

m e m o r a n d u m

To: Jeremy
Fr: Elisabeth
Dt: 10/5/94
Re: Working Group Meetings and Discussion with Census

I spoke with Larry Rickards of the Center for Mental Health Services (301)443-3706. Coordinators have been named for the sub-groups of the Mental Health and Substance Abuse Working Group:

Integrating Housing and Services - **Mark Johnston** (HUD)
202-708-4300

Gaining Access to and Use of Mainstream Resources-
David Mactas (HHS)
Dir. Cntr for Substance
Abuse Treatment
301-443-5700

Improving Discharge Planning - **Larry Rickards**
Cntr for MH Services
301-443-3706

Larry will be calling me to discuss upcoming meetings and is sending us some additional information.

Should I call the coordinators listed above?

Also, after the 9/28 inter-agency mtg, Marsha and I met with the Census representatives. Below are some of the points discussed:

- * Can we get Marty Burke to make a call to say we need this;
- * Leading researchers support this - let's identify them;
- * Can the analysis go to someone else?
- * Is there a way to enter a partnership agreement between the Census and the Urban Institute? Since the Census contracts to Marty - there is theoretically already a contract-- Census reps will check this out;
- * HOW DO WE MAKE DATA CONSISTENT ACROSS THE AGENCIES?
- * Marsha was planning to meet last Friday to begin discussing OPTIONS paper;
- * County welfare offices are not currently included as Census data collection point - Marsha strongly suggested this.

Interagency Council on the Homeless

M E M O R A N D U M

TO: Policy Group Members and Staff Contacts
McKinney Program Managers

FROM: Marsha A. Martin, D.S.W.
Executive Director *MA*

DATE: September 30, 1994

SUBJECT: Federal Plan Implementation Actions
and Work Group Activities

=====

I am pleased to report implementation of the Federal Plan, Priority: Home1 is fully underway. The six work groups (as described in the implementation memorandum distributed and approved at the August 9 Full Council Meeting) have met and are in the process of identifying agency action steps to recommend to the full Policy Group for review and comment. The October 12 Policy Group Meeting will be dedicated to a detailed discussion of implementation activities. In addition to a review of the expectations for the work groups, agency commitments and next steps will be discussed.

It is very important that you attend this meeting and bring with you names of individuals from within your agency to participate in work groups who work with both McKinney/non-McKinney homeless programs, mainstream programs and those who are involved with policy development and program evaluation.

For example, during our Access to Mainstream Programs Work group meeting of September 29, it became clear that a broader mix of individuals from your respective agencies is necessary in order to produce the depth of discussion and agency action steps recommended in Priority: Home1. Lead agencies were identified to coordinate each of the six sub-committees identified at the June 29 Access to Mainstream Work Group meeting: Income Support-HHS; Family Support-HHS; Veterans Benefits-VA; Adult Ed., Employment and Training-Labor; Early Childhood, Ele/Secondary Ed-ED; and Housing-HUD. In order for those sub-committees to be effective, they will need to take advantage of a wide range of expertise from within your agency.

Interagency Council address the issue of the appropriateness of such a survey.

Policy Group members discussed the issue of a national survey on homelessness. Jim Hoben (HUD) described two upcoming research projects that HUD is supporting that would obtain detailed information on the relationship between poverty, residential instability and homelessness in several cities. Representatives from other agencies mentioned projects that might contribute additional important information about the population.

It was agreed that Marsha Martin would convene a meeting in the very near future to continue discussion about the best ways of obtaining additional information on the characteristics of homeless people to guide policy decisions.

2. Federal Plan Workgroups--Update

Marsha Martin distributed a revised draft chart detailing responsibilities for implementation of the Federal Plan to Break the Cycle of Homelessness. The chart lists the recommendations of the plan, the work group responsible for overseeing implementation of each recommendation, the current status of the issue, and progress expected by December of 1994. By Friday, September 23, the Policy Group member from the lead agency responsible for each recommendation is expected to identify the specific individual or individuals with primary responsibility for coordinating the implementation of that recommendation. These names should be submitted to Marsha Martin.

Jerry Britten (HHS) gave an update on the Substance Abuse/Mental Health Working Group. The workgroup will be co-chaired by Dr. Alan Leshner, Director of the National Institute on Drug Abuse, and Dr. Bernard Arons, Director of the Center for Mental Health Services. The first meeting of the group is scheduled for Monday, September 26. Jerry Britten also reported on progress of the Health Care and Nutrition Services Working Group, which has already met and will continue to meet around developing new approaches and intervention strategies as recommended in the Federal Plan.

John Pentecost (FmHA) and Marsha Martin indicated that plans were proceeding on schedule for a series of conferences on rural homelessness. Additional details will be provided later.

3. Program Activities

Jacquie Lawing (HUD) noted that HUD is still optimistic that

Congress will enact HUD's new homeless assistance grant program. In response to a question, she indicated that HUD will be providing a wide range of assistance in connection with the new program and that HUD is working with Fannie Mae to leverage additional resources for housing. It was agreed that HUD would consider special technical assistance around developing a continuum of care as it relates to health care, homeless veterans, homeless people in rural areas, and other groups.

Marsha Martin noted that the Interagency Council's Surplus Property Task Force met several times over the past month and forwarded its recommendations to Senate staff. A legislative proposal is being drafted to balance the needs of the homeless with the broader economic development needs of communities in which military bases are being closed or realigned. Marsha Martin also called attention to ICH's new publication on Title V and Surplus Personal Property that was in the packet distributed at the meeting. She noted that ICH staff will be developing additional information materials on other Federal property programs (e.g. foreclosed homes) to update the Interagency Council's 1991 publication on property programs.

4. Next Meeting

The meeting of the Policy Group is scheduled for Wednesday, October 12, 1994 at 2:00 p.m. in the HUD Building, 451 Seventh Street, S.W., Washington, D.C. A notice containing the draft agenda and room number for the meeting will be faxed to you before the meeting.

Interagency Council on the Homeless

September 30, 1994

MEMORANDUM TO: POLICY GROUP MEMBERS AND STAFF CONTACTS

FROM: MARSHA MARTIN, D.S.W.
EXECUTIVE DIRECTOR

SUBJECT: FOLLOW-UP ACTIVITIES FOR THE SEPTEMBER 20
POLICY GROUP MEETING

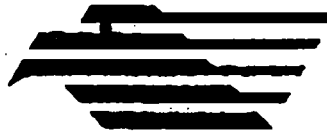
This memorandum summarizes key matters discussed at the September 20 Policy Group meeting and identifies required follow-up activities.

Marsha Martin opened the meeting and asked all in attendance to introduce themselves. Following introductions, the following issues were discussed:

1. 1995 Housing and Population Census Test Plans

Paula Schneider from the Bureau of the Census discussed new procedures that are being tested for including people who are homeless in the Year 2000 Census count. In the 1995 Census Test, the Bureau will conduct a "Service-Based Enumeration (SBE)" process in which census workers will be dispatched to locations that provide services to homeless or needy people, such as shelters and soup kitchens. Census workers will ask clients at these locations to provide basic information such as name, date of birth, sex, race, and whether they are of Hispanic origin. The census bureau will also be conducting operations to count people in housing units, correctional institutions, mental hospitals, nursing facilities and other group quarters and will work to ensure that individuals are not counted more than once.

Ms. Schneider emphasized that the purpose of these enumeration procedures will be to include people who are homeless in the overall census count, but that the methods will not allow the census bureau to produce a definitive count of the homeless, or to provide detailed information on the characteristics of the homeless population, service usage, or other information specific to the issues of homelessness. She said that in order to obtain additional information about the homeless population, the Federal government would need to conduct a survey specifically designed for that purpose. She recommended that the



Interagency Council on the Homeless

M E M O R A N D U M

TO: POLICY GROUP MEMBERS AND STAFF CONTACTS; PROGRAM MANAGERS

FROM: Marsha A. Martin, D.S.W. 
Executive Director

DATE: September 30, 1994

SUBJECT: October 13 Meeting of Federal Plan Working Group on Homelessness Prevention

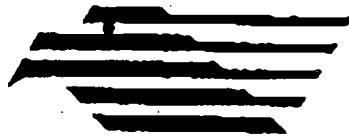
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Please attend a meeting of the Federal Plan Working Group on Homelessness Prevention on Thursday, October 13, 1994 at 2:30 p.m. in Room 345 at FEMA Headquarters, 500 C Street, S.W., Washington, D.C.

This is the second meeting of this Working Group, whose purpose is to develop action steps for addressing the commitments in the Federal Plan that relate to homelessness prevention. FEMA and USDA co-chair the Group. Attached for your information are notes from the first meeting.

I look forward to seeing you on October 13. Please let me know if you cannot attend or send a representative.

Attachment



Interagency Council on the Homeless

MEMORANDUM

TO: Homelessness Prevention Working Group

FROM: Marsha A. Martin, DSW
Executive Director

DATE: June 20, 1994

SUBJECT: Meeting June 13, 1994

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On June 13, we met to discuss the homelessness prevention working group objectives as part of the larger goal of establishing an implementation plan for Priority: Home! As stated in the new Federal plan Priority: Home!, "prevention must become the equal of remediation in policy planning" if we are to have an impact on the issue of homelessness.

Possible directions for our efforts included:

- o Prevention of repeated periods of homelessness by the same individuals and families.
- o Revision of mainstream programs so that they serve the *at risk* individuals who are not currently being served.
- o Further identification and study of the feeders of homelessness.
- o Early identification of *at risk* persons.

The discussion focused on early identification of individuals and families at risk of homelessness. Questions emerged regarding what triggers homelessness, and the directions we should take. If we can determine that there are only a few triggers, perhaps then we can look at them as aids to early identification. However, if each of the 7 million recently homeless people (over the last half of the 1980s) had different triggers it would not be prudent to explore this avenue since it is entirely too diverse.

At the next meeting we should close the above discussion and work it into the context of a matrix, identifying the appropriate agencies, their tasks and responsibilities; benchmarks and milestones. Attached is a model matrix.

To: Jeremy
Fr: Elisabeth
Dt: 9/28/94
Re: Working Group Meetings

- * Office of Drug Control Policy representatives came to substance abuse/ mental health meeting (and were active in discussion)
- * Larry Rickards of Center for Mental Health Services, 301-443-3706 is coordinating meeting planning process - I left him a message and will f/u on Monday
- * Bernard Arons and Alan Leshner will be co-chairing the Mental Health and Substance Abuse working group which will have 3 subcommittees - integrating housing and services, improving d/c planning, and increasing access to and use of mainstream services
- * Mainstream working group will meet tomorrow at 10am when general assignments will be reiterated, names will then be confirmed
- * Status reports by Nov. policy mtg seems like a reasonable goal -- the next mtg is Oct. 12 and reports will not be ready as groups are just beginning to meet

MENTAL HEALTH AND SUBSTANCE ABUSE WORKING GROUP

September 26, 1994

AGENDA

- 1:30 Welcome and Introductions
Bernard S. Arons, M.D., Director
Center for Mental Health Services
Alan I. Leshner, Ph.D., Director
National Institute on Drug Abuse
- 2:00 Priority: Home! -- Overview of the Federal Plan & Review of Policy Areas
Marsha A. Martin, D.S.W., Executive Director
Interagency Council on the Homeless
- 2:20 Examples of potential actions steps in each policy area
Larry Rickards, Ph.D., Center for Mental Health Services
- 1) Integrating housing and services
what is a continuum here, link plans
 - 2) Improving discharge planning (jails, prisons, state hospitals, & other institutional settings) and linkage of persons with housing resources after discharge
Support model contract
 - 3) Increasing access to and use of mainstream resources
- 2:40 Identification of additional potential action steps
- 3:00 Identification of subgroups to develop action recommendations, subgroup representation, and identification of subgroup chairs
- 3:20 Calendar for subsequent meetings
Identification of additional working group members
- 3:30 Adjourn

MENTAL HEALTH AND SUBSTANCE ABUSE WORK GROUP

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Attachment 1

PRIORITY: HOME! THE FEDERAL PLAN TO BREAK THE CYCLE OF HOMELESSNESS

RECOMMENDATIONS

The following are mental health and substance abuse recommendations from *Priority: Home!* relevant to the agenda policy areas. Page numbers refer to the text.

Integrating Housing and Services

- Work with states and communities to develop integrated systems of support services and housing. Develop incentives, requirements, and ways to assist them to address effectively the needs of mentally ill persons who are homeless or at risk for becoming homeless (p. 77).
- Explore ways to link currently required state mental health plans (which must include a component for outreach and services for homeless people with serious mental illness), health plans under the proposed Health Security Act, the plan required under the PATH program, the plan for the substance abuse block grant, and the comprehensive plan that will be required by HUD. Such coordination should be required by the continuum-of-care plan to receive McKinney and other HUD funds. These plans and the programs they relate to must be coordinated and address treatment, support services, and housing for persons with mental illness, especially those who are homeless and those who suffer from both mental illness and substance abuse disorders (p. 77).
- HUD will analyze the successes of some communities at developing SRO housing, identifying ways to create incentives for private developers to reinvest in this type of housing, and ways to develop linkages with support services.
- Develop more integrated systems of housing and services (p. 77-79):
 - For a more widespread effort, use as building blocks HHS's ACCESS Initiative--which made grants in 1993 to help selected communities in nine states integrate housing and care systems--along with elements of VA's programs that assist homeless veterans with mental illness.
 - HHS, VA, and HUD will coordinate Federal assistance with state and local governmental health, mental health, and housing agencies to enhance state and community support by developing a continuum of care that integrates housing and services. To do so, encourage states and communities to do the following:
 - Effectively target mental health and housing resources to the most needy, such as homeless persons with mental illnesses or dual diagnoses.

- Work closely with other key providers of services, including substance abuse treatment providers and providers in VA's mental health-care system.
- Use the experience of the states and communities that have developed integrated systems, and of Federal programs such as HHS demonstration programs and VA's Health Care for Homeless Veterans (HCHV) program.
- Link mental health and substance abuse treatment activities.
- Collaborate with local public and private housing providers and developers to establish joint initiatives and, in particular, to encourage the development of affordable Single Room Occupancy housing.
- Consider the unique and severe needs of homeless children with developmental disabilities and serious emotional disturbances.

Improving Discharge Planning

- States and localities must review and strengthen discharge and aftercare planning strategies to prevent subsequent homelessness with appropriate linkages between housing and community-based care. The Federal agencies will work with them on this (p. 77-79).
- HUD, HHS, VA, and DOJ will establish a discharge planning working group to identify effective discharge-planning strategies for hospitals and community-based treatment facilities; to ensure continuity of care; and to explore how Federal, state, and local incentives that would encourage Federally funded hospitals, prisons, nursing homes, community-based housing providers, and other institutions to develop the necessary linkages to avoid discharging people who do not have a place to live (p. 77-79).
- VA will work with the discharge planning group and others to develop new strategies to address these problems--including the development of new partnerships with other public and private agencies and organizations (p. 77-79).

Increasing Access and Use of Mainstream Services

- Relevant Federal agencies will assess how their mainstream programs are serving this population and identify ways to improve access and linkages (p. 77-79).
- Explore alternative ways to focus state mental health efforts on the most needy, including more targeting of Federal funds, tighter planning requirements, technical assistance, etc (p.77).

- Implement the following ongoing or planned actions (p. 79):
 - Coverage for inpatient treatment, intensive treatment in nonresidential community settings and outpatient treatment for substance abuse in the Health Security Act.
 - The Crime Bill
 - The President's FY 1995 budget proposal to appropriate \$355 million for an initiative to reduce hard-core substance abuse.
- Ensure that the approximately \$5.4 billion the Federal government provides to states and communities for drug abuse prevention and treatment is coordinated and targeted effectively to serve hard-core users and difficult-to-reach populations, such as the homeless (p. 80).
- Federal agencies will work with states and communities to develop effective treatment systems linked with housing and other community-based rehabilitative services. Special attention will be focused on innovative approaches to help people stay in treatment, as well as on education, training, and employment programs that support the transition to community living. As part of this systems development, the Federal government will work creatively to accomplish the following (p.80):
 - Ensure that providers of treatment and care address the needs of homeless people with co-occurring disorders regardless of their point of entry: substance abuse or mental health.
 - Integrate treatment for persons with severe addictions into primary and managed health-care systems.
- The Federal government should work with service and treatment providers to increase knowledge of the substance abusing population and of effective treatment intervention strategies. This population's diversity requires a variety of approaches (p.80).
- VA should continue to inform homeless service organizations that VA can provide substance abuse treatment to eligible veterans (p.80).

9/28/94 Program EVAL Mtg

① ICH pull together studies, results,
findings of all agency programs
for local use in planning

- Integrated info report
- Annual?

② NATL Sewer CHANS / SERVICES

**REPORTS AND STUDIES
OF FEDERAL HOMELESS
PROGRAMS**

DRAFT

DATE: 01/26/93

PROGRAM	TYPE OF REPORT	SPONSOR	EVALUATOR	COMMENTS	STATUS
1. DEPT. OF AGRICULTURE <i>Jill Randell</i> First Year Homeless Shelter Demonstration Project Food Stamp Program (703) 305-1112	Y A	USDA (FNS) USDA	USDA IND1	1st year study completed 1992 2nd year study in process Completed, 1987	Due: Mid 1993 -
2. DEPT. OF EDUCATION Adult Education <i>Jim Parker</i> " 205-5499 " Homeless Children and Youth <i>Francine Vinson</i> (Monitoring Summary of State Deficiencies) 401-0728	C C C Y	ED GAO ED ED	ED GAO ED ED	Completed 1st yr review, 1989 Completed 1991 Completed 2nd & 3rd yr, 1992 *Reports to Congress, 1991 & 92	Due: 1993
3. DEPT. OF HEALTH AND HUMAN SERVICES Homeless Families Support Demo. <i>See list</i> Health Care For the Homeless Program * NIAAA - Community Demonstration Grant Projects for Alcohol and Drug Abuse Treatment NIMH - Community Mental Health Services Demonstration Emergency Community Services Homeless Program Mental Health Services for the Homeless Block Grant/PATH HeadStart Homeless Study	Y Y Y Y C - C Y	HHS HHS HHS HHS HHS - HHS HHS	HHS HHS HHS HHS HHS - HHS IND/IND8	First Report in process *Completed 1989, 91 & 92 Completed 1990 & 92 Completed 1991 (For FY 89 & 90) In process - Completed, 1990 & 91 In process	Due: 1996 Due: 1993 Due: 1993 Due: 1993 Due: 1993 - Due: 1993 Due: March 1993
4. FEDERAL EMERGENCY MANAGEMENT AGENCY Emergency Food and Shelter Program " <i>Carol Coleman</i> " 646-3107	A C C	GAO FEMA FEMA	GAO IND1 IG	Completed, 1987, 89 & 92 In process Completed, 1992	- Due: 1993 -
5. DEPT. OF HOUSING AND URBAN DEVELOPMENT SAFAH <i>Jim Hoben</i> " 708-0574 Emergency Shelter Grants Permanent Housing for the Handicapped Transitional Housing/Supportive Housing Demo.	A C/I C/I C/I C/I	GAO HUD HUD HUD HUD	GAO IND1 IND2/IND4 IND3/IND4 IND3/IND4	Completed, 1989 & 92 In process In process In process In process	- Due: Dec 1992 Due: 1992 Due: 1993 Due: 1993

Note: All Contacts are on 202 area code unless otherwise indicated

**REPORTS AND STUDIES
OF FEDERAL HOMELESS
PROGRAMS**

DATE: 01/26/93

	PROGRAM	TYPE OF REPORT	SPONSOR	EVALUATOR	COMMENTS	STATUS
5b.	DEPT. OF HUD (Continued)					
	Shelter & Care	C/I	HUD	IND2	In process	Due: 1994
	Section 8 Moderate Rehabilitation SRO	A	GAO	GAO	Completed 1989	Due: 1993
	"	C	HUD	HUD	Completed 1990	-
	"	A	HUD	IG	In process	Due: 1992
6.	DEPT. OF LABOR					
	Job Training for the Homeless Demonstration	C	DOL	DOL	Completed, 1990	Due: 1993
	" <i>Lus Morrison 219-7674</i>	A	DOL	GAO	*In process	Due: 1993
	Homeless Veterans Reintegration Project	C	DOL	IG	Completed, 1990	-
	" <i>Eileen Connors 219-9110</i>	A	DOL	IND5	Completed, 1992	Update due: 1993
7.	VETERANS ADMINISTRATION					
	Homeless Chronically Mentally Ill Veterans	Y/A	VA	VA	Completed 1988 thru 91	Due: 1992
	Domiciliary Care for Homeless Veterans <i>Eric Lindbloom</i>	Y/A	VA	VA	"	Due: 1992
	Social Security Administration/ Veterans	C	VA	IND6	In process	Due: 1993
	Administration Joint Outreach Project <i>535-7311</i>					
8.	DEPT. OF TRANSPORTATION					
	Transit Center Outreach Demonstration Program	I	DOT	IND7	Summary of reports from Individual Grantees	Due: 1993
	<i>Betty Jackson 366-170</i>					

I = Program Impact

A = Program Administration

C = Combination Impact/Administration

O = Other

Y = Annual Report

GAO = General Accounting Office

*** = Congressionally Mandated Report**

IND = Independent Contractor

IND1 = Urban Institute

IND2 = ABT Associates

IND3 = Westat

IND4 = Aspen Systems

IND5 = TATC

IND6 = VA Northeast Program Evaluation Center

IND7 = Charles River Associates

IND8 = Pelavin Associates

SURVEY OF CHARACTERISTICS OF HOMELESS PERSONS USING SERVICES

BACKGROUND.

Over the past several years, the Interagency Council on the Homeless developed a proposed survey to identify characteristics of homeless persons using services. By providing better information on homeless persons and how they became so, this would allow agencies and the Administration to better target services. It would also help several agencies (VA, Agriculture, Education) meet Congressional mandates to provide data. The council has worked with Census to develop the survey. The survey instrument is ready. To field the pre-test this winter and the survey itself in 1995, we need to give Census a go-ahead very soon.

ISSUES

1. Whether to Proceed. There are several options:

1. Don't do the survey due to difficulty in resolving the numbers issue and/or lack of funds.
2. Encourage others (states, VA service units, etc.) to undertake surveys.
3. Have each Federal agency gather the data it needs.
4. Undertake a survey with a smaller sampling of geographic areas.
5. Do the national survey as proposed.

Interagency Council Policy Group recommends option 5, although "official" HUD member was absent.

2. Funding. The original estimates were \$335,000 for the pre-test and \$3.5 million for the full survey (with the rural component). Additional funds would be required for analysis.

- Because of increased start-up costs, the estimated cost of the pre-test is now \$375,000. [Depending on where the pre-test is conducted, additional funds may be required to cover the Federal locality pay increase.] HHS has provided \$150,000, USDA provided \$93,000, Ed--\$40,000, FEMA--\$20,000, VA--\$12,000, and Labor--\$10,000. Education's funds could not be carried over to FY 1994 and were returned. The pre-test would require \$20K from Education and an additional \$50K. We can handle this.
- Census estimates that the cost of the full survey would remain the same at \$3.5 million, plus the cost of analysis, would need to be in the FY 1995 budget.
- Options for funding are--
 - a. Fully fund the survey in the FY 1995 budget of the Interagency Council.
 - b. Fully fund the survey in the HUD-VA appropriation for FY 1995.

- c. Each agency provides funds from discretionary dollars or taps of existing programs.
- d. Other

3. Presentation of Results. Several steps can be taken to minimize use of the survey by the public and interest groups to extrapolate a national estimate of numbers of homeless:

- a. Change the title of the survey: "Survey of Characteristics of Homeless Persons Using Services."
- b. Do not issue Federal homeless number. Focus on characteristics of the population and service providers.
- c. In all releases and responses, stress that survey is of the service-using population only, not the homeless population.
- d. Underscore statistical caveat's on use of numbers for extrapolation of national estimate.
- e. Point out differences from previous survey to minimize weight of any extrapolation of trends.
- f. Have the analysis contractor, not a Federal agency, issue the report.
- g. "Educate" potential users and critics up front as to benefits and limitations of the survey.

NEXT STEPS

- Decide tentatively on whether to go ahead with survey and on source of funds.
- If the tentative decision is to proceed, convene advocates and concerned organizations.

**Interagency Council on the Homeless****M E M O R A N D U M**

**TO: POLICY GROUP MEMBERS AND POLICY GROUP STAFF CONTACTS;
PROGRAM MANAGERS**

**FROM: *WJ* Marsha A. Martin, D.S.W.
Executive Director**

DATE: September 22, 1994

SUBJECT: September 28 Meeting on Program Evaluation Issues

=====

Please attend a meeting on the broad issue of program evaluation on September 28. This meeting is part of our ongoing effort to implement the Federal Plan to Break the Cycle of Homelessness.

As agreed during our September 20 Policy Group meeting, one of the first orders of business will be to continue our discussion of the best means of obtaining current information about the characteristics of homeless people. A secondary purpose of the meeting will be to discuss our approach for addressing other evaluation issues in conjunction with the implementation of the Federal Plan, including, but not limited to, assessment of the impact of Federal programs in meeting the needs of homeless people.

The meeting will be held on Wednesday, September 28, 1994 at 10:00 a.m. in Room 7202 of the HUD Building.

I look forward to seeing you then. Please let me know if you cannot attend or send a representative.

E X E C U T I V E O F F I C E O F T H E P R E S I D E N T

21-Sep-1994 10:03am

TO: Carol H. Rasco

FROM: Jeremy D. Benami
Domestic Policy Council

SUBJECT: Funding for Homeless Survey

FYI

There is a long-standing issue rearing its head again relating to the need to do a national survey of homeless people focusing on the characteristics of the population and their utilization and need for various types of services from medical to mental health, etc. There is a great deal of interest from almost all federal agencies, national advocates and academic researchers in such a study, which has never been conducted. There is particular interest in establishing a benchmark so that changes over time in the needs and characteristics and the impact of services can be measured.

There is no interest on anyone's part in turning this into a national "count" of the homeless. The numbers issue benefits no one and was dealt with sufficiently in the federal plan.

As we enter the FY96 budget cycle, there is interest in providing joint agency funding for such a study, possibly to be led by the Census Bureau which has put a great deal of preparatory work into such a study. Many agencies, HHS, Ag, Education, Labor, VA, etc. are willing to kick in money for the study. The sticking point is HUD which has previously killed all such efforts.

HUD's public position: (1) This will inevitably lead to a count of the homeless and we have to avoid that; (2) We don't need national information since we are moving so strongly to have localities determine their needs and priorities based on local situations; (3) We shouldn't waste money that would otherwise be used to serve people on academic studies.

I (and nearly everyone else in and out of government) disagree. (1) We control whether or not this turns into a "count"; (2) There is a very real need for national data to inform national policy making - and not all localities can afford to gather data independently; (3) Gathering data to inform and evaluate federal policy is not a waste of money but an important part of good policy making.

I believe, personally, that HUD's real concerns are that (1) a study will show that we need to spend a greater percentage of homeless dollars on services than we do now which could lead to a reallocation of some of their budget to services and (2) they are afraid to lose control of any part of the homeless agenda - an interagency funded study would not be firmly under their control.

I recommend that we take a strong position in favor of funding this study. I think a phone call from you to Secretary Cisneros may be required to send the signal that we feel strongly. I have discussed with Jacquie Lawing and with HUD policy folks and most likely cannot move the matter at a staff level.

Please let me know how you wish to proceed. Thanks.



Interagency Council on the Homeless

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- Homeless Children and Youth Education Grants
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- Emergency Food and Shelter National Board Program
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MCKINNEY PROGRAMS:

- Title V Surplus Property (Personal Property)
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- AFDC Welfare Hotel Demonstration
Staff Contact: Sheldon Shalit (202) 401-4807
FAX: (202) 401-4683
- Community Demonstration Projects for Alcohol and
Drug Abuse Treatment
Staff Contact: Robert Huebner (301) 443-0787
FAX: (301) 443-8774
- PATH (formerly Community Mental Health Services
for the Homeless Block Grants)
Staff Contact: Jean Hochron (301) 443-3706
FAX: (301) 443-0541
- Community Mental Health Services Demonstration
Projects for the Chronically Mentally Ill
Staff Contact: Roger Straw (301) 443-3606
FAX: (301) 443-0541
- ACCESS Initiative (Access to Community Care and
Effective Services and Supports)
Staff Contact: Frances Randolph (301) 443-3706
FAX: (301) 443-0541
- Emergency Community Services for the Homeless Grants
Staff Contact: Joseph Carroll (202) 401-9354
FAX: (202) 401-5718
- Family Support Centers
Staff Contact: Sheldon Shalit (202) 401-4807
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- Health Services for the Homeless Grants
Staff Contact: Joan Holloway (301) 594-4420
Jim Gray (301) 594-4430
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- Surplus Property Disposition
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NON-MCKINNEY PROGRAMS

- Community Support Program for the Homeless Severely Mentally Ill
Staff Contacts: Neal Brown (301) 443-3653
FAX: (301) 443-0541
- Homeless Youth Drug Education
Staff Contact: Pamela Johnson (202) 205-9843
FAX: (202) 205-8221
- The Runaway and Homeless Youth Program - Basic Center Grants and Transitional Living Program
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Staff Contact: David Pollack (202) 708-4300
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MCKINNEY PROGRAMS

- Emergency Shelter Grants Program
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- Rural Homeless Assistance Grants
Staff Contact: David Pollack (above)
- Shelter Plus Care
Staff Contact: David Pollack (above)
- Supplemental Assistance for Facilities to Assist the Homeless (SAFAH)
Staff Contact: David Pollack (above)

- Supportive Housing Demonstration Program-Permanent Housing for Handicapped Homeless
Staff Contact: David Pollack (above)
- Supportive Housing Demonstration Program-Transitional Housing
Staff Contact: David Pollack (above)
- Safe Havens
Staff Contact: David Pollack (above)
- Title V Surplus Properties
Staff Contact: David Pollack (above) or
Toll Free Hotline: 1-800-927-7588

NON-MCKINNEY PROGRAMS

- Innovative Homeless Initiatives Demonstration Program
Contact: HUD's Office of Special Needs Assistance Programs at (202) 708-4300, or local HUD Field Office (Office of Community Planning and Development)
- Section 811 Housing for People with Disabilities
Staff Contact: David Harre (202) 708-2866
FAX: (202) 708-2583
- Comprehensive Housing Affordability Strategy (CHAS) (Homeless Issues) Staff Contact: David Pollack (above)
- Housing Opportunities for Persons with AIDS (HOPWA)
Staff Contact: David Pollack (above)

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- Homeless Veterans Reintegration Project
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- Job Training for the Homeless Demonstration Program
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- Health Care for Homeless Veterans
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- VA Acquired Properties for Homeless Providers Program
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- VA Homeless Providers Grant and Per Diem Program
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IMPLEMENTING THE FEDERAL PLAN

Rec. Number (page)	Recommendation	Responsible Policy Work Group	Lead Agency	Expected 12/94 Progress	Status Report 9/19/94
ASSISTING THOSE NOW HOMELESS					
A. 1 (pp.71-74)	Reorganize McKinney -Consol HUD \$ -Trans EFSP to HUD -Etab Perf. Based contracts		HUD	HUD Reauth bill will pass with C of Care (HUD to issue regulations by April; HUD to provide T/A; HUD to identify financing supplements (e.g., with FNMA)	Bill before Congress EFSP to remain at FEMA
A. 2 (p. 74)	Coordinate application requirements and deadlines for McKinney funds -Link funds with local coordinated planning on local level		ICH	Plan of action	Committee to be formed

SEP 20 1994

Rec. Number (page)	Recommendation	Responsible Policy Work Group	Lead Agency	Expected 12/94 Progress	Status Report 9/19/94
B. 1 (p. 75)	Double HUD McKinney Budget		HUD	Congress approves higher budget (HUD to issue regulations by April; HUD to provide T/A)	Congress has approved request;
C. 1 (pp. 77-79)	Develop integrated systems of support and housing for HMI persons -Link State MH and SA Block Grant Plans, PATH and ACCESS with local plans for Continuum of Care	Mental Health and Substance Abuse Services	HHS	Plan for MH and SA planning requirements and TA and schedule for implementation	Work Group established
C. 2 (pp. 77-79)	Identify and Strengthen effective discharge-planning strategies	Mental Health and Substance Abuse Services	HHS	Implementation Plan and Agency Action steps	To be established Mtg- 9/26-27

DRAFT

Rec. Number (page)	Recommendation	Responsible Policy Work Group	Lead Agency	Expected 12/94 Progress	Status Report 9/19/94
C. 3 (pp. 77-79)	Development of new Partnerships with VSOs, VA HCHV and VA Hospitals	Mental Health and Substance Abuse Services	VA	Implementation Plan	To be established
D. 1 (pp. 79-80)	Develop effective SA treatment systems linked with housing and community-based rehabilitative services. -Enhance inpatient treatment options -Target hard-core and difficult to reach populations -Ensure Access to treatment for ind. w/ co-occurring MH and SA disorders	Mental Health and Substance Abuse Services	HHS	Implementation Plan	Work Group established

DRAFT

Rec. Number (page)	Recommendation	Responsible Policy Work Group	Lead Agency	Expected 12/94 Progress	Status Report 9/19/94
D. 2 (pp. 79-80)	Integrate Addiction treatment into primary and managed care	Mental Health and Substance Abuse Services	HHS	Agency Action Steps	Work Group established
D. 3 (pp. 79-80)	Strengthen VA SA services and outreach to homeless service system	Mental Health and Substance Abuse Services	VA	Agency Action Steps	Work Group established
E. 1 (pp. 81-82)	Provide Assistance for Persons w/TB and AIDS -Focus on Prevention -Expand funding for early ID -Increase housing placements and maintain HOPWA -Broaden availability of treatment and supportive services aimed at home care	Health Care and Nutrition Services	HHS	New Approaches and Intervention Strategies HUD strategy to increase assistance to persons with AIDS Quarterly meeting at HUD for AIDS housing groups	Work Group established met 8/30

Rec. Number (page)	Recommendation	Responsible Policy Work Group	Lead Agency	Expected 12/94 Progress	Status Report 9/19/94
F. 1	Enhance Access to Health and Nutrition Services	Health Care and Nutrition Services	USDA	New Approaches and Intervention Strategies	Work Group established met 8/30
G. 1 p. 83	Continue EITC and remove barriers to its use	Improving Access to Mainstream Programs	HHS	Develop legislative proposals in consultation w/ Treasury	Demonstrations proposed in welfare reform
LONG-TERM STRUCTURAL MEASURES					

SEP 20 1994

Rec. Number (page)	Recommendation	Responsible Policy Work Group	Lead Agency	Expected 12/94 Progress	Status Report 9/19/94
A. 1 (pp. 85-86)	Increase Housing Resources -Increase HUD and FmHA budgets -Improve services to public and assisted housing residents -Explore use of tax Incentives to assist low-income renters and homeowners	Improving Access to Mainstream Programs	HUD	Congress approves higher budget; Develop legislative proposals in w/Treasury	Congress has approved budget;
A. 2 (pp. 85-86)	Fight Discrimination in Housing -Aggressively enforce Fed. fair housing laws -Build upon enforcement of ADA	Improving Access to Mainstream Programs	HUD, Justice	Continue to investigate and litigate discrimination in public accommodations	Cases continue to be reviewed

Rec. Number (page)	Recommendation	Responsible Policy Work Group	Lead Agency	Expected 12/94 Progress	Status Report 9/19/94
B. 1 p. 88	Strengthen Integrated Economic and Human Development	Improving Access to Mainstream Programs	ICH staff	On-going monitoring of Admin. broad- based reforms aimed at economic development	Work Group to be established
CROSS-CUTTING AGENCY ACTION STEPS					
A. 1 p.89	Implement proposed reforms in Health Care System	Health Care and Nutrition Services	HHS, USDA	Congress approves reform	Bills before Congress
B. 1 (pp. 90- 91)	Reform the Welfare System to Reward Work and Self- Support -Re-invent Govt. Assistance -Promote parental responsibility by strengthening child support	Improving Access to Mainstream Programs	HHS	Congress approves reform	Bills before Congress



Interagency Council on the Homeless

STATE CONTACTS FOR HOMELESS ISSUES

9/1/94

- The Stewart B. McKinney Homeless Assistance Amendments Act of 1988 (P.L. 100-628, 11/7/88), Section 210(a) requires that ***"Each State shall designate an individual to serve as a State contact person for the purpose of receiving and disseminating information and communications received from the Council...."*** A list of those individuals follows.

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Interagency Council on the Homeless

September 1994

USE OF PERSONAL PROPERTY FOR PROVIDERS OF ASSISTANCE TO THE HOMELESS UNDER TITLE V OF THE MCKINNEY ACT

In accordance with the Stewart B. McKinney Homeless Assistance Act, the Federal Government donates "surplus" personal property to eligible organizations for use in programs to assist the homeless.

Following are some of the questions that are most frequently asked about the use of surplus personal property for homeless assistance programs:

1. WHAT IS PERSONAL PROPERTY?

Personal property consists of all movable items except real estate and buildings. Blankets, cots, motor vehicles, and office equipment are examples of personal property.

2. WHO IS ELIGIBLE UNDER THE MCKINNEY ACT TO RECEIVE SURPLUS PERSONAL PROPERTY FOR HOMELESS ASSISTANCE PROGRAMS?

Eligible organizations include public agencies and nonprofit, tax-exempt institutions or organizations that provide food, shelter, or other services to the homeless. This includes food banks as well as shelters and other facilities, provided that the donated property is to be used "primarily" for the donee's program(s) operated to assist homeless individuals.

3. HOW IS "HOMELESS" DEFINED?

"Homeless" is defined in Title I of the Stewart B. McKinney Homeless Assistance Act (42 USC 11302) as:

- (1) An individual who lacks a fixed, regular, and adequate night-time residence; and;
- (2) An individual who has a primary night-time residence that is:
 - (i) A supervised publicly or privately operated shelter designed to provide temporary living accommodations

(including welfare hotels, congregate shelters, and transitional housing for the mentally ill);

- (ii) An institution that provides a temporary residence for individuals intended to be institutionalized; or
- (iii) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

This definition also includes any individual who is not mentally ill, whose primary nighttime residence is transitional housing. It does not include any individual imprisoned or otherwise detained under an Act of Congress or a state law.

4. HOW CAN ELIGIBLE ORGANIZATIONS FIND OUT WHAT PROPERTY IS AVAILABLE?

Eligible organizations can contact their State Agency for Surplus Property ("SASP") to identify available items. (A list of the locations and telephone numbers of these SASPs is attached.)

5. WHAT FUNCTIONS DOES A SASP PERFORM?

SASPs make surplus federal and state property available to a variety of public and private agencies and organizations, including those providing shelter or services to the homeless.

6. HOW ARE DESIRED ITEMS ACQUIRED FROM THE SASP?

The SASP typically requires the requesting organization to complete an application form and to certify its eligibility. Consult your SASP for the specific requirements in your state.

The SASP typically will ask for the following types of information:

- Legal name and address of applicant
- Type of organization (e.g., non-profit provider or public agency)
- Type of program (e.g., shelter, soup kitchen, food bank, day center, etc.)
- Narrative description of program and staff (e.g., programs and services offered, physical facilities, etc.)

- Tax-exempt status and source(s) of funding
- Program recognition (licenses, certifications, accreditation)
- Source of official program authorization (e.g., governing board or body, executive head, etc.)
- Assurance of compliance with GSA regulations on non-discrimination
- Public purpose use for donated property

7. DOES THE SASP CHARGE ANY FEES?

Yes. SASPs will usually charge nominal fees to cover their handling and operating costs, though reduced fees or waivers may be granted on a case-by-case basis. Interested organizations should inquire about the availability of special considerations for organizations serving the homeless.

8. WHAT OTHER COSTS ARE INVOLVED?

Applicants are responsible for picking up and transporting the items they acquire. Some SASPs may provide transportation assistance.

9. DO ORGANIZATIONS PROVIDING SERVICES TO THE HOMELESS RECEIVE A PREFERENCE OR PRIORITY IN THE DONATION PROCESS?

No. The Federal Property Act specifies that "excess" Federal personal property not owned by the Department of Defense (DOD) must first be offered to other Federal agencies. Any excess property that is not claimed by these agencies is then considered "surplus" and is made available to the Federal Aviation Agency (FAA) for use by public airports. Any surplus property not claimed by the FAA is then made available to SASPs. SASPs select needed items for review and selection by eligible organizations in their state, including those providing services to the homeless.

The process is similar for DOD-owned Federal excess personal property. Such property must first be offered to other Federal agencies, and any property not claimed by these agencies becomes "surplus" and is made available to the FAA for public airport use. In addition, however, the Federal Property Act requires that DOD-owned surplus property that is not claimed by the FAA must then be made available to service educational activities (SEAs) such as the American National Red Cross, Armed Services YWCA of the USA, and Boy Scouts of America. Any remaining surplus property is then made available to SASPs.

10. MAY ORGANIZATIONS DESIRING CURRENTLY UNAVAILABLE ITEMS ASK THE SASP TO REQUEST OR RESERVE THOSE ITEMS?

Each SASP has its own procedures. Interested organizations may be able to request that they be placed on a "want list" for currently unavailable items. Eligible organizations are advised to consult with their SASP. If an eligible organization desires a certain item currently unavailable in its own SASP, the organization may request that its SASP contact SASPs in neighboring states for possible assistance in obtaining that item.

11. MAY A SASP GIVE A PREFERENCE TO CERTAIN ORGANIZATIONS OR CERTAIN CATEGORIES OF ORGANIZATIONS WITHIN ITS STATE?

No. SASPs must distribute Federally donated surplus property on a "fair and equitable" basis.

12. ARE THERE RESTRICTIONS ON THE USE OF ACQUIRED ITEMS?

Organizations that receive items must maintain detailed accounting records for items with an original cost to the Federal government of \$5,000 or more. All items, however, are subject to the following requirements:

- (1) Within one year after the date of acquisition from the SASP, donees must put the acquired item into use.
- (2) For one year following the date that the acquired item is put into use, the recipient must use it "primarily" to provide services to the homeless. (If donees cannot demonstrate that these items are being used "primarily" to provide services to the homeless, then SASPs may recover those items, request compensation for those items (at the "fair rental value"), or deny donees future participation in the program.)

If there are no problems during the use-restriction period, donees receive a full deed to the acquired items. Organizations should consult with their SASP regarding other possible Federal and state requirements.

- (3) For items given directly to homeless persons (e.g., clothing and bedding), donees must obtain signed receipts from the individuals receiving the items. (SASPs are also required to ensure that passenger vehicles and items originally

costing the Federal government \$5,000 or more are used in the donee's homeless assistance program for at least six additional months beyond the one year minimum Federal requirement.)

13. WHAT REPORTS ARE REQUIRED?

SASPs will require periodic utilization reports during the period of restriction (See Question 12). SASPs may also make monitoring visits from time to time.

14. MAY ORGANIZATIONS THAT ACQUIRE SURPLUS FEDERAL PERSONAL PROPERTY FOR HOMELESS ASSISTANCE TRANSFER THESE ITEMS TO OTHER ORGANIZATIONS?

Yes, but only following the period of restriction. (See Question 12.)

15. WHERE CAN I OBTAIN ADDITIONAL INFORMATION?

For additional information on the Federal surplus personal property donation process, contact the appropriate SASP (See attached list) or the Office of Property Management, U.S. General Services Administration (GSA), Room 800 (CM #4), Washington, D.C. 20406, (703) 305-5234.

16. WHAT KINDS OF ITEMS CAN BE OBTAINED FROM SASPS?

Examples of items of possible interest to organizations providing food, shelter, and support services to homeless people include: beds and bedding, sleeping bags, blankets, clothing of all types, kitchen equipment and utensils, tools, motor vehicles, medical supplies, cleaning materials, appliances, washers and dryers, furniture, office supplies and equipment.

17. ARE THERE OTHER SOURCES OF GOVERNMENT-OWNED PROPERTY FOR HOMELESS ASSISTANCE?

Yes. Various Federal agencies administer other programs that make Federal personal and real property available for use in homeless assistance programs.

Surplus Blankets

The U.S. Department of Defense (DOD) donates blankets to organizations that operate shelters for the homeless. Interested organizations must obtain a written statement from a relevant local governmental entity certifying that the organization actively provides services to homeless people in the community. Once an organization has been

approved, DOD will deliver the blankets free of charge. For additional information, contact John Reavey, Defense Personnel Support Center (FO), 2800 South 20th Street, Philadelphia, PA 19101-8419, (215) 737-8280.

Real Property

Under Title V of the Stewart B. McKinney Homeless Assistance Act, homeless providers are eligible to apply for "surplus" Federally-owned buildings and land (including base closure properties) which are determined to be suitable and available for homeless use. For additional information, contact HUD at 1-800-927-7588.

You may also request a copy of "Use of Base Closure Properties for Facilities to Assist the Homeless: The Priority Under Title V of the McKinney Act," for specific information on obtaining base closure property. Contact the Interagency Council on the Homeless for a copy of this publication.

Foreclosed Properties

Federally acquired foreclosed homes are available for homeless use from HUD-FHA, VA, and the Farmers Home Administration (FmHA).

HUD-FHA Properties -- Contact the local HUD Field Office (Office of Community Planning and Development) listed in the blue pages of your local telephone directory under U.S. Government or call (202) 708-1226.

Department of Veterans Affairs (VA) properties -- Contact the local VA Regional Office listed in the blue pages of your local telephone directory under U.S. Government or call (800) 827-1000 to obtain VA Regional Office phone numbers.

Farmers Home Administration (FmHA) properties -- Contact the local FmHA county supervisor or call (202) 720-1466 for a listing of State FmHA contacts.

State Agency Donations

SASPs often have access to items received from state agencies. Interested organizations should contact their SASPs for additional information.

Private corporations and individuals may be willing to donate items to homeless providers. Interested organizations should explore this possibility.

Special Opportunities for Federal Grantees

Under certain conditions, Federal grantees may be able to obtain excess Federal personal property from Federal agencies in connection with their Federally-sponsored project grants. Federal grantees should contact their respective Government Technical Representative or Program Manager to discuss the potential availability of excess personal property to use in support of their Federally-sponsored projects.

Attachment

STATE AGENCIES FOR SURPLUS PROPERTY

<u>STATE</u>	<u>LOCATION</u>	<u>PHONE</u>
Alabama	Montgomery	205-277-5866
Alaska	Anchorage	907-279-0596
American Samoa	Pago Pago	684-699-1170
Arizona	Phoenix	602-542-5701
Arkansas	North Little Rock	501-835-3111
California	Fullerton	714-449-5900
	Sacramento	916-928-4630
Colorado	Denver	303-321-4012
Connecticut	Wethersfield	203-566-7018
Delaware	Delaware City	302-557-3070
District of Columbia	Washington	202-576-6472
Florida	Tallahassee	904-488-3524
Georgia	Atlanta	404-756-4800
Guam	Agana	671-472-1725
Hawaii	Honolulu	808-548-6946
Idaho	Boise	208-334-3477
		or 208-334-2651
Illinois	Springfield	217-785-6903
Indiana	Indianapolis	317-232-1384
Iowa	Des Moines	515-262-9810
Kansas	Topeka	913-296-2351
Kentucky	Frankfort	502-564-4836
Louisiana	Baton Rouge	504-342-7860
Maine	Augusta	207-287-2923
Maryland	Jessup	301-596-1080
		or 410-799-0440
Massachusetts	Boston	617-727-7500
		Ext. 241
Michigan	Lansing	517-335-9105
Minnesota	New Brighton	612-639-4023
Mississippi	Jackson	601-939-2050
Missouri	Jefferson City	314-751-3415
Montana	Helena	406-444-4514
		Ext. 125
Nebraska	Lincoln	402-471-2677
Nevada	Reno	702-688-1161
New Hampshire	Concord	603-271-2602
New Jersey	Edison	908-287-9256
New Mexico	Santa Fe	505-827-4603
New York	Albany	518-457-3264
North Carolina	Raleigh	919-733-3885
North Dakota	Bismarck	701-224-2273
Northern Mariana Islands	Saipan	670-322-9441
Ohio	Columbus	614-466-4485
Oklahoma	Oklahoma City	405-425-2700

Oregon	Salem	503-378-4714
		or 503-378-4711
		Ext. 304
Pennsylvania	Harrisburg	717-787-5940
Puerto Rico	San Juan	809-722-3565
Rhode Island	Cranston	401-464-3542
South Carolina	West Columbia	803-822-5490
South Dakota	Huron	605-353-7150
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September 7, 1994

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September 20, 1994

In the 1995 Census Test, the Bureau of the Census will:

- conduct operations to enumerate people in housing units and in group quarters, such as correctional institutions, mental hospitals, nursing facilities, and at locations which provide services to homeless and needy people.
- ask clients at service locations and other types of group quarters to provide their name, age and date of birth, and other short form data items, such as sex, race, and Hispanic origin.
- ask clients at service locations to tell us if they have a place or location where they usually stay.

The 1995 Census Test and the Year 2000 Decennial Census will not:

- provide information on the types of services being offered nationwide.
- provide detailed information on the characteristics of clients who use services or on the dynamics of homelessness.
- ask information specific to the issues of homelessness. For example, we will not ask clients if they are currently homeless, or if they have experienced previous episodes of homelessness.
- ask people where they were living before they became homeless.
- ask people what types of services they use.
- provide information on the extent of homelessness among children and its impact on their education.
- provide information on mental illness, alcohol or other drug abuse, or other causes of homelessness.
- separately identify persons who are living in transitional housing or who are living doubled up with friends or relatives. They will be enumerated in the housing unit enumeration.

9/19/94 - ICH PLAN REVIEW

week
of
9/26

Mental
Health
? notes ??

- I.A. : HHS to pursue consolidation
and simplification

(MH) - Work group to meet by end of month
- discuss

Implementation Plan by 12/94

(SA) - invite Lee Brown's office to be part of
this work group.
- Change Bill presentation at next ICH group

Mainstream - Add Treas. to ICH

Who Should Attend?

- ♦ Community mental health agencies
- ♦ Local and state government mental health representatives
- ♦ Consumers
- ♦ Family members
- ♦ Private not-for-profit organizations

Travel and Lodging

- ♦ USAir is offering special travel rates for persons attending this conference. Certain restrictions apply. To take advantage of these discounts, call Delmar Travel at (800) 439-2304, and refer to the "Call to Action" conference. Call as soon as possible for the best rates and availability.
- ♦ The conference will be held at the Washington, DC Renaissance Hotel, 999 9th Street, N.W., Washington, DC. A block of rooms has been reserved for persons attending the conference at the discounted rate of \$113/ single room; \$133 /double room (both rates include taxes).
- ♦ To make a room reservation, call the hotel at (800)228-9898 and state that you will be attending the "Call To Action" conference.

For more information...

Gail Hutchings, M.P.A.
National Resource Center on Homelessness
and Mental Illness
Policy Research Associates, Inc.
262 Delaware Avenue
Delmar, NY 12054
(800) 444-7415

CMHS
Center for Mental Health Services

National Resource Center on
Homelessness and Mental Illness
262 Delaware Avenue
Delmar, NY 12054

A Call to Action: New Opportunities for Community Mental Health in HUD Housing Programs

A National Conference



September 26-27, 1994

Renaissance Hotel
999 9th Street, N.W.
Washington, DC

Sponsored by:

Center for Mental Health Services
Substance Abuse and Mental Health Services
Administration
U.S. Department of Health and Human Services

Why Another Conference?

- ♦ Fundamental changes at HUD will increase local control over planning and funding of housing programs for homeless people.
- ♦ Understanding these changes will be critical to assuring that the housing needs of people with serious mental illnesses are represented in your community.
- ♦ Newcomers to HUD programs will learn strategies for getting and keeping people with serious mental illnesses on the local agenda for affordable housing.
- ♦ Experienced McKinney grantees will learn and share tactics for maintaining and increasing the supply of housing for people with serious mental illnesses.

Sponsor

Center for Mental Health Services,
Substance Abuse and Mental Health
Services Administration,
U.S. Department of Health and Human
Services

Co-Sponsors

U.S. Department of Housing and Urban
Development
Interagency Council on the Homeless
National Resource Center on Homelessness
and Mental Illness

A Call to Action: New Opportunities for Community Mental Health in HUD Housing Programs

Monday, September 26, 1994

- 8:00 Registration
- 8:30 Welcome and Introductions
- 9:15 Keynote Address: Reinventing HUD
- 10:15 HUD Panel:
 - ♦ The Role of Local Boards in the Continuum of Care
 - ♦ Implications for Smaller Communities and State Governments
 - ♦ Beyond McKinney: The HUD Consolidated Plan
- 1:00 Community Organizing for Housing Equity
- 3:00 Strategies for Building Alliances

Tuesday, September 27, 1994

- 8:30 The Mental Health Contribution to the Local Continuum of Care
- 10:15 Concurrent Sessions:
 - A. Creating Local Plans in Continuum of Care Communities
 - B. Developing State Plans for Smaller Communities
 - C. Establishing Local Intake and Tracking Systems
- 1:00 Using Non-McKinney HUD Programs for People with Serious Mental Illnesses
- 2:00 Fair Housing and the ADA: Tools for Justice in Local Housing
- 3:00 Creating a Local Strategy: A Call to Action

Registration Form

You must be preregistered to attend. Complete the form below and return it to the National Resource Center. **There is no registration fee.** *Space is limited to 200 participants on a first come basis; register early!*

(Please print)

Name (as you would like it to appear on your nametag).

Agency/Organization

Address

City State Zip

Telephone number (with area code)

Reasonable Accommodations:

- ☐ I need sign language interpretation.
- ☐ I need some other accommodation (please specify):



Mail or fax this registration form to arrive no later than September 19, 1994 to:

Beth Fox, Conference Registrar
National Resource Center on Homelessness and
Mental Illness
Policy Research Associates, Inc.
262 Delaware Avenue
Delmar, NY 12054
Phone: (800) 444-7415
Fax: (518) 439-7612

Note: This is not a hotel reservation form. See the Travel and Lodging section of this brochure for information on making your hotel reservations.

REASON: What's story
with it for research
on homelessness.

9/19/94 - CENSUS BUREAU + homeless count

1995 test census

Oakland

Patterson NJ

NW La.



Interagency Council on the Homeless

DRAFT 8/26/94

PRIORITY: HOME! THE FEDERAL PLAN TO BREAK THE CYCLE OF HOMELESSNESS

RECOMMENDATIONS

1. ASSISTING THOSE NOW HOMELESS

A. Reorganize McKinney

- 71 Consolidate some McKinney homeless assistance programs under one administrative structure with a single application process.
- 71 Transfer the Emergency Food and Shelter program currently administered by FEMA to HUD.
- 71-2 Forge linkages between some McKinney programs and mainstream programs: consolidate where necessary to target the added resources of the mainstream program resources to the most needy.
- 71 Charge local governments with the responsibility of coordinating resources and efforts, and with the responsibility of ensuring access to mainstream programs and services.
- 72 Localities should institute and coordinate this comprehensive approach to homelessness. State and county governments will be primarily responsible for developing the continuum of care in non-metropolitan areas, since these areas have homeless populations with certain characteristics, as well as a unique configuration of resources and service delivery. The locally designed strategy should provide the basis for Federal participation.
- 74 Immediately explore further consolidation and reorganization across Federal departments, including consolidation with mainstream programs, where appropriate.

*Sketch
by
Congress*

- 74 A reorganization of current programs would still represent an emergency measure, intended to deal with the current crisis of homelessness. Eventually, these emergency measures need to be replaced by mainstream programs that deal with long-term community development.
- 74 Performance-based contracting: While much of the provider's work cannot be measured strictly by the number of people placed, it should be one of the indices of success. Further, results should be evidenced as the continuum of care and other necessary systems are put into place.

B. Double the HUD McKinney Homeless Assistance Budget

- 75 Double the HUD McKinney homeless assistance budget to \$1.7 billion, and increase the overall targeted Federal homeless assistance budget to \$2.15 billion.
- 75 [HUD should] continue to explore innovative financing techniques in partnership with FNMA.

C. Make Mental Health Services Work for the Poor

- 77 Work with states and communities to develop integrated systems of support services and housing. Develop incentives, requirements, and ways to assist them to address effectively the needs of mentally ill persons who are homeless or at risk for becoming homeless.
- 77 Explore ways to link currently required state mental health plans (which must include a component for outreach and services for homeless people with serious mental illness), health plans under the proposed Health Security Act, the plan required under the PATH program, the plan for the substance abuse block grant, and the comprehensive plan that will be required by HUD. Such coordination should be required by the continuum-of-care plan to receive McKinney and other HUD funds. These plans and the programs they relate to must be coordinated and address treatment, support services, and housing for persons with mental illness, especially those who are homeless and those who suffer from both mental illness and substance abuse disorders.
- 77 Explore alternative ways to focus state mental health efforts on the most needy, including more targeting of Federal funds, tighter planning requirements, technical assistance, etc.
- 77-9 In this effort to develop more integrated systems of housing and services:
- For a more widespread effort, use as building blocks HHS's ACCESS

Initiative--which made grants in 1993 to help selected communities in nine states integrate housing and care systems--along with elements of VA's programs that assist homeless veterans with mental illness.

- HHS, VA, and HUD will coordinate Federal assistance with state and local governmental health, mental health, and housing agencies to enhance state and community support by developing a continuum of care that integrates housing and services. To do so, encourage states and communities to do the following:
 - Effectively target mental health and housing resources to the most needy, such as homeless persons with mental illnesses or dual diagnoses.
 - Work closely with other key providers of services, including substance abuse treatment providers and providers in VA's mental health-care system.
 - Use the experience of the states and communities that have developed integrated systems, and of Federal programs such as HHS demonstration programs and VA's Health Care for Homeless Veterans (HCHV) program.
 - Link mental health and substance abuse treatment activities.
 - Collaborate with local public and private housing providers and developers to establish joint initiatives and, in particular, to encourage the development of affordable Single Room Occupancy housing.
 - Consider the unique and severe needs of homeless children with developmental disabilities and serious emotional disturbances.
- States and localities must review and strengthen discharge and aftercare planning strategies to prevent subsequent homelessness with appropriate linkages between housing and community-based care. The Federal agencies will work with them on this.
- HUD, HHS, VA, and DOJ will establish a discharge planning working group to identify effective discharge-planning strategies for hospitals and community-based treatment facilities; to ensure continuity of care; and to explore how Federal, state, and local incentives that would encourage Federally funded hospitals, prisons, nursing homes, community-based housing providers, and other institutions to develop the necessary linkages to avoid discharging people who do not have a place to live.

- VA will work with the discharge planning group and others to develop new strategies to address these problems--including the development of new partnerships with other public and private agencies and organizations.
- HUD will analyze the successes of some communities at developing SRO housing, identifying ways to create incentives for private developers to reinvest in this type of housing, and ways to develop linkages with support services.
- Relevant Federal agencies will assess how their mainstream programs are serving this population and identify ways to improve access and linkages.

D. Make Substance Abuse Services Work for the Poor

79 Implement the following ongoing or planned actions:

- Coverage for inpatient treatment, intensive treatment in nonresidential community settings and outpatient treatment for substance abuse in the Health Security Act.
- The Crime Bill
- The President's FY 1995 budget proposal to appropriate \$355 million for an initiative to reduce hard-core substance abuse.

80 Ensure that the approximately \$5.4 billion the Federal government provides to states and communities for drug abuse prevention and treatment is coordinated and targeted effectively to serve hard-core users and difficult-to-reach populations, such as the homeless.

80 Federal agencies will work with states and communities to develop effective treatment systems linked with housing and other community-based rehabilitative services. Special attention will be focused on innovative approaches to help people stay in treatment, as well as on education, training, and employment programs that support the transition to community living. As part of this systems development, the Federal government will work creatively to accomplish the following:

- Ensure that providers of treatment and care address the needs of homeless people with co-occurring disorders regardless of their point of entry: substance abuse or mental health.
- Integrate treatment for persons with severe addictions into primary and managed health-care systems.

- 80 The Federal government should work with service and treatment providers to increase knowledge of the substance abusing population and of effective treatment intervention strategies. This population's diversity requires a variety of approaches.
- 80 VA should continue to inform homeless service organizations that VA can provide substance abuse treatment to eligible veterans.

E. Provide Assistance for Persons with TB and AIDS

- 81 Give high priority to TB prevention and control among homeless people by increased detection, evaluation, and follow-up services to those homeless individuals with current symptoms of active TB. Those diagnosed with TB should complete an appropriate course of treatment.
- 81 Establish or change programs treating TB and/or HIV/AIDS to provide the following:
- Community-based client assessment to identify early those patients infected with these diseases.
 - A range of permanent housing options for homeless patients, including respite-care scattered-site housing.
 - Intensive supportive services to this population, including Directly Observed Therapy (DOT) when needed, case management, access to primary health care, substance abuse treatment, mental health services, social services, TB support services, and crisis intervention.
- 81 Expand funding for the identification and detection of TB and the treatment of AIDS, consistent with the levels in the President's FY 1995 budget.
- 81-2 States and communities should give some priority in existing and new funding to homeless persons with TB and AIDS. States should utilize a newly authorized optional Medicaid benefit for certain low-income people with TB that includes basic primary care services, prescription drugs, and DOT.
- 82 Increase housing placement through:
- Use of short-term rental payments, in emergency situations for persons with HIV/AIDS and/or TB, to prevent homelessness and to minimize the use of emergency congregate facilities to reduce the risks of exposure to opportunistic diseases.
 - Expansion of subsidized rent programs, such as Section 8, with an emphasis

on tenant-based vouchers.

- Broadened availability of support services that emphasize preventing homelessness and maintaining permanent housing. (Include this in a community's HUD continuum-of-care plan.)
- Maintenance of categorical funding streams for special needs populations, such as HOPWA.

F. Continue Earned Income Tax Credit and Remove Barriers to Its Use

- 83 Certain barriers to claiming the EITC in advance should be removed.
- 83 The Administration should consider allowing states to propose to the Secretary of the Treasury a demonstration project making advance payments of the EITC to eligible residents through a State agency.

2. LONG-TERM STRUCTURAL MEASURES

A. Increase Housing Subsidies and Fight Discrimination

85-6 Housing Affordability

Increase Federal Funding

- Increase HUD's housing assistance budget to begin to make up for past budget cuts, and to enable homeless people and those precariously housed to access permanent housing.
- Increase the HUD overall budget by nearly two billion dollars in 1995.
- Enact President Clinton's 1995 budget proposal, which includes increased budget recommendations for HUD and FmHA.

Improve the services available to public and assisted housing residents.

- Improve the nexus between the programs of the Departments of Labor, Education, Health and Human Services, and Veterans Affairs and public and assisted housing.

- Do more by coordinating currently useful programs (e.g. Family Self-Sufficiency) with state and local providers.

86-7 Fight discrimination

- Aggressively enforce Federal fair housing laws.
- HUD and DOJ must vigorously enforce the housing rights of all persons, including the homeless and those who seek to provide housing and other services for the homeless.
 - Continue to adopt proactive measures to increase the investigation and litigation of fair housing violations. DOJ's Fair Housing Testing Program will be expanded.
 - Build upon current enforcement of the Americans with Disabilities Act to prohibit discrimination in public accommodations and other places and services that may affect homeless persons.
 - Continue to challenge cities that refuse to permit group homes for persons who are mentally ill, mentally retarded, or former substance abusers.

B. Low-Income Housing Tax Incentives

- 87 Explore use of tax incentives to assist lower income households with rental and homeownership costs.
- 6, 87 Give special attention to initiatives that would work together with existing tax incentives to ensure that those who work do not become homeless because of the discrepancy between their income and affordable rents.

C. Strengthen Integrated Economic and Human Development

- 88 Continue support for job creation initiatives and lifelong learning opportunities.
- 6, 88 Implement a new social contract that recognizes both individual and family rights and responsibilities.

3. CROSS-CUTTING AGENCY ACTION STEPS

A. Implement Proposed Reforms in the Nation's Health Care System

89 Congress should enact the Administration's proposed Health Security Act.

B. Reform the Welfare System to Reward Work

90-1 Reform of the welfare system could build on the Family Support Act and the recent expansion of the Earned Income Tax Credit and incorporate the following four aspects:

- Promote parental responsibility to ensure that both parents are held responsible for the support of their children by strengthening child support enforcement so that noncustodial parents provide support to their children and by taking steps to help reduce the rate of out-of-wedlock births.
- Reward people who go to work by making work pay--that is, by ensuring that people who move from welfare to work have the tax credits, health care, and child care they need to support their families adequately through work.
- Promote work and self-support by providing access to education and training for parents, making cash assistance a transitional, time-limited program and expecting adults to work once the time limit is reached.
- Reinvent government assistance to reduce administrative bureaucracy, combat fraud and abuse, and give greater state flexibility within a system that has a clear focus on work.

C. Improve Access to Mainstream Programs

91 Make mainstream programs more accessible to the homeless and more effective in preventing homelessness among those who are at risk of becoming homeless. Rather than institutionalizing a separate support system serving the homeless, ensure that the existing service system is able to address the needs of homeless individuals and families.

91-2 The Interagency Council on the Homeless (ICH) and its member agencies should:

- Identify the principal mainstream programs in the areas of health, mental

health, substance abuse treatment, income assistance, social services, housing, and education and employment training that are critical to preventing homelessness and helping the current homeless make the transition from homelessness.

- Conduct a systematic assessment of how effectively sets of these programs serve the homeless and those at risk of homelessness, identify how to make the programs more accessible to the homeless, and determine how to improve these programs so that they better prevent homelessness.
- Monitor ongoing programs and conduct impact evaluations of outcomes to identify ways to forge more effective linkages between targeted and mainstream programs, including consolidations.

This effort should build on planned reforms, such as health-care and welfare reform, and reforms that have already been undertaken by Federal agencies to help make mainstream programs more accessible.

- 93 The Federal government through its member agencies should review and explore the most recent data on the causes of homelessness; the characteristics of homeless and at-risk populations; and the number and characteristics of those experiencing crisis poverty.
- 94 Continue special efforts to educate and encourage states, cities, and not-for-profit organizations about the potential use of CDBG, HOME, HOPWA, acquired properties and other mainstream HUD program resources to assist homeless people.
- 94 Improve the Title V Surplus Federal Property Program.
- 94 Promote the development of family and life skills by continuing support for family intervention and prevention models such as Head Start, Even Start, Healthy Start, Operation Fatherhood, Family Support and Preservation, and the Family Self-Sufficiency program. Work with states to remove obstacles for homeless family participation in these programs.

D. Strengthen Mechanisms for Interagency Coordination at the Federal and Local Levels

- 94 Through the ICH and agencies' technical assistance contracts, disseminate information about successful programs, including how communities have developed their continuum of care. Provide technical assistance on program and system developments.

- 94 Evaluate the "value-added" by targeted programs to improve coordination and reduce program fragmentation.
- 94-5 Through ICH, sponsor two meetings a year with Governor-appointed State Homeless Contacts and McKinney and non-McKinney Homeless Assistance Program Managers to encourage state and local coordination, and to encourage integrated approaches to addressing homelessness.
- 95 Through ICH, develop an advisory committee of homeless persons.
- 95 Update and develop new handbooks for McKinney Act Programs to provide comprehensive guidance to states, localities, and not-for-profits on eligible activities, grant management strategies, fiscal and accounting requirements, and outcome measurements.
- 95 Through ICH, develop and disseminate a publication that describes all Federal homeless assistance programs and exemplary program models nationwide.
- 95 Through the Corporation for National Service, develop AmeriCorps programs and other volunteer efforts to augment government and non-profit efforts to address homelessness.
- 95 Encourage local governments to follow the example of the states in establishing both a single point of contact regarding their homelessness programs and an interagency or interdepartmental council to promote coordination among their homelessness programs.
- 95 Continue to hold local, regional, and national conferences and other events to share information, increase coordination of efforts, and develop new partnerships.
- 95 Increase Federal support to locally based Stand Downs for Homeless Veterans to raise community awareness of homelessness among veterans, and to bring new non-Federal resources to support the Stand Downs as well as future collaborative efforts.
- 95 Increase outreach to veterans service organizations and other nontraditional homeless providers to encourage and support their participation in the national effort to break the cycle of homelessness.

IMPLEMENTING THE FEDERAL PLAN

Rec. Number (Page)	Recommendation	Responsible Work Group	Lead Agency	Expected 12/94 Progress	Status Report (8/24/94)
I.A (Pages 68-74)	Reorganize McKinney - Consol HUD \$ - Trans EFS to HUD - Perf. Based Contracts		HUD	- HUD Reauth bill will pass containing all provisions (??)	- Bill before Congress
I.B (p. 75)	Double HUD McKinney Budget		HUD	- Congress approves higher budget	Congress has approved
I.C.5	HUD, HHS, VA, and DOJ will establish a discharge planning working group	Mental Health and Substance Abuse Services	HUD HHS VA DOJ	- Work Group Established	- ?
I.F	Remove Barriers to EITC Use	??	??	- Develop Legislative Proposal in Conjunction with Treasury	- Demos proposed in welfare reform
II.C.1	Identify principal mainstream programs critical to prevention	Homeless Prevention	ICH	- Produce coordinated report identifying all agency programs with a role in prevention	- ?

II.C.5	Increase access to JTPA services for the homeless	Mainstream	DOL	- TA contracts in place - Grantees from former targeted demo now subcontracting with SDA for mainstream services	- ?
II.C.6	Improve access to Head Start for Homeless children	Mainstream	HHS		
II.D.1	ICH and agencies provide info on successful programs and continuum of care	Program Evaluation (?)	ICH	- Newsletters published - Internet access?? - other steps?	

Outlined below is the work plan, timetable and a description of the primary policy and program focus, identifying lead agencies when appropriate.

A. Workplan and Timetable

1. Broad Policy Areas:

Homeless Prevention
 Improving Access to Mainstream Programs
 Health and Nutrition Services
 Addressing Special Needs in Rural Areas
 Mental Health and Substance Abuse Services
 Program Evaluation

2. Form a Homeless Persons Advisory Committee
 - September 1994
3. Each agency identifies steps to implement proposals outlined in Part IV of the Federal Plan Recommendations for New Policy Initiative and Agency Action Steps to Policy Group for review and comment (August 1994). In addition, the Policy group will establish an evaluative process in order to monitor progress toward its goals and objectives.
4. Agencies will work on draft interim progress and results report (November 1994).
5. Policy Group submits consolidated interim progress report to Full Council for approval of proposed agency initiatives and action (December 1994/January 1995).
6. Policy Group submits first yearly implementation progress report and accomplishments to Full Council (May/June 1995).

B. Policy Descriptions

1. Homelessness Prevention

All agencies will review existing mechanisms for identifying families and individuals at risk of becoming homeless to determine the effectiveness of those mechanisms, and to propose changes (as necessary) in current policies/programs that may be contributing to homelessness inadvertently. FEMA and USDA/FmHA will work with the other agencies to develop proposals for to enhance prevention efforts.

2. Continuum of Care

HUD will inform agencies on progress of its proposals to reorganize and consolidate its McKinney programs and its request for a doubling of the HUD homeless assistance budget. HUD and other agencies will develop a proposal to link programs.

3. Mental Health/Substance Abuse

These recommendations are on pp. 75-80. HHS and VA will focus with other agencies on developing consistent standards for the delivery of mental health and substance abuse services to ensure that individuals with mental health and /or substance abuse problems receive services, treatment, housing, and support. It is critical to coordinate treatment and supportive services with housing, as neither is sufficient without the other. While many models integrating supportive housing, outreach and case management services exist, more must be done to ensure that treatment services are available, accessible, and affordable for homeless individuals and families with mental health and substance abuse problems.

4. Health Care and Nutrition Services

This work will focus on improving the process of assessing the health and nutrition needs of homeless families and individuals, especially of those with HIV/AIDS and TB and implementing the recommendations for improving assistance for persons with HIV/AIDS and TB and access to health and nutrition services generally and found on pp. 81-82 and 89-90 of Priority: Home!. HHS and USDA/FNS will work with others on implementation.

5. Improving Access to Mainstream Programs

The agencies will focus on identifying and removing the obstacles and barriers that prohibit mainstream programs usage by homeless individuals and families, and those at risk of becoming homeless. In the fall each agency will share its action plan for its mainstream programs. Programs include those affecting income support, education and training, health and mental health care, employment, and housing as an integrated service system of coordinated action. Making mainstream programs and sustaining their participation by the

nation's poorest is an absolute priority of the Interagency Council on the Homeless. HHS, VA, ED will work with the other agencies to conduct a systematic assessment of how the mainstream programs serve the homeless population and those at risk of homelessness, identify how to make the programs more accessible to the homeless population, and determine how to improve these programs so that they better serve homeless families and individuals. The recommendations can be found on pp. 91-94.

6. Addressing Special Needs in Rural Areas

USDA/FmHA, HUD and FEMA will work with agencies in assessing homeless needs of rural communities, evaluate existing Federal initiatives to alleviate those needs, and implement any necessary modifications of policies and programs, specifically those found on pp. 85 and 93.

Program Evaluation

All federal efforts proposed in the plan require cooperation within and among the Federal agencies working on homelessness, as well as between the federal government agencies and state, local, private, and voluntary efforts to assist homeless individuals and families. DOJ, Labor and Commerce will work with the other agencies to implement the recommendations found on pp. 94-95 of the Plan. Specifically, the Policy Group will identify opportunities for collaborative agreements and "MOUs" and work with the agencies and the communities to support the development of local integrated homeless assistance networks. Beyond service integration and agency collaboration, this workgroup will monitor the success of these efforts, identify "best practices" and disseminate the knowledge gained from these programs nationwide.

This Policy Group will compile findings and data from all agencies into a report to be accepted to the Interagency Council Policy Group to ensure timely progress in the Workplan. The Council will distribute any findings of special interest to the nonprofit as well as state and local government entities serving the homeless.

C. Homeless Persons Advisory Committee

A homeless persons advisory committee will be formed to provide first hand expertise and feedback.



CONFIDENTIAL

Interagency Council on the Homeless

TO: JACQUIE LAWING

FROM: MARSHA A. MARTIN, D.S.W.

DATE: AUGUST 10, 1994

SUBJECT: **HELP!**

DETERMINED TO BE AN
ADMINISTRATIVE MARKING
INITIALS: MA DATE: 02/13/12

=====

I would like to meet with you as soon as possible.

During the past year the role of the Council and the functions of its staff have been severely compromised. We all know that there are a number of reasons why this has occurred, however we have reached a critical junction in the erosion process for several reasons, not the least of which is the increased visibility that the implementation of the Federal Plan would bring. George and I are very concerned about this process and feel that the time has come for decisions, holding true to those decisions, and your support in doing so. Your attention to these matters, help and assistance over the past year has made a great difference, and your focused attention over the next few weeks until the end of the fiscal year (the effective date of the HUD reorganization) can help to stop the erosion once and for all. Quite candidly, I will repeat that no one on the staff here is pleased with the uncertainty of the work environment and George and I are trying to hold it together. At the same time, it is becoming increasingly difficult for us to be here. The uncertainty and lack of structure have gone on too long. Following yesterday's Full Council meeting, I became worried about the "Grand Canyon-like gap" between the understandings and assumptions of the participants in that meeting and the current ICH staffing realities.

The specific issues that George and I want to discuss with you in an effort to get closure on some outstanding and clarity on others include: staffing and personnel issues; additional resources; mission; and work agenda. Resolution of these issues will provide a stronger foundation as we begin to implement the recommendations in the Federal Plan.

Staffing and Personnel Issues

Who staffs the Council? Since last fall, the Council staff has been reduced from 14 (including two administrative support

staff) to our current configuration of six (including one support staff person), two of whom work predominantly on CPD/SNAPs activities. By default this reduces the staff of the Council to four. This summer, we have benefited from the assistance of five volunteers, but by definition they have limited understanding of the true nature of the work and have generally served as "extra bodies". The Council staff team does not need extra bodies. It needs trained, knowledgeable, and dedicated staff.

It is our understanding that replacements for Wendy's and Julie's positions are being considered. Are they being hired to work for CPD/SNAPs, or as staff exclusively for the Council? If they or anyone else are being hired for the Council, it would be extremely helpful and beneficial to the Council if they understood what the staff role to the Council is and are permitted to function in that role. It is too difficult to try to build a team when people are pulled and given tasks which go beyond the activities of the Council. The staff become more like a moving target than a reliable source of professional support.

For example, at the present time, Pat Morgan takes direction from you and has repeatedly indicated that she no longer wants to work for the Council but for CPD. As a result, she is less interested in the policy-related workload of the Council staff. Her lack of interest in the ICH staff activities make her no longer an asset. Similarly, Sona doesn't have a clue as to the real nature of the Council (as Katty did not), she believes that she is working for Pat, and it is unclear what she can contribute to ICH staff workload. In her case, it is especially troubling that she has, independently of anyone's encouragement, sought to remain here for an extended period of time. Heidi Chapman, who is nice, bright and talented, has been working almost exclusively for CPD/SNAPs since she came from OLCR. Andrea Hill, who started as staff to the Council, moved to be staff to the Initiative Cities project and now is staff to something in-between. And finally, as far as we know, our secretary, Romona Poole, is officially on detail only through October 10, 1994. (We understand that CPD may be in the process of advertising this position.) As I understand it, Christine Ladd and Dawn Jahn are still interested in becoming a part of our team.

Additional Resources

Following the meeting with you, Mark Fabiani and Syl Angel, Syl and I met to go over the ICH field organization and how CPD resources will be made available to support it. It was during that meeting that Syl finally understood that the ICH regional coordinators (always paid for by HUD) function not in a HUD role but a neutral, Federal liaison role. In a phrase, they were not HUD at all. Before Syl and I prepare a memo to you and Mark, it is essential that all CPD Field Directors understand what the Council is and what part HUD plays around that Council.

Following a discussion last week with the regional coordinators (including Steve Sachs in the San Francisco office), it was suggested that I brief the CPD Directors in the ten cities where the regional coordinators currently reside (the former HUD regional HQ cities) as to the broad, cross-cutting role of the staff to the Council and the costs and benefits associated with that role.

Steve Sachs said that from his experience, most CPD directors would appreciate a greater understanding of ICH and would be more than happy to provide travel funds and workload credit to ensure that HUD and the other Federal partners committed to addressing homelessness had a forum for new developments, problem-solving and Federal leadership. He suggested that in order for this arrangement to work, these ten CPD Directors (whose offices would have the major ICH field liaison responsibilities) would appreciate guidance and approval from CPD HQ to allocate a small percentage of their travel budget (\$2,000 minimum) for this "Federal government-wide" ICH role. For the 30 other CPD Field Offices, minor ICH field liaison responsibilities would exist where there are other Federal field functions. For example, VA, FmHA and HHS have offices in some States which administer programs that may contribute to the success of a continuum of care. This would permit a necessary expansion of the staffing resources available to support interagency coordination and special ICH initiatives. Should this approach be fully implemented, a vehicle for field communication and coordination will need to be firmly instituted between those carrying out the identified ICH liaison function and ICH HQ staff. I suggest bi-weekly conference calls with the "major" ICH offices, bi-monthly ICH liaison reports, and bi-monthly conference calls with all of the remaining offices with ICH functions.

In addition to field resource needs, it would be helpful if ICH HQ staff had a modest allocation for travel of \$5,000 for participation in major Federal, State and local conferences. For example, a major conference was held in Los Angeles in June that was attended by more than 350 special needs housing providers from across the country. In addition to these travel resources, I am prepared to commit \$5,000 of my own money to participate in other important conferences, workshops, and annual meetings where issues critical to the Council are being examined. George has looked into this no-cost arrangement and was informed that there are no obstacles as long as the trip is documented as being ICH work-related. I am quite comfortable with committing my own resources in the cause to address homelessness.

Neither of these proposals address the need for ICH staff development resources, e.g., ongoing training of the ICH field staff.

In addition, a specific commitment and allocation of resources for printing and mailing of ICH publications has never been clearly identified. As the Policy Group moves forward in the implementation of the Federal Plan, a newsletter or other communication information and dissemination vehicle must be supported and funded in order to avoid the surprise attacks that come with changes to Federal policies and programs, e.g., the Department of Labor's shift from demonstration to mainstream programs for homeless people.

Mission

In the absence of a clear mission statement, confusion arises as to who the staff of the Council works for and what they do. For example, when I attend meetings outside of the HUD HQ Building, very often people will say "Well, you folks over at HUD...." On the other hand, when people request a neutral arena in which to make decisions, the comments go in the reverse direction: "You don't work for HUD; you work for the White House." (The latter happens because of my ability to articulate firmly and steadfastly HUD's position on almost all things related to homelessness and because the Secretary is the chairman, I will certainly do everything I can do to be mindful of his agency's agenda.) There is no advantage to either of these positions, which result from the lack of a stated mission and structure. Are we the old Council, or are we a new thing? Maybe the problem is that George and I understand the importance of the Council as envisioned in the McKinney Act: a neutral, independent Federal resource which provides leadership, guidance, information and other resources to a broad constituency at all levels--Federal, state, and local--as well as homeless people and those who assist them. When the Council lost its appropriation, the Domestic Policy Council and HUD announced that "the work done by the Federal Interagency Council on the Homeless would be continued and, in fact, heightened to the White House...[and] will convene to coordinate programs and policy...and will be staffed and funded by HUD." It was a nice press announcement, assisted me and the other Council in maintaining our employment and permitted the Administration to put the best face on a terribly vexing problem caused by the Congressional action. However, the work and effectiveness of the Council will disappear without a clear articulation of mission, structure, and a true commitment of resources.

Work Agenda

With the implementation of the Federal Plan and the identification of six broad policy areas subject to review and reinvention, the staff in its current configuration cannot provide the support. George and I cannot attend every meeting, prepare memoranda, respond to calls from across America, monitor developments in the field, put out "fires", send out funding

bulletins, attend conferences and workshops, monitor legislation, answer information requests from the general public, respond to correspondence, satisfy requests for individual meetings on Federal policy, schedule meetings, monitor attendance, and educate America. This is plainly beyond the limited staff and other resources that HUD has made available to date.

In closing, **HELP!** This is not working. I am requesting that George and I meet with you on Thursday morning for a breakfast meeting (or alternately, next Tuesday). I will bring the breakfast treats. (You have to bring your own Diet Coke.)

In addition to discussing the above, we will also provide you with a schedule for meeting with McKinney homeless assistance program managers, Policy Group members, and the national advocacy community to discuss the strategy for implementing the recommendations in the Federal Plan.

bcc: Jeremy Ben-Ami