persons and families.

The Homeless Alliance addresses at a minimum the following:

- 1. To assist in implementing and evaluating towards achieving the recommendations set forth in the plan and modifying the plan, as adjustments are required over the ten-year period.
- 2. To promote collaboration and partnerships through Continuum of Care;
- 3. To appoint representatives to be a part of the annual evaluation process to rank projects under the Continuum of Care;
- 4. Review the data generated by HMIS System in order to evaluate the progress made towards achieving the goals established by the Continuum of Care and the Ten Year Plan;
- 5. Review policy and promote changes in public policy on homelessness;
- 6. Endorse the Annual Submission of the Continuum of Care.

#### I. Structure

A. The Homeless Alliance is a 30-member committee with the following representatives:

- 1. Allegheny County Government (4 representative)
  - a. Behavioral Health
  - b. Economic Development
  - c. Office of Community Services (2 representatives)
- 2. City of Pittsburgh (2 representatives)
  - a. City of Pittsburgh Planning Department
  - b. Mayor's Office
- 3. City of McKeesport (1 representative)
- 4. Penn Hills (1 representative)
- 5. Police (1 representative)
- 6. At-Large Provider (1 representative)
- 7. Special Needs Provider (1 representative)
- 8. Chairs or Co-Chairs from the eight established standing committees (8 representatives)
- 9. Chairperson of the Homeless Advisory Committee (1 representative)
- 10. Housing Developer (1 representative)
- 11. Health (1 representative)
- 12. Faith-based (1 representative)
- 13. Academic (1 representative)
- 14. Mon Valley (1 representative)
- 15. Consumers (1 representative)
- 16. Foundation (1 representative)
- 17. Business (1 representative)

- B. The Homeless Alliance representatives will be selected in the following manner:
  - 1. A governmental official from that specific unit of government will select the governmental members in categories 1 to 4.
  - 2. The current chairpersons for the eight standing committees. Standing Committee Chairpersons will serve as long as they are chairing or cochairing the specific committee. Co-Chairs may alternate membership on the Homeless Alliance with the chairperson, or the chairperson may designate another member of the committee to attend if neither the chairperson nor cochairperson can attend. Ad Hoc Committees may be formed and be invited to be a part of the Homeless Alliance for the duration of the committee's existence.
  - 3. The current Homeless Advisory Committee chairperson.
  - 4. The remaining membership will be invited by the Allegheny County Chief Executive or his designee to be a member of the Homeless Alliance. The Homeless Alliance can make recommendations for representation for specific categories.
  - 5. All appointed members must have an interest and commitment in serving on the Homeless Alliance.

#### C. Attendance

- 1. Members must attend 50% or more of the Homeless Alliance and Executive Committee meetings over the period of a year.
- 2. Members unable to attend at least a minimum number of the meetings will be asked to resign and a new member will be appointed by the Chief County Executive to fill this position. (This requirement excludes government officials appointed by the designate body.)

#### D. Administrative Oversight:

- 1. The Allegheny County Department of Human Services, Office of Community Services, Bureau of Hunger and Housing Services will be responsible for the overall notification and distribution of the minutes for the meetings and staffing of the meetings.
- 2. A designated person will be responsible for the minutes and general oversight of paperwork.

### E. Officers

- 1. The officers for the Homeless Alliance consist of the following members: chairperson, vice-chairperson, secretary and archivist.
- 2. At the first meeting of every year (October) the chairperson, vice-chairperson, secretary and archivist will be elected by the Homeless Alliance. These individuals can be re-elected consecutively up to two two-year terms per position or until they no longer represent a specific group as established above.

## F. Executive Committee

1. An Executive Committee consisting of the Homeless Alliance Chairperson, Vice-Chairperson, 8 committee chairpersons and the

- Director of the Allegheny County Department of Human Services/Office of Community Services at a minimum will meet the month prior to the Homeless Alliance.
- 2. The Executive Committee will set the meeting for the Homeless Alliance, provide coordination and collaboration between committees as well as with the Ten Year Plan and the Continuum of Care.

### **II. Meeting Dates**

- A. The first meeting of each year will be held in October.
- B. The Homeless Alliance will meet quarterly at a minimum on the second Tuesday in October, January, April and July at 9:30 AM at the United Way Building.
- C. The Homeless Alliance Executive Committee will meet at a minimum on the second Wednesday of September, December, March and June.

### **III. Reporting Process**

- A. A written annual report will be prepared and posted on the county website. The report will reflect the diversity of the membership; identify the progress made to date; and issues that will be worked on over the next year or two.
- B. The chairperson of the Homeless Alliance will present the annual report at the Homeless Advisory Committee.

# **IV. Standing Committees**

To achieve their mission, the Homeless Alliance will establish committees to address the issues identified in the Continuum of Care, the Ten Year Plan as well as other areas as they are identified.

#### A. Committees

- 1. Advocacy and Public Policy
- 2. Health Resources and Service Delivery Committee
- 3. Education and Public Awareness
- 4. Housing Development Committee
- 5. Housing Committee
- 6. Homeless Outreach and Coordinating Committee
- 7. Supportive Service
- 8. Prevention of Homelessness
- B. **Ad Hoc Committees** may be formed as issues are identified by the Homeless Alliance or the community. A Committee chairperson will be designated by the Chairperson of the Homeless Alliance to take on this issue. A specific time frame will be established for the newly-formed committee.

#### **C.** Committee Structure

- 1. Each Committee will have a designated chairperson and co-chairperson. Committee chairpersons or co-chairs will be elected from within the membership of that committee and serve at least a minimum for one year.
- 2. Each Chairperson is a member of the Executive Committee of the Homeless Alliance and a member of the Homeless Alliance.
- 3. Each Committee Chairperson must regularly attend Homeless Alliance, Homeless Alliance Executive Meetings and Committee meetings.

- 4. In the event a Committee Chairperson cannot attend a Homeless Alliance or Executive Committee, the co-chair or designated representative from the committee may attend in their place. Members must attend 50% or more of the Homeless Alliance and Executive Committee meetings over the period of a year unless they are excused absences.
- 5. In the event that a specific standing committee has achieved their specific goals or there is a desire to merge committees, the Chairperson from the standing committee will place this item on the agenda of the Homeless Alliance and a vote will be taken to act on the change in structure.
- 6. Each Committee will establish Goals and Objectives annually, which reflect the issues that they will be addressing in the ten-year plan. These Goals and Objectives will be submitted to the full Alliance for review at the first meeting of each operating year (October). These Goals and Objectives will be utilized to implement the plan.
- 7. Each Committee will keep records of attendance and minutes.
- 8. Quarterly summary reports will be prepared and distributed to the Homeless Alliance. In addition, Quarterly reports will be posted on the County website.
- 9. Each committee chair or their designee is responsible for reporting to the Homeless Alliance the goals and objectives that they have addressed in the Ten Year Plan and bringing forth new business as issues arise.
- 10. Each committee will meet at least twice a quarter or more frequently based upon the call of the committee chair or co-chairpersons and the issues at hand.
- 11. Each committee will establish a regularly scheduled date, time and location for meetings. This information will be posted on the county website.

#### Homeless Alliance Relationship with the Homeless Advisory Committee

- a. The Homeless Advisory Committee will serve as a grassroots informational session to educate, advocate and provide input into the homeless continuum system.
- b. The Homeless Alliance will make an annual report at the September Homeless Advisory Committee Meeting. A written report will also be made available at this time. The Chairperson of the Homeless Alliance or their designee will make the formal report at this forum.
- c. At the March Meeting of the Homeless Advisory, a public town meeting will be held to discuss trends and issues related to homelessness. This information will be incorporated into the annual continuum of care and serve as an indicator of the progress made to date on implementing the Ten Year Plan.
- d. The remaining two meetings of the Homeless Advisory will be utilized to educate, advocate and provide information to the community at-large. Homeless providers will be encouraged to provide information on new programs, legislations or other relevant issues.

Adopted By Homeless Alliance on July 7, 2005