

MILWAUKEE CONTINUUM OF CARE 10-Year Plan to End Homelessness



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10-Year Plan to End Homelessness

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Milwaukee's 10-Year Planning Process

The Milwaukee Continuum of Care is the sponsoring entity of the 10-Year Plan to End Homelessness. The planning process was kicked off at a planning day held on November 12, 2008, attended by 136 representatives of emergency shelters, transitional housing, permanent supportive housing, meal programs, advocacy organizations, city, county and state government, faith community, business, civic organizations, and consumers.



The 10-Year Plan was led by four work group chairs: Tim Baack from Pathfinders who headed the Prevention and Emergency Services work group; Jeanne Lowry, RN, from Community Advocates who headed the Mental Health, Substance Abuse, and Support Services work group; Ken Schmidt, Hope House, who led the Economic Support and Employment work group; and Jim Mathy, Milwaukee County Housing Division, who managed the Permanent Housing Work Group.

The work groups were the focal point of the planning effort. Each work group utilized its own method for conducting research, evaluating alternative approaches, collaborating with key stakeholders, and developing and finalizing its recommendations. Behind the final recommendations included in this plan is extensive background work – hours spent reviewing data, discussions from other cities, reviewing best practices, and developing consensus around recommendations. Work groups met monthly (and often more frequently) between November 2008 and July 2009. The draft 10-Year Plan strategies were presented to the Milwaukee Continuum of Care in July 2009; the plan has continued to be refined based on the Continuum's input as well as input from other key community stakeholders.

The Continuum of Care received planning support from Kristina Hals of the Technical Assistance Collaborative in Boston, MA, who provided information, resources, and guidance based on TAC's extensive experience in community planning on issues of homelessness and housing. Staff support was also provided by Jessica Shriver, Continuum of Care Coordinator, and Janice Wilberg, Ph.D., Continuum of Care consultant. The Continuum of Care Steering Committee provided technical support, feedback, and leadership throughout the planning process.

The 10-Year Plan will be reviewed by the City of Milwaukee Common Council and the Milwaukee County Board of Supervisors before its submission to the Mayor and County Executive for endorsement. A planning day scheduled for February 22, 2010, will launch the implementation phase of the 10-Year Plan.

For more information about the 10-Year Plan, please contact Joe Volk, Executive Director, Community Advocates, Continuum of Care Lead Agency, at 414-270-2970 or jvolk24607@aol.com.



Demographic Overview

Data from the 2007 and 2009 Point in Time Surveys of Homelessness in Milwaukee was used to inform the 10-Year Plan development process. The Milwaukee Continuum of Care conducts a Point in Time Survey of homeless people every two years to provide essential data for funding sources, policy development, and program/system improvement efforts. The Point in Time collects information directly from homeless people in face to face interviews conducted by trained volunteers. Volunteers interviewed sheltered homeless people in emergency shelter, transitional housing, and unsheltered people at meal programs, drop-in centers, public libraries, and in dozens of other locations where homeless, unsheltered people are known to congregate. A total of 41 organizations and 70 volunteer interviewers participated in the 2009 Point in Time Survey.

The 2009 Point in Time Survey counted a total of 1,660 adults and children who were homeless on the night of January 28, 2009, including 965 adults and 349 children counted directly by the Point in Time and an additional 346 adults and children reported by the Rescue Mission. Of the 965 adults counted by the Point in Time, 919 were directly interviewed by community volunteers. The results of those interviews are reported in this section: Demographic Overview.

Both sheltered and unsheltered homeless adults were interviewed using a 21-question survey instrument which addresses these areas: age, gender, race and ethnic origin, household status/family composition, family size, veteran status, history of discharges from institutions, reasons for current episode of homelessness, mobility, length of current episode of homelessness, frequency of homelessness, educational level, employment status, disability status, government benefits utilization, and service gaps.

Key Point in Time findings:

- 1. Increase in homelessness: A total of 1,660 homeless adults and children were counted in 2009 compared to 1,470 in 2007, an increase of 13% in two years. Homeless respondents tended to be homeless fewer times in the past three years but for longer periods. This year, 9 out of 10 were homeless for more than a month; over a third homeless for over a year.
- 2. Change in demographics: This year, homeless adults were more likely to be older (41-60), male, and single with no children than in 2007. There was no change in race/ethnic origin or veteran status. As in 2007, the incidence of homelessness drops significantly at age 61+. Most had high school diplomas; few were employed.
- **3. Employment-related causes:** Unemployment and low wages were cited by nearly half of respondents as the reason for their homelessness, followed by health/mental health, family/relationship issues, housing-related problems, and finally institution-related reasons, e.g. foster care, jail/prison discharge.
- 4. Prevalence of disabilities: Most respondents indicated they had or had been told they had one or more disabilities, i.e. mental illness, physical disability, alcohol abuse, drug abuse, developmental/learning disability, HIV/AIDS or other. Incidence of mental illness and developmental disability/learning disability increased between 2007 and 2009.
- **5. Getting help:** Most respondents were receiving some kind of government benefit; top benefits: food stamps, GAMP/BadgerCare Plus, SSI/SSDI, and Medicaid but the help was not sufficient to keep them housed. Biggest service gaps cited by homeless were help finding work and housing.

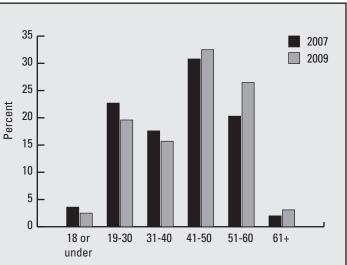
2009 RESULTS AND COMPARISON TO 2007

Demographic Characteristics of Homeless Adults

AGE

Number	Percent
23	2.5%
179	19.6%
144	15.7%
297	32.5%
244	26.7%
28	3.1%
915 ¹	100.0%
	23 179 144 297 244 28

This year: Homeless adults tended to be middle-aged with 59.2% falling in the 41-60 age range. Twice as many homeless adults fell in the 41-50 age range as in the 31-40 range (297 or 32.5% ages 41-50 compared to 144 or 15.7% ages 31-40). The number of homeless adults drops dramatically at age 61, with only 3.1% falling in this category.



Compared to 2007: Homeless people in the 2009 Point in Time Survey tended to be older than those counted in 2007. Look specifically at the percentage decreases in the younger age ranges (18 and under, 19-30, and 31-40) and the increases in the older age ranges (41-50, 51-60, and 61 and over).

GENDER

Gender	#	%
Male	561	61.1%
emale	357	38.9%
Total	918	100.0%

This year: About 6 out of every 10 homeless persons interviewed for the Point in Time Survey were men.

Compared to 2007: The percentage of males was higher in 2009 (61.1%) than in 2007 (55.0%). This is a fairly dramatic increase in a two-year period.

¹ A total of 919 homeless people were interviewed, but not all respondents answered every question.

Demographic Characteristics of Homeless Adults

RACE AND ETHNIC ORIGIN

Age Range	#	%
African American	553	60.9%
Asian	2	.2%
Native American	11	1.2%
Mixed Race	40	4.4%
Caucasian	260	28.6%
Hispanic/Latino	58	6.5%
Other	42	4.6%
Total	908	100.0%

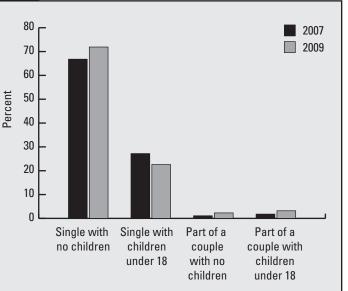
This year: The majority of homeless adults was African American (60.9%); the next largest group was Caucasian (28.6%) followed by Other and Mixed Race, which together represent 9.0% of the total. A small percentage of those interviewed were Hispanic/Latino (6.5%). It is important to note that Hispanic/Latino individuals can be of any race so this percentage is separate from the percentages reported for the racial categories.

Compared to 2007: There was virtually no change in the race and ethnic origin distribution compared to 2007.

HOUSEHOLD STATUS/FAMILY COMPOSITION

Gender	#	%
Single with <i>no</i> children	658	71.9%
Single with children under 18	207	22.6%
Part of a couple with <i>no</i> children	21	2.3%
Part of a couple with children under 18	29	3.2%
Total	915	100.%

This year: Most homeless adults were childless -74.2% were either single with no children or part of a couple with no children. About a quarter of homeless adults were parents -25.8%.



Compared to 2007: There was a higher proportion of childless adults in the 2009 homeless group when compared to 2007, and a lower proportion of adults with children under the age of 18. Also note the increased percentage of couples counted in 2009 as compared to 2007.

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Demographic Characteristics of Homeless Adults

HOMELESS CHILDREN

Family size of homeless families	#	%
1 child	63	36.8%
2 children	65	38.0%
3 children	27	15.8%
4 children	9	5.3%
5 children	4	2.3%
6 children	2	1.2%
7 children	1	.6%
Total	171	100.0%

The survey asked the question," How many children under 18 spent the night with you last night who also do not have a permanent place to live?" This question was not asked in 2007.

A total of 171 homeless adults reported having their children under the age of 18 stay with them the previous night and not having a place to live.

This year: The survey results indicate that the vast majority (90.6%) of homeless families are comprised of 3 or fewer children. Fewer than 1 in 10 homeless families (9.4%) were large families, i.e. 4 or more children.

VETERAN STATUS

DISCHARGE HISTORY

Respondents were asked the question: In the past 6 months, have you been discharged from any of the following places WITHOUT a place to live? The problem of institutions discharging people to shelter or to the streets has been recognized across the U.S.; each year, the U.S. Department of Housing and Urban Development asks the Milwaukee Continuum of Care to document what is being done to prevent inappropriate discharges from hospitals, mental health facilities, jails, prisons, and foster care.

Discharge Facility	#	%
Hospital/health care facility	106	11.5%
Mental health care facility	52	5.7%
Jail/House of Correction	68	7.4%
Prison	22	2.4%
Foster Care or Group Home	11	1.2%

This year: This is a new question that was added in 2009 so we are not able to compare results to 2007. In 2007, we tried to quantify the problem of institutional discharges to shelter or the street by only asking the question, "Where did you spend last night?" This year, the survey planning team focused the question on five key institutions and lengthened the period of time (from 1 night to anytime during the past 6 months). The key finding is that there were 259 instances in which people reported being discharged from an institution, e.g. hospital, prison, without a place to stay. If this was an unduplicated count (and we cannot assure that it is since respondents could report more than one instance), it would represent 28.2% of the total number of homeless adults surveyed.



REASONS FOR CURRENT EPISODE OF HOMELESSNESS

Respondents were asked the question: "Why did you become homeless this time?" and were allowed to choose all of the answers that applied to their situation. (There were about 1.5 answers for each person interviewed.)

Reason	2009 #	2009 %	2007 %
Employment-related:			
Lost job/cannot find work	355	38.6%	27.7%
Wages too low	93	10.1%	11.9%
Family/relationship-related:			
Family break-up	135	14.7%	12.3%
Abuse/violence	99	10.8%	7.0%
Asked to leave place where I was staying	120	13.1%	12.6%
Runaway/thrown out	36	3.9%	1.7%
Institution-related ¹ :			
Foster care/group home discharge	4	.4%	0%
Jail/prison discharge	78	8.5%	7.4%
Housing-related:			
Eviction ²	120	13.1%	14.3%
Foreclosure	34	3.7%	
High housing costs	99	10.8%	5.2%
High utility costs	61	6.6%	3.1%
Health/mental health-related:			
Medical problems	93	10.1%	6.4%
Mental illness	115	12.5%	8.0%
Substance abuse problems	174	18.9%	13.3%
Lost benefits	35	3.8%	2.2%
Other:			
Other	63	6.9%	9.7%

¹ Hospital discharge was inadvertently omitted from the 2009 survey.

 $^{\rm 2}$ Eviction and foreclosure were merged in the 2007 survey.

³ Don't know/not sure was not included as a response category in 2007.

This year: The #1 most frequently stated reason for homelessness was "lost job/cannot find work" which was indicated by 38.6% (or 355) of the 919 homeless adults interviewed. When combined with "wages too low," employment-related reasons represented nearly half (48.7%) of the reasons mentioned for homelessness. Health/mental health-related reasons represented 45.3% of reasons cited; family/relationship-oriented reasons represented 42.5%; housing-related represented 34.2%; and institution-related represented 8.9%.

Compared to 2007: Interestingly, all but 2 of the reasons on the list showed an increased percentage of respondents selecting them as the reason for their current episode of homelessness. The only exceptions were "wages too low" and "other."



CITY OF RESIDENCE – LAST YEAR

City	2009 #	2009 %	2007 %
Milwaukee	767	83.8%	85.9%
Other city/place in Wisconsin	72	7.9%	4.8%
Other city/place in another state	75	8.2%	9.3%
Outside of US	1	.1%	0%

This year: The great majority (83.8%) of homeless people had lived in Milwaukee this time last year; however, nearly one out of four (16.2%) had lived either somewhere else in Wisconsin or in another state/country.

Compared to 2007: There are two interesting changes. First, in 2009, there was a slightly higher percentage of people who had lived somewhere outside of Milwaukee compared to 2007 (16.1% in 2009 compared to 14.1% in 2007). Second, there were many fewer 'missing' respondents, i.e. people who didn't answer this question, in 2009 (only 4) compared to 2007 (25).



LENGTH OF CURRENT EPISODE OF HOMELESSNESS

Length of current episode of homelessness	2009 #	2009 %	2007 %
Less than 1 month	83	9.5%	19.6%
1 to 3 months ¹	155	17.8%	
4 to 6 months	133	15.3%	44.2%
Longer than 6 months but less than 1 year	162	18.6%	
1 to 3 years	207	23.8%	24.8%
More than 3 years	112	12.9%	8.9%
Not sure/don't know	19	2.3%	2.6%
Total	871	100.0%	100.0%

This year: About 1 out of homeless adults had been homeless for less than a month; that means that 9 out of 10 were homeless for more than a month. About half (51.7%) had been homeless for one to 12 months. Over a third (39.0%) had been homeless for a year or more. In 2009, 43.2% of surveyed homeless adults were chronically homeless according to the HUD definition (homeless for one year or more or homeless 4 or more times in the past three years). This is significantly higher than 2007 when the percentage of chronically homeless was 28.4%.

Compared to 2007: In 2007, 2 out of 10 homeless adults surveyed were 'short-timers' – people who had been homeless for less than a month compared to just 1 out of 10 in 2009. There were fewer 'short-timers' in 2009 than in 2007 – in other words, people tended to report longer episodes of homelessness. People were more likely in 2009 than in 2007 to have experienced a period of homelessness ranging from one to 12 months, 51.7% of respondents (2009) compared to 44.2% (2007). Also of note is the increased percentage of people reporting long periods of homelessness (more than 3 years), 12.9% of respondents (2009) compared to 8.9% (2007).

FREQUENCY OF HOMELESSNESS

Times homeless in past 3 years	2009 #	2009 %	2007 %
1 time	410	47.5%	42.5%
2 times	206	23.8%	26.4%
3 times	87	10.1%	11.0%
4 times	39	4.5%	5.7%
5 or more times	122	14.1%	14.4%
Total	864	100.0%	100.0%

This year: About half of those surveyed (52.5%) had been homeless multiple times in the past three years. One out of 5 (18.6%) had been homeless four or more times during this period.

Compared to 2007: 2009 shows an increased percentage of people who have been homeless just one time (47.5% in 2009 compared to 42.5% in 2007). The percentage of people experiencing multiple episodes of homelessness decreased during this period from 57.5% in 2007 to 52.5% in 2009.

¹ In 2007, the categories 1 to 3 months, 4 to 6 months, and longer than 6 months but less than a year were combined into one category of more than 1 month but less than a year.



Education and Employment Status

EDUCATIONAL LEVEL

Educational level attained	#	%
Less than high school diploma	253	27.8%
High school diploma	266	29.3%
GED	126	13.9%
Some college, technical or trade school	206	22.7%
Associate degree	23	2.5%
Apprenticeship program	3	.3%
Bachelor degree or higher	32	3.5%
Total	909	100.0%

This year: Three out of four respondents (72.2%) had attained a high school diploma or higher level of education. Comparable data for 2007 is not available because this question was not included on that year's survey.

EMPLOYMENT STATUS

Employment status	#	%	
Employed part time	110	12.0%	
Employed full time	83	9.1%	
Unemployed	722	78.9%	
Total	915	100.0%	

This year: Only about one out of five (21.1%) homeless adults was employed either full or part time. Comparable data for 2007 is not available because this question was not included on that year's survey. Homeless people with a high school diploma or GED or college or training after high school were significantly more likely to be employed either part time or full time than those without that credential. While 14.7% of homeless people with a high school diploma or GED and 24.7% of those with post high school-college or training had full or part time jobs.

Duration of unemployment: Unemployment tended to be of long duration. Of those unemployed, 70.5% had been without a job for six months or more. The length of unemployment was strongly correlated with the length of homelessness; in other words, homelessness and unemployment seemed to mirror each other.

Willing and able to work: Unemployed respondents were asked if they were willing and able to work. Of those who were unemployed, 67.9% indicated that they would take a job if offered; 32.1% said that they were not willing and able to work. Among disabled persons, 60.3% were willing and able to work compared to 91.4% of non-disabled persons.



DISABILITIES/SPECIAL CIRCUMSTANCES

Homeless adults were asked this question: "Do you think or have you been told that you have any of the following?" Respondents could select more than one disability/condition.

Disability/condition	2009 #	2009 %	2007 %
Mental illness	378	41.1%	33.3%
Physical disability	296	32.2%	16.9%
Alcohol abuse	250	27.2%	29.8%
Drug abuse	231	25.1%	30.3%
Developmental disability/learning disability	94	10.2%	3.6%
HIV/AIDS	14	1.5%	.4%
Victim of domestic violence	115	12.5%	6.4%
Other	10	1.1%	6.4%

This year: Four out of ten homeless adults (41.1%) reported thinking or having been told that they had mental illness. This is the most prevalent disability reported, followed by physical disabilities, and then alcohol and drug abuse. In 2009, 73.7% of homeless adults were identified as disabled; this meant that they had one of the disabling conditions listed in this section with the exception of domestic violence, or they were receiving SSI/SSDI. Respondents averaged 1.5 disabilities each.

Compared to 2007: The most striking changes have to do with the incidence of mental illness (increasing from 33.3% in 2007 to 41.1% in 2009), drug abuse (decreasing from 30.3% in 2007 to 25.1% in 2009), and developmental disability/learning disability (increasing from 3.6% in 2007 to 10.2% in 2009).

GOVERNMENT BENEFITS UTILIZATION

Government Benefits Utilization

Homeless adults were asked the following question: "Are you or any of your children with you now receiving any of the following government benefits?" Respondents could select more than one answer.

Government Benefit	2009#	2009 %	2007 %
Social Security	42	4.6%	6.2%
SSI/SSDI	175	19.0%	14.6%
Medicaid/Medicare	174	18.9%	16.8%
GAMP/BadgerCare Plus	2203	22.1%	15.8%
TANF/W-2	84	9.1%	9.2%
Food Stamps	416	45.3%	34.6%
Veterans Benefits/Pension	15	1.6%	2.1%
Veterans Health Care	57	6.2%	5.0%
Unemployment Benefits	27	2.9%	1.4%
Other	33	3.6%	4.8%
No benefits of any kind	172	18.7%	24.4%

This year: The most frequently used government benefit was Food Stamps, followed by GAMP/BadgerCare Plus, SSI/SSDI, and Medicaid/Medicare.

Compared to 2007: Several areas are worth mentioning: SSI/SSDI increase from 14.6% in 2007 to 19.0% in 2009; GAMP/BadgerCare Plus increase from 15.8% to 22.1%; and the increase in Food Stamps from 34.6% to 45.3%, and the decrease in the percentage of people who received no benefits.



GETTING HELP

Homeless adults were asked this question: "In the past month, what services did you or anyone in your family with you now need but could not get?" Respondents could select more than one answer.

Type of help	2009 #	2009 %	2007 %
Finding work/employment assistance	213	23.2%	20.7%
Finding permanent housing	246	26.8%	17.1%
Emergency shelter	59	6.4%	6.3%
Food	101	11.0%	8.0%
Rent/utility assistance	112	12.2%	9.1%
Transportation/bus passes	154	16.8%	8.4%
Medical care	87	9.5%	11.2%
Dental care	133	14.5%	9.2%
Mental health care	56	6.1%	2.9%
Alcohol or drug abuse treatment	37	4.0%	2.9%
Getting a Wisconsin ID or driver's license	94	10.2%	4.1%
Getting government benefits	80	8.7%	5.9%
Child care	20	2.2%	2.4%
Other service	19	2.1%	3.1%
No service gaps identified	326	35.5%	41.2%

This year: Homeless adults identified finding permanent housing as the most prevalent unmet need (26.8%), followed by employment help (23.2%), transportation/bus passes (16.8%), and dental care (14.5%).

Compared to 2007: Respondents were more likely to identify service gaps in 2009 than they were in 2007. In 2009, 64.5% of homeless adults identified at least one service gap in the past month compared to 58.8% in 2007. The biggest increases were in the area of finding permanent housing, transportation, dental care, getting a Wisconsin ID or driver's license, and mental health care.

Four Pillars of the 10-Year Plan

Prevention and Emergency Services

Provide early and easy access to resources and services that will help people avoid shelter stays and expedite acquisition of permanent housing.

Economic Support and Employment

Better utilize existing employment and training resources to address the unique needs of homeless jobseekers.

Mental Health, Substance Abuse, and Support Services

Develop sustainable methods for addressing the need for skilled supportive services for residents of permanent supportive housing for homeless people with disabilities.

Permanent Housing

Maximize the use of existing and planned financing resources to significantly expand the availability of permanent supportive housing for homeless people.

Pillar 1: Prevention and Emergency Services

The 10-Year Plan for Prevention and Emergency Services emphasizes the early provision of services aimed at preventing stays in emergency shelter in the first place and rapidly re-housing people if they become homeless and must use shelter resources.

Milwaukee has an extensive emergency shelter system with 438 shelter beds available for single adults and 223 beds available for persons in families. The system evolved over the 1980's and 1990's but has remained stable in the number of beds since 2000. This was in recognition of the fact that the development of additional shelter beds would make it more difficult to financially support the existing inventory as well as a growing sense among homeless service providers that system energy and resources should shift toward a "Housing First" approach.

The 10-Year Plan Prevention and Emergency Services Pillar assumes that Milwaukee's existing emergency shelter inventory will stay in place but will be used differently in the future. Essentially, the approach adopted by the Work Group is one that moves resources to an earlier point of intervention – before people come into emergency shelter. A variety of prevention services and pre-shelter interventions are planned. Once people become homeless, the plan includes activities aimed at rapidly-re-housing them so they are able to find, secure and maintain permanent housing.

The 10-Year Plan includes the following Prevention and Emergency Services elements:

- Improved Discharge Planning: Insure that people leaving institutions such as health care facilities, mental health care, jails and correctional facilities and the foster care system are not discharged to the shelter or to the street through the development of signed Memoranda of Understanding with discharging institutions with monitoring conducted by the Continuum of Care Homeless Management Information System.
- Homeless Connect: Conduct an annual Project Homeless Connect that will provide homeless and near-homeless
 people with direct access to information and services on housing, benefits, employment, legal services, health care,
 mental health care, clothing, hygiene, and other services; and provide an opportunity to involve community
 volunteers and businesses in homeless services.
- Homelessness Prevention/Rapid Re-housing: Provide landlord/tenant mediation and other legal assistance to
 people facing eviction; and implement a rapid re-housing program for individuals and families that includes limited
 rent assistance, the establishment of a preferred provider network, and housing locator services.
- Outreach: Establish a homeless prevention system that utilizes 2-1-1 and street outreach to provide information, assessment, triage, shelter diversion, and referral to housing and support services including behavioral health services to prevent/shorten shelter stays.
- Best Practices: Establish best practices for landlords, shelters, and other homeless service providers to ensure high quality services focused on rapid re-housing.



Pillar 2: Economic Support and Employment

The 10-Year Plan for Economic Support and Employment focuses primarily on the challenge of significantly improving employment and training opportunities for homeless people through better use of Milwaukee's existing employment and training resources. Integrating homeless people into the mainstream of training and employment services is a high priority along with the development of innovative approaches to homeless-specific programming.

Unemployment among Milwaukee's homeless is extreme; the 2009 Homeless Point in Time Survey found that 78.9% of homeless people were unemployed and most of those (70.5%) had been unemployed for more than six months. At the same time, nearly three-quarters of homeless (72.2%) of homeless have completed high school and a 29.0% have some education beyond high school. Though chronically unemployed, homeless people, even those with disabilities, indicate a strong willingness to work.

Findings of an analysis of the intersection of homelessness and employment in Milwaukee identified several areas for action including homeless' concerns about employment, employer attitudes, and the accessibility of existing employment and training resources managed by the Milwaukee Area Workforce Investment Board, Milwaukee Area Technical College, and other institutions. The 10-Year Plan addresses these challenges with a comprehensive package of strategies.

The 10-Year Plan includes the following Economic Support and Employment elements:

- Job Fair: Integrate a Job Fair into the annual Homeless Connect that will recruit employers with an interest in employing homeless people and provide direct access to employment and training service providers.
- Work-Linked Supportive Housing: Implement a Work-Linked Supportive Housing Program with place-based part-time jobs and support services created by the housing management entity and partnering employers.
- Employment Opportunity Center: Create a centralized Employment Opportunity Center to provide soft skills training, financial literacy, individual development accounts, training coordination, employee brokers, legal services, job coaching and job retention assistance to homeless workers.
- Pathways: Create new pathways for homeless job seekers to maximize use of mainstream employment and training
 resources including those managed by TANF/W-2, Department of Vocational Rehabilitation, Milwaukee Area Workforce
 Investment Board, Ticket to Work, Goodwill, and the Milwaukee Area Technical College.
- Social Enterprise: Study the feasibility of a job-creating social enterprise based on successful models and best practices developed in other cities.

Pillar 3: Mental Health, Substance Abuse, and Support Services

The 10-Year Plan for Mental Health, Substance Abuse, and Support Services focuses on the generation of sustainable resources to support high quality behavioral health services for people with mental health and substance abuse disorders.

As Milwaukee has begun to develop more permanent supportive housing for homeless people with disabilities the issue of supportive service funding has become critical. With planned inventory expansions of 1,260 units over the next ten years, the challenge has become even greater. High quality permanent supportive housing requires the provision of skilled case management, peer support, and supportive services that can help people maintain recovery and stay in permanent housing. The 10-Year Plan elements in this area focus on how to create a stable infrastructure of behavioral health services that can accommodate growth in the community's permanent supportive housing inventory and ensure the best possible support for homeless people who become residents in these new housing units.

The 10-Year Plan also attends to the growing commitment to peer support, looking at this new resource as a key way to increase the level of support within the permanent supportive housing environment; all within the context of establishing, monitoring and enforcing best practice standards for permanent supportive housing over the long term. Advocacy for the interests of homeless people at every level of community planning and policymaking is also included in the plan.

The 10-Year Plan includes the following Mental Health, Substance Abuse, and Support Services elements:

• Sustainable Funding: Secure annual funding in the Wisconsin state budget to fund supportive services for individual and families living in permanent supportive housing projects that are supported by the Continuum of Care.



- SOAR: Implement an expanded SOAR (SSI/SSDI Outreach, Access and Recovery) that will pair a SOAR specialist with case management to significantly increase the number of people able to secure SSI/SSDI.
- Best Practices: Develop best practice standards for permanent supportive housing which incorporate recovery principles; and conduct regular monitoring of permanent supportive housing to assure compliance with those standards.
- Peer Support: Expand the successful resident manager and peer support specialist models to new permanent supportive housing development.
- Advocacy: Advocate for the interests of the homeless in the development of community plans and system improvement initiatives, specifically in the areas of identifying alternative and sustainable sources of revenue for homeless services, improving access to mainstream benefits and supportive services, integrating substance abuse and mental health services, and consumer involvement in policy and program decision-making.

Pillar 4: Permanent Housing

The 10-Year Plan for Permanent Housing emphasizes strategies to maximize the use of existing and planned financial resources to significantly expand the availability of permanent supportive housing for homeless people, especially people with mental illness and other disabilities.

Milwaukee's current permanent supportive housing inventory for homeless people includes 631 units for individuals and 214 units for persons living in families. New housing developments, launched in the past two years, have successfully organized multiple funding sources to create viable projects, but there is general recognition that this process has been extremely difficult. Project siting and zoning issues further complicate and often impede the development of new permanent supportive housing and tax the ability of developers to see projects through to completion.

The 10-Year Plan for Permanent Housing looks to existing funding sources and mechanisms to increase the number of permanent supportive housing units by 1,260 over the next ten years. The Plan elements assume shared responsibility involving the Continuum of Care's Bonus Project resource through the U.S. Department of Housing and Urban Development, and commitments from the State of Wisconsin (WHEDA), Milwaukee County, and the City of Milwaukee.

The 10-year Plan includes the following Permanent Housing elements:

- New Construction: Assist the construction of 1,260 new permanent supportive housing for homeless individuals by providing gap funding through:
 - Continuum of Care commitment to leverage bonus permanent housing funds to support permanent supportive housing for homeless people
 - City and County set-asides of HOME, CDBG, and Housing Trust Fund resources for permanent supportive housing for homeless people
 - WHEDA set-aside of Low Income Housing Tax Credits for permanent supportive housing for homeless people
- Siting/Zoning Plan: Develop a permanent supportive housing siting/zoning plan that will assist in combating zoning and NIMBY barriers.
- Housing Access Partnership: Create a Housing Access Partnership for Milwaukee County/City to address barriers to publicly-assisted housing that are experienced by homeless people.
- New Funding: Continue to seek new funding to create additional housing including Section 811 Project Rental Assistance Contract, National Housing Trust Fund, Neighborhood Stabilization Program, and HUD's boutique set-asides of Section 8 for special populations.



Prevention and Emergency Services Action Plan



Prevention and Emergency Services

1.1 GENERAL STRATEGY: Create a Cross-System Discharge Planning Strategy

1.1a Proposed Action:

Milwaukee will create a *Cross-System Discharge Planning Strategy* in Milwaukee to prevent persons residing temporarily in local institutions from becoming homeless immediately upon release for reasons of inadequate discharge planning or the absence of residential opportunities. Institutions targeted for this component will be the foster care system, mental health and substance abuse treatment residential/inpatient facilities, local and state correctional systems, and local health care systems, in that order of priority. The *Cross-system Discharge Strategy* will not only reduce the number of people requiring emergency shelter in Milwaukee but will also reduce crime and contain law enforcement costs by stabilizing the lives of local ex-offenders who are more vulnerable to recidivism when homeless as well as supporting the recovery goals of persons with mental illness and substance abuse disorders.

This project will be led by a local community planning agent who can perform a boundary spanning role between the Milwaukee's Continuum of Care of homeless service providers and the foster care system, local and state corrections, mental health and substance abuse treatment providers, and local health care systems. Upon implementation, the *Cross-System Discharge Strategy* may include any or all of the following strategies: newer and more comprehensive discharge planning methods adopted by the local institutions, in-reach to local institutions by homelessness prevention providers, assistance with public benefit applications for persons leaving institutions, coordinated matching of people leaving institutions with best fit permanent supportive housing, and development of new supportive housing or transitional housing specifically for subpopulations such as youth leaving foster care or persons with mental illness.

1.1b Quantity of Proposed Units of Service: Four discharge protocols established

1.1c Intended Outcomes:

- First Year: Discharge protocol established between one system and the Continuum of Care
- Over 10 Years: Discharge protocols established between four systems and the Continuum of Care

1.1d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	1	1	-	\$25,000 ¹	\$25,000
2011	1	2		\$25,000	\$50,000
2012	1	3		\$25,000	\$75,000
2013	1	4		\$25,000	\$100,000
	1 1	3 4		. ,	

1.1e Potential Funding Options Identified/Secured:

- 1. Private foundation to support planning and development
- 2. U.S. Department of Justice Partnership Initiative
- 3. In-kind support from Community Advocates
- 4. Joint Federal Agencies The Serious and Violent Offenders Reentry Initiative
- 5. Local health care systems

1.1f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Community Advocates
- 3. Milwaukee County Jail and House of Correction; Wisconsin Department of Corrections
- 4. Health Care Systems
- 5. Mental Health and Substance Abuse Treatment Facilities
- 6. Non-profit agencies serving youth in foster care, ex-offenders, persons with mental illness and substance abuse, and individuals with serious/chronic health issues

1.1g First Steps Towards Action Implementation:

- 1. Consult system-wide examples of discharge planning designed to prevent homeless that were created in Massachusetts, Minnesota, Illinois, and Ohio.
- 2. Carry out preliminary needs assessment and community planning work to devise strategies.
- 3. Implement first priority strategies address discharge planning quality in the foster care system.
- 4. Identify additional strategies and devise timeline and feasibility assessment for each system.

Prevention and Emergency Services

1.2 GENERAL STRATEGY: Launch Annual Project Homeless Connect Event

1.2a Proposed Action:

Milwaukee will launch a local version of the national model of *Project Homeless Connect* – an annual public event that creates ready service access for people who are homeless. The *Homeless Connect* events in Milwaukee will co-locate multiple needed services in a centralized and highly accessible setting. The goals are to link disconnected homeless people with services for the first time and to connect others with services not made expressly available to people who are homeless any other time of the year. The *Homeless Connect* model has a proven track record of success in several cities nationwide including several comparable to Milwaukee.

Project Homeless Connect's free services in Milwaukee will include: legal consultation, health screenings, dental care, wheelchair repairs, free bank account opportunities, free voicemail account opportunities, benefits applications, veterans' services, haircuts, TB testing, mammograms, mental health screening, vision exams, applications for identification cards /birth certificates, housing applications, rapid re-housing assessments, vouchers for shoes and work clothes, distribution of personal care and hygiene items, employment counseling/ applications, public benefits applications, distribution of information cards, and food.

1.2b Quantity of Proposed Units of Service: One Project Connect annually

1.2c Intended Outcomes:

- Year 1: 300 individuals to participate at each event
- Year 2: 400 individuals to participate at each event
- Year 3 10: 500 Individuals to participate at each event

1.2d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	400	400	-	\$50,000 ²	\$50,000
2011	500	900		\$50,000	\$100,000
2012	500	1400		\$50,000	\$150,000
2013	500	1900		\$50,000	\$200,000
2014	500	2400		\$50,000	\$250,000
2015	500	2900		\$50,000	\$300,000
2016	500	3400		\$50,000	\$350,000
2017	500	3900		\$50,000	\$400,000
2018	500	4400		\$50,000	\$450,000
2019	500	4900		\$50,000	\$500,000

1.2e Potential Funding Options Identified/Secured:

- 1. Greater Milwaukee Foundation, one time grant to finance planning costs
- 2. Local Corporate Philanthropy one time grant for start up costs
- 3. Milwaukee Business District Associations one time grant for start up costs
- 4. Volunteers from private sector companies to provide staff support of the event.
- 5. In-kind providers of services including doctors, nurses, lawyers,
- 6. In-kind donations of food, clothing, hygiene products etc.

1.2f Responsible Parties:

- 1. United Way Project Homeless Connect Planning and Coordination Assistance
- 2. Milwaukee Continuum of Care nonprofit project sponsors

1.2g First Steps Towards Action Implementation:

- 1. Milwaukee COC to issue appeal for support of Project Homeless Connect.
- 2. Submit funding application to local foundation and/or United for start-up support.
- 3. Identify Homeless Connect Planner/Coordinator to organize the first Homeless Connect.
- 4. Identify private and public sector community partners.
- 5. Set dates for Kick Off of initial Project Homeless Connect.

Prevention and Emergency Services

1.3 GENERAL STRATEGY: Implement and Grow a New Rapid Re-Housing Program

1.3a Proposed Action:

Milwaukee will implement a Rapid Re-Housing Program for homeless individuals and families that utilizes short term rent assistance to reduce the length of shelter stays and provides a quick leg up out of the emergency shelter system. The Rapid Re-Housing Program will be targeted specifically to homeless individuals and households whose primary obstacle to exiting shelter is not being able to afford the cost of first month's rent and not having sufficient income to fully cover rent for the first months of their tenancy. This is a time-limited form of assistance that will help households regain housing and gradually reestablish their ability to develop full financial independence.

The Rapid Re-Housing intervention is built upon evidence that once housing is secured, many formerly homeless people are much better positioned to increase their income and build their stability. During the household's transition out of homelessness, Rapid Re-Housing will pay for first month's rent, security deposit, moving costs, and a portion of the rent on an as needed basis. Households' needs for financial assistance will be regularly reassessed; and case management will be provided In their search for appropriate rental units, participants in the Rapid Re-Housing Program will have available to them a network of landlords and an on-line housing locator service. Ultimately, the Rapid Re-Housing Program will free up capacity

1.3b Quantity of Proposed Units of Service:

1.3c Intended Outcomes:

- Per Year: 75 Households to participate in Rapid Re-Housing
- **Over 10 Years:** 750 households to participate in Rapid Re-Housing over 10 years

1.3d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010		75	-	\$800,000	\$800,000
2011		75		\$800,000	\$1,600,000
2012		75		\$800,000	\$2,400,000
2013		75		\$800,000	\$3,200,000
2014		75		\$800,000	\$4,000,000
2015		75		\$800,000	\$4,800,000
2016		75		\$800,000	\$5,600,000
2017		75		\$800,000	\$6,400,000
2018		75		\$800,000	\$7,200,000
2019		75		\$800,000	\$8,000,000

1.3e Potential Funding Options Identified/Secured:

- 1. HUD Homeless Prevention and Rapid Re-Housing Program
- 2. TANF assistance
- 3. City of Milwaukee and Milwaukee County Emergency Shelter Funding
- 4. State of Wisconsin Emergency Shelter Grant, Transitional Housing Program, and Homeless Prevention Program Funding
- 5. Local HUD HOME funds

1.3f Responsible Parties:

- 1. City of Milwaukee HPRP Lead Agency and Grantees
- 2. Milwaukee Continuum of Care

1.3g First Steps Towards Action Implementation:

- 1. Implement Milwaukee's HPRP program according to HUD calendar.
- 2. Begin research on options for financing this program when HPRP funding ends.
- 3. Devise scope and budget for the program for the 8 year period after HPRP.
- 4. Follow national trends that will likely increasingly emphasize rapid re-housing models.
- 5. Pursue new national funding opportunities to expand rapid re-housing in Milwaukee.

Prevention and Emergency Services

1.4 GENERAL STRATEGY: Create 2-1-1 Homeless Helpline and Mobile Team

1.4a Proposed Action:

Milwaukee will support the 2-1-1 @ IMPACT Homeless Helpline and explore the feasibility of establishing a Mobile Team to link people who are homeless and at-risk with local resources to prevent and re-solve homelessness. Milwaukee's 2-1-1 @ IMPACT is a 24 hour, free, confidential phone service similar to those that operate successfully in other U.S. cities - often in conjunction with wider human service referral networks. Milwaukee's 2-1-1 Homeless Helpline will connect callers to emergency rent assistance, security deposits, homeless prevention interventions, shelter referrals, permanent affordable housing, mental health assistance, domestic violence resources, and other services that will prevent homelessness and promote housing stability.

The Milwaukee 2-1-1 Mobile Team program will be an extension of the 2-1-1 Homeless Hotline. It will be a street outreach team that is deployed in local business and residential areas to extend assistance to people who are living on the street. The Team will provide information, assessment, and triage to help individuals connect with homeless services and homelessness diversion opportunities. A particular emphasis of the *Mobile Team* will be assessments of persons with mental health issues and assistance in obtaining needed mental health services.

1.4b Quantity of Proposed Units of Service: Between 500-1,000 units of service provided/year

1.4c Intended Outcomes:

- Per Year: 500 households assisted in the initial start-up year
- Over 10 Years: Over 5,000 different households assisted many to be assisted more than once

1.4d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	400	400		\$200,000 ³	\$200,000
2011	100	500		\$250,000	\$450,000
2012		500		\$250,000	\$700,000
2013		500		\$250,000	\$950,000
2014		500		\$250,000	\$1,200,000
2015		500		\$250,000	\$1,450,000
2016		500		\$250,000	\$1,700,000
2017		500		\$250,000	\$1,950,000
2018		500		\$250,000	\$2,200,000
2019		500		\$250,000	\$2,450,000

1.4e Potential Funding Options Identified/Secured:

- 1. HUD Homelessness Prevention and Rapid Re-Housing Program
- 2. United Way
- 3. Community Development Block Grant
- 4. Milwaukee Business Improvement Districts and Associations
- 5. Emergency Shelter Grant
- 6. Veterans Assistance

1.4f Responsible Parties:

- 1. 10 Year Plan Implementation Team
- 2. Cathedral Center Coordinated Intake Project
- 3. Milwaukee 2-1-1 @ IMPACT

1.4g First Steps Towards Action Implementation:

- 1. Review the strengths and weaknesses of Milwaukee's 2-1-1 @ IMPACT homeless service.
- 2. Conduct community planning meetings to discuss the roll out of an enhanced 2-1-1 homeless service.
- 3. Coordinate the 2-1-1 homeless service with other strategies in the 10 Year Plan.

Prevention and Emergency Services

1.5 GENERAL STRATEGY: Develop Best Practice Guidelines on Housing First

1.5a Proposed Action:

Milwaukee will develop *Best Practice Guidelines on Housing First and Rapid Shelter Exit* to be used as an educational tool and catalyst of systems change for all shelter providers, homeless service agencies, and landlords with a role in homeless housing in Milwaukee. The goal of the *Best Practice Guidelines* is to ensure that Milwaukee's homeless system, in its entirety, is in concert with national evidence-based best practices related to emphasizing Rapid Exit from shelter and seeking permanent housing opportunities through Housing First mechanisms for any and all homeless persons without undue requirements for intermediary or transitional steps towards permanency.

In-service trainings and peer to peer consultations will be set up for agencies system-wide in Milwaukee to cultivate skill-sharing and educate staff members at every level within the organizations about the principles and goals underlying Housing First and Rapid Exit principles. In conjunction with development of these *Best Practice Guidelines*, Milwaukee will seek opportunities to bring trainings sponsored by national intermediary organizations on Housing First and Rapid Exit to Milwaukee. Ultimately, the *Best Practice Guidelines* will help hasten the County's move toward Housing First and Rapid Exit and bring about a system-wide transformation.

1.5b Quantity of Proposed Units of Service: Milwaukee housing agencies, homeless service organizations, and landlords participating in homeless programs will be engaged with the Best Practice Guidelines through educational forums and peer to peer skill sharing sessions.

1.5c Intended Outcomes:

- Per Year: 25% percent of agencies of the Continuum of Care engaged in first year
- **Over 10 Years:** 75% of agencies engaged with Guidelines by Year 2 of the 10 Year Plan; 100% engaged by Year 3 of the 10 Year Plan.

1.5d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010				\$25,000	\$25,000
2011					\$25,000
2013					\$25,000

1.5e Potential Funding Options Identified/Secured:

- 1. United Way
- 2. Private foundations
- 3. City of Milwaukee
- 4. Milwaukee County

1.5f Responsible Parties:

- 1. Continuum of Care, including the Shelter Task Force
- 2. National intermediaries: Corporation for Supportive Housing, Abt Associates, TAC Inc.
- 3. Local supportive housing providers and developers
- 4. Local mental health and disability advocacy and support organizations

1.5g First Steps Towards Action Implementation:

- 1. Convene working group to determine parameters and content for the Guidelines.
- 2. Consult related publications that have been produced by national intermediary organizations.
- 3. Choose agent to author Guidelines for Milwaukee.
- 4. Begin trainings and peer to peer exchanges on the Guidelines.
- 5. Recruit national intermediaries to visit Milwaukee and train local staff on Rapid Exit/ Housing First.
- 6. Send Milwaukee representatives to annual national homeless and housing conferences.
- 7. Review and update the Guidelines annually to incorporate newest best practices and principles.

Economic Support and Employment Action Plan



Economic Support and Employment

3.1 GENERAL STRATEGY: Integrate a Job Fair into Project Homeless Connect

3.1a Proposed Action:

Milwaukee will integrate a Job Fair into the City's new Project Homeless Connect – an annual public event that creates ready service access for people who are homeless and previously homeless. The Homeless Connect events will co-locate multiple needed services in one public, highly accessible setting. The goals are to link disconnected homeless people with services for the first time and to connect others with services not made expressly available to people who are homeless any other time of the year. Milwaukee will emulate other cities' success in using Homeless Connect to expand available supports and engage individuals who have yet to link in with service networks.

In Milwaukee, a *Job Fair* will be central to the *Project Homeless Connect* model. Event planners will recruit employers who have an interest in the advantages of employing people who are homeless including tax credits and improved community relations. In addition, job training agencies will be anchors to the *Project Homeless Connect* team of co-located services. Participation will be tracked from the inaugural event to make comparisons with those that follow.

3.1b Quantity of Proposed Units of Service: 100 households per year better stabilized via increased income

3.1c Intended Outcomes:

- Year 1: 20 individuals to participate at each Job Fair event
- Year 2: 40 individuals to participate at each Job Fair event
- Year 3: 50 Individuals to participate at each event

3.1d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	400	400		Costs incorporated into	Homeless Connect
2011	500	900		(See Homelessness	Prevention and
2012	500	1400		Emergency S	Services)
2013	500	1900			
2014	500	2400			
2015	500	2900			
2016	500	3400			
2017	500	3900			
2018	500	4400			
2019	500	4900			

3.1e Potential Funding Options Identified/Secured:

Please refer to Prevention and Emergency Services.

3.1f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Milwaukee Area Workforce Investment Board

3.1g First Steps Towards Action Implementation:

1. Obtain support and endorsement of the Milwaukee Area Workforce Investment Board.

2. Coordinate Job Fair planning with the overall Project Homeless Connect planning.

Economic Support and Employment

3.2 **GENERAL STRATEGY:** Implement a Work-Linked Supportive Housing Model

3.2a Proposed Action:

Milwaukee will develop a *Work-linked Supportive Housing* program for people who are homeless. The pilot will test out the effectiveness of successful national examples for "vocationalized" housing in Milwaukee. Job opportunities for residents will be created in the form of "place-based" part-time work which integrates employment directly into the housing setting. These jobs may include employment with the resident management company or with the non-profit housing owner or partnering support service provider. In conjunction with employment opportunity, residents will be assisted in meeting their needs by a case manager. Unlike most supportive housing programs, the cost of rent will be assumed by the project. Participants, however, will escrow 30 percent of their income in savings accounts.

The structure of the *Work-Linked Supportive Housing* project will be oriented around work as a priority for all residents. The outcomes of this project will determine the feasibility of expanding *Work-Linked Supportive Housing* to additional similar housing sites in Milwaukee. If advisable, additional projects will be put into development in the fourth year of the 10 Year Plan and the number of projects will be brought full scale by year 10 of the Plan.

3.2b Quantity of Proposed Units of Service: 40 households per year stabilized via increased income

3.2c Intended Outcomes: (July 1 to June 30)

- Year 1: 50 percent of residents will have income from employment
- Year 3-10: 70 percent of residents will have income from employment

3.2d		New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
	2008/09	40	40		\$334,466	\$334,466
	2010	40	80		\$334,466	\$668,892
	2011	40	120		\$334,466	\$1,003,338
	2012	40	160		\$334,466	\$1,337,784
	2013	40	200		\$334,466	\$1,672,230
	2014	40	240		\$334,466	\$2,006,676
	2015	40	280		\$334,466	\$2,341,122
	2016	40	320		\$334,466	\$2,675,668
	2017	40	360		\$334,466	\$3,010,014
	2018	40	400		\$334,466	\$3,344,460

3.2e Potential Funding Options Identified/Secured:

- 1. The U.S. Dept of HUD Homelessness Prevention & Rapid Re-housing Program
- 2. HUD HEARTH Act Funds via local Homeless Continuum-of-care
- 3. Wisconsin Department of Children and Families Workforce Development
- 4. The U.S. DOL Homeless Veterans Reintegration Program
- 5. State and Local Economic Development Programs
- 6. Food Stamp Employment and Training Program via local Food Stamp Program
- 7. Workforce Investment Act Title I and Title II via the Workforce Investment Board
- 8. The Temporary Assistance to Needy Families Program Emergency Contingency Fund
- 9. Ticket to Work Program via the WI Department of Vocational Rehabilitation
- 10. The Carl Perkins Vocational and Technical Act via community colleges
- 11. Senior Community Employment Program

3.2f Responsible Parties:

- 1. Milwaukee 10 Year Plan Implementation Team
- 2. Milwaukee Workforce Investment Board
- 3. Department of Veterans Affairs

3.2g First Steps Towards Action Implementation:

- 1. Begin feasibility assessment for project.
- 2. Investigate job sectors and possible place-based employment options.
- 3. Review outcome literature on national work-linked Chronic Homeless Initiative pilots.
- 4. Develop, implement, and evaluate the initial project(s) with the findings used to support replication.

Economic Support and Employment

3.3 **GENERAL STRATEGY:** Create Employment Opportunity Center for Supportive Housing

3.3a Proposed Action:

Create a centralized *Employment Opportunity Center* to be shared by a city-wide and county-wide umbrella group of all supportive housing providers serving formerly homeless residents. The *Employment Opportunity Center's* service teams will be housed under one non-profit organization's roof but fielded widely to all supportive housing sites and their residents' job sites in Milwaukee. Services will include soft skills training, financial literacy, individual development accounts, training coordination, employee brokers and legal services, job coaching, and job retention supports. Member housing agencies will benefit from the efficiencies of this shared resource model. Their residents' employment prospects will be bettered by having access to specialized employment expertise and job opportunities that could not be offered on the same scale by one supportive housing provider operating on its own.

3.3b Quantity of Proposed Units of Service: In its first year, the Employment Center will assist 100 employable residents of supportive housing in pre-paring for, gaining, and sustaining employment. By year 3 of the 10 Year Plan, the Employment Center will achieve its full scale of achieving employment outcomes for 200 new residents each year.

3.3c Intended Outcomes: (July 1 to June 30)

- Per Year: 50% of participants will obtain family sustaining income
- Over 10 Years: Serve 2000 persons

3.3d		New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
	2008/09	200	200	-	\$1,100,000 ⁸	\$1,100,000
	2010	200	400		\$1,100,000	\$2,200,000
	2011	200	600		\$1,100,000	\$3,300,000
	2012	200	800		\$1,100,000	\$4,400,000
	2013	200	1000		\$1,100,000	\$5,500,000
	2014	200	1200		\$1,100,000	\$6,600,000
	2015	200	1400		\$1,100,000	\$7,700,000
	2016	200	1600		\$1,100,000	\$8,800,000
	2017	200	1800		\$1,100,000	\$9,900,000
	2018	200	2000		\$1,100,000	\$11,000,000

3.3e Potential Funding Options Identified/Secured:

- 1. Business Improvement Districts and Associations
- 2. Employment and training supportive services including the Milwaukee Area Workforce Investment Board, Milwaukee Area Technical College, Wisconsin Workforce Development and Division of Vocational Rehabilitation, and associated employment and training organizations
- 3. Community Advocate Public Policy Institute to include the Opportunity Center in its overall funding proposal to address imbalances that cause poverty.
- 4. U.S. DOL Homeless Veterans Reintegration Program
- 5. State and Local Economic Development Programs
- 6. Food Stamp Employment and Training Program via local Food Stamp Program
- 7. Workforce Investment Act Title I and Title II via the Workforce Investment Board and the One Stop Career Centers
- 8. The Temporary Assistance to Needy Families Program Emergency Contingency Fund and Emergency Assistance Programs
- 9. Ticket to Work Program via the WI Department of Vocational Rehabilitation
- 10. The Carl Perkins Vocational and Technical Act via community colleges

3.3f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Milwaukee Area Workforce Investment Board
- 3. Milwaukee Area Technical College and associated training programs

3.3g First Steps Towards Action Implementation:

- 1. Research successful examples of Shared Employment Centers including the San Francisco model.
- 2. Integrate project into the CA Public Policy Institute's effort to reduce poverty in Wisconsin.
- 3. Obtain endorsement and support of the Milwaukee Area Workforce Investment Board.

 $^{\rm 8}$ Based on an estimated cost of \$5,500 per person per year

Economic Support and Employment

3.4 GENERAL STRATEGY: Open New Pathways for Homeless Job Seekers

3.4a Proposed Action:

Milwaukee will open *New Pathways for Homeless Job Seekers* by carrying out a community planning process, similar to successful projects carried out elsewhere, that will proactively engage existing work-force development programs to better serve homeless people. The *New Pathways* will be developed through cross-system collaboration, improved access, and policy changes across the existing workforce development system in Milwaukee.

The intent of *New Pathways for Homeless Job Seekers* will be to better the way "mainstream" systems serve homeless people and to carve out special projects designed to meet homeless people's needs in particular. Rather than creating entirely separate work programs for homeless people, this will be an at-tempt to mainstream the employment problems faced by homeless people and to foster accountability for homeless peoples' needs within the city's existing workforce development resources. The impact of this project will be better cross-system linkages, new resources, and a collaboration model made official through a multi-agency Memorandum of Agreement. Agencies and public systems to be engaged in the *New Pathways* will include: W-2, DVR, WIB and Ticket to Work, Goodwill and MAT.

3.4b Quantity of Proposed Units of Service: Employment training and placement will be provided to 1,500 homeless and/or formerly homeless job seekers in Milwaukee. All public and non-profit partners in the *New Pathways for Homeless Job Seekers* project will begin to track homelessness status of participants and provide data on their outcomes such that the project can be assessed over time.

3.4c Intended Outcomes: (July 1 to June 30)

- **Per Year:** 1500 homeless or at risk of homeless will effectively be served by the Workforce Investment Board, Goodwill, W-2, DVR, or 'Ticket to Work" to receive employment related services
- **Over 10 Years:** 15,000 homeless or at imminent risk of homeless or will be effectively served by the existing systems.

3.4d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	1500	1500	Capital Costs	\$65,000	\$65,000 ⁹
2011	1500	3000		\$65,000	\$130,000
2012	1500	4500		\$65,000	\$195,000
2013	1500	6000		\$65,000	\$250,000
2014	1500	7500		\$65,000	\$315,000
2015	1500	9000		\$65,000	\$380,000
2016	1500	10,500		\$65,000	\$445,000
2017	1500	12,000		\$65,000	\$510,000
2018	1500	13,500		\$65,000	\$575,000
2019	1500	15,000		\$65,000	\$650,000

3.4e Potential Funding Options Identified/Secured:

- 1. Employment and training supportive services MAWIB, MATC, Wisconsin DWD & DVR
- 2. U.S. Dept of HUD HEARTH Program SHP Employment related Supportive Services Funds.
- 3. The U.S. DOL Homeless Veterans Reintegration Program
- 4. State and Local Economic Development Programs
- 5. Food Stamp Employment and Training Program via local Food Stamp Program
- 6. Workforce Investment Act Title I and Title II via the Workforce Investment Board
- 7. The Temporary Assistance to Needy Families Program Emergency Contingency Fund and

3.4f Responsible Parties:

- 1. Milwaukee CoC Nonprofit Project Sponsors
- 2. MAWIB, MATC , Ticket to Work (Social Security Administration)

3.4g First Steps Towards Action Implementation:

- 1. Outreach to employment and training systems in Milwaukee.
- 2. Review the community planning process carried out in King County, WA (Seattle) and its outcomes.
- 3. Obtain endorsement and support of the Milwaukee Area Workforce Investment Board.

Economic Support and Employment

3.5 GENERAL STRATEGY: Study Feasibility of a Job Creating Social Enterprise

3.5a Proposed Action:

Milwaukee will carry out a feasibility study of the options for developing a *Job Creating Social Enterprise* to employ people who are/were homeless. To staff this research project, students from local Business Administration departments in Milwaukee's higher education institutions will be recruited to perform the analysis in conjunction with their course work. The students will explore business opportunities in Milwaukee that can be combined with the mission of creating jobs for people who are homeless. Such an enterprise would fill a void in the local job sector of opportunities for people with limited employment experience to earn a living wage. The enterprise would also provide a positive transition into workforce participation.

This feasibility study will analyze social enterprise models and mission driven businesses in other comparable cities across the U.S. that have been successful with employing a homeless and formerly homeless workforce. Among other models, Milwaukee will explore options for linking a social enterprise with city and county agencies that contract for public works including sanitation, public parks maintenance, and street cleaning. Other business sectors, with track records of success in homeless employment in other cities, to be explored will include landscaping, baking, catering, furniture moving, urban farming, house painting, retailing via thrift stores, and packaging.

3.5b Quantity of Proposed Units of Service: To be determined by feasibility study

3.5c Intended Outcomes: (July 1 to June 30)

- Per Year: To be determined by feasibility study
- Over 10 Years: To be determined by feasibility study

3.5d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	Plan developed		\$20,000		\$20,000
2011					\$20,000
2012					\$20,000
2013					\$20,000
2014					\$20,000
2015					\$20,000
2016					\$20,000
2017					\$20,000
2018					\$20,000
2019					\$20,000

3.5e Potential Funding Options Identified/Secured:

- 1. Local small business development grants
- 2. Local and state business incubator start-up grants
- 3. Private bank business loans

3.5f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Non-profits with an interest in exploring social enterprise opportunities
- 3. University/college departments of business administration

3.5g First Steps Towards Action Implementation:

- 1. Outreach to Departments of Business Administration at local higher education institutions.
- 2. Collect list of examples of social enterprise serving homeless including CARA in Chicago.
- 3. Develop scope of work and six month timeframe for Feasibility Study to be completed.
- 4. Review Feasibility Study and plan from there.

Mental Health, Substance Abuse, and Support Services Action Plan



Mental Health, Substance Abuse, and Support Services

2.1 GENERAL STRATEGY: Advance Advocacy Campaign for Supportive Services Funding

2.1a Proposed Action:

Milwaukee will make new advances to an existing *Advocacy Campaign to secure service funding in permanent supportive housing statewide*. This new advancement will bring Milwaukee more in concert with other regional and statewide homeless consortiums in Wisconsin to seek state funding of services in permanent supportive housing. The *Advocacy Campaign*'s goal will be to produce a coordinated message, representative of all regions of Wisconsin affected by homelessness, of the cost effectiveness of state level public investment in supportive housing services. Financing models created by other states that have successfully filled this funding gap will be evaluated and recommended for replicability in Wisconsin.

The Advocacy Campaign's outcome will be a secure and sustainable state-level funding source that is packaged to coordinate with federal funding streams for the development and operations of permanent supportive housing. Ultimately, state funding secured through the Advocacy Campaign will harness more federal monies for housing to address homelessness in Milwaukee and elsewhere and will facilitate creation of a more extensive and sustainable supportive housing inventory.

Funding brought about by the *Advocacy Campaign* will be used in Milwaukee to finance home-based services needed by formerly homeless people with disabilities such as serious mental illness and long term substance abuse to sustain housing. These services will include case management, peer support specialist services, and other stabilization interventions.

2.1b Quantity of Proposed Units of Service: 320 former homeless persons to be stabilized in housing in Milwaukee if Campaign is successful

2.1c Intended Outcomes:

- Per Year: 32 units of supportive housing in Milwaukee
- Over 10 Years: 320 units of supportive housing in Milwaukee

2.1d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	32	32	-	\$64,000 ⁴	
2011	32	64		\$128,000	
2012	32	96		\$192,000	
2013	32	128		\$256,000	
2014	32	160		\$320,000	
2015	32	192		\$384,000	
2016	32	224		\$448,000	
2017	32	256		\$512,000	
2018	32	288		\$576,000	
2019	32	320		\$640,000	\$3,520,000

2.1e Potential Funding Options Identified/Secured:

- 1. WI General Public Revenue via options such as Real Estate Tax levy etc.
- 2. WI Department of Commerce
- 3. WI Department of Mental Health

2.1f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Commission on Supportive Housing
- 3. Lobbyists and advocacy organizations representing people with disabilities
- 4. Wisconsin Coalition to End Homelessness

2.1g First Steps Towards Action Implementation:

- 1. Review examples in states of Minnesota, Connecticut, Washington, and Louisiana.
- 2. Convene meeting of statewide homeless consortiums and PSH developers/owners.
- 3. Bring the advocacy campaign to a comprehensive, statewide scale.

⁴ Working assumptions: (1) \$2,000 per person supportive services supplement; this funding source would not cover entire supportive services cost. (2) Supportive services levels would vary by type of housing/target population; this figure should be considered an average cost. (3) Estimate will be further refined based on Illinois Supportive Housing Fund formula.

Mental Health, Substance Abuse, and Support Services

2.2 GENERAL STRATEGY: Expand Social Security Opportunity Advocacy and Recovery

2.2a Proposed Action:

Milwaukee will expand the existing *Social Security Opportunity Advocacy and Recovery (SOAR)* program which assists people who are homeless with disabilities to access the public benefits of SSI, SSDI, and Medicaid. Through such an expansion, this current high-demand program will widen its staff capacity by adding additional Benefits Specialist(s) and Case Manager(s) to be scaled up over the course of 10 years.

Through this expanded *SOAR* program, Milwaukee will improve its track record for increasing the likelihood that homeless applicants for public benefits overcome the myriad obstacles to obtaining these resources for which they are eligible but frequently fail to secure and maintain. Those individuals and families that secure public benefits through the *SOAR* program will be better positioned to exit homelessness and maintain housing for the long term. On a systems level, the expanded *SOAR* program will begin coordinating with the local SSA and DDS offices in Milwaukee to implement public systems change adjustments that have been successful in other communities for further improving the likelihood that people who are homeless obtain benefits. These may include designing special provisions for homeless applicants.

2.2b Quantity of Proposed Units of Service: 905

2.2c Intended Outcomes:

- Per Year: 35, 70, and then 100 annually
- Over 10 Years: 905

2.3d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs ⁵	Cumulative Costs
2010	35	35		\$87,500	\$87,500
2011	70	105		\$175,000	\$262,500
2012	100	205		\$250,000	\$512,500
2013	100	305		\$250,000	\$762,500
2014	100	405		\$250,000	\$1,012,500
2015	100	505		\$250,000	\$1,262,500
2016	100	605		\$250,000	\$1,512,500
2017	100	705		\$250,000	\$1,762,500
2018	100	805		\$250,000	\$2,012,500
2019	100	905		\$250,000	\$2,262,500

2.2e Potential Funding Options Identified/Secured:

- 1. U.S. Department of HUD Homelessness Prevention and Rapid Re-Housing Fund
- 2. SAMHSA funding for SOAR trainings in Wisconsin
- 3. Private foundations such as Healthier Wisconsin Partnership Program
- 4. Private hospitals in Milwaukee and Federally Qualified Health Centers (FQHC)
- 5. Milwaukee County Family Care Disability Benefits Center

2.2f Responsible Parties:

- 1. 10 Year Plan Implementation Team
- 2. Milwaukee County Behavioral Health Division
- 3. Wisconsin Statewide Working Group for SSI Access

2.2g First Steps Towards Action Implementation:

- 1. Develop a community collaborative to implement the expanded SOAR.
- 2. Research sustainable funding to replace HPRP resources after Year 3 of 10 Year Plan.
- 3. Begin cross-system planning meetings between local SSA and DDS and 10 Year Plan.

Mental Health, Substance Abuse, and Support Services

2.3 GENERAL STRATEGY: Develop Standards of Care for Permanent Supportive Housing

2.3a Proposed Action:

Milwaukee will develop *Standards of Care* for all Permanent Supportive Housing in Milwaukee to ensure that all formerly homeless persons who reside in service enriched housing benefit from national evidence-based best practices that are guided by the most enlightened and widely accepted national principles. These principles will include the importance of consumer choice, recovery approaches, asset based service modeling, motivational interviewing, and stages of change concepts. The best practices will include use of peer specialists, adherence to landlord-tenant law, implementation of harm reduction paradigms, and encouragement of voluntary arrangements for participation in service provision.

To educate permanent supportive housing providers about Milwaukee's *Standards of Care*, a system of peer evaluation and monitoring for consistency with the standards will be implemented as has been successfully carried out in other communities with similar objectives. In conjunction with development of these *Standards of Care*, Milwaukee will seek opportunities to bring trainings sponsored by national intermediary organizations on evidence-based best practices in permanent supportive housing to the City.

The *Standards of Care* project will focus initially on educating all new Permanent Supportive Housing units but would become established as a Continuum of Care best practice standard and be applied to all HUD-funded Permanent Supportive Housing projects through the annual project review and ranking process.

2.3b Quantity of Proposed Units of Service: One Standards of Care project to be completed

2.3c Intended Outcomes:

• Over 10 Years: 320 (new units) plus Continuum of Care's existing PH inventory (as appropriate)

2.3d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs ⁶	Cumulative Costs
2010	126	126		\$25,000	\$25,000
2011	126	252		\$25,000	\$50,000
2012	126	378		\$25,000	\$75,000
2013	126	504		\$25,000	\$100,000
2014	126	630		\$25,000	\$125,000
2015	126	756		\$25,000	\$150,000
2016	126	883		\$25,000	\$175,000
2017	126	1,008		\$25,000	\$200,000
2018	126	1,134		\$25,000	\$225,000
2019	126	1,260		\$25,000	\$250,000

2.3e Potential Funding Options Identified/Secured:

- 1. Milwaukee Continuum of Care
- 2. Private foundations

2.3f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Commission on Supportive Housing
- 3. Milwaukee Mental Health Task Force
- 4. National intermediaries: Corporation for Supportive Housing, Abt Associates, TAC Inc.

2.3g First Steps Towards Action Implementation:

- 1. Convene working group to select guiding principles and best practices for the Standards
- 2. Develop tool outlining best practices Milwaukee will adopt
- 3. Develop a peer review process coordinate with existing project review and ranking system.

⁶ Milwaukee's Standards of Care and monitoring system development will be completed by the Continuum of Care and incorporated into the CoC annual operating budget; monitoring activities would be subcontracted to a consumer satisfaction entity, i.e. Vital Voices, cost to be determined.

[•] Per Year: 32 new units

Mental Health, Substance Abuse, and Support Services

2.4 GENERAL STRATEGY: Create a Voice for the Homeless Plan

2.4a Proposed Action:

Milwaukee will create a *Voice for the Homeless Plan* to ensure representation from constituents of the homeless service and housing arena in Milwaukee in all planning initiatives sponsored by the City and County that impact upon homeless resources and populations. The intent is to uphold the interests of people who are homeless which are often left out in the development of community plans and system improvement initiatives. Specific intended outcomes are: identifying alternative and sustainable sources of revenue for homeless services, improving access to mainstream benefits and supportive services for people who are homeless and enhancing consumer involvement in policy and program decision-making.

In conjunction with the *Voice for the Homeless Plan*, a Speakers' Bureau that engages people who are formerly homeless as public representatives will be created and deployed in conjunction with 10 Year Plan implementation and in association with other forms of consumer decision-making. Ultimately, the *Voice for the Homeless Plan* will move Milwaukee forward in ensuring that solutions to homelessness are not assigned primarily to the purview of the homeless service and housing arena but are, instead, an assumed responsibility of all public mainstream systems.

2.4b Quantity of Proposed Units of Service: One system wide Voice for the Homeless Plan

2.4c Intended Outcomes:

- Per Year: 1,500 homeless people to benefit from *Voice for the Homeless* at any one time
- Over 10 Years: 1,500 homeless people to benefit from Voice for the Homeless at any one time

2.4d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	Not applicable			No costs	
2011					
2012					
2013					
2014					
2015					
2016					
2017					
2018					
2019					
2.4e Poten	tial Funding Options	Identified/Secure	d:		

1. No funding required

2.4f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Homeless consumer representation entities

2.4g First Steps Towards Action Implementation:

- 1. Publicize the Voice for the Homeless to public officials and community planners
- 2. Create a bureau of representatives from the homeless service and housing arena
- 3. Engage consumers in a 10 Year Plan Speakers' Bureau and Consumer Involvement Team
- 4. Ensure Voice for the Homeless representation with: Plans issued by State Division of Health
- 5. Ensure Voice for the Homeless representation with: Community Mental Health Plan
- 6. Ensure Voice for the Homeless representation with: Milwaukee County 1915 (i) Plan
- 7. Ensure Voice for the Homeless representation with: Milwaukee Addiction Treatment Initiative
- 8. Ensure Voice for the Homeless representation with: Neighborhood-based planning activity

Mental Health, Substance Abuse, and Support Services

2.5 GENERAL STRATEGY: Peer Homeless Peer Support Capacity

2.5a Proposed Action:

Milwaukee will develop new *Homeless Peer Support Capacity* to be made up of formerly homeless people. This Capacity will consist of Peer Specialists who will be employed part-time to assist those who are currently homeless, particularly persons who have been chronically homeless, in exiting shelter and assimilating to life in permanent housing and in mainstream, residential communities. The *Peer Support Capacity* will complement existing health, mental health, and case management services available for homeless people in Milwaukee by offering culturally competent assistance that can only be extended by those who have personal experiences with homelessness, recovery, and adjustment to life in housing after years on the margins of society.

Milwaukee's new Homeless *Peer Support Capacity* will be developed in conjunction with two models of peer support service that currently exist in Milwaukee. These models will be expanded to the homeless arena and populations. The first translated model will be a Resident Manager role in transitional or permanent supportive housing whereby a Peer Specialist, indigenous to the population living in the housing setting, is hired to live in and fulfill management responsibilities. The second is a training program where-by formerly homeless individuals will attend skills sessions on effective peer mentoring and then be certified as specialists available for hire by non-profit and government agencies assisting the homeless. By expanding these models that now exist in Milwaukee into the new Homeless *Peer Support Capacity*, Milwaukee will be capitalizing on its history of innovativeness in the peer support arena and adding another cost effective dimension to its solutions to homelessness.

2.5b Quantity of Proposed Units of Service: 100 Peer Support Specialists to be trained

2.5c Intended Outcomes:

- Per Year: 10 new Peer Support Specialists added each year for six years
- Over 10 Years: Reach a goal of 60 Peer Support Specialists deployed city-wide

2.5d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	10	10	Capital Costs	\$10,000 ⁷	\$10,000
2011	10	20		\$10,000	\$20,000
2012	10	30		\$10,000	\$30,000
2013	10	40		\$10,000	\$40,000
2014	10	50		\$10,000	\$50,000
2015	10	60		\$10,000	\$60,000
2016	10	70		\$10,000	\$70,000
2017	10	80		\$10,000	\$80,000
2018	10	90		\$10,000	\$90,000
2019	10	100		\$10,000	\$100,000

2.5e Potential Funding Options Identified/Secured:

1. National and local entities providing funding for current peer support activities

2. Private foundations

3. Salaries to hire Peer Support Specialists to be provided by Milwaukee non-profit organizations

2.5f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Guest House Resident Manager Training Program
- 3. Our Space Peer Support Specialist Training Program
- 4. Advocacy organizations representing veterans, persons with disabilities, child welfare etc.

2.5g First Steps Towards Action Implementation:

- 1. Convene meeting of existing Peer Support agencies in Milwaukee.
- 2. Review options for expanding Peer Support into the homeless service and housing arena.
- 3. Establish goals, linkages, and recruitment/training plan.
- 4. Develop Action Plan and timeline for building the Homeless Peer Support Capacity

Permanent Housing Action Plan



4.1 GENERAL STRATEGY: Implement *Campaign to House the Homeless* by Leveraging McKinney Vento Samaritan Funds

4.1a Proposed Action:

Implement a *Milwaukee Campaign to House the Homeless* by creating 1,260 new units of Permanent Supportive Housing (PSH) via new construction and rehabilitation projects.

Assist the construction of these new housing units in the *Milwaukee Campaign* by providing gap funding using U.S. Department of HUD McKinney Vento Supportive Housing Bonus funds.

Obtain annual commitments each year from Milwaukee Homeless Continuum of Care (CoC) to leverage the Supportive Housing Bonus funds made available through the HUD McKinney Vento Homeless Funds.

4.1b Quantity of Proposed Units of Service: 200 units of housing

4.1c Intended Outcomes:

- Per Year: Homeless people stabilized in 20 new units per year for ten years.
- Over 10 Years: Homeless people stabilized in 200 units over ten years

4.1d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	20	20	\$400,000		\$400,000
2010	20	40	\$400,000		\$800,000
2012	20	60	\$400,000		\$1,200,000
2013	20	80	\$400,000		\$1,600,000
2014	20	100	\$400,000		\$2,000,000
2015	20	120	\$400,000		\$2,400,000
2016	20	140	\$400,000		\$2,800,000
2017	20	160	\$400,000		\$3,200,000
2018	20	180	\$400,000		\$3,600,000
2019	20	200	\$400,000		\$4,000,000

4.1e Potential Funding Options Identified/Secured:

1. Samaritan Housing Initiative Project bonus (calculated as per HUD's rule at 15 percent of the CoC's preliminary pro rata share).

4.1f Responsible Parties:

- 1. 10 Year Plan Implementation Team
- 2. Milwaukee Continuum of Care
- 3. Milwaukee CoC sub-grantee to become project sponsor

4.1g First Steps Towards Action Implementation:

In 2010 -2019, the CoC will continue to apply for HUD's Samaritan Bonus funds for the purpose of continued PSH development activity contingent upon these HUD resources continuing to be made available in the NOFA from year to year.

4.2 GENERAL STRATEGY: Implement *Campaign to House the Homeless* by Leveraging State of WI Low Income Housing Tax Credits

4.2a Proposed Action:

Implement a *Milwaukee Campaign to House the Homeless* by creating 1,260 new units of Permanent Supportive Housing (PSH) via new construction and rehabilitation projects.

Assist the construction of these new PSH units in the *Milwaukee Campaign* by providing gap funding using **Low Income Housing Tax Credit** (LIHTC) and capitalizing upon Milwaukee's policy of a set-aside of these funds for this express purpose

Generate interest and commitment from Milwaukee non-profit and for profit developers and non-profit social service providers to apply to Wisconsin Housing and Economic Development Authority (WHEDA) for LIHTCs to produce permanent supportive housing units. Ensure that there is continued interest in sustaining the development pipeline over the next 10 years.

4.2b Quantity of Proposed Units of Service: 1,260 units of housing Assist in the construction of 126 new units per year.

4.2c Intended Outcomes:

- Per Year: Homeless people stabilized in 126 new units per year for ten years.
- Over 10 Years: Homeless people stabilized in 1,260 units over ten years

4.2d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	126		\$18,640,446		\$18,640,446
2011	126	252	\$18,640,446		\$37,280,892
2012	126	378	\$18,640,446		\$55,921,338
2013	126	504	\$18,640,446		\$74,561,784
2014	126	630	\$18,640,446		\$93,202,230
2015	126	756	\$18,640,446		\$111,842,676
2016	126	882	\$18,640,446		\$130,483,122
2017	126	1,008	\$18,640,446		\$149,123,568
2018	126	1,134	\$18,640,446		\$167,764,014
2019	126	1,260	\$18,640,446		\$186,404,460

4.2e Potential Funding Options Identified/Secured:

1. WHEDA's Low Income Housing Tax Credits

4.2f Responsible Parties:

- 1. Local developers and potential developers of permanent supportive housing
- 2. Milwaukee area social service providers
- 3. Wisconsin's Affordable Housing Locator

4.2g First Steps Towards Action Implementation:

- 1. Actively recruit applicants to WHEDA for 2010 and thereafter for the Campaign.
- 2. Coordinate with WI's Affordable Housing Locator to attract potential developers with assurances of pools of applicants and low vacancy rates in housing added to the inventory.
- 3. Engage in discussions with WHEDA to prioritize the use of Exchange Funds for supportive housing projects and to increase the supportive housing set-aside.

Permanent Housing

4.3 GENERAL STRATEGY: Implement *Campaign to House the Homeless* by Leveraging the Milwaukee County's Community Development Block Grant

4.3a Proposed Action:

Implement a *Milwaukee Campaign to House the Homeless* by creating 1,260 new units of Permanent Supportive Housing (PSH) via new construction and rehabilitation projects.

Assist the construction of these new housing units in the Milwaukee Campaign by providing gap funding using Milwaukee County's **Community Development Block Grant** (CDBG) funds.

Coordinate intentions of the 10 Year Plan with Milwaukee County officials to obtain a commitment of a regular set-aside of the CDBG allocation for development of permanent supportive housing projects in conjunction with the Milwaukee Campaign.

4.3b Quantity of Proposed Units of Service: Assist in the construction of 126 new units per year.

4.3c Intended Outcomes:

- Per Year: Homeless people stabilized in 126 new units per year for ten years.
- **Over 10 Years:** Homeless people stabilized in 1,260 units over ten years

4.3d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	126		TBD		TBD
2011	126	252	TBD		TBD
2012	126	378	TBD		TBD
2013	126	504	TBD		TBD
2014	126	630	TBD		TBD
2015	126	756	TBD		TBD
2016	126	882	TBD		TBD
2017	126	1,008	TBD		TBD
2018	126	1,134	TBD		TBD
2019	126	1,260	TBD		TBD

4.3e Potential Funding Options Identified/Secured:

1. Milwaukee County CDBG

4.3f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Milwaukee County

4.3g First Steps Towards Action Implementation:

- 1. Review of other cities in the U.S. that have made the set-aside commitment.
- 2. Representatives of 10 Year Plan seek adoption of a set-aside of CDBG funds.
- 3. Adoption of a CDBG set-aside for permanent supportive housing.

Permanent Housing

4.4 GENERAL STRATEGY: Implement *Campaign to House the Homeless* by Leveraging the City of Milwaukee's Community Development Block Grant

4.4a Proposed Action:

Implement a *Milwaukee Campaign to House the Homeless* by creating 1,260 new units of Permanent Supportive Housing (PSH) via new construction and rehabilitation projects.

Assist the construction of these new PSH units in the Milwaukee Campaign by providing gap funding using the City of Milwaukee's **Community Development Block Grant** (CDBG) funds.

Coordinate intentions of the 10 Year Plan with City of Milwaukee officials and negotiate to set aside five percent of its CDBG allocation for permanent supportive housing projects.

4.4b Quantity of Proposed Units of Service: Assist in the construction of 126 new units per year.

4.4c Intended Outcomes:

- Per Year: Homeless people stabilized in 126 new units per year for ten years.
- Over 10 Years: Homeless people stabilized in 1,260 units over ten years

4.4d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	126		TBD		TBD
2011	126	252	TBD		TBD
2012	126	378	TBD		TBD
2013	126	504	TBD		TBD
2014	126	630	TBD		TBD
2015	126	756	TBD		TBD
2016	126	882	TBD		TBD
2017	126	1,008	TBD		TBD
2018	126	1,134	TBD		TBD
2019	126	1,260	TBD		TBD

4.4e Potential Funding Options Identified/Secured:

1. City of Milwaukee CDBG allocationG

4.4f Responsible Parties:

1. Milwaukee Continuum of Care

2. City of Milwaukee Officials

4.4g First Steps Towards Action Implementation:

1. Review process of other cities in the U.S. that have made the set-aside commitment.

2. Representatives of 10 Year Plan seek adoption of a set-aside of CDBG funds.

3. Adoption of a CDBG set-aside for permanent supportive housing.

Permanent Housing

4.5 GENERAL STRATEGY: Implement *Campaign to House the Homeless* by Leveraging the City of Milwaukee's Local Housing Trust Fund

4.5a Proposed Action:

Implement a *Milwaukee Campaign to House the Homeless* by creating 1,260 new units of Permanent Supportive Housing (PSH) via new construction and rehabilitation projects.

Assist the construction of these new PSH units in the *Milwaukee Campaign* by providing gap funding using the City of Milwaukee's Local **Housing Trust Fund**.

Coordinate intentions of the 10 Year Plan the City of Milwaukee to obtain a commitment of \$450,000 of local Housing Trust Fund dollars annually for ten years for development of PSH in conjunction with the *Milwaukee Campaign*.

4.5b Quantity of Proposed Units of Service: Assist in the construction of 126 new units per year.

4.5c Intended Outcomes:

- Per Year: Homeless people stabilized in 126 new units per year for ten years.
- **Over 10 Years:** Homeless people stabilized in 1,260 units over ten years

4.5d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	126	126	\$400,000		\$400,000
2011	126	252	\$400,000		\$800,000
2012	126	378	\$400,000		\$1,200,000
2013	126	504	\$400,000		\$1,600,000
2014	126	630	\$400,000		\$2,000,000
2015	126	756	\$400,000		\$2,400,000
2016	126	882	\$400,000		\$2,800,000
2017	126	1,008	\$400,000		\$3,200,000
2018	126	1,134	\$400,000		\$3,800,000
2019	126	1,260	\$400,000		\$4,200,000

4.5e Potential Funding Options Identified/Secured:

1. City of Milwaukee's Housing Trust Fund

4.5f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. City of Milwaukee
- 3. Local Housing Trust Fund Board

4.5g First Steps Towards Action Implementation:

- 1. Representatives of 10 Year Plan negotiate for annual commitment of Trust Fund.
- 2. Secure annual Housing Trust Fund allocation to be used for the *Milwaukee Campaign*.

4.6 GENERAL STRATEGY: Implement *Campaign to House the Homeless* by Leveraging Milwaukee County's Special Needs Housing Trust Fund

4.6a Proposed Action:

Implement a *Milwaukee Campaign to House the Homeless* by creating 1,260 new units of Permanent Supportive Housing (PSH) via new construction and rehabilitation projects.

Assist the construction of these new PSH units in the *Milwaukee Campaign* by providing gap funding using the Milwaukee County's Local **Special Needs Housing Trust Fund**.

Coordinate intentions of the 10 Year Plan with Milwaukee County to obtain a commitment of local Housing Trust Fund dollars annually for ten years for development of PSH in conjunction with the *Milwaukee Campaign*.

4.6b Quantity of Proposed Units of Service: Assist in the construction of 126 new units per year.

4.6c Intended Outcomes:

- Per Year: Homeless people stabilized in 126 new units per year for ten years.
- Over 10 Years: Homeless people stabilized in 1,260 units over ten years

4.6d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	126		\$1,000,000		\$1,000,000
2011	126	252	\$1,000,000		\$2,000,000
2012	126	378	\$1,000,000		\$3,000,000
2013	126	504	\$1,000,000		\$4,000,000
2014	126	630	\$1,000,000		\$5,000,000
2015	126	756	\$1,000,000		\$6,000,000
2016	126	882	\$1,000,000		\$7,000,000
2017	126	1,008	\$1,000,000		\$8,000,000
2018	126	1,134	\$1,000,000		\$9,000,000
2019	126	1,260	\$1,000,000		\$10,000,000

4.6e Potential Funding Options Identified/Secured:

1. Milwaukee County's local Special Needs Housing Trust Fund

4.6f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. County of Milwaukee

4.6g First Steps Towards Action Implementation:

- 1. Representatives of 10 Year Plan negotiate for annual commitment of Trust Fund.
- 2. Review of other counties in the U.S. that have used local trust funds for this purpose.
- 3. Secure annual Special Needs Housing Trust Fund allocation to be used for the Milwaukee Campaign.

4.7 GENERAL STRATEGY: Implement *Campaign to House the Homeless* by Leveraging the City of Milwaukee's HOME funds

4.7a Proposed Action:

Implement a *Milwaukee Campaign to House the Homeless* by creating 1,260 new units of Permanent Supportive Housing (PSH) via new construction and rehabilitation projects.

Assist the construction of these new PSH units in the *Milwaukee Campaign* by developing a set-aside of local City of Milwaukee's **HOME** allocation to be used for gap funding.

Coordinate intentions of the 10-Year Plan with the City of Milwaukee to obtain a commitment of a set-aside of its HOME allocation for permanent supportive housing projects that are part of the *Milwaukee Campaign*.

4.7b Quantity of Proposed Units of Service: Assist in the construction of 126 new units per year.

4.7c Intended Outcomes:

- Per Year: Homeless people stabilized in 126 new units per year for ten years.
- Over 10 Years: Homeless people stabilized in 1,260 units over ten years

4.7d	New Units of Service Created	Total Units of Service	One Time	Annual Operations and Service Costs	Cumulative Costs
			Capital Costs	and Service Costs	
2010	126	126	TBD		TBD
2011	126	252	TBD		TBD
2012	126	378	TBD		TBD
2013	126	504	TBD		TBD
2014	126	630	TBD		TBD
2015	126	756	TBD		TBD
2016	126	882	TBD		TBD
2017	126	1,008	TBD		TBD
2018	126	1,134	TBD		TBD
2019	126	1,260	TBD		TBD

4.7e Potential Funding Options Identified/Secured:

1. Local City of Milwaukee HOME funds

4.7f Responsible Parties:

1. Milwaukee Continuum of Care

2. City of Milwaukee

4.7g First Steps Towards Action Implementation:

1. Review of other cities in the U.S. that have made the set-aside commitment.

2. Representatives of 10 Year Plan negotiate for adoption of a set-aside of HOME funds.

3. Adoption of a HOME set-aside in Milwaukee.

4.8 GENERAL STRATEGY: Implement *Campaign to House the Homeless* by Leveraging Milwaukee County HOME funds

4.8a Proposed Action:

Implement a *Milwaukee Campaign to House the Homeless* by creating 1,260 new units of Permanent Supportive Housing (PSH) via new construction and rehabilitation projects.

Assist the construction of these new PSH units in the *Milwaukee Campaign* by developing a set-aside of local Milwaukee County **HOME** funds to be used for gap funding.

Coordinate intentions of the 10 Year Plan with the City of Milwaukee to obtain a commitment of a set-aside of ten percent of its HOME allocation for permanent supportive housing projects that are part of the *Milwaukee Campaign*.

4.8b Quantity of Proposed Units of Service: Assist in the construction of 126 new units per year.

4.8c Intended Outcomes:

- Per Year: Homeless people stabilized in 126 new units per year for ten years.
- **Over 10 Years:** Homeless people stabilized in 1,260 units over ten years

4.8d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	126	126	TBD		TBD
2011	126	252	TBD		TBD
2012	126	378	TBD		TBD
2013	126	504	TBD		TBD
2014	126	630	TBD		TBD
2015	126	756	TBD		TBD
2016	126	882	TBD		TBD
2017	126	1,008	TBD		TBD
2018	126	1,134	TBD		TBD
2019	126	1,260	TBD		TBD

4.8e Potential Funding Options Identified/Secured:

1. Milwaukee County HOME funds

4.8f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Milwaukee County

4.8g First Steps Towards Action Implementation:

- 1. Review of other counties in the U.S. that have made the set-aside commitment.
- 2. Representatives of 10 Year Plan negotiate for adoption of a set-aside of HOME funds.
- 3. Adoption of 10 percent HOME set-aside in Milwaukee County.

4.9 GENERAL STRATEGY: Develop a Supportive Housing Community Siting Plan

4.9a Proposed Action:

Develop a *Supportive Housing Community Siting Plan* for Milwaukee that will assist in combating zoning barriers and the problematic use of these regulations to oppose development of permanent supportive housing for populations with disabilities including people who are homeless.

The Community Siting Plan will help Milwaukee move beyond its history of Not In My Back Yard (NIMBY) community resistance to supportive housing and into one where such housing is perceived widely as an investment in community stability with mutual benefits for both residents and neighboring communities. This Community Siting Plan will be a tool to be used as an organized response to zoning obstacles which have been identified as the largest local barrier in Milwaukee to the development of supportive housing.

The *Community Siting Plan* will be developed by a working group of local stakeholders convened to research existing zoning codes and make recommendations for siting supported housing in all areas of the City and County. This working group will review research and best practice analysis carried out in conjunction with the development of the 10 Year Plan on zoning strategies. The product will be a written Plan Community Siting Plan with timelines and, if necessary, identified financial resources to publicize it.

4.9b Quantity of Proposed Units of Service: Community Siting Plan will help make possible 126,000 units of permanent supportive housing

4.9c Intended Outcomes:

- Per Year: Homeless people stabilized in 126 new units per year for ten years.
- Over 10 Years: Homeless people stabilized in 1,260 units over ten years

4.9d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
	2010	of service	Capital Costs	\$10,000	\$10,000
	2010			\$10,000	\$10,000
	2012				
	2013				
	2014				
	2015				
	2016				
	2017				
	2018				
	2019				\$10,000
4.9e	Potential Funding Options	Identified/Secure	d:		
	1. Community Advocates Pu				
	2. Fair Housing Agency	•			
	3. Milwaukee Continuum of	Care			

4.9f Responsible Parties:

1. City of Milwaukee Officials

2. County of Milwaukee Officials

3. Community Advocates Public Policy Institute

4.9g First Steps Towards Action Implementation:

- 1. Assess current informal practices in use to assist homeless tenants denied housing.
- 2. Develop a consortium of willing affordable housing providers.
- 3. Create Memorandum of Agreement with mutually agreed upon standards of admission.

Permanent Housing

4.10 GENERAL STRATEGY: Create a Housing Access Partnership for Milwaukee

4.10a Proposed Action:

Create a *Housing Access Partnership for Milwaukee* for reducing housing barriers commonly experienced by people who are homeless when applying to existing publicly assisted housing. The partner-ships will be established between Milwaukee's emergency shelters and a group of willing affordable housing property owners. The Partnership will negotiate adjustments in screening criteria and admissions processes for homeless applicants who have criminal records, poor credit histories, and poor or nonexistent housing histories. In so doing, homeless people will experience more ready and equitable access to the existing inventory of publicly assisted affordable housing.

The partnership will utilize a set of mutually agreed upon methods and incentives to gain the trust and cooperation of participating property owners. These methods may include documentation of tenants' merits as prospective tenants and commitments from shelter providers to offer landlords ongoing sup-port and mediation services in the event conflicts or issues arise. Other methods may include the offer of financial incentives to reinforce security deposits and protect again rent arrears. Outcome data will be tracked to measure the impact of the program on homeless people's housing access.

4.10b Quantity of Proposed Units of Service: Housing Access Partnership will help make possible 126,000 units of permanent supportive housing

4.10c Intended Outcomes:

- Per Year: Homeless people stabilized in 126 new units per year for ten years.
- **Over 10 Years:** Homeless people stabilized in 1,260 units over ten years

4.10d		New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
	2008/09	100	100		Costs incorporat	ted into the
	2010	200	200		Milwaukee Continuum	of Care operations.
	2011	200	200			
	2012	200	200			
	2013	200	200			
	2014	200	200			
	2015	200	200			
	2016	200	200			
	2017	200	200			
	2018	200	200			

4.10e Potential Funding Options Identified/Secured:

- 1. Private Foundation for planning grant
- 2. Fair Housing Agency
- 3. Milwaukee Continuum of Care

4.10f Responsible Parties:

- 1. City of Milwaukee Officials
- 2. County of Milwaukee Officials
- 3. Community Advocates Public Policy Institute

4.10g First Steps Towards Action Implementation:

- 1. Assess current informal practices in use to assist homeless tenants denied housing.
- 2. Develop a consortium of willing affordable housing providers.
- 3. Negotiate methods and incentives to be used to facilitate access.
- 4. Create Memorandum of Agreement with mutually agreed upon standards of admission

Permanent Housing

4.11 GENERAL STRATEGY: Create Additional Homeless Housing

4.11a Proposed Action:

Milwaukee will continually explore new opportunities that become available over the next 10 years to *Create Additional Homeless Housing* that can fill unmet needs in Milwaukee. This strategy is developed as a method of exceeding the 1,260 unit goal set for the *Milwaukee Campaign for New Permanent Supportive Housing*. This Additional Housing strategy will be a response to 10 Year Plan research that identified a need for homeless housing that exceeds 1,260 units.

Adding to the pipeline of homeless housing over the next 10 years will be accomplished by tracking and capitalizing upon other new and untried financing opportunities that are anticipated for the coming years but are not currently secured at the writing of this 10 Year Plan. These resources will be systematically studied and their potential for creating new homeless housing will be capitalized upon as the 10 Year Plan unfolds. Strategies may include:

- a. Use the recently authorized but not yet available new **Section 811 Project Rental Assistance Contract** (PRAC) Demonstration program to create new housing for homeless with disabilities by leveraging new set-asides of supportive housing units in federal Low Income Housing Tax Credit (LIHTC) properties and HOME-funded projects.
- b. Use the not yet capitalized **National Housing Trust Fund** to facilitate development of rental housing for extremely low income households including those that are homeless.
- c. Ensure that the one time opportunity made available through HUD's new **Neighborhood Stabilization Program** is used, in part, in Milwaukee to redevelop foreclosed properties into affordable housing that can be accessed by people who are homeless.
- d. As opportunities arise, apply for **HUD's boutique set-asides of Section 8** vouchers for special populations (VASH, Designated Vouchers, Certain Vouchers, and Family Unification Program Vouchers) and use them to house homeless groups that overlap with the targeted subpopulations.

4.11b Quantity of Proposed Units of Service: Assist in the construction of at least 50 new units per year.

4.11c Intended Outcomes:

- Per Year: Homeless people stabilized in 50 new units per year for ten years.
- Over 10 Years: Homeless people stabilized in 500 units over ten years

4.11d		New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
	2008/09	50		-	Costs incorpora	ted into the
	2010	50			Milwaukee Continuum	of Care operations;
	2011	50			and collaborating institutions and	
	2012	50			partners existing	g resources.
	2013	50				-
	2014	50				
	2015	50				
	2016	50				
	2017	50				
	2018	50	500 units			

4.11e Potential Funding Options Identified/Secured:

- 1. The National Housing Trust Fund
- 2. The Section 811 Program Reauthorization
- 3. Set-side Section 8 voucher programs for special population
- 4. The Neighborhood Stabilization Program I and II

4.11f Responsible Parties:

- 1. Milwaukee Continuum of Care
- 2. Milwaukee Housing Authority
- 3. Local and non-profit developers of affordable and permanent supportive housing
- 4. City of Milwaukee
- 5. County of Milwaukee

4.11g First Steps Towards Action Implementation:

- 1. Track developments related to new financing resources create information clearinghouse
- 2. Disseminate financing opportunities via Milwaukee Continuum of Care.

Permanent Housing

4.12 GENERAL STRATEGY: Build Links with Wisconsin Housing Locator

4.12a Proposed Action:

Milwaukee will build *Links with the Wisconsin Affordable Housing Locator* (WI Front Door Housing) to coordinate it with the *Milwaukee Campaign to House the Chronically Homeless*. These links will ensure developers and owners of new permanent supportive housing created in Milwaukee a ready supply of eligible applicants to fill all vacant units all of the time, The *Links with the Housing Locator* will also ensure that unit turnover rates in permanent supportive housing are consistently fast and efficient.

This project will begin with a review of the Housing Locator to assess its accessibility for homeless households in Milwaukee and its usefulness for potential developers for the *Milwaukee Campaign* and other 10 Year Plan housing initiatives. A partnership will be established between the Housing Locator and the Continuum of Care. Goals will be set for ensuring that all homeless housing and supportive housing in Milwaukee is listed and regularly updated in the locator and that all homeless shelter and service organizations in Milwaukee are regular and ready users.

4.12b Quantity of Proposed Units of Service: Ensure that the WI Front Door Housing Locator will contribute to filling and maintaining full occupancy in 1,260 new units of permanent supportive housing in Milwaukee.

4.12c Intended Outcomes:

- Per Year: Homeless people stabilized in 126 new units per year for ten years.
- Over 10 Years: Homeless people stabilized in 1,260 units over ten years.

4.12d	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
	2008/09			\$5,000 plann	ing grant
	2010				
	2011				
	2012				
	2013				
	2014				
	2015				
	2016				
	2017				
	2018			:	\$5,000
4.12e	Potential Funding Options 1. State of Wisconsin – Fron				

4.12f Responsible Parties:

- 1. 10 Year Plan Implementation Team
- 2. WI Front Door Housing Locator

4.12g First Steps Towards Action Implementation:

- 1. Convene planning sessions between 10 Year Plan implementers and WI Front Door Housing.
- 2. Carry out assessment of locator's strengths and weaknesses relative to the 10 Year Plan.
- 3. Set goals for extending reach of the locator in Milwaukee within the homeless system.
- 4. Advertise the housing locator's capacity to help fill units in permanent supportive housing to potential developers who will participate in the Milwaukee Campaign.

Permanent Housing

4.13 GENERAL STRATEGY: Fully involve the philanthropic community in efforts to create more permanent housing for homeless individuals and families.

4.13a Proposed Action:

Involve the Milwaukee philanthropic community representatives in all phases of the effort to increase permanent housing for homeless people.

Assist in the development of new PSH units in the Milwaukee Campaign by providing gap funding and other support.

Coordinate intention of the 10-Year Plan with key representatives of the philanthropic community, including private and corporate foundations, to direct private resources to leverage planned projects.

4.13b Quantity of Proposed Units of Service: Assist in the construction of 126 new PSH units per year; support the development of policies which will facilitate access to permanent supportive housing for homeless people.

4.13c	New Units of Service Created	Total Units of Service	One Time Capital Costs	Annual Operations and Service Costs	Cumulative Costs
2010	126	126	TBD		TBD
2011	126	252	TBD		TBD
2012	126	378	TBD		TBD
2013	126	504	TBD		TBD
2014	126	630	TBD		TBD
2015	126	756	TBD		TBD
2016	126	882	TBD		TBD
2017	126	1,008	TBD		TBD
2018	126	1,134	TBD		TBD
2019	126	1,260	TBD		TBD

4.13d Potential Funding Options Identified/Secured:

1. State of Wisconsin – Front Door Housing Locator

4.13e Responsible Parties:

1. Milwaukee area private foundations

2. Milwaukee area corporate foundations

4.13f Responsible Parties:

1. Milwaukee Continuum of Care

4.13g First Steps Towards Action Implementation:

1. Review the role of philanthropic interests in other counties in the U.S.

2. Work with representatives of the philanthropic community to develop a coordinated approach to its support for permanent housing.



FOR MORE INFORMATION:

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