VISION

No one should experience homelessness No one should be without a safe, stable place to call home.

GOALS

- Finish the job of ending chronic homelessness in 5 years
- Prevent and end homelessness among Veterans in 5 years
- Prevent and end homelessness for families, youth, and children in 10 years
- Set a path to ending all types of homelessness

"Seven out of ten Americans are just one paycheck away from being homeless"

Pras Michel

INTRODUCTION

The Ithaca/Tompkins Continuum of Care (CoC) has been working to address the issues that face those in our Community who are homeless or who are in danger of becoming homeless. Over the years, this group, composed of County agencies, representatives of local governments, schools, faith communities and businesses have worked together to address the plight of the homeless. This group, working together, have built a shelter, opened a modern drop-in center, established meal sites, clothing closets, and free clinics. We have built permanent and temporary supportive housing and SRO's. We have brought millions of dollars of federal and state money into the community. We have created innovative partnerships to track and support these efforts. CoC members working together developed a model to quickly screen, assist and track county residents who were in danger of losing their housing due to rental and utility arrears. This *Housing First* initiative using a rapid rehousing program model provides ongoing assistance to individuals and families to help them overcome the setbacks in their lives that threaten their ability to maintain stable housing. Our goal is to make sure that these families would not have to face homelessness again.

These efforts have made a difference in our community, shelter usage is down. Inspired by the success of the Housing First program the Ithaca/Tompkins CoC has renewed its commitment to end homelessness in Tompkins County by making sure that every individual and family has the housing they need and the support they deserve. Despite and the current federal, state and local budget deficits and the slow economic recovery we look forward in this 10 Year Plan to building new partnerships as we strive to end all types of homelessness. Our goal is to eliminate chronic homelessness in five years; homelessness for veterans in five years; and homelessness for all families, youth, and children in 10 years.

Outline

Increase Leadership, Collaboration, and Civic Engagement

Objective 1: Provide and promote collaborative leadership at all levels of government and across all sectors to inspire commitment to preventing and ending homelessness

Strategy:

- Inform the public
- Engage state and local leaders in a renewed commitment to prevent and end homelessness in their communities
- Update and implement state/local plans
- Involve those with firsthand experience serving the homeless
- · Adopt model interagency collaborations

Objective 2: Strengthen the capacity of public and private organizations by increasing knowledge about collaboration, homelessness, and successful interventions to prevent and end homelessness Strategy:

- Compile research on best practices
- Coordinate federal technical assistance
- Develop info on special populations
- Increase use of HMIS
- Create a common data standard and uniform performance measures if feasible

Increase Access to Stable and Affordable Housing

Objective 3: Provide affordable housing to people experiencing or most at risk of homelessness Strategy:

- Ensure the preservation of current affordable and supportive housing including public housing.
- Create new housing.
- Provide the support services people need to maintain housing stability.
- Promote housing opportunities in livable communities (more locational choice, accessible transportation, services, etc.)
 homeless singles, families, and youth.
- Develop and maintain good landlord relationships to enhance capacity for utilizing existing private housing market.
- Change state and county program criteria (tax credit projects, CDBG) to award additional points in competitive funding processes for homeless projects in non-impacted areas.

- Increase the support that homeless families receive from the neighborhoods/communities to which they are moving.
- Increase the number of homeless and at-risk youth receiving housing assistance and supports.
- Expand ability to rapidly re-house more single adults, underserved families, and youth.
- Track and effectively communicate vacancies in existing affordable and supportive housing for youth, singles, and families with children in Tompkins County.
- Reduce regulatory barriers to developing a variety of housing options.

Objective 4: *Provide permanent supportive housing to prevent and end chronic homelessness* Strategy:

- Connect people to the services they need to escape homelessness. There should be "no wrong
- Encourage early intervention by door" to accessing services.
- Increase collaboration between the Veterans Administration and community-based agencies to ensure full utilization of federal VA resources

Increase Economic Security

Objective 5: Increase meaningful and sustainable employment for people experiencing or most at risk of homelessness Strategy:

- Job development focus on homelessness
- Work with employers to provide employment opportunities to homeless persons
- Develop and implement strategies to link homeless person with employment
- Improve access to work supports
- Connect homeless or at risk of homelessness persons with available transportation supports in the community including bus passes, gas cards, car sharing, ridesharing and demand response van service
- Connect homeless persons with programs targeted with specialized employment case management services
- Coordinate/integrate employment programs and increase accessibility for homeless persons
- Develop a coordinated referral system to link homeless person with existing employment programs
- Evaluate feasibility for developing Mentorship Program

Objective 6: *Improve access to mainstream programs and services to reduce people's financial vulnerability to homelessness* Strategy:

- Improve access to income supports
- Enhance public info and call center for Veterans
- Set-up task group to review program eligibility and termination criteria of various programs utilized by persons who are homeless or at-risk of homelessness

- Develop financial counseling services to persons who are homeless or at-risk of homeless that provide information and assistance needed to gain work and continue to utilize income supports for which they are eligible
- Prepare for Medicaid expansion

Improve Health and Stability

Objective 7: Integrate primary and behavioral health care services with homeless assistance programs and housing to reduce people's vulnerability to and the impacts of homelessness Strategy:

- Co-locate housing and health care
- Explore implementation of local ACT team to work with persons with disabilities who are at risk of homelessness
- Evaluate developing medical case management (MCM) program modeled after Tompkins County dental case management system to link homeless persons with a medical home
- Evaluate MCM program and medical home model
- Establish medical respite programs
- Increase availability of behavioral health services
- Improve access to child and family services by collaborating with Child Development Council to utilize and further develop
 processes and systems for linking families that are homeless or at-risk with homelessness with mental health services
- Collaborate with Expanding Possibilities Program to utilize and develop processes for linking children and families who are homeless or at-risk of homelessness with mental health services (Expanding Possibilities is a community initiative funded by SAMHSA grant to develop integrated mental health supports within schools)
- Collaborate with Youth Services to utilize and further develop processes and systems for linking children and families who are homeless or at-risk of homelessness with homelessness with youth development programs and activities
- Evaluate effectiveness of medical home model
- Increase availability of behavioral health services
- Establish medical respite programs

Objective 8: Advance health and housing stability for youth aging out of systems such as foster care and juvenile justice Strategy:

- Improve discharge planning
- Improve access for youth
- Promote targeted outreach strategies

Objective 9: Advance health and housing stability for people experiencing homelessness who have frequent contact with hospitals and criminal justice

Strategy:

- Improve discharge planning
- Promote targeted outreach strategies to persons at-risk of needing to use emergency room or hospitalization
- Promote targeted outreach to persons at-risk of engaging in behaviors that lead to jail or prison
- Increase number of jail diversion courts
- Define approaches to reduce criminalization

Retool the Homeless Crisis Response System

Objective 10: Transform homeless services to crisis response systems that prevent homelessness and rapidly return people who experience homelessness to stable housing Strategy:

- Improve outreach to persons living in jungle or living in other places not meant for habitation
- Develop collaborative preventative strategies for areas and populations with high eviction rates
- Use mainstream resources for housing stability
- Improve rapid re-housing of persons placed in shelter
- Improve referral and coordination of homeless prevention programs and resource
- Utilize CoC for continued assessment and development of prevention and rapid re-housing strategies
- Ensure continuity through HPRP services by utilizing Emergency Solutions Grant funding for continued HPRP homelessness prevention and rapid re-housing services
- Ensure continuity through HPRP services by re-tooling Emergency Shelter to serve as a crisis response to homelessness
- Ensure prevention in place-based strategies

INCREASE LEADERSHIP, COLLABORATION, AND CIVIC ENGAGEMENT

OBJECTIVE 1:

Provide and promote collaborative leadership at all levels of government and across all sectors to inspire commitment to preventing and ending homelessness

STRATEGY	TASK	COMMITTEE	TIMELINE
Inform the public	 Increase collaborative efforts with Veterans organizations and local outpatient clinics to develop screening process so homeless veterans can be screened for area services. Service providers will benefit from new levels of VA information and in turn provide outreach to local veterans and to the public. 		
	2. Use the 2-1-1 Call Center, to provide information to service providers, renters, landlords, homeless, and those at-risk of homelessness to help them connect with services.		
	Share Homeless Prevention & Rapid Re-housing partnership's successes and strategies with the community.		
Engage state and local leaders in a renewed	 Encourage VA representatives to attend CoC periodically to build teamwork and improve communication. 		
commitment to prevent and end homelessness in	2. Work with municipalities to develop strategies to deal with chronically homeless individuals who camp.		
their communities.	 Connect with local school systems, and homeless liaisons in school districts to identify and support homeless youth and their families and connect them with services. 		
	4. Share 10 Year Plan at community appropriate community forums.		

STRATEGY	TASK	COMMITTEE	TIMELINE
Update and implement state/local plans	 Work with City, and County to share Federal Plan's priorities to end homelessness and develop strategies for effective implementation in our community. 		
	2. Work with Municipal leaders to incorporate homeless prevention strategies into local comprehensive plans.		
Involve those with firsthand experience serving the homeless	 Connect with faith-based organizations, and other groups who deal with homeless through both advocacy and direct service and identify and coordinate existing efforts and resources. 		
Adopt model interagency collaborations	The Homeless & Housing Task Force will continue to meet to identify emerging issues regarding homelessness or prevention of homelessness.		
	2. The CoC will continue to educate and plan strategies for local need and community coordination.		

OBJECTIVE 2:

Strengthen the capacity of public and private organizations by increasing knowledge about collaboration, homelessness, and successful interventions to prevent and end homelessness

STRATEGY	TASK	COMMITTEE	TIMELINE
Compile research on best practices			
Coordinate federal technical assistance	Identify sources of technical assistance to increase coordination and identify additional resources		
Develop info on special populations	Use data from Learning Web 2011 Youth Survey to community to address wide- range, future youth needs to prevent and eliminate homelessness.		
	2. Share DSS <i>Needs Assessment</i> from Jungle with City and community and strategize to address needs of CH living there.		

STRATEGY	TASK	COMMITTEE	TIMELINE
Increase use of HMIS	Increase participation in HMIS by those who provide services to homeless.		
	2. Use data from quarterly Pulse Count to assess changes in homelessness.		
Create a common data standard and uniform performance			
measures if feasible			

INCREASE ACCESS TO STABLE AND AFFORDABLE HOUSING

OBJECTIVE 3:

Provide affordable housing to people experiencing or most at risk of homelessness

STRATEGY	TASK	COMMITTEE	TIMELINE
Ensure the preservation of			
current affordable and			
supportive housing			
including public housing.			
Create new housing.	Create 744 new "housing opportunities" for youth, singles, and families with children.		
	Work with municipalities to identify housing opportunity sites in Tompkins County.		
	Encourage municipalities to promote higher density affordable and mixed-income housing along their transit corridors.		
	4. Promote new housing in a manner consistent with the City Con Plan to not encourage sprawl.		

STRATEGY	TASK	COMMITTEE	TIMELINE
Provide the support services people need to maintain housing stability.			
Promote housing opportunities in livable communities (more locational choice, accessible transportation, services, etc.) homeless singles, families, and youth.	Address the needs of families in diverse family structures; extended families living together, grandparents with children		
Develop and maintain good landlord relationships to enhance capacity for utilizing existing private housing market.	 Develop a \$50,000 annual Housing Risk Pool and a "point of contact" for landlords. Coordinate efforts with existing tenant education providers to reduce utilization of risk pool. 		
Change state and county program criteria (tax credit projects, CDBG) to award additional points in competitive funding processes for homeless projects in non-impacted areas			
Increase the support that homeless families receive from the neighborhoods/ communities to which they are moving.	 Pilot a family community support program that will provide a family with the support of a local faith community when they move into a neighborhood. Identify a community lead for this project and identify diverse faith communities throughout Tompkins County interested in participating. 		

STRATEGY	TASK	COMMITTEE	TIMELINE
Increase the number of homeless and at-risk youth receiving housing assistance and supports.	Increase case management to serve an additional ? youth per year.		
Expand ability to rapidly re-house more single adults, underserved families, and youth.	Expand Tompkins County's Rapid Re-housing Program.		
Track and effectively communicate vacancies in existing affordable and supportive housing for	Expand on existing housing inventory to develop the most effective tool for connecting people experiencing homelessness to appropriate housing.		
youth, singles, and families with children in Tompkins County.	2. People experiencing homelessness and providers working with them have immediate access to vacancy information for affordable and supportive housing throughout the county.		
Reduce regulatory barriers to developing a variety of housing options.	Request that municipalities reflect in their Comprehensive Plans a commitment to examine their zoning codes and ordinances concerning small units, supportive housing restrictions, SRO housing, etc. to ensure a higher flexibility of housing options.		

Questions

- 1. Hennepin has targets for shelter beds for youth, host homes and rental subsidies do we want to discuss numbers for youth here?
- 2. Hennepin has targets for single adults; 40% new units, 60% existing housing stock and rental subsidies. Expanded use of the Housing First model. 50% of total opportunities will be targeted to long term homeless
- 3. Hennepin has targets for families; 40% new units, 60% scattered sites with Tenant Based Assistance

Objective 4:Provide permanent supportive housing to prevent and end chronic homelessness

STRATEGY	TASK	COMMITTEE	TIMELINE
Connect people to the services they need to escape homelessness.	Support the "Friendship Center" where people experiencing homelessness can connect with multiple services in one location.		
There should be "no wrong door" to accessing services	2. Develop an inventory or "map" of all services available to families with children, unaccompanied youth, and single adults.		
	3. Support the 2-1-1 Call Center, a program of the Human Services Coalition, which will provide information to service providers, renters, landlords, homeless, and those at-risk of homelessness to help them connect with services.		
	4. Identify "System Navigators" to assist families, individuals and youth to obtain appropriate services and benefits and provide ongoing support.		
	5. Increase the availability of drop in services for homeless youth.		
Encourage early intervention by	Increase access to chemical dependency assessments and treatment for youth, singles, and parents with children.		
	2. Provide the option of care for children whose parents need inpatient treatment by developing models for non-punitive options for interim child care.		
Increase collaboration between the Veterans Administration and	Identify veterans at all homeless service and mainstream health locations in order to connect them to veteran specific services.		
community-based agencies to ensure full utilization of federal VA resources	2. Increase collaborative efforts with US Department of Veterans' Affairs and local outpatient clinic to develop screening process so homeless veterans can be screened for eligibility from our local area in which they reside, i.e., employment, housing, healthcare.		

INCREASE ECONOMIC SECURITY

Objective 5:Increase meaningful and sustainable employment for people experiencing or most at risk of homelessness

STRATEGY	TASK	COMMITTEE	TIMELINE
Job development focus on homelessness	Create a priority for homeless persons with the Chamber training funds/Challenge Industries/DSS Transitional Jobs \$)		
	Connect homeless adults with living wage jobs, education and job training.		
Work with employers to provide employment opportunities to homeless persons	Create incentives for employers to hire people experiencing homelessness.		
Develop and implement strategies to link homeless persons with	Discuss work options with homeless persons during initial outreach conversations		
employment	 Link access to housing with access to transportation and work Develop peer support systems for obtaining and maintaining work 		
Improve access to work supports	Develop resources to provide communication technologies to homeless persons seeking employment		
	Develop funds to provide cell phones to homeless persons engaged in seeking employment		
	Provide access to and technical assistance to homeless persons to computers for job search and application		

STRATEGY	TASK	COMMITTEE	TIMELINE
Connect homeless or at risk of homelessness persons with available transportation supports in the community including bus passes, gas cards, car sharing, ridesharing and demand response van service	 Expand outreach by DSS Transportation Case Manager to homeless persons and persons at-risk of homelessness Link homeless persons with travel training program to assist them in utilizing available transportation system 		
Connect homeless persons with programs targeted with specialized employment case management services	 SNAP (Safety Net Assistance Program- funded through NYS OTDA) provides case management to persons with disabilities in the emergency shelter in assisting them with connecting to employment, training programs and applying for disability benefits LIVES II Program (NYS OTDA funded) provides case management to persons with multiple barriers to work in order to assist them in obtaining and retaining employment. Persons who are homeless or at risk of homelessness will be referred to this program Provide training to Housing First and Emergency Housing case managers and other housing assistance providers in Motivational Interviewing and other evidence-based interventions that have been demonstrated to improve engagement in employment and support services Research and develop employment mentorship program for homeless persons (YRS 5-10) 		
Coordinate/integrate employment programs and increase accessibility for homeless persons	 Identify all employment programs homeless persons can potentially be linked with Identify agency/systems barriers that may prevent homeless persons from connecting with employment program Meet with agency stakeholders to discuss strategies for including homeless persons in the program 		

Ithaca/Tompkins Continuum of Care 10-year Plan to End Homelessness (2010 – 2019). Effective October 2011

STRATEGY	TASK	COMMITTEE	TIMELINE
Develop a coordinated referral system to link homeless persons with	Identify a point person at each employment program to be the contact for referral of homeless persons		
existing employment programs	Develop screening tool to identify best match in employment program for homeless persons		
	Develop linkage protocol for connecting persons with identified match for employment program		
	4. Track successful linkage (attend first appt) to employment program		
Evaluate feasibility of developing Mentorship Program	Research successful employment mentorship models for homeless persons		
Trogram	2. Convene a work group to develop mentorship program		
	3. Identify Lead Agency		
	4. Develop policy and procedures for recruiting and training mentors		
	Establish pilot program to provide mentors to small number of homeless persons		

OBJECTIVE 6

Improve access to mainstream programs and services to reduce people's financial vulnerability to homelessness

STRATEGY	TASK	COMMITTEE	TIMELINE
Improve access to income supports	Continue to strengthen collaboration between agencies working with persons who are homeless and at risk of homelessness		
	Provide annual training at H&HTF meeting to case managers working with persons who are homeless and at-risk of homelessness on income and work supports available in the community		
	Provide annual training to not-for-profit agencies on use of DSS MyBenefits website and on-line food stamp application		
	Develop means to assist persons who are homeless or at risk of homelessness with applications for transportation and child care supports		
	Develop website with information on income and work supports for persons who are homeless and at-risk of homelessness		
	6. Develop system for "one-stop" application for various income supports		
	Develop means to assist persons who are homeless or at risk of homelessness with applications for SSI and SSDI		
	Develop means to assist single parents who are homeless or at risk of homelessness with filing child support petitions		
	9. Develop means for better linkage of persons who are homeless or at risk of homelessness with community-based employment supports (Workforce Development, Women's Opportunity Center, Jobs Build, Challenge Industries)		
	Advocate for and develop more resources to support employment and educational services for single adults (currently not eligible for most educational and job skills training programs)		

Ithaca/Tompkins Continuum of Care 10-year Plan to End Homelessness (2010 – 2019). Effective October 2011

STRATEGY	TASK	COMMITTEE	TIMELINE
Enhance public info and call center for Veterans	Develop brochures, posters and educational materials on housing assistance programs available to veterans and their families		
	2. Distribute brochures, posters and educational materials through programs that serve veterans, e.g. local VFW, doctors, hospitals		
	Develop 211 call center information on housing assistance programs for veterans		
Set-up task group to review program eligibility and termination criteria of various programs utilized	Develop chart of eligibility and termination criteria for following programs: Food Stamps, Medicaid, Housing First, Section 8, Child Care, Working Families Transportation		
by persons who are homeless or at-risk of homelessness	2. Develop system for "one-stop" application and re-certification for various income supports for persons who are homeless or at-risk of homelessness		
Develop financial counseling services to persons who are	Information on earning thresholds that enable person to maintain health coverage, housing assistance and other income supports		
homeless or at-risk of homeless that provide information and assistance needed to gain	2. Assistance to persons in identifying work and employment opportunities that enable them to increase their earnings and still maintain other income supports		
work and continue to utilize income supports for which they are eligible	 Assistance to persons in budgeting increased earnings to begin to cover costs for which they currently receive income supports 		
Prepare for Medicaid expansion	Develop brochures, posters and educational materials on new Medicaid eligibility thresholds and guidelines		
	Provide outreach and information to persons who are homeless or at- risk of homeless regarding changes in Medicaid Eligibility		
	Develop services to provide assistance to persons who are homeless or at-risk of homelessness with enrollment in Medicaid		

IMPROVE HEALTH AND STABILITY

Objective 7:

Integrate primary and behavioral health care services with homeless assistance programs and housing to reduce people's vulnerability to and the impacts of homelessness

STRATEGY	TASK	COMMITTEE	TIMELINE
Co-locate housing and			
health care			
Explore implementation of	Research the use of Medicaid funding for ACT Teams		
local ACT team to work with persons with	2. Meet with other counties utilizing ACT (Assertive Community Treatment)		
disabilities who are at risk	teams		
of homelessness	Discuss local adaptations needed for implementation in Tompkins County		
Evaluate developing medical case	recruit providers to serve as medical homes for homeless persons		
management (MCM) program modeled after	assist homeless persons and those at-risk of homelessness in enrolling in Medicaid		
Tompkins County dental case management system	schedule preventive and treatment appointments		
to link homeless persons with a medical home	assist in addressing transportation and other barriers in attending appointments		
Evaluate MCM program and medical home model	track referrals and successful service linkage		
and medical nome model	2. survey providers and clients		
	analyze data to assess effectiveness		

STRATEGY	TASK	COMMITTEE	TIMELINE
Establish medical respite programs			
Increase availability of behavioral health services			
Improve access to child and family services by collaborating with Child Development Council to utilize and further develop processes and systems for linking families that are homeless or at-risk with homelessness with mental health services	 Assist families who are homeless or at-risk of homelessness in accessing Child Development Council (CDC) web-site to identify child development services they can access Develop systems for linking children and families who are homeless or at-risk of homelessness with existing CDC services Support children and their families who are homeless or at-risk of homelessness in working with CDC in utilizing services Collaborate with CDC to identify and develop additional services and supports to children and families who are homeless or at-risk of homelessness 		
Collaborate with Expanding Possibilities Program to utilize and develop processes for linking children and families who are homeless or at-risk of homelessness with mental health services (Expanding Possibilities is a community initiative funded by SAMHSA grant to develop integrated mental health supports within schools)	 Assist families who are homeless or at-risk of homelessness in accessing Mental Health Connects web-site to identify mental health services they can Develop systems for linking children and families who are homeless or at-risk of homelessness with existing Response-To-Intervention (RTI) teams or Student Support Teams within schools Support children and their families who are homeless or at-risk of homelessness in working with schools to utilize Expanding Possibilities mental health linkage protocols Collaborate with CHAMPS and Expanding Possibilities Steering Committee to identify and develop systems for supporting children and families who are homeless or at-risk of homelessness within school 		

Ithaca/Tompkins Continuum of Care 10-year Plan to End Homelessness (2010 – 2019). Effective October 2011

STRATEGY	TASK	COMMITTEE	TIMELINE
Collaborate with Youth Services to utilize and further develop processes and systems for linking children and families who are homeless or at-risk of homelessness with homelessness with youth development programs and activities	 Develop systems for linking children and families who are homeless or at-risk of homelessness with existing Youth Services Programs in the county Support children and their families who are homeless or at-risk of homelessness in working with schools to utilize Youth Services Programs Collaborate with Youth Services to identify and develop systems for supporting with children and families who are homeless or at-risk of homelessness within school 		
Evaluate effectiveness of medical home model	Based on widely available research, IFC staff and volunteers would develop a plan to work with another human services organization to link medical access to home settinghowever home is defined.		
Increase availability of behavioral health services	Explore possibility of offering modest short-term program therapy for IFC patients under specific and limited circumstances. IFC has received cooperation from local mental health organizations in the early stages of plan and, would eagerly work with any or all of the same organizations to assure better mental health care to area residents		
Establish medical respite programs			

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Objective 8:

Advance health and housing stability for youth aging out of systems such as foster care and juvenile justice

STRATEGY	TASK	COMMITTEE	TIMELINE
Improve discharge planning	The Learning Web Youth Outreach Program will provide landlord/tenant dispute mediation to unaccompanied youth and young adults.		
Improve access for youth			
Promote targeted outreach strategies	 The Learning Web, Ithaca/Tompkins County CoC, County Youth Services, and Cornell's Family Life Development Center (FLDC) will partner to conduct new 2011 Independent Living Survey Project using an innovative methodology that incorporates youth voice into the research process to provide current picture of homeless youth and to develop plan to prevent/eliminate youth homelessness. Tompkins County Runaway and Homeless Youth Coordinator will ensure that all homeless children are enrolled in school, have access to transportation to school and are connected to appropriate services within the community, as well as transportation for students in temporary housing who choose to attend their school of origin. RHY Coordinator convenes monthly meetings of the runaway and Homeless Youth Providers Network in order to maintain communication between services: Tompkins County DSS, County Probation, Teen Pregnancy/Parenting, Red Cross Emergency Shelter, Bridges for Youth and Families (Interim Host Home Program) and Learning Web Youth Outreach (TILP and outreach services). 		

Objective 9:

Advance health and housing stability for people experiencing homelessness who have frequent contact with hospitals and criminal justice.

STRAGEGY	TASK	COMMITTEE	TIMELINE
Improve discharge planning	 Collaborate with hospital and jail staff in developing discharge planning procedures to address housing needs Identify current gaps in referral and linkage systems between hospital and housing assistance programs Develop improved referral and linkage systems with housing assistance programs upon discharge from hospital 		
	Identify current gaps in referral and linkage systems between jail and housing assistance programs		
	Develop improved referral and linkage systems with housing assistance programs upon discharge from jail		
Promote targeted outreach strategies to persons at-risk of needing to use emergency room or hospitalization	 Identify during Emergency Shelter and Housing First intakes persons who are homeless who have medical histories that may put them at-risk of needing to use emergency room or hospitalization Link these persons with various medical and health service supports such as Free Clinic and Medicaid Case Manager Work with these persons to develop plans to address medical issues to avoid if possible the need for using the emergency room or hospitalization 		

Ithaca/Tompkins Continuum of Care 10-year Plan to End Homelessness (2010 – 2019). Effective October 2011

STRATEGY	TASK	COMMITTEE	TIMELINE
Promote targeted outreach to persons atrisk of engaging in behaviors that lead to jail or prison	 Identify during Emergency Shelter and Housing First intakes persons who are homeless who have legal histories that may put them at-risk engaging in behaviors that lead to jail or prison Link these persons services and supports that reduce their risk of engaging in anti-social behaviors Work with these persons to develop plans to address circumstances and behaviors that put them at risk of engaging in anti-social behaviors 	COMMITTEE	TIMELINE
Increase number of jail diversion courts	Provide information and outreach regarding housing assistance to Drug Courts and Day Reporting Develop improved referral and linkage system from Drug Courts and Day Reporting to housing assistance programs		
Define approaches to reduce criminalization	 Develop a work group to research different models that have been successful in implementing constructive approach to work with street homelessness. Models to explore include: (Washington DC business community funded day center for street homeless; Portland OR funding for immediate placement of street homeless in permanent housing; Fort Lauderdale FL - street outreach team; and San Diego CA – Homeless Court Program) 		
	 Identify model that can likely be adapted and implemented for use in Tompkins County Meet with community stakeholders and develop plan for pilot program 		
	Implement pilot program along with means for data collection and program evaluation		
	Review effectiveness of model reducing street homelessness and make adjustments in program		

Objective 10:

RETOOL THE HOMELESS CRISIS RESPONSE SYSTEM

Transform homeless services to crisis response systems that prevent homelessness and rapidly return people who experience homelessness to stable housing

STRATEGY	TASK	COMMITTEE	TIMELINE
Improve outreach to persons living in jungle or	Develop outreach approaches and services based on survey results		
living in other places not meant for habitation	Explore development of housing options for persons living in jungle and street based on survey results		
meant for napitation	3. The Learning Web, Ithaca/Tompkins County CoC, County Youth Services, and Cornell's Family Life Development Center (FLDC) will partner to conduct a new Independent Living Survey Project III (ILS3) in 2011, 2015, and 2019 to determine a current count of homeless youth and young adults, and identify barriers to participation and gaps in services to homeless youth and young adults. Data from the surveys will be used to re-examine crisis responses and improve protocols as appropriate.		
	4. The CoC Youth Sub-committee, in conjunction with other homeless youth service providers, will explore the expansion of housing options for homeless youth and young adults living in the street and in the "Jungle" (wooded area of the City of Ithaca where homeless people have created an encampment) based on ILS3 survey results.		
	5. Expand The Learning Web's Youth Outreach Program drop-in services to expand the number of youth who can be served and provide expanded services that address laundry, showers, and other basic needs. The group will review referral systems and improve access for youth who are experiencing a housing crisis.		
	6. Develop and administer survey/needs assessment for persons living in jungle and street with regard to housing and service needs		

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STRATEGY	TASK	COMMITTEE	TIMELINE
Develop collaborative prevention strategies for	Identify areas/rental with high eviction and/or turnover		
areas and populations with high eviction rates	2. Identify Households with history of multiple evictions		
g v vv v	Develop housing stability plans to assist these households in stabilizing housing		
Use mainstream resources for housing stability	Housing First and Emergency Housing case managers will continue to link homeless persons and persons at risk of homelessness with mainstream benefits through DSS to improve housing stability including: Public Assistance, Food Stamps, Medicaid and HEAP		
	2. Housing First and Emergency Housing case managers will continue to assist homeless persons with disabilities in a applying for SSI and SSD.		
	Housing First and Emergency Housing case managers will continue to assist homeless persons in a applying for Section 8 vouchers		
	4. Tompkins DSS will work with NYS Office of Temporary and Disability Assistance to provide a shelter allowance supplement to single individuals receiving public assistance that enables individuals access to a larger number rental units in the county.		
	5. Tompkins County DSS Adult Protective Services and Mental Health will utilize representative payee services to ensure housing stability for persons with disabilities.		
Improve rapid re-housing of persons placed in shelter	Identify barriers to rapid re-housing of persons who enter emergency shelter		
	2. Develop strategies for addressing barriers to rapid re-housing		
	Continue outreach to landlords to identify affordable units to rapid rehousing		

Ithaca/Tompkins Continuum of Care 10-year Plan to End Homelessness (2010 – 2019). Effective October 2011

STRATEGY	TASK	COMMITTEE	TIMELINE
Improve referral and coordination of homelessness prevention	Identify all homeless prevention programs and resources in the community		
programs and resources	Identify a point person at each prevention program to be the contact for referral of homeless persons		
	3. Improve outreach to persons at imminent risk and risk of homelessness		
	4. Develop screening tool to identify best match in persons at imminent risk and risk of homelessness with available programs and resources for homelessness prevention		
	Develop linkage protocol for connecting persons with identified match for homelessness prevention program		
	6. Track successful linkage (attend first appt) to prevention program		
Utilize CoC for continued assessment and development of	Quarterly review of outcomes for rapid re-housing and prevention programs at CoC meetings		
prevention and rapid re- housing strategies	2. Identify systems barriers to effective rapid re-housing and homelessness prevention		
	Develop strategies for addressing systems barriers to effective rapid re- housing and prevention		
Ensure continuity through HPRP services by utilizing Emergency Solutions	Evaluate HPRP program and services outcomes to identify systems and approaches that were most successful		
Grant funding for continued HPRP homelessness prevention	Identify systems and service changes that need to be made to improve homelessness prevention and rapid re-housing outcomes		
and rapid re-housing services	 Prioritize services and programs to be funded with ESG funds to ensure continuity of successful HPRP services and programs for homelessness prevention and rapid re-housing 		

STRATEGY	TASK	COMMITTEE	TIMELINE
Ensure continuity through HPRP services by re-tooling Emergency Shelter to serve as a crisis	Utilize Emergency Solutions Grant for continue funding of rapid re- housing approach to maintain low numbers of emergency shelter beds needed		
response to homelessness	Work with Emergency Shelter to convert unused emergency shelter beds to SROs for permanent housing for homeless persons		
	Explore options for converting Red Cross Court Street property (previously 13 shelter beds) to SROs for permanent homeless persons		
	4. Create four (4) short term emergency shelter beds for youth and young adults ages 16-25, in a separate facility from emergency shelter beds reserved for homeless persons aged 26 and older.		
Ensure prevention in place-based strategies			

Objective 10:

DEFINING HOMELESSNESS

DEFINITIONS

At Risk of Homelessness

In general, the term `at risk of homelessness' means, with respect to an individual or family, that the individual or family—

- has income below 30 percent of median income for the geographic area;
- has insufficient resources immediately available to attain housing stability; and
- has moved frequently because of economic reasons;
 - o is living in the home of another because of economic hardship;
 - has been notified that their right to occupy their current housing or living situation will be terminated:
 - o lives in a hotel or motel;
 - lives in severely overcrowded housing;
 - o is exiting an institution; or
 - o therwise lives in housing that has characteristics associated with instability and an increased risk of homelessness.

Such term includes all families with children and youth defined as homeless under other Federal statutes.

Chronically Homeless

In general, the term `chronically homeless' means, with respect to an individual or family, that the individual or family—

- is homeless and lives or resides in a place not meant for human habitation, a safe haven, or in an emergency shelter;
- has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least 4 separate occasions in the last 3 years; and
- has an adult head of household (or a minor head of household if no adult is present in the household) with a diagnosable substance use
 disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental
 Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002)), post traumatic stress disorder, cognitive impairments resulting from
 a brain injury, or chronic physical illness or disability, including the co-occurrence of 2 or more of those conditions.

Rule of Construction

A person who currently lives or resides in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital or other similar facility, and has resided there for fewer than 90 days shall be considered chronically homeless if such person met all of the requirements described in subparagraph (A) prior to entering that facility.

The McKinney-Vento Homeless Assistance Act As amended by S. 896 The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009

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