THE CITY & COUNTY OF FRESNO

TEN YEAR PLAN TO END CHRONIC HOMELESSNESS

2008 - 2018

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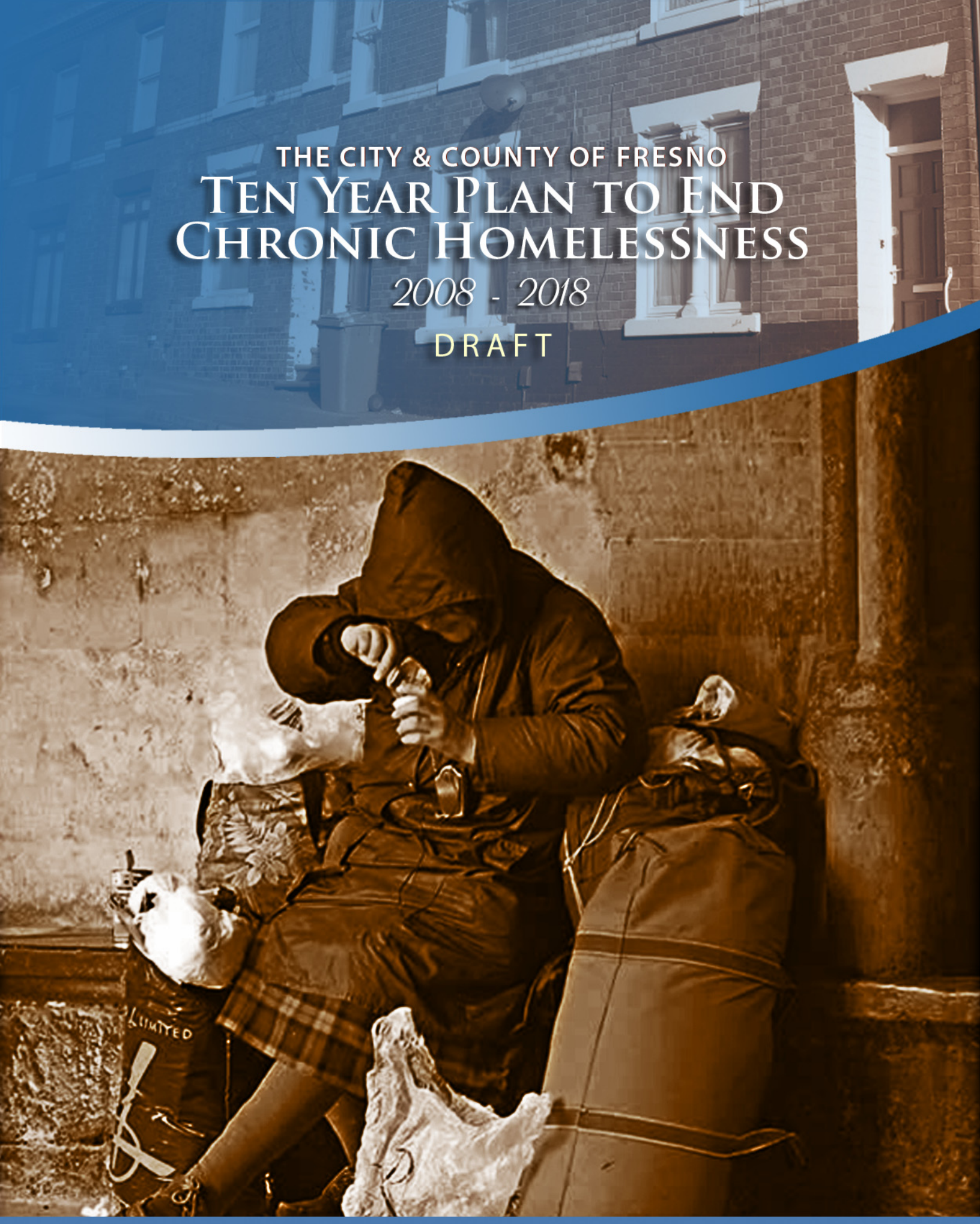

"People who are homeless are not social inadequates. They are people without homes."
-Sheila McKechnie

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II. Letter from Mayor Alan Autry

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1. Vision and Mission

VISION

Fresno County residents will have permanent housing and access to resources and support services necessary to prevent and break the cycle of chronic homelessness.

MISSION

To prevent and end chronic homelessness in Fresno County by creating and implementing a comprehensive, innovative and realistic ten-year strategy that embraces a foundation built on the following principles: H.O.P.E

Housing First:

Maintaining the existing capacity to house homeless residents and by introducing additional capacity to balance needs by aggressively soliciting grants subsidies and loans.

Opportunity:

Providing for the rights and dignity of our homeless by offering them opportunities to return to mainstream society.

Prevention:

Stopping the cycle of chronic homelessness before it begins.

Establishing Collaboration:

Taking a unified local and regional community approach to the crisis of chronic homelessness.

Photo by Hans Marsen

2. Executive Summary

This Ten-Year Plan to End Chronic Homelessness represents a milestone in the effort to address the issue of homelessness in Fresno County. To date, measures undertaken have been primarily short-term and often too fragmented to reduce or end the homeless situation for the more than 4,000 men, women and children in Fresno County who experience homelessness.[i] Under this plan for the next decade, the paradigm shifts from a services-based strategy to one focused on providing long-term housing-based solutions.

This plan envisions a multi-step effort framed in a sustainable methodology covering a ten-year period. The crisis of homelessness requires the entire community to address the problems with a single, coordinated plan of action. The success of this plan requires a collaboration involving all the key players:

- Municipal Governments
- Fresno County Government
- Law Enforcement
- The Criminal Justice System
- Governmental Agencies
- Health and Mental Health Professionals
- The Veterans Administration
- Social Services Providers
- Businesses
- The U.S. Department of Housing and Urban Development
- Developers
- Citizen groups
- Faith-Based Organizations
- The Nonprofit and Philanthropic Community
- The Homeless

This Ten-Year Plan is based on four foundation principles that lay the framework for our goals under the H.O.P.E. **acronym: Housing, Opportunity, Prevention, and Establishing Collaboration.** These four principles, defined in this document, must be undertaken simultaneously with vigorous commitment and appropriate sustained resources to be successful.

H.O.P.E.

Housing, Opportunity, Prevention & Establishing Collaboration

In the time that we have spent together as a Planning Council, we have challenged the status quo and acknowledged that our existing system needs to be improved in providing adequate long-term solutions for our chronic homeless population. This shift in outlook represents a powerful first step. We have championed ideas that have proven themselves in other communities and we have introduced new ideas unique to our community. We have changed the very way that we view homelessness and we have extended that vision to this pivotal document. Our success in Fresno County demands these changes.

Housing is so much more than a roof over someone's head; it provides dignity, opportunity, privacy and closes the revolving door that, too often, puts our homeless back on the street. Both practicality and a humane outlook come together under this ten-year plan to find common ground, and a common solution, to ending chronic homelessness and providing permanent supportive housing.

As this plan is presented, an ominous cloud hangs over both our government and civic life. The deteriorating economy may dramatically increase the number of homeless individuals and families. For many families and individuals living from paycheck to paycheck, the sudden loss of a job can result in eviction or foreclosure, putting them out in the street. Nation-wide many of our veterans are coming home from distant actions to an overburdened Veterans Administration and trading places on the battlefield for places on the street. Our prisons and jails are releasing people from one form of incarceration to another without a reentry plan, burdening our existing homeless infrastructure with an influx of ex-offenders, a problem that is only anticipated to increase over time.[ii]

Despite the fact that existing services providing emergency care are often stretched to their limits, our homeless population is not decreasing, but rather increasing.[iii] On any given night, 4,267 homeless individuals and families sleep in emergency shelters, on the street, in cars, in transitional housing or with friends and family.

Throughout this planning process, one fact has become increasingly clear: homelessness is a community-wide problem. Our Planning Council is a representation of that community. Homelessness is not a problem that can be solved by any one sector of our community. Local government cannot solve it alone. Community-based organizations cannot do it alone. It will require all sectors, rowing in the same direction to make a substantial difference in the lives of our chronically homeless.

In that spirit, the Planning Council submits this plan to the policy makers and the community with an urgent plea to act now, to act decisively, to act when it may be difficult and to implement measures that define authority and accountability in ending chronic homelessness.

When forming the committee that would put together the ten-year plan to end chronic homelessness, Mayor Autry told the committee that this plan "is a different deal, and this is a great responsibility on the Leadership Council" and that "we have to do things differently and we have to do them efficiently." We have fulfilled this mandate and present these strategies and goals to end chronic homelessness over the next ten years:

Goal: Increase permanent supportive housing through the Housing First model and the rapid rehousing of the chronically homeless.

Strategy: Place 941 chronically homeless in housing over the next 10 years. [iv]

Strategy: Identify and recommend changes to County and City ordinances that prevent the achievement of the housing first model.

Goal: Expand and increase employment opportunities for the chronic homeless through public-private partnerships.

Through effective case-management, assessment, education and training, employ 40 percent of our homeless population over ten years. [v]

Strategy: Establish an employability, education and benefits assessment at intake into housing or services.

Strategy: Utilize an employment re-entry and outreach program that serves both the homeless population and those leaving correctional facilities to increase opportunities for employment and stability.

Strategy: Coordinate no cost and low cost education and vocational training opportunities with established adult education programs.

Strategy: Construction and renovation projects should be used as training grounds and employment opportunities for the homeless.

Goal: Increase and improve access to public assistance, mental and physical health services for the chronically homeless.

Strategy: Establish respite care centers within one year of plan implementation.

Goal: Provide immediate relief to the crisis of homelessness.

Within six months of plan implementation establish systems and programs that provide immediate relief to the chronically homeless.

Strategy: Provide "Housing First" rental assistance and supportive service vouchers to chronically homeless individuals.

Strategy: Provide public showers, triage medical care, and clothes exchange at a consistent location for the homeless.

Strategy: Hold Project Homeless Connect Events.

Goal: Close the revolving door of chronic homelessness through continuous managed services prior to discharge from public programs.

Strategy: Reduce homeless-related discharges from hospitals.

Strategy: Reduce homeless-related discharges from correctional facilities.

Strategy: Reduce homeless-related discharges from foster care.

Goal: Expand the range and availability of prevention strategies to close the "front door" on chronic homelessness.

Strategy: Provide one-time foreclosure assistance for low-to-moderate income residents.

Strategy: Strengthen ties with faith-based organizations, shelter providers, and the Housing Authority of the City and County of Fresno to provide outreach programs that are designed to increase housing and economic stability.

Strategy: Expand services that support housing stability such as rental assistance, legal assistance, and affordable housing placement and creation.

Goal: Improve data collection methods to provide a single point of entry through the Homeless Management Information System (HMIS).

All homeless service providers will utilize HMIS within two years of plan implementation.

Strategy: Incentivize the use of HMIS to include government, hospitals, housing providers, health departments, substance abuse treatment centers, and correctional facilities.

Strategy: Utilize HMIS to provide a single point of entry for homeless services and case management coordination and to link housing resources and availability.

Goal: Identify an agency that will serve as the single point of contact, driving force, and accountable agent for the homeless of Fresno County.

Strategy: Indentify a Lead Homeless Agency at the adoption of this plan.

Strategy: The Lead Homeless Agency will ratify this plan as its guiding policy paper and update the plan as necessary.

Strategy: Create and sustain public awareness and political will to implement the strategies and actions that achieve the goals set forth in this plan.

The City and County's appointment of a task force to develop a Ten-Year Plan to End Chronic Homelessness, the plan's approval, implementation, periodic review and amendment will ensure its sustainability. It is designed to be a living document that will continue to grow with our community and will be flexible in light of changes and events that will alter the dynamics of our homeless crisis in unforeseen ways.

This plan represents a collaborative effort that challenges the issues of homelessness through solution-based strategies and represents the City and County of Fresno's best opportunity to end homelessness.

3. Introduction—An Examination of Homelessness in Fresno County

Defining Homelessness:

Chronic Homelessness: According to the U.S. Department of Housing and Urban Development, chronic homelessness is defined as "an unaccompanied homeless individual with a disabling condition who has either:

A. been continuously homeless for a year or more or
B. has had at least four episodes of homelessness in the past three years." [vi]

Episodic Homelessness: Refers to recurrent periods of homelessness. People who experience episodic homelessness are younger and use the shelter system more sporadically than the chronically homeless. They often have substance addictions, leave shelters when they obtain income or use them seasonally, and are more resistant to services. Longitudinal research indicates that approximately 9 percent of the single adult population fits this pattern of homelessness. While these individuals use fewer resources than those whose homelessness is chronic, they are still frequent users of the system, staying for extended periods of time and utilizing approximately 30 percent of the shelter days over the course of a year.[vii]

Transitional Homelessness: Generally refers to a single episode of homelessness that is of relatively short duration. Persons who experience transitional homelessness use homeless resources for brief periods, most often in times of economic hardship and temporary housing loss. The majority of families and single adults who become homeless over the course of a year fall into this category, and most become homeless due to a housing or personal/family related crisis.[viii]

Hidden Homeless: While the aforementioned are identified patterns of homelessness, a new category distinguishes the hidden homeless outside the three general patterns. This includes people who move from place to place without having a fixed place to call home but are not enumerated as homeless. Temporary accommodations may include sequential stays at the homes of friends and family, hotels, or youth hostels . The hidden homeless float from one home to another until a permanent situation is found.[x]

Counting the Homeless

The methodology used in determining the homeless population for Fresno County is not an exact science. There are many different methodologies and discussions regarding "counting" the homeless. The task is not a simple one, as many homeless populations move about or are "hidden" within society, making counting difficult.

For the purpose of this report, the Planning Council will be utilizing the Fresno Madera Continuum of Care's "Point-in-Time Homeless Population and Subpopulations Chart." This is based on the FMCoC point-in-time survey conducted on January 26, 2007. Although the Planning Council felt that the point-in-time survey did not accurately reflect the extent of the homeless population in Fresno County, the council agreed to use the Point-in-Time figures, recognizing that this methodology is utilized by the U.S. Department of Housing and Urban Development in its funding applications.

Based on discussions on this matter, the Planning Council made these recommendations:

1. Increase the frequency of the point-in-time surveys from bi-annually to annually.
2. Increase the resources and coverage of these surveys by providing City and County support to the Continuum of Care when conducting point-in-time counts.
3. Explore different statistical methodologies in analyzing the data gathered from the point-in-time surveys.
4. Amend the goals and strategies of the ten-year plan to match the results of the new point-in-time counts.

Table 1: FMCoC Point-in-Time Homeless Population

Homeless Population	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Number of Households with Dependent Children	**109**	**192**	**187**	**488**
Total number of persons in these households *(adults and children)*	**232**	**474**	**875**	**1581**
Number of Households without dependent children	**951**	**10780**	**637**	**2666**
Total Persons	**1183**	**1552**	**1512**	**4247**

Table 2: FMCoC Point-in-Time Survey Homeless Subpopulations

Homeless Subpopulations			
	Sheltered	Unsheltered	Total
Chronically Homeless	629	312	**941**
Severely Mentally Ill	588	235	**823**
Chronic Substance Abuse	660	254	**924**
Veterans	93	83	**176**
Persons with HIV/AIDS	183	74	**257**
Victims of Domestic Violence	208	197	**405**
Unaccompanied Youth	49	25	**74**

Tables 1 and 2 represent the 2007 point-in-time survey conducted by the Fresno Madera Continuum of Care. Table 1 specifies that during the survey, 4,247 homeless residents were counted. Table two demonstrates that of the 4,247 homeless residents, 941 individuals fall under the chronic subpopulation. Table 3, below, lists how we determined what percentage of our homeless population are chronically homeless.

Table 3: Determining the Percentage of the Chronic Homeless

FMCoC Homeless Population	FMCoC Chronic Subpopulation	Percentage of Chronic Homeless
4,247	941	22%
Total Homeless Counted	Number of Chronic Homeless	Chronic Homeless/Total

Although the Planning Council decided to utilize the point-in-time methodology for the purpose of this report, The U.S. Department of Housing and Urban Development has established a nationally accepted formula in estimating homeless populations. This formula takes 1 to 2 percent of an area's general population as the homeless population. Although this formula is useful in estimating the total homeless population in a jurisdiction, it cannot be used to measure results because an increase or decrease in general population does not always coincide with an increase or decrease in the homeless population.

The Planning Council, in its discussions, agreed that in Fresno County 2 percent of the general population is a more accurate reflection of our "overall" homeless population when utilizing this formula. Fresno is confronted by the challenges of debilitating poverty. In the 2005 report issued by the Brookings Institution, *The Aftermath of Katrina: Confronting Concentrated Poverty Across the Country*, Fresno was ranked as the city with the highest concentrated poverty at 43.5 percent. The City of Fresno is home to 47 neighborhoods with residents living in extreme poverty—meaning that more than 40 percent of the neighborhood's residents live below the 2000 federal poverty threshold.[xi] Foreclosures, poverty, seasonal workers, and unemployment all contribute to this number.

Recent national studies suggest that more people experience homelessness than originally thought.[xii] More recently, the "Measure of America" study funded by the Oxfam America and other nonprofits ranked the 20th Congressional District, which includes Fresno, Kings, and Kern counties, as poorest in "human development" based upon rates of income, health, and educational attainment.

In July of 2008 the unemployment rate for Fresno County was 9 percent compared to the state rate of 6.9 percent.[xiii] On February 29, 2008, the Fresno Bee reported that "unemployment rates in the San Joaquin Valley have begun an inextricable climb to double-digit jobless rates due to fallout in the financial sector from the sub-prime debacle and a slowdown in construction of residential construction, which, at its peak, dropped unemployment to a record low of 7 percent a few years ago."[xiv]

Based upon HUD's formula, and using 2 percent of our general population due to economic and social challenges mentioned above, Fresno County's estimated homeless population is approximately 18,621 individuals and families.

Table 4: Determining Homeless Populations

Fresno County Population	HUD Formula at 2%	Point-in-time Chronic Homeless Percentage	Chronic Homeless Population
931,098	18,621	22%	4,096
California Department of Finance	2% of general population HUD	Chronic homeless 941/4247	Number of chronic homeless

FMCoC Point-In-Time Street Count

The U.S. Housing and Urban Development agency has identified the Point-In-Time (PIT) Homeless Street Count as the means to determine numbers of local homeless not being served or not in shelters, and the community need for additional homeless beds. The Homeless Street Count is available as public information, is used in "identified need" reports for funders and service providers, and is incorporated in local government Consolidated Planning. The data collected during the PIT Homeless Street Survey is also a key document for the FMCoC annual HUD Submission for homeless funding and in local FMCoC and 10-Year Plan discussions and planning. The PIT Count provides valuable planning and gaps analysis data to Fresno and Madera (City and County) homeless shelter/service providers, public officials, community groups, and local government. It is also locally collected data used in reports to local, state and federal resources. The Fresno Madera Continuum of Care-the regional authority on homelessness/issues and needs—is responsible for the PIT Homeless Street Count that occurs every 2-years.[xv]

The biannual Point-In-Time Homeless Street Count was completed in the Fresno and Madera region on January 26, 2007. There are various methods that can be implemented to capture the Homeless Street Count. Methods include personal interviews, a count of individuals on the street (no personal interview) and survey volunteers can either be dispersed to all areas countywide, or data collection can be concentrated in known areas frequented by Homeless. Other statistical means are also acceptable, however not as valued as the actual PIT street-count. The method used by the FMCoC involved a day-long data collection strategy, using the personal interview method of individuals on the street, in areas known to be frequented by Homeless, including the perimeters of emergency shelters, soup kitchens, parks, railways, under bridges and other areas of the County. More than 100 community members including homeless service providers, private citizens, public agency representatives, justice and social service agencies participate in the one day Point-In-Time (PIT) count of homeless on the street.[xvi]

Who are our homeless?

Utilizing the 2007 Point-in-Time survey, it is possible to determine the characteristics of Fresno County's homeless populations:

Figure 1: Gender

Forty six percent of the homeless population was identified as male and 49 percent female. The 2006 Census projection data showed 49 percent of Fresno County's general population as female and 50 percent as male.[xvii]

Figure 1: FMCoC Street Survey: Gender

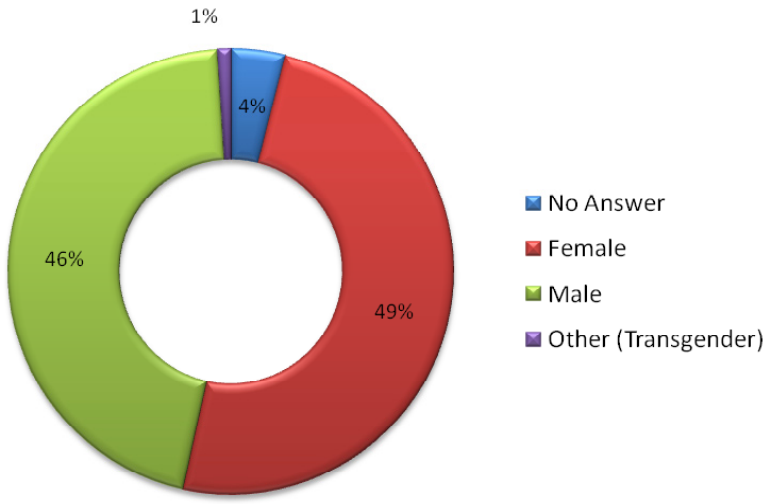


Figure 2: Age

Nearly half (48 percent) of the homeless population falls in the 31 to 50 age range with 35 percent in the 18 to 30 age range. Those who are 51 to 61 years of age represent 13 percent of the homeless population.

The age breakdown, while separating minor children from adults, was not broken down into Federal or State homeless age distinctions, which are relative to current and ongoing homeless funding; specifically Transitional Age Youth (TAY) who are ages 18-24. The actual number of TAY cannot be determined or cited through this survey. [xviii]

The same falls true for the older populations. Age distinction would have been seful for homeless over the age of 55 years, and again 62+ years. An analysis or determination could have been projected regarding homeless seniors and retirees, possibly those who became homeless due to fixed or inadequate income.[xix]

Figure 2: FMCoC Street Survey: Age

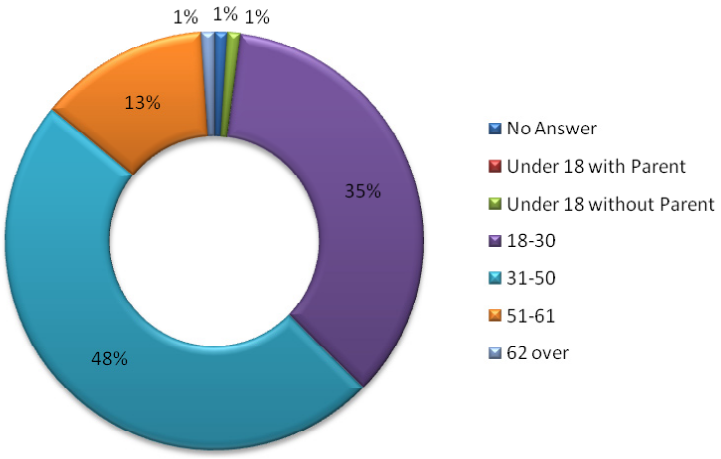


Figure 3: Race/Ethnicity

Hispanics and Whites each make up 38 percent of Fresno County's homeless population, followed by African Americans at 16 percent with Native Americans at 4 percent. Asians and Pacific Islanders made up 3 percent of the total population. In the 2006 Census Bureau Population Estimate, Whites made up 81 percent of Fresno County's general population, Hispanics were 47.6 percent, African Americans were 5.7 percent, Asian persons made up 8.9 percent and American Indians were 1.9 percent.[xx]

Figure 3: FMCoC Street Survey: Race/Ethnicity

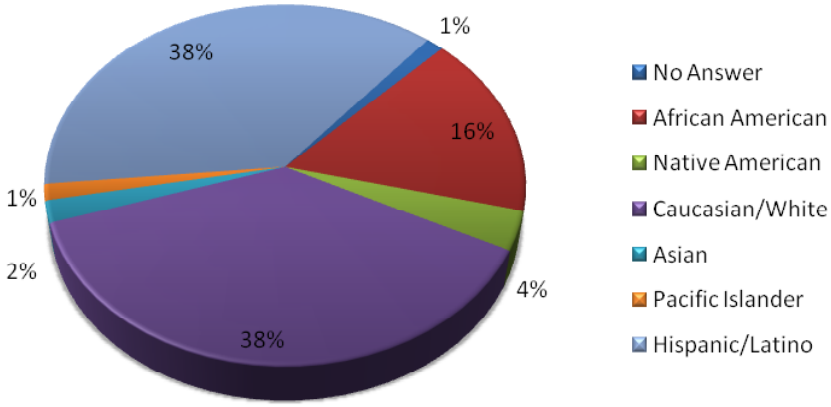
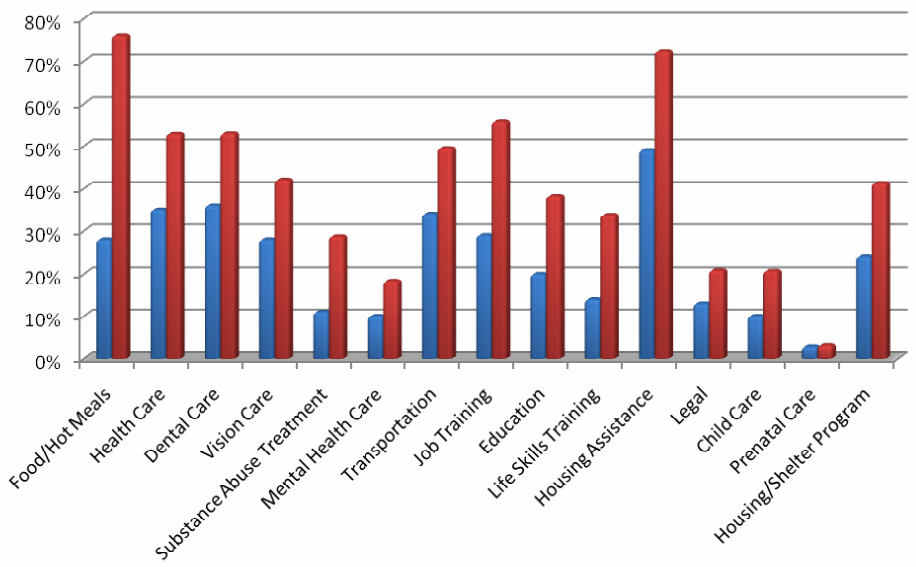


Figure 4: FMCoC Street Survey: Accessibility of Services



Red: service needs
Blue: services not able to access

Fresno County's homeless residents were surveyed about services they needed versus services that they were not able to access. Seventy-six percent said they needed food/hot meals and 27 percent said they could not access this need. Seventy percent said they needed housing assistance but 49 percent said they could not access it. Health care and dental care, job training, and transportation were also identified as strong needs of our homeless community and also identified as services that the homeless had difficulty accessing.

In this ten-year-plan to end chronic homelessness, Figure 4 is a powerful representation of the needs of Fresno County's homeless population as it is stated in their own words. In formulating this plan, the Planning Council considered these needs in our goals and strategies.

Our Focus is the Chronic Homeless

The Ten-Year Plan focuses on chronically homeless people, those who have been homeless more than one year, or have experienced multiple episodes of homelessness and have a disability. While they represent approximately 22 percent of the homeless population, they are the most visible and often suffer from untreated mental illness and substance abuse. The chronic homeless place a high demand on public services, and in doing so, reduce the amount of services available for those who are at risk of homelessness or experience episodes of homelessness.

A major study at the University of Pennsylvania found that a mentally ill homeless person utilizes over $40,000 in publicly funded services annually. In comparison, the average cost of supportive services to enable mentally ill persons to maintain housing is slightly over $16,000. According to this study, reduction in incarceration, hospitalization and shelter use would effectively pay for 95% of the cost of housing.[xxi]

Beyond the traditional costs that are associated with homelessness, there are multiple social costs as well. Homelessness impacts the lives of both the individual and their family. It prevents access to education and employment, and plays a large role in behavioral and developmental problems for children and young adults.[xxii]

Providing for the chronically homeless not only helps those with the greatest need, it also releases valuable resources necessary to provide for all the homeless populations in Fresno County.

4. Background

Homeless efforts

National Efforts

Planning for and providing the infrastructure to eliminate chronic homelessness is a national effort. In July of 2000, the National Alliance to End Homelessness included ending homelessness altogether in its ten-year plan. Mel Martinez, the Secretary of the Department of Housing and Urban Development, announced this goal at the National Alliance's 2001 conference. President George Bush further emphasized the National Alliance's goal by making it one of the top objectives in the Federal Government's 2003 Budget.

Since the National Alliance announced its ten-year plan to end chronic homelessness, hundreds of communities have committed to transforming their homeless systems in an effort to end chronic homelessness.

The federal Interagency Council on Homelessness has been charged with guiding and coordinating the efforts in developing ten-year plans nation-wide. According to the Interagency Council, approximately 213 plans have been adopted and over 130 plans are currently in the development process.[xxiii]

State Efforts

In August of 2005, Governor Arnold Schwarzenegger announced the State of California's Initiative to End Long-Term Homelessness and created an opportunity for the state to work with local governments, non-profit organizations and other private entities to fund and implement innovative solutions to the state's long-term homeless problem. The funds were intended to help develop and implement new and innovative programs to address the needs of some of the most vulnerable Californians, homeless individuals suffering from serious mental health illness and related disabilities. The funding focuses on the creation of permanent housing that includes support services for residents. The Initiative created a multi-agency committee to provide a simple, one-stop approval process for funding requests.[xxiv]

The Governor's Initiative to End Long-Term Homelessness included three goals:

- Leverage Proposition 46 funds, in conjunction with tax credits and local funds, to build approximately 400 to 500 new units of permanent housing.
- Support the cost of ongoing services through the Mental Health Services Act to ensure these residents receive the services they require to keep them off the street.
- Coordinate federal, state, local, non-profit and private sector efforts to combat homelessness.[xxv]

In June 2006, HomeBase, The Center for Common Concerns, facilitated a two-day Policy Academy to begin development of California's Ten-Year Chronic Homelessness Action Plan. More than 100 people from all over the state participated in the Academy to begin the process for creating a statewide plan.[xxvi]

The State's draft ten-year plan has been circulated for review and outlines the following action plan:

1. Establish as a statewide priority for the prevention and significant reduction of chronic homelessness.
2. Increase the supply of housing affordable for those who are chronically homeless or at-risk of chronic homelessness.
3. Promote early identification of those at-risk of chronic homelessness and establish policies and programs to prevent its occurrence.
4. Enhance the availability, accessibility and integration of support services needed by those who are at-risk or chronically homeless.
5. Promote financial stability of the at-risk and chronically homeless population.[xxvii]

Local Efforts:

On April 14, 2008, Chairman Henry R. Perea of the Fresno County Board of Supervisors and Fresno Mayor Alan Autry announced that the County and City of Fresno would begin the process of developing a ten-year plan to end chronic homelessness in Fresno County.

Supervisor Perea and Mayor Alan Autry convened a group of community leaders, local officials and representatives to take on the challenge of ending chronic homelessness over the next ten years. This group of civic leaders comprised the Leadership Council and they were charged with the oversight for the development of the Ten-Year Plan to End Chronic Homelessness.

The Leadership Council embodied the spirit of collaborative planning necessary to address the challenges of ending chronic homelessness. They would also be responsible in ensuring that the plan would address the specific needs of Fresno County, and for the sustainability of the plan throughout its term.

In turn, the Leadership Council appointed a Planning Council to oversee the day-to-day activities of formulating the ten-year plan. The Planning Council was made up of a broad community representation with the specific focus on researching and writing the plan. The Ramsay Group, LLC, a local consulting firm, assisted the council with meeting facilitation, technical research, technical assistance, and in drafting of the plan. A unique aspect to this Planning Council, and to the credit of the City and County of Fresno, was the appointment of homeless citizens to the Planning Council. Their perspective, advocacy, and active involvement will bolster Fresno County's commitment to end chronic homelessness.

The Planning Council faced a challenging mandate to complete the Ten-Year Plan within 100-days of its formation. This mandate was embraced with enthusiasm and focus to end chronic homelessness in Fresno County.

From its first meeting on April 21, 2008 The Planning Council met every week in its entirety or in individual workgroups. The Planning Council held their first meeting with the following processes in mind:

1. Review the extent of chronic homelessness and existing services in Fresno County.
2. Gather input from stakeholders and the larger community.
3. Define the barriers that need to be addressed to reduce and end chronic homelessness and to prevent its reoccurrence.
4. Review "best practices" in other communities.
5. Identify needed efforts, strategies and models that will effectively address chronic homelessness in Fresno County.
6. Develop a ten-year plan with principles, goals and recommendations that will end chronic homelessness.

Over the three months that they met, the participants in the Planning Council became knowledgeable about the local population of chronically homeless persons. Speakers from other communities as well as local providers attended the meetings and presented information about effective programs and model practices for the council to consider.

Planning Council members reviewed our current continuum of care system and drafted specific strategies for serving chronically homeless individuals. In addition, members of the Leadership Council and the Planning Council attended four homeless engagement tours in which they dialoged with the local homeless citizens in their own environment. These tours were essential to focus the council's efforts and to educate its members through first-hand sources.

The Role of the Continuum of Care

The Fresno Madera Continuum of Care (FMCoC) is a network of 200 public and private organizations and individuals that provide services to the homeless or are concerned with the crisis of homelessness in Fresno and Madera counties. The continuum of care is recommended by the U.S. Department of Housing and Urban Development (HUD) as a comprehensive and strategic approach to addressing homelessness by providing services and resources such as:

1. Homeless Prevention, assistance *to help people maintain housing and prevent homelessness.*
2. Outreach and Intake and Assessment, *to identify an individual's of family's needs and link them to appropriate housing and or services*
3. Emergency Shelter, *short term, safe and decent shelter provided as an alternative to the streets.*
4. Transitional Housing, *housing with supportive services to help people develop the skills they need to live in permanent housing.*
5. Supportive Services, *supportive services should be available throughout the Continuum of Care in order to address the specific needs of each individual.*
6. Permanent Housing, *affordable housing in which residents pay no more than 30% of their income for housing costs.*
7. Permanent Supportive Housing, *housing with supportive services designed to allow persons with disabilities to live in the community as independently as possible.*[xxviii]

The FMCoC is the forum by which local priorities are established for local homeless providers in applying for State Emergency Housing and Assistance Program (EHAP) funding, Supportive Housing Program (SHP) funding and Shelter Plus Care funding. The FMCoC serves in securing and distributing McKinney-Vento Act funding and in establishing local funding criteria.

The FMCoC was successful in obtaining the following funding in the 2006-2007 program year.

Table 5: Fresno County CAPER

Applicant	Project Name	Requested Project Amount	Term Of Project
Madera County Action Agency	Shumanite House	$525,322	3 Years
Fresno Housing Authorities	Shelter-Plus Care	$128,924	1 Year
Fresno County Economic Opportunities Commission	FCEOC Sanctuary TLC #1	$541,708	3 Years
Central Community Development Center, Inc.	Laurel Homes II	$1,353,450	3 Years

graph continues ···>

Applicant	Project Name	Requested Project Amount	Term Of Project
Fresno County Economic Opportunities Commission	FCEOC Sanctuary TLC #2	$570,084	2 Years
Turning Point of Central California, Inc	Transitional Learning Center	$347,128	2 Years
Marjaree Mason Center	Homeward	$130,965	2 Years
Turning Point of Central California, Inc.	Transitional Learning Center Expansion	$148,204	2 Years
Poverello House	Naomi's House	$708,338	2 Years
Central Community Development Center, Inc.	Homeless to Home Program	$137,634	2 Years
Spirit of Woman		$322,262	1Years
	Amount Awarded:	**$4,915,019**	

Housing First Model

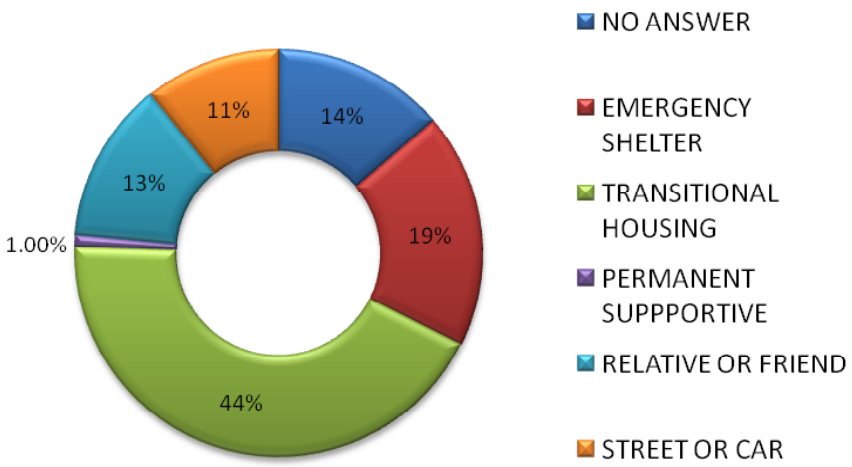
"Housing First" is an approach to ending homelessness that centers on providing homeless people with housing quickly and then providing services as needed."[xxix]

We cannot end chronic homelessness without providing housing first. The very nature of housing provides the means necessary to address all other issues of homelessness such as mental illness, lack of employment, substance abuse, physical disabilities and other health related issues. Housing provides the stability and addresses the immediate needs of homelessness so that other issues can be addressed in a safe and secure environment.

The lack of permanent housing needs to be the first and foremost issue to be addressed in this ten-year plan. The Housing First model does not use permanent housing as an incentive for the successful completion of treatment, but utilizes permanent housing as a means to providing appropriate treatment. For over 20 years, the housing first model has proven to be a practical means to ending and preventing homelessness.[xxx]

In the 2007 Continuum of Care Street Survey, when homeless residents were asked where they stayed the previous night, 63 percent stated that they were in emergency and transitional housing, whereas only 1 percent spent the night in permanent supportive housing. Emergency shelter is a costly alternative to permanent housing. While it is necessary for short-term crises, it too often serves as long-term housing. The cost of an emergency shelter bed funded by HUD's Emergency Shelter Grants program is approximately$8,067 more than the average annual cost of a federal housing subsidy (Section 8 Housing Certificate) . [xxxi]

Figure 5: FMCoC Street Survey: Where did you stay the night prior?

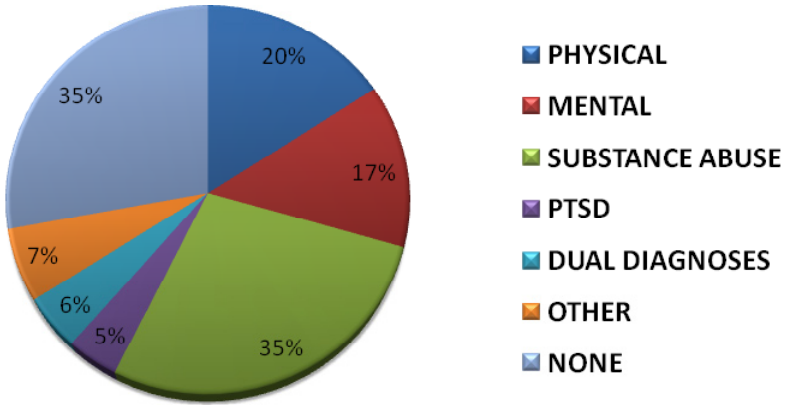


In addition, emergency shelters do not offer the stability necessary for the chronically homeless to access the long term services and care that they need to return to mainstream society.

Housing first combines housing with the support services necessary for the chronically homeless to remain in housing. The National Alliance to End Homelessness found that in a "housing first" approach to the issue of chronic homelessness, 80 percent to 90 percent of individuals in permanent supportive housing remained there after one year.[xxxii]

A combination of housing and support services provides a powerful impact in ending chronic homelessness especially in light of the fact that almost 65 percent of Fresno County's homeless population suffer from some type of disability.

Figure 6: FMCoC Street Survey: Disability



Rapid Rehousing Model

One of the primary challenges that homeless people face in getting back into housing is navigating the private rental market. Fresno, like most California cities has a shortage of affordable housing for low- and very low- income residents. In addition to affordable housing shortages, there are very little incentives for potential landlords to provide housing to homeless individuals with credit problems, little or no income, and/or precarious housing histories.

Consistent with a Housing First approach, Rapid Re-housing programs help individuals or families experiencing homelessness locate housing in the community, negotiate with landlords, and provide home-based case management to promote housing retention and link families with needed services within their new community.[xxxiii]

Successful Rapid Re-housing programs incorporate aggressive landlord outreach and housing search assistance. Providers use a variety of strategies to educate landlords in the community about their services to families, dispel myths about families experiencing homelessness, and provide support to the family and the landlord to promote successful tenancy.[xxxiv] Building and retaining the trust of landlords is instrumental and expands the housing options available to families, particularly those with more challenging rental histories.[xxxv]

Nationally there are several noted Rapid Re-housing initiatives. Examples of successful initiatives include:

- The Shelter to Housing Pilot, the Commonwealth of Massachusetts
- The Family Housing Collaborative, Columbus, Ohio
- The Rapid Exit Program, Hennepin County, Minnesota

Most of the successful Rapid Re-housing models utilize a single point of contact, typically a nonprofit organization that helps the individual or family exit the emergency shelter care system by locating and obtaining both short-term and long-term rental housing. Generally, the individual or family receives housing rental assistance. Housing assistance can vary from security deposit and first month's rent, a two year rent subsidy, a subsidy of up to a capped amount (e.g. $6,000 per family) that can be tailored to meet the needs of families, or traditional Housing Choice Vouchers.[xxxvi]

5. Cost Benefit Analysis

Due to the accelerated timeline in putting together this ten-year plan, a full cost benefit analysis was not conducted as a part of this plan although a request for qualifications for the cost-benefit analysis was issued as a part of the planning process. The Planning Council sees this analysis as an essential element to this document and therefore, it is recommended that the request for qualifications be reissued, conducted and incorporated into this document. Identification of the costs associated with providing for the homeless, and the savings that this document could potentially bring forth are critical in establishing political and civic support in ending chronic homelessness.

Nationally, according to Phillip Mangano, the Executive Director of the Interagency Council on Homelessness, the cost of homelessness and associated services (emergency room/court costs, public safety, emergency shelter) is anywhere between $35,000 to $150,000 a year per person, whereas the cost of providing a person with a place to live and supportive services is between $13,000 to $25,000.[xxxvii]

Locally, it is difficult to accurately estimate the total amount spent annually in the City and County to deal with the chronically homeless. According to a 2007-2008 Fresno County Grand Jury report, the public and private sectors spend up to $100 million on the chronically homeless per year. This figure would include the total funding from the federal and state governments, donations, medical treatments and services, food, emergency and transitional shelter, police, fire, and coroner services. It has also been reported that as much as 50 to 80 percent ($50-80 million) of the total money intended for homelessness is spent on the chronic unsheltered homeless.[xxxix]

The chronically homeless utilize the most expensive public services in Fresno County, including emergency health care and mental health services, law enforcements, and crisis intervention services. The funding for this comes from the city and county's operating budgets.[xl] In general, jail or prison costs are estimated to be three to four times the cost of shelter beds or supportive housing costs in other jurisdictions.[xli]

Using national models, a number of jurisdictions have used several methodologies to measure the most significant costs associated with chronic homelessness. Many jurisdictions examined costs such as emergency room care, mental health services, law enforcement response, and traditional shelter services.

> San Diego County tracked fifteen homeless people for eighteen months and was able to quantify the medical cost per chronic unsheltered homeless person to be more than $130,000 per year or $200,000 for eighteen months. Fifteen homeless people in eighteen months cost the county over $3 million in un-reimbursed medical care.[xlii]

Emergency Housing

According to the Poverello House, meals served, shelter nights, shower and laundry services, medical and dental treatment for one year are estimated at $3,257,979.50. On average, annually, the Poverello House serves 483,962 meals, provides 23,239 homeless with shelter, 20,417 use the shower/laundry service and 6,393 utilize the medical/dental services.

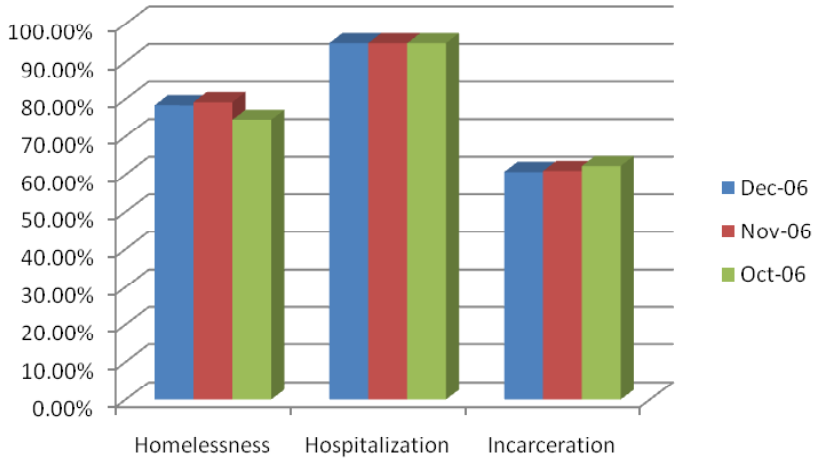
Medical Services

The average hospital stay cost is between $1,200 to $1,600 per night.[xliii] The chronically homeless, because of their noted health challenges, have a tendency to have greater frequency of hospitalization and longer hospital stays, which means higher cost. Hospitals don't track whether a patient is homeless. However, hospitals such as Community Regional Medical Center (CRMC) provide over $122 million in uncompensated services to patients, including homeless.

Fresno County mental health tracked 5,000 chronically homeless individual's enrolled in the AB 2034 program over a three year period. They concluded that:

- AB 2034 represents the best in promising practices, with demonstrable and measurable outcomes on both individual and program levels.
- California tax payers save money with this program AB 2034 program shows a substantial reduction in incarceration-the number of days of incarceration dropped by 72.1%. For example, the average cost per individual served in the AB 2034 program is $12,000 annually compared with the $41,000 it costs to keep a person in prison each year.
- AB 2034 has shown a dramatic drop in inpatient psychiatric hospitalization a decrease of 55.8%.
- The number of days spent homeless dropped 67.3%.
- The number of days of full-time employment increased 65.4%.
- The number of days of part-time employment increased 53.1%.

Figure 7: AB2034 Program Outcomes



Kern County, which recently completed their ten-year plan to end homelessness, found that:

Based on national models and partial local data, the cost to the County for a chronically homeless individual was between $40,000 and $50,000 per year on services alone.

Other figures that Kern County published in their report:

- **Law Enforcement:** The cost of law enforcement response calls involving the chronically homeless in Metro Bakersfield in 2005 was estimated to be $123,420.
- **Ambulance transport:** Homeless patient transport costs over a two year period were $416,000. One chronic homeless individual alone led to $171,000 in costs associated with ambulance transportation.
- **Hospitalization:** Kern County Mental Health tracked 151 chronically homeless individuals enrolled in a recent state program over the course of a year. In the 12 months prior to enrollment these 151 individuals spent 1,397 days in the hospital at an estimated cost of $1,397,000 to the County. These same individuals also spent 2,072 days incarcerated at an estimated cost of $186,480 to the County.[xlvi]

6. Action Plan to End Chronic Homelessness in 10 Years

Housing First:

Maintaining the existing capacity to house homeless residents and introduce additional capacity to balance needs by aggressively soliciting grants subsidies and loans.

Providing stable, appropriate, permanent housing facilitates the provision of the necessary services to achieve self-sufficiency more manageable. The Housing First model is much more than just providing housing, it is a shift in mentality on how we solve the problem of chronic homelessness.

Goal: Increase permanent supportive housing through the housing first model and the rapid rehousing of the chronically homeless.

Strategy: Place 941 chronically homeless persons in housing during the next ten years.[xlv]

Action: Use housing vouchers, landlord agreements, new construction and existing housing stock to provide 941 units of housing for the chronically homeless.
Action: Of the 941 units one-third shall be new construction, universally designed and ADA compliant and built with green and sustainable methodologies.
Action: Utilize diverse and creative housing designs and types.
Action: Support existing efforts to create affordable housing for very-low income residents such as the creation of a self-sustained Housing Trust Fund.
Action: Encourage entitlement communities to incorporate the development of permanent supportive housing units in their Housing Element Updates and Consolidated Plans.

Strategy: Identify and recommend changes to County and City ordinances that might prevent the achievement of the housing first model.

Action: Lead Homeless Agency to review and make recommendations to City and County ordinances that may impede the creation of homeless housing.

Opportunity:

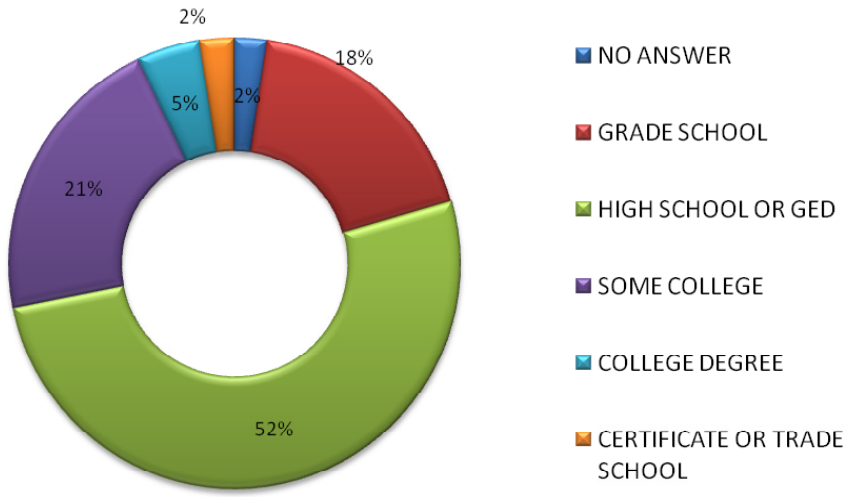
Providing for the rights and dignity of our homeless by offering them opportunities to return to mainstream society

Lack of employment, income and economic opportunity are often identified as major causes of homelessness. Although 19 percent of Fresno County homeless individuals report being employed or having occasional work, many of the jobs

they hold do not provide adequate wages and benefits for self-support. Solving chronic homelessness requires helping these individuals achieve economic stability through employment opportunities, education, and supportive case-management. In providing employment opportunities for the homeless, it is possible to offset the costs of supportive services and housing through the individual's income and productivity.

Lack of employment, income and opportunity are not only a cause of homelessness, they are barriers in ending homelessness. Fifty-two percent of Fresno County's homeless population reported that they have completed a high school education with 26 percent reporting that they have had some college education. Just 18 percent stated that they only had an elementary school education. Our homeless are not unemployable if given the opportunity. There are myriad barriers to employment and therefore the Planning Council has set this as a key goal.

Figure 8: FMCoC Street Survey: Education



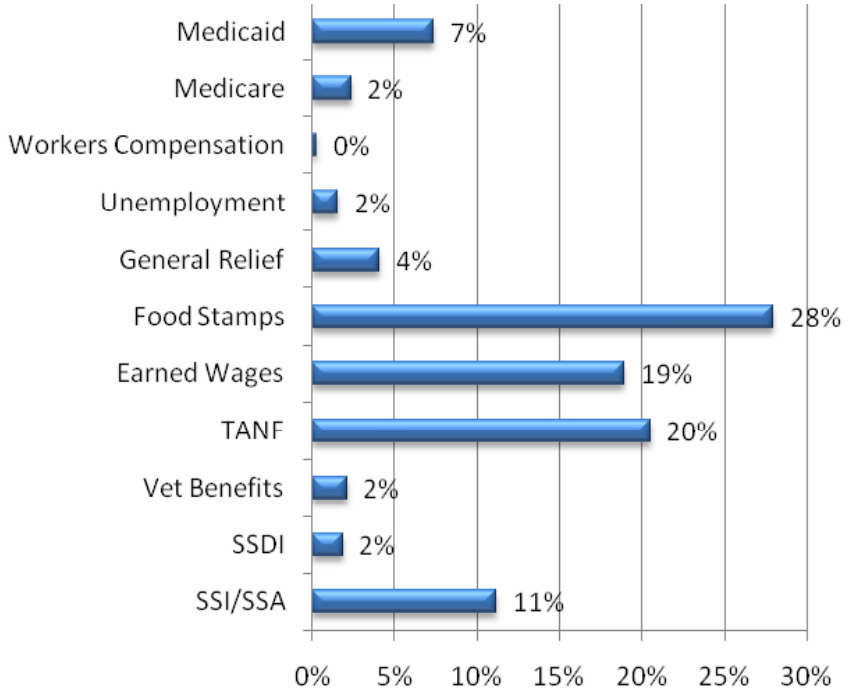
The intake process for these services must include a comprehensive assessment of eligibility for available benefit programs, an assessment of education and current employability in order to determine job placement opportunities and educational needs.

Through constant case management and assistance, homeless individuals will better be able to manage their financial resources. Provided they cannot do so, more extensive case management is necessary.

Repeated episodes and extended periods of homelessness decrease the prospects of employment as the consequences of prolonged homelessness may include social stigma and loss of work habits, responsibility and commitment to employment. The ten-year plan recognizes that people who are chronically homeless will need greater access to resources that provide employment training and placement. For some, the root causes of their homelessness may

indicate a skill level for both work and life skills that are below the expectations of most employers. Although there are many employers who are willing to assume some risk by offering employment to the homeless, that risk is still limited by the employer's minimum expectations.

Figure 9: FMCOC 2007 Street Survey: Income



An employee whose attendance is sporadic or whose work skills do not match job requirements will quickly run out of chances with the employer. It is important to use organizations such as the Workforce Investment Board, the Fresno Career Development Institute, Fresno County EOC and the Fresno Adult Education Center that have established programs for the homeless and to bolster their efforts in placing the homeless into jobs or training. Building on these existing relationships and processes is both cost effective and a tested method in increasing opportunities. Stable housing provides individuals the ability to maintain employment.

In addition, programs such as Fresno Works for Better Health Neighborhood Employment Resource Centers (NERCs) can serve by providing basic job readiness and placement services to the chronically homeless population. New programs targeting individuals who require basic life and work skills training combined with marketable vocational training are also needed to help the chronically homeless bridge the gap.

Training combined with supportive case management is essential for helping homeless people maintain both stable employment or work training. Additionally, for homeless families, childcare and affordable transportation are critical for gaining and maintaining employment. To address benefits, education and employment needs of the homeless, as many resources as possible should be brought directly to the homeless. Satellite offices for these programs should be located near homeless population concentrations and at primary homeless service locations.

A key aspect in assimilating homeless individuals back into mainstream society is by ensuring their equal rights and providing programs and services that offer them opportunity.

Goal: Expand and increase employment opportunities for the chronic homeless through public-private partnerships.

Strategy: Establish an employability, education, and benefits assessment at intake into housing our services.

Strategy: Utilize an employment re-entry and outreach program that serves both the homeless population and those leaving correctional facilities to increase the opportunities for employment and stability.

Strategy: Coordinate no cost and low cost education and vocational training opportunities with established adult education programs.

Strategy: Construction and renovation projects should be used as training grounds and employment opportunities for the homeless.

Goal: Increase and improve access to public assistance, mental and physical health services for the chronically homeless.

Strategy: Partner hospitals with existing services to establish respite care centers.

The chronically homeless face a wide range of physical health challenges. For those homeless individuals requiring hospitalization, one of the most glaring inadequacies in our local community is the lack of medical respite facilities. In some cases, it has been noted that performing a needed surgery on a chronically homeless individual who has no place to rest and recover is more detrimental to his or her health than not performing the surgery at all.

In the absence of a medical respite center, that role has typically fallen on local hospitals. The challenge for hospitals is that the cost of keeping non-acute patients under care is extraordinarily high and the recurring costs of homeless patients returning to the emergency room for additional treatment because they were unable to recover from the initial procedure simply adds costs into an already fragile healthcare system.

At both the humane and financial levels, it is important that Fresno County and health care facilities take the necessary steps towards collaborative discharge planning for chronically homeless individuals. This includes the establishment of respite care programs that give hospitals options when it comes to treating and discharging homeless patients.

Communities such as Sacramento and Chicago have established working models of successful respite care programs and coordinated discharge planning that have resulted in reduced costs, less frequent hospital visits, and programs that allow hospitals to discharge homeless patients to shelters where they can recover in a safe and clean environment.

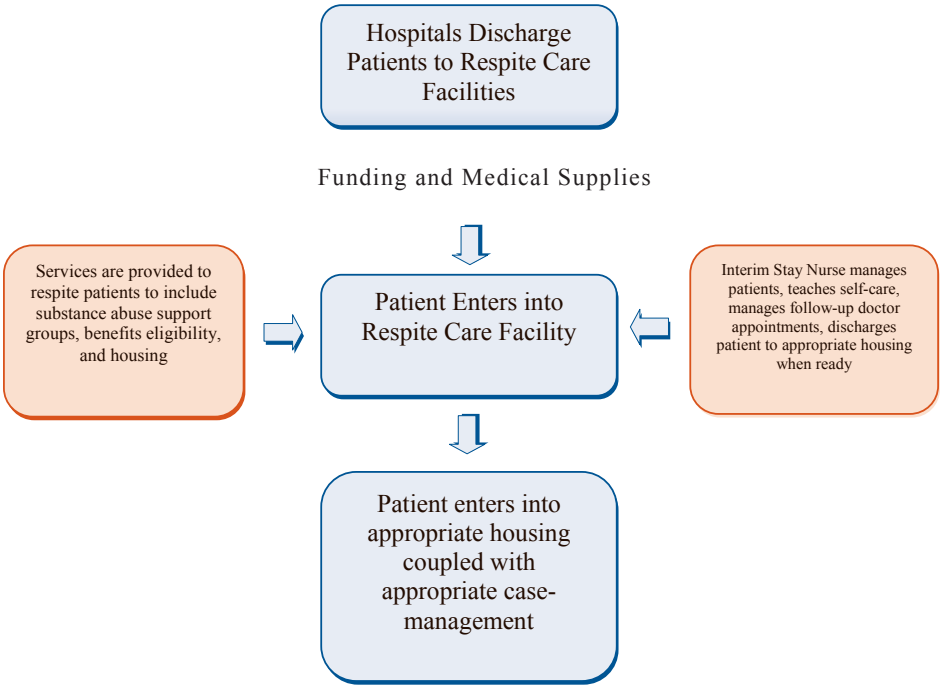
The respite care program in Chicago demonstrated that when appropriate recovery facilities are provided to homeless patients, it dramatically reduces the amount of impatient days and emergency room visits. Chicago's study demonstrated that the average patient used 4.7 fewer impatient days and .08 fewer emergency room visits than that of homeless patients that were discharged back to the street.[xlvi] These results demonstrate the significant amount of savings that can be achieved through proper planning.

In Sacramento, area hospitals came together with a local non-profit to establish a respite care center. This center is simply a place for homeless individuals to rest and recover from hospitalizations or outpatient procedures, where their medications can be stored, and where home health nurses can visit and provide check-ups and ensure compliance.[xlvii]

Respite care facilities do not necessarily need new infrastructure to be successful, but rather can build upon existing shelters provided that funding can be secured to ensure that meals, handicap accessible beds and bathrooms are provided, and that the facility has the ability to store medication. Staffing such as an interim stay nurse can be utilized to manage the recovering patients, ensure that they make follow-up visits with medical doctors, and make the decision on when a patient is ready for discharge.

More comprehensive respite care models offer referral and supportive services as a part of the overall process of recovery. Alcohol and drug abuse support group meetings, Medi-Cal eligibility screening, and housing referrals or vouchers serve as long-term plans for care that extend beyond recovery. Active case management services, as demonstrated through California's recent Frequent Users of Health Services Initiative, are also a key in improving the long-term health of the chronically homeless and ensuring that a community's healthcare resources are utilized at their "highest and best use." [xlviii]

An example of a successful discharge program model:



Today's healthcare environment is challenging for all to navigate and is especially difficult for the chronically homeless. Ensuring that homeless patients transition from acute care settings to respite care then into appropriate community-based, case managed services and housing are all essential steps in the process of eliminating the cycle of chronic homelessness.

Goal: Provide immediate relief to the crisis of homelessness.

Strategy: Provide 15 to 30 Housing First rental assistance and supportive service vouchers to chronically homeless individuals over the next year.

Strategy: Provide for public showers, triage medical care, and clothes exchange at a consistent location for the homeless.

Strategy: Hold Project Homeless Connect Events.

Short-term solutions to homeless issues, although often viewed as "temporary fixes" to long term problems, do have their place in combating and ending chronic homelessness and providing for immediate needs. Although a large number of homeless are in need of long-term managed care in permanent supportive housing for mental health and drug and alcohol related treatment, many homeless are merely in need of a helping hand to get back on their feet. The programs listed here provide for the chronic, episodic, and at-risk populations immediate needs in conjunction with long-term planning for the ten-year plan to end homelessness.

Until adequate permanent supportive housing is available, it is important to address the health and sanitation needs of the homeless. The establishment of service centers that can provide for the basic needs of the homeless is essential in planning short-term strategies.

Through national programs, local municipal efforts, and community based efforts, there are many short-term solutions that will assist homeless populations and decrease the chronic homeless population in Fresno County. Through case-studies and best practice research, our findings indicate that a majority of short-term programs are usually community based. Nevertheless, they require some form of subsidy and well-coordinated joint partnerships to ensure their success.

Prevention:

Stopping the cycle of chronic homelessness before it begins

Closing the front door on homelessness covers a wide spectrum of programs, initiatives and systems that all work towards preventing both families and individuals from losing their housing.

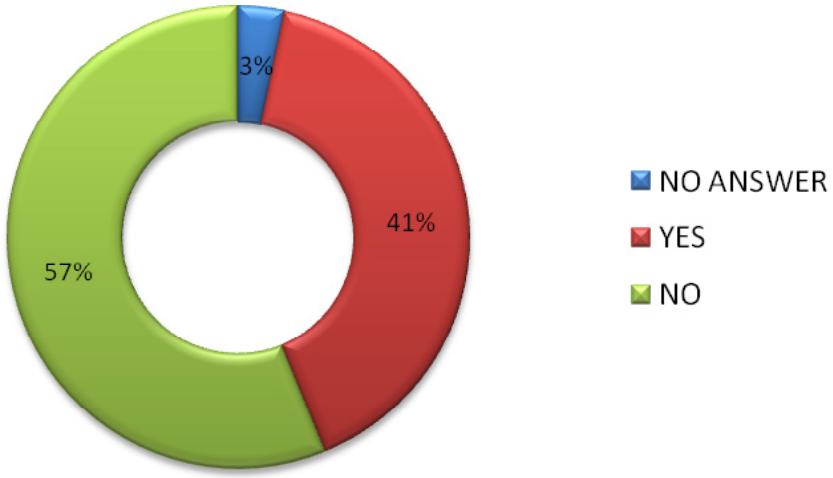
The best approach to ending homelessness and obtaining sustainable long term results is to prevent homelessness at its inception. Prevention of homelessness, according to the National Alliance to End Homelessness, is one sixth of the cost in financial and human terms than finding and establishing housing for someone after becoming homeless.[xlix] Programs such as rental assistance, utility assistance and legal advocacy increase housing stability for the residents of Fresno County and therefore, serve as the first line of defense in preventing chronic homelessness before it starts.

However, prevention is not just limited to stopping homelessness before it begins. It is also stopping the cycle of chronic homelessness altogether. Institutions that discharge people into homelessness often lack the proper referral services with access to permanent supportive housing resulting in too many people being discharged directly to emergency shelters and the streets. National studies have shown that over 30 percent of all people discharged from institutions that come in contact with the chronic homeless end up homeless within 6 months of discharge. This same pattern can be demonstrated in the foster care system because those who are discharged at age 18 are more susceptible to ending up on the streets.[l]

The institutions mentioned above are overburdened and are limited on resources when dealing with homeless individuals. Long-term treatment is not an option when combined with limited budgets and the costs associated with providing shelter and care almost demand that these providers focus on rapid rehabilitation and release. Nevertheless, this results in an influx of persons with disabilities, addictions and mental illness who are poorly adapted to finding housing without the proper assistance.

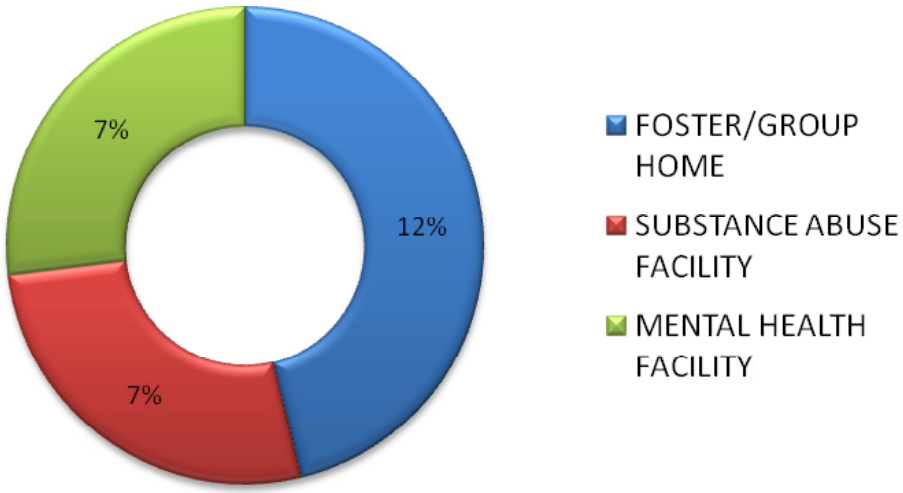
Correctional facilities currently release prisoners to the street. This practice contributes to a high rate of recidivism combined with a higher tendency of drug and alcohol addictions that result from inadequate case management, proper facilities, and housing. With over 40,000 inmates cycling through the Fresno County jail system[li] and with 14 State prisons[lii] in the Central Valley, policies and procedures must change for the benefit of those released, the safety of our citizens, and the cost to our tax payers. Figure 10 demonstrates that 41 percent of our homeless population has been incarcerated at one point or another.

Figure 10: FMCoC Street Survey Incarceration



Limitations in our current foster care system result in youth, who are often unprepared for independent living and at risk of becoming chronically homeless, being discharged without the proper resources to make it on their own. In the Continuum of Care Survey, it was reported that 1 percent of Fresno County's homeless were youth and of the homeless survey participants 12 percent had lived in foster care services previously.

Figure 11: FMCoC Street Survey: Have you lived in the following?



Discharging individuals on to the street is neither humane nor cost effective to society and, ultimately, the tax payer assumes the cost of an insufficient under-resourced system.

Goal: Close the revolving door of chronic homelessness through continuous managed services prior to discharge from public programs.

Strategy: Advocate for a State plan which defines and regulates minimum requirements for institutional discharge.

Strategy: Reduce homeless-related discharges from hospitals.

Strategy: Reduce homeless-related discharges from correctional facilities.

Strategy: Reduce homeless-related discharges from foster care.

Goal: Expand the range of and availability of prevention strategies to close the "front door" on chronic homelessness.

Strategy: Provide one-time foreclosure assistance for low-to-moderate income residents.

Strategy: Strengthen ties with faith-based organizations, shelter providers, and the City and County housing authority to provide outreach programs that are designed to increase housing and economic stability to prevent homelessness.

Strategy: Expand services that support housing stability such as rental assistance legal assistance, and affordable housing placement.

Establishing Collaboration:

Taking a unified local and regional community approach to the crisis of chronic homelessness.

The homeless face a complex network of services without a clear process for receiving services. Necessary services such as housing, medical, food and benefits may be in multiple locations with multiple providers. The unification of this effort and the processing of this data can be achieved through the use of the Homeless Management Information System (HMIS). Many chronic homeless individuals continue to seek the same services without making any progress towards permanent housing. HMIS should be used to provide a continuous history and case management process between different services. HMIS can be used to reduce the amount of duplicate services that are being provided by multiple agencies, and allow organizations to make data driven decisions when streamlining programs for the homeless.

Implementation of a unified HMIS reporting system is beneficial to both provider and the homeless. If used in cooperation with all service providers, it can be

an effective tool in reducing duplication, inefficiencies and resources, while establishing effective system wide case management.

HMIS is a tool that increases the effectiveness of implementing solution based plans, by providing a means for better coordination of case management. For HMIS to be an effective tool, it needs to be a system that is utilized at all levels of service from housing providers and services agencies, to prisons and hospitals. The successful use of this system will provide Fresno County the data necessary to provide appropriate and timely services that are based upon quantifiable and accurate results.

Goal: Improve data collection methods to provide a single point of entry through the Homeless Management Information System (HMIS).

Strategy: Incentivize the use of HMIS to include government, hospitals, housing providers, health departments, substance abuse providers, and correctional facilities.

Strategy: Utilize HMIS to provide a single point of entry for homeless services and case management coordination and link housing resources and availability.

Goal: Indentify an agency that will serve as the single point of contact, driving force, and accountable agent for the homeless of Fresno County.

Strategy: Lead Homeless Agency (LHA) to ratify this plan as a guiding policy paper/action plan. This is a living document that is to be continual adapted and updated according to best practices and changing conditions in Fresno County.

Strategy: Increase public awareness and political will to implement strategies and actions to achieve the goals set forth in this plan.

In order for this plan to be successful it needs to have a champion that will manage it and organize a collaboration as we continue our mission to end chronic homelessness in Fresno County. However, for this to happen, it is necessary that the City and County of Fresno collaboratively choose an organization that will serve as the lead agency not only in addressing our current systems, but in addressing the unmet needs, using the "Housing First" model.

This agency or individual will be responsible for coordinating and unifying efforts for effective case management, services and for putting people into housing first. In addition, it will be ultimate responsible for the progress of the ten-year plan to end chronic homelessness.

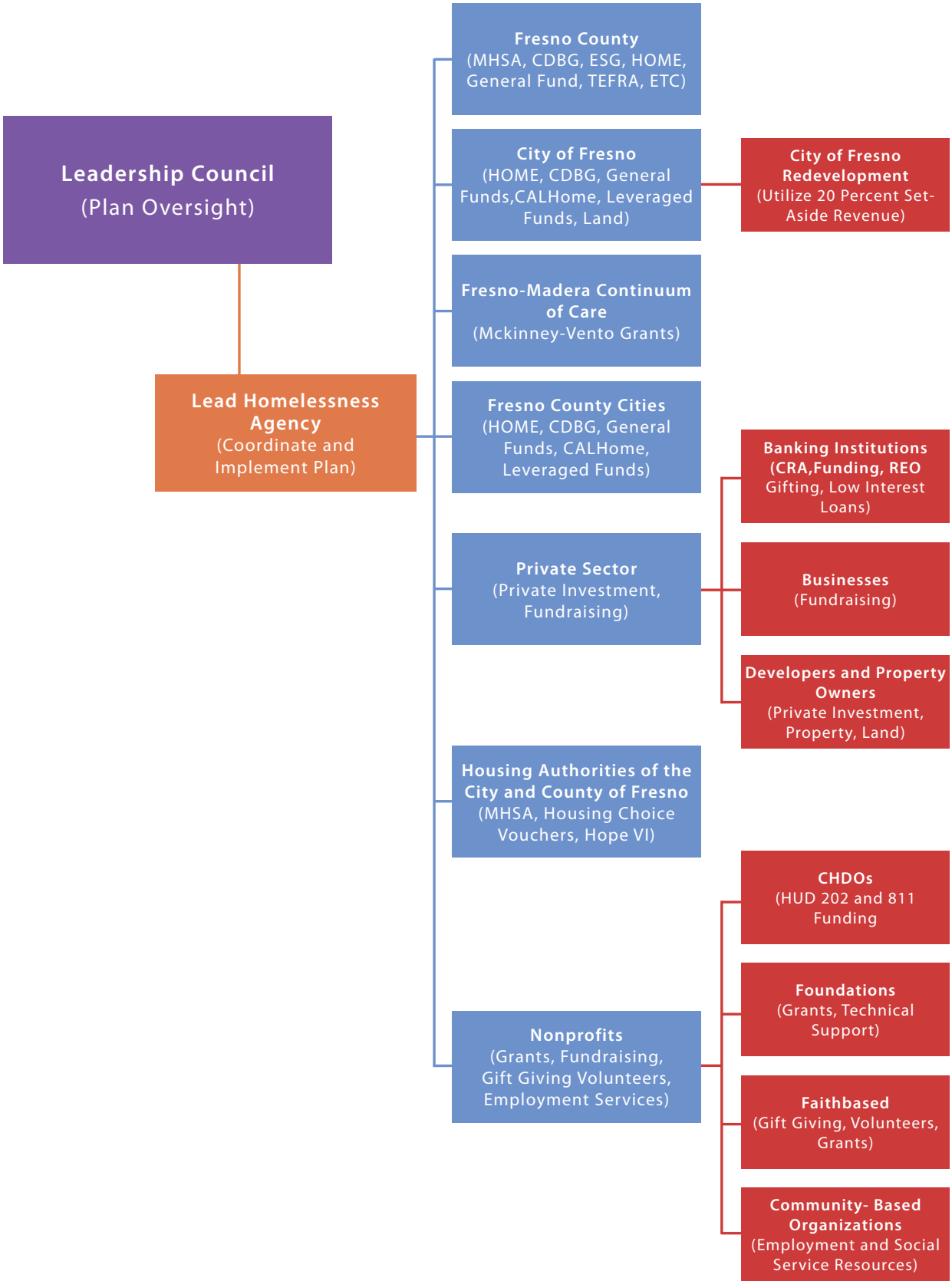
7. Implementation and Management Strategy

The Role of the Plan Implementation/ Oversight Committee

Homelessness is a complex community wide problem that cannot be segregated into different programs and layers that all too often provide the same services to the same people without a common vision. The City and County of Fresno's Ten-Year Plan to End Chronic Homelessness defines goals and strategies. The most critical part of this plan is that it is implemented and the City and County take ownership of this process. As a Planning Council, we recommend that the Leadership Council serve as the oversight body that will periodically review and monitor the ten-year plan. The Leadership Council will identify a lead homeless agency that will be responsible for implementing this plan and ensuring that the intended goals, strategies and action steps are achieved. By centralizing the control of homeless programs we can best achieve the goals that this plan sets forth.

Aside from the role of the FMCOC, Fresno is void of an agency that is responsible for the coordination of both housing and necessary wrap-around supportive services needed to successfully maintain a pool of housing for the chronically homeless population. Several organizational leaders have presented scenarios of how our community can improve its effort to coordinate "housing first", permanent supportive housing strategies. Based on those discussions with numerous elected officials, community stakeholders and department heads the following is a detailed graph that illustrates a potential model for coordination.

Figure 12: Example of Implementation Structure



Role of the Leadership Council

- Provide oversight of the ten-year plan.
- Review, monitor and re-adjust goals, strategies, and actions set forth in the plan.
- Communicate results and changes to local jurisdictions.

Role of the County of Fresno

- Establish joint partnership with the City and Fresno Housing Authority
- Provide necessary data and reports to the Housing Authority about housing and supportive service programs
- Encourage current service providers to create new permanent supportive service housing through grants.
- Develop a user friendly resource manual/guide of all county programs and services (mental, medical, housing, social, employment services)
- Develop new and maintain existing mental health/homeless permanent supportive housing through MHSA.

Role of the City of Fresno

- Create new housing units available to the chronically homeless.
- Encourage Community Housing Development Organizations (CHDOs) to develop permanent supportive housing to the chronically homeless individuals.
- Ensure that current and future affordable housing policies include language that addresses the creation of a supply of housing for the chronically homeless.
- Continue to provide comprehensive technical assistance to the County's eight Community Housing Development Organizations in the area, and pair them with developers of existing projects to transfer skills and knowledge.[liii]

Role of the Lead Homeless Agency

- Manage and track the outcomes of the Ten-Year Plan to End Chronic Homelessness over a ten year period (one staff person funded by HUD).
- Create 20 to 30 units of housing for the chronically homeless per year over a ten-year period.
- Develop a multitude of formal public/private partnerships that result in effective permanent supportive services in Fresno County.
- Develop "Housing First" selection criteria.

Role of the Housing Authority

- Create new housing units available to the chronically homeless.

A key role in implementing this plan is the continuance of a plan implementation team to ensure that the plan continues to develop, establish collaborations, and most importantly, achieves the results that are outlined in this document.

The Leadership Council will have the ultimate authority for the evaluation, reporting, achievements and outcomes of this plan. The Leadership Council must consistently monitor and re-evaluate the goals and strategies of this plan to ensure that they meet the needs of Fresno County.

In order for the Lead Homeless Agency to evaluate the effectiveness of this plan, it is necessary that they have quality data from which to measure the progress towards ending chronic homelessness. It is essential that we strengthen our HMIS reporting system to access accurate and timely data in measuring our successes.

Through effective management and continuous evaluation of the Ten-Year Plan, Fresno City and County will be able to achieve the vision that has been outlined in this document.

8. End Notes

[i] Population was determined using the Fresno Madera Continuum of Care's Point-in-Time Homeless Population and Subpopulations Chart: 1/26/07. Point-in-time counts are utilized by HUD to gather a "snapshot" of homeless populations and subpopulations within a jurisdiction.

[ii] California Prison Growth, introduction http://www.cjcj.org/cpp/ccf_growth.php (August 25, 2008).

[iii] Populations have increased utilizing either the HUD 1 to 2 percent general population rule, or by utilizing point-in-time surveys as conducted by the FMCoC.

[iv] The number of chronic homeless was determined using the FMCoC's Point-in-Time Homeless Population and Subpopulation Chart conducted on January 26, 2007. Although the Planning Council felt that 941 was too small of a number to accurately reflect the chronic homeless population of Fresno County, it was decided to use the point-in-time survey as it is utilized on HUD funding applications. The council co-chairs agreed to use 941 as a baseline number. The council recommended conducting a new point-in-time survey on an annual basis to ensure that this plan remains current. For the housing goal, the total number of chronic homeless will be reevaluated on an annual basis to ensure that the correct number is represented.

[v] 40 percent was identified by the FMCoC as the goal for employment over ten years in the 2007 Exhibit 1.

[vi] Collaborative Initiative to Help End Chronic Homelessness, Satellite Broadcast, www.hud.gov/offices/cpd/homeless/apply/2002nofa/joint-nofa.ppt (February 19, 3003).

[vii] Fresno Madera Continuum of Care: Ten-Year Plan to End Homelessness 2006-2016, (8)

[viii] IBID.

[ix] Mendoza, C.T., Hamilton K., Hines S, Eley D. Baseline Data Committee Report. County/City of Fresno, 10 Year Plan to End Chronic Homelessness Council, April 29, 2008.

[x] American Planning Association. Policy Guide on Homelessness. March 30, 2003. Denver, Colorado. http://www.planning.org/affordablereader/policyguides/homelessness.htm.

[xi] The Chronicle of Philanthropy, Katrina's Aftermath Requires Bold Action, October 27, 2005.

[xii] Housing and Homelessness, National Alliance to End Homeless, 1987. Homelessness: Programs and the People They Serve. Findings of the National Survey of Homeless Assistance Providers and Clients. Highlights. Interagency Council on the Homeless, December, 1999.

[xiii] Jeff St. John Fresno Bee, February 29, 2008 "Unemployment rates in Valley rise," Fresno Bee [Fresno, California], February 29, 2008.

[xiv] IBID.

[xv] Fresno Madera Continuum of Care 2007 Point in Time Homeless Street Count Narrative Information.

[xvi] IBID.

[xvii] Fresno County Quick Facts from the US Census Bureau, http://quickfacts.census.gov/qfd/states/06/06019.htm.

[xviii] Fresno Madera Continuum of Care 2007 Point in Time Homeless Street Count Narrative Information.

[xix] IBID

[xx] Fresno County Quick Facts from the US Census Bureau, http://quickfacts.census.gov/qfd/states/06/06019.htm.

[xxi] Culhane, D.P. Metraux S., & Hadley, T. (2001). The New York/New York Agreement Cost Study: The Impact of Supportive Housing on Services use for Homeless Mentally Ill Individuals. New York: Corporation for Supportive Housing.

[xxii] Better homes fund (1999). Supportive housing and its impact on the public health crisis of homelessness. New York: Corporation for Supportive Housing.

[xxiv] The National Alliance to End Homelessness: Homeless Counts, www.endhomelessness.org /content/article/detail/1440

[xxv] Governor's Ten Year Chronic Homelessness Action Plan, State of California

[xxvi] News of the Interagency Council on Homelessness http://www.ich.gov/2005.html, 2005

[xxvii] Development of California's Ten Year Chronic Homelessness Action Plan, http://www.homebaseccc.org/pages/Hot_Topics/ca10yearplan.html, 4/19/07

[xxvii] Governor's Ten Year Chronic Homelessness Action Plan, State of California

[xxviii] http://www.thecontinuumofcare.org/default.asp?page=home

[xxix] National Alliance to End Homelessness: http://www.endhomelessness.org/section/tools/housingfirst

[xxx] www.beyondshelter.org/aaa_initiative/ending_homelessness

[xxxi] (Office of Policy Development and Research, U.S. Department of Housing and Urban Development, Evaluation of the Emergency Shelter Grants Program, Volume 1: Findings September 1994. p 91.)

[xxxii] National Alliance to End Homelessness, http://www.endhomelessness.org/section/tools/housingfirst

[xxxiii] Research Reports on Homelessness in America: A New Vision: What is in Community Plans to End Chronic Homelessness? November 2006. National Alliance to End Chronic Homelessness.

[xxxiv] IBID.

[xxxv] IBID

[xxxvi] IBID

[xxxvii] U.S. Interagency Council on Homelessness.

[xxxviii] 2007-2008 Fresno County Grand Jury Report, Final Report #2.

[xxxix] IBID.

[xl] IBID.

[xli] IBID.

[xlii] IBID.

[xliii] Fresno County Mental Health Services, 2006 AB2034 Report.

[xliv] Kern County Ten-year plan to end Chronic Homelessness.

[xlv] 941 should be used as a baseline number; this figure should be updated based upon new point-in-time surveys or other methodologies for enumerating the homeless populations and subpopulations.

[xlvi] Buchanan, David, MD "Respite Care for Homeless People Reduces Future Hospitalizations" Journal of General Internal Medicine, April 2003, Vol 18(S1), p203).

[xlvi] Sacramento County and Cities Board on Homeless Program Fact Sheet, http://dhaweb.saccounty.net/Homeless/SC&CBoH.htm (December 6, 2005).

[xlvii] Collaborative Initiative to Help End Chronic Homelessness, www.calendow.org

[xlviii] National Alliance to End Homelessness, www.endhomelessness.org.

[l] IBID

[li] Conversation with Bart Bohn, Fresno County Administrative Officer

[lii] California Prison Growth, introduction http://www.cjcj.org/cpp/ccf_growth.php (August 25, 2008).

[liii] Affordable Housing Imperative, November 2007 Allysunn Williams, Office of Community and Economic Development, California State University of Fresno.

9. Appendices

Glossary of Terms

Affordable Housing - Housing with rent that is affordable to households of low and moderate income, which are households within the lowest 80% of the area median income for the region, as determined by the Department of Housing and Urban Development. Affordable in this context means annual housing costs do not exceed 30% of gross annual household income.

At-risk of Homelessness - Potential households considered at-risk of homelessness are: households paying more than 50% of their income for rent; households doubling up with others or "couch surfing" (temporarily staying with friends); and living in single room occupancy hotels represent a conservative definition of those at risk of homelessness.

Case Management - The process by which all matters of a homeless individual's needs are assessed and managed by a social worker or case manager. Case managers coordinate designated components of health care, employment readiness, public benefits, and housing placement. Case management is intended to ensure continuity of services and accessibility to overcome rigidity, fragmented services, and the misutilization of facilities and resources. It also attempts to match the appropriate intensity of services with the individual's needs over time.

Chronically Homeless - An unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more or has had at least four (4) episodes of homelessness in the past three (3) years.

Continuum of Care - A comprehensive and coordinated housing and service delivery system. This approach helps communities plan for and provide a balance of emergency, transitional, and permanent housing and service resources to address the needs of homeless persons so they can make the critical transition from the streets to jobs and independent living.
Co-occurring Disorders - Typically refers to homeless individuals with the occurrence of mental and substance use disorders.

Discharge Planning - The process of coordinating and evaluating an individual's needs in order to arrange for appropriate care following discharge from a hospital or other institutional care setting.

Dually Diagnosed - Individuals who are substantially limited in one or more major life activity by mental illness and alcohol or drug addiction. Persons with other diagnoses qualify under multiple diagnoses.

Elderly Homeless - An elderly homeless individual is 62 years old or older.

Emancipated Foster Youth - Young adults who have reached majority age (18 years) were in the foster care system and who now have no other home.

Emergency Shelter - Free temporary shelter provided as an alternative to residing in a place not meant for human habitation and typically is limited to 90 days.

Extremely Low-Income Households - Households who have incomes that are 30% or less of the area median income.

Family - Defined as any of the following: Minor parents with child(ren); one or more adults with legal custody of minor child(ren); a couple in which one person is pregnant; grandparents or others who are legal guardians with child(ren) present; multi-generational families with grandparents, parents (adult child) and minor child(ren).

Homeless Management Information System (HMIS) - Refers to a computerized system that will allow agencies to track service usage over time. The usage data collected will help LAHSA plan for future services and programs. The system is presently under implementation.

Homeless - A person is considered homeless only when he/she resides in a place not meant for human habitation, such as cars, parks, sidewalks, abandoned buildings, on the street; in an emergency shelter; in transitional or supportive housing for homeless persons who originally came from the streets or emergency shelters; in any of the above places but is spending a short time (up to 30 consecutive days) in a hospital or other institution; is being evicted within a week from a private dwelling unit and no subsequent residence has been identified and the person lacks the resources and support networks needed to obtain housing; is being discharged within a week from an institution, such as a mental health or substance abuse treatment facility or a jail/prison, in which the person has been a resident for more than 30 consecutive days and no subsequent residence has been identified and the person lacks the resources and support networks needed to obtain housing; is fleeing a domestic violence housing situation and no subsequent residence has been identified and the person lacks the resources and support networks needed to obtain housing.

McKinney-Vento Act - The primary federal legislation that funds housing and services specifically for homeless individuals and families and is administered by various federal departments.
Mentally Ill Individual - An individual substantially limited in one or more major life activities by mental illness based on confirmed clinical diagnosis, or initially by referral or staff assessment and later confirmed by clinical diagnosis.

Mental Health Court - Mental health courts have been created by locally, often adapting the model of drug courts, to obtain mental health treatment for persons with mental illness accused of crimes. Currently, some mental health courts

involve using the authority of the court to impose treatment compliance as a condition of release. Failure to comply may result in sanctions being imposed, up to and including incarceration.

NIMBY - Is an acronym that stands for Not In My Back Yard and describes someone or a group of people who object to siting something in their own neighborhood but do not object to it being sited elsewhere.

Permanent Housing - Housing that is not time-limited and is intended to be a home for as long as a person chooses to live there and continues to be eligible if the unit is subsidized.

Permanent Supportive Housing - Housing that is not time-limited and is linked to support services such as mental health, case management, employment assistance and other services to enable residents to maintain self-sufficiency.

Proposition 46 - The Housing and Emergency Shelter Trust Fund Act of 2002, is a $2.1 billion dollar bond measure that was passed by the voters in California in November 2002. The bond provides millions of dollars to help fund the construction, rehabilitation and preservation of affordable rental housing, emergency shelters and homeless facilities, as well as funds that can be used to provide downpayment assistance to low and moderate-income first-time homebuyers.

Recidivism - Return or relapse to a type of behavior, such as substance abuse or returning to incarceration.

Section 8 - A federal housing subsidy program that is administered locally by housing authorities. The subsidy program is both tenant and project-based. The Section 8 voucher program provides assistance in order for the voucher recipient to pay no more than 30% of their gross monthly income on rent in a unit that complies with the rent guidelines. Housing authorities may spend a portion of their Section 8 certificate program funds to specific housing projects and thus subsidizing the unit.

Service Enriched Housing - Rental housing in the community at-large, in which "services
coordination" is available, to help all residents attain improved social and/or economic well-being.

Street Outreach - Services delivered directly to homeless individuals residing in places not meant for human habitation in order to connect the individuals to existing service providers.

Substance Abuse Individual - An individual who has acknowledged addiction problems related to alcohol and drug use and who seek services or housing to support their sobriety.

Supportive Housing - Housing that is coupled with supportive services in order to assist individuals and families maintain financial and personal stability and self-sufficiency, to prevent homelessness.

Supportive Services - Services provided directly to homeless individuals and/or families intended to assist homeless individuals and/or families in attaining or maintaining residential, financial and personal stability and self-sufficiency.

Transitional Housing - Housing that has as its purpose facilitating the movement of homeless individuals and families to permanent housing within usually 24 months.

Universal Design - the design of products and environments to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design. The intent of universal design is to simplify life for everyone by making products, communications, and the built environment more usable by as many people as possible at little or no extra cost. Universal design benefits people of all ages and abilities -The Center for Universal Design (www.design.ncsu.edu <http://www.design.ncsu.edu>)

Description of Workgroups

Workgroup	Objective	Outcome
History, Research, Best Practices and Needs Assessment	To analyze the historical factors that prompt the City and County of Fresno to undertake the task of addressing housing for the homeless; data that supports this effort; and what other cities are successfully doing to create and implement ten-year plans to end chronic homelessness.	• The identification of relevant historical events, policies or documents that have led to the formation of the Leadership Council and the development of a ten-year homeless plan. • Statistical and analytical information providing an overall picture of the housing and homeless needs of the community. • Review of other jurisdictions successful homeless programs and the strategies that can be used to address the specific homeless housing needs of Fresno City and County.
Workgroup Participants: Chair: Doreen Eley, Carmen T. Mendoza, Chuck Parnell, Claudia Cazares & Larry Arce		
Workgroup	**Objective**	**Outcome**
Public Policy and Agency System Assessments/Cost Benefit Analysis	Recommend strategies to assist local, public and private agencies to integrate policies and procedures that prevent and significantly reduce chronic homelessness. Analyze the economic and social impact of homelessness in Fresno County against the benefit of adopting a Housing First strategy.	• An analysis of the costs of homelessness associated with emergency care systems (shelters, ambulance, hospitalization, and police services). • An analysis of the costs of homelessness associated with decreased housing stability. • An analysis of other jurisdictions actual costs of adopting the Housing First model for housing the homeless.
Workgroup participants: Chair: Kevin Hamilton, Carmen Mendoza, Debbie Hunsaker, Rev. Jim Franklin, Rev. Larry Arce & Maurice Lee		

Workgroup	Objective	Outcome
Funding Strategies	Create Strategies that will provide the funding support necessary to carry out objectives as defined in the ten-year plan to end chronic homelessness.	• A best practice analysis of other jurisdictions efforts to secure funding. • The identification of applicable local, state, federal, and private revenue sources that could be available to support the ten-year plan. • An implementation strategy identifying key partners and the community engagement necessary to establish a permanent source fund.
Workgroup participants: Chair: Katherine Perez & Preston Prince		

Workgroup	Objective	Outcome
Health and Supportive Services	Identify Health and Human Services in the City and County of Fresno that are available to the chronically homeless, and recommend strategies on how to improve these services.	• An analysis of the City and County of Fresno's current Health and Human Services systems of care. • Action steps to improve the access to and delivery of health and human services for the homeless, consistent with the Housing First model.
Workgroup participants: Chair: Lynne Ashbeck, Kevin Hamilton, Stacie Hines, Preston Prince, Sr. Mary Clennon & Judy Wathen-Farris		

Workgroup	Objective	Outcome
Education, Training and Employment	Create strategies that will improve the social and economic condition of chronically homeless individuals though education, training, employment and financial literacy programs.	• The identification of education, training, employment and financial literacy programs available in the City and County of Fresno. • Strategies that will support and expand existing education, training, employment and financial literacy programs that target the chronically homeless. • Strategies that will increase short-term results for immediate avenues for access to employment and services
Workgroup participants: Chair: Larry Arce, Kiel Famellos-Schmidt		
Plan Accountability, Community Awareness and Outreach Strategies	Create strategies to ensure lines of authority and accountability are clearly defined in order to fully implement the ten-year plan. Also, create strategies that increase public awareness and understanding about issues concerning the chronically homeless and efforts undertaken by the Leadership Council to improve these conditions	• Recommendations that ensure accountability of implementing the ten-year plan after the planning process is complete. • Strategies promoting the ongoing disbursement of information to non-profits, local public entities and private citizens.
Workgroup participants: Chair: Al Williams & Kiel Famellos-Schmidt		

Workgroup	Objective	Outcome
Urban and Housing Design, Zoning and Land Use	Recommend urban and housing design, zoning and land use strategies that adequately address the need for the development of temporary and permanent housing for the homeless.	• An analysis of current design, zoning and land use ordinances for both the City and County of Fresno that may serve as an impediment to the development of housing for the chronically homeless. • Recommendations from key city staff and officials for expert opinion. • Recommend new or modified ordinances to be included in the ten-year action plan.
Workgroup participants: Chair: Art Dyson, Judy Wathen, Lynne Ashbeck, Debbie Hunsaker, Kiel Famellos-Schmidt, Claudia Cazares, Bonnie Rusko, Robert Lutes, & Terance Frazier		
Workgroup	**Objective**	**Outcome**
Plan Implementation	Provide strategies to ensure the successful implementation of the ten-year plan.	• Action plan that defines action steps, responsible parties and organizations and their desired outcomes.
Workgroup participants: Preston Prince, Doreen Eley, Katherine Perez, Kevin Hamilton, Lynne Ashbeck, Art Dyson & Al Williams		

Goals and Strategies Matrix

Goal	Responsible Organization	Outcome	Time Frame	Cost	Funding Source
Increase permanent supportive housing through the Housing First model and the rapid rehousing of the chronically homeless.	Lead Homeless Agency (LHA), Leadership Council, and the Housing Authority.	Provide new and existing Housing First units for the chronically homeless.	Ongoing over ten years.	TBD	HUD McKinney-Vento; HOME; CDBG; LIHTC; MHSA
		Strategies			
Place 941 chronically homeless persons in housing during the next ten years.	LHA, City, County, Leadership Council, housing providers, and service providers.	• Use housing vouchers, landlord agreements, new construction and existing housing stock to provide 941 units of housing for the chronically homeless. • Of the 941 units 1/3 shall be new construction, ADA compliant, Universal Designed and built with sustainable and green methodologies. • Support existing efforts to create affordable housing for very-low income residents such as the creation of a self-sustained Housing Trust Fund. • Encourage entitlement communities to incorporate the development of permanent supportive housing units in their Housing Element Updates and Consolidated Plans.	Ongoing throughout the ten year period. 1. Point-in-time surveys to be conducted on an annual basis to reevaluate the number of chronically homeless.	100 people per year at $818,400 annually (Based on HUD's FY 2008 Rent Ratio).	HUD McKinney-Vento; HOME; CDBG; LIHTC; MHSA
Identify and recommend changes to County and City ordinances that prevent the achievement of the housing first model.	LHA, City, County, and the Leadership Council.	Identification and removal of barriers that prohibit or hinder the creation of permanent supportive housing. LHA to review and make recommendations to City and County ordinances that may impede homeless housing.	Review that results in an annual assessment report from the LHA.	N/A	N/A

Goal	Responsible Organization	Outcome	Time Frame	Cost	Funding Source
Expand an increase employment opportunities for the chronic homeless through public-private partnerships.	LHA, and Leadership Council.	Chronically homeless individuals will have access to employment, education and training that will enhance their ability to return to mainstream society.	Employ 40 percent of the chronic homeless population over ten years.	TBD	TBD

Strategies

Strategy	Responsible Organization	Outcome	Time Frame	Cost	Funding
Establish an employability, education and benefits assessment at intake into housing or services.	LHA, and homeless providers.	At intake, employability, education and eligibility for benefits are assessed to maximize opportunities for economic stability and for individuals to return mainstream society.	LHA and Planning Council to coordinate process and procedures within one year of plan implementation; HMIS to be utilized as a means of measuring assessment procedures.	TBD	TBD
Utilize an employment re-entry and outreach program that serves both the homeless population and those leaving correctional facilities to increase the opportunities for employment and stability .	LHA, homeless providers, and the Leadership Council.	The homeless will receive individual counseling and job search planning to include referrals to education, and training as necessary.	Continuous over ten-years. Establish process and procedures for implementation within one year.	TBD	Green Job Corps AB 2147
Coordinate no-cost and low-cost education and vocational training opportunities with established adult education programs.	LHA, and the Leadership Council.	Established educational and vocational programs will provide opportunities for homeless individuals to gain access to training, education, and job placement .	Continuous over ten-years. Establish process and procedures for implementation within one year.	TBD	TBD
Construction and renovation projects should be used as training grounds and employment opportunities for the homeless.	LHA, Housing Authority, and Leadership Council.	Construction of homeless housing will provide employment and training opportunities for Fresno County's homeless population.	Over ten years. Establish process and procedures for implementation within one year.	TBD	TBD

Goal	Responsible Organization	Outcome	Time Frame	Cost	Funding Source
Increase and Improve access to public assistance , mental and physical health services for the chronically homeless.	LHA, health institutions, and service providers.	Homeless residents will have increased access to health services.	Establish respite care systems within one year; continuously review needs over a ten-year period.	TBD	TBD

Strategies

Strategy	Responsible Organization	Outcome	Time Frame	Cost	Funding
Partner hospitals with existing services to establish respite care centers.	LHA, hospitals, and homeless shelters	Respite care centers are created and coupled with appropriate services to reduce the number of homeless discharged from hospitals to the street.	Continuous over ten-years. establish one respite care center within on year; add additional centers as necessary .	TBD	TBD

Goal	Responsible Organization	Outcome	Time Frame	Cost	Funding Source
Provide immediate relief to the crisis of homelessness.	LHA, City, County, Leadership Council, and homeless providers.	Immediate relief to current conditions, outreach to the hard to serve, community involvement, public awareness, and timely assistance to all homeless populations.	Within six months of plan implementation.	$1,000,000-$2,250,000	CDBG, General Fund, HOME, ESG

Strategies

Strategy	Responsible Organization	Outcome	Time Frame	Cost	Funding
Provide 15-30 Housing First rental assistance and supportive service vouchers to chronically homeless individuals over the next year.	LHA, City, County, Housing Authority and service providers.	Chronically homeless individuals will receive housing and services immediately.	30 homeless individuals per year over 10 years.	$1million-$2million per year	TBD
Provide public showers, triage medical care, and clothes exchange at a consistent location for the homeless.	LHA, faith-based organizations, City, County, and the Leadership Council.	Homeless individuals will be provided a location to shower, receive triage care, housing and service referrals, and fresh clothing; Employ homeless individuals to oversee programs; Establish "safe zones" where homeless individuals have access to services, public restrooms and potable water.	Within six months of plan implementation.	TBD	TBD
Hold Project Homeless Connect Events.	LHA, City, County, Leadership Council , and the community-at- large.	Project connect fuses political and civic will in a one-day, one-stop, array of resources. Project homeless connect welcomes homeless people into the mainstream life of our communities.	Within six months of plan implementation and continuously over ten-years.	TBD	TBD

Goal	Responsible Organization	Outcome	Time Frame	Cost	Funding Source
Close the revolving door of chronic homelessness through continuous managed services prior to discharge from public programs.	LHA, Leadership Council, hospitals, mental health hospitals and State agencies.	An agreement is set in place to provide the proper case managed services at all agencies to assure that discharge does not result in homelessness .	Continuous over ten-years.	TBD	Staff time, CDBG, private funding, MHSA, foundations, advocacy centers.

Strategies

Strategy	Responsible Organization	Outcome	Time Frame	Cost	Funding
Advocate for a state plan which defines and regulates minimum requirements for institution discharge.	LHA, Leadership Council, Homeless advocates, and other homeless agencies.	A State wide discharge planning policy that eliminates discharge into homelessness.	Ongoing over the ten-year period until complete.	Staff Time	TBD
Reduce homeless-related discharges from hospitals.	LHA, Leadership Council, community mental health centers, and hospitals.	Discharge will be coupled with coordinated community services to help those being discharged maintain or find housing appropriate to their needs.	Establish policies and procedures within one year of plan implementation; ongoing over ten years.	TBD	TBD
Reduce homeless-related discharges from correctional facilities.	LHA, Leadership Council, County and State.	Discharge will be coupled with coordinated community services to help those being discharged maintain or find housing appropriate to their needs.	Establish policies and procedures within one year of plan implementation; ongoing over ten years.	TBD	TBD
Reduce homeless-related discharges from foster care.	LHA, Leadership Council, and the County.	Discharge will be coupled with coordinated community services to help those being discharged maintain or find housing appropriate to their needs.	Establish policies and procedures within one year of plan implementation; ongoing over ten years.	TBD	TBD

Goal	Responsible Organization	Outcome	Time Frame	Cost	Funding Source
Expand the range of and availability of prevention strategies to close the "front door" on chronic homelessness.	LHA, Leadership Council, HMIS coordinator and all agencies that provide prevention services.	Proactive prevention of homelessness occurs at all levels directly resulting in a reduction of new incidents of homelessness as measured through the HMIS system.	Continuously over ten years.	TBD	TBD

Strategies

Strategy	Responsible Organization	Outcome	Time Frame	Cost	Funding
Provide one-time foreclosure assistance for low-to-moderate income residents.	LHA, housing providers, City, County, and the Leadership Council.	Prevent families and individuals From entering into homelessness through financial assistance, education, and advocacy.	Continuous over a ten year period; establish partnerships and programs within one year of plan implementation.	TBD	General Fund, CDBG, HOME Bank Involvement; Housing set-aside funds
Strengthen ties with faith-based organizations, shelter providers and the City and County Housing Authority to provide outreach programs that are designed to increase housing and economic stability.	LHA, faith-based organizations, homeless providers, and the Housing Authority.	Increased outreach efforts through the faith-based community as first-line providers in preventing homelessness. Faith-based referrals to both public and private programs. Educate homeless on programs available to them.	Within one year and continuously over ten years. Hold a faith-based homeless workshops and training, and hold Project Homeless Connect events.	TBD	CDBG, ESG, HOME, foundations, donations
Expand services that support housing stability such as rental assistance, legal assistance, and affordable housing placement.	LHA, Leadership Council, service providers, community organizations, City and County.	Reduction in new incidents of homelessness though proactive programs that prevent families and individuals from losing their housing through financial assistance and case management with service linkage when appropriate	Expand existing programs and link these programs through coordinated referrals within one year; conduct active outreach and publicity to promote the programs continuously over ten years.	TBD	TBD

Goal	Responsible Organization	Outcome	Time Frame	Cost	Funding Source
Improve data collection methods to provide a single point of entry through the Homeless Management Information System (HMIS).	LHA, HMIS coordinator, Housing Authority, and all agencies that provide services or interact with homeless individuals.	Increased access to data provides for greater coordination and reduces the duplication of services; homeless programs and services are streamlined and match strategy to situation in providing programs that are driven by measurable results.	Within 2 years of plan adoption, HMIS will be utilized by all service providers and institutions; within one year, funding is identified to incentivize the use of HMIS.	TBD	TBD

Strategies

Strategy	Responsible Organization	Outcome	Time Frame	Cost	Funding
Incentivize the use of HMIS to include government, hospitals, housing providers, health departments, substance abuse treatment centers, and correctional facilities.	LHA, HMIS coordinator, County, City and State.	Agencies that work with the homeless will utilize HMIS to provide effective case managed services, and to measure results.	Create a incentive program within the first year of plan implementation.	TBD	TBD
Utilize HMIS to provide a single point of entry for homeless services and case management coordination and to link housing resources and availability.	LHA, HMIS coordinator.	HMIS data will be used effectively to evaluate programs, increase cooperation , provide continuous case-management on an individual level, and provide the resources necessary to move people into housing.	Within two years of plan implementation all institutions utilize HMIS as a method to refer services and measure programmatic performance.	TBD	TBD

Goal	Responsible Organization	Outcome	Time Frame	Cost	Funding Source
Identify an agency that will serve as the single point of contact, driving force, and accountable agent for the homeless of Fresno County.	City, County, and the Leadership Council.	One agency will serve as the Lead Homeless Agency for Fresno County and will serve to establish collaboration, cooperation, coordination of programs, and the services and housing necessary to end chronic homelessness.	At plan adoption.	TBD	TBD
Lead Homeless Agency will ratify this plan as its guiding policy paper, and update the plan as necessary.	LHA	The Lead Homeless Agency will execute, assess, and update and identify funding sources to implement the the ten-year plan to end chronic homelessness.	At the identification of the Agency.	TBD	TBD
Create and sustain public awareness and political will to implement strategies and actions to achieve the goals set forth in this plan.	LHA	Public awareness will be increased regarding homeless issues; opportunities to volunteer and fundraisers will be created and held; LHA will ensure that homeless funds will be used responsibly; advisory board will be established to help guide the LHA.	Within two months of the plans adoption.	TBD	TBD

Detailed Cost Benefit Analysis (PLACE HOLDER)

Programs and Services delivered to prevent homelessness in Fresno County

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
Department of Behavioral Health (DBH)*	Psychiatric Assessment Center for Treatment	Crisis Stabilization Unit	142 Last Year	Housing, Clothing, Food	Short-term	$4,698,893 Combined PACT – CRS Budget
DBH	Crisis Response Services	Crisis Response Services	96 Last Year	Housing, Clothing, Food	Short-term	$4,698,893 Combined PACT – CRS Budget
DBH	PHF, Fresno	Acute Psychiatric Inpatient Facility	Capacity 16	Provides inpatient psychiatric hospitalization services	Short-term	$613.14 per person/day
DBH	CBHC	Acute Psychiatric Inpatient Facility	Capacity 62	Provides inpatient psychiatric hospitalization services	Short-term	$688 per person/day
DBH	Kaweah Delta Hospital	Acute Psychiatric Inpatient Facility	Licensed for 63 Staffed for 25	Provides inpatient psychiatric hospitalization services	Short-term	$745 per person/day
DBH	AB 2034	Provides intensive case management for seriously and persistently mentally ill homeless	143	Intensive case management, crisis services, housing services	Short/long term and permanent housing	$2,091,039
DBH	1st Step Outreach-Turning Pt. contract	Outreach to homeless mentally ill	304	Contact, engagement into services, housing assessment, treatment, medication management. 24/7	Short/long term	$491,500

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
				response.		
DBH	Payee Services-Turning Point contract	Representative payee services to mentally ill	160-170	Representative payee services for mentally ill who can not manage their money	Long term	$151,968
DBH	Napa State Hospital	Conservatorship	3 (Fresno County adults)	Provides mental health inpatient services for LPS conservatees	Short-term	$367.56/per person/day
DBH	Metropolitan State Hospital	Conservatorship	1 Fresno County youth)	Provides mental health inpatient services for LPS conservatees	Short-term	$446.77/per person/day
DBH	Fresno Care and Guidance	IMD Facility	62	Provides locked psychiatric nursing services to LPS conservatees	Short-term	$141.37/per person/day
DBH	Merced Behavioral Health	IMD Facility	7	Provides locked psychiatric nursing services to LPS conservatees	Short-term	$141.37/per person/day
DBH	Sacramento, Crestwood	IMD Facility	3	Provides locked psychiatric nursing services to LPS conservatees	Short-term	$141.37/per person/day
DBH	TC Redding, Crestwood	IMD Facility	3	Provides locked psychiatric nursing services to LPS conservatees	Short-term	$151.37/per person/day
DBH	Crestwood, Vallejo	IMD Facility	0	Provides locked psychiatric nursing services to LPS	Short-term	$205.32/per person/day

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
				conservatees		
DBH	Sylmar Health and rehab	Sub Acute Psychiatric Facility	1	Provides sub acute locked psychiatric care to LPS conservatees	Short-term	$206.52/per person/day
DBH	7th Avenue Center	Mental Health Rehabilitation Center	3	Provides locked psychiatric care to LPS conservatees	Short-term	$165/per person/day
DBH	American River Behavioral Health Center	Mental Health Rehabilitation Center	2	Provides locked psychiatric care to LPS conservatees	Short-term	$145/per person/day
DBH	Crestwood, Angwin	Mental Health Rehabilitation Center	0	Provides locked psychiatric care to LPS conservatees	Short-term	$170/per person/day
DBH	Crestwood, Bakersfield	Mental Health Rehabilitation Center	6	Provides locked psychiatric care to LPS conservatees	Short-term	$170/per person/day
DBH	California Psychiatric Transitions, Delhi	Mental Health Rehabilitation Center	1	Provides locked psychiatric care to LPS conservatees	Short-term	$200-$240 or More/per Person/day
DBH	Crestwood, San Jose	Mental Health Rehabilitation Center	0	Provides locked psychiatric care to LPS conservatees	Short-term	$141.37/per person/day
DBH	Alice Manor	Skilled Nursing Facility	16	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	Beverly Manor, Fresno	Skilled Nursing Facility	0	Provides skilled nursing services to LPS conservatees as well as non-	Short or Long-term	Medi-Cal daily rate

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
				conservatees		
DBH	Fowler Convalescent Hospital	Skilled Nursing Facility	1	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	Freemont, Crestwood	Skilled Nursing Facility	7	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate plus $118 /per person/ day
DBH	Garfield Neurobehavioral Center, Oakland	Skilled Nursing Facility	3	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	$207.98/per person/day
DBH	Golden Cross Health Care	Skilled Nursing Facility	6	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	Hillcrest Convalescent	Skilled Nursing Facility	1	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	Hope Manor	Skilled Nursing Facility	6	Provides skilled nursing services to LPS conservatees	Short or Long-term	Medi-Cal daily rate

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
				as well as non-conservatees		
DBH	Idlywood, Crestwood	Skilled Nursing Facility	9	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate plus $118/per day/person
DBH	Manning Gardens Convalescent Hospital	Skilled Nursing Facility	1	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	Modesto Manor, Crestwood	Skilled Nursing Facility	1	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate plus $27 daily patch
DBH	Pacific Garden	Skilled Nursing Facility	1	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	Raintree Convalescent	Skilled Nursing Facility	7	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service** (i.e. Housing, grants, etc.)	**Length** (short/ long term - permanent	**Value/Cost of Services**
DBH	Sanger Convalescent	Skilled Nursing Facility	4	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	Sunnyside Convalescent	Skilled Nursing Facility	5	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	UMC Skilled Nursing	Skilled Nursing Facility	0	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	Willow Creek, Clovis	Skilled Nursing Facility	0	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	Wish-I-Ah (locked), Auberry	Skilled Nursing Facility	20	Provides skilled nursing services to LPS conservatees as well as non-conservatees	Short or Long-term	Medi-Cal daily rate
DBH	Apollo	Crisis Residential Treatment Facility	5 (16 Capacity)	The program promotes a consumer-centered approach encouraging responsibility and self-reliance, a	Short-term	$345.74/per person/day

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
				smooth transition from an acute psychiatric setting to a more independent unlocked residential care facility and helps prevent regression to more dependent living situations.		
DBH	Crestwood Bridge, Bakersfield	Transitional Residential Treatment Facility	9 (16 Capacity)	The program promotes a consumer-centered approach encouraging responsibility and self-reliance, a smooth transition to a more independent living situation.	Short-term (less than 1 year)	$130/person/ day
DBH	Crestwood Bridge, Fresno	Transitional Residential Treatment Facility	14 (16 Capacity)	The program promotes a consumer-centered approach encouraging responsibility and self-reliance, a smooth transition to a more	Short-term (less than 1 year)	$130/person/ day

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
				independent living situation.		
DBH	Arden Drive Home, Fresno	Supplemental Rate Residential Care Facility	Capacity 8	Provides augmented 24-hour services for clients requiring extra care and supervision. Facilities are licensed by the State of California Community Care Licensing.	Short or long-term	$391/month in addition to the SSI rate of $898/month for Board and Care Facilities
DBH	Chimes	Supp Rate	capacity 10	" "	Short or long	" "
DBH	Dailey's Haven	Supp Rate	capacity 6	" "	Short or long	" "
DBH	Fillmore Christian Garden	Supp Rate	capacity 26	" "	Short or long	" "
DBH	Garden Manor	Supp Rate	capacity 49	" "	Short or long	" "
DBH	Haskins Board and Care	Supp Rate	capacity 18	" "	Short or long	" "
DBH	Lucy's Guest Home	Supp Rate	capacity 6	" "	Short or long	" "
DBH	Marian Home #1	Supp Rate	capacity 15	" "	Short or long	" "
DBH	Marshall Community Care Home	Supp Rate	capacity 6	" "	Short or long	" "
DBH	McAlister Residential Care	Supp Rate	capacity 6	" "	Short or long	" "
DBH	Zenith I	Supp Rate	capacity 6	" "	Short or long	" "
	SEE BELOW	Basic Rate Residential Care Facility	SEE BELOW	Provides 24-hour care and supervision. These facilities are	Short or long-term	$898/month

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
				regulated by the State of California Community Care Licensing. There may be more of these types of facilities located throughout Fresno County, but they do not currently accept clients from the Department of Behavioral Health		
DBH	Acacia Residential	" "	capacity 6	" "	Short or long-term	" "
DBH	Cres Home	" "	capacity 6	" "	Short or long-term	" "
DBH	De Jesus Home Care #1	" "	capacity 6	" "	Short or long-term	" "
DBH	De Jesus Home Care #2	" "	capacity 6	" "	Short or long-term	" "
DBH	Elizabeth Care Home	" "	capacity 14	" "	Short or long-term	" "
DBH	Garrett House	" "	capacity 6	" "	Short or long-term	" "
DBH	House of Trevelyn	" "	capacity 5	" "	Short or long-term	" "
DBH	JMJ Family Home	" "	capacity 6	" "	Short or long-term	" "
DBH	The Mansion	" "	capacity 39	" "	Short or long-term	" "
DBH	Myles Community	" "	capacity 6	" "	Short or long	" "

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
	Service II					
DBH	O'Neil	" "	Capacity unknown	" "	Short or long	" "
DBH	P & R Adult Residential Care Home	" "	capacity 4	" "	Short or long	" "
DBH	Roy-Al Board and Care	" "	capacity 6	" "	Short or long	" "
DBH	Saint Jude's Residential	" "	capacity 6	" "	Short or long	" "
DBH	Sunshine Care	" "	capacity 6	" "	Short or long	" "
DBH	Sunshine Care #2	" "	capacity 6	" "	Short or long	" "
	SEE BELOW	Room and Boards	SEE BELOW	These facilities do no provide 24-hour care and supervision. This type of facility is for individuals who are able to manage in a semi-independent living environment. The homes generally provide a room with two prepared meals a day. This type of facility may operate under a city permit. There may be more of these types of facilities within Fresno County, but the Department of Behavioral Health	Short or long-term	$500/person /month

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
				does not monitor their services.		
DBH	Dakota Home #2	" "	capacity 10	" "	" "	" "
DBH	E&L Boarding Home	" "	capacity 6	" "	" "	" "
DBH	Georgia Manor	" "	capacity 6	" "	" "	" "
DBH	Harmony Room and Board I	" "	capacity 4	" "	" "	" "
DBH	Harmony Room and Board II	" "	capacity 8	" "	" "	" "
DBH	Jones Rooming House	" "	capacity 6	" "	" "	" "
DBH	Kearney-West Room and Board	" "	capacity 6	" "	" "	" "
DBH	New Beginnings-Woodson	" "	capacity 8	" "	" "	" "
DBH	New Beginnings-Mayor	" "	capacity 6	" "	" "	" "
DBH	Planty Room and Board	" "	capacity 4	" "	" "	" "
DBH	Sunshine Room and Board	" "	Capacity 6	" "	" "	" "
	SEE BELOW	Supported Independent Living	SEE BELOW	Provides independent living (usually apartments) for individuals who do not need 24-hour care and supervision.) Below are programs the Department of	Long-term	Rent is usually subsidized through Section 8 Certificates, therefore rental costs will vary according to the individual's

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
				Behavioral Health has contracts, however many clients live in their own apartments in different complexes with case management supports.		income
DBH	Cedar Heights-Cedar Woods Program	" "	capacity 50	" "	" "	$247,670 Budgeted
DBH	Stasis Program	" "	capacity 28	" "	" "	$54,269 Budgeted
DBH	AB 2034 HOME Program	Provides intensive case management for seriously and persistently mentally ill homeless	capacity 143	Intensive case management, mental health, vocational/supported educational services and housing services to mentally ill homeless	Long-term	$2,091,039 Budgeted
DBH	FACT Program	Provides mental health services for mentally ill.	capacity 100 (Actual 79)	Provides intensive case management, mental health, vocational/ supported educational services and housing services to mentally	Long-term	$1,000,000 Budgeted

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
				ill inmates of Fresno County		
Department of Children and Family Services (DCFS)	Child Welfare Services	Provide financial assistance with furniture, housing costs; utility bills; deposits, etc.	Varies; any CWS client can potentially access.	Ancillary housing support services	One time only and/or short-term	Varies per client
DCFS	Child Welfare Services	Financial assistance for transitional housing; sober living housing	Varies; any CWS client can potentially access.	Housing	Short-term (0-30 days) Long-term (30 - one year)	Varies per client
DCFS	Independent Living Program (ILP)	Provides array of services to foster youth, ages 14-21 to ensure self-sufficiency and independence upon adulthood.	Approx. 800	Services to address housing, employment, education, financial aid.	Long-term, with continued eligibility	No cost to youth ILP allocation: $953,406
DCFS	California Connected by 25 Initiative	Services to identify with older foster youth permanent, lifelong connections to ensure stability after foster care exit. Reduces likelihood of homelessness.	ILP eligible youth	Development of lifelong permanency options- Grant	On-going	Budgeted at $277,250
DCFS	Children's Wraparound SB	Wrap services provided to high risk foster youths to	92 per year	Support/mental health services to	Varies - as needed until	Budgeted at $3,773,263

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
	163	maintain family placement and minimize group home placements and/or placement disruptions		maintain family-based placements	graduation from program	
DCFS	Plaza Terrace	Emergency Housing for families involved with DCFS/CalWORKs	2006 (To Date) 188 adults 453 children	Emergency Housing	Maximum 90 days	$279,683
DCFS	Careline	In addition to receiving calls on alleged abuse/neglect, provide information and referrals on community resources, including housing, to callers.	-	Information and Referral Services	Short-term	-
DCFS	Juvenile Justice Substance Abuse Unit	In-custody dual diagnosis treatment services to adolescents at the Juvenile Justice Campus	65 + per year 30 beds	In-custody dual diagnosis treatment services	Short-term 4-6 months	DCFS portion is $301,117 per year.
DCFS	Fresno County Group Homes	Levels 3-14 Rate Classification Level homes for DCFS/Probation youth.	95 Group Homes - Capacity + 600	Group home placements for DCFS/Probation youth	Indefinite	Dependent upon RCL level - group home rates. FY05-06 expenditures: $16,658,311 (includes out-of-county placements)
DCFS	Fresno County Foster Homes	Resource families for children removed from parents due to abuse/neglect/abandonment	Over 379 foster homes	Resource/Permanency families	Short/Long-term	Foster care rates; FY05-06 expenditures: $24,855,142 (Foster

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
						Families Agencies and Regular Foster Homes)
DCFS	MHSA – Smart Model of Care – Full Service Partnership	Expansion of existing Program – MH services, supportive services, family supports – Full Service Partnership	Potential of up to 130 Annually – based on need of clients/families	Emergency Housing Services	Short-Term	Total FY 06-07 allocation of $25,000. Housing vouchers at $40/night
DCFS	MHSA – Smart Model of Care – Full Service Partnership	Expansion of existing Program – MH services, supportive services, family supports – Full Service Partnership	Potential of up to 130 Annually – based on need of clients/families	Utility Vouchers	Short-Term	Total Allocation of $25,000 for FY 06-07. Utility vouchers at $100 each
DCFS	MHSA – General	Additional support services – clothing, food, transportation, employment education, household items - fridge, microwave, etc	Potential of up to 310 Annually – based on need of clients/families	Clothing, food, hygiene, transportation, employment, education, house-hold items, etc	Short -Term	Varies on each MHSA plan-approximately $50,000
DCFS	MHSA – Capital Facilities	Future MHSA Capital Facilities Funding Stream – pending State guidelines	Pending State Guidelines	Permanent Supportive Housing, Rent Subsidies, Drop in Centers, Transitional Housing – many other options possible	Short term and long term	Statewide estimate in excess of $75 Million/year for permanent supportive Housing. Addi-tional Funding also available. Fresno County Allocation

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
						unknown at this time.
DCFS	Outreach to Missing Dependents	Specialized unit providing Outreach, assessment, case planning for dependent runaway children	Varies	Variety of services to stabilize and provide permanence	Ongoing services	Child Welfare Allocation
Fresno County EOC	Sanctuary Youth Center	24-hour, 7 day of week emergency shelter for male/female runaway/homeless youth	600 per year	Emergency Shelter	Short-term	No cost
Fresno County EOC	Transitional Living 1	Housing for young adults 18-14 years old that are homeless or at risk of homelessness.	23 youth	Housing	Long-term (up to 2 years)	Sliding scale
Fresno County EOC	Transitional Living 2	Unsupervised housing for young adults 18-14 years old, who are exiting TL 1	15 youth	Housing	Long-term	Sliding scale
Fresno County EOC	Transitional Living 3	housing for young adults 18-14 years old - focus on former foster/probation youth	32 youth	Housing	Long-term	Sliding scale
Valley Teen Ranch	Valley Teen Ranch	Housing for young men ages, 18-24, including former foster/probation youth.	4	Housing	Long-term	Sliding scale
Fresno Rescue Mission	Craycroft Shelter: Rescue the Children	DCFS contract for emergency shelter for children unable to return to their parent's home.	24 beds contracted	Housing	Short-term (up to 30 days)	Contracted amount: $983,000
Housing Authority	Emergency Housing Vouchers	Provision of housing vouchers to parents of	Approx. 150 vouchers per	Housing	Long-term	No cost to consumer

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
		dependent and non-dependent children and some emancipated youth	year to DCFS			
Marjaree Mason Center	Same	Provision of temporary shelter for women and children victims of domestic violence.	142 beds in three different programs	Housing / other supportive services	Short-term; transitional	-
Marjaree Mason Center	Naomi's House	Women's temporary shelter; no children. Accepting of women with substance abuse issues	22 beds	Housing	Short-term; transitional	-
Fresno Rescue Mission	Same	Temporary shelter/support for adult men	Over 135 beds	Housing	Short-term	-
Comprehensive Alcohol Program (CAP)	Same	Provision of Long-term/Short-term Residential Substance abuse treatment services for men and women		Residential substance abuse treatment	Short and long-term	Sliding scale; County funding; fee for service
WestCare California, Inc	Same	Provision of Long-term/Short-term Residential Substance abuse treatment services for men and women, and their children	Over 100 capacity	Residential substance abuse treatment	Short and long-term	Sliding scale; County funding; fee for service
Spirit of Woman, Inc.	Same	Provision of long-term residential substance abuse treatment for women and their children	65	Residential substance abuse treatment	Long-term	Sliding scale; County funding; fee for service
Fresno County Hispanic Commission on Alcohol and Drug Abuse Services	Same	Men's long-term monolingual Spanish-speaking residential substance abuse treatment		Residential substance abuse treatment	Long-term	Sliding scale; County funding; fee for service
Turning Point	Same	Long-term monolingual		Residential	Long-term	Sliding scale;

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
		substance abuse residential treatment facility.		substance abuse treatment		County funding; fee for service
Turning Point	First Step Outreach	Emergency Housing for homeless mentally ill individuals		Housing	Short-term	
Cedar Heights/Cedar Wood	Same	Supportive housing for individuals 18 or older; mentally ill	50 individuals	Housing	Short-term	
New Outlook	Same	Transitional living		Housing	Long-term	
Family Shelter	Same	Temporary emergency shelter (14-28 days)		Housing	Short-term	
Evangel Home	Same	Temporary shelter for homeless women and children.		Housing	Short-term	
Employment & Temporary Assistance (E&TA) Economic Opportunities Commission (EOC) University Medical Center –Teen Pregnancy Resource Center (TPRC)	Adolescent Family Life Program (AFLP)	Voluntary program designed to promote the health, social, and economic well-being and enhance the education of pregnant and parenting teens and their partners. Provides monthly case management services to develop an educational plan to obtain a high school diploma or its equivalent; obtain health care; access appropriate community resources for needed services such as family planning, mental health, and	357 clients in 10/2006	Assistance in achieving educational goals and referrals for substance abuse, domestic violence, mental health, and other services.	Pregnant and or/parenting teens. Females under age 19 and males under 21, not eligible for Cal-Learn services.	$1,150,488 in funding from July 1, 2006-June 30, 2007

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
		substance abuse services.				
E & TA	Adult Protective Services	Provides emergency response, information and referrals, and case management services aimed at preventing or correcting physical or emotional abuse, neglect, exploitation, or financial abuse Investigates reports of abuse and neglect involving elders and dependent adults.	553 clients in 10/2006	Referrals for service.	Short-term	$1,821,091 in funding for FY 06-07, with a Maintenance of Effort of $247,503
E & TA	Cal-Learn	Cash assistance program for pregnant and parenting teens (up to age 19, if still in high school). The teens are required to stay in school and obtain their high school diploma or equivalent.	565 clients in 10/2006	Intensive care management and supportive services (transportation, child care, ancillary, etc) and referrals for substance abuse, domestic violence, mental health, and other services.	Adult parent must be receiving CalWORKs	N/A
E & TA	CalWORKs	Time-limited cash assistance to families with children. State implementation of Federal Temporary Assistance to Needy Families (TANF) program. Adults in the program are required to participate in a work activity unless determined exempt.	66,902 clients in 09/2006	Grant	60-month time limit, unless eligible for a time extender	Maximum grant of $340 a month for a one person household.
E & TA	Diversion	Assists applicants to become	0 clients in	Cash or non-cash	Short-term	Maximum

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
		self reliant without long term assistance by providing up front, lump sum cash or non-cash services to meet item(s) of need necessary to obtain or maintain employment.	10/2006	services necessary to obtain or maintain employment.		amount that can be issued is the Maximum Aid Payment (MAP) for the size of the AU multiplied by three.
E & TA	Employment Services	Available to work activity participants including counseling, job preparedness, job development, training, and supportive services such as child care, transportation, work clothing and tools. Services are also available to address barriers to employment including substance abuse, domestic violence, mental health and legal issues.	9,645 clients enrolled in Employment Services. 294 referred/ participating in Mental Health Services, 240 referred/participating in Substance Abuse Services, 13 referred/ participating in Domestic Abuse Services.	Supportive services (transportation, child care, ancillary, etc) and referrals for substance abuse, domestic violence, mental health, and other services.	Must be receiving CalWORKs.	N/A
E & TA	Food Stamps	Federal food stamp program provides monthly benefits to assist low-income households to purchase the food they need, through normal channels of trade to maintain adequate nutrition levels. Can only be	120,752 clients in 10/2006	Electronic Benefits Transfer (EBT) card.	Long term, if otherwise eligible	Maximum amount of $155 per month for a one person household. $12,380,256 in expenditures in

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
		redeemed for purchase of food, and seeds and plants for food production in home gardens.				10/2006.
E & TA	Foster Care	Temporary form of care for children between the ages of birth to 21 years who have been, or are at risk of being, neglected and/or abused by a family member or determined to be a ward of the Juvenile Court. E&TA is responsible for the income maintenance portion of Foster Care, and the payments made to the home or institution in which the child is placed.	2,302 clients in 10/2006	Payment to foster care provider	Short-term or long-term, maximum age of 21 years	$3,537,934 in expenditures in 10/06.
E & TA	General Relief	County funded program that provides cash or in-kind services to needy individuals and families who are not eligible for assistance under any other categorical aid program. Grants are used to assist clients with the costs of food, shelter, personal needs and other living expenses. Qualified individuals must be unemployed, incapacitated, or pending receipt of SSI.	940 clients in 10/2006	Grant.	Short term. Employable recipients are prohibited from receiving aid for more than 3 months in any twelve-month period, whether or not the months are consecutive. Incapacitated individuals	Maximum grant of $272 per month for a one person household. $253,395 in expenditures in 10/2006.

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
					receive interim assistance pending receipt of SSI.	
E & TA	Homeless Assistance	Available to CalWORKs eligible families to meet the reasonable costs of securing permanent housing, and for temporary shelter while seeking permanent housing. Families must meet the definition of homeless, and assistance is restricted to once in a lifetime with few exceptions.	361 clients in 10/2006	Direct (check) or vendor payment for temporary shelter or for costs incurred in securing permanent housing.	Short-term, one-time payment.	$151,218 in expenditures in 10/06.
E & TA	In-Home Supportive Services (IHSS)	Provides supportive srvs. to persons who are aged, blind, or disabled and are unable to perform the activities of daily living in order to live safely and independently in their own homes. Services are aimed at maintaining health and safety, and preventing institutional placement by augmenting what the clients and other alternative resources are able to do. The types of services that can be authorized through IHSS are chores and related services, and personal care services.	11,100 clients in 10/2006	Payment to in-home supportive services providers.	Long-term	$8.90/hour payment to providers; $9,778,971 in expenditures in 10/2006

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
E & TA	Medi-Cal	State program, patterned after the federal Medicaid program, and designed to provide no-cost or low-cost medical benefits to low-income families. CalWORKs recipients are automatically eligible to no-cost benefits. Other families qualify based on income, and may qualify for benefits on a "share-of-cost" basis. Benefits are available to qualified individuals on a one-time basis for medical emergencies.	58,869 cases in 8/2006	No-cost of low-cost medical benefits.	Long-term, if otherwise eligible	N/A
E & TA	SSI Advocacy Program	Assists clients who may have medically determinable physical or mental impairments (s) in their efforts to apply for and obtain SSI benefits from the Social Security Administration.	76 clients in 10/2006	Assistance in applying and obtaining SSI.	N/A	N/A
E & TA	Veterans' Service Office	Assists veterans, their spouses, widows, and dependents in applying for Federal, State and Local veterans' benefits.	400 in 10/2006	Assistance in applying for Federal, State, and Local veterans' benefits.	N/A	$328,596 in funding for FY 06-07
DBH	Employment Services Program (ESP)	Primary link for the mentally ill consumers who receive services from E&TA, provi-ding supported employment,	1,676 clients yearly	Mental Health counseling and services.	Must be receiving CalWORKs and enrolled in	$2,017,553 funding in FY 06-07

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
		supported education, and mental health counseling to CalWORKs recipients, who due to a mental disorder are unable to transfer from welfare to work.			Employment Services (Welfare to Work)	
DBH	Fresno Assertive Community Treatment (FACT) Program/AB2034	Provides case management services on a 24/7 basis to a Homelessly Mentally Ill consumers. E & TA assists FACT enrollees with applications for GR, Food Stamps, other Federal, State, or County public assistance programs administered by E & TA for which the FACT enrollees may be eligible.	61 clients in 11/2006	Case management services and assistance with applications for public assistance.	Short-term	Maximum of $37,428 in funding in FY 06-07
DBH	Psychiatric Assessment Center and Treatment (PACT)	E&TA clients requiring urgent mental health care are referred to PACT. Provides urgent outpatient (less than 24-hours) mental health treatment services to Fresno County residents. All individuals determined to require urgent mental health care are initially assessed and treated at PACT and then linked to other mental health programs as needed.	N/A	Mental Health counseling and services.	Short-term	N/A
DCFS	Independent Living Program (ILP)	Offers services to youth, ages 15.5 to 21, who are in foster care, or who had been	N/A	N/A	N/A	N/A

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
		in foster care after their 15½ birthday. Provides independent living skills assessment, education, training, services, and a written Transitional Living Plan.				
Catholic Charities, Inc.	Adult Protective Emergency Services	Emergency services for elderly and disabled population.	10 clients in 10/2006	Emergency shelter, home care, prescription assistance, utility assistance, food assistance and transportation.	Short-term	$4,508 in expenditures in 10/2006
Catholic Charities, Inc.	Senior Companion Program	Provides Senior companion volunteers to work with the County of Fresno to provide peer support, companionship visits, assistance with reality orientation and awareness, light housekeeping chores and respite assistance for caregivers and providers.	4 clients in 10/2006	Companionship, personal care assistance, nutrition, exercise, and home assistance, safety monitoring, transportation, hospice, and caregiver relief.	Short-term	N/A
Centro La Familia	Family Advocacy Services, Inc.	Services include family support and advocacy with an emphasis on assisting eligible families to receive all public assistance benefits for which they are entitled. Services are to address issues regarding housing, medical, financial, utility services, and other "quality	1,800 clients yearly	Assistance with emergency referrals for food, clothing and shelter, and assistance with completing applications. Assistance in resolving issues w/ public and private	N/A	$183,995 in funding for July 1, 2006-June 30, 2007

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
		of life" concerns.		service agencies.		
Housing Authorities City and County of Fresno	Family Self Sufficiency Services/Housing Voucher Program	Assists eligible families of low income to pay their rent. Administers several programs that authorize the Housing Authorities to pay a portion of the tenant's rent directly to a private landlord. The program helps CalWORKs families transition from welfare dependency to financial self-reliance, and participation in the program is required for housing voucher recipients.	600 clients yearly	Voucher amount varies.	Client will enter into five-year program with Housing Authority that identifies the steps participants will take to reach the ultimate goal of economic self-sufficiency	Assistance to client varies; $233,000 in funding from December 1 2005, through November 30, 2006
Khmer Society of Fresno, Inc.	Life Skills, Family Support and Advocacy for Refugees	Provides life skills training, family advocacy and family support services for refugees and former refugees. Family advocacy services will involve intensive case management, direct inter-vention, information and referral to resolve problems and issues related to food, shelter, health and employment.	128 clients yearly	Assistance with emergency referrals for food, health and shelter, and employment.	N/A	$205,000 in funding from July 10, 2006-November 30, 2006
Lao Family Community of Fresno Inc.	Lao Family Community of Fresno Inc.	Community employment and family support services for refugees. All services will target unemployed or underemployed young adults living with their CalWORKs	350 clients yearly	Job readiness, job placement, reten-tion, education mentoring/tutoring, counseling, supportive services	N/A	$76,389 in funding from July 1, 2006 through November 30, 2006

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
		families. Services include job readiness, job placement, retention, education mentoring/tutoring, counseling, legal assistance and case management.		such as transporta-tion, interpretive services, and other supportive services that address language and cultural barriers, crisis resolution, and problem solving.		
Marjoree Mason Center	Marjoree Mason Center	Women's shelter, support groups and batterers' classes offered to victims of domes-tic violence and abusers	N/A	Shelter and support groups.	N/A	N/A
Spirit of Women of California, Inc.	Perinatal Residential Substance Abuse Treatment Services	Provides substance abuse treatment for mothers and their children while utilizing and creating community linkages with schools and other agencies.	Up to 97 women and 243 children annually	Residential substance abuse treatment.	6 months	$225,662 in funding from July 1, 2006-June 30, 2007
Vocational Management Services	Vocational Management Services	Provides comprehensive employment services and vocational rehabilitation services to eligible CalWORKs recipients who are disabled/exempt and have the ability to be gainfully employed in appropriate occupations that will allow for long-term self-sufficiency.	120 clients yearly	Services including group vocational counseling classes, barrier identification, and work adjustment.	Must be receiving CalWORKs and enrolled in Employment Services (Welfare to Work)	$403,907 in funding from July 1, 2006-June 30, 2007
West Care, Inc.	Perinatal Residential	Provides substance abuse treatment for mothers and	Up to 97 women and 243	Residential substance abuse	1 year	$174,338 in funding from

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
	Substance Abuse Treatment Services	their children while utilizing and creating community linkages with schools and other agencies.	children annually	treatment		July 1, 2006-June 30, 2007
Public Works & Planning / CD Division	Housing Assistance Rehabilitation Program(HARP)	Housing rehabilitation	23 families (2005-06)	Zero interest loans to rehabilitate housing for low-income homeowner residents	Permanent housing	$1,912,765
Public Works & Planning / CD Division	Homebuyer Programs	Downpayment Assistance/Mortgage assistance	3 families (2005-06)	Loans to low-income household to help purchase first home	Permanent	$23,885
Public Works & Planning / CD Division	Affordable Housing Development	Finance construction of new affordable housing units (single & multifamily rental units	369 families (2000-05)	Loans to finance construction of housing for low-income and seniors families	Permanent	$5,115,621
Public Works & Planning / CD Division	Fair Housing	Fair Housing education and advocacy	31,700 persons (2005-06)	Workshops for prevention of housing discrimination	Short term	$35,000
PWP/CD through the Department of Children & Family Services	Social Services Grants	Public Service Activities for prevention of homelessness	7,545 persons (2005-06)	Programs to assist at risk youth, elderly, disabled, and services to feed the needy	Short term	$202,159
Dept of Children & Family	Emergency Shelter Grant Program	Marjaree Mason Center Homeless shelter	998 persons (2005-06)	Emergency shelter for victims of domestic violence	Short term	$86,571
Dept of Children &	Emergency Shelter	EOC Sanctuary Homeless	549 persons	Emergency shelter	Short term	$115,588

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07 Includes Programs not provided by County by Other Resources, and available for Referral						
Department/ Organization	**Program Title**	**Program Description**	**No. of Clients Served**	**Type of Service (i.e. Housing, grants, etc.)**	**Length (short/ long term - permanent**	**Value/Cost of Services**
Family	Grant Program	Shelter	(2005-06)	for non violent homeless youth		
Public Works & Planning / CD Division	State CalHome Grant Program	Mortgage Assistance & Homeowner Housing Rehabilitation	64 families (2001-2005)	Loans to low income families for mortgage assist-ance & housing rehabilitation	Permanent	$2 million
Public Works & Planning / CD Division	State Joe Serna Farmworker Grant Program	Grants to rehab housing for farmworkers	17 families (2003-05)	Housing rehabilitation assistance for low income farmworkers	Permanent housing	$1 million
Public Works & Planning / CD Division	USDA Housing Preservation Grant Program	Housing rehabilitation	17 families (2003-05)	Housing rehabilitation assistance for very low income families	Permanent housing	$278,951
Public Works & Planning / CD Division	State Water Resources Safe Drinking Water Program	Grant to provide new community water system with safe drinking water	240 persons	Construction of a water distribution system in a community with documented contaminated water so that residents can continue to live in there.	Permanent	$730,000
Behavioral Health – Substance Abuse Services	Prop 36	Substance abuse treatment services for eligible County residents. Eligibility determined by district attorney.	400	Residential treatment	30-90 days	$1,103,000
Behavioral Health – Substance Abuse Services	Prop 36	Ancillary housing for eligible county residents. Eligibility determined by district	90	Sober Living - Housing	90 Days	$169,000

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e. Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
		attorney.				
Behavioral Health – Substance Abuse Services	Prop 36	Sub. abuse treatment srvs. for eligible County residents. Eligibility determined by district attorney.	1,600	Outpatient treatment	Up to 180 days	$1,088,628
Behavioral Health – Substance Abuse Services	Parolee Services Network	Substance abuse treatment services for eligible parolees. Eligibility determined by parole agent.	62	Residential treatment	30-90 days	$215,255
Behavioral Health – Substance Abuse Services	Parolee Services Network	Substance abuse treatment services for eligible parolees. Eligibility determined by parole agent.	48	Outpatient treatment	Up to 180 days	$58,563
Behavioral Health – Substance Abuse Services	Parolee Services Network	Ancillary housing for eligible county residents. Eligibility determined by parole agent.	48	Sober Living - Housing	30-180 days	$81,655
Behavioral Health – Substance Abuse Services	Community Based Programs	Residential treatment services. Available to all residents who meet admission criteria.	1,227	Residential treatment	30-90 days	$1,193,573
Behavioral Health – Substance Abuse Services	Community Based Programs	Outpatient treatment services. Available to all residents who meet admission criteria.	831	Outpatient treatment	Up to 180 days	$347,162
Behavioral Health – Substance Abuse Services	Community Based Programs	Detoxification services. Available to all residents who meet admission criteria.	1,278	Detoxification - residential	3-5 days	$226,919
Behavioral Health – Substance Abuse Services	Community Based Programs	Outpatient treatment services for Medi-Cal eligible clients.	5,714	Outpatient treatment	Up to 180 days	$5,742,066

*15% of clients entering substance abuse treatment last year reported being homeless. The homeless are not a targeted population for SAS like pregnant women, HIV, injection drug users, so we don't have program specifically to reduce homelessness like in mental

health with AB2034 programs. Taking care of their drug problem may solve homelessness as well as other problems. Clients don't get a bed because they are homeless, they get it because they have a severe addiction (which may lead to homelessness) and can not be adequately treated in outpatient.

PROGRAMS/SERVICES DELIVERED TO PREVENT HOMELESSNESS IN FRESNO COUNTY – FY 2006-07

Includes Programs not provided by County by Other Resources, and available for Referral

Department/ Organization	Program Title	Program Description	No. of Clients Served	Type of Service (i.e Housing, grants, etc.)	Length (short/ long term - permanent	Value/Cost of Services
Department of Community Health	HOPWA	Housing Opportunities for Persons with Aids	354	Housing	Short and long term	$136,000
Community Health	Chest Clinic	TB Treatment	40	Housing	Short term	$19,500

Agendas of the Planning Council

Monday, April 21, 2008
3:30 P.M. – 5:00 P.M.

PLANNING COUNCIL
OF THE COUNTY/CITY OF FRESNO
10-YEAR PLAN TO END CHRONIC HOMELESSNESS
MEETING # 1

City Hall
2600 Fresno Street
4th Floor Room 4017
Fresno, CA 93721-3600

AGENDA

Welcome & opening Comments	Tom Richards
Introduction of Co-Chairs	Tom Richards
Developing a Plan ▪ Sustainable Policies v. band-aids ▪ The Program	Art Dyson
Open Forum	Council Members
Preparation of the Plan ▪ Identify and set goals ▪ Plan template ▪ Committees and assignments	Council Members
Questions	
Set next meeting	

Comments:

1. The meeting will start promptly at 3:30 P.M. and will end at 5:00 P.M.
2. Please review all materials received on April 14th.

Tuesday April 29, 2008
3:30 P.M. – 5:00 P.M.

PLANNING COUNCIL
OF THE COUNTY/CITY OF FRESNO
10-YEAR PLAN TO END CHRONIC HOMELESSNESS
MEETING # 2

Greater Fresno Area Chamber of Commerce
2331 Fresno Street
Fresno, CA 93721

AGENDA

Welcome & Opening Comments

Introduction of Co-Chairs

Questions/Comments from the Public

Committee Presentations

▪ Baseline Data Collection	Doreen Eley Kevin Hamilton Stacie Hines Carmen Mendoza
▪ Best Practices	Art Dyson Kiel Schmidt Larry Arce Katherine Perez

Developing a 10-Year Plan — Council Members
- Plan Goals
- Plan Preparation

Final Questions/Comments from the Public

Next Meeting
- May 6th, 2008
  3:30 P.M. – 5:00 P.M.
  Chamber of Commerce

Comments:

1. The meeting will start promptly at 3:30 P.M. and will end by 5:00 P.M.
2. There will be a short Co-Chair meeting at the conclusion of today's Council Meeting

Tuesday May 6, 2008
3:30 P.M. – 5:00 P.M.

PLANNING COUNCIL
OF THE COUNTY/CITY OF FRESNO
10-YEAR PLAN TO END CHRONIC HOMELESSNESS
MEETING # 3

Greater Fresno Area Chamber of Commerce
2331 Fresno Street
Fresno, CA 93721

AGENDA

I.	Welcome & Opening Comments (2 min)	Tom Richards (Facilitator)
II.	*No Rubber Stamps:* Individual Statements of Purpose (1 minute P/P) (30 min)	Council Members
III.	10-Year Planning Process to End Chronic Homelessness Project Outline (15 min)	The Ramsay Group
	-Council and Community Feedback (5 min)	
IV.	Presentation on Housing First Model (7 min)	Preston Scott
	-Council and Community Feedback (5 min)	
V.	2-Minute Workgroup Updates (20 min)	
	1. History, Research, Best Practices and Needs Assessments	Doreen Eley (Co-Chair)
	2. Cost Benefit Analysis	Unidentified
	3. Plan Accountability, Community Awareness and Outreach Strategies	Al Williams (Co-Chair
	4. Urban and Housing Design, Zoning and Land Use Asses. and Strategies	Art Dyson (Co-Chair)
	5. Mental Health and Supportive Services Strategies	Unidentified
	6. Public Policy and Agency System Assessments and Transformations	Unidentified
	7. Funding Strategies	Unidentified
	8. Education, Training, Employment and Financial Literacy Strategies	Unidentified
	9. Plan Implementation Strategy	Unidentified
VI.	Review of Immediate Next Steps, Meeting Structure and Task (3 min)	The Ramsay Group
VII.	Final Questions/Comments from the Public (3 min)	

Mark Your Calendars

Planning Council Meeting	May 20, 2008	3:30 pm – 5:00 pm	Chamber of Commerce
Workgroup Meeting	May 6, 2008	3:30 pm – 5:30 pm	Chamber of Commerce
Co-Chair Check-In Calls	TBA		
Homeless Engagements	TBA		

Tuesday, May 20, 2008
3:30 P.M. – 5:00 P.M.

PLANNING COUNCIL
OF THE COUNTY/CITY OF FRESNO
10-YEAR PLAN TO END CHRONIC HOMELESSNESS
MEETING # 4

Greater Fresno Area Chamber of Commerce
2331 Fresno Street
Fresno, CA 93721

AGENDA

I. Welcome & Opening Comments — Tom Richards (Chair)
(2 min)

II. Define the Vision and Purpose of the Planning Council — Planning Council
(18 min)

-Community Feedback
(3 min)

III. Project Check In: General Activities and Timeline Reminders — The Ramsay Group
(10 min)

-Council and Community Feedback
(3 min)

IV. 5-Minute Workgroup Updates
(15 min)
1. Cost Benefit Analysis — Kevin Hamilton (Co-Chair)
2. Plan Accountability, Community Awareness and Outreach Strategies — Al Williams (Co-Chair)
3. Funding Strategies — Katherine Perez (Co-Chair)

-Council and Community Feedback
(3 min)

V. Review of Immediate Next Steps — Tom Richards
(2 min)

VI. Final Questions/Comments from the Public
(4 min)

VII. Adjournment of the General Meeting — Tom Richards

VIII. Commence Co-Chair Meeting
(30 min)

Mark Your Calendars!

Planning Council Meeting	June 3, 2008	3:30 pm – 5:00 pm	Chamber of Commerce
Workgroup Meetings	May 27, 2008	3:30 pm – 5:30 pm	Chamber of Commerce
Homeless Engagements	May 21, 2008	9:30 am – 12:00 pm	Poverello House

Tuesday, June 3, 2008
3:30 P.M. – 5:00 P.M.

PLANNING COUNCIL
OF THE COUNTY/CITY OF FRESNO
10-YEAR PLAN TO END CHRONIC HOMELESSNESS
MEETING # 5

Greater Fresno Area Chamber of Commerce
2331 Fresno Street
Fresno, CA 93721

AGENDA

I.	Welcome & Opening Comments (2 min)	The Ramsay Group
II.	Presentation to discuss Fresno's Cedar Heights and Cedar Woods Permanent Supportive Housing Program (20 min)	Dennis Torigian
	-Community Feedback (13 min)	
III.	5-Minute Workgroup Updates (20 min)	
	1. Urban and Housing Design, Zoning and Land Use Assessment and Strategies	Art Dyson(Co-Chair)
	2. Plan Accountability, Community Awareness and Outreach Strategies	Al Williams (Co-Chair)
	3. History, Research, Best Practices and Needs Assessment	Doreen Eley (Co-Chair)
	4. Health and Supportive Services	Lynne Ashbeck (Co-Chair)
	-Council and Community Feedback (3 min)	
IV.	Review Immediate Next Steps (3 min)	The Ramsay Group
V.	Final Questions/Comments from the Public (2 min)	
VI.	Adjournment of the General Meeting	The Ramsay Group
VII.	Commence Co-Chair Meeting (30 min)	

Mark Your Calendars!

Planning Council Meeting	June 17, 2008	3:30 pm – 5:00 pm	Chamber of Commerce
Workgroup Meetings	June 10, 2008	3:30 pm – 5:30 pm	Chamber of Commerce
Homeless Engagements	June 7, 2008	1:00 pm – 3:00 pm	Roeding Park

Monday, June 16, 2008
3:30 P.M. – 5:00 P.M.

PLANNING COUNCIL
OF THE COUNTY/CITY OF FRESNO
10-YEAR PLAN TO END CHRONIC HOMELESSNESS
MEETING # 6

City Hall, Room 2165 A
2600 Fresno Street
Fresno, CA 93721

AGENDA

I.	Welcome & Opening Comments (2 minutes)	Tom Richards
II.	Timeline Extension for the 10-Year Plan (10 minutes)	Tom Richards
III.	Introduction of Guest Speaker (2 minutes)	Kiel Famellos-Schmidt
IV.	Guest Speaker: Professor Sam Davis (30 minutes)	Professor Davis
V.	Workgroup Updates (35 minutes)	
	1. Urban and Housing Design, Zoning and Land Use Assessment and Strategies	Art Dyson(Co-Chair)
	2. Plan Accountability, Community Awareness and Outreach Strategies	Al Williams (Co-Chair)
	3. History, Research, Best Practices and Needs Assessment	Doreen Eley (Co-Chair)
	4. Health and Supportive Services	Lynne Ashbeck (Co-Chair)
	5. Plan Implementation	Preston Prince (Co-Chair)
	6. Funding Strategies	Katherine Perez (Co-Chair)
	7. Policy/Cost Benefit	Kevin Hamilton (Co-Chair)
VI.	Review Immediate Next Steps (3 min)	Tom Richards/The Ramsay Group
VII.	Final Questions/Comments from the Public (8 min)	Open
VIII.	Adjournment of the General Meeting	Tom Richards

Mark Your Calendars!

Planning Council Meeting	July 1 , 2008	3:30 pm – 5:00 pm	Chamber of Commerce
Workgroup Meetings	June 24, 2008	Various Times	City Hall/Chamber

Tuesday, July 1, 2008
3:30 P.M. – 5:00 P.M.

PLANNING COUNCIL
OF THE COUNTY/CITY OF FRESNO
10-YEAR PLAN TO END CHRONIC HOMELESSNESS
MEETING # 7

Greater Fresno Area Chamber of Commerce
2331 Fresno Street
Fresno, CA 93721

AGENDA

I.	Welcome & Opening Comments (2 min)	Tom Richards
II.	Presentation from Guest Speakers (30min)	Luciana Ventresca Ron Prestridge
III.	Introduction (Workforce Investment Board) (20min)	Blake Konczal
IV.	Power Point Presentation (15 min)	The Ramsay Group
V.	5-Minute Workgroup Updates (15min)	
	1. Urban and Housing Design, 2. Health and Supportive Services 3. Public Policy	Art Dyson Lynne Ashbeck Kevin Hamilton
VI.	Review Immediate Next Steps (3 min)	The Ramsay Group
VII.	Final Questions/Comments from the Public (3 min)	
VIII.	Adjournment of the General Meeting	Tom Richards

Mark Your Calendars!

Planning Council Meeting	July 15, 2008	3:30 pm – 5:00 pm	Chamber of Commerce
Workgroup Meetings	July 8, 2008	3:30 pm – 5:30 pm	Chamber of Commerce

Tuesday, July 15, 2008
3:30 P.M. – 5:00 P.M.

PLANNING COUNCIL
OF THE COUNTY/CITY OF FRESNO
10-YEAR PLAN TO END CHRONIC HOMELESSNESS
MEETING # 8

Greater Fresno Area Chamber of Commerce
2331 Fresno Street
Fresno, CA 93721

AGENDA

I.	Welcome & Opening Comments (2 min)	Tom Richards
II.	Presentation Regional Homeless Agency Coordinator (10 min) Via Phone Conference	Eduardo Cabrera
	-Community Feedback (10 min)	
III.	Presentation: Workforce Investment Board (15 min)	Blake Konczal
IV.	Goals of the Planning Council (45 minutes)	The Ramsay Group
V.	Final Questions/Comments from the Public (8 min)	
VI.	Adjournment of the General Meeting	Tom Richards

Mark Your Calendars!

Workgroup Meetings	July 22, 2008	3:30 pm – 5:30 pm	Chamber/City Hall
Planning Council Meeting	July 29, 2008	3:30 pm -5:30 pm	Chamber of Commerce

Tuesday, July 29, 2008
3:30 P.M. – 5:00 P.M.

PLANNING COUNCIL
OF THE COUNTY/CITY OF FRESNO
10-YEAR PLAN TO END CHRONIC HOMELESSNESS
MEETING # 9

Greater Fresno Area Chamber of Commerce
2331 Fresno Street
Fresno, CA 93721

AGENDA

I.	Welcome & Opening Comments (5 min)	Tom Richards
II.	Review and Discussion of the Draft Plan (60 min)	All
III.	Next Steps (20 min)	The Ramsay Group
IV.	Adjournment of the General Meeting	Tom Richards

City of FRESNO **REPORT TO THE CITY COUNCIL**

AGENDA ITEM NO.:
COUNCIL MEETING: August 26, 2008
APPROVED BY
DEPARTMENT DIRECTOR
CITY MANAGER

August 26, 2008

FROM: GEORGEANNE WHITE, Chief of Staff
Office of the Mayor

SUBJECT: PRESENTATION ON THE STATUS OF THE TEN-YEAR PLAN TO END CHRONIC HOMELESSNESS

KEY RESULT AREA

One Fresno

EXECUTIVE SUMMARY

To provide City Council with an update from the Leadership and Planning Council regarding the status of the City and County of Fresno's Ten-Tear Plan to End Chronic Homelessness.

BACKGROUND

On January 29, 2008, staff made a presentation to City Council regarding the status of the creation of a task force, comprised of a Leadership Council and a Planning Council, to draft the ten-year plan to end chronic homelessness. The Councils were tasked with identifying and working with community stakeholders in developing the ten-year plan. Since then, the Leadership and Planning Councils have been actively moving forward in drafting the plan.

Since their first meeting on April 21, 2008, the Planning Council has met every week in its entirety and in individual workgroups. The Planning Council held their first meeting with the following processes in mind:

1. Review the extent of chronic homelessness and existing services in Fresno County.
2. Gather input from stakeholders and the larger community.
3. Define the barriers that need to be addressed to reduce and end chronic homelessness and to prevent its reoccurrence.
4. Review "best practices" in other communities.
5. Identify needed efforts, strategies and models that will effectively address chronic homelessness in Fresno County.
6. Develop a ten-year plan with principals, goals and recommendations that will end chronic homelessness.

Over the three months that they met, the participants in the Planning Council became knowledgeable about the local population of chronically homeless persons. Speakers from other communities, as well as local providers, attended the meetings and presented information about effective programs and model practices for the council to consider. Planning Council members reviewed the processes currently in place by the Fresno Madera Continuum of Care and the existing strategies for serving chronically homeless individuals. In addition, members of the councils attended four homeless engagement tours in which they dialoged with the local homeless citizens in their own environment. These tours were essential to focus the council's efforts and in educating its members through first-hand sources.

This report serves to update City Council as to the goals and strategies of the Planning Council, and the process used to reach these conclusions.

The Planning Council completed the first draft of the ten-year plan and presented it to the Leadership Council on August 13, 2008. The Leadership Council approved the draft with revisions. These revisions are currently being made.

The Leadership Council and Planning Council will return to City Council with the final draft of the plan, for ratification, on September 9, 2008.

FISCAL IMPACT

There is no anticipated impact to the City's Budget.

APPENDICES

Exhibit A – Executive Summary of the Ten-Year Plan
Exhibit B – Power point presentation

Agenda Item

12

DATE: August 26, 2008

TO: Board of Supervisors

FROM: Bart Bohn, County Administrative Officer Bart Bohn

SUBJECT: Draft 10-Year Plan to End Chronic Homelessness

RECOMMENDED ACTION:

Review and provide comments on the Draft 10-Year Plan to End Chronic Homelessness. (Attachment)

The recommended actions will provide feedback to the Leadership and Planning Councils for their consideration in finalizing the 10-Year Plan to End Chronic Homelessness.

FISCAL IMPACT:

There is no immediate cost associated with the recommended actions. The draft plan refers to services usually provided by the County Human Services Departments, but costs and service levels are not specified. It is highly likely that the final plan will seek to enhance services that would be funded by either Departmental Revenues or Countywide Revenues.

IMPACTS ON JOB CREATION:

These actions are intended to lead to adequate housing for the chronic homeless which could provide the opportunity for the homeless to seek permanent employment.

DISCUSSION:

This draft plan is the result of the action taken by the City and County of Fresno to work jointly on the homeless issue. Both governing bodies approved the creation of a task force to develop the 10-Year Plan. The task force is made up of a Leadership Council and a Planning Council. Under the direction of the Leadership Council, the Planning Council has developed the attached draft plan. This Agenda Item provides the formal opportunity for the Board of Supervisors to comment on the draft plan before it is finalized. It will be returned to the Board for approval after it is finalized.

ADMINISTRATIVE OFFICE REVIEW Bart Bohn Page 1 of 1

BOARD ACTION: DATE _____ APPROVED AS RECOMMENDED _____ OTHER _____

UNANIMOUS _____ ANDERSON _____ CASE _____ LARSON _____ PEREA _____ WATERSTON _____

FC-017 (eForms-0904)

"The Ten Year Plan we will be creating here in Fresno is your entire community reaching out together, your arms uniting up to that arc of history to bend that arc into the lives of your poorest citizens so that every citizen of your city and county will be known by a single name - neighbor - and treated as one and provided with the opportunity as one and the resources as one not to leave any neighbor outside on the street or languishing in a shelter."

—Philip Mangano (As quoted in *Homelessness Policy in Fresno - A Kinder and Gentler Plan?*, Mike Rhodes, http://www.indybay.org/newsitems/2007/12/13/18466826.php, December 13, 2007.)

Fresno

Photo by Hans Marsen