



Ending Chronic Homelessness In Austin/Travis County

First Year Progress Report (Jan. – Dec. 2005)

With support from

Austin/Travis County Health and Human Services Department
Community Action Network Homeless Task Force

Developed by

End Chronic Homelessness Organizing (ECHO) Committee



ECHO MISSION

The mission of the ECHO Committee is to end chronic homelessness in Austin and Travis County. The overall role of ECHO is to identify specific strategies and to oversee ongoing planning, prioritization and implementation of plans to end chronic homelessness.

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SECTION I: BACKGROUND

Federal policy on homelessness has a brief history. It began with the Stewart B. McKinney Homeless Assistance Act of 1987. The Act created the Interagency Council on Homelessness (ICH). It also put in place the Continuum of Care grant program, encouraging communities to make plans to overcome local service gaps.

In the 1990s, the advocacy group National Alliance to End Homelessness drew attention to long-term homelessness amidst the decade's economic prosperity. The federal government responded in late 2001 with the Ending Chronic Homelessness in Ten Years Initiative. Coordinated by ICH, the Initiative directed federal agencies such as the Department of Housing and Urban Development (HUD) and the Substance Abuse Mental Health Services Administration (SAMHSA) to target programs on chronic homelessness. Cities are asked to make corresponding local plans.

Meanwhile in Austin, Community Action Network (CAN) has for a decade been the framework for planning and collaboration in social service and workforce issues. As concerns for homelessness arose, CAN formed the Homeless Task Force. The Task Force went to work upon the announcement of the federal initiative on chronic homelessness. In 2004, they completed Austin's Ten-Year Plan to End Chronic Homelessness. That plan was adopted by the Austin City Council, endorsed by the Community Justice Council, forwarded to ICH. It quickly received federal approval, leading to the formation of the End Chronic Homelessness Organizing (ECHO) Committee in December, 2004.¹

Chaired by Mr. Jeff Trigger, ECHO has four subcommittees: planning and evaluation, prevention, exiting, and systemic issues/advocacy. All subcommittees hold monthly meetings and have open membership. A Steering Committee, consisting of Mr. Trigger and subcommittee co-chairs, coordinates the work of ECHO. The Austin/Travis County Health and Human Services Department (ATCHHSD) provides administrative support for all ECHO work.²

In its brief existence as a community planning process, ECHO has facilitated networking among service providers and business leaders, explored ideas on chronic homelessness, and helped bring several ideas to fruition. This is a report on the first year of ECHO operations, proudly presented by ECHO members to the leadership and citizenry of Austin and Travis County. We welcome scrutiny, input, and continuing support.

The report covers the period January 2005 to January 2006. Our purpose is partly to document committee activities, but more importantly to organize the pertinent policy issues for public reflection and future discourse on strategies our community should adopt. To that end section two provides a summary of chronic homeless and ECHO's responses. The third section covers the activities of ECHO and its subcommittees.

¹ The chronology of this planning process is documented in Appendix A of this report.

² ECHO is grateful to Austin Travis County Health and Human Service staff for their diligent participation and valuable support. As non-voting members, they are not responsible for ECHO recommendations.

Section II: Chronic Homelessness and the Role of ECHO

This section covers the overall policy issues that ECHO has dealt with. We first lay out in part A the dimensions of the chronic homelessness problem. Then, as one form of baseline, we describe in part B the service infrastructure available in Austin as of 2004. As a second form of benchmarking, we also summarize, in part C, the progress in several peer cities that are also implementing their own Ten Year Plans.

With the over-time and across-city context, part D of this section documents ECHO's activities in 2005, including a variety of collaborative activities and on-going planning issues. Based on our deliberations and experiences this year, we offer a number of recommendations to our Central Texas community. They are discussed in part E.

A. The Problem of Chronic Homelessness

Chronic homelessness is defined by HUD, for program administrative purpose, as an experience by an *unattached individual* with a *disabling condition* who has been sleeping in *street locales* not intended for human habitation or in *homeless shelters* either *continuously for the past year* or in *four separate episodes over the past three years*.

It is easy to think of chronic homelessness merely as lacking housing for a long time. That would be too simplistic. Persons described in the definition above typically have additional hardship. It may involve the lack of skills for stable employment at wages high enough for an apartment. It may be long-term illness, making it hard to function in the world of work. Or it may stem from chemical dependency that renders self-sufficiency impossible.

Trying to survive without a stable dwelling while being plagued by personal difficulties increases the likelihood of run-ins with the criminal justice system. Unfortunately, homeless ex-offenders face high recidivism, resulting in an unending cycle in the absence of a helping hand. At the same time, each year a certain number of foster children face the prospects of becoming homeless adults as they age out of the child welfare system and lose the support of the state. Although the absolute number is small, the risk each child faces of becoming a statistic of chronic homelessness is huge. So is the resulting human tragedy.

Ending chronic homelessness must therefore involve a multi-pronged network. This network would naturally include physical housing, but it also must have health services, mental health support, chemical dependency treatment, employment opportunities, and decent wage rates. This network should include preventive support as well as treatment services. In particular, research findings from New York demonstrate that "rapid housing" is critical in helping homeless individuals with multiple problems move towards

housing independence.³ In this approach, individuals with mental health or chemical dependency issues are offered permanent supportive housing without a prior treatment requirement, but with an available network of services concurrently available to help the individuals become sober and economically self-sufficient.

Austin's recent experience with Katrina and Rita evacuees has insights to offer us. First, the heroic effort organized by our local officials, community leaders, and service providers demonstrated both the notion of a network approach and the wonderful capacity of our community to put this network together in a short amount of time. Second, if we could do that in an emergency for guests experiencing a crisis elsewhere, why can we not do the same for citizens in our midst?

Chronic homelessness is a crisis. Continuum of care has to be a broader concept than a spectrum of brick-and-mortar housing facilities. Continuum of care should include a spectrum of social services as well. Both continua have to be organized as community collaboration. And we have the infrastructure to do so.

B. Temporal Benchmarking: Service Infrastructure before ECHO

Central Texas has an excellent infrastructure for providing both housing and social services. What we are in short supply of is the funds to take full advantage of our community potential. This section will briefly summarize what we had in place even before ECHO or the implementation of the Ten Year Plan.

The City of Austin has two departments in charge of housing and social services—Neighborhood Housing and Community Development (NHCD) Office and Austin/Travis County Health and Human Services Department (ATCHHCD) respectively. NHCD coordinates federal Community Development Block Grant and the HOME program, as well as the federally mandated consolidated planning process associated with CDBG/HOME and several other programs. ATCHHSD administers the ESG and HOPWA programs and local funding for homeless services, and supports local planning for the federal Continuum of Care. The Community Care Services Division of HHSD also runs a Homeless Clinic.

We also have three public authorities in the infrastructural network on homeless-related issues: Housing Authority of the City of Austin and Housing Authority of Travis County provide public housing units as well as tenant-based vouchers for both the general population of low-income families and for the more specific population who need mental health support. The third agency is the Austin Travis County Mental Health Mental Retardation Center, which works with the two housing authorities in serving the combined housing/mental health needs in Central Texas. Among other services, these three public authorities administer the following federal programs that serve the homeless:

³ Culhane, Dennis P.; Stephen Metraux & Trevor Hadley (2002). "Public service reductions associated with placement of homeless persons with severe mental illness in supportive housing." *Housing Policy Debate*, vol.13(1), 107-163.

- Housing Authority of the City of Austin: Shelter Plus Care Project
- Housing Authority of Travis County: Shelter Plus Care Project
- ATCMHMR: Homeless Management Information System
- ATCMHMR: Safe Haven Program

In addition, Austin has a strong nonprofit sector of providers that serve the homeless. Through HUD's Continuum of Care grants, supplemented by other government programs, the following nonprofit agencies offered homeless services in 2004, the year prior to Austin's implementation of the Ten Year Plan:

- Caritas of Austin: ReEntry Program for single adult homeless population
- Foundation Communities: Garden Terrace Permanent Supportive Housing
- Front Steps: Austin Resource Center for the Homeless (ARCH)
- LifeWorks: Street Outreach and Supportive Housing for homeless youth
- Push-Up Foundation: Women and Children's Supportive Housing
- SafePlace: Supportive Housing for women of domestic violence experience
- The Salvation Army: Austin Shelter for Women and Children
- The Salvation Army: Passages for homeless individuals and families

Apart from programs funded under federal Continuum of Care grants, nonprofit service organizations and the faith-based community have had a long tradition of offering a helping hand. It would be impossible to provide an exhaustive list, but examples include:

- AIDS Services of Austin: Emergency Assistance and Street Outreach for persons at risk of or diagnosed with HIV/AIDS
- Austin Baptist Chapel Foundation for the Homeless: Food Service
- Blackland Community Development Corporation: Case Management and Counseling for families with young children
- David Powell Public Health Center: Emergency Assistance
- First Workers' Day Labor Program: Education and Employment Assistance
- Foundation for the Homeless: Outreach for women and children, Life Skills, Transportation, Food Service, and Case Management
- Goodwill Services: Employment Assistance
- McCabe House: Substance Abuse Treatment for homeless veterans
- Meals on Wheels and More: Emergency Assistance
- Mobile Loaves and Fishes: Food Service
- Texas RioGrande Legal Aid: Legal Aid
- St. David's Episcopal Church Trinity Center: Food Service
- VinCare Services of Austin: Street Outreach for youth

But what is uniquely Austin is the way these stakeholders collaborate not only through joint projects but also through Community Action Network. Established in 1996 as a voluntary, community-oriented forum for planning and problem-solving, CAN has been an important asset for collaborative processes. It organized the Homeless Task Force. It facilitated the formation of ECHO. With support from our community, CAN can continue to play an important role in the implementation of the Ten Year Plan.

C. Cross-sectional Benchmarking: Progress in Other Cities

Since the announcement of the federal initiative to end chronic homelessness in 2001, numerous local communities have committed to the ten-year planning process. The organizational structure for plan implementation varies from city to city. Some large cities, like New York and Los Angeles, have dedicated more resources and political will than most small cities. Cities like Seattle and Atlanta announced more detailed, coordinated strategies in the early process, whereas others like Houston and Dallas are taking more steps to develop specific strategies towards the goal of ending chronic homelessness. The progress to-date of selected major cities is summarized in Appendix D.

Austin began the process later than the cities mentioned above, but we managed to bring together broader community representation. We also proved to be flexible. Although Austin's initial plan provides well-designed overall strategies to implement the plan, ECHO had to adjust specific action plans for its deliberations. During 2005, members put a great deal of time commitment and willingness to support the plan, and successfully built collaborations with several entities working toward helping homeless or at-risk homeless individuals, youth, and families achieve self-sufficiency. Thanks to a mandate in the form of a Resolution from the Austin City Council, Austin's ten-year planning process appears to be as broad-based and effective as our peer cities. Austin has successfully drawn upon the network of community organizations and individuals to develop solutions unique to Austin/Travis County. The Region VI Coordinator for the United States Interagency Council on Homelessness, Sally Shipman, has recognized this networking capacity by requesting an ECHO presentation at the Texas Homeless Network Conference this fall in Houston.

D. Summary of ECHO Activities in 2005

Through the collaboration of member agencies and the coordination support of City staff, ECHO has accomplished quite a bit as a first-year, informal community planning process. We will review these activities in three categories: collaboration on information and process, collaboration in program accomplishments, and on-going collaboration on future planning. Appendix E summarizes funding available for homeless services in the Austin Travis County community in 2005.

1. Information/Process Collaboration

The year 2005 is the organizational development phase for ECHO. We list below progress made in internal organizing. But ECHO has accomplished more. It has organized outreach forums, produced website and brochures for information dissemination, and formed coalition with other groups on housing advocacy.

- **Committee Meetings.** During 2005, ECHO held four quarterly committee meetings and 50 subcommittee meetings. These meetings represent about 1,000 hours of volunteer time by committee members, supported by the same number of staff hours. While meetings and hours are input measures that do not speak to the success of the

process, the willingness of committee members to contribute is a tribute the support this process has garnered.

- **Organizational Structure.** Towards the end of its first year, ECHO formed a more permanent structure, adopted guiding principles, and instituted procedures for leadership succession.⁴
- **Outreach Events.** ECHO also held two community events for education and outreach. The first was held at its formation in December 2004. The second was held in November 2005 as a community forum. Both events had good turnout and were reported by the media, although attendance by individuals not associated with ECHO or service providers was not as high as hoped for.
- **Information Website.** A website on chronic homelessness was built as part of the CAN Homeless Task Force website at www.AustinHTF.org. The site began operation at the beginning of 2006.
- **Information Brochure.** ECHO also produced a brochure to increase public awareness about the prevention of homelessness.⁵
- **Coalition Formation.** ECHO works informally with other affordable housing advocates in the HousingWorks coalition. Members of ECHO have contributed valuable time and effort in the discussion on the housing component of the pending City bond package.

2. Program Collaboration

ECHO is not a service delivery entity and cannot claim credits for starting new programs. It does however serve as a forum for developing program ideas and a catalyst for funding success. In the past year, ECHO assisted in the following:

- **Homeless Management Information System.** Under HUD mandate, all organizations receiving HUD grants have to collect basic information on the homeless clients they serve. In Austin the coordinating agent for HMIS is the Austin Travis County Mental Health Mental Retardation Center. ECHO serves both as a planning body for developing ways to analyze anonymous HMIS data and also as a support body for the improving data collection.
- **Representative Payee Program.** Operated by Family Eldercare and funded by the Emergency Shelter Grant (ESG) Program, this program provides chronically homeless persons with increased access to income and assistance in managing benefits. After substantial training, volunteers serve as approved representative

⁴ ECHO guiding principles and by-laws are detailed in Appendix B

⁵ The brochure is attached as Appendix C.

payees to manage benefits for homeless clients. Family Eldercare participated in ECHO's community forum to recruit more volunteers in November 2005.

- **Spring Terrace Permanent Supportive Housing Project.** In the 2005 application cycle, Caritas of Austin and Foundation Communities jointly obtained a HUD Continuum of Care grant for 20 leased units of supportive housing, to be located at the Spring Terrace site at I-35 and St. Johns. When the project begins operation in late 2006, it will serve as a pilot study for a variation of the rapid housing model in Austin.
- **Enhanced Service Capacity at ARCH.** In the fall of 2005, ECHO advocated funding for Weekend Day Resource Center Services and increased Night Sleeping capacity by 70 beds at ARCH. City of Austin approved the increased funding to Front Steps in November 2005.
- **Community Voice Mail.** With community support from the Homeless Task Force and ECHO, ATCMHMR was awarded an Impact Austin grant to set up Community Voice Mail (CVM) in Austin last year. Program operation started in March 2006. Upon full implementation, it will offer 1,200 voice message mailboxes to people who do not have access to a telephone, enabling them to stay in touch with family, service providers, and potential employers.

3. On-going Dialogue and Pending Projects

As ECHO moves into its second year of operation, we are hopeful that more new ideas will be formulated and additional agency collaboration will take place. Some of these potential projects are in the application stage or are being discussed by ECHO members. They include:

- **Austin Treatment and Housing Initiative.** Deliberations within ECHO during 2005 drew attention to severe shortage in mental health and chemical dependency service capacity in our community. When a new grant opportunity was announced by the federal Substance Abuse and Mental Health Services Administration for drug/alcohol/mental health treatment systems for the homeless, ECHO endorsed an application by Austin/Travis County Mental Health Mental Retardation Center. If approved, ATCMHMR will collaborate with Foundation Communities, Austin Recovery, Front Steps, and Austin Downtown Community Court to provide the services.
- **Respite (Recuperation) Center for the Homeless.** What began as an informal working group on a respite (recuperation) center for the homeless is attracting local attention and is working to justify local need for developing the center. They recently becoming an official body with a formal Project Work Plan, with help from Indigent Care Collaboration (ICC). They continue to plan for local respite model development while inviting additional partnership from other local stakeholders. ECHO endorses and supports their efforts.

- **Reentry Roundtable.** Austin/Travis County Reentry Roundtable is a collaboration among state and local stakeholders working with formerly incarcerated persons. The aim is to reintegrate them into our community by providing a service network. Reentry Roundtable works closely with ECHO to carry out an assessment of community-based reentry services, including housing for both juvenile and adult offenders. ECHO and Reentry Roundtable will co-host a forum in 2006 on correctional discharge planning policies.
- **Use of HMIS data.** As Austin moves toward full compliance of HUD's data collection requirement. ECHO is beginning to ask the next question: How can we move beyond compliance and towards usefulness. In the upcoming months, ECHO will explore ideas about streamlining the HMIS data system, creation of additional locally coordinated information fields, and ways of analyzing the data so the system can be more useful to service providers as well as to policy planners.
- **Basic Needs Coalition (BNC) of Central Texas.** The BNC is a collaboration of human service providers, faith based organizations, government agencies, and funders who address core basic needs challenges for families and individuals as they move toward self-sufficiency. Basic needs are defined as food, clothing and housing (rent, mortgage, utility) assistance. While there is a wide range of other services essential for an individual to reach self-sufficiency, this Coalition focuses on providing assistance to meet immediate crisis situations and prevent homelessness. The Coalition has developed a model for the distribution of emergency housing and utility assistance that combines increased assistance with extended case management for up to three month (Best Single Source.) ECHO endorses and supports this process.
- **Mental Health Jail Diversion Task Force (JDTF).** Austin Travis County Mental Health JDTF was created to reduce the number of mentally ill persons in the criminal justice system. JDTF has proposed a comprehensive plan for the Travis County Commissioner's Court that includes enhancing crisis intervention services, funding intensive case management services, and investing in our ability to move people out of jail faster and into appropriate services. The group is trying to secure funding to test a hybrid model that includes Forensic Assertive Community Treatment Team, outpatient treatment, and transitional housing for individuals with public intoxication-enhanced (PI-E) charge and who reside within the downtown area.
- **Mayor's Mental Health Task Force Monitoring Committee.** Created in August 2004 to address challenges facing Austin/Travis residents with severe mental illnesses, the Mental Health Task Force studied community strengths and service gaps, publishing its final report in January 2005. A Monitoring Committee was formed to implement the recommendations, focusing on infrastructural issues. ECHO began collaborating with the Committee on mental health, substance abuse, and housing plan in spring 2006.

E. Recommendations

In the fall of 2005, ECHO forwarded to the Austin community an initial set of four recommendations. Two of the recommendations pertained to capacity enhancement at ARCH and have since been approved by the City Council. One was increasing night sleeping capacity by adding 70 mats at ARCH, and the other was opening the ARCH Resource Center on weekends. The other recommendations pertained to the longer-term vision of making available permanent housing facilities over ten years. That vision is a bold proposal and will take longer for the community to come to a consensus. Since last fall, the citizens of Austin have taken a step towards that vision in the form of a proposed housing bond package. In our first two recommendations here, therefore, we wish to repeat our long-term vision and to appeal for housing investment:

1. We as a community should consider long-term investment in rapid, supportive, and permanent housing services.

Currently, much of what Austin offers to the homeless is temporary or has sobriety requirement. Because chronic homeless individuals' disabilities are often severe, six months of supportive housing is *the minimum* to ensure continuing stability.

Transitional facilities are needed. However, more of them should be based on the principle of **rapid housing**—making physical housing available first and providing support services second. Better still is **permanent supportive housing**. The tenant continues to rely on a professional support network, and the main contact for the tenant is a case manager who is on site or close at hand, and who can keep in touch with the tenant on a regular basis.

The solution to chronic homelessness is access to affordable housing linked to comprehensive support services. The effective net cost of this strategy is negligible because leaving this population homeless and dependent on emergency services would cost the same amount. ECHO recommends that our community build at least 240 permanent supportive housing units for chronically homeless individuals over the next 9 years. If the 240 units are constructed or acquired at three-year intervals, each installment of 80 units will require an estimated \$3.2 million of capital investment, plus \$16,000 to \$20,000 annually for service operations. At full implementation after ten years, therefore, we would have incurred a total of \$9.6 million in capital investments, and the 240 units would require an annual service budget of \$48,000 to \$60,000.

To accompany these permanent units, ECHO also recommends ensuring 60 rapid housing units for transitional housing, to be made available yearly through local and federal resources. It will help the chronically homeless out of streets or shelter and into housing without a significant barrier to obtaining or sustaining housing.

2. We urge the citizens of Austin to approve the \$55 million housing bond package adopted by the City Council.

This recommendation requires financial commitment. The City of Austin has recently placed a bond package referendum in the November election. The bond package includes \$55 million earmarked for affordable housing issues including serving the homeless. Over the coming months the City Council will deliberate on the details of the bond package.

ECHO members urge the voters of Austin to approve the housing bond package. Allocating city dollars towards housing is a worthwhile long-term investment supported by many residents. It will contribute in important ways towards ending chronic homelessness.

Since last fall when we forwarded the first set of recommendations, ECHO members have arrived at additional recommendations. We have come to the clear consensus that ending chronic homelessness requires a network-of-service approach. This network should consist of a continuum of care on social service as well as a continuum of care on physical housing. The next two recommendations address the parallel continua.

3. Consider allocating additional local resources toward supportive social services in order to leverage additional federal funds for housing the homeless in our community.

As part of its emphasis on developing housing facilities for the chronically homeless, HUD has signaled that its funding priorities in future years will be on brick-and-mortar construction of permanent housing units. If this change in HUD emphasis becomes realities and unless new federal legislation is passed to allocate national resources for social service support for the homeless, local communities will face the possibility of a broken continuum of care in social services.

With current HUD funds, our community has put together a social service continuum that represents the journey of homeless Austinites from “sleeping rough” on the street to having temporary shelter beds and crisis stabilization at ARCH, Salvation Army, or SafePlace to mental health outreach like ACCESS at ATCMHMR and youth outreach at LifeWorks to longer term programs like ReEntry and Passages. Even so, there is a current shortage of funding dollars for mental health services and detoxification treatment.

If HUD’s funding shifts towards construction continue, our homeless service network may become vulnerable in the absence of alternative funding sources. While we appreciate the importance of fiscal restraints, for the sake of both strengthening our current social service continuum of care and prudent planning to protect against future funding cuts, we believe it would be wise for our local service providers and governments to begin investigating the need to develop local resources for service support for the homeless.

4. We urge that local public housing authorities collaboratively participate and develop more emphasis on housing opportunities for chronically homeless persons in our community.

Currently both the City and the County Housing Authorities play an important role in administering the voucher-based Shelter-Plus-Care program in coordination with ATCMHMR. They also partner with nonprofit providers in programs like ReEntry and Passages. These are important functions deeply appreciated by the community.

We believe the Housing Authorities could do more. Since strengthening the housing continuum of care is an important objective and since the Housing Authorities own the largest number of low-income housing units, we recommend that they consider adopting a higher profile in our community objective of ending chronic homelessness. At the simplest level, this could be accomplished through making homeless individuals a higher priority in the Authorities' target population. We believe additional steps are possible, as explained in Recommendation 5.

An important dimension of the chronic homeless problem is the interface between the housing service system and two other systems: the criminal justice system and the foster care system. When foster children reach emancipation at 18, they are no longer the ward of the state and by statute must graduate from the child welfare system. As unattached individuals often with serious emotional distress in their childhood, graduates from the foster care system run a high risk of becoming chronically homeless. At the same time, people living in the street are exposed to drugs and crimes and it is no surprise that they get recycled through the criminal justice system. ECHO members believe that an important part of ending chronic homelessness is to plug the service gaps in both the foster care and the criminal justice systems. Specifically, we have recommendations: 5, 6, and 7.

5. To facilitate stability in the re-entry to society, we urge the Housing Authorities and other housing developers to relax prohibitions against non-violent ex-offenders.

The Housing Authorities provide the best housing opportunities for people at 30 percent or below poverty. Some low-income individuals have baggage that makes them ineligible for public housing—history of incarceration, old debt with the city utility providers, or similar events. This sort of record stands as a barrier to rapid housing, even though the person may have been trying to recompense for the offense(s) for months or years.

We support the desire on the part of Housing Authorities and other housing providers to make their residential communities safe and self-sufficient. We also agree that cautious procedures should be put in place before high-risk individuals are accepted into such communities. However, we also believe that Housing Authorities and other developers should avoid the practice of strict prohibition against such individuals, especially when previous offenses did not involve violence to others. If the intake process can be redesigned to open more facilities to people willing to adopt a new life, it would go a long way in addressing the interfacing of criminal justice, foster care, and self-sufficient housing.

- 6. To reduce recidivism and enhance public safety, we recommend that correctional settings serving Travis County offenders provide transition-planning services for persons with mental illness and persons who have been chronically homeless prior to incarceration.**

Evidence shows that linking offenders with rapid housing and employment dramatically reduces re-offending, provides stability for those with mental illness, and offers opportunity for persons to move toward self-sufficiency. Allowing chronically homeless and mentally ill persons to work with a caseworker prior to release to develop a transition plan helps us to reduce the number of homeless persons returning directly to our streets, our emergency rooms and our jails.

- 7. To prevent youth homelessness through the aging out of foster care, we recommend the creation of targeted affordable housing for this population.**

Although there are support systems and programs for homeless youth in our community, gaps in services do exist, especially for youth aging out of foster care. At any given time in the State of Texas, there are approximately 3,500 youth age 16 years and older in State care, of these youth between 700 and 900 transition out of care each year. These youth often do not have housing plans or support, and become homeless because of loss of a support system.⁶ We urge the Austin community to consider the creation of affordable housing for youth who become emancipated from the state at age 18 and who need housing options. Such targeted housing needs to be progressive by allowing for youth to slowly build confidence through the building of rental history, assets, and work history. This youth targeted housing should offer accessible public transportation, safety, education & case management services.

Ultimately, however, self-sufficiency and individual responsibility are our objectives. The recommendations above deal with support structure. We now turn to the final recommendation that will enable the individuals to look out for themselves:

- 8. We recommend that ECHO members develop stronger relationships with employment-related partners to enhance our capacity to serve chronically homeless persons with employment services including employment training, placement, and job coaching/mentoring.**

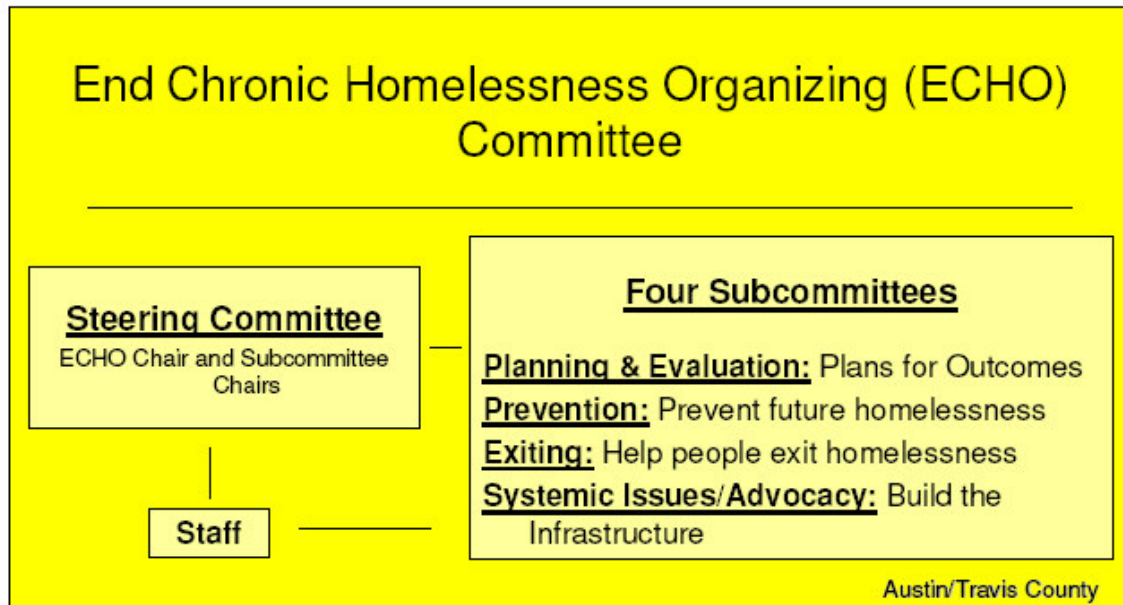
Not all chronically homeless persons will need long-term supportive services to stay housed. The sooner we can provide employment opportunities linked to sustainable wages, the sooner more persons can move closer to achieving self-sufficiency.

⁶ ECHO Prevention Subcommittee has been working on data collection from agencies since September 2005.

Section III: ECHO Operations

ECHO COMMITTEE STRUCTURE

The ECHO Steering Committee shall be responsible for establishing committees as needed to achieve the ECHO objectives. Initial committees established are:



ECHO subcommittees, under the coordination of a Steering Committee, were formally constituted in January 2005. Each subcommittee was established to oversee and implement four recommended areas framed in the Plan: Planning and Evaluation, Prevention, Exiting, and Systemic Issues/Advocacy. The initial plan proposed issue areas, goals, and action steps to end chronic homelessness in Austin/Travis County. During 2005, each subcommittee has reviewed such proposed elements as specific strategies and action steps, and refined an annual action plan to be carried out to end chronic homelessness in our community. The overall responsibilities of all subcommittees shown in “ECHO guiding principles” are the following:

- Incorporate policies and strategies as appropriate upon direction by the Steering Committee
- Develop specific strategies to arrange services, reduce barriers, secure resources, or other directives as defined in the Plan
- Develop an annual action plan within each Subcommittee
- Ensure sufficient committee membership

A. ECHO STEERING COMMITTEE

The Steering Committee, which includes Subcommittee Chairs, provides overall direction, vision, and resource development to support the Plan. Steering Committee members met eight times and convened three quarterly meetings for all ECHO members in 2005. Members of the Committee did numerous media interviews and presentations to build community support for the plan to end chronic homelessness. The Steering Committee also supported the Homeless Educational Forum, held in November 2005 and developed by the Systemic Issues/Advocacy Subcommittee. The composition of the 2005 Steering Committee was as follows:

- **Chair:**

Jeff Trigger Downtown Austin Alliance

- **Members:**

Fred Butler Community Action Network
Jo Kathryn Quinn Caritas of Austin
David Lurie Austin/Travis County Health & Human Services Dept.
Helen Varty Front Steps
Debbie Webb ATCMHMR
Mitch Weynand LifeWorks
Pat Wong LBJ School of Public Affairs, The University of Texas

- **Staff:**

Gilja Koo Austin/Travis County Health & Human Services Dept.

B. PLANNING AND EVALUATION SUBCOMMITTEE

The Planning and Evaluation Subcommittee was developed to oversee the collecting, analyzing, and reporting of data and to ensure the implementation and success of the plan. Subcommittee members met 8 times in 2005, and have discussed the overall strategy for developing better data on chronic homelessness.

1. Membership in 2005

- **Co-Chairs**

David Lurie Austin/Travis County Health & Human Services Dept.
Pat Wong LBJ School of Public Affairs, The University of Texas

- **Members⁷**

Vince Cobalis	Austin/Travis County Health & Human Services Dept.
Elizabeth Gfell	ATCMHMR
Patrick H. Herndon	Community Member
Natasha Ponczek	City of Austin NHCD Office
Mary Rychlik	Austin/Travis County Health & Human Services Dept
Susan Szaniszló	Public Policy Research

2. Activities in 2005

- ***Pilot Project Planning***

At the beginning of the planning process, the Subcommittee has focused on learning about the current data collection system already in place, the first survey of local services to address chronic homelessness, lessons from previous attempts to serve individuals with multiple needs and limitations, and model programs to serve chronically homeless persons in other cities.

After reviewing local resources and service setup, the subcommittee came up with recommendations of designing a pilot project, or projects, to assess the effectiveness of various solutions for chronic homelessness in our community. Three possibilities for designing a pilot project were 1) retrospective study of clients in Shelter Plus Care, 2) prospective study of the use of future Shelter Plus Care vouchers, and 3) systematic study of rapid housing.

During the pilot project planning process, the Subcommittee has secured the agreement of Caritas and Foundations Communities (“Spring Terrace”) to use their HUD funded permanent supportive housing project (20 units) for chronically homeless persons as a pilot project for evaluation.

- ***Data Improvement Process***

The Subcommittee has continued to be updated on developments in the local Homeless Management Information System (HMIS) by the ServicePoint HMIS Coordinator, ATCMHMR. Subcommittee members began discussing how to use HMIS data to conduct point-in-time (PIT) shelter counts to validate the chronic homelessness count in our community, which will be collaborated with the work of the Resources and Programs Committee of the Community Action Network’s Homeless Task Force to plan and conduct a community-wide homeless count for January 2007. The subcommittee has provided information on the importance of the data collection to the HMIS participating agencies to improve the data quality.

⁷ Former Subcommittee members who resigned during 2005 included Irene Krasnoff and Julia Spann. The Planning and Evaluation Subcommittee is grateful to them and to other guest participants who provided valuable information at Subcommittee meetings during the year.

3. Key Objectives for 2006—Please see Appendix E for detail

- Improve data on chronic homelessness
- Plan pilot studies to assess various solutions to end chronic homelessness
- Monitor progress in Plan implementation

C. PREVENTION SUBCOMMITTEE

The Prevention Subcommittee oversees and coordinates the development of strategies to prevent future homelessness. It also promotes collaboration among different public entities, including hospitals, correctional institutions, mental health institutions, and foster care agencies. In 2005, subcommittee members met eleven times, and focused on enhancing the collaboration with other agencies and existing work groups to work on preventing future homelessness in our community.

1. Membership in 2005

- **Co-Chairs**

Jo Kathryn Quinn	Caritas of Austin
Debbie Webb	ATCMHMR

- **Members**

Margarine Beaman	Beaman Metal Co., Inc.
Deanna Eichler	Brackenridge Hospital
Darla Gay	District Attorney's Office
David Gomez	ATCMHMR
Kris Linenberger	Casey Family
Rose Lancaster	Austin Area Interreligious Ministries
Tina Slayton	Community Partnership for the Homeless
Gloria Vasquez	Capital Metro
Gaye Vopat	DFPS-Preparation for Adult Living Program (PAL)

2. Activities in 2005

- ***Homeless Discharge Planning (Pre-ECHO)***

Discharge planning is a primary component of a homeless individual's transition from public-system care into the community. Before ECHO was formed, the Discharge Committee of the Homeless Task Force had worked on improving protocols for discharge planning from public hospital, state jail, foster care system, and mental health institutions in 2004. To maximize members' time and resources to meet the challenges of discharge planning for homeless persons, the Committee merged into the Prevention Subcommittee in January 2005.

- ***On-going Data Collection Process***

To carry out the strategy for preventing homelessness, the Prevention Subcommittee regularly convenes working group meetings to bring recent data regarding the needs of individuals being discharged to our community from public institutions. This is still an on-going process that will be moved forward by individual members' commitments to report and present data in the areas of foster care, substance abuse, mental health, respite care, and discharge planning. Some areas will need partnership with other working groups such as Reentry Roundtable, Mayor's Mental Health Task Force, and a group working on health care for the homeless issues.

- ***Discharge Planning from Correction Facilities – Reentry Roundtable***

Goals of the Prevention Subcommittee align with that of the Reentry Roundtable. The Reentry Roundtable is a local initiative formed to assist prisoners to regain self-sufficiency outside of prison. The subcommittee has agreed to co-host a forum on discharge planning with the Reentry Roundtable as an initial step to build a vision for enhanced transition planning policies and practices from correctional settings.

- ***Respite Care Progress - Joint Action Team***

The Health Committee of the Homeless Task Force had primarily focused on improving health care to homeless persons, including improved discharge planning from hospitals and expanded respite options. Since January 2005, members of the Health Committee, including the area's largest public hospital and primary provider of hospital care for the indigent, Brackenridge Hospital, had joined the Prevention Subcommittee, to work together on health care issues for the homeless. Over the past year, collaborative work with ECHO strengthened the focus group on developing strategies to build a respite (recuperation) center for the homeless in our community.

- ***Foster Care Issue Area Progress***

Youth aging out of foster care are at high risk for future homelessness and housing instability. In an effort to prevent youth homelessness, the subcommittee had reviewed the key issues surrounding "aging out of foster care". The discussion included the existing programs and services designed to help youth who "aged out" of foster care, barriers to stable housing placement, and needs of longer-term self-sufficiency assistance programs. On-going subcommittee efforts to prevent youth homelessness will be carried forward with such actions as data collection on services that the State and local providers offer to foster youth, development of foster care self-sufficiency standards, and examination of policy implications regarding youth homelessness in 2006.

3. Key Objectives for 2006—Please see Appendix E for detail

- Improve data on people being discharged from institutional systems
- Implement policy changes on discharge planning
- Research current practice and “best practices”
- Support self-sufficiency planning for exiting foster care
- Support develop strategic plan for establishing a Respite (Recuperation) Center for the Homeless

D. EXITING SUBCOMMITTEE

The primary goal of the Exiting Subcommittee is to develop strategies regarding income support, job access, living wages, and housing with supportive services and to oversee the coordination of services for exiting homelessness. In 2005, subcommittee members met eleven times, and have discussed the need for more affordable housing options with supportive services and the challenges to serve chronically homeless persons in our community.

1. Membership in 2005

- **Chair**

Helen Varty Front Steps

- **Members⁸**

Lindsey Berry	VinCare/St. Louise House
Bonner Brown	Community Member
Jennifer Daughtrey	Foundation Communities
Jerrold Davis	Caritas of Austin
Rebecca Elizondo	Goodwill Industries of Central Texas
David Gomez	ATCMHMR
Paul Hilgers	City of Austin NHCD
Joyce Hefner	Family Eldercare
Charles Locklin	Micah 6
Wesley Monroe	Community Member
Kathy Ridings	The Salvation Army

⁸ Former Subcommittee members who resigned during 2005 included Mary Eubanks, Debra Ruffner, and Jim Sneeringer. The Exiting Subcommittee is grateful to them and to other guest participants who provided valuable information at Subcommittee meetings during the year.

2. Activities in 2005

- ***Housing Committee of the Homeless Task Force (Pre-ECHO).***

Before ECHO was formed, the Housing Committee of the Homeless Task Force was charged with reducing barriers to housing, conducting inventories, and developing specific strategies for implementing affordable housing goals identified in the *Comprehensive Plan*, *Consolidated Plan*, and *Plan to end chronic homelessness*. This Committee evolved into the Exiting Committee of the ECHO in January 2005. The Subcommittee ensured that representation was established on ECHO to work on housing issues.

- ***Research Housing Model.***

To establish a Rapid Housing Model in Austin, the Subcommittee had reviewed several reports drafted by subcommittee members. The topics of the reports included the implementation of Rapid Exit programs operated in other cities and position descriptions necessary to implement the program. In addition, the Subcommittee provided input on the Exiting Committee's proposal to develop 240 permanent supportive housing units over the next 9 years for chronically homeless persons.

- ***Research Housing Barriers.***

The Subcommittee discussed the importance of working with local Housing Authorities to provide long-term housing stability for chronically homeless persons. The Subcommittee started developing proposals to collaborate with them in 2005. This will be an on-going effort in 2006.

- ***Support for the VA Homeless Providers Grant and Per Diem Program application***

Supported by this Subcommittee, ECHO endorsed the Veterans Affairs (VA) Homeless Providers Grant and Per Diem Program application being submitted by Foundation Communities in partnership with the VA Health Care for the Homeless Veterans Program. It secured another 25 leased units for homeless veterans to be located at the Spring Terrace, which will begin its operation in late 2006.

3. Key Objectives for 2006—Please see Appendix E for detail

- Research housing solutions
- Care by case examination of ARCH population
- Be prepared for Housing Authorities issues

E. SYSTEMIC ISSUES/ADVOCACY SUBCOMMITTEE

The primary goals of the subcommittee were to address the systemic problems that lead to poverty and homelessness; Focus on working with the local legislative delegation, building community support and buy-in for the plan to end chronic homelessness, and exploring and developing resources for housing and services. In 2005, subcommittee members met 12 times, and had initial discussions on how to tackle systemic issues to address chronic homelessness in our community, and focused on planning the first ECHO event targeting the public to be educated and involved in homeless issues.

1. Membership in 2005

- **Chair**

Mitch Weynand LifeWorks

- **Members**

Bette Allen	Front Steps Board
Greg Gibson	Texas Interagency Council for the Homeless
Renee Hopper	Homeless Advocate
Steve Kaiven	Goodwill Industries of Central Texas
Mike Manor	Ausitn Area Interreligious Ministries
Ken Martin	Texas Homeless Network
Craig Moore	Jenkins & Gilchrist, P.C.
Susan Morris	Front Steps
Partick H. Herndon	Community Member
Richard Troxell	House the Homeless
Rick Rivera	FamilyConnections

2. Activities in 2005

- ***Groundwork for addressing the systemic problems***

Addressing the systemic issues takes longer time and more energy than solving immediate problems. At the beginning of 2005, Subcommittee members, who came from different backgrounds and different governmental levels, educated and updated each other on federal, state, and local level policies and developed a work plan for 2006. One topic addressed was how our community could make collaborative efforts to bring more Continuum of Care dollars to our region.

- ***Community Awareness***

One of the most visible activities of ECHO was the November 19th Homeless Educational Forum organized by this Subcommittee. The Forum was associated with the National Hunger and Homelessness Awareness Week events to educate the community on issues surrounding homelessness. Speakers for the Forum included Sally Shipman, Region VI Coordinator of the U.S. Interagency Council on Homelessness; Kirk Watson, Former Austin Mayor; and Emily Whitehurst, Director of Austin Area Interreligious Ministries. The Forum drew about 120 individual participants and 15 social services agencies that came to recruit volunteers. ECHO members, through this event, got lessons for better outreach efforts and educational pattern to engage the public in the next year.

- ***On-going Resource Mapping***

The Subcommittee, with support from ATCHHSD Staff, began researching available funding sources to end chronic homelessness. Development of resource maps contain a list of federal, state, local funding sources that is currently, and potentially, used for the homeless in our community. It will help identify additional funding sources to support elements of the plan.

3. Key Objectives for 2006—Please see Appendix E for detail

- Advocacy: Build community support and buy-in for the plan to end chronic homelessness
- Resources: Explore and develop resources for housing and services for chronically homeless persons

Appendix A: Chronology of ECHO Events

- Aug. 2003:** Ms. Sally Shipman's visit to Austin.
Ms. Sally Shipman, Region VI Coordinator of the U.S. Interagency Council on Homelessness, visited Austin City Manager Toby Futrell to encourage the development of the 10-year plan to end chronic homelessness. The ATCHHSD hired a consultant to lead the process of developing and drafting the Plan, while working closely with the CAN Homeless Task Force.
- Sep. to Dec. 2003:** Worked to develop the Plan (weekly meeting open to all)
Recommendations developed by working group of the CAN Homeless Task Force. Austin's Plan Recommendations follow the guideline of National Alliance to End Chronic Homelessness for the Plan
- Dec 2004:** Plan was approved by the CAN Homeless Task Force
- Jan. 2004:** Presented to the Community Justice Council
- April 2004:** Presented to the Community Action Network A-Team
The CAN A-Team directed the HTF to conduct a survey to determine the extent of local services to chronically homeless persons.
- April to July 2004:** Conducted survey on chronic homelessness in Austin/Travis County
The results of the survey were included as Appendix D in the Plan
- Aug. 2004:** Presented to the CAN A-Team (with Survey Results)
- Aug. 2004:** Presented to the CAN Resource Council (with Survey Results)
- Aug. 2004:** Presented to the City of Austin Health Care Subcommittee
- Sep. 2004:** Approved by the Austin City Council
- Dec. 2004:** Structured the implementation Committee (ECHO) and Recruited its Chair
- Dec. 2005:** Held a kick-off event to announce the Plan to the public (News Conference)
- Jan. 2005:** Held the first ECHO quarterly meeting for all members
- April. 2005:** Held the second ECHO quarterly meeting for all members
- August 2005:** Held the third ECHO quarterly meeting for all members
- Nov. 2005:** Held the Educational Forum on homelessness for the public (Public Forum)
- Jan. - Dec. 2005:** Numerous ECHO Subcommittee meetings were held
- Jan. 2006:** ECHO Strategic Planning Session (Steering Committee)
- Jan. 2006:** Held the fourth ECHO quarterly meeting for all members

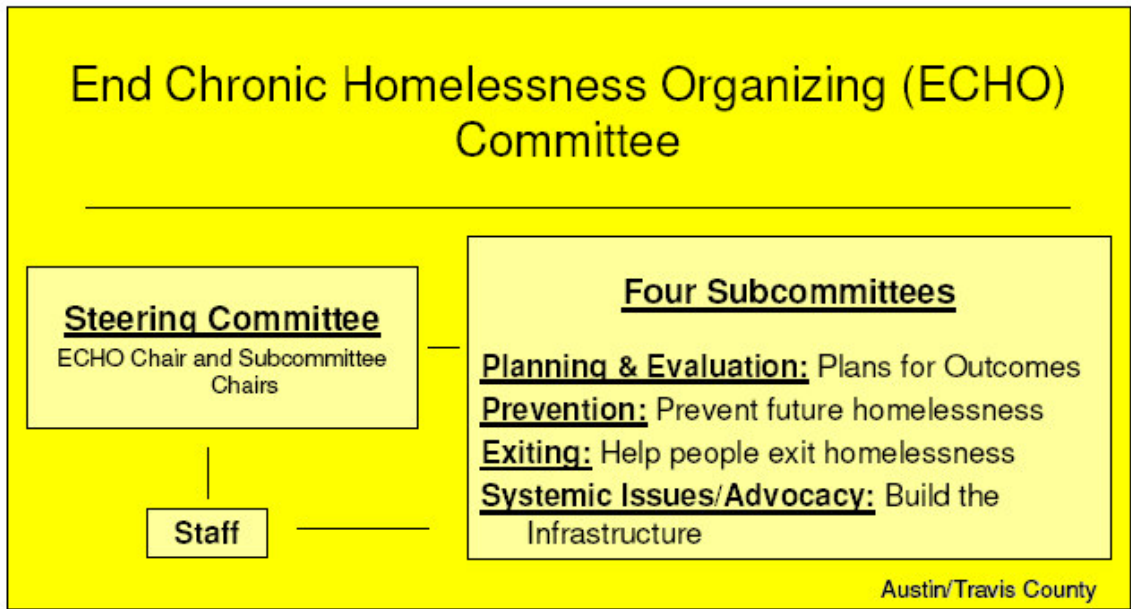
Appendix B: ECHO GUIDING PRINCIPLES

MISSION

The mission of the ECHO Committee is to end chronic homelessness in Austin and Travis County. The overall role of ECHO is to identify specific strategies and to oversee ongoing planning, prioritization and implementation of plans to end chronic homelessness.

ECHO COMMITTEE STRUCTURE

The ECHO Steering Committee shall be responsible for establishing committees as needed to achieve the ECHO objectives. Initial committees established are:



COMMITTEES AND RESPONSIBILITIES

Responsibilities of the ECHO Committee shall include:

- Provide leadership for strategic planning to end chronic homelessness in Austin/Travis County
- Help secure resources to end chronic homelessness
- Overcome policy barriers and develop new policies to end chronic homelessness
- Work with the U.S. Interagency Council on Homeless to address Federal level policy issues
- Work with the State Interagency Council for the Homeless to address State level policy issues
- Build community support for the Plan

The Steering Committee shall consist of the Chair, Vice Chair, Subcommittee Chairs, and At-Large member appointed by the Chair. Their responsibilities shall include:

- Provide direction, vision and resource development for the Plan
- Approve annual action plans
- Convene the quarterly meeting

The Subcommittees shall consist of ECHO members and volunteers. Responsibilities of Subcommittees shall include:

- Incorporate policies and strategies as appropriate upon direction by the Steering Committee
- Develop specific strategies to arrange services, reduce barriers, secure resources, or other directives as defined in the Plan
- Develop an annual action plan within each Subcommittee
- Ensure sufficient committee membership

Responsibilities of Staff shall include:

- Report on a regular basis to the Steering Committee and four subcommittees
- Facilitate communications within the Committees
- Support the ECHO Committee/Subcommittees' ongoing work
- Coordinate meetings and activities among Subcommittees
- Prepare presentations and reports to inform the community about the 10 year plan and the ECHO Committee to end homelessness
- Coordinate membership recruitment of the ECHO
- Research background information on homelessness, provide this to appropriate parties
- Provide the ECHO related information and support the HTF/ECHO Website

Responsibilities of ECHO and Subcommittee Chairs shall include:

- Facilitate meetings and appoint a substitute in absence of the chair
- Serves as one of the key media contacts on ECHO-related issues
- Work with staff to create meeting agenda and identify presenters and presentation topics
- Represents the Committee at community meetings and forums, if necessary
- Help draw out feedback and input from the Committee members
- Approve the scheduling of special meetings and events

MEETING

Regular (Quarterly) Meetings:

1. ECHO meetings for all members will be held quarterly.
2. Notice of meeting will be announced at least one month before the quarterly meeting.

Subcommittee (Monthly) Meetings:

1. Subcommittee meetings will be held monthly or as often as needed to complete objectives.
2. Committee members are expected to attend monthly meetings of the Subcommittee to which they belong. If a member cannot attend, they must notify the Chair/Co-Chair(s) of his/her Subcommittee and/or Staff person before the meeting to let them know that they will be absent.
3. Written notice, including an agenda, of each meeting shall be prepared by the Chair/Co-Chair(s) collaboratively with Staff and electronically sent at least one day before the meeting date.

MEMBERSHIP

1. The membership shall consist of individuals who have submitted membership forms and affirmed their interest in serving as an active member. Membership is open to all interested individuals.
2. New members may be received at any time during the year. Anyone may attend ECHO meetings regardless membership.
3. Members who cannot attend a meeting may send a representative to take notes or present information.

ELECTION/VOTE

1. The ECHO Chair and Vice-Chair will be elected by a simple majority of members in attendance at the first quarterly meeting each year.
2. The Chairperson and Vice-Chairperson may serve consecutive terms if so elected by members.
3. In the event of the resignation of the Chair, the Vice-Chair will become the Chair

Appendix C: ECHO Prevention Brochure

Note: Members of the ECHO Prevention Subcommittee created this brochure to educate the public in November 2005.

NEED MORE CAPACITY IN MENTAL HEALTH CARE

Austin continues to experience phenomenal population growth – 15 years ago, Travis County had **200** publicly funded psychiatric beds per day. Today, we only have **54** beds per day. Where do all these people in crisis go?

What can **YOU** do to help?

Tell your elected Austin officials that you support the:

- Community Jail Diversion Committee
- Austin Travis County MHMR Center's recommendation to the Hospital District, the County Commissioners, and the City Council to fund a minimum of a 10-bed Crisis Stabilization Unit (CSU) for Austin.

**NEED RESPITE CARE
FOR HOMELESS**

Folks that are well enough to no longer need hospital care, but upon discharge are without adequate living arrangements or homeless have nowhere to go as there are NO staffed respite/recovery beds in Austin. They are at very high risk for medical complications and frequently turn to hospital emergency rooms for treatment. It is estimated that at Brackenridge Hospital alone, there were over 9700 homeless patient emergency room visits in 2004.

What can **YOU** do to help?

- Sign up to stay informed and involved as planning group develops options for Austin to give shelter and care to the homeless who need medical oversight while they recuperate.

NEED BETTER TRANSITION FROM FOSTER CARE

One out of every four young adults who exit foster care at some point becomes homeless.

What can **YOU** do to help?

- **Mentor** a child who is in foster care. Continue to mentor them past their 18th birthday. Help them with self-sufficiency planning.
- **Advocate** at the national, state and local levels of government for more effective children's protection and higher quality foster care.
- Become a CASA **volunteer** and work with children in the child protection system. www.casatravis.org
- **Volunteer** with an agency like Life Works or Casey Family who serves youth who are aging out of foster care. www.lifeworksweb.org or www.casey.org

NEED MORE CAPACITY TO TREAT SUBSTANCE ABUSE

There are scarce resources
for alcohol and chemical
dependency treatment in Travis County.

What can **YOU** do to help?

- **Awareness** when someone who is addicted wants to get treatment, there is a window of opportunity that opens slightly, and lasts only as long as the body's inevitable need for the substance is addressed with either treatment or resumption of use. The ability to act fast is vital. Except for the 2 beds mentioned above, the current system requires an individual to get arrested for a crime to obtain treatment. Once labeled a criminal and a person with a substance use problem, the chances of being able to get housing become impossible.
- **Support** efforts to fund a place where individuals can get immediate treatment.
- **Join** the Substance Abuse Planning Partnership of the Community Action Network.
- **Advocate** with City, County and State officials.
- **Share** this knowledge with neighbors and friends.

NEED A BETTER PLAN FOR PEOPLE EXITING JAIL AND PRISON

Approximately 3,000 persons a year return to Travis County from a state prison or jail. Studies show that 3/4 have a history of substance abuse, 2/3 have no high school diploma, 1/3 report a mental disability with the rate 3 to 4 times higher than the general public and 2/3 are rearrested within three years. Almost 60% have children at home, many who are being cared for grandparents. Research shows that with supportive housing programs, these persons will be come less reliant on social service systems and more likely to succeed in their reintegration with their families and communities.

What can **YOU** do to help?

- Volunteer to be a mentor to an offender.
- Volunteer to mentor a child who has a parent incarcerated.
- Support our local Girl Scouts Beyond Bars program for girls with mothers who are in prison.
- Ask for training for your program to help your workers and volunteers to better serve this population.
- Learn more about the Austin/Travis County Reentry Roundtable and you can be involved in making long-term systemic change for serving this population and enhancing our public safety.

Appendix D
Implementation of Ten-Year Plan, Selected Major Cities (as of Dec. 2005)

Size	City	State	Implementation or Planning Body (Champion/ Staffing)	# of Committee	Year (Endorsed by City/ ICH)	Form of government	# of hlms (CH)	Pop.(unit: 1,000)
1	New York	NY	Mayor's Commission(Mayor Michael R. Bloomberg s/p by the NYC Dept. of Homeless Services)	30 members	Jun-04	Mayor-Council	48,155	8,008
2	Los Angeles	CA	Blue Ribbon Panel ("Educative Committee" of Los Angeles' Bring LA Home group), still in implementation planning process (Antonio Villaraigosa, LA Mayor and Zev Yaroslavsky and Yvonne Brathwaite Burke, LA County Supervisors s/p by the City of Los Angeles)	27 members	Jun-04	Mayor-Council	88,345	3,695
4	Houston	TX	A Planning body to draft the plan and implementation strategy: City and County passed resolutions to create a 10- Year Plan(Their Champion is currently the term limited City Councilman. They will replace him with a current council member. A representative from the Mayor's office on the Commission. s/p by the Coalition for the Homeless)	14 members	Apr-04	Mayor-Council	8,334 (1,440)	1,954
8	Dallas	TX	Mayor's Task Force on Homelessness (The Mayor named Tom Dunning in Sept. 2004. He served for one year and resigned that post but remains on the Task Force. The Mayor named a new Czar, Mike Rawlings, in Oct. 2005. / Partnership with Deloitte, the United Way, and the Metro Dallas Homeless Alliance/ Task Force Committees s/p by MDHA (City of Dallas))	57 members	Jun-04	Council-Manager	6,933 (1,181)	1,189
9	San Antonio	TX	Mayor's Task Force on Hunger and Homelessness(Two appointees from the City Council overseeing the plan process s/p by the San Antonio Regional Alliance for the Homeless and the Community Action Division of the City)	69 members	Jan-05	Council-Manager	3,306 (672)	1,145
16	Austin	TX	End Chronic Homelessness Organizing (ECHO) Committee (Steering Committee, chaired by Jeff Trigger, President of the Downtown Austin Alliance, with support from the Community Action Network's Homeless Task Force s/p by the Austin/Travis County Health & Human Services Dept. (City of Austin))	50 members	Sep-04	Council-Manager	3,789 (569)	657
24	Seattle	WA	Tri-partite governance structure: a Governing Board, Interagency County, and Consumer Advisory Council(Governing Board chaired by Ron Sims, County Executive and Dan Brettler, a leading business member and CEO/Owner of CAR TOYS Inc./ s/p by the City, County, and United Way)	75 members	July-05	Mayor-Council	9,877 (3,027)	563
39	Atlanta	GA	Regional Commission on Homelessness (currently focusing on Employment and Supportive Housing)(Horace Sibley, Community Champion, Mayor Franklin, and the jurisdictional CEOs, County Commissioners and County Executives/ s/p by each member Jurisdiction and the United Way of Metropolitan Atlanta)	37 members (7 member Jurisdictions - six Counties and the City of Atlanta)	March-03	Mayor-Council	3,631 (553)	416

Sources: National League of Cities membership database, September 2004, cities' ten year plans, the survey from each city, city website, USA Today analysis of numbers reported to the U.S. Dept. of Housing and Urban Development by cities and counties, 2005 (*Houston, Dallas, San Antonio, Seattle, Atlanta, and Austin homeless population data from four cities' 2004 HUD Continuum of Care Grant application), the U.S. Census Bureau, 2000.

Appendix E: Federal, State, Local Funding Sources (can be) invested in Homelessness and Chronic Homelessness

Agency	Level	Funding Source (Name of Grants/Programs)	Federal funding (FY)	Texas Awarded	Austin Awards (Use for Hmls)	Grantee(s)	Contact
DOL	Federal	Homeless Veterans Reintegration Program (HVRP)	FY 2003: Approx. \$18 million	N/A	N/A	N/A	VA (Jim Brown/Andrew Miller at 389-6545)
HHS	Federal	Ryan White CARE Act Title I HIV Emergency Relief Grant Program	FY 2004: \$595 million	\$42.9 million	\$3.851,000	David Powell Public Health Center, AIDS Services of Austin, Project Transitions, A/TCMHMR, Interfaith Care Alliance, ALLGO, and Wright House Wellness Center.	ATCHHSD (Mark Pepler 972-5081)
HHS	Federal	Ryan White CARE Act Title III HIV Early Intervention Services Grant	FY 2005: \$198 million	\$7.3million	\$895,000	David Powell Public Health Center, AIDS Services of Austin, A/TCMHMR and Community Action Inc. of Hayes, Caldwell and Blanco Counties.	ATCHHSD (Mark Pepler 972-5081)
HHS /HRSA	Federal	Health Care for the Homeless/ Pubic Health Service Act, Section 330 (h) 1. New Access Points 2. Expanded Medical Capacity 3. Service Expansion	FY 2006 about \$2 million	N/A	\$650,000 (\$650,000)	City of Austin Community Care Service Department (CCSD)	CCD (John Gilvar 972-4006)
HUD	Federal	McKinney-ESG (Emergency Shelter Grants)	FY 05-06 \$159 Million	N/A	\$328,000 (\$328,000)	A/TC HHSD--Communicable Disease Unit (\$52,672 for intensive case management for homeless persons with HIV or AIDS); Family Eldercare (\$40,000 for a representative payee program for chronically homeless persons); Front Steps (\$218,903 for operations and maintenance of ARCH); ESG administration (\$16,398)	ATCHHSD (Natasha Ponczek at 972-5027 or Leslie Boyd at 972-5036)
HUD	Federal	McKinney - Continuum of Care (Super NOFA) 1. Supportive Housing Program (SHP) 2. Shelter Plus Care (S+C) 3. Section 8 Moderate Rehabilitation Single Room Occupancy (SRO))	FY 2005: \$1.244 Billion	N/A	\$4.3 million (\$4.3 million)	ATCMHMR--Safe Haven, ATCMHMR--HMIS, Caritas of Austin--ReEntry, Caritas of Austin--Permanent Supportive Housing(Spring Terrace), Housing Authority of the City of Austin, Housing Authority of Travis County, LifeWorks--Street Outreach, LifeWorks--Supportive Housing, Push-Up Foundations, SafePlace, The Salvation Army	ATCHHSD (Natasha Ponczek at 972-5027 or Gilja Koo at 972-6156)
HUD	Federal	Housing Opportunities for Persons with AIDS (HOPWA)	FY 2005: \$251.323 million	N/A	\$931,000	AIDS Services of Austin, Inc. and Project Transitions Inc.	ATCHHSD (Mark Pepler 972-5081)
HUD	Federal	HOME (The Home Investment Partnership program)	FY 05-06:	N/A	\$7.1 million (\$490,000 for TBRA; \$1.8 million for RHDA)	City of Austin NHCD	City of Austin NHCD
HUD	Federal	Section 811(the Section 811 Supportive Housing for Persons with Disabilities Program)	FY 05-06: About \$20 million	N/A	\$3.8 million	ATCMHMR	ATCMHMR
HUD	Federal	Section 202	FY 2006	N/A	\$77,000	Family Eldercare—Lyons Gardens	Family Eldercare (National Church Residences at 210-680-9199)
HUD	Federal	Section 8 (other than S+C) (The Housing Choice Voucher Program)	N/A	N/A	FY 05-06: \$44.8 million	Housing Authority of City of Austin (HACA)	HACA
HUD	Federal	Community Development Block Grant (CDBG)	FY 2005-06:	N/A	\$10.5 million (\$ 364,279 for RHDA)	City of Austin NHCD	City of Austin NHCD
SAMSHA /CMHS	Federal	The Projects for Assistance in Transition from Homelessness (PATH)	FY 2003: over \$41 million	N/A	\$485,000 (\$485,000)	ATCMHMR	ATCMHMR (David Gomez at 750-5150)
SAMSHA /CSAT	New Federal	the Development of Comprehensive Drug/Alcohol and Mental Health Treatment Systems for Persons Who are Homeless (Short Title: Treatment for Homeless)	FY 2006: \$9.7 million (\$3.7 for CH)	N/A	(\$400,000 - pending)	ATCMHMR Austin Recovery Front Steps	ATCMHMR (Millred)

End Chronic Homelessness Organizing (ECHO) Committee

Agency	Level	Funding Source (Name of Grants/Programs)	Federal funding (FY)	Texas Awarded	Austin Awards (Use for Hmls)	Grantee(s)	Local Contact
VA	Federal	The Health Care for Homeless Veterans program – Homeless Providers Grant and Per Diem Program	FY 2005: \$51 million	\$657,307	FY 2006: \$400,000 (\$400,000)	Foundation Communities (Spring Terrac)	VA (Jim Brown/Andrew Miller at 389-6545)
FEMA	Federal	McKinney-FEMA the Emergency Food and Shelter (ESP) Program	FY 05-06: \$153 million	FY05-06 \$13.5 million	FY 05-06: \$ 636,000	Travis/Williams Counties: Any Baby Can, Capital Area Food Bank, Caritas of Austin, Meals on Wheels, Safeplace, Salvation Army, TC – HHS/VA, WBCO, Will. Co. Crisis Center	Capital Area Food Bank of Texas
DSHS	State	Mental Health Programs Branch the Projects for Assistance in Transition from Homelessness (PATH)	N/A	FY05-06: \$3.7 million	FY05-06: \$490,000	ATCMHMR	DSHS (Greg Gibson at 206-4695)
TDHCA	State	State of Texas Emergency Shelter Grant Program (ESGP)	N/A	FY 2005: approx. \$5 million	\$156,000 (\$60,000)	Texas Homeless Network SafePlace LifeWorks	TDHCA (Jesse Mitchell at 475-3950)
TDHCA	State	State of Texas HOME Program (HOME Investment Partnerships (HOME) Program: Homebuyer Assistance, Rental Housing Development, Owner-Occupied Housing Assistance, and Tenant-Based Rental Assistance.)	N/A	FY 2005: approx. \$43 million	\$2,286,446	Community Partnership for the Homeless (\$1.5 million), Spring Terrace Apartments – Foundation Communities (\$786,446)	TDHCA (David Danenfelzer at 475-3865)
TDHCA	State	State of Texas Community Services Block Grant Program (CSBG)	N/A	FY 2006: \$30.2 million	\$800,000	ATCHHSD	TDHCA (Jesse Mitchell at 475-3950)
TDHCA	State	State of Texas Housing Tax Credit Program	N/A	FY 2005: approx. \$42 million	\$895,753	Kingfisher Creek Apartments (\$225,813), Parker Lane Seniors Apartments (\$669,940)	TDHCA (Robbye Meyer, 475-3340)
TDHCA	State	State of Texas Housing Trust Fund Program	N/A	FY 2005: approx. \$6.2 million	\$699,710	Spring Terrace Apartments – Foundation Communities (\$682,010), United Cerebral Palsy Austin (\$17,700)	TDHCA (Robbye Meyer, 475-3340)
NHCD	Local Government	City of Austin (NHCD) Housing Trust Fund (HTF)	N/A	N/A	FY 2006: \$175,000 for TBRA	Austin Housing Finance Cooperation (NHCD administers through AHFC)	NHCD
COA Travis County	Local Government	City of Austin (HHSD) and Travis County Budget for Social Services Programs (Homelessness)	N/A	N/A	FY 2006 COA \$3,856,976, County \$248,606 (\$4.1 million)	Blackland Community Development Corporation-- Transitional Housing program, Casa Marianella-- Emergency Shelter, Community Advocates for Teens & Parents, Inc.--Shelter and Transitional Housing, Community Partnership for the homeless--Emergency Shelter, Foundation for the Homeless, Inc.--Interfaith Hospitality Network, Front Steps, Inc.--Homeless Services for ARCH, Push-up Foundations, Inc.-- Transitional Housing, Salvation Army--1. Shelter for Women & Children, 2. Pathways and Partnerships, LifeWorks--Housing and Homeless Services	ATCHHSD

Note: This Funding Matrix Chart will be updated on a regular basis. The ECHO Systemic Issues/Advocacy Subcommittee, with support from ATCHHSD staff, is taking a lead on this process. For more information, please contact Gilja Koo, ATCHHSD, at 972-6156.

Appendix F
Summary of Subcommittee Action Plans for 2006

A. Planning and Evaluation Subcommittee Action Plan for 2006

Key Objectives ("What are you trying to end chronic homelessness?")	Action Steps ("How are you trying to accomplish it?")	Output/Deliverables ("What will you produce?")	Timeline ("When will it be accomplished?")	Responsible Entity / Partnership ("Who will be responsible for accomplishing it?")
A Pilot Study	1. Plan and supervise implementing a pilot study by using the new Caritas & Foundation Communities	20 new units Evaluation Proposal for a pilot project	Sep. 2006	Planning and Evaluation, Caritas of Austin
	2. Open to other possibilities of using other projects/programs for a pilot study - (work with FEMA Assessment Team) - (work with Representative Payee Program)	Proposal for pilot project(s)	Dec. 2006	Planning and Evaluation, Family Eldercare
	3. Use information from pilot to inform and improve plan to end chronic homelessness	Progress reports from the pilot study	on-going	Planning and Evaluation
Improve data on chronic homelessness	1. Partner with other organizations and committees to improve data on chronic homelessness - (Help ACTMHMR work with agencies) - (Connect with other ECHO subcommittees which collect the data for "needs assessment")	Homeless Management Information System (HMIS) Report on "needs assessment"	on-going	Other ECHO Subcommittees, ATCMHMR (HMIS), and HMIS participating agencies
	2. Input in the process of planning & conducting a homeless count for 2007	A report included in the local Continuum of Care application	Jan. 2006 - Jan. 2007	Resources and Programs Committee
Report/Documents	1. Make recommendations to develop methods for measures of success ("what you want to measure and how to develop measurement tools")	A report included in an ECHO annual report	Dec. 2006	Other Subcommittees: Prevention, Exiting, and Systemic Issues
	2. Evaluate the implementation and success of the Plan	A report included in an ECHO annual report	Dec. 2006	ECHO, Planning and Evaluation
	3. A leadership role to update/revise the Plan	Presentations to the Steering Committee, the ECHO Committee, and other public entities, and publishing a report	Jan. 2006 - Jan. 2007	Planning and Evaluation

B. Prevention Subcommittee Action Plan for 2006

Key Objectives ("What are you trying to end chronic homelessness?")	Action Steps ("How are you trying to accomplish it?")	Output/Deliverables ("What will you produce?")	Timeline ("When will it be accomplished?")	Responsible Entity / Partnership ("Who will be responsible for accomplishing it?")
1. Improve data on people being discharged from institutional systems	1. Collect data for "needs assessment" in the areas of foster care, substance abuse, mental health, respite care, and discharge planning	Report and Present Data Analysis (quantitative & qualitative data analysis)	1. Oct. 06	Foster care agencies, Respite Care group, ATCMHMR, RRT
2. Research current practice and "Best Practices"	1. Continue to identify and research " Best Practices " for providing support to discharged homeless persons	Produce documents (include them in the April progress report)	1. Aug. 06 2. Feb. 07	All ECHO members
	2. Develop a glossary of " common terminology " that the Committee should define to implement the Plan			
3. Support develop strategic plan for establishing a Respite Center for the Homeless	1. Develop a strategic plan for establishing a Respite (Recovery) Center for the Homeless	1. A Strategic Plan 2. Development and operation of the center	1. Feb. 06 2. On-going	Respite Care group, Hospital District,
	2. Identify available funding sources/partnership for developing and operating a Respite Recovery Center			
4. Support self-sufficiency planning for exiting foster care	1. Identify foster care self-sufficiency standards 2. Examine state policies surrounding aging-out youth 3. Examine private agency policies surrounding aging-out youth 4. Develop and Advocate for "Best Practices" to be implemented	1. List 2 & 3. The summary of policies and the analysis 4. Cross study (pre and post) for the youth exiting foster care	1. May 06 2. July 06 3. July 06 4. Sep. 06	LifeWorks, Casey Family, DFPS
5. Implement Policy Changes on discharge planning	1. Engage public institutions in discussion about their role in preventing homelessness	1. MOU 2. The summary of policies	on-going	Systemic Issues/Advocacy, RRT
	2. Examine current policies pertaining to discharge planning from public institutions and make recommendations to improve discharge planning			
6. Secure Resources	1. Identify available resources for discharge planning	1. Linked to "Resource Mapping"	on-going	RRT, Systemic Issues/Advocacy
	2. (Research options for funding substance abuse and mental health treatment)	2. Applying for new funding sources	on-going	ATCMHMR, HTF, Systemic Issues/Advocacy

C. Exiting Subcommittee Action Plan for 2006

Key Objectives ("What are you trying to end chronic homelessness?")	Action Steps ("How are you trying to accomplish it?")	Output/Deliverables ("What will you produce?")	Timeline ("When will it be accomplished?")	Responsible Entity / Partnership ("Who will be responsible for accomplishing it?")
1. Research Housing Solutions	1. Research alternative housing solutions - Tent cities - Respite care - Housing for single women	Report and recommendations regarding alternative housing methods	May 06	Exiting Subcommittee, Respite Care group, HTF
	2. Connect with other community housing groups - Re-entry - Housing Works - Mobile Loaves and Fishes - Mayor's Mental Health Task Force Monitoring Committee	Report detailing all of the housing for homeless concurrently running	on-going	RRT, Housing Works, Mobile Loaves and Fishes, and Mayor's Mental Health Task Force Monitoring Committee
	3. Work with other groups to find methods of maximizing Continuum of Care dollars	More Continuum of Care Funding	May 07	HTF, Other ECHO Subcommittees
2. Case by Case examination of ARCH population	1. Present cases at each exiting meeting to see if resources from private or public sources can solve the obstacle from becoming housed	A report	on-going	Exiting Subcommittee
	2. Keep track of each case managed at Arch, how long it takes to get each person housed and a list of the obstacles to housing. Hire researcher team?	A report with recommendations	Nov. 06	Exiting Subcommittee
3. Be prepared for HACA Issues	1. Data garnered from study to work with HACA regarding removal of barriers	MOU	Jun. 06	Exiting Subcommittee

D. Systemic Issues/Advocacy Subcommittee Action Plan

Key Objectives ("What are you trying to end chronic homelessness?")	Action Steps ("How are you trying to accomplish it?")	Output/Deliverables ("What will you produce?")	Timeline ("When will it be accomplished?")	Responsible Entity / Partnership ("Who will be responsible for accomplishing it?")
1. Advocacy: Initiate community campaign to build support and acceptance of plan	1. Develop publicity plans for Forum as well as the Plan 2. Approach the media including TV, radio, press (Austin American-Statesman, Austin Chronicle, Texas Monthly, and other news letters) 3. Obtain memorandum from major public institutions/agencies including DANA, Chambers of Commerce, TRC, ARC, DARS	Forum well attended by diverse group of non service providers	1. Aug. 06 2. On-going 3. On-going	ECHO, Systemic Issues/Advocacy
2. Advocacy: Publicize successes, activities and plans	1. Develop "talking points" and specific recommendations 2. Recruit PR firms and/or persons on the committee 3. Identify profile and publicize success stories on a personal level 4. Identify Events and Opportunities to talks to groups of officials 5. Provide "cost-savings analysis" 6. Documenting "needs" (work w/ other subcommittees)	Local Cost of Service by Successful Models Identified On-going PR	1. June 06 2. July 06 3. Aug. 06 4. Sep. 06 5. Sep. 06 6. Sep. 06	ECHO, Systemic Issues/Advocacy, HTF
3. Advocacy: Educate elected officials about chronic homelessness and the need for better discharge planning	1. Develop annual plan for meeting w/ elected officials 2. Get training for advocacy 3. Joint Collaboration with media: work on presentation, public officials, individuals; 4. Develop and Publicize the HTF website	On-going mtgs with elected officials	1. July 06 2. Sep 06 3. On-going 4. On-going	ECHO, Systemic Issues/Advocacy, HTF
4. Explore and develop resources: Ongoing "mapping" federal, state, and local funding sources to identify possible funding sources to support the Plan	1. Draft "funding matrix" that shows federal, state, and local funding sources used for hlms and chronic homeless 2. Identify possible (new and existing) funding sources to support the Plan	Funding Matrix	1. April 06 2. On-going	ECHO, Systemic Issues/Advocacy, HTF
5. Resources: Research why Austin has not been selected for funding in recent competitions	1. Why two Shelter Plus Care projects didn't receive full funding in the 2005 Continuum of Care (CoC) awards? How each area's FMR has decided?	Description of FMR formula	1. Sep 06	Systemic Issues/Advocacy
6. Resources: Explore new resources for chronic homelessness	1. Support the City Bond package for Affordable Housing as Permanent Supportive Housing (PSH) 2. Support SAMSHA funding proposal for substance abuse services 3. Develop relationships with Federal Representatives for support of grant applications 4. Identify any local surplus Federal properties that could be made available for service sites	1. 240 permanent supportive units	On-going	ECHO, Systemic Issues/Advocacy, HTF