

Framework for Maryland's Interagency Council on Homelessness

VISION: As a result of aligned resources, policy and practice statewide, the homeless and those at risk of becoming homeless in Maryland, will have access to services, emergency shelter and long-term housing options to assist them in attaining self sufficiency and prevent their return to homelessness.

Updated as of April 2017

Please Note: The timeframes outlined in this document are based on a calendar year.

GOAL 1 -- Increase statewide, the number of permanent supportive housing options available to the homeless (A Federal requirement).

The “Housing First” philosophy of Permanent Supportive Housing (PSH) has demonstrated both cost and outcome effectiveness, and has become the principal public health paradigm to address homelessness in communities across the country. Maryland’s Interagency Council on Homelessness will facilitate increased and improved intra/interagency partnerships to effectively leverage limited federal, state, and local resources for development of more permanent supportive housing statewide.

	OBJECTIVE	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
A	Increase and track the production of housing available to those making 30% AMI or below.	<ul style="list-style-type: none"> ▪ Determine how Low Income Housing Tax Credits (LIHTC) allocation can be expanded to increase the number of units to the homeless. ▪ DHCD will continue to track the annual production of units under the Weinberg, Bridge, 811, STHFG programs. 	DHCD and the Housing First Work Group.	<ul style="list-style-type: none"> ▪ Ongoing
B	Establish statewide Housing First Principals and programmatic requirements.	<ul style="list-style-type: none"> ▪ Draft Housing First guidelines for homeless service programs to review, adopt and execute. ▪ Determine if and how incentives for projects that match state Housing First definition can be worked into existing funding programs. ▪ Support developers and service providers committed to developing and running Housing First projects to house those experiencing homelessness. 	DHCD, DHR, DHMH and PSH Developers and CoC leads.	<ul style="list-style-type: none"> ▪ Draft to be completed within 3rd quarter of 2017 ▪ 4th quarter of 2017 ▪ Ongoing
C	Increase the use of rapid re-housing funding (RRH).	<ul style="list-style-type: none"> ▪ 	DHCD	<ul style="list-style-type: none"> ▪

Accomplishments Thus Far:

- ✓ Develop and adopt a state Housing First definition
- ✓ Create a summary of existing homeless services resources.
- ✓ Collect annually, the number of units subsidized through the Weinberg, Bridge, 811 and Shelter and Transitional Housing Facilities Grant (STHFG) programs (DHCD) and include in Annual Report to Joint Legislative Committee.
- ✓ Identify the number of units funded above, that went to house those experiencing homelessness.
- ✓ DHCD has encouraged CoCs to use Emergency Solutions Grant funding for RRH
- ✓ HB134 Passed during 2017 legislature, this will shift DHR service grants over to the management of DHCD.
- ✓ Project the number of units needed to house the chronically homeless, veterans and unaccompanied homeless youth.

GOAL 2 -- Improve the availability of emergency housing solutions to the homeless that include eviction prevention, lower barrier emergency sheltering, rapid re-housing and cold weather sheltering statewide.

Emergency shelter is a short-term public health necessity while we continue to strive for long-term sustainable solutions for those experiencing homelessness. Maryland’s ICH will determine and promote best practices and models for providing emergency shelter and shelter diversion to provide client-centered and trauma-informed support services using a harm reduction approach to ensure equal access to protected classes, and vulnerable individuals and families.

	OBJECTIVES	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
A	Determine what gaps currently exist in how jurisdictions provide low-barrier shelter.	<ul style="list-style-type: none"> ▪ Adopt a state definition and expectations of ‘low barrier sheltering’ ▪ Increase resources available to CoCs so they may offer year-round low-barrier shelter options. 	A work group comprised of ICH members, CoC leads and shelter providers.	<ul style="list-style-type: none"> ▪ 1st quarter 2017 ▪ 2nd quarter 2017
B	Establish Shelter safety and admission guidelines to ensure safety and equitable access to emergency shelter statewide.	<ul style="list-style-type: none"> ▪ Complete needs assessment project to understand the resource gaps of local CoCs to provide low-barrier shelter in an equitable and safe manner. ▪ Utilize membership of the CE work group to establish guidelines 	ICH members and CoC leads	<ul style="list-style-type: none"> ▪ By 5/30/17 ▪ 4th quarter of 2017
C	ICH will work to standardize Inclement weather sheltering practices statewide	<ul style="list-style-type: none"> ▪ The ICH will create general guidelines and expectations for inclement weather sheltering to all jurisdictions to ensure each area utilizes available resources to serve as many as possible, focused on stopping the cycle of repeat clients. 	DHR, ICH, CoC leads, Emergency Managers and MD Assoc. of Counties (MACO)	<ul style="list-style-type: none"> ▪ Recommendations provided to Joint Leg. Committee in 2016 Annual Report

Accomplishments Thus Far:

- ✓ Collected a summary of all current RRH programs across the state and include information in the Annual Report on Homelessness.
- ✓ Completed initial assessment of which CoCs are offering lower barrier shelter options.
- ✓ Develop a system to track deaths of the homeless statewide and publish weekly.
- ✓ Work with CoC leads and Emergency Management leads within counties to encourage dual-planning efforts for cold weather shelter.

GOAL 3 -- Improve the emergency services network for the homeless, by partnering with local stakeholders to create a comprehensive assessment and discharge planning process used at intake and discharge from medical facilities or jails (A Federal Requirement).

Maryland's ICH is committed to ensuring no one is discharged into homelessness from hospital care, emergency rooms, nursing homes, mental health clinics, state hospital facilities, or carceral institutions. The Council will promote the training and relationships necessary to assure consistent and effective discharge planning for health and housing needs. The Council will work with health and service providers to increase respite/convalescent care throughout the state for people experiencing homelessness.

	OBJECTIVES	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
A	Assess how the homeless are accessing emergency care and identify where improvements are needed.	<ul style="list-style-type: none"> ▪ Work with hospitals and propose questions to add to the intake process to better assess homeless status upon intake. 	Health and Homelessness work group, health care providers and community service providers.	<ul style="list-style-type: none"> ▪ 3rd quarter of 2017
B	Study the manner in which homeless patients are being released from hospitals back into the community.	<ul style="list-style-type: none"> ▪ Consider and approve specific discharge goals and/or adopt a mandate that health care providers will follow to discharge people safely back to their communities and not back to the street. 	Health and Homelessness work group, health care providers and community service providers.	
C	Increase access to proper respite/conval-escent care for the homeless statewide.	<ul style="list-style-type: none"> ▪ Work with local communities to create a needs assessment tool aimed at determining where additional respite beds are needed for the homeless. ▪ Review and summarize national best practices aimed at increasing respite beds for the homeless and share with local communities in the ICH Annual Report. 	Health and homelessness work group, DHMH and local Departments of Health.	<ul style="list-style-type: none"> ▪ 2nd quarter, 2017 ▪ August 2017
D	Assess exit-planning strategies used by jails and other institutions to determine service and housing gaps.	<ul style="list-style-type: none"> ▪ Work with the Department of Public Safety (DPS) to assess the housing and service gaps that exist when case managers work with people exiting incarceration. ▪ Summarize this information to be included in the 2017 ICH Annual Report on Homelessness. ▪ Provide information on housing and services to local DPS staff working to exit people from incarceration. 	DPS and the Health and Homelessness work group.	<ul style="list-style-type: none"> ▪ 1st quarter, 2017 ▪ August 2017 ▪ 4th quarter, 2017

Accomplishments Thus Far:

- ✓ Determine what respite bed options are available statewide and identify programs that others can follow as a best practice.

GOAL 4 -- Improve the support system that exists for homeless veterans, so that we may end Veteran Homelessness as soon as possible. (A federal requirement).

The federal Opening Doors plan aims to end homelessness among veterans by the end of 2015. Maryland's Interagency Council on Homelessness will work with local, state, federal, and non-governmental partners to identify the specialized needs of and available services for homeless veterans in our state, and to improve the range, availability, and coordination of housing and services necessary to end veteran's homelessness.

	OBJECTIVES	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
A	Improve access to housing for Homeless veterans.	<ul style="list-style-type: none"> ▪ Coordinate all information held by each CoC and all 3 VA medical centers to establish a statewide by-name list. ▪ Recommend the continuation and expansion of existing housing options, i.e. Grant Per Diem, HUD VASH, and SSVF. ▪ Create data sharing agreements between stakeholders working with homeless Veterans. ▪ Establish a network of providers that support homeless veterans and create a formalized method for them to share information. ▪ Identify service gaps based on CoC survey results and determine means to improve communication between veteran service stakeholders. 	<p>DHCD, MD VA, CoCs</p> <p>Veterans Work Group, DHR, USVA (VISN 5 Homeless Services), COC member organizations.</p>	<ul style="list-style-type: none"> ▪ By May 2017 ▪ Ongoing. ▪ 2nd quarter of 2017
B	Identify recommendations to improve access to Employment for homeless veterans.	<ul style="list-style-type: none"> ▪ Continue and enhance services provided by the Career One-Stop Center Disabled Veterans Employment Specialist (DVOP) working with emergency and transitional housing locations statewide. ▪ Increase DVOP outreach efforts to other housing and homeless service provider organizations statewide. 	<p>Veterans Work Group, DLLR, veteran centric transitional housing program providers (Grant Per Diem), USVA (VISN 5 Homeless Services).</p>	<ul style="list-style-type: none"> ▪ Ongoing throughout 1st and 2nd Quarters of 2016. ▪ Ongoing throughout 2nd and 3rd Quarters of 2016.
C	Improve and make more consistent, the resources available to homeless Vets.	<ul style="list-style-type: none"> ▪ Create a shared messaging campaign for all service providers working with homeless veterans to ensure a consistent service message is provided to homeless veterans. ▪ Work with the Maryland Community Services Locator (MCSL) to enhance the online directory of housing resources for homeless veterans. 	<p>Veterans Work Group members, CoCs, DLLR and local job centers, jail and prisons.</p>	<ul style="list-style-type: none"> ▪ Began summer 2016, ongoing through remainder of the year ▪ 4th quarter of 2016

Accomplishments Thus Far:

- ✓ Increase information sharing between Homeless Service Providers and the VA to better identify veteran-specific housing and support services.
- ✓ Designate a specific DVOP, closest to the Department of Public Safety and Correctional Services (DPSCS), correctional institutions to assist incarcerated veterans prior to release with job placement assistance.
- ✓ Complete a statewide survey to assess how the CoC's respond to the needs of homeless veterans and recommend improvements to service delivery.
- ✓ Created a resource guide for homeless veterans to support the work of CoCs.
- ✓ DHCD, DHR and the Veterans work group have worked with the VA to assess the number of veterans by CoC, determine which CoCs have a by-name list has

GOAL 5 – Ensure access to housing, education, employment, and supportive services for youth and young adults experiencing homelessness or transitioning out of state systems. (A Federal Requirement)

Housing instability and homelessness are on the rise among youth and young adults between the ages of 16-24. Youth with histories of foster care and juvenile services involvement are disproportionately represented, as are youth identifying as LGBT (lesbian, gay, bisexual, and transgender) and youth of color. Specialized strategies and interventions are necessary to prevent and end homelessness for this high risk group. To aid State and local efforts to address youth homelessness, Maryland’s ICH will support the Youth REACH demonstration project, facilitate interagency collaboration, develop sound and effective policy recommendations, and provide technical assistance to ensure that existing and new programs and initiatives adequately address the unique needs of this diverse population.

	OBJECTIVE	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
A	Address service needs of youth and young adults experiencing or at risk of homelessness	<ul style="list-style-type: none"> ▪ Catalog public and private programs, initiatives and resources that address youth and young adult homelessness in the State. ▪ Provide status update on recommendations from the 2013 UHY Task Force report regarding Supportive Services and outline next steps. ▪ Assist state agencies and community stakeholders in developing funding ideas and proposals to enhance existing strategies and/or develop new programs. 	ICH, State agencies, local stakeholders, community service providers.	<ul style="list-style-type: none"> ▪ By end of 1st quarter, 2017. ▪ 2nd quarter, 2017 ▪ Ongoing
B	Increase housing options for youth and young adults experiencing or at risk of homelessness.	<ul style="list-style-type: none"> ▪ Assess current availability of safe, affordable housing for unstably housed and homeless youth and young adults. ▪ Write a status update on recommendations from the 2013 UHY Task Force report regarding housing options and outline next steps. 	ICH, State agencies, Housing First Workgroup, local stakeholders, community service providers	<ul style="list-style-type: none"> ▪ 3rd quarter of 2017 ▪ 2nd quarter of 2016.
C	Increase participation by youth in policy process and elevate the issue to statewide stakeholders.	<ul style="list-style-type: none"> ▪ Recruit persons with personal experience of homelessness and/or other specific knowledge and experience related to youth and young adult homelessness to serve on ICH Youth & Young Adult Homelessness Work Group ▪ Educate the ICH about specific issues related to youth homelessness or subpopulations of homeless youth with significant vulnerability and/or unique needs 	ICH, local stakeholders, community service providers	<ul style="list-style-type: none"> ▪ ▪
D	Eliminate education barriers for youth experiencing homelessness	<ul style="list-style-type: none"> ▪ Support MSDE in the development and implementation of the McKinney-Vento State plan. ▪ Support local partners as they work to meet the terms of the state plan and assess gaps in education and transportation services. 		<ul style="list-style-type: none"> ▪

Accomplishments Thus Far:

- ✓ Survey local providers about service needs for homeless youth and young adults.
- ✓ Recommend continued State funding of Youth REACH for the remainder of the demonstration project at a level sufficient to support statewide participation.
- ✓ Encourage and support participation of Local Management Boards and other stakeholders in local Youth REACH planning and implementation.
- ✓ Expand number of counties participating in second Youth REACH count in 2017.

GOAL 6 – Achieve federal requirements of coordinated entry for all Maryland CoCs by January 23, 2018

(A Federal Requirement)

Maryland’s Interagency Council on Homelessness will work with local continua of care to coordinate the support safety net for those who are homeless to ensure that access to services is fair, equitable, clear, and provided with a “no wrong door” approach. The Council will support local continua in meeting federal requirements for “coordinated intake and assessment” (CA), which seek to connect people experiencing homelessness with housing, income, and supportive services in the most efficient and effective manner possible.

	OBJECTIVES	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
A	Assess local progress made towards achieving Coordinated Access statewide.	<ul style="list-style-type: none"> ▪ Establish regular meetings with CoC’s discuss their work and share best practices and with other CoC’s. 	Coordinated Entry Work Group	<ul style="list-style-type: none"> ▪ Ongoing throughout 2017
B	Support CoCs in meeting HUD guidance and deadline of 1/23/18.	<ul style="list-style-type: none"> ▪ The ICH will ask for guidance and support from the USICH to learn how other states have achieved this federal goal. 	CoC leads and ICH, HUD can provide some technical assistance.	<ul style="list-style-type: none"> ▪
C	Establish Shelter safety and admission guidelines to ensure safety and equitable access to emergency shelter statewide.	<ul style="list-style-type: none"> ▪ Complete needs assessment project to understand the resource gaps of local CoCs to provide low-barrier shelter in an equitable and safe manner. ▪ Utilize membership of the CE work group to establish guidelines 	ICH members and CoC leads	<ul style="list-style-type: none"> ▪ By 5/30/17 ▪ 4th quarter of 2017

Accomplishments Thus Far:

- ✓ Establish an ICH work group focused on this topic.
- ✓ Create an assessment tool to survey how CoCs currently conduct coordinated entry.
- ✓ Survey was conducted and results collected.
- ✓ Needs assessment project started with University of Maryland, January 2017 to be completed in May 2017.

GOAL 7 - Reduce barriers to the workforce system and increase training opportunities, employment options and earning potential of those experiencing homelessness.

Description

	OBJECTIVE	STRATEGIES	STAKEHOLDERS RESPONSIBLE	TIMEFRAMES
A	Integrate finalized state WIOA plan goals focused on the homeless, into work of ICH .	<ul style="list-style-type: none"> ▪ Determine when the plan will be finalized and approved by governor. ▪ Recommend ways the state plan should address the barriers faced by the targeted population of those experiencing homelessness. 		<ul style="list-style-type: none"> ▪ ▪
B	Share report completed by the Chronic Homeless Employment Technical Assistance Center (CHETA)	<ul style="list-style-type: none"> ▪ Read it and see should be shared amongst others ▪ Determine if the 2008 report could be used as a training tool. 		<ul style="list-style-type: none"> ▪
C	Identify potential third party partners for the Food Supplement Employment and Training (FSET) Program	<ul style="list-style-type: none"> ▪ 		<ul style="list-style-type: none"> ▪ ▪
D	Estimate resources necessary to replicate Light House culinary arts workforce training model	<ul style="list-style-type: none"> ▪ 		<ul style="list-style-type: none"> ▪
E	Look into other best practices for employment for those experiencing homelessness nationwide	<ul style="list-style-type: none"> ▪ 		<ul style="list-style-type: none"> ▪