Homeless Services Consortium Board of Directors Meeting
October 28, 2016
11am- 1pm
United Way Dane County Board Room A

AGENDA

Call to Order and Welcome

1. Approval of July 22nd (with edits made by Board President)

2. Approval of Sept 12th and October 10th Board Minutes (minutes not available yet)

3. Approval of final copy of Community Plan to Prevent and End Homelessness

4. Discussion of 2017 work plan for Committees

Adjourn

Schedule for remaining 2016 Board of Directors Meetings:
All meetings will be held at 11:00 am at the United Way

October 28, 2016
November 18, 2016 (11/5 Holiday)
December 16, 2016 (12/23 Fri before Xmas)

MINUTES FROM THE HOMELESS SERVICES CONSORTIUM BOARD MEETING
July 22, 2016

PRESENT: Heather Campbell, Maggie Carden, Rob Dicke, Jeanne Erickson, Jani Koester, Torrie Kopp Mueller, Garrett Lee

City CDBG Staff: Anne Kenny, Susan Morrison

GUESTS: Kristen Rucinski, Martha Cranley

CALL TO ORDER/ROLL CALL

Kopp Mueller called the meeting to order at 11:13 a.m.

1. Review of Bylaws and approval to present new version to general membership

The Board discussed the proposed changes to the Bylaws that were included in the packet and suggested more changes, which Kopp Mueller noted for inclusion in the revised document. The revised Bylaws will be introduced to the general HSC membership in September and voted on in October.

2. Approval of New Board Member

Kopp Mueller said that Darcia Bell Roosevelt has resigned from the Board and a new member is needed. Brenda Konkel nominated Shenise Morgan for the position. Konkel said Morgan knows both sides of the homeless system, having been homeless herself and having worked as a Housing Resource Specialist and Case Manager for Tenant Resource Center.

Erickson moved to accept Shenise Morgan as the new Board member. Campbell seconded. The motion passed unanimously.

3. Approval of Community Plan

Rucinski and Cranley reviewed the Community Plan to Prevent and End Homelessness in Dane County, taking each of the goals one at a time. They noted changes to the document suggested by the Board and will include those changes in the final document.

Campbell moved to accept and approve the suggested changes to the Plan. Dicke seconded. The motion passed unanimously.

*Please note that Board members were looking at different versions of the Plan. Some had Version 3 and some had Version 3.1. The group approved Version 3.1 with some suggested changes.

ADJOURNMENT

The Board adjourned by acclamation at 1:04 p.m.

Anne Kenny, recorder

Safe & Sound

A Community Plan to Prevent and End Homelessness in Dane County, WI

2016

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Homeless Services Consortium

DANE COUNTY / MADISON, WI

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HOMELESS SERVICES CONSORTIUM (HSC)

VISION STATEMENT

All households in Dane County should have the opportunity to secure and maintain safe, stable, and affordable housing.

Guiding Principles

1 Everyone deserves an equal opportunity to housing free from discrimination.

2 People who have lived experiences of homelessness have an integral role in the design of solutions to prevent and end homelessness.

3 Racism is a leading cause of homelessness. Reducing racial disparities in the homeless system is a critical strategy in ending family homelessness and improving the lives of everyone impacted by homelessness.

4 The community will continue to explore creative solutions to ending homelessness beyond those objectives highlighted in this plan.

5 There has to be shared ownership and responsibility for preventing and ending homelessness across all Dane County groups including, but not limited to, business, faith communities, schools, funders, government, homeless and formerly homeless individuals, and social service providers.

6 Community volunteers are recognized as an essential part of preventing and ending homelessness.

7 The Homeless Services Consortium (HSC) is a partnership of agencies, funders, advocates, and people who have experienced homelessness. Its success at preventing and ending homelessness is dependent upon a commitment to the strategies and results in this plan.

INTRODUCTION

All Persons. 4 Goals. 1 Result.

This plan is hopeful, but it is also realistic. It is intended to provide clear direction for public and private agencies in Dane County in their efforts to prevent and end homelessness. This plan embraces the Housing First model as the primary approach to ending homelessness, but recognizes that additional work needs to be done in preventing it, supporting those who still become homeless and advocating for funding and policies to make this possible. It is hoped that this plan will facilitate collaboration among Homeless Service Consortium members, other community organizations, and policymakers at various levels of government and provide benchmarks to collect useful data to update the plan based on increased knowledge of community conditions, best practices, and future priorities. It will be used to direct future policy decisions and identify needed resources. The 2016 Community Plan is deliberately organized to be concise in order to increase its accessibility to the larger community, city and county leaders, those with lived experiences of homelessness, and HSC member organizations. It may be a brief document but it contains clear steps and goals towards preventing and ending homelessness. Its included appendices provide additional resources to understanding both the plan and Dane County's Homeless Services Consortium.

ALL PERSONS.

Adults. Families. Black. White. Hmong. Hispanic. First Nations. Unaccompanied Youth. Children. Young Adults. Elderly. Disabled. Veterans. Queer. Immigrants. Abuse survivors. The faces of homelessness are as varied as the persons who experience homelessness. Although we believe homelessness is defined by those that experience it, we also know that it does not define them. This belief is key to partnering with persons and families experiencing homelessness in a way that is empowering and dignifying. Our efforts to prevent and end homelessness in Dane County must include the voices of those who experience homelessness in its many forms. The growing awareness of homelessness among unaccompanied youth and young adults in Dane County is of special attention in this community plan. We can do more to learn about their experiences and find ways to prevent or end their homelessness and exposure to predatory behaviors.

4 GOALS.

Prevent. Support. End. Advocate. This plan presents four goals in the simplest language to provide a clear and common purpose for community action. The first goal is to prevent homelessness by working to identify individual and structural causes of homelessness in Dane County. This goal includes efforts to identify barriers to services and improve access for those at risk of homelessness. The second goal is to support those experiencing homelessness with a pathway to permanent housing. This goal will require the use of new methods such as diversion and improved collaboration among community organizations that encounter those experiencing homelessness. The third goal is to end homelessness by increasing access to permanent housing. This will include efforts to engage landlords with existing rental properties and additional funding for rapid rehousing and permanent supportive housing. This goal is also aligned with the federal initiatives to end veteran, chronic, and family homelessness in the next few years. The fourth goal is advocacy for increased community, political, and financial resources to prevent and end homelessness in Dane County. Each of these four goals are supported by specific objectives and action items informed by our collective expertise and best practices.

This plan relies on using three coordinated strategies to achieve its goals: collaboration, connection, and evaluation. Collaboration will include the bringing together of HSC, its member organizations, persons with lived experiences of homelessness and other community members to develop shared goals and coordinate action to accomplish the goals. In addition to strengthening connections between Dane County's many community organizations, the plan will create and strengthen connections between persons experiencing homelessness and the services that can help prevent or end their homelessness. Measuring and evaluating the results of HSC action is also important. This plan includes objectives to collect accurate, current, and useful data that can

inform our practice and future objectives. A key part of this plan is an annual system analysis and the modification, deletion, or addition of objectives, action items, or targets in the plan. Accurate data is vital for this annual analysis. This quantitative and qualitative data will also be shared with funders, local and state political leaders and the Dane County community to celebrate successes and refocus future dollars and efforts on preventing and ending homelessness.

1 Result:

There is one desired result: no person experiencing homelessness in Dane County. Ending homelessness and developing structural supports to prevent future homelessness is a priority for Dane County. We are confident that the goals, objectives, and strategies presented in this community plan will achieve this result. This plan was developed by the Homeless Services Consortium (HSC)--a network of funders, providers, faith-based, and grassroots organizations that have committed to play a role in ending homelessness in our community. Moving forward it is important to find innovative and empowering ways to include those with lived experiences of homelessness in the search for solutions to homelessness. Its success will also depend on the communities in Dane County and local and state political leaders.

HOMELESSNESS IN DANE COUNTY

Dane County is just one of thousands of communities in the United States grappling with homelessness. Both Dane County and the City of Madison have adopted Housing First as the primary model to ending homelessness. Housing First is an approach to ending all types of homelessness, and is the most effective approach to ending chronic homelessness. It offers individuals and families experiencing homelessness immediate access to permanent or supportive housing, with a low-threshold for entry and without clinical prerequisites like completion of a course of treatment or evidence of sobriety. It also provides optional access to additional supportive services to maintain housing. Housing First is a guiding principle in the 2016 community plan to end homelessness. WCAH is a newer state organization that works at the state level to increase resources, coordinate efforts, and generate political will towards ending homelessness.

Dane County and the City of Madison have also joined the national initiatives to end veteran homelessness (2016), chronic homelessness (2017), and homelessness among families with children and unaccompanied youth (2020). Every goal in this plan includes strategies towards addressing these specific forms of homelessness and the county already maintains a certified, by-name list for veterans, those who are chronically homeless, and families experiencing homelessness.

DEFINING HOMELESSNESS

One of the great challenges in addressing homelessness, both nationally and locally, is competing definitions of homelessness by federal agencies and federal funding. Most Dane County agencies rely on U.S. Department of Housing and Urban Development (HUD) funding and use the HUD definition for homeless. This definition includes four broad categories of homelessness: (a) people who are living in a place not meant for human habitation (e.g. the street, parks, emergency shelter, transitional housing), (b) people who are losing their primary nighttime residence, which may include a motel or hotel or a doubled up situation, (c) families with children or unaccompanied youth who are unstably housed and likely to continue in that state, and (d) people who are fleeing or attempting to flee domestic violence and have no other residence (USHUD, 2012). This HUD definition represents the dominant public perception of what it means to be homeless.

The U.S. Department of Education has a more expansive definition of homelessness under the McKinney-Vento Act. The McKinney-Vento definition includes children and youths living doubled-up, in motels, hotels, trailer parks, camping grounds, emergency shelters, abandoned in hospitals, waiting for foster care placement, private or public place not designated for sleeping, cars, parks, abandoned buildings, substandard housing, bus or trains stations, or "similar settings" due to loss

of housing. This is a significant difference because the inclusion of "doubled-ups" greatly increases the number students and families who are eligible for rights and opportunities that may not be available under the HUD definition. This broadened definition also implies a wider diversity of the experiences of persons and families experiencing homelessness. Dane county schools and youth and young adult organizations are more likely to operate with this definition of homelessness or a combination of the HUD and McKinney-Vento definitions.

There are different metrics in "measuring" homelessness in Dane County. The most commonly reported numbers are emergency shelter stays and the biannual Point-in-Time (PIT) counts. In 2015, 3,338 individuals were served in Dane County emergency shelters. This included 564 families (with 1,012 children), 1,267 single men, 484 single women, and 41 unaccompanied youth. These numbers overall have remained relatively constant over the past three years with some wider fluctuation in the numbers of unaccompanied youth. These overall 2015 numbers are also only slightly lower (4%) than the overall numbers in 2006—at the adoption of the last ten-year community plan. The numbers of families and children being served by shelters has increased since 2006. This data only provides one snapshot of homelessness in Dane County—those that access emergency shelter.

Dane County school districts also report the number of school-aged children and youth identified as being homeless. During the 2014-2015 school year, 2,119 were identified as being homeless under the McKinney-Vento definition, with 1,414 in the Madison schools. That number increased to over 1,470 for Madison schools in the 2015-2016 school year. These numbers do not include parents, guardians, and younger siblings who are not yet in school. The lack of a single, clear operational definition of homelessness in Dane County remains a serious obstacle to collaboration and policy implementation. These two federal, policy-oriented definitions may also fail to acknowledge the lived experiences of persons who are or have been homelessness. This plan seeks to include the voices and experiences of persons and families in our community's understanding of homelessness.

THE LANDSCAPE

There are many types of shelter, housing and services available to individuals and families in need in Dane County. These include emergency shelters for single men (Porchlight), single women (Salvation Army), families (Salvation Army, The Road Home, YWCA), victims of domestic abuse (DAIS), and youth (Briarpatch). Briarpatch also runs a transitional housing program for young adults as they transition to permanent housing and Porchlight hosts Safe Haven—housing for persons with mental illness. Mainstream providers manage rapid rehousing funds to move individuals and families from shelters into permanent housing. These providers also operate permanent supportive housing that includes additional services to assist individuals and families maintain housing. Rapid rehousing and permanent supportive housing aid the county's adoption

of Housing First. It can be difficult to navigate the variety of emergency shelter and supportive housing available in Dane County. HSC uses a coordinated entry system to remove some of the difficulty and prioritize housing based on need. This plan supports the use of coordinated entry by all Dane County organizations involved in providing permanent housing. Another strategy in this plan is to develop a more precise and useful mapping of the services and housing opportunities in Dane County to identify gaps and improve inter-organizational collaboration.

Many Dane County agencies, organizations, congregations, and community members are engaged in the work towards preventing and ending homelessness at both the individual and structural level. The Homeless Services Consortium (HSC) organizes many of these organizations in a community-level effort. HSC also acts as the federally mandated (HUD) Continuum of Care (CoC) in Dane County. HSC develops policies, including this plan, to comply with HUD requirements, coordinate data collection, and apply for CoC funds. It is composed of a Board of Directors and thirteen committees (see Appendix A) representing more eighty organizations (see Appendix C). The City of Madison, Dane County, and United Way are leaders in the work to end homelessness and the major local funders of services and housing. Mainstream providers (such as Salvation Army, the YWCA, Porchlight, Housing Initiatives) provide services and housing—including emergency shelters, rapid rehousing (RRH), and permanent supportive housing (PSH). Smaller faith-based and grassroots organizations provide many different services and some additional housing for individuals and families experiencing homelessness. Other Dane County municipalities and school districts (including McKinney-Vento liaisons) work to identify and provide supports to families experiencing homelessness.

THE CHALLENGES

Dane County and the City of Madison face some serious challenges in the work to end homelessness. The vacancy rate in Madison and Dane County is extremely low—averaging less than four percent. Despite an increase in housing construction, there is inadequate development and construction of new affordable housing. This coupled with the loss of tenant protections through state legislation creates a daunting rental climate for persons and families living in poverty or who are experiencing homelessness. The increasing cost of living and the lack of jobs that do not require a college degree increases financial pressures on families and individuals that may be housing insecure—one financial crisis away from homelessness. Racial inequity and racism is another significant challenge to ending homelessness in Dane County. The Race to Equity report exposed the stark racial disparities that exist in Dane County, including employment, housing and education. This community plan to end homelessness is informed by the Race to Equity Road Map to Equity and is committed to uncovering and addressing racial disparity that exists in homelessness. All of these challenges guide the goals and strategies in this plan.

MAKING THE 2016 PLAN

This community plan builds on the 2006 plan—Dane County's first community-wide plan towards ending homelessness in Dane County. The 2006 plan had three goals: provide support services for homeless households and households at risk of homelessness, to help homeless households by providing a short-term safety net with continuous support services with the goal of moving into stable housing, and provide an adequate inventory of affordable housing units for low-income households. While these goals are carried forward into the 2016 plan, they are supplemented with more actionable strategies and measurable outcomes.

In late 2015, a HSC steering committee was formed to begin the process of developing the next community plan to end homelessness. The HSC steering committee organized a community charrette in March 2016. This charrette provided an opportunity for organizations and community members to share their concerns about homelessness in Dane County. The conversations from the charrette were used to developed an emergent framework of four goals: preventing homelessness, supporting during homelessness, ending homelessness, and advocacy. This framework with initial strategies and benchmarks was made available for public review and comment at two community meetings in June 2016. Additional feedback came from other organizations and persons with lived experiences through smaller conversations focused on specific topics or written correspondence in response to circulating drafts of the plan. This collective feedback was incorporated into the final plan contained in this document. It is not perfect, but it represents our best next steps. It will be used to guide community efforts to end homelessness and it will be annually evaluated and updated to reflect the changing needs and progress towards its goals.

PLAN AT A GLANCE

All Persons. 4 Goals. 1 Result.

PREVENT HOMELESSNESS
- Evaluate and change prevention services and dollars to maximize their use for those with the greatest needs
- Work with state agencies and institutions such as the foster care system and jails to prevent discharge of persons into homelessness
- Decrease evictions by non-profit, affordable and subsidized housing
- Identify barriers and improve access to tenant services (e.g. rental assistance, legal aid) and to mental health and substance abuse counseling
- Improve connections to affordable housing and jobs for those at risk of homelessness
- Implement and track diversion as a part of an empowering approach to preventing a household's homelessness in a manner that ensures safety and is empowering to the person or family being assisted
- Prevent homelessness among unaccompanied youth, ages 13-17 through reunification strategies, conflict resolution, and other services

SUPPORT PEOPLE EXPERIENCING HOMELESSNESS
- Improve outreach and access to help for those at risk or experiencing homelessness through street outreach teams, improved screening criteria, and coordinated intake of persons and families
- Fund capacity training in best practices including Harm Reduction, Trauma Informed Care, Racial Justice, and Housing First
- Create a Day Resource Center
- Improve collaboration among mainstream providers, faith-based, and grassroots organizations to address both crisis and housing stability efforts
- Provide services that address underlying factors of homelessness and housing instability including mental health, peer support, education, job training, and jobs for persons in supportive housing
- Organize service teams to provide housing stabilization services for people experiencing homelessness to help them move quickly back into permanent housing
- Increase rates of placement from shelter to permanent housing by 10% each year

END HOMELESSNESS
- Engage landlords to access new units of existing housing for single adults and families and support their transitions into permanent housing
- Realign the funding structures for rapid re-housing to provide more financial flexibility to move individuals and families in shelter back into housing
- Align and prioritize capital, operating, and service funding packages for the development of new permanent supportive housing
- End veteran homelessness as part of the Zero: 2016 Initiative

COLLABORATE WITH LOCAL, STATE, AND NATIONAL PARTNERS
- Improve data collection on people being served by HSC member organizations and make annual adjustments in the projected need for objectives
- Form a common annual advocacy agenda for HSC
- Increase community resources and will to prevent and end homelessness by revitalizing the Community Oversight Group to report on progress toward plan goals regularly in the community
- Advocate for local and state laws to decriminalize homelessness
- Collaborate with state and national partners and organizations to support increased services, rights, and funding for preventing and ending homelessness

Goal 1

Prevent Homelessness in Dane County.

The most effective step to ending homelessness is preventing it. This requires strengthening community support services for individuals and families who experience housing insecurity, or those at the threshold of being homeless. The causes of homelessness can vary as widely as the persons who experience it and include both individual and larger societal origins such as institutional racism. We can take steps as a community to identify barriers and improve access to services that may prevent homelessness among individuals and families, including tenant services, mental health counseling, substance abuse counseling, financial planning, education, job training, job placement, childcare, transportation, and other community resources. HSC member organizations will partner with those most at risk of becoming homeless before they lose stable housing. This collaborative work will be informed by recommendations from agencies and organizations that provide the services and by persons with lived experiences of homelessness. These support services should be available to those at risk of homelessness, experiencing homelessness, and formerly homeless. HSC will also work with public and private institutions such as schools, foster care, hospitals, and prisons to prevent homelessness from ineffective discharges and/or among unaccompanied youth and others at risk of being homeless. Diversion is strategy that will be more broadly adopted as an empowering approach to avoiding shelter stays and homelessness among households and families by finding safe and legal alternative housing. HSC will coordinate the development of a consensus definition, training, and tracking of diversion as a key strategy in prevention efforts. Preventing unaccompanied youth homelessness is a priority in this community plan. School districts and community youth organizations will form a working group to explore and recommend future strategies to understand and prevent youth homelessness.

This community plan includes the following specific objectives towards the goal of preventing homelessness in Dane County:

Objective 1: **Identify Barriers and Improve Access to Tenant Services**
Objective 2: **Identify Barriers and Improve Access to Mental Health and Substance Abuse Services**
Objective 3: **Identify Barriers and Improve Connections to Affordable Housing and Jobs**
Objective 4: **Prevent Persons Being Discharged into Homelessness from Institutions**
Objective 5: **Implement and Track Diversion**
Objective 6: **Prevent Homelessness Among Unaccompanied Youth**

Goal 1 Action Plan

Objective 1.1: Identify barriers and improve access to tenant services

Homelessness can be prevented by assisting persons and families at risk of being evicted by connecting them to tenant services (e.g. rental assistance, landlord mediation, eviction prevention education, legal aid, etc.). There are approximately 2000 evictions in small claims court in Dane County every year, and far more that never get to court. Once people lose housing through eviction, it is extremely difficult to obtain new housing due to negative landlord references, eviction history, low credit scores, high security deposits, and the low vacancy rates. This often lead to periods of homelessness in a vicious cycle that is hard to break. Barriers to these tenant services need to be identified (1.1.1) to decrease evictions and loss of housing. It is necessary to include the voices of persons with diverse lived experiences of homelessness (1.1.1) in the work to identify barriers and improve access to tenant services. The recommendations can be used by HSC during the Annual Plan Analysis (see Goal 4, Objective 1.4) to adopt specific strategies and set future benchmarks for this objective. These tenant services should also be made available to individuals and families in emergency, transitional, and permanent supportive housing, as well as formerly homeless individuals and families to prevent a return to homelessness as part of the broader Housing First strategy.

All agencies that engage in tenant services and homeless prevention should evaluate their spending (1.1.2) and develop ways to ensure that funds are reaching those with the most need (1.1.2) before they become homeless. About 5% or less of people calling for eviction prevention actually get funds and often the funds are distributed without a clear process based on need. Only about 1% of tenants going to court are represented by an attorney and only 15% receive mediation services. The need for eviction prevention dollars and tenant services far outweighs the availability in our community. This requires continued advocacy for increased funding for tenant assistance services.

Formerly homeless people who live in affordable housing programs and housing designed specifically for them also experience evictions. The HSC Written Standards Committee will add a prevention and diversion section and incorporate recommended changes to housing policy (1.1.3) in the Written Standards (Appendix D). Eviction best practices will be incorporated in local government contracts (1.1.4) with a requirement for documentation of efforts to prevent eviction (1.1.4) by non-profit, affordable, and subsidized housing. The Funders Committee should also consider the inclusion of race impact assessments in local government contracts. The number of evictions by non-profit, affordable, and subsidized housing can be decreased by 20% or more annually by establishing consensus eviction protocols (1.1.5).

In addition, all HSC member organizations and case managers should be trained (1.1.6) on eviction prevention strategies and educated about fair housing and reasonable accommodation laws. Collaborations with the Fair Housing Council, Dane County Bar Association and the University of Wisconsin-Madison School of Law can assist with this strategy. HSC member organizations can also create education opportunities for first time renters such as young adults (18-24) using the expertise of housing case managers, housing navigators, and housing locators. The model of Joining Forces for Families (JFF) in placing case managers in low-income communities is a strategy worth exploring on a larger scale to increase access to tenant services.

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
1.1.1 Conduct a focus group/survey of diverse people (race, age, gender, family/single, LGBT, etc.) with lived experience of homelessness to identify barriers to tenant services and recommend ways to improve access to these services	Community Plan Oversight Committee, Continuum of Care Coordinator, Tenant Resource Center, Legal Action of Wisconsin	December 2016 – Tenant Services Access Focus Group/Survey	2016
1.1.2 Evaluate how prevention dollars are being spent and develop ways to ensure that the funds are reaching those with the most need	Performance & Peer Review Committee, all HSC member organizations, United Way (FEMA)	N/A	2016
1.1.3 Add an *eviction prevention* and *diversion* section and incorporate recommended changes to housing policy in the Written Standards	Written Standards Committee	June 2017 – Prevention Section added to Written Standards	2017
1.1.4 Incorporate eviction prevention best practices in local government contracts and require documentation of efforts to prevent eviction in non-profit, affordable, and subsidized housing	Funders Committee	N/A	2017
1.1.5 Establish consensus eviction protocols and decrease the number of evictions by non-profit, affordable and subsidized housing by 20% annually	Non-profit housing providers, Community Development Authority, Dane County Housing Authority, Legal Action of Wisconsin	December 2016 – Establish consensus eviction protocols	ONGOING
1.1.6 Train case managers and member organizations about eviction prevention strategies, tenant laws, legal remedies for eviction notices, and educate about fair housing and reasonable accommodation laws	Tenant Resource Center, Fair Housing Council, Legal Action of Wisconsin	Two (2) HSC and/or community education opportunities annually	ONGOING

There are additional objectives and strategies to partnering with private landlords in Goal 3 and objectives and strategies to advocate for changes to state and local tenant laws in Goal 4.

Objective 1.2: Identify barriers and improve access to mental health and substance abuse services

Mental health and substance abuse issues can lead to housing insecurity and homelessness. It is important to remove barriers and improve access to these services for those persons and families experiencing mental health or substance abuse issues. Barriers to mental health and substance abuse counseling services need to be identified (1.2.1) and it is necessary to include the voices of persons with diverse lived experiences of homelessness and mental health or substance abuse issues (1.2.1) in this work. The recommendations can be used by HSC to adopt specific strategies and set future benchmarks for this objective during the Annual Plan Analysis (see Goal 4, Objective 1.4). Mainstream providers will follow these recommendations and work with faith-based organizations, grassroots organizations, and disability rights organizations to reduce barriers and improve access to mental health and substance abuse services in Dane County for all clients (1.2.4).

Individuals seeking mental health or substance abuse services and counseling are experiencing longer wait times because of a shortage of case managers and counselors in this field. Treatment facilities, mental health and Alcohol and Other Drug Abuse (AODA) providers, and Dane County Human Services should hire more mental health and substance abuse case managers to decrease wait times for clients seeking these services (1.2.2). These case managers and service providers should be trained in behavioral health and evidence-based practices such as trauma-informed care and harm reduction (1.2.3). These service providers should also include more support for children and youth who are homeless. This objective and strategy will help meet the federal initiative to end chronic homelessness by 2018 (see Goal 3, Objective 4.2).

It is also important that all service providers and permanent supportive housing programs move toward a harm reduction model (1.2.3) in an effort to promote respect and preserve the dignity of persons seeking services to stay housed. Harm reduction works to minimize the harmful effects of substance abuse without withholding services, housing, or other assistance. It views substance abuse as a complex phenomenon and calls for non-judgmental and non-coercive assistance. However, it does not minimize or ignore the real danger and harm caused by substance abuse. Educating member organizations, service and housing providers, city & county leaders, law enforcement, and the larger community about harm reduction (1.2.3) will work to reduce the stigma around mental health and substance abuse. These mental health and substance abuse counseling services should also be made available to individuals and families in emergency, transitional, and permanent supportive housing, as well as formerly homeless individuals and families to prevent a return to homelessness.

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
1.2.1 Conduct a focus group/survey of diverse people (race, age, gender, family/single, LGBT, etc.) with lived experience of homelessness to identify barriers to mental health and substance abuse services and recommend ways to improve access to these services	Community Plan Oversight Committee, MACH OneHealth, Continuum of Care Coordinator	June 2017 – Mental Health & Substance Abuse Services Access Focus Group/Survey	2017
1.2.2 Hire more mental health and substance abuse case managers and counselors to decrease wait time when clients are ready for service and create case management plans while on waitlist	Continuum of Care Homeless Assistance Application Committee, Mental health and AODA providers, Dane County Human Services	N/A	ONGOING
1.2.3 Supportive housing providers will hire people with education and training in behavioral health and evidence-based practices such as Harm Reduction, Trauma Informed Care, and Racial Justice	Supportive housing providers, HSC Service providers	N/A	ONGOING
1.2.4 Improve formal collaborations between county healthcare providers and non-profit, affordable, and subsidized housing by partnering in service delivery and/or training to support housing case managers	Hospitals, Clinics, Treatment facilities, Dane County Human Services, Madison Area Urban Ministry, MACH OneHealth, Mainstream Providers, Grassroots organizations, Faith-based organizations	N/A	ONGOING

Objective 1.3: Identify barriers and improve connections to affordable housing, jobs, and other benefits and resources

Structural causes of homelessness in Dane County include a lack of affordable housing, access to family-supporting jobs, quality childcare, transportation, communication, and access to additional benefits such as healthcare or education. Homelessness can be prevented by reaching and connecting persons and families at risk to available affordable housing and jobs. HSC already works to keep an updated list of affordable rental units in Dane County. This should be continued, but barriers to this and other services need to be identified (1.3.1). It is necessary to include the voices of diverse persons with lived experiences of homelessness (1.3.1) in the work to identify barriers to affordable housing, jobs, and other benefits. The recommendations can be used by HSC during the Annual Plan Analysis (APA) to adopt specific strategies and set future benchmarks for this objective.

Funding should be increased for employment training and other community resources such as quality childcare, transportation and communication. (1.3.2). Barriers to these resources need to be identified in order to increase access. Models such as United Way's HIRE Education Employment Initiative is a current model for employment training that should be expanded and built upon. Access to quality childcare and transportation is another recognized need for families at risk of becoming homeless. These connections to jobs, job training, and other benefits should also be made available to individuals and families in emergency, transitional, and permanent supportive housing, as well as formerly homeless individuals and families to prevent a return to homelessness. Increased access to jobs is not the only source of income that should be explored for the housing insecure and those experiencing homelessness. Barriers to other sources of income such as public benefits (e.g. SSI, W2, SSDI, etc.) should be identified and access increased for those who are entitled to them (1.3.3).

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
1.3.1 Conduct a focus group/survey of diverse people (race, age, gender, family/single, LGBT, etc.) with lived experience of homelessness to identify barriers to finding affordable housing and jobs and recommend ways to improve access to these resources	Community Plan Oversight Committee, Continuum of Care Coordinator	December 2017 – Affordable Housing, Jobs & Benefits Access Focus Group/Survey	2017
1.3.2 Increase funding and access to employment and training programs and family supporting employment	Mainstream Resources Committee	N/A	ONGOING
1.3.3 Identify barriers and increase access to public benefits (SSI, W2, SSDI etc.)	Mainstream Resources Committee	N/A	ONGOING

Objective 1.4: Prevent persons being discharged into homelessness from institutions

The transition from such institutions as hospitals, jail, and foster care occur at vulnerable times in the lives of persons at risk of homelessness. There is a responsibility and need for increased coordination between state agencies and local community organizations to prevent homelessness for persons being discharged from incarceration, youth exiting the foster care system, and persons being released from medical or psychiatric care. This coordination should be seamless and include access to programs available for education, job training, and mentoring. Dane County Department of Human Services will ensure that there is a confirmed plan for safe and stable housing for all youth exiting foster care (1.4.2). Additionally, confirmed procedures should be in place to ensure the discharge of all persons from incarceration and medical care into safe and stable housing (1.4.1/1.4.3). Where these procedures already exist, they should be reviewed, updated and followed by the appropriate state agencies. Where they do not exist, they should be developed and implemented. These "release plans" should include plans for job training or placement, education, housing and other determined support services.

State institutions should start conversations or form partnerships with service organizations about the needs of persons leaving foster care, medical care or incarceration. No person should be discharged from a public or private institution in Dane County into homelessness. Madison Are Urban Ministry's (MUM) Journey Home and other best practices should be brought to scale and funded. In addition, planning for a facility (Healing House) can assist in the transition from hospitals to stable housing. More work still needs to be done in helping persons with criminal records access affordable housing. These and other efforts will address the challenges of preventing homelessness caused by institutional discharge.

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
1.4.1 Ensure that procedures are followed for the discharge of all persons including youth from short-term or long-term incarceration in Dane County into safe and stable housing	Wisconsin Department of Corrections, Madison Police Department, Dane County Sheriff's Office, Madison Area Urban Ministry, Wisconsin Interagency Council to End Homelessness	December 2016 – Ensure procedures in place for incarceration discharge	ONGOING
1.4.2 Ensure that all youth leaving foster care in Dane County have a confirmed plan for safe and stable housing	Dane County Department of Human Services, Wisconsin Interagency Council to End Homelessness	June 2017 – Procedures in place for every youth	ONGOING
1.4.3 Ensure that procedures are followed for the discharge of all persons from hospitals and treatment facilities in Dane County into safe and stable housing	Hospitals, Clinics, Madison Area Urban Ministry, Wisconsin Interagency Council to End Homelessness	December 2017- Procedures in place for every hospitalization discharge	ONGOING

Objective 1.5: Implement and track diversion

Diversion is an emerging best practice that prevents an individual's or family's entry into emergency shelter by finding alternative, immediate and temporary or permanent housing. Although a number of agencies in Dane County are doing this type of work, there is not an agreed upon set of practices that constitute diversion. The implementation of skilled diversion assistance is increasingly showing success in keeping people out of the homeless system and the trauma associated with homelessness, and it is a low-to-no cost intervention. The community of Dane County believes that a coordinated effort and focus on this intervention could significantly reduce the number of people that enter shelter and the homeless system. The opportunity to deliver and/or invest in diversion strategies can engage all mainstream, grassroots, and faith-based provider organizations. HSC will identify resources for training for all organizations that are doing or want to do diversion (1.5.1). There are some concerns with diversion that could be addressed by developing a consensus definition of "diversion" for Dane County (1.5.1). Some diversion strategies may keep persons out of shelters, but may not be safe housing, it may jeopardize the leases of families they are living with, or it may disconnect individuals and families from needed services including access to affordable or supportive housing. The consensus definition of diversion (1.5.1) will determine best practices to be used by case mangers using diversion in Dane County.

Data on the implementation and success of diversion needs to be collected. All agencies trained for diversion will track served households in HMIS (1.5.2) and follow-up with these households to connect them to additional services (tenant, mental health, substance abuse, jobs, etc.) as needed. Diversion is a strategy that bridges prevention and support because it addresses the moment of housing crisis for households. It is the goal of Dane County to divert 35% of households (1.5.3) seeking emergency housing assistance by 2020 in line with national standards. Also in line with these standards, less than 7% of households receiving diversion resources will experience homelessness over the course of two years (1.5.4).

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
1.5.1 Develop a consensus definition of "diversion" and identify resources to pay for training for all organizations that are doing or want to do diversion	Written Standards Committee	January 2017 – Establish consensus definition of "diversion"	2017
	United Way, City of Madison, Dane County, Funders Committee	July 2017 – 25% of case managers will receive diversion Training July 2018 – 50% of case managers will receive diversion training July 2019 – 75% of case managers will receive diversion training	2019
1.5.2 All Agencies receiving training for diversion will track success of diverted households served in HMIS	Data Committee, Agencies using diversion	July 2017 – All publicly funded Continuum of Care agencies January 2019 –All agencies that receive diversion funding	2019
1.5.3 Divert 35% of households that contact any organization that helps people experiencing homelessness into safe and legal living conditions	Data Committee, Agencies using diversion	2017 – 10% Diversion 2018 – 15% Diversion 2019 – 25% Diversion 2020 – 35% Diversion	2020
1.5.4 Ensure that no more than 7% of households served with diversion resources do not experience homelessness again over the course of two years	Data Committee, Agencies using diversion	2019 – 85% Diverted Households remain stably housed 2020 – 93% Diverted Households remain stably housed	2020

Objective 1.6: Prevent homelessness among unaccompanied youth

This plan prioritizes preventing and ending homelessness among unaccompanied youth. Unaccompanied youth are young people (17 and under) who experience homelessness while not in the physical custody of a parent or guardian. These young people left or were forced to leave a home or stable housing due to abuse, neglect, or family conflict. In addition to the traumas associated with homelessness, these youths are also without legal rights (e.g. medical care, housing, financial, etc.), safe places to stay, and face additional risks of sex trafficking. While there is still much to learn about unaccompanied youth in Dane County, there are steps that HSC, youth and young adult organizations, and schools can take to prevent homelessness among these youths. First, youth and young adult organizations and Dane County school districts will form a working group (1.6.1) to explore the causes of youth homelessness and prevention strategies and make actionable recommendations to HSC (1.6.1) and funders by the end of 2016. These efforts should also involve youth forums and the voices of youth or former youth with lived experiences of homelessness. These strategies may include reunification, conflict management/resolution, trauma-informed care, family counseling, mental health counseling, and substance abuse counseling. Schools and youth and young adult organizations such as Briarpatch are best positioned to explore these options to prevent youth homelessness and make actionable recommendations to HSC and funders. The recommendations will be used by HSC to adopt specific strategies, set future benchmarks and strategies, and secure funding during the Annual Plan Analysis (APA).

In addition, Dane County school districts and YYA organizations will continue to collaborate formally to identify barriers and improve access to services (1.6.3) for youth at risk of homelessness. These efforts should include more relationships and connections to area mentoring programs (1.6.3) such as Project Respect, Mentoring Positives, Inc., the Boys & Girls Club of Dane County, Madison Area Urban Ministry, and the University of Wisconsin-Madison. In addition, all organizations that serve or encounter unaccompanied youth should evaluate their programs to determine if they are youth-friendly (1.6.2). This evaluation requires the voices and participation of homeless and formerly homeless youth and when possible should include external voices, such as the Peer & Performance Review Committee. These services and resources should be made available to youth in emergency, transitional, and permanent supportive housing, as well as formerly homeless youth to prevent a return to homelessness.

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
1.6.1 Explore strategies such as reunification, conflict management, and other services to provide recommendations for HSC	Youth and young adult organizations, Dane County school districts, Dane County Department of Human Services, Madison School & Community Recreation	December 2016 – Unaccompanied Youth Prevention Recommendations to HSC	2016
1.6.2 Youth and young adult organizations and other community organizations that serve unaccompanied youth will evaluate their programs for youth friendliness	Youth and young adult organizations, Dane County Department of Human Services	N/A	2017
1.6.3 Youth and young adult organizations and Dane County school districts will partner to identify barriers and improve access to services for youth at risk of homelessness including positive mentoring relationships	Youth and young adult organizations, Dane County school districts, McKinney-Vento district liaisons, Dane County Department of Human Services	N/A	ONGOING

There are additional objectives and strategies to address youth homelessness in Goals 2 & 4--particularly addressing outreach, emergency and transitional shelter, community education, and local/state advocacy.

Goal 2

Support Persons and Families Experiencing Homelessness.

Some persons and families will still continue to experience homelessness in Dane County despite the best prevention and Housing First efforts of the community. These persons and families will be supported in their transition back to safe and secure housing. Key to this goal and the plan is improved collaboration among service and housing providers in Dane County. This collaboration will use an up-to-date Services and Resources Map of Dane County providers in order to establish partnerships, align efforts, and share best practices related to harm reduction, trauma-informed care, and racial equity. The new day resource center will be an important part of the improving access to services and supporting those experiencing homelessness. Improved coordination among street outreach teams and reducing or standardizing screening criteria for housing and services are other parts of improving access to services. The creation of housing stabilization teams to quickly support persons and families who enter shelters will reduce the length of shelter stay. These strategies along with a standardized use of a coordinated entry list will increase rates of placement annually from shelter to permanent housing.

This community plan includes the following specific objectives towards the goal of supporting persons and families experiencing homelessness with a clear pathway to permanent housing:

Objective 1: Improve Collaboration Among Service and Housing Providers
Objective 2: Improve Outreach and Access to Supportive Housing
Objective 3: Increase Rates of Placement from Shelter to Permanent Housing

Goal 2 Action Plan

Objective 2.1: Improve Collaboration Among Service and Housing Providers

Faith-based and grassroots organizations make financial and material contributions to support persons experiencing homelessness such as providing meals, sleeping bags and warm clothing, and rental assistance. Improved collaboration and more community partnerships can help increase awareness of need and available resources. Effective collaboration facilitates the flow of information and relationships that strengthen our response to homelessness. Critical to improving collaboration is mapping the current services and resources (2.1.1) provided by faith-based and grassroots organizations in Dane County. This map will serve four important roles: 1) Identify gaps and needs for persons and families experiencing homelessness in Dane County; 2) Distinguish between efforts that are related to housing stability and those addressing daily and nightly survival needs (2.1.2); 3) Facilitate strategic partnerships and align efforts to better address these needs (2.1.2); 4) Promote relationships between mainstream providers and faith-based/grassroots organizations to provide housing stability services (2.1.3) such as integrated diversion services, coordinated intake, landlord engagement, move-in kits, job training, or tenant services. To further align efforts, grassroots organizations will use VI-SPDAT as a common tool (2.1.3) to evaluate individuals and families for a priority list for housing and other services based on need. The services and resources map (2.1.1) is also part of annual gaps and needs analysis required by the Department of Housing and Urban Development and in HSC by-laws.

Finally, community-wide trainings in best practices such as Harm Reduction, Trauma Informed Care, and Racial Justice (2.1.4) will build capacity for Dane County organizations and improve collaboration among agencies in the provision of services and housing. These trainings should be open to all HSC member organizations, other community organizations, local and state policymakers, law enforcement, and landlords who have committed to working with individuals and families who are experiencing homelessness (see Goal 3, Objective 3).

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
2.1.1 Map the current services and resources provided by mainstream providers, faith-based and grassroots organizations	Community Plan Oversight Committee, Coordinated Entry Committee, Continuum of Care Coordinator	January 2017 – Dane County Services & Resources Map	2017
2.1.2 Mainstream providers, faith-based, and grassroots organizations will meet at least annually to share best practices and/or establish partnerships, align efforts, and collaborate with other in-network organizations that address daily and nightly survival needs	Coordinated Entry Committee, Continuum of Care Coordinator, Shelter Providers Committee, Mainstream providers, Grassroots organizations, Faith-based organizations	N/A	ONGOING
2.1.3 Mainstream providers will engage with faith-based and grassroots organizations to establish partnerships around common efforts focused on coordinated entry and housing stability	Coordinated Entry Committee, Mainstream Providers, Grassroots organizations, Faith-based organizations	December 2018 – All HSC Members will use VI-SPDAT	ONGOING
2.1.4 Provide funding for capacity training opportunities in best practices including Harm Reduction, Trauma Informed Care, and Racial Justice	Funders Committee	N/A	ONGOING

Objective 2.2: Improve Outreach and Access to Supportive Housing

Outreach to persons and families experiencing homelessness is necessary to connect them to emergency shelter or permanent housing. Dane County currently relies on a publicized hotline and several outreach teams from a few agencies, but more can be done to reach the "hidden" homeless. In addition to street outreach, outreach efforts should include individuals and families that are self-paying in motels, couch surfing or living doubled-up. As an important first step, the Written Standards should be updated to specifically lay out best practices in this area (2.2.1). Technology can also benefit outreach efforts. For example, the creation of smartphone apps for those seeking assistance or even specifically for unaccompanied youth can be an innovative approach to improve access to supportive housing. Homelessness among unaccompanied youth and young adults is a growing concern in Dane Count and greater effort at coordinated action to count and collect information about these youth and young adults is the first step. These efforts can be combined with street outreach services (2.2.4) to improve awareness of support services for youth and young adults not in the shelter system. Coordinated street outreach teams for all persons should include those with lived experiences of homelessness and members with mental health training (2.2.4).

The creation of a public and centrally located day resource center (2.2.2) is intended to improve access to support services and housing. The center will include resources such as showers, laundry, and storage and access to supportive services in Madison and Dane County as well as serve as a cooling center in the summer and warming center in the winter. It is important for all Dane County providers—both services and housing—to review and reduce their screening criteria (2.2.3) to reduce barriers for persons and families experiencing homelessness and increase their access to needed services and housing. These reviews should explicitly include a racial equity impact assessment to eliminate racial bias in program or housing criteria. All HSC member organizations should move towards using the VI-SPDAT as a common screening tool for services and housing (2.2.3). This will work to standardize access to housing among all providers and increase use of the priority list.

Housing First decreases the need for emergency and transitional housing. However, transitional housing is still appropriate for young adults, ages 18-24, experiencing homelessness as they may need a period of time in housing to learn the skills needed to maintain a household and be successful in permanent housing. The City of Madison and Dane County should commit to increase the number of designated beds in transitional housing for young adults—both singles and families (2.2.5).

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
2.2.1 Revise the Outreach section and incorporate recommended changes in the Written Standards	Written Standards Committee	June 2017 – Outreach Section revised in the Written Standards	2017
2.2.2 Create a Day Resource Center to provide an accessible public resource for persons and families experiencing homelessness	Dane County, City of Madison, Funders Committee	December 2016 – Secure location and service provider for Day Resource Center	December 2017
2.2.3 All HSC-funded providers will review, reduce, and standardize their screening criteria to increase access and reduce barriers to housing and services including Racial Equity Impact assessments	All Service and Housing Providers, Performance & Peer Review Committee	December 2018 – All HSC members will use VI-SPDAT	December 2018
2.2.4 Create and coordinate street outreach teams to improve awareness and access to supportive housing services in Dane County	Funders Committee, Briarpatch, Veterans Affairs Hospital, Porchlight, City of Madison, Dane County	N/A	ONGOING
2.2.5 Increase local funding for outreach services and transitional housing beds for young adults, ages 18-24	City of Madison Dane County, Funders Committees, Youth and young adult organizations	December 2017 – 24 Beds	ONGOING

Objective 2.3: Increase Rates of Placement from Shelter to Permanent Housing

Emergency shelters exist only for times of crisis in the lives of individuals and families experiencing homelessness. Stays in shelters should be short, infrequent, rare, and non-recurring. A Housing First policy adopted by both the City of Madison and Dane County (see Goal 3) seeks to either keep persons and families out of shelters or move them very quickly into permanent housing with the option of support services. A coordinated entry list was developed by HSC and member organizations to prioritize the placement of individuals and families based on greatest need. It is important that all HSC-funded organizations use and prioritize this list in their housing placements (2.3.1). It's also important to recognize that this list relies more on the HUD definition than the McKinney-Vento definition of homelessness. This may result in some families with children who are living doubled-up or self-paying in motels not being seen as a higher priority. Future changes to the coordinated entry list may help reconcile these sometimes competing definitions and their application in housing placement.

Increasing the availability of affordable housing and permanent supportive housing (see Goal 3) is critical for the success of families and individuals. Many persons and families may also benefit from support services as they exit homelessness. In most cases, under the existing system, case managers and housing navigators and/or locators are housed with one agency and work with persons and families being served by that agency. A promising model exists in which housing stabilization teams (2.3.2) made up of a primary case manager, a housing navigator and/or locator, and other needed service providers that can immediately partner with persons and families when they enter shelter to help them move into permanent housing. It is the goal of this plan to increase rates of placement from shelter to permanent housing by ten percent each year (2.3.3). Data from the Dane County Homeless System "Exits" Map (see Goal 4, Objective 1.3) will be used to measure success of this objective and strategies.

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
2.3.1 Incorporate prioritization of the coordinated entry list in local funding contracts	Coordinated Entry Committee, Funders Committee	December 2017 – 100% prioritization of HSC and partner-funded housing for people coming off the coordinated entry list in order of greatest need	2017
2.3.2 Align funding and organize service teams to provide housing stabilization services for people as soon as they move into shelter to help them move back into permanent housing	Funders Committee, Mainstream Providers	N/A	2019
2.3.3 Increase rates of placement from shelter to permanent housing by 10% each year	All HSC Shelter, Transitional, and Permanent Supportive Housing Providers	June 2017 – Updated Data on Exits *(see Goal 4, Objective 1.3)*	2020

Goal 3

End Homelessness in Dane County.

This plan reflects the adoption of a Housing First approach to ending homelessness by the City of Madison, Dane County, and United Way. The surest way to end homelessness is to provide access to permanent housing to all in need. Housing First also provides voluntary access to support services to decrease the changes of a return to homelessness. Although the steps to prevent homelessness and support persons experiencing homelessness are important in ending homelessness, they will not end homelessness without an increase in the supply of affordable housing. HSC will align and prioritize funding packages for new permanent supportive housing for individuals and families. Private landlords will also be engaged in order to increase access to existing housing units for persons and families at the risk of or experiencing homelessness. Cooperating landlords will be supported with a 24-7 case management hotline and mitigation fund. Special attention will be paid to the federal initiatives to end veteran homelessness (2016), chronic homelessness (2017), and family homelessness (2020). Although these subpopulations are addressed throughout the plan, certified by-name lists and specific coordinators will be responsible for tracking the success of these initiatives in Dane County. This community plan includes the following specific objectives towards the goal of ending homelessness in Madison and Dane County by increasing the supply of affordable housing:

Objective 1: **Realign Funding Structures for Rapid Rehousing**
Objective 2: **Align and Prioritize Capital, Operating, and Service Funding Packages for the Development of New Permanent Supportive Housing**
Objective 3: **Engage Private Landlords to Access Additional Units of Existing Housing**
Objective 4: **End Veteran, Chronic, Families with Children, and Youth Homelessness**

Goal 3 Action Plan

Objective 3.1: Realign Funding Structures for Rapid Rehousing

Rapid Rehousing is a key part of the Housing First approach in Dane County. This model works to move families or individuals experiencing homelessness into permanent housing as quickly as possible, usually with housing location, rental assistance, and supportive services. In the first year of this plan, current funding structures for rapid re-housing can be realigned in order to provide more flexibility and support more individuals (3.1.1) and families (3.1.2) with existing funding. This realignment will allow us to serve 50 more single adults (3.1.1), 50 more families (3.1.2), and 20 more young adults and families (3.1.3). The focus on increasing the number of rapid re-housing slots for families (3.1.2) is part of the federal initiative to end homelessness of families with children by 2020 (See Goal 3, Objective 4.3). The Annual Plan Analysis by HSC (see Goal 4, Objective 2.1) will determine future benchmark of rapid re-housing allotments needed for this objective.

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
3.1.1 Increase or fund new allotments of rapid rehousing assistance for single adults	Porchlight, Salvation Army, Community Action Coalition, Tenant Resource Center	December 2016 – 50 new allotments	ONGOING
3.1.2 Increase or fund new allotments of rapid rehousing assistance for families	Funders Committee, United Way, Veterans Affairs, YWCA, Salvation Army, The Road Home Dane County	December 2016 – 50 new allotments	ONGOING
3.1.3 Increase or fund new allotments of rapid rehousing assistance for young adults, 18-24	Single Adults (Porchlight, Salvation Army), Young Families (United Way)	December 2016 – 20 new allotments	ONGOING

Objective 3.2: Align and Prioritize Capital, Operating, and Service Funding Packages for the Development of New Permanent Supportive Housing

A successful Housing First policy requires an availability of affordable housing and permanent supportive housing in Dane County that cannot be met by realigning Rapid Rehousing funding structures (see Goal 3, Objective 1) and increasing access to existing housing (see Goal 3, Objective 3). City and county housing authorities will continue to support the development and funding of new permanent supportive housing through comprehensive planning and effective zoning changes, affordable housing funds, the Community Development Block Grant (CDBG), tax credits, vouchers, and tax increment financing (TIF). These tools will be used to fund and build new units of housing for single adults (3.2.1) such as the recently opened Rethke Terrace Apartments. This housing development helped address both veteran and chronic homelessness. Some of the new units of future permanent supportive housing for single adults should be set aside for veterans and individuals with severe mental illness. Additional new units should be funded and developed specifically for families (3.2.2) and young adults (3.2.3).

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
3.2.1 Fund 160 new units of permanent supportive housing for single adults	Funders Committee, Community Development Authority, Dane County Housing Authority	2016 - 20 units 2017 – 50 units 2018 – 80 units 2019 – 120 units 2020 – 160 units	2020
3.2.2 Fund 40 new units of permanent supportive housing for families	Funders Committee, Community Development Authority, Dane County Housing Authority	2016 - 5 units 2017 – 10 units 2018 – 20 units 2019 – 30 units 2020 – 40 units	2020
3.2.3 Fund 20 new units of permanent supportive housing for young adults, 18-24	Funders Committee, Community Development Authority, Dane County Housing Authority	2017 - 5 units 2018 - 10 units 2019 - 15 units 2010 - 20 units	2020

Objective 3.3: Engage Private Landlords to Access Additional Units of Existing Housing

Engaging private landlords is a crucial step in increasing access to available housing in the private market. This objective also works with the Housing First and Rapid Rehousing models. It is not enough to rely on the development of new housing. Madison and Dane County is a difficult rental market with historically low vacancy rates and a legal climate that favors landlords over tenants. This plan includes efforts to advocate changes in state landlord-tenant laws (see Goal 4, Objective 3.4), but it is equally important to work with landlords to find housing for persons and families experiencing homelessness. One inducement and support for private landlords who commit to working with formerly homeless person and families is a 24-hour case management hotline (3.3.1). This hotline can be a support to assuage some fears of renting to formerly homeless persons and families and as a tool to reduce evictions. Another inducement and support is to identify and increase funds for a Landlord Mitigation Fund (3.3.2) to guarantee rent payments, cover damages, filing fees, or court costs. With these tools, housing locators and navigators can conduct further county-wide outreach efforts (3.3.3) to landlords to establish commitments for additional units of existing housing. Future efforts can also be made to work with the Apartment Association of South Central Wisconsin (AASCW) to engage more landlords and access more units of existing housing.

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
3.3.1 Establish a 24-hour/7 days a week case management hotline to support landlords who agree to work with formerly homeless individuals and families	TBD	January 2017 – 24/7 Landlord Case Management Hotline	2017
3.3.2 Increase funds for a Landlord Mitigation Fund	Funders Committee, Housing Locators	December 2017 – Increase mitigation funds by 10%	2017
3.3.3 Conduct a landlord-outreach campaign to establish commitments for additional units of existing housing in the private market for people experiencing homelessness	Housing Locators, Housing Navigators	2016 - 60 units 2017 - 125 units 2018 - 185 units	2019

Objective 3.4: End Veteran, Chronic, Families with Children, and Youth Homelessness

The City of Madison and Dane County have joined several federal initiatives to end homelessness among targeted populations. These federal initiatives come with increased funding and increased requirements for HSC in Dane County to focus on specific subpopulations of persons experiencing homelessness including: veterans (3.4.1), chronic homelessness (3.4.2), families with children (3.4.3), and youth homelessness (3.4.4). These initiatives aim to reach a functional zero—or establishment of an efficient community system that ends chronic homelessness and ensures that homelessness for veterans, families with children, and youth is a short, rare, and non-recurring experience. Functional zero also means that no one is forced to live on the streets. The adoption of a Housing First approach, diversion (see Goal 1, Objective 5), and other strategies in this plan all work towards achieving this objective. There are also specific strategies for increasing Rapid Rehousing funds (see Goal 3, Objective 1) and new permanent supportive housing (see Goal 3, Objective 2) for families. Youth homelessness is addressed through community education and prevention efforts (see Goal 1, Objective 6), coordinated street outreach (see Goal 2, Objective 2), and increased advocacy (see Goal 4, Objective 3).

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
3.4.1 End veteran homelessness	City of Madison, Dane County, Veterans Affairs Hospital, Coordinated Entry Committee	December 2016 – Functional zero in veteran homelessness	2016
3.4.2 End chronic homelessness	City of Madison, Dane County, Coordinated Entry Committee	December 2017 – Functional zero in chronic homelessness	2017
3.4.3 End homelessness among families with children	City of Madison, Dane County, United Way, Coordinated Entry Committee	December 2020– Functional zero in families with children homelessness	2020
3.4.4 End youth homelessness	City of Madison, Dane County, Youth and young adult organizations, Coordinated Entry Committee	December 2020 – Functional zero in youth homelessness	2020

Goal 4

Collaborate with Local, State, and National Partners.

Preventing and ending homelessness in Dane County cannot be achieved by HSC and its member organizations alone. It will take strong advocacy and partnerships with other local, state, and national partners. To be successful, this plan begins with reliable data collection. Through the use of common, validated tools such as HMIS or VI-SPDAT, the HSC will know who is being served and the outcomes of service and housing in Dane County. The Community Plan Oversight Committee will administer and routinely evaluate this community plan. It will conduct an Annual Plan Analysis (APA) to recommend changes to the community plan each year. This allows the plan to be adaptive to changing conditions and new issues that may arise. It will also use this data to report successes to the community and policy-makers. Data that demonstrate results and is reported regularly and widely gives funders and policy makers the information they need to make strategic investments. Communities armed with data on what works can be powerful advocates for change. Public education forums and community conversations on key issues such as unaccompanied youth and elderly homelessness mobilize support for funding and increased services. HSC and its member organizations will continue to partner with state and national partners in order to advocate for more funding and effective solutions to ending homelessness. This will involve attending and participating in local, state, and national conferences. It will also include direct advocacy work with local and state government in areas such as reforming landlord-tenant laws, expanding rights for unaccompanied youth, and decriminalizing homelessness. This community plan includes the following specific objectives toward the goal of advocate and collaborating with local, state, and national, partners:

Objective 1: Improve Data Collection and Evaluation
Objective 2: Increase Local Community and Political Will
Objective 3: Establish Partnerships for Advocacy Work

Goal 4 Action Plan

Objective 4.1: Improve Data Collection and Evaluation

Accurate and up-to-date data about who is experiencing homelessness in Dane County can be used to identify needs, inform funding decisions, develop new programs, reform existing programs, celebrate successes, and advocate to generate more community and political support. As a first step, all HSC service and housing providers will be encouraged to use HMIS and VI-SPDAT (4.1.1) to coordinate and track efforts. These common tools are especially helpful in providing useful data because they can help assure that everyone is getting the same assessment and recommended for appropriate services (tenant resources, mental health, substance abuse, jobs, etc.) and housing. HSC will facilitate providing funds and training for agencies to use HMIS (4.1.1). It is also important to find and use other sources of data. Many individuals or families with children living doubled-up or self-paying in motels (McKinney-Vento definition) may be missed by HMIS because they do not meet the Housing and Urban Development (HUD) definition of homeless. In addition, the Data Committee will explore and recommend the use of other, qualitative tools as part of a quarterly review (4.1.2) of system-wide data. These future recommendations should also include system-wide race equity analyses. The Data Committee will also educate and provide training opportunities to member organizations on the role that data can play in funding, evaluating, and meeting the goals of this community plan. The Data Committee and the Performance & Peer Review Committee will use HMIS data to create and maintain an annual assessment of "exits" (4.1.3) in Dane County's homeless support system. This map will identify the housing outcomes for persons and families who are served by emergency shelters, transitional housing, and permanent housing.

One of the most important parts of this plan is the Annual Plan Analysis (APA). Every year, the Community Plan Oversight Committee will evaluate the progress made on this plan using available data from the Data Committee, Performance & Peer Review Committee, and member organizations (4.1.4). The Community Plan Oversight Committee will recommend changes to the plan (4.1.4) including modifying or adding new objectives, strategies or benchmarks as needed. This strategy allows the plan to remain flexible and adaptive to the needs of persons and families experiencing homelessness in Dane County. These changes will be presented annually to the Board of Directors for final approval (4.1.4) and made publicly available each year (see Goal 4, Objective 2.7).

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
4.1.1 All publicly funded HSC member organizations will use HMIS and VI-SPDAT as common tools	Data Committee, HSC member organizations	July 2017 – Continuum of Care publicly funded agencies January 2018 - Everyone else	2018
4.1.2 Review HMIS and other data quarterly to recommend system-wide improvements for data collection	Data Committee	Four (4) data reports annually to HSC Board	ONGOING
4.1.3 Create and maintain an annual assessment of Dane County Homeless System "Exits" Map	Data Committee, Performance & Peer Review Committee, Continuum of Care Coordinator	December 2016 - DCHS Exit Map December 2017 - DCHS Exit Map December 2018 - DCHS Exit Map December 2019 - DCHS Exit Map December 2020 - DCHS Exit Map	ONGOING
4.1.4 Conduct an Annual Plan Analysis (APA) to review outcomes for people experiencing homelessness to make adjustments in the projected need for each objective in this plan and made recommendations for new objectives and strategies	Community Plan Oversight Committee, Data Committee	July 2017 - Annual Plan Analysis July 2018 - Annual Plan Analysis July 2019 - Annual Plan Analysis July 2020 - Annual Plan Analysis	ONGOING

Objective 4.2: Increase Local Community and Political Will

The willingness on the part of communities in Dane County to end homelessness is vital to the success of this effort. To that end, the HSC will revitalize the Community Plan Oversight Committee (4.2.1) to focus on the plan as a whole. One of its most important responsibilities will be to report regularly on plan goals, strategies, and successes to the community and media. Another primary task of the Community Plan Oversight Committee will be to assist in forming an annual common advocacy agenda for HSC (4.2.5) that prioritizes no more than three key items. This agenda will be used to coordinate focused efforts by HSC, its member organizations, and local policymakers on the identified key issues for each year. The Community Plan Oversight Committee will also have other responsibilities as defined in this plan and determined by the HSC Board of Directors.

The City of Madison, Dane County, and United Way have taken steps in recent years towards promising solutions to preventing and ending homelessness including the adoption of Housing First policies. The city included the Affordable Housing Plan as part of the 2015 budget which partners with the Wisconsin Housing and Economic Development Authority (WHEDA) to get federal tax credits for housing developers. A housing development for homeless single adults and veterans opened in summer 2016 and another housing development for homeless families will open in 2018. Dane County has also adopted Housing First policies and increased funding for affordable housing through its Affordable Housing Development Fund. HSC must build on this momentum to increase support and funding to prevent and end homelessness. This requires active advocacy efforts and advocacy begins at home. HSC will either reframe the responsibilities of the existing HSC Legislative Committee or create a new Advocacy Team (4.2.2) for work at the local and state level. This advocacy work should focus on the objectives and strategies in this plan and changes made in the Annual Plan Analysis (See Goal 4, Objective 1.4). It should also be informed by policy challenges and changes as they happen. Specific efforts will be made to ensure that the city and county laws and ordinances do not criminalize homelessness. City, county, and state leaders will be invited to all HSC community conversations and community education events (4.2.6) to increase their knowledge and capacity to act on issues of housing, mental health, substance abuse, and jobs. These community events should include persons with lived experiences of homelessness or at risk of homelessness.

There is always a need to inform and engage the community on issues related to homelessness. An informed community is more equipped to take action and address recognized problems. Many community organizations and schools have established educational opportunities, such as the mobility class from MMSD's Transition Education Program (TEP). These opportunities should continue and be expanded when possible. It is especially important in this plan for the community to be aware of the experiences of unaccompanied youth and young adults who are homeless in Dane County. In addition to the risks associated with being homeless, unaccompanied youth and young adults experience greater risk of physical and sexual abuse, including human trafficking. The participation and voices of these unaccompanied youth and young adults is vital in educating the community in a public education forum(s) (4.2.3) organized by HSC and youth providers in Dane County. This forum should be held in 2017 and youth providers can teach the adult system and interested community members more about the developmental stages of young adulthood and encourage community engagement in mentoring, providing respite homes, and ongoing public awareness. Mainstream, grassroots, and faith-based providers will encourage participation of the greater community and assist young people with lived experiences of homelessness to help build the agenda

and participate. There is also an increasing awareness of elderly persons experiencing homelessness in Dane County. HSC will organize a public education forum by the end of 2017 that includes the specific needs and experiences of elderly homelessness (4.2.4). This forum should include the voices and lived experiences of current and former elderly persons experiencing homelessness. The Community Plan Oversight Committee can recommend future public education forums as part of the Annual Plan Analysis (APA). Finally, the creation and publicizing of this plan (4.2.7) and its annual updates (see Goal 4, Objective 1.4) is another strategy towards increasing community and political will to prevent and end homelessness.

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
4.2.1 Revitalize the Community Oversight Plan Committee to report on progress toward plan goals regularly and widely in the community	HSC Board of Directors	December 2016 - Appointments to and re-formation of the Community Plan Oversight Committee	2016
4.2.2 Assign advocacy role to Legislative Committee or develop a Dane County HSC Advocacy Team	HSC Board of Directors, Legislative Committee	December 2016 - Creation of new Advocacy Team or advocacy role for the Legislative Committee	2016
4.2.3 Host a public education forum about the specific needs and experiences of young people in Dane County who are experiencing or are at risk of homelessness and predatory behavior	Education Committee, Youth and young adult organizations, Dane County school districts	June 2017 – Public Education Forum on Youth and Youth Adult Homelessness	2017
4.2.4 Host a public education forum about the specific needs and experiences of elderly people in Dane County who are experiencing or are at risk of homelessness	Education Committee	June 2018 – Public Education Forum on Elderly Homelessness	2018
4.2.5 Form an annual common advocacy agenda that prioritizes no more than three key items	Legislative Committee or HSC Advocacy Team, HSC Board of Directors	January 2017 - Advocacy Agenda January 2018 - Advocacy Agenda January 2019 - Advocacy Agenda January 2020 - Advocacy Agenda	ONGOING
4.2.6 Organize community engagement and conversations events for local and state policymakers (including legislators) around issues related to homelessness.	Education Committee, Legislative Committee or HSC Advocacy Team	Two (2) community events annually	ONGOING
4.2.7 Prepare, annually update, and make public the Dane County Community Plan to Prevent and End Homelessness	HSC Board of Directors, Community Plan Oversight Committee	September 2016 - Publicize Dane County Plan to Prevent and End Homelessness,	ONGOING

Objective 4.3: Establish Partnerships for Advocacy Work

The collaborative goals of this plan are not limited to members of the Homeless Services Consortium or organizations within Dane County. It involves efforts to collaborate and advocate with state and national partners including regional organizations, state legislators, the federal government, and national non-profits. These partnerships and experiences can connect HSC members to best practices in other cities and states. It's also an opportunity to share what's working in Dane County. Service and housing providers, HSC funders, and those with lived experiences should be encouraged and funded to attend state and national conferences (4.3.2). It is important to send representatives from Dane County with a variety of roles and perspectives to fully benefit from these networking and educational opportunities. HSC will also develop a process for conference attendees to share what they learn with the HSC community, either at board meetings or public community education meetings.

HSC will work with state and regional coalitions including the Wisconsin Coalition Against Homelessness (WCAH) to align advocacy efforts. To support this collaboration, the HSC Board of Directors will appoint a liaison to the WCAH (4.3.1) to coordinate actions and report on efforts to prevent and end homelessness. HSC should also find ways to collaborate with other city, county, and regional organizations in the mental health, employment, and education fields to increase awareness and access to available resources. Working with city, county, regional, and state partners amplifies the voice of Dane County to advocate for much needed funding increases and solutions to prevent and end homelessness in Dane County and in the state of Wisconsin.

Homelessness among unaccompanied youth and youth adults cannot be addressed by local efforts only. There is a need to work with the Wisconsin State Legislature and Wisconsin Department of Children and Families. HSC should work with state legislators and the WI Department of Children and Families to increase the state's budget allocation to support services for runaway and homeless youth (4.3.3). This collaborative work should also support expanding rights for unaccompanied youth, ages 16-17 (4.3.3). This could take the form of specific rights such as marriage, signing contracts, or authorize medical care for self. The HSC Legislative Committee will also work with city and county lobbyists to advocate for increased funding for tenant, mental health, substance abuse, and job training services. The HSC Legislative Committee will advocate at the state level to change landlord-tenant laws with the goal to provide more tenant protections and access to affordable housing (4.3.4). This advocacy should include repealing rental application restrictions and reforming laws regarding the sheltering and housing of unaccompanied youth (4.3.4).

Strategy	Responsible Partner(s)	Benchmark(s)	Target Year
4.3.1 Appoint a designated liaison to the Wisconsin Coalition Against Homelessness (WCAH)	HSC Board of Directors	December 2016 - WCAH Liaison appointed	2016
4.3.2 Encourage and fund providers, funders, and those with lived experiences of homelessness to regularly attend local, state, and national conferences	Funders Committee, Community Plan Oversight Committee, Education Committee	N/A	ONGOING
4.3.3 Work with state legislators and the WI Department of Children and Families to expand rights for unaccompanied youth and increase funding for homeless youth support services	HSC Board of Directors Legislative Committee or HSC Advocacy Team, Youth and young adult organizations, City of Madison and Dane County lobbyists, Wisconsin Association for Homeless and Runaway Services	N/A	ONGOING
4.3.4 Advocate and work with state legislators to change landlord-tenant laws to provide for more tenant protections	Legislative Committee or HSC Advocacy Team, City of Madison and Dane County lobbyists	N/A	ONGOING

APPENDICES

Appendix A HSC Committees, 2016

Community Plan Oversight Committee
Monitor and report annual results on Action Steps in the Community Plan; responsible for planning five (5) year community process to review goals and objectives to ensure that they continue to reflect current and future activities. **Chair: Linette Rhodes, 608-261-9240**

Continuum of Care Homeless Assistance Application Committee
Advise the Board of Directors on annual application requirements and propose projects for inclusion in federal application for funds. **Chair: Karla Jameson, 608-257-2534**

Coordinated Entry Committee
Advise the Board of Directors on issues related to planning, implementing and evaluating the activities of the local coordinated intake and assessment system. **Chair: Rachel Kaiser, 608-246-4730, ext. 216**

Data Committee
Advise the Board of Directors on issues related to managing the local homeless management information system (HMIS) and representing local interests at the state and federal level. **Chairs: Melissa Sorenson, 608-250-2227 and Sarah Lim, 608-222-7311**

Education Committee
Educate the public and provide data to the press on local efforts to serve the Dane County homeless population. **Chair: Garrett Lee, 608-445-3096**

Funders Committee
Provide a forum for public and private funders of housing and services targeted to homeless and at-risk persons to share information and coordinate activities as possible. **Chair: Martha Cranley, 608-246-4353**

Legislative Committee
Monitor and respond to proposed federal, state and local legislation and educate members of the HSC on issues affecting the homeless population. **Chair: Brenda Konkel, 608-257-0143**

Mainstream Resources Committee
Coordinate efforts of local service providers in accessing mainstream resources for all clients being served by the HSC. **Chair: Melissa Mennig, 608-294-7998**

Nominating Committee
The Chair of the Nominating Committee will be appointed by the President of the Board of Directors. Recruit a broad spectrum of potential Board of Director candidates, solicit interested persons and review qualifications in order to present a ballot at the Annual Meeting of potential Board members. **Chair: Vacant**

Performance & Peer Review Committee
Conduct peer reviews of programs funded through Continuum of Care and ESG funds to ensure that high quality programs are available to serve homeless and persons at risk of homelessness; committee will advise the Continuum of Care Homeless Assistance Application Committee and the Board of Directors in prioritizing and selecting programs for inclusion in funding applications. **Chair: Karla Jameson, 608-257-2534**

Point-In-Time Committee
Coordinate efforts to implement the semi-annual sheltered and unsheltered counts; advise the Board of Directors on issues related to HUD requirements for the PIT counts. **Chair: Linette Rhodes, 608-261-9240**

Shelter Providers Committee
Advise the Board of Directors on issues related to the operation of the emergency shelter system including unmet needs; provide forum for shelter providers to improve coordinated efforts to move homeless persons out of homelessness as soon as possible. **Chair: Kristin Rucinski, 608-294-7998**

Written Standards Committee
Advise the Board of Directors on issues related to updating the current Written Standards for Providing Assistance to Homeless and At-Risk Persons in Dane County. **Chairs: Torrie Kopp-Mueller, 608-257-1436 and Maggie Carden, 608-807-1381**

Appendix B *HSC Members*

Access Community Health Centers

Phone: 608-443-5500(Admin)   **Phone: 608-443-5480 (Medical)**

www.accesscommunityhealthcenters.org   **Phone: 608-443-5482 (Dental)**

William T Evjue Clinic	**Joyce & Marshall Erdman Clinic**	**Wingra Family Clinic**	**Sun Prairie Clinic**
3434 E. Washington Avenue	2202 S. Park Street	1102 South Park St	1270 W. Main Street
Madison, WI 53704	Madison, WI 53713	Madison, WI 53715	Sun Prairie, WI 53590
Medical, Dental, Behavioral	Medical, Dental, Behavioral Health,	Medical, Behavioral	Dental
Health, Pharmacy Services	Pharmacy Services	Health, Pharmacy Services	

Loving, Ken	CEO	608-443-5500	ken.loving@accesshealthwi.org
Quall, Tammy	Chief Strategy Officer	608-443-5500	tammy.quall@accesshealthwi.org
Valencia, Sarah	Medical Clinical Operations Director	608-443-5500	sarah.valencia@accesshealthwi.org

AIDS Resource Center of Wisconsin (ARCW)

600 Williamson Street, Suite H   **Phone: 608-252-6540**

Madison, WI 53703   www.arcw.org

Johnson, Laura	Director of Case Management	608-316-8618	laura.johnson@arcw.org
Kordsmeier, Katie	Chief Strategy Officer	414-461-7672	katie.kordsmeier@arcw.org
Lautenbach, Bryan	Housing Case Manager	608-316-8604	bryan.lautenbach@arcw.org

ARC Community Service, Inc.

1409 Emil Street Suite 100   **Phone: 608-283-6426**

Madison, WI 53713

Briggs, Norman	Director of AODA Services	608-278-2300	nbriggs@arccommserv.com
Brown, Stephanie	Case Manager	608-283-6426	sbrown@arccommserv.com
Doby, Beth	Intake Specialist	608-283-6426	edoby@arccommserv.com
Juve, Samantha	Case Manager/Care Coordinator	608-283-6426	sjuve@arccommserv.com
Parker, Laura	Program Manager	608-283-6426	laurap@arccommserv.com
Wareham, Angie	Program Manager	608-283-6426	awareham@arccommserv.com

Baldwin, Senator Tammy

717 Hart Senate Office Building   **Phone: 202-224-5653**

Washington DC 20510   www.baldwin.senate.gov

Brian Conlan	Contact Staff	202-224-5653	brian_conlan@baldwin.senate.gov

Bethel Homeless Support Services

312 Wisconsin Avenue   www.bethel-madison.org/homeless-support-services
Madison, WI 53703

Sorensen, Scot	Senior Pastor	608-257-3577 x326	scot@bethel-madison.org
Van De Weerd, Skyler	Associate Coordinator	608-217-6575	skyler@bethel-madison.org
Wild, Conner	Coordinator	608-421-3127	homelessministry@bethel-madison.org
Wilson, Mark	Director	608-214-8533	mwilsonbethelsupport@gmail.com

Briarpatch Youth Services, Inc.

2720 Rimrock Road   **Phone: 608-245-2550**
Madison, WI 53713   **Crisis Line: 608-251-1126**
          www.briarpatch.org

Bednarowski, Joe	Development & IT Director	608-245-2550 x1306	joe.bednaowrski@briarpatch.org
Behrend, Casey	**Executive Director**	608-245-2550 x1212	casey.behrend@briarpatch.org
Braun, Lauren	Volunteer Coordinator	608-245-2550 x1230	libby.lee@briarpatch.org
Hammond, Mary Jo	Youth Counselor	608-245-2550 x1316	maryjo.hammond@briarpatch.org
Kiefer, Jay	Program Director	608-245-2550 x1307	jay.kiefer@briarpatch.org
Merkle, McKenzie	Youth Counselor	608-251-1126 x1238	mckenzie.merkle@briarpatch.org
Schneider, Erika	Case Manager	608-245-2550 x1196	erika.schneider@briarpatch.org
Schneider, Jeanne	Briarpatch Coordinator	608-245-2550 x1208	jeanne.schneider@briarpatch.org
Schueffner, Tyler	Street Outreach & TLP Coordinator	608-669-4728	tyler.schueffner@briarpatch.org
Sereno, Robin	Street Outreach Specialist	608-245-2550	robin.sereno@briarpatch.org
Simmons, Deona	Case Manager	608-245-2550 x1111	deona.simmons@briarpatch.org
Tricker, Bryan	TLP Case Manager	608-245-2550	bryan.tricker@briarpatch.org

Cambridge Area Resource Team (CART), Inc

223 Jefferson Street, Suite 1   **Phone: 608-423-1423**
Cambridge, WI 53523

Vasby, Judy	Staff Volunteer	608-423-1423	cartforhelp@gmail.com

Catholic Multicultural Center

1862 Beld Street   **Phone: 608-441-3248**
Madison, WI 53713   **www.cmcmadison.org**

Maurice, Steve	Assistant Director	608-441-3248	www.cmcmadison.org

City of Madison, Civil Rights

Department of Civil Rights
City County Building
210 Martin Luther King, Jr. Boulevard
Madison, WI 53703

Phone: 608-266-4082
www.cityofmadison.com/dcr

| Davis, Norman | Manager AA Division | 608-267-8759 | ndavis@cityofmadison.com |

City of Madison, Community Development Division

Madison Municipal Building, Room 225
215 Martin Luther King, Jr. Boulevard, P.O. Box 2627
Madison, WI 53701-2627

Phone: 608-266-6520
www.cityofmadison.com/cdbg

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City of Madison, Mayor's Office

City County Building, Room 403
210 Martin Luther King, Jr. Boulevard
Madison, WI 53701

Phone: 608-266-4611
www.cityofmadison.com/mayor

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Rottman, Monica	Scheduler for Mayor's Calendar	608-266-4611	mrottman@cityofmadison.com
Soglin, Paul	**Mayor**	608-266-4611	mayor@cityofmadison.com

City of Madison, Housing Operations

Madison Municipal Building,
Room 120
215 Martin Luther King, Jr. Boulevard
Madison, WI 53701

East – 9 Straubel Court, Madison, WI 53704
Triangle – 702 Braxton, Madison, WI 53705
West – 540 West Olin, Madison, WI 53715
Phone: 608-266-4675
www.cityofmadison.com/formshousing/index.html

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Spaeni, Sally Jo	Triangle Housing Manager	608-266-4381	sspaeni@cityofmadison.com

City of Madison, Library

201 W. Mifflin Street
Madison, WI 53703

Phone: 608-266-6300
www.madisonpubliclibrary.org

Central Library Case Managers		See Porchlight for Library Case Manager listings	
Mettauer, Lisa	Outreach Librarian Central Library	608-266-6359	lmettauer@madisonpubliclibrary.org
Reserve a community room		608-266-6363	

City of Madison, Parks

City County Building, Rm 104
210 Martin Luther King, Jr. Boulevard
Madison, WI 53703
Phone: 608-266-4711
www.cityofmadison.com/parks

Mall/Concourse Maintenance
120 S. Fairchild
Madison, WI 53703

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Schmitt, Josh	Park Ranger Supervisor	608-261-9295	jschmitt3@cityofmadison.com

City of Madison, Police

211 South Carroll Street
Madison, WI 53703

Phone: 608-266-4275 (non-emergency)
www.madisonpolice.com

Krueger Favour, Jennifer	Central District Lt	608-209-2217	jkriegerfavour@cityofmadison.com
McLay, Jennifer	State Street/Capital Square Neighborhood Officer	608-576-7161	jmclay@cityofmadison.com

Community Action Coalition for South Central Wisconsin, Inc. (CAC)

Phone: 608-246-4730
www.cacscw.org

1717 Stoughton Road
Madison, WI 53704-2605

114 E. Main Street
Watertown, WI 53094

2312 N. Grandview Blvd, 102
Waukesha, WI 53188

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Zeinenger, Katie	Housing Navigator	608-246-4730 x224	katiez@cacscw.org

Community Meal Program

Luke House (lunch / dinner)
310 S. Ingersoll
Madison, WI 53703

Phone: 608-256-MEAL
www.lukehousemadison.org

Ashe, Paul	Coordinator	608-256-6325	ptashe1@aol.com

Cornucopia, Inc.

2 S. Ingersoll Street
Madison, WI 53703

Phone: 608-249-7477

Herro, Karen	Executive Director	608-444-4952	kaherro@gmail.com

Dane County, Aging & Disability

Resource Center
2865 N. Sherman Ave
Madison, WI 53704

Phone Resource/Referral: 608-240-7400
Phone Reception Line: 608-240-7474
www.daneadrc.org

Dane County Dept. of Human Services, Emergency Assistance Grant

Phone: 608-288-2460
https://www.danecountyhumanservices.org/Employment/emergency_assistance.aspx

Dane County, Office of Economic & Workforce Development

Rm 421, City County Building **Phone: 608-266-4114**
210 Martin Luther King Jr. Blvd. **www.countyofdane.com**
Madison, WI 53703

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Wuthrich, Jenna	CDBG/HOME Program Specialist	608-283-1382	wuthrich@countyofdane.com

Dane County, County Executive's Office

City-County Building, Rm 421 **Phone: 608-266-4114**
210 Martin Luther King Jr. Blvd. **www.co.dane.wi.us**
Madison, WI 53703

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Dane County Housing Authority

2001 W. Broadway #1 **Phone: 608-224-3636**
Monona, WI 53713-3707 **www.dcha.net**

Dicke, Rob	**Executive Director**	608-224-3636 x23	rdicke@dcha.net
Lange, Misty	Section 8 Coordinator	608-224-3636 x25	mlange@dcha.net

Dane County Department of Human Services

Department of Human Services **Phone: 608-242-6200**
1202 Northport Drive **www.danecountyhumanservices.org**
Madison, WI 53704

ADMINISTRATION

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ADULT COMMUNITY SERVICES DIVISION

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Grabot, Mary	Mental Health Community Services Manager	608-242-6484	grabot@countyofdane.com
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Simon, Carrie	Mental Health Program Specialist	608-242-6468	simon@countyofdane.com

JOINING FORCES FOR FAMILIES (JFF)

Anderson, Erica	Allied Drive JFF	608-261-9764	andersonl.erica@countyofdane.com
Blankenhagen, Bob	Waunakee/DeForest JFF	608-846-2016	blankenhagen@countyofdane.com
Bruce, Michael	Southwest JFF	608-273-6622	bruce@countyofdane.com
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Department of Human Services
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ECONOMIC ASSISTANCE & WORK SERVICES

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Dane County Parent Council, Inc.

2096 Red Arrow Trail   **Phone: 608-275-6740**
Madison, WI 53711   **www.dcpcinc.org**

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Dane County Veteran's Services

Veteran's Services   **Phone: 608-266-4158**
City County Building, Rm 108   **www.countyofdane.com/veterans**
210 Martin Luther King Jr. Blvd
Madison, WI 53703

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Domestic Abuse Intervention Services (D.A.I.S.)

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www.abuseintervention.org

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Phone: 608-251-4445 Help Line/Shelter
FAX: 608-284-2134

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Employment Resources, Inc. (ERI)

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FACES, Inc.

Phone: 608-446-0667   http://facesnpo.org

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Fair Housing Center of Greater Madison

612 W. Main Street, Ste 200   **Phone: 608-257-0853**
Madison, WI 53703   **www.fairhousingwisconsin.com**

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First United Methodist Church – Outreach Ministries

203 Wisconsin Avenue   **Phone (Food Pantry/Financial Assistance):**
Madison, WI 53703   **608-251-4407**
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Friends of the State Street Family

Outreach Line: 608-535-9394   http://friendsofthestatestreetfamily.org

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Fleming, Tami Miller Chair & Director of Operations   tamoraamiller@aol.com
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Goodwill Industries of South Central WI, Inc.

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Madison, WI 53714   **www.goodwillscwi.org**

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Group Health Cooperative of South Central WI, Inc.

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Madison, WI 53744   **www.ghcscw.com**

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HEALTH Program (Meriter Unity Point Health Foundation)

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202 S. Park Street
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Heartland Alliance, Inc.

208 S. LaSalle Street $1818
Chicago, IL 60604

Phone: 312-629-4500 Heartland Housing
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Madison, WI 53744-6550
Phone: 608-251-8881 (Intake)
www.hopehavenhelps.org

Hope Haven
3602 Memorial Drive
Madison, WI 53704

Chris Farley House
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Phone: 608-807-5203 (Madison)

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Legal Action of Wisconsin, Inc.

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Madison, WI 53713		**www.emum.org**	
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Madison Dental Initiative

http://mdidental.org

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Madison Homelessness Initiative

http://www.community-stewardship.org/projects/madison-homelessness-initiative/

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Madison Metropolitan School District

Transition Education Program (TEP)		**Phone: 608-204-2272**	
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Madison, WI 53703			
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Middleton Cross Plains Area School District

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Middleton, WI 53562		**www.mcpasd.k12.wi.us**	
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Middleton, WI 53562

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National Alliance on Mental Illness (NAMI)

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Madison, WI 53704

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www.namidanecounty.org

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Occupy Madison

c/o Center for Community Stewardship
30 N. Hancock, Madison, WI 53703

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Porchlight, Inc.

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Madison, WI 53715	4006 Nakoosa Trail	116 W. Washington	1490 Martin Street
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DIGS Program	Phone: 241-9447	Madison, WI 53703	Phone: 608-255-4401
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Port St. Vincent de Paul

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Madison, WI 53703   **www.svdpmadison.org**

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Project Babies

2850 Dairy Drive   **Phone: 608-770-2049**
Madison, WI 53718   **http://projectbabies.org/contact.html**

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RSVP Vets Helping Vets Program

517 N Segoe Rd, Suite 300   **Phone: 608-238-7901**
Madison, WI 53705

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Respite Center Program of Center for Families

2120 Fordem Avenue #180   **Phone: 608-244-5700**
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The Road Home Dane County

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The Salvation Army of Dane County

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Phone: 1-855-510-2323 (Family Intake)
www.salvationarmydanecounty.org

3030 Darbo Drive
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Second Harvest Foodbank of Southern Wisconsin

2802 Dairy Dr.
Madison, WI 53718

Phone: 1-888-794-5556
www.secondharvestmadison.org

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Seton House

1301 Williamson Street
Madison, WI 53703

Phone: 608-819-1061
www.svdpmadison.org

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Social Security Administration

6011 Odana Road
Madison, WI 53719-1101

Phone: 614-551-6792
www.ssa.gov

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Society of St. Vincent de Paul

2033 Fish Hatchery Road
(Administrative Office & Service Center)
P.O. Box 259686
Madison, WI 53725
Phone: 608-442-7200 (Admin)
www.svdpmadison.org

Food Pantry & Service Center 608-257-0919
Pharmacy 608-257-0919
General Store Operations 608-278-2920

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Stetenfeld, Ernie	Associate Director	608-442-7200	earnie@svdpmadison.org

Stoughton Area Resource Team, Inc. (START)

248 W. Main Street
Stoughton, WI 53589

Phone: 608-577-5650
www.startstoughton.org

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Stoughton United Methodist Ministries

525 Lincoln Avenue
Stoughton, WI 53589

Phone: 608-577-5650

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Muller, Linda	Board of Directors Co-President	608-576-6374	SM@charter.net
Schroeder, Sherri	Intensive Case Manager	608-873-3273	sherrischroeder422@gmail.com

Tellurian UCAN

300 Femrite Drive
Monona, WI 53716
Phone: 608-222-7311 (Femrite)
Phone: 608-222-7311 (SOS)
Phone: 608-258-3446
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www.tellurian.org

Community Intervention Team
1053 Williamson Street
Madison, WI 53703
Phone: 608-712-3589

Detox Center
2914 Industrial Drive
Madison, WI 53713
Phone: 608-223-3311

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Tenant Resource Center

1202 Williamson Street Suite 102
Madison, WI 53703
Phone: 608-257-0143 Business

Phone: 608-257-2799 Mediation
Phone: 608-257-0006 Counseling
www.tenantresourcecenter.org

Ask TRC			asktrc@tenantresourcecenter.org
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United Way of Dane County

2059 Atwood Avenue, P.O. Box 7548
Madison, WI 53707

Phone: 608-246-4350
www.uwdc.org

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Room Reservation		608-246-4350	roomreservation@uwdc.org

University of Wisconsin Police

1429 Monroe Street
Madison, WI 53711

Phone: 608-262-8088
www.uwpd.wisc.edu

Meinholz, Tricia	Lower Campus Community Officer	608-212-2698	tmeinholz@wisc.edu

Vegan Haven Central, Inc.

Elkinton, Cheryl	**President and CEO**	veganhavencentralinc1@gmail.com

Veterans Assistance Foundation

4201 Green Avenue
Madison, WI 53714
Phone: 608-269-0234
www.veteransassistance.org

P.O. Box 610
Tomah, WI 54660

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Piaro, Robert	**CEO**	262-692-6333	bob.piaro@vafvets.org
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Veterans Medical Center

William S. Middleton Memorial Hospital
Homeless Programs
345 W. Washington Avenue #501
Madison, WI 53703

Phone: 608-280-2095
Walk In Referrals: 8-10 am, M-F
www.madison.va.gov

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WisCARES

1312 Culmen Street
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Wisconsin Department of Administration

Division of Energy, Housing & Community Resources		**Phone: 608-266-1018**	
101 E. Wilson Street, P.O. Box 7970		**FAX: 608-266-5381**	
Madison, WI 53707-7970		**http://housing.wi.gov**	
		ETH invoices@wisconsin.gov	

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Marks, Lisa	**Division Administrator**	608-267-0770	lisa.marks@wi.gov
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Wisconsin Department of Public Instruction

Education for Homeless Children and Youth	**Phone: 608-261-6322**	
P.O. Box 7841	**FAX: 608-267-9142**	
125 S. Webster Street	**www.dpi.wi.gov/homeless/**	
Madison, WI 53707-7841		

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Wisconsin Department of Veteran Affairs

201 W. Washington Avenue	**Phone: 608-266-1311**	
Madison, WI 53703	**www.dva.state.wi.us**	

Lillis, Nicole	Veterans Assistance Program	nicole.lillis@dva.state.wi.us

Y.W.C.A. of Madison

101 E. Mifflin Street	**608-316-6888 RIDELINE**	
Madison, WI 53703	**FAX: 608-257-1439**	
Phone: 608-257-1436 (option 2)	**www.ywcamadison.org**	

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Empowerment Center
3101 Latham Drive
Madison, WI 53713

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Appendix C Implementation Framework

Responsible Partner	Goal	Strategy	Target Date
HSC Board of Directors	**GOAL 4**	Revitalize the Community Oversight Plan Committee to report on progress toward plan goals regularly and widely in the community (4.2.1)	**DECEMBER 2016**
	GOAL 4	Assign advocacy role to Legislative Committee or develop a Dane County HSC Advocacy Team (4.2.2) *Legislative Committee*	**DECEMBER 2016**
	GOAL 4	Appoint a designated liaison to the Wisconsin Coalition Against Homelessness (WCAH) (4.3.1)	**DECEMBER 2016**
	GOAL 4	Form an annual common advocacy agenda that prioritizes no more than three key items (4.2.5) *Legislative Committee or HSC Advocacy Team*	**JANUARY - ANNUAL**
	GOAL 4	Prepare, annually update, and make public the Dane County Community Plan to Prevent and End Homelessness (4.2.7) *Community Plan Oversight Committee*	**JULY - ANNUAL**
	GOAL 4	Work with state legislators and the WI Department of Children and Families to expand rights for unaccompanied youth and increase funding for homeless youth support services (4.3.3) *Legislative Committee OR HSC Advocacy Team, Youth and young adult organizations, City of Madison and Dane County lobbyists, Wisconsin Association for Homeless and Runaway Services*	**ONGOING**
HSC Continuum of Care Coordinator	**GOAL 1**	Conduct a focus group/survey of persons with lived experiences of homelessness to identify barriers to tenant services and recommend ways to improve access to these services. (1.1.1) *Community Plan Oversight Committee, Tenant Resource Center, Legal Action of Wisconsin*	**DECEMBER 2016**
	GOAL 2	Map the current services and resources provided by faith-based and grassroots organizations (2.1.1) *Community Plan Oversight Committee, Coordinated Entry Committee*	**JANUARY 2017**
	GOAL 1	Conduct a focus group/survey of diverse people (race, age, gender, family/single, LGBT, etc.) with lived experience of homelessness to identify barriers to mental health and substance abuse services and recommend ways to improve access to these services (1.2.1) *Community Plan Oversight Committee, MACH OneHealth*	**JUNE 2017**
	GOAL 1	Conduct a focus group/survey of diverse people (race, age, gender, family/single, LGBT, etc.) with lived experience of homelessness to identify barriers to finding affordable housing and jobs and recommend ways to improve access to these resources (1.3.1) *Community Plan Oversight Committee*	**DECEMBER 2017**

RESPONSIBLE PARTNER	GOAL	STRATEGY	TARGET DATE
HSC Continuum of Care Coordinator *(continued)*	GOAL 4	Create and maintain an annual assessment of Dane County Homeless System "Exits" Map (4.1.3) *Performance & Peer Review Committee, Data Committee*	**DECEMBER-ANNUAL**
	GOAL 2	Mainstream providers, faith-based and grassroots organizations will meet at least annually to share best practices and/or establish partnerships, align efforts, and collaborate with other in-network organizations that address daily and nightly survival needs (2.1.2) *Shelter Providers Committee, mainstream providers, grassroots organizations, faith-based organizations, Coordinated Entry Committee*	**ONGOING**
HSC Community Plan Oversight Committee	GOAL 1	Conduct a focus group/survey of persons with lived experiences of homelessness to identify barriers to tenant services and recommend ways to improve access to these services. (1.1.1) *Continuum of Care Coordinator, Tenant Resource Center, Legal Action of Wisconsin*	**DECEMBER 2016**
	GOAL 2	Map the current services and resources provided by faith-based and grassroots organizations (2.1.1) *Continuum of Care Coordinator, Coordinated Entry Committee*	**JANUARY 2017**
	GOAL 1	Conduct a focus group/survey of diverse people (race, age, gender, family/single, LGBT, etc.) with lived experience of homelessness to identify barriers to mental health and substance abuse services and recommend ways to improve access to these services (1.2.1) *Continuum of Care Coordinator, MACH OneHealth*	**JUNE 2017**
	GOAL 1	Conduct a focus group/survey of diverse people (race, age, gender, family/single, LGBT, etc.) with lived experience of homelessness to identify barriers to finding affordable housing and jobs and recommend ways to improve access to these resources (1.3.1) *Continuum of Care Coordinator*	**DECEMBER 2017**
	GOAL 4	Conduct an Annual Plan Analysis (APA) to review outcomes for people experiencing homelessness to make adjustments in the projected need for each objective in this plan and made recommendations for new objectives and strategies (4.1.4) *Data Committee*	**JULY - ANNUAL**
	GOAL 4	Prepare, annually update, and make public the Dane County Community Plan to Prevent and End Homelessness (4.2.7) *HSC Board of Directors*	**ONGOING**
	GOAL 4	Encourage and fund providers, funders, and those with lived experiences of homelessness to regularly attend local, state, and national conferences (4.3.2) *Funders Committee, Education Committee*	**ONGOING**
HSC Continuum of Care Homeless Assistance Application Committee	GOAL 1	Hire more mental health and substance abuse case managers and counselors to decrease wait time when clients are ready for service and create case management plans while on waitlist (1.2.2) *Mental health and AODA providers, Dane County Human Services*	**ONGOING**

RESPONSIBLE PARTNER	GOAL	STRATEGY	TARGET DATE
HSC Coordinated Entry Committee	GOAL 2	Map the current services and resources provided by faith-based and grassroots organizations (2.1.1) *Continuum of Care Coordinator, Community Plan Oversight Committee*	**JANUARY 2017**
	GOAL 2	Incorporate prioritization of the coordinated entry list in local funding contracts (2.3.1) *Funders Committee*	**DECEMBER 2017**
	GOAL 3	End homelessness among veterans, chronic, families with children, and youth (3.4.1-3.4.4) *City of Madison, Dane County, Veteran Affairs Hospital, United Way, Youth and young adult organizations*	**2016 2017 2020**
	GOAL 2	Mainstream providers, faith-based and grassroots organizations will meet at least annually to share best practices and/or establish partnerships, align efforts, and collaborate with other in-network organizations that address daily and nightly survival needs (2.1.2) *Shelter Providers Committee, mainstream providers, grassroots organizations, faith-based organizations, Continuum of Care Coordinator*	**ONGOING**
	GOAL 2	Mainstream providers will engage with faith-based and grassroots organizations to establish partnerships around common efforts focused on coordinated entry and housing stability (2.1.3) *Mainstream providers, Grassroots organizations, Faith-based organizations*	**ONGOING**
HSC Data Committee	GOAL 4	All publicly funded HSC member organizations will use HMIS and VI-SPDAT as common tools (4.1.1) *HSC member organizations*	**2018**
	GOAL 1	All Agencies receiving training for diversion will track success of diverted households served in HMIS (1.5.2) *Agencies using diversion*	**2019**
	GOAL 1	Divert 35% of households that contact any organization that helps people experiencing homelessness into safe and legal living conditions (1.5.3) *Agencies using diversion*	**2020**
	GOAL 1	Ensure that no more than 7% of households served with diversion resources do not experience homelessness again over the course of two years (1.5.4) *Agencies using diversion*	**2020**
	GOAL 4	Conduct an Annual Plan Analysis (APA) to review outcomes for people experiencing homelessness to make adjustments in the projected need for each objective in this plan and made recommendations for new objectives and strategies (4.1.4) *Community Plan Oversight Committee*	**JULY - ANNUAL**
	GOAL 4	Create and maintain an annual assessment of Dane County Homeless System "Exits" Map (4.1.3) *Performance & Peer Review Committee, Continuum of Care Coordinator*	**DECEMBER- ANNUAL**
	GOAL 4	Review HMIS and other data quarterly to recommend system-wide improvements for data collection (4.1.2)	**ONGOING**

Responsible Partner	Goal	Strategy	Target Date
HSC Education Committee	GOAL 4	Host a public education forum about the specific needs and experiences of young people in Dane County who are experiencing or are at risk of homelessness and predatory behavior (4.2.3) *Youth and young adult organizations, Dane County school districts*	**2017**
	GOAL 4	Host a public education forum about the specific needs and experiences of elderly people in Dane County who are experiencing or are at risk of homelessness and predatory behavior (4.2.4)	**2018**
	GOAL 4	Organize community engagement events and conversation events for local and state policymakers (including legislators) around issues related to homelessness (4.2.6) *Legislative Committee OR HSC Advocacy Team*	**ANNUAL**
	GOAL 4	Encourage and fund providers, funders, and those with lived experiences of homelessness to regularly attend local, state, and national conferences (4.3.2) *Community Plan Oversight Committee, Funders Committee*	**ONGOING**
HSC Funders Committee	GOAL 3	Fund 20 new units of permanent supportive housing for single adults and 5 new units for families (3.2.1-3.2.2) *Community Development Authority, Dane County Housing Authority*	**2016**
	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for families including 50 new allotments by December 2016 (3.1.2) *United Way, Veterans Affairs, YWCA, Salvation Army, The Road Home Dane County*	**DECEMBER 2016 & ONGOING**
	GOAL 1	Incorporate eviction best practices in local government contracts and require documentation of efforts to prevent eviction in non-profit, affordable, and subsidized housing (1.1.4)	**2017**
	GOAL 3	Increase funds for a landlord mitigation fund starting with a ten percent increase by December 2017 (3.3.2) *Housing locators*	**2017**
	GOAL 3	Fund 30 new units of permanent supportive housing for single adults, 5 new units for families, and 5 new units for young adults, 18-24 (3.2.1-3.2.3) *Community Development Authority, Dane County Housing Authority*	**2017**
	GOAL 2	Create a Day Resource Center to provide an accessible resource for persons and families experiencing homelessness (2.2.2) *Dane County, City of Madison*	**DECEMBER 2017**
	GOAL 2	Incorporate prioritization of the coordinated entry list in local funding contracts (2.3.1) *Coordinated Entry Committee*	**DECEMBER 2017**
	GOAL 3	Fund 30 new units of permanent supportive housing for single adults, 10 new units for families, and5 new units for young adults, 18-24 (3.2.1-3.2.3) *Community Development Authority, Dane County Housing Authority*	**2018**

Responsible Partner	Goal	Strategy	Target Date
HSC Funders Committee *(continued)*	GOAL 1	Identify resources to pay for training for all organizations that are doing or want to do diversion (1.5.1) *United Way, City of Madison, Dane County*	**2019**
	GOAL 2	Align funding and organize service teams to provide housing stabilization services for people as soon as they move into shelter to help them move back into permanent housing (2.3.2) *Mainstream providers*	**2019**
	GOAL 3	Fund 40 new units of permanent supportive housing for single adults, 10 new units for families, and 5 new units for young adults, 18-24 (3.2.1-3.2.3) *Community Development Authority, Dane County Housing Authority*	**2019**
	GOAL 3	Fund 40 new units of permanent supportive housing for single adults, 10 new units for families, and 5 new units for young adults, 18-24 (3.2.1-3.2.3) *Community Development Authority, Dane County Housing Authority*	**2020**
	GOAL 2	Provide funding for capacity training opportunities in best practices including Harm Reduction, Trauma Informed Care, and Racial Justice	**ONGOING**
	GOAL 2	Create and coordinate street outreach teams to improve awareness and access to supportive housing services in Dane County (2.2.4) *Briarpatch, Veterans Affairs Hospital, Porchlight, City of Madison, Dane County*	**ONGOING**
	GOAL 2	Increase local funding for outreach services and transitional housing beds for young adults, 18-24 including 24 new beds by December 2017 (2.2.5) *City of Madison, Dane County, Youth and young adult organizations*	**ONGOING**
	GOAL 4	Encourage and fund providers, funders, and those with lived experiences of homelessness to regularly attend local, state, and national conferences (4.3.2) *Community Plan Oversight Committee, Education Committee*	**ONGOING**
HSC Legislative Committee	GOAL 4	Assign advocacy role to Legislative Committee or develop a Dane County HSC Advocacy Team (4.2.2) *HSC Board of Directors*	**DECEMBER 2016**
	GOAL 4	Form an annual common advocacy agenda that prioritizes no more than three key items (4.2.5) *HSC Board of Directors*	**JANUARY - ANNUAL**
	GOAL 4	Organize community engagement events and conversation events for local and state policymakers (including legislators) around issues related to homelessness (4.2.6) *OR HSC Advocacy Team with Education Committee*	**ONGOING**
	GOAL 4	Work with state legislators and the WI Department of Children and Families to expand rights for unaccompanied youth and increase funding for homeless youth support services (4.3.3) *OR HSC Advocacy Team with HSC Board of Directors, Youth and young adult organizations, City of Madison and Dane County lobbyists, Wisconsin Association for Homeless and Runaway Services*	**ONGOING**

RESPONSIBLE PARTNER	GOAL	STRATEGY	TARGET DATE
HSC Legislative Committee *(continued)*	GOAL 4	Advocate and work with state legislators to change landlord-tenant laws to provide for more tenant protections (4.3.4) *OR HSC Advocacy Team with City of Madison and Dane County lobbyists*	**ONGOING**
HSC Mainstream Resources Committee	GOAL 1	Increase funding and access to employment and training programs and family supporting employment (1.3.2)	**ONGOING**
	GOAL 1	Identify barriers and increase access to public benefits (SSI, W2, SSDI, etc.) (1.3.3)	**ONGOING**
HSC Performance & Peer Review Committee	GOAL 1	Evaluate how prevention dollars are being spent and develop ways to ensure that the funds are reaching those with the most need (1.1.2) *All HSC member organizations, United Way (FEMA)*	**2016**
	GOAL 2	All HSC-funded providers will review, reduce, and standardize their screening criteria to increase access and reduce barriers to housing and services including Racial Equity Impact assessments (2.2.3) *All service and housing providers*	**DECEMBER 2018**
	GOAL 4	Create and maintain an annual assessment of Dane County Homeless System "Exits" Map (4.1.3) *Data Committee, Continuum of Care Coordinator*	**DECEMBER- ANNUAL**
HSC Shelter Providers Committee	GOAL 2	Mainstream providers, faith-based and grassroots organizations will meet at least annually to share best practices and/or establish partnerships, align efforts, and collaborate with other in-network organizations that address daily and nightly survival needs (2.1.2) *Continuum of Care Coordinator, grassroots organizations, faith-based organizations, Coordinated Entry Committee*	**ONGOING**
HSC Written Standards Committee	GOAL 1	Develop a consensus definition of "diversion" (1.5.1)	**JANUARY 2017**
	GOAL 1	Add an *eviction prevention* and *diversion* section and incorporate recommended changes to housing policy in the Written Standards (1.1.3)	**JUNE 2017**
	GOAL 2	Revise the Outreach section and incorporate recommended changes in the Written Standards (2.2.1)	**JUNE 2017**
Dane County	GOAL 2	Create a Day Resource Center to provide an accessible resource for persons and families experiencing homelessness (2.2.2) *Funders Committee, City of Madison*	**DECEMBER 2017**
	GOAL 1	Identify resources to pay for training for all organizations that are doing or want to do diversion (1.5.1) *United Way, City of Madison, Funders Committee*	**2019**
	GOAL 3	End homelessness among veterans, chronic, families with children, and youth (3.4.1-3.4.4) *City of Madison, Funders Committee, Veteran Affairs Hospital, United Way, Youth and young adult organizations*	**2016 2017 2020**

RESPONSIBLE PARTNER	GOAL	STRATEGY	TARGET DATE
Dane County *(continued)*	GOAL 2	Create and coordinate street outreach teams to improve awareness and access to supportive housing services in Dane County (2.2.4) *Briarpatch, Veterans Affairs Hospital, Porchlight, City of Madison, Funders Committee*	**ONGOING**
	GOAL 2	Increase local funding for outreach services and transitional housing beds for young adults, 18-24 including 24 new beds by December 2017 (2.2.5) *City of Madison, Funders Committee, Youth and young adult organizations*	**ONGOING**
	GOAL 4	Work with state legislators and the WI Department of Children and Families to expand rights for unaccompanied youth and increase funding for homeless youth support services (4.3.3) *OR HSC Advocacy Team with HSC Board of Directors, Youth and young adult organizations, City of Madison and Dane County lobbyists, Wisconsin Association for Homeless and Runaway Services*	**ONGOING**
	GOAL 4	Advocate and work with state legislators to change landlord-tenant laws to provide for more tenant protections (4.3.4) *OR HSC Advocacy Team with City of Madison and Dane County lobbyists*	**ONGOING**
Dane County Housing Authority	GOAL 1	Establish consensus eviction protocols and decrease the number of evictions by non-profit, affordable and subsidized housing by 20% annually (1.1.5) *Non-profit housing providers, Community Development Authority*	**DECEMBER 2016 & ONGOING**
	GOAL 3	Fund 20 new units of permanent supportive housing for single adults and 5 new units for families (3.2.1-3.2.2) *Community Development Authority, Funders Committee*	**2016**
	GOAL 3	Fund 30 new units of permanent supportive housing for single adults, 5 new units for families, and 5 new units for young adults, 18-24 (3.2.1-3.2.3) *Community Development Authority Funders Committee*	**2017**
	GOAL 3	Fund 30 new units of permanent supportive housing for single adults, 10 new units for families, and5 new units for young adults, 18-24 (3.2.1-3.2.3) *Community Development Authority, Funders Committee*	**2018**
	GOAL 3	Fund 40 new units of permanent supportive housing for single adults, 10 new units for families, and 5 new units for young adults, 18-24 (3.2.1-3.2.3) *Community Development Authority, Funders Committee*	**2019**
	GOAL 3	Fund 40 new units of permanent supportive housing for single adults, 10 new units for families, and 5 new units for young adults, 18-24 (3.2.1-3.2.3) *Community Development Authority, Funders Committee*	**2020**
Dane County Department of Human Services	GOAL 1	Explore strategies such as reunification, conflict management, and other services to provide recommendations for HSC (1.6.1) *Youth and young adult organizations, Dane County school districts, Madison School & Community Recreation*	**DECEMBER 2016**

RESPONSIBLE PARTNER	GOAL	STRATEGY	TARGET DATE
Dane County Department of Human Services *(continued)*	GOAL 1	Ensure that all youth leaving foster care in Dane County have a confirmed plan for safe and stable housing (1.4.2) *Wisconsin Interagency Council to End Homelessness*	**JUNE 2017 & ONGOING**
	GOAL 1	Youth and young adult organizations and other community organizations that serve unaccompanied youth will evaluate their programs for youth friendliness (1.6.2) *Youth and young adult organizations*	**2017**
	GOAL 1	Hire more mental health and substance abuse case managers and counselors to decrease wait time when clients are ready for service and create case management plans while on waitlist (1.2.2) *Mental health and AODA providers, Continuum of Care Homeless Assistance Application Committee*	**ONGOING**
	GOAL 1	Improve formal collaborations between county healthcare providers and non-profit, affordable, and subsidized housing by partnering in service delivery and/or training to support housing case managers (1.2.4) *Hospitals, Clinics, Treatment facilities, Madison Area Urban Ministry, MACH OneHealth, Mainstream Providers, Grassroots organizations, Faith-based organizations*	**ONGOING**
	GOAL 1	Youth and young adult organizations and Dane County school districts will partner to identify barriers and improve access to services for youth at risk of homelessness including positive mentoring relationships (1.6.3) *Youth and young adult organizations, Dane County school districts, McKinney-Vento district liaisons*	**ONGOING**
Dane County School Districts	GOAL 1	Explore strategies such as reunification, conflict management, and other services to provide recommendations for HSC (1.6.1) *Youth and young adult organizations, Dane County Department of Human Services, Madison School & Community Recreation*	**DECEMBER 2016**
	GOAL 4	Host a public education forum about the specific needs and experiences of young people in Dane County who are experiencing or are at risk of homelessness and predatory behavior (4.2.3) *Youth and young adult organizations, Education Committee*	**2017**
	GOAL 1	Youth and young adult organizations and Dane County school districts will partner to identify barriers and improve access to services for youth at risk of homelessness including positive mentoring relationships (1.6.3) *Youth and young adult organizations, Dane County Department of Human Services, McKinney-Vento district liaisons*	**ONGOING**
Dane County Sheriff's Office	GOAL 1	Ensure that procedures are followed for the discharge of all persons including youth from short-term or long-term incarceration in Dane County into safe and stable housing (1.4.1) *Wisconsin Department of Corrections, Madison Police Department, Madison Area Urban Ministry, Wisconsin Interagency Council to End Homelessness*	**DECEMBER 2016 & ONGOING**

RESPONSIBLE PARTNER	GOAL	STRATEGY	TARGET DATE
City of Madison	GOAL 2	Create a Day Resource Center to provide an accessible resource for persons and families experiencing homelessness (2.2.2) *Funders Committee, Dane County*	**DECEMBER 2017**
	GOAL 1	Identify resources to pay for training for all organizations that are doing or want to do diversion (1.5.1) *United Way, Dane County, Funders Committee*	**2019**
	GOAL 3	End homelessness among veterans, chronic, families with children, and youth (3.4.1-3.4.4) *Dane County, Funders Committee, Veteran Affairs Hospital, United Way, Youth and young adult organizations*	**2016 2017 2020**
	GOAL 2	Create and coordinate street outreach teams to improve awareness and access to supportive housing services in Dane County (2.2.4) *Briarpatch, Veterans Affairs Hospital, Porchlight, Dane County, Funders Committee*	**ONGOING**
	GOAL 2	Increase local funding for outreach services and transitional housing beds for young adults, 18-24 including 24 new beds by December 2017 (2.2.5) *Dane County, Funders Committee, Youth and young adult organizations*	**ONGOING**
	GOAL 4	Work with state legislators and the WI Department of Children and Families to expand rights for unaccompanied youth and increase funding for homeless youth support services (4.3.3) *OR HSC Advocacy Team with HSC Board of Directors, Youth and young adult organizations, City of Madison and Dane County lobbyists, Wisconsin Association for Homeless and Runaway Services*	**ONGOING**
	GOAL 4	Advocate and work with state legislators to change landlord-tenant laws to provide for more tenant protections (4.3.4) *OR HSC Advocacy Team with City of Madison and Dane County lobbyists*	**ONGOING**
Community Development Authority	GOAL 1	Establish consensus eviction protocols and decrease the number of evictions by non-profit, affordable and subsidized housing by 20% annually (1.1.5) *Non-profit housing providers, Dane County Housing Authority, Legal Action*	**DECEMBER 2016 & ONGOING**
	GOAL 3	Fund 20 new units of permanent supportive housing for single adults and 5 new units for families (3.2.1-3.2.2) *Dane County Housing Authority, Funders Committee*	**2016**
	GOAL 3	Fund 30 new units of permanent supportive housing for single adults, 5 new units for families, and 5 new units for young adults, 18-24 (3.2.1-3.2.3) *Dane County Housing Authority, Funders Committee*	**2017**
	GOAL 3	Fund 30 new units of permanent supportive housing for single adults, 10 new units for families, and5 new units for young adults, 18-24 (3.2.1-3.2.3) *Dane County Housing Authority, Funders Committee*	**2018**

RESPONSIBLE PARTNER	GOAL	STRATEGY	TARGET DATE
Community Development Authority *(continued)*	**GOAL 3**	Fund 40 new units of permanent supportive housing for single adults, 10 new units for families, and 5 new units for young adults, 18-24 (3.2.1-3.2.3) *Dane County Housing Authority, Funders Committee*	**2019**
	GOAL 3	Fund 40 new units of permanent supportive housing for single adults, 10 new units for families, and 5 new units for young adults, 18-24 (3.2.1-3.2.3) *Dane County Housing Authority, Funders Committee*	**2020**
Madison Police Department	**GOAL 1**	Ensure that procedures are followed for the discharge of all persons including youth from short-term or long-term incarceration in Dane County into safe and stable housing (1.4.1) *Wisconsin Department of Corrections, Dane County Sheriff's Office, Madison Area Urban Ministry, Wisconsin Interagency Council to End Homelessness*	**DECEMBER 2016 & ONGOING**
HSC Member Organizations	**GOAL 1**	Evaluate how prevention dollars are being spent and develop ways to ensure that the funds are reaching those with the most need (1.1.2) *All HSC member organizations, Performance & Peer Review Committee, United Way (FEMA)*	**2016**
	GOAL 4	All publicly funded HSC member organizations will use HMIS and VI-SPDAT as common tools (4.1.1) *HSC member organizations, Data Committee*	**2018**
	GOAL 2	All HSC-funded providers will review, reduce, and standardize their screening criteria to increase access and reduce barriers to housing and services including Racial Equity Impact assessments (2.2.3) *All service and housing providers, Performance & Peer Review Committee*	**DECEMBER 2018**
	GOAL 1	All Agencies receiving training for diversion will track success of diverted households served in HMIS (1.5.2) *Agencies using diversion, Data Committee*	**2019**
	GOAL 2	Align funding and organize service teams to provide housing stabilization services for people as soon as they move into shelter to help them move back into permanent housing (2.3.2) *Mainstream providers, Funders Committee*	**2019**
	GOAL 1	Divert 35% of households that contact any organization that helps people experiencing homelessness into safe and legal living conditions (1.5.3) *Agencies using diversion, Data Committee*	**2020**
	GOAL 1	Ensure that no more than 7% of households served with diversion resources do not experience homelessness again over the course of two years (1.5.4) *Agencies using diversion, Data Committee*	**2020**
	GOAL 2	Increase rates of placement from shelter to permanent housing by 10% each year (2.3.3) *all HSC shelter, transitional, and permanent supportive housing providers*	**2020**

Responsible Partner	Goal	Strategy	Target Date
HSC Member Organizations *(continued)*	GOAL 1	Follow consensus eviction protocols and decrease the number of evictions by non-profit, affordable and subsidized housing by 20% annually (1.1.5) *Non-profit housing providers, Dane County Housing Authority, Community Development Authority*	ONGOING
	GOAL 1	Hire more mental health and substance abuse case managers and counselors to decrease wait time when clients are ready for service and create case management plans while on waitlist (1.2.2) *Mental health and AODA providers, Continuum of Care Homeless Assistance Application Committee, Dane County Human Services*	ONGOING
	GOAL 1	Supportive housing providers will hire people with education and training in behavioral health and evidence-based practices such as Harm Reduction, Trauma Informed Care, and Racial Justice (1.2.3) *Supportive housing providers, HSC service providers*	ONGOING
	GOAL 1	Improve formal collaborations between county healthcare providers and non-profit, affordable, and subsidized housing by partnering in service delivery and/or training to support housing case managers (1.2.4) *Hospitals, Clinics, Treatment facilities, Madison Area Urban Ministry, MACH OneHealth, Mainstream Providers, Grassroots organizations, Faith-based organizations, Dane County Human Services*	ONGOING
	GOAL 2	Mainstream providers, faith-based and grassroots organizations will meet at least annually to share best practices and/or establish partnerships, align efforts, and collaborate with other in-network organizations that address daily and nightly survival needs (2.1.2) *Continuum of Care Coordinator, grassroots organizations, faith-based organizations, Shelter Providers Committee, Coordinated Entry Committee*	ONGOING
	GOAL 2	Mainstream providers will engage with faith-based and grassroots organizations to establish partnerships around common efforts focused on coordinated entry and housing stability (2.1.3) *Mainstream providers, Grassroots organizations, Faith-based organizations, Coordinated Entry Committee*	ONGOING
Hospitals, Clinics, Treatment Facilities	GOAL 1	Improve formal collaborations between county healthcare providers and non-profit, affordable, and subsidized housing by partnering in service delivery and/or training to support housing case managers (1.2.4) *Madison Area Urban Ministry, MACH OneHealth, Mainstream Providers, Grassroots organizations, Faith-based organizations, Dane County Human Services*	ONGOING
	GOAL 1	Ensure that procedures are followed for the discharge of all persons from hospitals and treatment facilities in Dane County into safe and stable housing (1.4.3) *Madison Area Urban Ministry, Wisconsin Interagency Council to End Homelessness*	ONGOING

Responsible Partner	Goal	Strategy	Target Date
Youth and Young Adult Organizations	GOAL 1	Explore strategies such as reunification, conflict management, and other services to provide recommendations for HSC (1.6.1) *Dane County school districts, Madison School & Community Recreation, Dane County Department of Human Services*	**DECEMBER 2016**
	GOAL 1	Youth and young adult organizations and other community organizations that serve unaccompanied youth will evaluate their programs for youth friendliness (1.6.2) *Dane County Department of Human Services*	**2017**
	GOAL 4	Host a public education forum about the specific needs and experiences of young people in Dane County who are experiencing or are at risk of homelessness and predatory behavior (4.2.3) *Education Committee, Dane County school districts*	**2017**
	GOAL 3	End youth homelessness (3.4.4) *City of Madison, Dane County, Coordinated Entry Committee*	**2020**
	GOAL 1	Youth and young adult organizations and Dane County school districts will partner to identify barriers and improve access to services for youth at risk of homelessness including positive mentoring relationships (1.6.3) *Dane County school districts, McKinney-Vento district liaisons, Dane County Department of Human Services*	**ONGOING**
	GOAL 2	Increase local funding for outreach services and transitional housing beds for young adults, 18-24 including 24 new beds by December 2017 (2.2.5) *Dane County, Funders Committee, City of Madison*	**ONGOING**
	GOAL 4	Work with state legislators and the WI Department of Children and Families to expand rights for unaccompanied youth and increase funding for homeless youth support services (4.3.3) *OR HSC Advocacy Team with HSC Board of Directors, City of Madison and Dane County lobbyists, Wisconsin Association for Homeless and Runaway Services*	**ONGOING**
Briarpatch Youth Services	GOAL 2	Create and coordinate street outreach teams to improve awareness and access to supportive housing services in Dane County (2.2.4) *City of Madison, Veterans Affairs Hospital, Porchlight, Dane County, Funders Committee*	**ONGOING**
Community Action Coalition	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for single adults including 50 new allotments by December 2016 (3.1.1) *Porchlight, Salvation Army, Tenant Resource Center*	**DECEMBER 2016 & ONGOING**
Fair Housing Council	GOAL 1	Train case managers and member organizations about eviction prevention strategies, tenant laws, legal remedies for eviction notices, and educate about fair housing and reasonable accommodation laws (1.1.6) *Tenant Resource Center, Legal Action of Wisconsin*	**ANNUAL**

Responsible Partner	Goal	Strategy	Target Date
Legal Action of Wisconsin	GOAL 1	Conduct a focus group/survey of persons with lived experiences of homelessness to identify barriers to tenant services and recommend ways to improve access to these services. (1.1.1) *Continuum of Care Coordinator, Community Plan Oversight Committee, Tenant Resource Center*	**DECEMBER 2016**
	GOAL 1	Train case managers and member organizations about eviction prevention strategies, tenant laws, legal remedies for eviction notices, and educate about fair housing and reasonable accommodation laws (1.1.6) *Fair Housing Council, Tenant Resource Center*	**ANNUAL**
	GOAL 1	Establish consensus eviction protocols and decrease the number of evictions by non-profit, affordable and subsidized housing by 20% annually (1.1.5) *Non-profit housing providers, Dane County Housing Authority*	**ONGOING**
MACH OneHealth	GOAL 1	Conduct a focus group/survey of diverse people (race, age, gender, family/single, LGBT, etc.) with lived experience of homelessness to identify barriers to mental health and substance abuse services and recommend ways to improve access to these services (1.2.1) *Continuum of Care Coordinator, Community Plan Oversight Committee*	**JUNE 2017**
	GOAL 1	Improve formal collaborations between county healthcare providers and non-profit, affordable, and subsidized housing by partnering in service delivery and/or training to support housing case managers (1.2.4) *Hospitals, Clinics, Madison Area Urban Ministry, Mainstream Providers, Grassroots organizations, Faith-based organizations, Dane County Human Services*	**ONGOING**
Madison Area Urban Ministry (MUM)	GOAL 1	Ensure that procedures are followed for the discharge of all persons including youth from short-term or long-term incarceration in Dane County into safe and stable housing (1.4.1) *Wisconsin Department of Corrections, Dane County Sheriff's Office, Madison Police Department, Wisconsin Interagency Council to End Homelessness*	**DECEMBER 2016 & ONGOING**
	GOAL 1	Ensure that procedures are followed for the discharge of all persons from hospitals and treatment facilities in Dane County into safe and stable housing (1.4.3) *Hospitals, Clinics, Wisconsin Interagency Council to End Homelessness*	**DECEMBER 2017 & ONGOING**
	GOAL 1	Improve formal collaborations between county healthcare providers and non-profit, affordable, and subsidized housing by partnering in service delivery and/or training to support housing case managers (1.2.4) *Hospitals, Clinics, MACH OneHealth, Mainstream Providers, Grassroots organizations, Faith-based organizations, Dane County Human Services*	**ONGOING**
Madison School & Community Recreation (MSCR)	GOAL 1	Explore strategies such as reunification, conflict management, and other services to provide recommendations for HSC (1.6.1) *Dane County school districts, Youth and young adult organizations, Dane County Department of Human Services*	**DECEMBER 2016**

RESPONSIBLE PARTNER	GOAL	STRATEGY	TARGET DATE
Porchlight	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for single adults including 50 new allotments by December 2016 (3.1.1) *Community Action Coalition, Salvation Army, Tenant Resource Center*	**DECEMBER 2016 & ONGOING**
	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for young adults, 18-24 including 20 new allotments by December 2016 (3.1.3) *Salvation Army, United Way*	**DECEMBER 2016 & ONGOING**
	GOAL 2	Create and coordinate street outreach teams to improve awareness and access to supportive housing services in Dane County (2.2.4) *City of Madison, Veterans Affairs Hospital, Briarpatch, Dane County, Funders Committee*	**ONGOING**
The Salvation Army	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for single adults (3.1.1) *Community Action Coalition, Porchlight, Tenant Resource Center*	**DECEMBER 2016 & ONGOING**
	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for families including 50 new allotments by December 2016 (3.1.2) *United Way, Veterans Affairs, YWCA, Funders Committee, The Road Home Dane County*	**DECEMBER 2016 & ONGOING**
	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for young adults, 18-24 including 50 new allotments by December 2016 (3.1.3) *Porchlight, United Way*	**V 2016 & ONGOING**
Tenant Resource Center	GOAL 1	Conduct a focus group/survey of persons with lived experiences of homelessness to identify barriers to tenant services and recommend ways to improve access to these services. (1.1.1) *Continuum of Care Coordinator, Community Plan Oversight Committee, Legal Action of Wisconsin*	**DECEMBER 2016**
	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for single adults (3.1.1) *Community Action Coalition, Porchlight, Salvation Army*	**DECEMBER 2016 & ONGOING**
	GOAL 1	Train case managers and member organizations about eviction prevention strategies, tenant laws, legal remedies for eviction notices, and educate about fair housing and reasonable accommodation laws (1.1.6) *Fair Housing Council, Legal Action of Wisconsin*	**ANNUAL**
The Road Home Dane County	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for families including 50 new allotments by December 2016 (3.1.2) *United Way, Veterans Affairs, YWCA, Funders Committee, Salvation Army*	**DECEMBER 2016 & ONGOING**
United Way	GOAL 1	Evaluate how prevention dollars are being spent and develop ways to ensure that the funds are reaching those with the most need (1.1.2) *All HSC member organizations, Performance & Peer Review Committee*	**2016**

RESPONSIBLE PARTNER	GOAL	STRATEGY	TARGET DATE
United Way *(continued)*	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for families including 50 new allotments by December 2016 (3.1.2) *Salvation Army, Veterans Affairs, YWCA, Funders Committee, The Road Home Dane County*	**DECEMBER 2016 & ONGOING**
	GOAL 3	Increase or fund new allotments of rapid rehousing assistance for young adults, 18-24 including 50 new allotments by December 2016 (3.1.3) *Porchlight, Salvation Army*	**DECEMBER 2016 & ONGOING**
	GOAL 1	Identify resources to pay for training for all organizations that are doing or want to do diversion (1.5.1) *City of Madison, Dane County, Funders Committee*	**2019**
	GOAL 3	End homelessness among families with children (3.4.3) *Dane County, Coordinated Entry Committee, City of Madison*	**2020**
William S. Middleton Memorial Veterans Affairs Hospital	GOAL 3	End homelessness among veterans (3.4.1) *Dane County, City of Madison, United Way, Coordinated Entry Committee*	**2016**
	GOAL 2	Create and coordinate street outreach teams to improve awareness and access to supportive housing services in Dane County (2.2.4) *City of Madison, Briarpatch, Porchlight, Dane County, Funders Committee*	**ONGOING**
Wisconsin Association for Homeless and Runaway Services	GOAL 4	Work with state legislators and the WI Department of Children and Families to expand rights for unaccompanied youth and increase funding for homeless youth support services (4.3.3) *OR HSC Advocacy Team with HSC Board of Directors, City of Madison and Dane County lobbyists, Youth and young adult organizations*	**ONGOING**
Wisconsin Department of Corrections	GOAL 1	Ensure that procedures are followed for the discharge of all persons including youth from short-term or long-term incarceration in Dane County into safe and stable housing (1.4.1) *Madison Area Urban Ministry, Dane County Sheriff's Office, Madison Police Department, Wisconsin Interagency Council to End Homelessness*	**DECEMBER 2016 & ONGOING**
Wisconsin Interagency Council to End Homelessness	GOAL 1	Ensure that procedures are followed for the discharge of all persons including youth from short-term or long-term incarceration in Dane County into safe and stable housing (1.4.1) *Madison Area Urban Ministry, Dane County Sheriff's Office, Madison Police Department, Wisconsin Department of Corrections*	**DECEMBER 2016 & ONGOING**
	GOAL 1	Ensure that all youth leaving foster care in Dane County have a confirmed plan for safe and stable housing (1.4.2) *Dane County Department of Human Services*	**JUNE 2017 & ONGOING**
	GOAL 1	Ensure that procedures are followed for the discharge of all persons from hospitals and treatment facilities in Dane County into safe and stable housing (1.4.3) *Hospitals, Clinics, Madison Area Urban Ministry*	**DECEMBER 2017 & ONGOING**

Responsible Partner	Goal	Strategy	Target Date
Persons with Lived Experiences of Homelessness	GOAL 1	Conduct a focus group/survey of persons with lived experiences of homelessness to identify barriers to tenant services and recommend ways to improve access to these services. (1.1.1) *Continuum of Care Coordinator, Community Plan Oversight Committee, Tenant Resource Center*	**DECEMBER 2016**
	GOAL 1	Youth and young adult organizations and other community organizations that serve unaccompanied youth will evaluate their programs for youth friendliness (1.6.2) *Dane County Department of Human Services, Youth and young adult organizations*	**2017**
	GOAL 4	Host a public education forum about the specific needs and experiences of young people in Dane County who are experiencing or are at risk of homelessness and predatory behavior (4.2.3) *Education Committee, Dane County school districts, Youth and young adult organizations*	**2017**
	GOAL 1	Conduct a focus group/survey of diverse people (race, age, gender, family/single, LGBT, etc.) with lived experience of homelessness to identify barriers to mental health and substance abuse services and recommend ways to improve access to these services (1.2.1) *Continuum of Care Coordinator, Community Plan Oversight Committee, MACH OneHealth*	**JUNE 2017**
	GOAL 1	Conduct a focus group/survey of diverse people (race, age, gender, family/single, LGBT, etc.) with lived experience of homelessness to identify barriers to finding affordable housing and jobs and recommend ways to improve access to these resources (1.3.1) *Community Plan Oversight Committee, Continuum of Care Coordinator*	**DECEMBER 2017**
	GOAL 4	Host a public education forum about the specific needs and experiences of elderly people in Dane County who are experiencing or are at risk of homelessness and predatory behavior (4.2.4) *Education Committee*	**2018**
	GOAL 4	Organize community engagement events and conversation events for local and state policymakers (including legislators) around issues related to homelessness (4.2.6) *Legislative Committee OR HSC Advocacy Team, Education Committee*	**ANNUAL**
	GOAL 2	Create and coordinate street outreach teams to improve awareness and access to supportive housing services in Dane County (2.2.4) *City of Madison, Veterans Affairs Hospital, Briarpatch, Dane County, Funders Committee, Porchlight*	**ONGOING**
	GOAL 4	Encourage and fund providers, funders, and those with lived experiences of homelessness to regularly attend local, state, and national conferences (4.3.2) *Community Plan Oversight Committee, Education Committee, Funders Committee*	**ONGOING**

Appendix D 2016 Dane County Written Standards

Introduction

These written standards apply to all publicly funded housing and service providers. These standards must consistently be applied for the benefit of all program participants. The local Continuum of Care (CoC), a local planning body that coordinates housing and services funding for homeless families and individuals, encompasses Dane County and is called the Homeless Services Consortium (HSC). These standards do not replace policies and procedures created by homeless services providers, but rather they provide an overall context for programs funded with federal, state and local funding. Programs that receive Continuum of Care Program, Emergency Solutions Grant (ESG), or State of Wisconsin ETH Grant funding must abide by the Written Standards. Programs funded through other sources are highly encouraged to follow these standards.

The Written Standards are developed by the CoC Written Standards Committee. The document is approved by the CoC Board and is presented to the Homeless Services Consortium. The Written Standards are reviewed and updated annually, typically during the second quarter of the calendar year. The prioritization requirements for each program type are reviewed and updated annually to ensure that the requirements place program participants in the appropriate type of housing. The Written Standards Committee will send the approved document to agencies receiving CoC Program, ESG and ETH grant funding. The CoC Board will use the Written Standards when evaluating program applications for CoC Program, ESG and ETH grant funding. Programs that fail to abide by the Written Standards will not be approved for future CoC, ESG or ETH funding.

Timeline for future updates to the Written Standards:
2016
1. Add Prevention program requirements

2017
1. Add Diversion program requirements
2. Add Requirements for programs funded by other funding partners, including the United Way

Additional recommendations for 2017
   1. Coordinated Entry
      a) Add standards for the Housing Placement meetings for singles and families.
   2. Street Outreach
      a) Clarify "engagement," "case management," and "care coordination" as the terms relate the provision of street outreach services.
      b) Review the prioritization standards for targeting street outreach services.
   3. Emergency Shelter

a) Include minimum performance benchmarks for emergency shelter, using the HUD System Performance Measures for guidance
b) Develop a definition of emergency shelter that addresses the length of stay in shelter. For example, "the majority of emergency shelter participants remain less than 90 days."
4. Rapid Re-housing
a) Develop prioritization standards for youth ages 18-21.

In keeping with the goals and objectives of the Dane County "Community Plan to Prevent and End Homelessness," [1] all activities provided through the agencies of the Homeless Services Consortium should further the mission of preventing or ending homelessness for households in need.

Homeless housing and service providers must coordinate and integrate activities targeted to homeless people in the Dane County Continuum of Care system. Programs designed to serve homeless and at-risk households must provide a strategic and community-wide system to prevent and end homelessness.

In addition to the services provided by each agency, each program will play an active role in connecting participants to mainstream services, which are services not specifically designated for homeless households. All Consortium agencies agree to coordinate their services with other providers for the benefit of their participants. Examples of these programs include: The Department of Housing and Urban Development (HUD) public housing programs, Section 8 tenant assistance, Supportive Housing for Persons with Disabilities, HOME, Temporary Assistance for Needy Families, Medicaid, Badger Care, Head Start, Social Security, Social Security Disability, Social Security Disability Insurance, and Food Share.

Section I: General Requirements

Program Standards
1. In providing or arranging for housing, shelter or services, the program considers the needs of the individual or family experiencing homelessness.
2. The program provides assistance in accessing suitable housing.
3. The program is aligned with the community goals for the Zero: 2016 initiative, the Homeless Services Consortium Plan to Prevent and End Homelessness, and current Department of Housing and Urban Development priorities, including priorities for ending homelessness among specified sub-populations.
4. The Vulnerability Index & Service Prioritization Decision Assistance Tool (VI-SPDAT) or Vulnerability Index & Family Service Prioritization Decision Assistance Tool (VI-F-SPDAT) will be used when screening households for Permanent Supportive Housing and Rapid Re-housing programs. The latest version will be posted on the Homeless Services Consortium website.
5. The full Service Prioritization Decision Assistance Tool (SPDAT) is to be used as a common assessment tool for housing case management and housing programs. The full SPDAT should only be administered by staff trained to do so. SPDAT data should be entered into the Homeless Management Information System (HMIS).

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[1] The "Community Plan to Prevent and End Homelessness" will be updated in 2016.

6. Each housing and housing case management program must be aware of and inform households of the educational rights of children and unaccompanied youth in their programs. Materials explaining rights should be provided to applicable households. Program staff will collaborate with the Transition Education Program (TEP) or other school officials to coordinate educational services. Program staff will highly encourage school attendance and will work with households to address any barriers to regular attendance. If attendance and truancy concerns are noted, program staff will communicate/coordinate with school staff.
7. Each program in the CoC will provide accurate and up-to-date information on eligibility criteria for the program; e.g. – gender specific, individuals/families. Each agency will provide information to Coordinated Entry, the Placement Group for Zero: 2016, and United Way 211.
8. Each housing and housing case management program in the CoC will use the Mainstream Benefits Checklist. This checklist should be kept in the file for each household and updated annually.
9. Each program will make language translation service available for clients when needed by utilizing available services, such as a language line.

Case Management Services

Minimum Standards
1. The frequency of case management services will vary based on program participant need. Initial contacts with the participant will typically be at least weekly and continued contacts will be at least monthly.
2. Case management services include, but are not limited to: developing an individualized housing/service plan, assistance with obtaining and maintaining housing, counseling, employment referrals, education, referral and coordination of services, accessing mainstream benefits, and coordinating with schools.
3. Case management service plans will incorporate the participants' expectations and choices for short and long-term goals.
4. Together, the program and program participants will develop a schedule for reassessing the individualized service plan. The reassessments will occur at least quarterly.

Personnel
All programs shall be adequately staffed by qualified personnel to ensure quality service delivery, effective program management, and the safety of program participants.

Minimum Standards
1. The agency selects, for its service staff, only those employees and/or volunteers with appropriate knowledge, or experience, for working with individuals and families experiencing homelessness and/or other issues that put individuals or families at risk of housing instability.
2. The program provides training to all paid and volunteer staff on both the policies and procedures employed by the program and on specific skill areas as determined by the program.
3. All paid and volunteer service staff participates in ongoing and/or external training, and development to further enhance their knowledge and ability to work with individuals and families

experiencing homelessness and/or other issues that put individuals or families at risk of housing instability. Examples of training topics include, but are not limited to, harm reduction, trauma informed care, Housing First and racial justice.

4. For programs that use HMIS, all HMIS users must abide by the standard operating procedures found in the HMIS Policies and Procedures manual. Additionally, users must adhere to the privacy and confidentiality terms set forth in the User Agreement.

5. Agency staff with responsibilities for supervision of the casework, counseling, and/or case management components have, at a minimum, a bachelor's degree in a human service-related field and/or experience working with individuals and families experiencing homelessness and/or other issues that put individuals or families at risk of housing instability.

6. Staff with supervisory responsibilities for overall program operations shall have, at a minimum, a bachelor's degree in a human service-related field and/or demonstrated ability and experience that qualifies them to assume such responsibility.

7. All staff has a written job description that, at a minimum, addresses the major tasks to be performed and the qualifications required for the position.

8. The program operates under affirmative action and civil rights compliance plans or letters of assurance.

9. Case supervisors review current cases and individual service plans on a regular and consistent basis to ensure quality, coordinated services.

Housing First

Housing First is a proven method of ending all types of homelessness, and is the most effective approach to ending chronic homelessness. Housing First offers individuals and families experiencing homelessness immediate access to permanent affordable, or supportive housing, without clinical prerequisites like completion of a course of treatment or evidence of sobriety and with a low-threshold for entry. Housing First permanent supportive housing models are typically designed for individuals or families who have complex service needs, who are often turned away from other affordable housing settings, and/or who are the least likely to be able to proactively seek and obtain housing on their own. Housing First approaches for rapid re-housing provide quick access to permanent housing through interim rental assistance and supportive services on a time-limited basis. Rapid re-housing programs are designed to have low barriers for program admission, and to serve individuals and families without consideration of past rental, credit or financial history. The Housing First approach has also evolved to encompass a community-level orientation to ending homelessness in which barriers to housing entry are removed and efforts are in place to prioritize the most vulnerable and high-need people for housing assistance.

System-wide Housing First Orientation for the Homeless Services Consortium

- Emergency shelter, street outreach providers, and other parts of crisis response system are aligned with Housing First and recognize their roles to encompass housing advocacy and rapid connection to permanent housing. Staff in crisis response system services operate under the philosophy that all people experiencing homelessness are housing ready.
- Strong and direct referral linkages and relationships exist between crisis response system (emergency shelters, street outreach, etc.) and rapid re-housing and permanent supportive

housing. Crisis response providers are aware and trained in how to assist people experiencing homelessness to apply for and obtain permanent housing.

- The HSC has a unified, streamlined, and user-friendly community-wide process for applying for rapid re-housing, permanent supportive housing and/or other housing interventions.
- The HSC has a coordinated assessment system for matching people experiencing homelessness to the most appropriate housing and services, and where individuals experiencing chronic homelessness and extremely high need families are matched to permanent supportive housing/Housing First.
- The HSC has a data-driven approach to prioritizing highest need cases for housing assistance whether through analysis of lengths of stay in Homeless Management Information Systems, vulnerability indices, or data on utilization of crisis services.
- Policymakers, funders, and providers collaboratively conduct planning and raise and align resources to increase the availability of affordable and supportive housing and to ensure that a range of affordable and supportive housing options and models are available to maximize housing choice among people experiencing homelessness. The HSC will recommend a resolution for the City of Madison and Dane County to adopt the Written Standards.
- Policies and regulations related to permanent supportive housing, social and health services, benefit and entitlement programs, and other essential services, support and do not inhibit the implementation of the Housing First approach. For instance, eligibility and screening policies for benefit and entitlement programs or housing do not require the completion of treatment or achievement of sobriety as a prerequisite.

Minimum Standards[2]

1. Program admission/tenant screening and selection practices promote the acceptance of applicants regardless of their sobriety or use of substances, completion of treatment, and participation in services.
2. Applicants are not rejected on the basis of poor credit or financial history, poor or lack of rental history, minor criminal convictions, or behaviors that indicate a lack of "housing readiness." Although applicants may be rejected due to convictions for violent criminal activity, agencies will make all effort possible to remove barriers to program enrollment. A rejection is only appropriate when an applicant presents a direct threat to the health and safety of program staff and residents and that threat cannot be ameliorated.
3. Housing First accepts referrals directly from shelters, street outreach, drop-in centers, and other parts of crisis response system frequented by vulnerable people experiencing homelessness.
4. Supportive services emphasize engagement and problem-solving over therapeutic goals. Services plans are highly tenant-driven without predetermined goals. Participation in services or program compliance is not a condition of permanent supportive housing tenancy. Rapid re-housing programs may require case management as condition of receiving rental assistance as required by state or federal funding.
5. Use of alcohol or drugs in and of itself (without other lease violations) is not considered a reason for eviction.

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[2] Housing First requirements taken from *The Housing First Checklist: A Practical Tool for Assessing Housing First in Practice*, United States Interagency Council Homelessness, http://usich.gov/resources/uploads/asset_library/Housing_First_Checklist_FINAL.pdf.

Recommended Program Practices

- If a participant tenancy is in jeopardy, every effort is made to offer a transfer to a tenant from one housing situation to another. Whenever possible, eviction back into homelessness is avoided. If unavoidable, every effort is made to identify outreach or other service providers to maintain contact with the participant until another unit is available.
- Tenant selection plan for permanent housing includes a prioritization of eligible tenants based on criteria other than "first come/first serve" such as duration/chronicity of homelessness, vulnerability, or high utilization of crisis services.
- Tenants cannot be required to have income for program eligibility, except in cases in which program funding and operation is dependent upon participant income paid for rent.
- Tenants in permanent housing are given reasonable flexibility in paying their tenant share of rent (after subsidy) on time and are offered special payment arrangements (e.g. a payment plan) for rent arrears and/or assistance with financial management (including representative payee arrangements).
- Case managers/service coordinators are trained in and actively employ evidence-based practices for client/tenant engagement such as motivational interviewing and client-centered counseling.
- Services are informed by a harm reduction philosophy that recognizes that drug and alcohol use and addiction are a part of tenants' lives, where tenants are engaged in non-judgmental communication regarding drug and alcohol use, and where tenants are offered education regarding how to avoid risky behaviors and engage in safer practices.
- Building and apartment units may include special physical features that accommodate disabilities, reduce harm, and promote health among tenants. These may include elevators, stove-tops with automatic shut-offs, wall-mounted emergency pull-cords, ADA wheelchair compliant showers, sound-proofing cushions, etc.
- In the event a provider seeks to terminate services and/or evict a program participant, a notice of termination shall include information of local legal services providers.

Program Evaluation for Housing First[3]

In an effort to move to a system-wide orientation to ending homelessness through the use of Housing First principles, the HSC has included the following section to review agency and program adoption of Housing First. Agencies and programs should follow the guidelines below. The guidelines have been created to minimize as many barriers to housing as possible, recognizing that this may not be feasible under all circumstances. In some cases, there may be other entities, including, but not limited to, private landlords, the criminal justice system, and funders, that place additional tenant requirements upon program participants.

The guidelines set forth under this section have been created by the HSC in an effort to promote agency-to-agency review and technical assistance within the HSC for all community programs. All review conducted under this section will be conducted internally by the HSC.

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[3] Program Evaluation taken from: http://www.allchicago.org/sites/allchicago.org/files/2015%20Project%20Component%20-%20FINAL.pdf

- Does the project provide and explain the written eligibility criteria, which are in line with the Housing First philosophy, to participants?
- Does the project have admission/tenant screening and selection practices that promote the acceptance of applicants regardless of their sobriety, use of substances, completion of treatment, or participation in services?
- Does the project accept participants who are diagnosed with or show symptoms of a mental illness?
- Does the project have and follow a written policy for the following:
  a. Stating that taking psychiatric medication and/or treatment compliance for mental illness is not a requirement for entry into or continued participation in the project?
  b. Not rejecting participants based on previous criminal history that is not relevant to participation in the program, and accepting participants regardless of minor criminal convictions to the project?
  c. Not rejecting participants based on prior rental history or past evictions to the project?
  d. Accepting participants regardless of lack of financial resources to the project, unless program operation is dependent upon participant income?
  e. Accepting participants regardless of past non-violent rule infractions within the agency's own program and/or in other previous housing programs to the project?
- Upon entry to the project, the project agrees to allow participants to remain in the project even if they *require* an absence of 90 days or less due to the reasons outlined below, unless otherwise prohibited by law or funder policy:
  a. Substance use treatment intervention
  b. Mental health treatment intervention
  c. Hospitalization and short-term rehabilitation
  d. Incarceration
  e. Or other reason approved by the program supervisor

Coordinated Entry System

Coordinated Entry is a centralized system for people with a housing crisis to access local housing information and referral to appropriate services. Participants will be assessed for the community wide prioritization lists for Rapid Rehousing and Permanent Supportive Housing.

Assessments kept in HMIS include the client profile, Vulnerability Index & Service Prioritization Decision Assistance Tool (VI-SPDAT) or Vulnerability Index & Family Service Prioritization Decision Assistance Tool (VI-F-SPDAT), length of homelessness, chronic homelessness and veteran's status. Agencies that use HMIS are able to enter the VI-SPDAT and make the participant referral to the appropriate prioritization list. The lists are kept up to date in HMIS. Agencies that do not use HMIS can partner with Coordinated Entry staff to make alternate arrangements for referring participants to the prioritization list.

Participants can access the system through the toll free number (1-855-510-2323), which includes prompts to access financial assistance, information and referral, assessment, youth services, access to shelters for single men, single women, and families, and services for survivors of domestic violence. Participants can use the system through a "no wrong door" approach because all agencies will connect

people to the system. The system is well advertised in the community. The toll free housing crisis hotline number is posted on all CoC agency websites. Participants can also access services through the Homeless Service's Consortium website (www.danecountyhomeless.org). Coordinated Entry is the avenue for managing the prioritization lists for Rapid Rehousing and Permanent Supportive Housing. Coordinated Entry staff track requirements for CoC housing and shelter services, including participant eligibility requirements. Agencies are required to provide accurate and up to date information on populations served and other requirements. Coordinated Entry staff will make this information publicly available on the HSC website and disseminate this information to HSC members bi-annually.

Minimum Standards
1. Prioritization: Ensure that the most vulnerable participants are served first by using the VI-SPDAT, length of homelessness and chronic homeless status.
2. Low Barrier: Coordinated Entry staff partner with programs that have low barriers. Participants are served through Coordinated Entry regardless of income level, drug or alcohol use and criminal background.
3. Housing First Orientation: The purpose of the system is to house participants as quickly as possible
4. Person-Centered: Participants can accept or deny services from any agency without losing their spot on the prioritization list.
5. Shelter Access: The toll free number is available 24 hours/day to access shelter.
6. Fair and Equal Access: All participants in the CoC geographic area can access services through the toll free number and the "no wrong door" approach. Services are offered in English, Spanish and Hmong. A language line is used for other languages.
7. Standardized Assessment: All agencies will use the VI-SPDAT.
8. Inclusive: All subpopulations can access Coordinated Entry the same way, but will be directed to different access points for effective services.
9. Referral Protocols: Coordinated Entry will refer participants to appropriate shelter and housing services including ESG and CoC funded projects. CoC and ESG funded projects are required to fill housing vacancies using the prioritization list in HMIS. All other projects are encouraged to use the community lists. Programs accepting people from Coordinated Entry should remove people from the HMIS prioritization list.
10. Outreach: Street outreach efforts will include conducting the VI-SPDAT and ensuring that names are placed on the appropriate prioritization lists.
11. Full Coverage: Coordinated Entry will serve any participant experiencing homelessness or at risk of homelessness in Dane County.

Termination and Grievance Procedures

Minimum Standards
1. Programs should terminate assistance only in the most severe cases, utilizing the Housing First philosophy. (See Housing First – Recommended Practices)
2. All agencies providing services with CoC and ESG funds shall be required to have a termination and grievance policy. Policies must allow an applicant to formally dispute an agency decision on *eligibility to receive assistance.* The policy must include the method an applicant would be made

aware of the agency's grievance procedure and the formal process for review and resolution of the grievance.
3. All agencies must have policies that allow a program participant to formally dispute an agency decision to *terminate assistance*. The policy must include the method that a written notice would be provided containing clear statement of reason(s) for termination, which shall include a detailed statement of facts, the source of the information upon which it was based, and the participant's right to advance review of the agency's file and all evidence upon which the decision was based; a review of the decision in which the program participant is given the opportunity to present evidence (written or orally) before a person other than the person who made or approved the termination decision; and a prompt written notice of the final decision to the program participant. The agency has the burden to prove the basis for their decision by a preponderance of the evidence. The decision shall not be based solely on hearsay.
4. If an agency has a website, they must publicly post their termination and grievance procedures.
5. See the Emergency Shelter section for details on how these programs should handle termination and grievances.
6. If a program participant is terminated from a program in which the agency owns the unit, the program will retain the participant's property for a minimum of 30 days before discarding.
7. Nothing in this section shall prevent an agency from reinstating services pursuant to applicable law.

Record Keeping Requirements

Agencies are responsible for knowing the reporting requirements for each funder and program. Documentation for the effective delivery and tracking of service will be kept up to date and the confidentiality of program participants will be maintained.

Minimum Standards
1. Each participant file should contain, at a minimum, information required by funders, participation agreements and/or signed lease agreements, service plans, case notes, information on services provided both directly and through referral and any follow-up and evaluation data that are compiled.
2. When required by funders, client information must be entered into HMIS in accordance with the data quality, timeliness and additional requirements found in the HMIS Policies and Procedures manual. At a minimum, programs must record the date the client enters and exits the program, and update the client's information as changes occur.
3. Financial recordkeeping requirements include documentation of: all costs charged to the grant, funds being spent on allowable costs, the receipt and use of program income, compliance with expenditure limits and deadlines and match contributions.
4. The program will maintain each participant file in a secure place and shall not disclose information from the file without the written permission of the participant as appropriate except to project staff and other agencies as required by law. Participants must give informed consent to release any client identifying data to be utilized for research, teaching and public interpretation.
5. Files must be saved for a minimum of six years.

Section II: Program Requirements

Street Outreach

Street outreach workers engage with unsheltered homeless people in order to connect them with emergency shelter, housing, or other critical services. Street outreach services are provided in non-facility-based settings for unsheltered homeless people who are unwilling or unable to access emergency shelter, housing, or an appropriate health facility.

Eligibility Criteria
- Participants must meet category 1 – Literally Homeless as outlined by the HUD definition of homelessness.

Minimum Standards
1. Support services provided must be focused on:
   a. Getting participants housed
   b. Linking participants to mainstream benefits and resources
   c. Maintaining benefits for which the participants are eligible
2. Participant engagement – outreach workers will locate, identify, and build relationships with unsheltered homeless people and engage them for the purpose of providing immediate support, intervention, and connections with homeless assistance programs and/or mainstream social services and housing programs.
3. Programs will address urgent physical needs, such as providing meals, blankets, clothes, or toiletries.
4. Programs will provide assistance with navigating the homeless service system, including linking the participant to coordinated entry, conducting the VI-SPDAT assessment and referring the participant to the permanent housing priority list.
5. Programs will assist with obtaining housing.

Emergency Shelter

The purpose of emergency shelter is to provide a safe, short term, nighttime residence for homeless persons, and help them find safe affordable housing outside the shelter. Emergency shelters do not require occupants to sign leases or occupancy agreements.

Eligibility Criteria
- Participants must meet the HUD definition of homelessness.

Minimum Standards
1. Shelter programs must create policies and procedures that provide a safe environment for shelter guests and staff; policies and procedures may vary depending on the shelter population being served. These policies and procedures must be explained to applicants prior to moving into the shelter. In addition, they must be posted in the shelter and on the agency's website.

2. Supportive services are available to assist persons in obtaining housing either on-site or through a day-time resource center. All shelter residents are notified of the availability of support services and how to access the services.
3. Shelter is available every day of the year. In the instances where it is necessary to temporarily close a shelter for rehabilitation or major maintenance work, as much notice as possible should be provided to guests, and efforts should be made to find a short-term replacement facility.
4. Shelter guests will be treated by staff and volunteers with respect and dignity and will receive a welcoming, safe and non-intimidating environment.
5. Each shelter will have a policy of respect for each individual's self-identified gender. Guests who request shelter services will be admitted to the shelter operated for the gender to which an individual identifies themselves. Transgender and transsexual guests will be offered the same services and resources as all other guests as long as resident safety can be maintained. While shelter staff will take reasonable steps to accommodate specific needs, it may not be possible to segregate the individual from the rest of the shelter population. Staff will not share or in any way advertise the fact that certain guests may have identified themselves as transgendered/transsexual.
6. All individuals or groups of individuals regardless of age, gender identification, sexual orientation, and marital status identifying as a family at a family shelter must be served as a family. Families at family shelters must not be separated when entering shelter. There can be no inquiry, documentation requirement or "proof" related to family status, gender identification and/ or sexual orientation. The prohibition on inquiries or documentation does not prohibit inquiries related to an individual's sex for the limited purpose of determining placement in temporary, emergency shelters that are limited to one sex because they have shared bedrooms or bathrooms, or for determining the number of bedrooms to which a household may be entitled. The age and/or gender of a child under 18 must not be used as a basis for denying any family's admission to a program that uses ESG or THP funding or services if those programs serve families with children under age 18.[4]
7. There is no charge to a shelter guest for emergency shelter.
8. Documentation (including Photo ID, birth certificate, etc.) is not a barrier to shelter. Identification may be requested when safety is a factor.
9. Guests may be asked to leave for a period of time in the event of serious infraction and only in the most severe cases such as for behavior that is deemed seriously threatening or harmful to other guests and staff. Banning a shelter guest is allowed only when all other options have been explored and a ban is necessary to protect the health and safety of staff and guests. All shelter guests will be notified of the agency's grievance policy. When it is not possible to serve a guest because of the guest's behavior, efforts will be made by shelter staff to assist the guest in finding alternatives. See Dane County Ordinance 30.04 for details on the procedure for discontinuing shelter services to a guest.

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[4] From *(24 CFR § 576.102 Prohibition against involuntary family separation) (24 CFR § 5.403 Definitions- Family) (24 CFR §570.3 Definitions - Household) (24 CFR 5.105(a) Nondiscrimination and equal opportunity)*

Access to Shelter
- All shelters will participate in coordinated entry. All shelters are highly encouraged to assess clients for appropriate permanent housing placement using the VI-SPDAT. If shelters cannot assess clients due to lack of shelter resources, shelters must refer clients to the coordinated entry system for assessment, and explain to clients the process of accessing housing programs.
- All shelters are required to notify clients about how to access coordinated entry.

Prioritization for Family Shelter
- Emergency Family Shelter (EFS): provides shelter for 18 people on a nightly basis, with additional overflow shelter between April - October. Priority is given to families with newborns (3 months and younger) and then to families who were denied the night before. As many families as possible are accommodated, based on space available. Other factors that are accounted for are VI-F-SPDAT score and where the family sleeps when not accepted in to EFS.
- Family Shelter: Families are prioritized for Family shelter based on VI-F-SPDAT score, family size and the number of beds available, length of time on the priority list with weekly check in, and also by eligibility/compatibility per shelter.

Shelter for Families with Children

The Salvation Army is the point of entry for shelter for homeless families. Shelter is provided on-site at The Salvation Army building on East Washington Avenue, at the YWCA on East Mifflin Street, at The Road Home, which uses rotating sites, and at local motels. If these options are full, homeless families will be offered a spot at the Emergency Shelter overflow program which is a night-time only shelter located at The Salvation Army shelter building as space allows. All families access the shelter system via coordinated entry to determine eligibility and availability.

Shelter for Single Men

Porchlight is the point of entry for nighttime shelter for homeless single men. The main facility of the Drop-In-Shelter (DIS) is located at Grace Church on West Washington Avenue. Other downtown churches serve as a year-round overflow and a seasonal over-flow space.

Shelter for Single Women

The Salvation Army is the point of entry for shelter for homeless single women. The Salvation Army operates a first come, first serve, nighttime-only shelter in the same building as the family shelter on East Washington Avenue.

Shelter for Unaccompanied Youth

Briarpatch Youth Services is the point of entry for homeless youth, and has an 8-bed shelter for youth ages 13-17.

Shelter for Persons with Immediate Safety Needs

Individuals and families with children who have an immediate need for shelter to escape domestic violence are provided housing and services through Domestic Abuse Intervention Services (DAIS). When shelter beds are not available, participants may be assisted through temporary placement in local motels or referred to other community resources. Eligible residents may be single men, single women, or adults with children who are experiencing intimate partner violence.

Medical Shelter Vouchers

    Individuals and families are eligible for emergency medical shelter if they are homeless and their present medical condition compromises their ability to safely reside in a traditional shelter setting. Participants must receive a referral by their healthcare provider. Placement in a local motel is subject to availability of funds and program eligibility, including but not limited to, fragility of condition. Medical shelter is intended for a short period of time and is not intended for people with chronic conditions. At this time, medical shelter vouchers are accessed directly through the Salvation Army.

Transitional Housing

Transitional Housing (TH) facilitates the movement of homeless individuals and families to permanent housing within 24 months of entering TH. Programs will provide safe, affordable housing that meets participants' needs.

Eligibility Criteria

- Participants must meet categories 1 - Literally Homeless, 2 - At Imminent Risk, or 4 - Fleeing Domestic Violence as outlined by the HUD definition of homelessness.
- By 2017, all TH program participants must fall into at least one of the categories below:
  a. individuals or head of household struggling with a substance use disorder
  b. individuals in early recovery from a substance use disorder who may desire more intensive support to achieve their recovery goals
  c. survivors of domestic violence or other forms of severe trauma who may require and prefer the security and onsite services provided in a congregate setting to other available housing options
  d. unaccompanied and pregnant or parenting youth (age 16-24) who are unable to live independently (i.e. unemancipated minors) or who prefer a congregate setting with access to a broad array of wrap-around services to other available housing options
  e. individuals listed on a sex offender registry
  f. people re-entering the community after a stay in jail or prison
  g. large families (6 or more people)

Minimum Standards

1. Maximum length of stay cannot exceed 24 months.
2. Assistance in transitioning to permanent housing must be provided. A VI-SPDAT must be completed within 30 days of program entry, and the household name referred to the appropriate housing priority list, if not done already. A participant has the right to refuse completing the VI-SPDAT assessment.
3. Intensive support services must be provided through the duration of stay in transitional housing.
4. Program participants in transitional housing must enter into a lease agreement for a term of at least one month. The lease must be automatically renewable upon expiration, except on prior notice by either party, up to a maximum term of 24 months.
5. Case management staff must have skills and experience to meet the unique needs of the population served.

Minimum Performance Benchmarks for TH Projects
- 80% or more of all participants will exit to a permanent housing situation
- 63% or more of all participants will have mainstream (non-cash) benefits at exit from program
- 54% or more of adult participants will increase income from all sources

Permanent Supportive Housing

Permanent supportive housing (PSH) is safe, affordable housing, the purpose of which is to provide housing without a designated length of stay.

Eligibility Criteria
- Participants must meet categories 1- Literally Homeless or 4 – Fleeing Domestic Violence as outlined by the HUD definition of homelessness.
- PSH can only provide assistance to individuals with disabilities and families in which at least one adult or child has a disability
- Referrals for PSH will be generated through the CoC Coordinated Entry process and the CoC-wide PSH priority lists for families and individuals.

Participant Prioritization Requirements[5]
- Participants will be prioritized for eligibility based on their chronic homeless status, length of time homeless, and VI-SPDAT or VI-F-SPDAT score.

First Priority - Chronically Homeless Individuals and Families with the Longest History of Homelessness and with the Most Severe Service Needs.

A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:
  i. The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and
  ii. The CoC or CoC Program recipient has identified the chronically homeless individual or head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs[6].

Second Priority - Chronically Homeless Individuals and Families with the Longest History of Homelessness.

A chronically homeless individual or head of household, as defined in 24 CFR 578.3, for which both of the following are true:

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[5] The order of priority follows the *Notice on Prioritizing Persons Experiencing Chronic Homelessness and Other Vulnerable Homeless Persons in Permanent Supportive Housing and Recordkeeping Requirements for Documenting Chronic Homeless Status*, U.S. Department of Housing and Urban Development, July 28, 2014. http://portal.hud.gov/hudportal/documents/huddoc?id=14-12cpdn.pdf.
[6] See Section I.D.3. of the HUD Notice for definition of severe service needs.

<ol type="i">
The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least 12 months either continuously or on at least four separate occasions in the last 3 years, where the cumulative total length of the four occasions equals at least 12 months; and,
The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

Third Priority - Chronically Homeless Individuals and Families with the Most Severe Service Needs.
A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:
<ol type="i">
The chronically homeless individual or head of household of a family has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter on at least four separate occasions in the last 3 years, where the total length of those separate occasions equals less than one year; and
The CoC or CoC program recipient has identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

Fourth Priority - All Other Chronically Homeless Individuals and Families.
A chronically homeless individual or head of household as defined in 24 CFR 578.3 for whom both of the following are true:
<ol type="i">
The chronically homeless individual or head of household of a family has been homeless and living in a place not meant for human habitation, a safe haven, or in an emergency shelter for at least four separate occasions in the last 3 years, where the cumulative total length the four 8 occasions is less than 12 months; and
The CoC or CoC program recipient has not identified the chronically homeless individual or the head of household, who meets all of the criteria in paragraph (1) of the definition for chronically homeless, of the family as having severe service needs.

Minimum Standards
1. There can be no predetermined length of stay for a PSH project.
2. Supportive services designed to meet the needs of the project participants must be made available to the project participant throughout the duration of stay in the PSH project.
3. Project participants in PSH must enter into a lease agreement that is terminable for cause for an initial term of at least one year. The lease must be automatically renewable upon expiration for a minimum term of one month, except on prior notice by either party.
4. Turnover beds in PSH projects will be prioritized for chronically homeless participants.
5. PSH project will use Housing First approaches.

Access to PSH Projects
- All referrals for PSH projects will come through the coordinated entry system and the CoC-wide PSH priority lists for families and individuals.

Minimum Performance Benchmarks for PSH Projects
- 80% or more of participants remain stable in PSH for at least one year or exit to a different permanent housing situation
- 20% or more of adult participants will have income from sources other than employment
- 54% or more of adult participants will increase income for sources other than employment
- 75% or more of all participants will have mainstream benefits at exit from the project
- 20% or more of adult participants will have employment income

Rapid Re-housing

Rapid rehousing is an intervention designed to help individuals and families exit homelessness as quickly as possible, return to permanent housing, and achieve stability in that housing. Rapid re-housing assistance is offered without preconditions (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided are typically tailored to the unique needs of the household.

The core components of a rapid re-housing program are housing identification and relocation, short-and/or medium term rental assistance and move-in (financial) assistance, and case management and housing stabilization services.

Program staff are expected to remain engaged with the households from first contact to program exit (no more than 24 months of rental assistance, in addition to up to 6 months of continued case management), using a progressive engagement approach and tailoring services to the needs of the household in order to assist the household to maintain permanent housing. (24 CFR 578.37 and *Core Components of Rapid Re-Housing,* National Alliance to End Homelessness) According to the National Alliance to End Homelessness, progressive engagement is "a strategy of providing a small amount of assistance to everyone entering the homelessness system. For most households, a small amount of assistance is enough to stabilize, but for those who need more, more assistance is provided. This flexible, individualized approach maximizes resources by only providing the most assistance to the households who truly need it. This approach is supported by research that household characteristics such as income, employment, substance use, etc., cannot predict what level of assistance a household will need."

Eligibility Criteria
- Participants must meet categories 1- Literally Homeless or 4 – Fleeing Domestic Violence as outlined by the HUD definition of homelessness.
- If the household meets category 4, they must also reside in one of the places set forth in category 1 at the time eligibility is determined. Homeless Verification form must be retained in the household's file.
- The participant's household annual income must be at or below 30% CMI.
- The participant must be assessed using the VI-SPDAT or VI-F-SPDAT. A copy of the assessment shall be retained in the participant's file.
- Participants must lack sufficient resources and support networks necessary to retain housing without rapid rehousing assistance (24 CFR 578.37(E)).

- Participants will be prioritized based on VI-SPDAT or VI-F-SPDAT score and length of time homeless. Youth ages 18-21 will be prioritized.

Minimum Standards
1. The maximum length of program participation is 24 months.
2. Supportive services designed to meet the needs of the project participants must be made available to the project participant throughout the duration of stay in the RRH project.
3. Project participants in RRH must enter into a written lease agreement that is terminable for cause. The lease must be automatically renewable upon expiration for a minimum term of one month, except on prior notice by either party. Programs may have additional requirements determined by program funding requirements. For example, programs may require a written lease agreement for an initial term of one year.
4. RRH programs may provide move-in costs.
5. RRH project will use Housing First approaches, following the Minimum Standards listed in the Housing First section of the Written Standards.
6. Financial assistance and case management should be based on a household's individual needs using progressive engagement. Assistance should be offered using a light touch; start with a small amount of assistance and increase it if needed.
7. RRH programs will connect households with community resources and mainstream benefits to allow for individual resources to be used for housing costs.

Access to Rapid Re-housing
- All referrals for RRH projects will come through the coordinated entry system and the HSC community RRH priority lists for families and individuals.

Minimum Performance Benchmarks for RRH Projects
- Average length of shelter stay is less than 45 days.
- Average time from program entry to housing placement is 60 days.
- Referral to RRH Priority List within 7 days of emergency shelter entry or assessment for families and individuals living on the streets or in a place not meant for human habitation.
- 80% of participants will remain in permanent housing -at the end of the operating year or exiting to permanent housing during the operating year
- 80% of adult participants will maintain or increase their total income -at the end of the operating year or program exit.

DEFINITION OF HOMELESSNESS
24 CFR §583.5 HUD Homeless Definition

(1) An individual or family who lacks a fixed, regular and adequate nighttime residence, meaning:
  (i) An individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, camping ground;

(ii) An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangement (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low income individuals); or

(iii) An individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering that institution;

(2) An individual or family who will imminently lose their primary nighttime residence, provided that:

(i) The primary nighttime residence will be lost within 14 days of the date of application for homeless assistance;

(ii) No subsequent residence has been identified; and

(iii) The individual or family lacks the resources or support networks, e.g., family, friends, faith-based or other social networks, needed to obtain other permanent housing;

(3) Unaccompanied youth under 25 years of age, or families with children and youth, who do not otherwise qualify as homeless under this definition, but who:

(i) Are defined as homeless under section 387 of the Runaway and Homeless Youth Act (42 U.S.C. 5732a), section 637 of the Head Start Act (42 U.S.C. 9832), section 41403 of the Violence Against Women Act of 1994 (42 U.S.C. 14043e-2), section 330(h) of the Public Health Service Act (42 U.S.C. 254b(h)), section 3 of the Food and Nutrition Act of 2008 (7 U.S.C.2012), section 17(b) of the Child Nutrition Act of 1966 (42 U.S.C. 1786(b)), or section 725 of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11434a);

(ii) Have not had a lease, ownership interest, or occupancy agreement in permanent housing at any time during the 60 days immediately preceding the date of application for homeless assistance;

(iii) Have experienced persistent instability as measured by two moves or more during the 60-day period immediately preceding the date of applying for homeless assistance; and

(iv) Can be expected to continue in such status for an extended period of time because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse (including neglect), the presence of a child or youth with a disability, or two or more barriers to employment, which include the lack of a high school degree or General Education Development (GED), illiteracy, low English proficiency, a history of incarceration or detention for criminal activity, and a history of unstable employment;

Or

(4) Any individual or family who:

(i) Is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member, including a child, that has either taken place within the individual's or family's primary nighttime residence or has made the individual or family afraid to return to their primary nighttime residence;

(ii) Has no other residence; and

(iii) Lacks the resources or support networks, e.g., family, friends, and faith-based or other social networks, to obtain other permanent housing.

DEFINITION OF CHRONICALLY HOMELESS
24 CFR §578.3 HUD Chronically Homeless Definition

(1)   A "homeless individual with a disability," as defined in section 401(9) of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11360(9)), who:

(i) Lives in a place not meant for human habitation, a safe haven, or in an emergency shelter; and
(ii) Has been homeless and living as described in paragraph (1)(i) of this definition continuously for at least 12 months or on at least 4 separate occasions in the last 3 years, as long as the combined occasions equal at least 12 months and each break in homelessness separating the occasions included at least 7 consecutive nights of not living as described in paragraph (1)(i). Stays in institutional care facilities for fewer than 90 days will not constitute as a break in homelessness, but rather such stays are included in the 12-month total, as long as the individual was living or residing in a place not meant for human habitation, a safe haven, or an emergency shelter immediately before entering the institutional care facility;

(2)   An individual who has been residing in an institutional care facility, including a jail, substance abuse or mental health treatment facility, hospital, or other similar facility, for fewer than 90 days and met all of the criteria in paragraph (1) of this definition, before entering that facility; or

(3)   A family with an adult head of household (or if there is no adult in the family, a minor head of household) who meets all of the criteria in paragraph (1) or (2) of this definition, including a family whose composition has fluctuated while the head of household has been homeless.

List of Acronyms

CE – Coordinated entry
CoC – Continuum of Care
CoC Program – Continuum of Care Program – funded by HUD
EFS – Emergency Family Shelter
ESG – Emergency Solutions Grant – funded by HUD
ETH – Emergency Solutions Grant/Transitional Housing Program/Homeless Prevention Program – a combination of funding from HUD and the State of Wisconsin
HMIS – Homeless Management Information System
HSC – Homeless Services Consortium
HUD – Department of Housing and Urban Development
PSH – Permanent supportive housing
RRH – Rapid Re-housing
SPDAT – Service Prioritization Decision Assistance Tool
TH – Transitional housing
VA – Department of Veterans Affairs
VI-SPDAT – Vulnerability Index-Service Prioritization Decision Assistance Tool
VI-F-SPDAT – Vulnerability Index-Family Service Prioritization Decision Assistance Tool

Websites for Additional Information

- Dane County Homeless Services Consortium
  http://www.danecountyhomeless.org/
- National Alliance to End Homelessness
  http://www.endhomelessness.org/
- U.S. Department of Housing and Urban Development, HUD Exchange
  https://www.hudexchange.info/
- U.S. Interagency Council on Homelessness
  https://www.usich.gov/

Appendix E Glossary

affordable housing - housing for which the occupant(s) is/are paying no more than 30 percent of his or her income for gross housing costs, including utilities. *(US Department of Housing and Urban Development)*

chronic homelessness - a homeless individual with a disability who lives either in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 12 months, or on at least four separate occasions in the last 3 years, where the combined occasions total a length of time of at least 12 months. Each period separating the occasions must include at least 7 nights of living in a situation other than a place not meant for human habitation, in an emergency shelter, or in a safe haven. *(US Department of Housing and Urban Development, 2016)*

Continuum of Care (CoC) – a HUD-mandated program is designed to promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and state and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness. *(US Department of Housing and Urban Development)*

coordinated entry - a process that ensures that all people experiencing a housing crisis in a defined geographic area have fair and equal access, and are quickly identified, assessed for, referred, and connected to housing and homeless assistance based on their needs and strengths, no matter where or when they present for services. It uses standardized tools and practices, incorporates a system-wide Housing First approach, participant choice, and coordinates housing and homeless assistance such that housing and homeless assistance is prioritized for those with the most severe service needs. *(National Alliance to End Homelessness)*

diversion - a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. *(National Alliance to End Homelessness, 2011)*

doubled up - an individual or family living in a housing unit with extended family, friends, and other non-relatives due to economic hardship *(National Alliance to End Homelessness, 2010)*

functional zero - a well-coordinated and efficient community system that assures homelessness is rare, brief and non-recurring and no one is forced to live on the street.

harm reduction - an approach for substance use treatment that involves a set of practical techniques that are openly negotiated with clients around what is most likely to be achieved. The focus is on reducing the negative consequences and risky behaviors of substance use; it neither condones nor condemns any behavior. By incorporating strategies on a continuum from safer drug use, to managed substance use, up to abstinence, harm reduction practice helps clients affect positive changes in their lives. *(National Healthcare for the Homeless Council, 2010)*

Homeless Management Information System (HMIS) - a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. Most Dane County organizations and the CoC use ServicePoint.

housing first – a proven method of ending all types of homelessness, and is the most effective approach to ending chronic homelessness. It offers individuals and families experiencing homelessness immediate access to permanent affordable, or supportive housing, without clinical prerequisites like completion of a course of treatment or evidence of sobriety and with a low-threshold for entry.

housing locator - assists homeless families in identifying and transitioning into a full range of permanent housing opportunities. Housing locators actively work to recruit and build relationship with private landlords to access available housing for families.

housing navigator – assists homeless individuals and families with a comprehensive knowledge of VA, state, county, city, and community resources including not only housing options, locations, and availability, but also services including health, mental health, benefits, employment, and transportation, etc. The Navigator will use this knowledge to facilitate 'active' linkages before, during, and/or after permanent housing has been established as well as work with individuals and families to enhance their skills in utilizing these various resources, which are critical to the maintenance of permanent housing. *(VA National Center on Homelessness, 2016)*

housing stability - the extent to which a family or individual's access to safe and permanent housing of is secure.

McKinney-Vento Act - a federal law that ensures immediate enrollment and educational stability for homeless children and youth.

Opening Doors - a federal strategy to prevent and end homelessness nationwide with specific goals to end veteran homelessness by 2016, chronic homelessness by 2017, homelessness among families with children and youth by 2020, and setting a path to end all types of homelessness.

permanent supportive housing (PSH) - permanent housing with indefinite leasing or rental assistance paired with supportive services to assist homeless persons with a disability or families with an adult or child member with a disability achieve housing stability. *(US Department of Housing and Urban Development)*

racial justice - the systematic fair treatment of people of all races, resulting in equitable opportunities and outcomes for all. *(Race Forward)*

rapid re-housing - an intervention designed to help individuals and families exit homelessness as quickly as possible, return to permanent housing, and achieve stability in that housing. Rapid re-housing assistance includes housing location services, rental assistance, and access to support services.

transitional housing (TH) – housing designed to provide homeless individuals and families with the interim stability and support to successfully move to and maintain permanent housing.

trauma informed care - an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma. Trauma Informed Care also emphasizes physical, psychological and emotional safety for both consumers and providers, and helps survivors rebuild a sense of control and empowerment. *(The Trauma Informed Care Project)*

unaccompanied youth - youth (17 and under) experiencing homeless while not in the physical custody of a parent or guardian; may also include runaway youth.

VI-SPDAT - a pre-screening, or triage tool that is designed to be used by all providers within a community to quickly assess the health and social needs of homeless persons and match them with the most appropriate support and housing interventions that are available.

youth and young adult agencies - community agencies that specifically work with youth (13-17) and young adults (18-24) to prevent homelessness, provide emergency and transitional housing.