

The Network also recommends that enhanced case management staff and services be added to the City of Pasadena Bad Weather Shelter beginning with the 2005-2006 winter season. Because the current emphasis of shelter is hypothermia prevention, it currently only offers limited case management services.

The Network believes that only shelters that emphasize case management offered by well trained staff with access to services can effectively help homeless persons exit their lives on the streets and obtain permanent affordable housing. Every day homeless service providers help homeless households obtain and remain in permanent affordable housing. Such success is due in part to efficient case management staff and services offered by local shelters. It is necessary to empower the Pasadena Bad Weather Shelter with this greater capacity.

Only shelters with well developed case management can be effective in helping to end homelessness. The Bad Weather Shelter currently does not have as much case management capacity as other providers within the city's continuum of care system. Adding such resources to it would significantly increase the number of households who use the shelter as a way off the streets.

It important to note that more chronically homeless persons use the Bad Weather Shelter each year than any other residential program. This provides the community with a unique opportunity to reach chronically homeless persons who otherwise do not make contact with the continuum of care system.

Funding for Recommendation

- Bad Weather Shelter

As noted below, total costs for the expansion of days of operations and enhanced case management staff and services for the Bad Weather Shelter would be approximately \$120,000 –approximately \$100,000 for personnel costs and approximately \$20,000 for non-personnel costs. There are other costs related to the program such as food and supplies that are provided in-kind from volunteer groups that are not included in the total budget amount of \$120,000. Revenue from the City of Pasadena would be increased from \$40,000 to \$60,000. The Ecumenical Council of the Pasadena Area Churches would provide the other half of funding in the amount of \$60,000.

Expenses:

Personnel	\$99,446
Non-Personnel	<u>\$20,200</u>
Total:	\$119,646

Revenue:

City of Pasadena	\$60,000
Ecumenical Council	<u>\$60,000</u>
Total:	\$120,000

A description of public and private funding sources for the Bad Weather Shelter is as follows:

1. Emergency Food and Shelter Program

The Emergency Food and Shelter (EFS) Program was created by Congress in 1983 to help meet the needs of hungry and homeless people throughout the United States and its territories by allocating funds for the provision of food and shelter. Legislation created a National Board, chaired by the Federal Emergency Management Agency (FEMA), whereby funds flow from Congress through FEMA to the National Emergency Food and Shelter Program Board. Each county receiving an allocation from the National Board must have a Local Board to set criteria, establish program guidelines and allocate funds.

The Emergency Food and Shelter Program (EFSP) Board for Los Angeles County receives over \$6,000,000 annually for low income persons including homeless persons for supplemental food, shelter, and rent/utility assistance. Annually the EFSP Local Board funds on average 150 agencies with the typical grant being between \$20,000 and \$30,000. The Ecumenical Council for the Pasadena Area Churches (ECPAC) receives local EFSP Local Board funds in the amount of \$70,000 for supplemental food and shelter. There are six (6) agencies that receive funds for supplemental food and shelter from ECPAC.

2. Housing Opportunities Fund

The Housing Opportunities Fund is used to provide financial assistance to construct, rehabilitate, acquire and preserve affordable housing units. For the current fiscal year, the revenue sources of the Fund consist of monies from the PCDC Low and Moderate Income Housing Trust Funds, Inclusionary Housing Ordinance funds (generated from in-lieu fee payments), California Housing Finance Agency HELP funds, California Dept. of Housing & Community Development Local Housing Trust Fund program, and Fannie Mae American Communities Fund.

3. Private Donations

Private donations are defined as monetary gifts from community groups and individuals, particularly those groups and individuals who are core supporters of a "Good Neighbor Program" and have the responsibility of preventing at-risk-to-homelessness households from becoming homeless within their immediate neighborhood. Such financial gifts can be used to support various homeless prevention activities including clothing, food, rental assistance, and utility assistance.

4. Private Foundations

Private foundations are defined as philanthropic agencies that provide grants for the homeless services. Grants are generally made to non-profit agencies that include public and private partnerships.

Outcomes

Outcomes include the following:

- 50% of chronically homeless persons who use the Bad Weather Shelter would receive social services on site;
- 25% of chronically homeless persons who use the Bad Weather Shelter would be connected to other homeless services during their stay at the shelter.

- **First Step Recovery Program**

Another recommendation concerning shelter is for a “First Step Recovery” program or “sobering station”. The purpose of this program is to stabilize homeless individuals who are under the influence of alcohol and/or other drugs so they can access other case management services in order to exit their lives from the streets.

This program will have 15 beds of which two (2) beds will be available for law enforcement on a 24-hour basis. A minimum stay of five (5) days is anticipated and extensions will be made on a case-by-case basis. All residents will work with highly-trained and experienced staff and establish a case management plan. Case management will include an intake and assessment and access to 12-step meetings, alcohol and drug education, and a mentoring program.

Funding for Recommendation

- First Step Recovery Program

The Network recommends that funding for the First Step Recovery Program come the funding sources listed in the following table which also details an annual budget including start-up costs.

Expense	Annual Cost	Source of Funding
Supportive Services (e.g., case management and related expenses)	\$300,000	Substance Abuse Prevention and Treatment Block Grants; Emergency Housing and Assistance Program Operating Facility Grants; Private Foundations; Private Donations
Operations (e.g., utilities, insurance, maintenance, equipment, etc)	\$165,000	Substance Abuse Prevention and Treatment Block Grants; Emergency Housing and Assistance Program Operating Facility Grants; Private Foundations; Private Donations
Leasing	\$90,000	Substance Abuse Prevention and Treatment Block Grants; Emergency Housing and Assistance Program Operating Facility Grants; Private Foundations; Private Donations
Total:		
		\$555,000

A description of public and private funding sources for the First Step Recovery Program is as follows:

1. Emergency Housing and Assistance Program Operating Facility Grants

Emergency Housing and Assistance Program Operating Facility Grants (EHAP) provides facility operating grants for emergency shelters, transitional housing projects, and supportive services for homeless individuals and families. Eligible activities include direct client housing, including facility operations and administration, residential rent assistance, leasing or renting rooms for provision of temporary shelter, and capital development activities of up to \$20,000.

2. Emergency Housing and Assistance Program Capital Development

The purpose of this source of funding is to fund capital development activities for emergency shelters, transitional housing, and safe havens that provide shelter and supportive services for homeless individuals and families. Eligible activities include acquiring, constructing, converting, expanding and/or rehabilitating emergency shelter, transitional housing, and/or safe haven housing and administration of the award (limited to 5 percent).

3. Substance Abuse Prevention and Treatment Block Grants

Substance Abuse Prevention and Treatment Block Grants also are formula grants to states and territories, in this case, to fund alcohol prevention and treatment activities, prevention and treatment related to other drugs, and primary prevention programs. All individuals who have alcohol or substance use problems are eligible for services, including people who are homeless, or persons with co-occurring substance use disorders.

4. Private Donations

Private donations are defined as monetary gifts from community groups and individuals, particularly those groups and individuals who are core supporters of a "Good Neighbor Program" and have the responsibility of preventing at-risk-to-homelessness households from becoming homeless within their immediate neighborhood. Such financial gifts can be used to support various homeless prevention activities including clothing, food, rental assistance, and utility assistance.

5. Private Foundations

Private foundations are defined as philanthropic agencies that provide grants for the homeless services. Grants are generally made to non-profit agencies that include public and private partnerships.

Outcomes

Outcomes include the following:

- 90% of clients will complete an intake and assessment upon entering the program;
- 60% of clients will be connected to additional social services during their program stay;
- 50% of clients will complete a case management plan during the first 10 days of their program stay;
- 30% of clients will enter a substance abuse treatment program at the end of their program stay.

Transitional Housing

The Pasadena Housing and Homeless Network (Network) recommends that an additional 16 beds of transitional housing be developed for families during the first year of the strategy. Transitional housing, as defined by HUD, is the provision of beds/units for residents for up to two (2) years with on-site and off-site case management services. The Network believes that only local transitional housing programs with professional case management staff and services should be supported.

The Network also believes that the increase in transitional housing beds/units should be for families because families often need more time to become self-sufficient than what shelters allow. Shelters generally allow a family to stay for 60 days with extensions when needed. Often, a parent(s) needs more time to stabilize themselves because of the needs of their children. Transitional housing provides temporary housing for up to two (2) years which allows the parent(s) the time needed to stabilize themselves and their children.

Funding for Recommendations

- Transitional Housing

Funding for acquisition and rehabilitation for each of the homes would come from the Emergency Housing and Assistance Program Capital Development (EHAPCD) provided by the State of California Housing and Community Development Department. Up to \$1,000,000 is available to fund capital development activities for emergency shelters and transitional housing that provide beds and supportive services for homeless individuals and families.

Expenses:

Acquisition/Rehabilitation	\$1,000,000
Personnel	\$105,000
Non-Personnel	<u>\$72,000</u>

Total: \$1,177,000

Revenue:

EHAP-CD	\$1,000,000
Public Grants	\$60,000
Private Grants	\$60,000
Private Donations	<u>\$60,000</u>

Total: \$1,180,000

Costs for the day-to-day program operations would be approximately \$177,000. Funding to pay for day-to-day program operations could potentially come from public grants, private grants, in-kind services, leveraging, and private donations.

A description of public and private funding sources for transitional housing programs is as follows:

1. Emergency Food and Shelter Program

The Emergency Food and Shelter (EFS) Program was created by Congress in 1983 to help meet the needs of hungry and homeless people throughout the United States and its territories by allocating funds for the provision of food and shelter. Legislation created a National Board, chaired by the Federal Emergency Management Agency (FEMA),

whereby funds flow from Congress through FEMA to the National Emergency Food and Shelter Program Board. Each county receiving an allocation from the National Board must have a Local Board to set criteria, establish program guidelines and allocate funds.

The Emergency Food and Shelter Program (EFSP) Board for Los Angeles County receives over \$6,000,000 annually for low income persons including homeless persons for supplemental food, shelter, and rent/utility assistance. Annually the EFSP Local Board funds on average 150 agencies with the typical grant being between \$20,000 and \$30,000. The Ecumenical Council for the Pasadena Area Churches (ECPAC) receives local EFSP Local Board funds in the amount of \$70,000 for supplemental food and shelter. There are six (6) agencies that receive funds for supplemental food and shelter from ECPAC.

2. In-Kind Donations and Services

In-kind donations and services come from community groups and individuals. In-kind donations consist of non-monetary gifts such as clothing, food, and household items. In-kind services include child care, health care, legal services, and transportation (i.e., bus passes and tokens).

3. Leveraging of Services

Leveraging is often based upon agreements such as “memorandums of understanding” between two community agencies and/or individuals. Within the context of homeless prevention, leveraging such as non-monetary in-kind donations and in-kind services as noted above would be committed in writing between one community agency to another and based upon a mutual concern for homeless prevention.

Leveraging for in-kind services would consist of a wider-range of services than noted under in-kind services above. In-kind services would also include domestic violence prevention services, employment counseling and placement, public benefits assistance, substance abuse treatment, and veteran benefits and related services.

Leveraging would also include intake and assessment and case management services. Such services would predominately include agency staff who have the expertise to provide the in-kind services noted within this section. Such services would also include staff supervision.

4. Emergency Housing and Assistance Program Operating Facility Grants

Emergency Housing and Assistance Program Operating Facility Grants (EHAP) provides facility operating grants for emergency shelters, transitional housing projects, and supportive services for homeless individuals and families. Eligible activities include direct client housing, including facility operations and administration, residential rent assistance, leasing or renting rooms for provision of temporary shelter, and capital development activities of up to \$20,000.

5. Emergency Housing and Assistance Program Capital Development

The purpose of this source of funding is to fund capital development activities for emergency shelters, transitional housing, and safe havens that provide shelter and supportive services for homeless individuals and families. Eligible activities include acquiring, constructing, converting, expanding and/or rehabilitating emergency shelter, transitional housing, and/or safe haven housing and administration of the award (limited to 5 percent).

6. Private Donations

Private donations are defined as monetary gifts from community groups and individuals, particularly those groups and individuals who are core supporters of a "Good Neighbor Program" and have the responsibility of preventing at-risk-to-homelessness households from becoming homeless within their immediate neighborhood. Such financial gifts can be used to support various homeless prevention activities including clothing, food, rental assistance, and utility assistance.

7. Private Foundations

Private foundations are defined as philanthropic agencies that provide grants for the homeless prevention activities noted within this section. Grants are generally made to non-profit agencies including collaborating efforts such as transitional housing programs.

Outcomes

Outcomes include the following:

- 100% of residents will complete an intake and assessment upon entering the program;
- 100% of residents will establish a case management plan that will help obtain permanent affordable housing during the first week of their residency;
- 75% of residents will obtain permanent affordable housing by completion of their program stay.

c. Recommendation 3: Permanent Supportive Housing With Case Management Services

The Pasadena Housing and Homeless Network (Network) recommends that the number of beds/units of permanent affordable supportive housing with case management be increased through a "Safe Haven" Program, Shelter Plus Care, and efficiency units for single room occupancy.

"Safe Haven" Program

The Network recommends that a Safe Haven Program be established that will serve the "most-visible" and "hardest-to-reach" homeless persons with severe mental illness, who have been residing primarily in a public (street, sidewalks, parks, etc.) or private place (occasional residence in an emergency shelter) not designed for, or ordinarily used as, a regular sleeping accommodation for human beings and have been unable or unwilling to participate in supportive services. Safe Havens are low-demand, high expectation programs with few initial requirements other than the clients abstain from alcohol and/or other drug use on the premises and not exhibit threatening behavior. High expectations reflect the probability that with time and appropriate, non-threatening services, clients will become more amenable to accepting medications and other stabilization services as a first step toward obtaining appropriate housing, services, and benefits.

The proposed program's service population are often "chronically homeless" as defined by HUD. They are unaccompanied homeless individuals with a disabling condition who have either been continuously homeless for a year or more OR have had at least four (4) episodes of homelessness in the past three (3) years. They also have a disabling condition which HUD defines as "a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions." HUD also notes that to be considered chronically homeless, persons must have been sleeping in a place not meant for human habitation (e.g., living on the streets) or in an emergency homeless shelter during that time.

The characteristics noted above make it very difficult for the needs of the "hardest-to-reach" homeless persons to be addressed by outreach and housing programs such as emergency shelters and transitional housing programs that serve the general homeless population. Thus, opportunities for such severely mentally ill and chronically homeless individuals to move beyond homelessness are greatly reduced. Moving beyond homelessness is also greatly reduced by the very nature of their disability which disrupts their judgment, motivation, and social skills.

Therefore, because of their complex needs and resistance to homeless services, a comprehensive and flexible array of specialized services and related supportive efforts must be readily available to assist them. The proposed program would have a non-residential and residential component that serves as a portal of entry for severely mentally ill and chronically homeless individuals to move beyond homelessness and into the area's continuum of care.

The non-residential component should consist of 1) a drop-in center where food, clothing, bathroom, and laundry facilities will be provided only to the intended service population on a drop-in basis; and 2) social services and referrals within a non-intrusive, low demand environment. The residential component should consist of 25 units of permanent supportive housing with on-site and off-site case management services. Each resident would be assigned to a case manager. However, each case manager would not be responsible for more than eight (8) clients.

Funding for Recommendation

- Safe Haven

The Network recommends that funding for the Safe Haven Program come from the Department of Housing and Urban Development's Supportive Housing Program (SHP). The following table details an annual budget including start-up costs.

Expense	Annual Cost	Source of Funding
Supportive Services (e.g., case management and related expenses)	\$170,000	Supportive Housing Program; other federal, state, and county funding; Private Foundations
Operations (e.g., utilities, insurance, maintenance, equipment, etc)	\$165,000	Supportive Housing Program; other federal, state, and county funding; Private Foundations
Acquisition and Rehabilitation	\$3,000,000	California Multifamily Housing Program: Special Needs Populations; Housing Opportunities Fund

A description of the public and private funding sources for permanent supportive housing is as follows:

1. HUD's Supportive Housing Program

Grants are for new construction, acquisition, rehabilitation, or leasing of buildings to provide transitional or permanent housing, as well as supportive services to homeless individuals and families and day-to-day operating costs.

2. California Multifamily Housing Program: Special Needs Populations.

MHP funds are provided as permanent financing only, and may be used to take out construction loans used to cover normal project development (capital) costs.

3. Housing Opportunities Fund

The Housing Opportunities Fund is used to provide financial assistance to construct, rehabilitate, acquire and preserve affordable housing units. For the current fiscal year, the revenue sources of the Fund consist of monies from the PCDC Low and Moderate Income Housing Trust Funds, Inclusionary Housing Ordinance funds (generated from in-lieu fee payments), California Housing Finance Agency HELP funds, California Dept. of Housing & Community Development Local Housing Trust Fund program, and Fannie Mae American Communities Fund.

Outcomes

Outcomes include the following:

- 100% of residents will establish a case management plan with a case manager during their first 30 days of residency;
- 75% of residents will increase their monthly incomes during their first 90 days of residency;
- 90% of residents will maintain their housing six (6) months after beginning their residency.

Shelter Plus Care

The Pasadena Housing and Homeless Network (Network) also recommends that the number of Shelter Plus Care tenant-based and sponsor-based rental assistance certificates be increased. Shelter Plus Care assists homeless individuals and families with mental disabilities, chronic substance abuse, and/or infected with HIV/AIDS by providing long-term affordable rental housing and a broad range of supportive services. The goal of Shelter Plus Care is to increase the participants' independent living skills.

Under tenant-based rental assistance, the City of Pasadena requests funds to provide rental assistance on behalf of program participants who choose their own housing units. Under sponsor-based rental assistance, the applicant (a non-profit agency) provides rental assistance and housing units on behalf of program participants. Tenants pay no more than 30% of their monthly income.

Funding for Recommendation

The Pasadena Housing and Homeless Network (Network) recommends that the City of Pasadena apply for Shelter Plus Care tenant-based and a non-profit applicant apply for sponsor-based rental assistance certificates through HUD's annual Continuum of Care application. As noted above, Shelter Plus Care provides rental assistance for homeless people with disabilities, primarily those with serious mental illness, chronic problems with alcohol and/or drugs, and acquired immunodeficiency syndrome (AIDS), and related diseases. Each dollar of rental assistance must be matched by dollar provided by the grantee from federal or private sources to be used for supportive services. The City has applied successfully to HUD for Continuum of Care funding for a wide-range of permanent supportive housing that has included Shelter Plus Care tenant-based rental assistance certificates during the past nine (9) years.

It is important to note that Shelter Plus Care has a match requirement. Applicants must match the aggregate amount of Shelter Plus Care rental assistance with supportive services. This ensures that appropriate and timely services will be available to meet the needs of individual participants.

Pacific Clinics currently meets the match requirement by providing or coordinating supportive services for Shelter Plus Care participants. Pacific Clinics or another social service provider would have to provide the match requirement for any additional Shelter Plus Care tenant-based rental assistance certificates.

Outcomes

Outcomes include the following:

- 100% of residents will establish a case management plan with a case manager during their first 30 days of residency;
- 75% of residents will increase their monthly incomes during their first 90 days of residency;
- 90% of residents will maintain their housing six (6) months after beginning their residency.

Efficiency Units For Single Room Occupancy

The Pasadena Housing and Homeless Network (Network) also recommends an increase of efficiency units for single room occupancy and that some of the units provide efficient case management staff and services and that some of the units do not. Not all residents will have a disability and/or require on-going case management.

Efficiency units for single room occupancy with competent case management staff and services are necessary for those individuals who have a disability and limited income of less than \$10,000 a year. These persons are not the "hardest-to-reach" homeless persons with severe mental illness who need to be served by the proposed Safe Haven Program. They often have a limited income (under \$10,000 annually) and would not have to pay more than 30% of their adjusted income to live in these units. This means that their monthly rent would not exceed \$250. The rental assistance payments cover the difference between the tenant's share of the rent and the Fair Market Rent (currently \$559/month) for the unit as established by HUD. In addition, they would have access to on-site and off-site case management services.

Efficiency units for single room occupancy are also needed for individuals who may not have a disability or require on-going case management. They also would not have to pay more than 30% of their adjusted income (under \$25,000 annually) to live in these units which means that their monthly rent would not exceed \$625. The rental assistance payments cover the difference between the tenant's share of the rent and the Fair Market Rent (currently \$746/month) for the unit as established by HUD.

Funding for Recommendation

The Pasadena Housing and Homeless Network (Network) recommends that the City of Pasadena apply for efficiency units for single room occupancy with case management staff and services through HUD's annual Continuum of Care application under Shelter Plus Care and Section 8 Moderate Rehabilitation SRO. The City has applied

successfully to HUD for Continuum of Care funding for a wide-range of permanent supportive housing that has included Shelter Plus Care tenant-based rental assistance certificates and efficiency units for single room occupancy with competent case management staff and services permanent during the past nine (9) years.

The efficiency units for single room occupancy, however, were funded under the Supportive Housing Program and not Section 8 Moderate Rehabilitation SRO. Applying for efficiency units for single room occupancy under Section 8 Moderate Rehabilitation SRO would require rehabilitation of a selected property. To be eligible for rental assistance, a unit must receive a minimum of \$3,000 of rehabilitation. HUD notes that assistance provided under the SRO program is designed to bring more standard SRO units into the local housing supply (than the Supportive Housing Program) to assist homeless persons. HUD also notes that "the units might be in a rundown hotel, a Y, an old school, or even in a large abandoned home."

In order to provide case management services, the non-profit agency would have to provide funding for a case manager. Funding for a case manager could come from public funding (i.e., CDBG, CSBG) or private funding (i.e., private foundations or private donations).

Outcomes

Outcomes include the following:

- 100% of residents will establish a case management plan with a case manager during their first 30 days of residency;
- 75% of residents will increase their monthly incomes during their first 90 days of residency;
- 90% of residents will maintain their housing six (6) months after beginning their residency.

D. Families and Individuals who were homeless and obtained permanent affordable housing but are at-risk-to-homelessness.

Findings

Throughout the year, homeless service providers help individuals and families who became homeless obtain and maintain affordable housing. Anecdotally, homeless service providers report that nearly all of the previous homeless individuals and families that obtained and maintained affordable housing remain at-risk-to-homelessness.

Recommendations

The Pasadena Housing and Homeless Network recommends that "after-care" be provided to those previous homeless individuals and families that obtained affordable housing but remain at-risk-to-homelessness. After-care should consist of basic needs

assistance (e.g. food), counseling, and on-going case management services when needed. Case management includes domestic violence, employment, health, mental health, and substance abuse services.

Funding for Recommendation

Costs for this recommendation will be offset by existing homeless case management resources and services that are funded through the City's continuum of care system. Basic needs assistance through the Good Neighbor Program would also offset costs related to after-care.

Outcomes

Outcomes include the following:

- 100% of residents will work with a case manager during their residency;
- 75% of residents will receive supplemental resources during their first year of residency;
- 90% of residents will maintain their housing one (1) year after beginning their residency.

IV. Findings and Recommendations Concerning Existing HUD Continuum of Care Funded Programs

The section concerns those existing residential and non-residential activities that currently receive funding through HUD's annual Continuum of Care application. Each year HUD issues a Continuum of Care application that provides funding for existing activities already funded through previous Continuum of Care applications.

Findings

The Pasadena Housing and Homeless Network has found that each of the existing residential and non-residential activities that currently receive funding through HUD's annual Continuum of Care application have been performing satisfactorily.

In its role as the lead agency for Pasadena's continuum of care, City of Pasadena Housing and Community Development Division staff has various methods available to determine whether renewal activities are performing satisfactorily and effectively addressing the needs for which they were designed. These methods include 1) reviewing and providing technical assistance in the application process, thereby assuring that each activity fills a gap in the continuum and sets ample, yet attainable program goals; 2) reviewing and providing technical assistance in the Technical Submission process, thereby gaining familiarity with the approved budget, position descriptions, service goals and outcomes; 3) upon approval of the Technical Submission, incorporating the scope of services, service goals, outcomes and budget in the Sub-recipient Agreement between the City and project sponsor; and 4) providing

technical assistance on how to collect data for the Annual Performance Report (APR). As a result, these opportunities provided staff with an opportunity to inform the Network as to how effectively the renewal activities are currently operating and as to whether or not they are performing satisfactorily.

Recommendations

The Network recommends that each of the activities continue to receive renewal funding as long as they are performing satisfactorily. The opportunity to renew each program each year is provided in HUD's annual Continuum of Care application. Activities that are eligible for renewal each year include:

Permanent supportive housing for households in which one person is infected with HIV/AIDS. Upon admittance into the program, each HIV/AIDS-affected resident develops an individualized service plan in conjunction with the Support Service Coordinator and the case manager from the referring agency. Support Service Coordinators visit each resident in their home on a weekly basis to monitor progress in meeting the goals of the Individual Service Plan and to advocate on residents' behalf.

Transitional housing that provides multiple case management services for men who are chronically mentally ill, substance abusers, or dually diagnosed. Case management services include health care, mental health care, and substance abuse counseling and support services.

Transitional housing program for families that provides case management based services such as job preparation and placement, money management training, substance abuse recovery assistance, childcare assistance, mental health services, parenting skills, after-school tutoring, school-related services and assistance in obtaining permanent housing.

Transitional housing program that provides case management services for single women who are chronic substance abusers. Residents also receive case management based services such as job preparation and placement, money management training, substance abuse recovery assistance, childcare assistance, mental health services, parenting skills, after-school tutoring, school-related services and assistance in obtaining permanent housing.

Intake/Outreach/Assessment Center that serves as the city's entry point into the continuum of care system. There is no other activity in Pasadena where homeless people can go to have such a broad range of needs met in one place. Instead of spending days going from agency to agency for various needed services, homeless people are able to receive a wide range of services in a matter of hours. Case managers develop individualized case management plans with clients with short- and long-term objectives in order to obtain permanent housing.

Permanent supportive housing program for persons in substance abuse recovery. Residents receive case management services in order to ensure that they are able to maintain their recovery and live independently.

Homeless Management Information System which is a networked computerized record-keeping system that enables the City of Pasadena and homeless service providers to collectively perform a number of activities that have never been done with the City's continuum of care system. Such activities would include: 1) decreasing duplicative intakes and assessments; 2) streamlining referrals; 3) coordinating case management; 4) tracking client outcomes; 5) and preparing financial and programmatic reports for funders. The City of Pasadena is collaborating with the Los Angeles Homeless Services Authority, the County of Orange, and the Cities of Glendale and Long Beach to develop a regional HMIS system.

V. Findings and Recommendations Concerning Mainstream Resources

HUD has identified mainstream resources as including the following programs and services:

- Income support programs such as Supplemental Social Security Income and Temporary Assistance for Needy Families and supplements such as Food Stamps;
- Medicaid and other health insurance programs, including Community Health Centers and health assistance through the Veteran Administration;
- Mental health and substance abuse services funded through a variety of Federal block grant programs;
- Workforce Initiative Act (WIA) programs designed to provide training and secure employment for low-income workers receiving benefits;
- Housing subsidy programs, such as Federal Housing Choice and public housing.

Findings

Congress appropriates several hundred billion dollars each year for mainstream assistance programs, such as Medicaid, TANF, Food Stamps and SSI. Homeless persons are typically eligible for one or more of these major assistance programs that can provide many of the services that are currently funded by HUD's Supportive Housing Program (SHP). Thus, Mainstream resources have taken on new urgency with the Administration's goal to end chronic homelessness.

For a number of years, over half of all of HUD's competitive homeless assistance funds were used to provide supportive services. The Administration's goal is to significantly reduce HUD's competitive homeless assistance funds to provide supportive services. As providers assist homeless persons in identifying and successfully accessing mainstream assistance programs, the need to use HUD homeless resources to provide supportive services will decline allowing HUD's funds to be increasingly used to develop more needed permanent supportive housing.

As a result, HUD now requires that each local jurisdiction develop and implement a plan to coordinate and integrate their homeless services with other mainstream health, social services, and employment programs for which homeless populations may be eligible.

Recommendation

The Pasadena Housing and Homeless Network recommends that the Homeless Coordinator work closely with homeless service providers and mainstream resource providers to implement the following policies that are required by HUD from every local jurisdiction in its annual Continuum of Care application:

- that a majority of homeless assistance providers have case managers systematically assist clients in completing applications for mainstream benefit programs;
- that the Continuum of Care systematically analyzes its projects' APRs to assess and improve access to mainstream programs;
- CoC contains a specific planning committee (that meets once a month) to improve CoC-wide participation in mainstream programs;
- that a majority of homeless assistance providers use a single application form for four or more of the above mainstream programs;
- that the Continuum of Care systematically provides outreach and intake staff specific, ongoing training on how to identify eligibility and program changes for mainstream programs;
- that the Continuum of Care have specialized staff whose only responsibility is to identify, enroll, and follow-up with homeless persons on participation in mainstream programs;
- that a majority of homeless assistance providers supply transportation assistance to clients to attend mainstream benefit appointments;
- A majority of homeless assistance providers have staff systematically follow-up to ensure that mainstream benefits are received.

Funding for Recommendation

Cost for this recommendation is included in the annual costs for the Homeless Coordinator whose responsibilities are noted above.

Outcomes

Included in the One-Year Action Plan (2006-2007) will be program outcomes based upon the actions of the Planning Program Committee. As noted above, the Committee will meet monthly in order to implement and improve access to mainstream resources.

VI. Other Findings and Recommendations

Federal Funding Sources

There are other recommendations made by the Pasadena Housing and Homeless Network (Network) in this report. Recommendations focus on monitoring funding cuts to federal funding sources that have been granted to the City of Pasadena and homeless service providers in the past. Two sources of funding that should be closely monitored are Community Development Block Grant and Section 8 Housing Choice Voucher Program. Funding for these programs may be cut in the near future.

Section 8 subsidies represent a major source of permanent affordable housing for households who are at-risk-to-homelessness. Though funding for vouchers is increased over FY 2005, there is still not enough to fund all of the vouchers that were being used during FY 2004 taking into account inflation and tenant protection vouchers (which serve people who were assisted by other HUD programs, but are being shifted to the Housing Choice Voucher program). There are some changes to the funding structure of the Section 8 program that could, over the long term, lead to lower funding levels than are needed to keep up with increased costs. Specifically, funding would be similar to a block grant, which tends to remain level over time and not keep up with inflation or other additional costs.

There are funding cuts for FY 2006 that should also be monitored. Funding cuts include

- Housing for Persons with Disabilities (Section 811) which is being cut from 238 million in FY 2005 to 120 million in FY 2006;
- Housing Opportunities for People With AIDS (HOPWA) which is being cut from 282 million in FY 2005 to 264 million in FY 2006;
- Substance Abuse and Mental Health Service Administration Homelessness Funding which is being cut from 46 in FY 2005 million to 36 million in FY 2006;
- Community Services Block Grant which is being eliminated—there was 637 million in FY 2005 and is being cut to \$0 in FY 2006.

Community Issues

There were several other findings and recommendations made concerning “community issues”. Community issues are defined as illegal or legal activities by homeless persons or by individuals who want to help them and are of concern to the Pasadena Housing and Homeless Network. Such concerns were activities that were primarily related to parks, libraries, and law enforcement.

A. Concerning Parks

Those issues that were identified as areas of concern and related recommendations are as follows:

1. distribution of prepared/unprepared food and food items by community groups and individuals;
2. sleeping in parks;
3. sleeping in cars within park parking lots;
4. bathing and washing clothes in park bathrooms;
5. alcohol and other drug use on park premises;
6. storing personal property in parks;
7. urination and defecation in public.

Recommendation 1: discourage community groups from distributing food and clothing in parks through existing ordinances

Recommendation 2: encourage them to distribute such items through existing social service programs such as the proposed Good Neighbor Program through community outreach and education

Recommendation 3: continue to enforce existing rules and regulations concerning sleeping in parks, urination/defecation, alcohol and other drug use, bathing and washing clothes in bathrooms, and storing property in parks

Recommendation 4: have park staff working closely with street outreach teams in identifying and interacting with homeless persons in parks in order to connect them to street outreach workers who can link them to continuum of care services.

Funding for Recommendations

Costs for these recommendations will be offset by in-kind services from community members and by existing park staff, police officers, and street outreach workers.

B. Concerning Libraries

Those activities that were identified as areas of concern and related recommendations are as follows:

1. sleeping on the grounds of the library;
2. bathing and washing clothes in bathrooms;
3. alcohol and other drug use on premises;
4. storing personal property on premises;
5. sleeping inside the building;
6. using tables and chairs for long periods of time.

Recommendation 1: continue to enforce existing rules and regulations concerning sleeping in parks, urination/defecation, alcohol and other drug use, bathing and washing clothes in bathrooms, and storing property in parks

Recommendation 2: have library staff working closely with street outreach teams in identifying and interacting with homeless persons in parks in order to connect them to street outreach workers who can link them to continuum of care services.

Funding for Recommendations

Costs for these recommendations will be offset by existing library staff and security personnel, police officers, and street outreach workers.

C. Concerning Law Enforcement

Those activities that were identified as areas of concern and related recommendations fall within two groups—those that are not a crime and those that are a crime.

The following activities, which are common activities for some homeless persons, are often considered as negative impacts by businesses and residents but are not a crime unless accompanied by other behaviors that are crimes:

1. loitering;
2. sleeping in public;
3. panhandling (not done aggressively);
4. sitting/lying/leaning;
5. washing windshields;
6. street performances

Recommendation: continue to enforce existing laws and regulations concerning each of the activities noted above.

The following behaviors, which are common activities for some homeless persons, are considered crimes and are enforceable by police officers:

1. aggressive panhandling;
2. bathing in public places;
3. camping in unauthorized public and private places;
4. drinking in public;
5. entering/sleeping in vacant buildings;
6. possession of an owner's shopping cart;
7. storing property without permission on public or private property;
8. urination/defecation in public.

Recommendation: continue to enforce existing laws and regulations concerning those behaviors that are crimes.

Funding for Recommendations

Costs for these recommendations will be offset by existing law enforcement staff.

VII. Funding A Strategy to End Homelessness

There are several sources of revenue for homeless programs—some of which are included in the recommendations noted in the above sections—that are either specifically targeted for homeless programs or include homeless persons as an eligible service population. The Pasadena Housing and Homeless Network recommends that the City of Pasadena and/or local non-profit agencies work together to continue to apply for, or begin to apply for, the following sources of revenue:

In addition to the funding sources noted in this report, the Network also recommends that the City of Pasadena pursue identification of supplemental resources to ensure a dedicated stream of funding that can be used to help finance the recommendations in this report.

HUD Homeless Assistance Programs

HUD administers five targeted programs that can be used to fund the development, operation, and supportive services of emergency, transitional, and permanent housing for people who are homeless.

- **Emergency Shelter Grants** are formula grants to states and local governments for the purpose of providing emergency and transitional housing, and are coordinated through the Consolidated Plan, a 5-year comprehensive housing plan required of communities to access HUD housing resources.
- **Supportive Housing Program (SHP), Shelter Plus Care (S+C), and Section 8 Moderate Rehabilitation Single Room Occupancy (SRO)** program funds are awarded through an annual competition that requires communities to engage in a coordinated strategic planning process and to submit a comprehensive Continuum of Care plan to address homelessness.
 - **SHP** funds may be used for the development and operation of transitional and permanent housing, and for supportive services;
 - **S+C** funds may be used to provide rental assistance for permanent housing, with required matching funds for supportive services;
 - **Section 8 SRO** funds can be used for rental assistance in single-room-occupancy dwellings.

- **Housing for People who are Homeless and Addicted to Alcohol**

Approximately 10 two-year grants are expected to be awarded under a new \$10 million Housing for People who are Homeless and Addicted to Alcohol initiative created by Congress in PL 108-7. This initiative is designed to provide supportive housing assistance to chronically homeless persons who have been living on the streets for at least 365 days over the last five years and have a long term addiction to alcohol (serial inebriates). To be eligible for assistance under this program, clients must be living on the streets at the time of initial contact and will have no history of living in transitional or permanent housing over the last five years. Grantees will be expected to partner with local law enforcement, court systems and other relevant institutions to identify eligible clients for the program. To be eligible for funding consideration, a project must be located within a Continuum of Care that has at least 100 people who are chronically homeless and unsheltered as reported by the Continuum of Care or a recent official count.

In addition, there are other HUD programs that are designed to expand affordable housing opportunities for low-income people or people with disabilities, including those who are homeless.

- **Public Housing** is developed, owned, and managed by public housing agencies (PHAs) under contract with HUD. HUD provides a subsidy to cover operating and management costs of the units, and tenants generally pay 30 percent of their incomes toward rent. PHAs are allowed to establish local preferences for income targets and tenant selection and must submit a 5-year plan that outlines these preferences and demonstrates their consistency with the local needs and strategies identified in the consolidated plan;
- **The Housing Choice Voucher Program**, formerly referred to as the Section 8 program, is the largest Federal program targeted to very low-income households, including people with disabilities (TAC, 2002). Administered through state or local PHAs, the program offers four types of assistance: tenant-based rental assistance; project-based rental assistance; homeownership assistance; and down payment assistance. Tenant-based assistance is the most common form, offering subsidies that allow tenants to pay 30 percent of their income toward housing costs in a unit of their choice;
- **The Home Investment Partnerships program (HOME)** is specifically designed to expand the supply of affordable housing for low and very low-income people. Program funds are controlled through the consolidated plan and awarded via formula grant to states and local jurisdictions. Partnerships among government and nonprofit organizations and private industry are required to develop and manage safe, decent, affordable housing. Funds may be used for homeownership, rental housing production, and tenant-based rental assistance, and are easily combined with funds from HUD's Homeless Assistance Programs;

- **Housing Opportunities for Persons with AIDS (HOPWA)** supports the provision of both housing and services for people with HIV or AIDS. Funds are awarded by block grant to states and large metropolitan areas and can be used for a variety of activities, including housing information and coordination assistance; acquisition, rehabilitation, and leasing of property; rental assistance; operating costs; supportive services; and technical assistance (TAC, 1999);
- **Community Development Block Grants (CDBG)** are formula grants to states and to "entitlement communities" (as defined by HUD) to provide decent housing and suitable living environments for moderate and low-income people. CDBG funds also are controlled through the consolidated plan and can be used for housing rehabilitation or construction, including shelters and transitional housing facilities, and for supportive services such as counseling, employment, and health care;
- **The Section 811 Supportive Housing for Persons with Disabilities Program** awards funds competitively to community based nonprofit organizations to develop and operate supportive housing for people with disabilities. Funds may be used for new construction, rehabilitation, or acquisition; for project-based rental assistance; and for supportive services to address the health, mental health, or other needs of people with disabilities.

Department of Health and Human Services

HHS administers three programs specifically designed to meet the needs of people who are homeless and who may have serious mental health and/or substance use disorders.

- **The Health Care for the Homeless (HCH) program**, administered by the Health Resources and Services Administration, awards grants to community-based organizations—including community health centers, local health departments, hospitals, and nonprofit community coalitions—to improve access to primary health care, mental health services, and substance abuse treatment. HCH funds support the provision of primary health care, substance abuse treatment, outreach, case management, provision of or referral to mental health services, and assistance in obtaining housing and entitlements (HRSA BPHC, 2001).
- **The Projects for Assistance in Transition from Homelessness (PATH) program**, administered by SAMHSA's CMHS, awards formula grants to states and territories to support community-based services for people with serious mental illnesses and/or substance use disorders who are homeless or at-risk of homelessness. PATH funds can be used to support a range of services, including outreach, screening and assessment, case management, mental health services, and substance abuse treatment, provision of or linkage to supportive services, and a limited set of housing services.

- **The Grants for the Benefit of Homeless Individuals (GBHI) program**, administered by SAMHSA's Center for Substance Abuse Treatment, provides funds to develop and expand mental health and substance abuse treatment services for people who are homeless. Grants are awarded to local public and nonprofit agencies to provide either substance abuse services, mental health services, or both, allowing communities the flexibility to provide the services they believe to be the most urgent.

HHS also administers a number of mainstream resource programs, for which homeless people may be eligible, that also can be used to provide services and supports.

- **Community Mental Health Services Block Grant** funds are formula grants to states and territories to create comprehensive, community-based systems of care for adults with serious mental illnesses and children with severe emotional disturbances. Funds are used at the discretion of states to provide services such as health, mental health, rehabilitation, employment, housing, and other supportive services. Most states provide services specific to adults with serious mental illnesses who are homeless. In some cases, states have used block grant funds to provide services in supportive housing. Mental health block grant funds also may be used to provide services for individuals with substance use disorders within certain guidelines;
- **Substance Abuse Prevention and Treatment Block Grants** also are formula grants to states and territories, in this case, to fund alcohol prevention and treatment activities, prevention and treatment related to other drugs, and primary prevention programs. All individuals who have alcohol or substance use problems are eligible for services, including people who are homeless, or persons with co-occurring substance use disorders;
- **Community Health Centers**, supported by discretionary project grants, provide preventive and primary care services to medically underserved populations; many have specific programs designed to serve individuals who are homeless;
- **Community Services Block Grants** are formula grants to states to support a range of services designed to address poverty and to promote self-sufficiency among low-income members of communities, including those who are homeless;
- **Social Services Block Grants**, also formula grants to states, can be used to support a range of services to prevent, reduce, and eliminate dependency and increase self-sufficiency among community residents.

Veterans Administration

The VA administers several programs that specifically meet the needs of veterans with mental illnesses and/or substance use disorders that are homeless.

- **The Domiciliary Care for Homeless Veterans program** provides funds to VA medical centers to support the delivery of health, mental health, substance abuse, and other social services in residential treatment settings for veterans who are homeless;
- **The Homeless Chronically Mentally Ill Veterans program** supports mental health services, substance abuse treatment, case management, and other rehabilitative services in community-based residential treatment settings for veterans with chronic mental illnesses who are homeless;
- **The Health Care for Homeless Veterans program** supports outreach and assessment, treatment, case management, and referral to community-based residential care for veterans with serious mental illnesses and substance use disorders who are homeless;
- **The HUD-VA Supported Housing program**, administered jointly with HUD, provides permanent supportive housing and treatment for veterans with serious mental illnesses and substance use disorders who are homeless;
- **Urban Homeless Veterans' Reintegration Program (HVRP)** are intended to address two objectives: (1) to provide services to assist in reintegrating homeless veterans into meaningful employment within the labor force, and (2) to stimulate the development of effective service delivery systems that will address the complex problems facing homeless veterans. Successful applicants will design programs that assist eligible veterans by providing job placement services, job training, counseling, supportive services, and other assistance to expedite the reintegration of homeless veterans into the labor force.

State and Local Resources

State and local governments administer many of the Federal programs mentioned earlier. They can either provide services themselves or can contract with local providers to offer services with these funds. In addition, many states and localities use their own resources for programs specifically designed to meet the housing and support service needs of people who are homeless. Resources include:

State

- **Emergency Housing and Assistance Program Operating Facility Grants**

The purpose of the grant is to provide facility operating grants for emergency shelters, transitional housing projects, and supportive services for homeless individuals and families. Eligible Activities include providing direct client housing, including facility operations and administration, residential rent assistance, leasing or renting rooms for provision of temporary shelter, capital development activities of up to \$20,000 per site, and administration of the award (limited to 5 percent).

- **Emergency Housing and Assistance Program Capital Development**

The purpose of this source of funding is to fund capital development activities for emergency shelters, transitional housing, and safe havens that provide shelter and supportive services for homeless individuals and families. Eligible activities include acquiring, constructing, converting, expanding and/or rehabilitating emergency shelter, transitional housing, and/or safe haven housing and administration of the award (limited to 5 percent).

- **Low Income Housing Tax Credits (LIHTC)**

Low Income Housing Tax Credits is a program administered at the state level that provides federal income tax credits for equity investors in low-income rental housing projects. Low-income rental housing projects that involve new construction, rehabilitation, or acquisition are eligible under the program.

- **Integrated Services for Homeless Adults with Serious Mental Illness**

The **Integrated Services for Homeless Adults with Serious Mental Illness** (AB 2034) program addresses the mental health, housing and vocational needs of adults, 18 years and older, who have serious mental illness and face homelessness, incarceration, or hospitalization. A comprehensive array of services including outreach, supportive housing and other housing assistance, employment, substance abuse, and mental and physical healthcare including medications.

- **The Mental Health Services Act (Proposition 63)**

Proposition 63, known as the Mental Health Services Act, will fund community mental health programs with voluntary outreach, access to medicines, and a variety of support services for children and adults with mental disorders. The initiative uses a model of integrated, recovery-based services, which includes outreach, medical care, short and long-term housing, prescription drugs, vocational training, and self-help and social rehabilitation. The measure's proponents believe that these programs will produce hundreds of millions in savings by reducing hospitalizations and incarcerations.

- **Local Housing Trust Fund**

The California Department of Housing and Community Development, Local Housing Trust Fund Program (LHTFP) was created by action of the State Legislature resulting from a voter initiative and the passing of Proposition 46, Housing Emergency Shelter Trust Fund Act of 2002. The LHTFP makes one-time grants for the development of affordable multifamily rental housing. It is intended to support innovative local entities that have identified and committed sources of funds not traditionally utilized in the development and provision of affordable housing. Grants require a dollar for dollar match from a local entity such as the City of Pasadena.

County

- **City of Industry Funds**

City of Industry Funds (Industry Funds) are another financing resource for the development of affordable housing. Industry Funds are tax increment set-aside funds administered by the LA County Housing Authority. Industry Funds help fund affordable housing for seniors, families and special needs populations, including domestic violence victims, emancipating foster youth, and those afflicted with HIV/AIDS.

Local

- **Human Services Endowment Fund (HSEF)**

The Pasadena City Council established the HSEF with the adoption of the Fiscal Year 1992 Operating Budget. The HSEF is linked with public service (15%) of the Community Development Block Grant (CDBG) Program. These funds are made available on a two-year funding cycle. Award decisions are linked to funding rationale that establishes priority program areas based on documented unmet human service need.

- **Low and Moderate Income Housing Trust Funds**

The City of Pasadena Low & Moderate Income Housing Trust Fund is administered by the PCDC and funded by a portion of the tax increment revenues generated from the city's redevelopment projects. Redevelopment set-aside funds are mandated by state law to be used for activities that increase, improve or preserve affordable housing opportunities. The housing trust funds have been used in variety of ways to preserve and expand affordable housing opportunities including housing rehabilitation, land acquisition, housing construction, assistance to eligible first-time homebuyers and to support homeless programs.

- **Housing Opportunities Fund**

The Housing Opportunities Fund is used to provide financial assistance to construct, rehabilitate, acquire and preserve affordable housing units. For the current fiscal year, the revenue sources of the Fund consist of monies from the PCDC Low and Moderate Income Housing Trust Funds, Inclusionary Housing Ordinance funds (generated from in-lieu fee payments), California Housing Finance Agency HELP funds, California Department of Housing & Community Development Local Housing Trust Fund program, and Fannie Mae American Communities Fund.

VIII. Conclusion

The City of Pasadena 10-Year Strategy to End Homelessness will help the City of Pasadena end homelessness by focusing on 1) Ending Chronic Homelessness; 2) Supporting Existing Homeless Services; 3) Expanding Existing Homeless Services; and 4) Strengthening Homeless Prevention Efforts.

Ending chronic homelessness will require additional street outreach efforts to engage, or re-engage, chronically homeless persons into the continuum of care system. Permanent supportive housing will also be required if chronically homeless persons are to obtain and maintain affordable housing.

Supporting and expanding existing homeless services is also necessary to end homelessness in Pasadena. Every day homeless service providers successfully help people exit their lives from the streets and become self-sufficient and obtain and maintain appropriate permanent housing. Continuing to provide the necessary resources will continue the same successful results.

Strengthening homeless prevention efforts is imperative. As noted in this report 500 households will experience homelessness during the next 12 months if they do not receive supplemental resources. These households will take the place of the many households that local homeless service providers help become self-sufficient and obtain and maintain affordable housing. As a result, there is a continuous cycle of homelessness with the City of Pasadena.

The recommendations in this report help provide the City of Pasadena with the necessary actions to end homelessness within its jurisdiction. What is clear is that homelessness is a complex problem that requires community efforts beyond providing emergency assistance to homeless households. Assistance needs to combine case management services and permanent housing in order for homeless households to obtain and maintain affordable housing—which is at the core of the recommendations in this report.

Appendix A

10-Year Strategy to End Homelessness Community Outreach Meetings

Date	Organization/Committee/Group
April 21, 2004	South Lake Business Association
April 22, 2004	Coalition of Neighborhood Associations
April 28, 2004	Playhouse District Business Association
September 23, 2004	City of Pasadena Executive Committee
September 24, 2004	Congressman Adam Schiff's Office, Teresa Lamb, District Representative
January 11, 2005	Information Services Managers Meeting
November 29, 2004	City of Pasadena Human Services Department - Neighborhood Services Management Staff
December 8, 2004	City of Pasadena Information Services Department-Library Management Staff
January 24, 2005	City of Pasadena Police Chief
January 25, 2005	Neighborhood Association Presidents
January 26, 2005	Raymond Avenue Neighbors Advisory Panel
March 9, 2005	City of Pasadena Public Health Department MAP Steering Committee
May 18, 2005	Union Station Program Committee