SUMMARY
The Homeless Coordinating Committee channels state and federal funds to homeless and housing service providers statewide. Resources include funds from the Pamela Atkinson Homeless Trust Fund, General Fund appropriations, HUD’s Emergency Shelter Program, and revenues generated by the Homeless Trust Fund Tax Write-in Campaign.

The State Homeless Coordinating Committee provides oversight and approves allocations of all funding identified above. The Committee ensures that services provided to the homeless are utilized in a cost-effective manner and works to facilitate a better understanding of the concept of homelessness. Programs that are funded emphasize: emergency housing and self-sufficiency, placement in employment or occupational training activities, special services to meet unique needs of the homeless with mental illness and those who are in families with children. Contracts are awarded to providers based on need, diversity of geographic location, coordination with or enhancement of existing services, and the use of volunteers.

Funding can be used for: emergency shelter operations, meals, transitional housing, case management services, homeless outreach and day centers. Typical funding levels to service providers range from $10,000 to $30,000.

OBJECTIVE
The purpose of this issue brief is to provide the committee with a report related to the Homeless Committee’s progress towards their 10-year plan to reduce chronic homelessness in the state.

DISCUSSION AND ANALYSIS
The Homeless Coordinating Committee has developed a 10-year plan to end chronic homelessness. They have defined chronic homeless as those with a disabling condition who have experienced at least four episodes of homelessness within three years. This represents about 10 percent of the homeless, however, they consume approximately 50 percent of the resources.

For these chronically homeless individuals already in the system the Homeless Coordinating Committee has adopted a “Housing First” model. The goal of this model is to assist people exit homelessness by placing them in permanent supportive housing. The factors contributing to homelessness are then addressed once the homeless are housed. The model acknowledges in some cases long support may be necessary. The model will maximize the use of existing resources including the Olene Walker Housing Loan Fund, Medicaid, Temporary Assistance to Needy Families, Social Security, Workforce Initiative Act, Food Stamps, housing subsidies, etc. They will utilize these resources to promote long-term self-sufficiency.

Goals of the plan include: expanding the availability of affordable supporting housing, creating new affordable housing designated for the chronically homeless, developing units to function as safe havens, expand rental assistance, and increasing housing for homeless youth and youth transitioning out of foster care.

The program is focused on four areas:
1. Preventing homelessness whenever possible;
2. Rapidly re-housing people when homelessness cannot be prevented;
3. Providing support services to promote stability and self-sufficiency;
4. Provide timely and accurate data driven results.

The plan is designed to ensure that households have access to a full range of resources and services designed to keep them housed. There will be an increased effort to coordinate these services across the state homeless delivery system.
Evaluation will be the key to success for this plan. The development of a database documenting the goals and measures of the program will be facilitated because efforts will be coordinated through the State Homeless Coordinating Committee.

If they are successful in implementation the Homeless Coordinating Committee will reduce the chronically homeless count by 25 percent by 2009. The committee has established other outcome measures using 2005 as the baseline. Initial results for this program will be detailed in the 2007 General Session.