

APPENDIX III

HOMELESS POPULATION GOALS & OBJECTIVES

Homeless Population Goals

The homeless population goals and objectives were developed with input from the *Homeless to Homes* report and the City of Cincinnati Administration. Hamilton County Community Development and the City worked together during the development of the recommendations in order to ensure that the Continuum of Care is positioned to receive the maximum number of points in the Continuum of Care scoring system.

Several objectives contain language regarding the fair distribution and concentration of beds or housing units throughout the City and County. Following the adoption of the Consolidated Plan, the City, County, and the Continuum of Care, at a minimum, will work collectively to further define these terms. In addition to geography, housing characteristics that will help to ensure the needs of the participants are met through the housing location will be considered. These may include, but not be limited to, elements identified by the *Homeless to Homes* report: access to mass transportation (buses) and proximity and access to community amenities, including grocery stores and recreation, medical, training, mental health or substance use disorder treatment, and mainstream benefit/resource facilities.

Homeless Population Goal 1: *Need* — Information regarding the numbers, scope, and needs of homeless persons is accurate and current.

A. Specific to Chronic Homeless

Homeless Population Objective 1 (HP-1): Conduct on an annual basis a point-in-time study to provide accurate data on the number of chronically homeless persons.

B. All Homeless Individuals and Families

Homeless Population Objective 2 (HP-2): Conduct regular audits of the validity of the data in the HMIS system.

Homeless Population Objective 3 (HP-3): Continue the engagement of homeless persons in determining unmet needs.

Homeless Population Objective 4 (HP-4): Expand the process to track and document the causes/issues for recidivism.

Homeless Population Goal 2: *Quantity* –A sufficient quantity of suitable housing is available to meet the needs of the homeless population in the City of Cincinnati and in Hamilton County that is fairly distributed between the City and County and is not concentrated in any one area.

A. Specific to Chronic Homeless

Homeless Population Objective 5 (HP-5): Create permanent supportive housing units or tenant based rental assistance to meet the needs of the chronically homeless.

Homeless Population Objective 6 (HP-6): Ensure, to the extent possible, that housing units for homeless are fairly distributed within the City and County.

Homeless Population Objective 7 (HP-7): Ensure, to the extent possible, that beds and housing units for homeless are not concentrated in any one area based on a population ratio of the number of beds or units per Census Tract as reported in the most recent U.S. Census.

B. All Homeless Individuals and Families

Homeless Population Objective 8 (HP-8): Maintain the existing number of emergency shelter beds (as recommended in the *Homeless to Homes* report).

Homeless Population Objective 9 (HP-9): Increase the number of transitional housing beds for single individuals (as recommended in the *Homeless to Homes* report) with a fair distribution between areas of the City and County.

Homeless Population Objective 10 (HP-10): Increase the number of permanent supportive housing units for single individuals (as recommended in the *Homeless to Homes* report) with a fair distribution between areas of the City and County.

Homeless Population Objective 11 (HP-11): Continue the provision of permanent supportive housing for homeless persons in appropriate, diversified locations, according to individual need.

Homeless Population Objective 12 (HP-12): Increase temporary emergency shelter beds for families for seasonal overflow and poor economic conditions with a fair distribution between areas of the City and County.

Homeless Population Objective 13 (HP-13): Create new scattered-site transitional housing beds and permanent supportive housing options for families with a fair distribution between areas of the City and County.

Homeless Population Objective 14 (HP-14): Ensure, to the extent possible, that beds and housing units for homeless are not concentrated in any one area based on a population ratio of the number of beds or units per Census Tract as reported in the most recent U.S. Census.

Homeless Population Goal 3: *Quality* – Quality housing and services are available to meet the needs of homeless persons.

A. Specific to Chronic Homeless

Homeless Population Objective 15 (HP-15): Maintain the requirement that all emergency shelters meet minimum standards for shelter prior to approval for funding.

Homeless Population Objective 16 (HP-16): Continue to increase the quality and quantity of case management services.

Homeless Population Objective 17 (HP-17): Create new methods to ensure substance abuse and mental health treatment is sufficiently available to address the needs of the chronically homeless.

Homeless Population Objective 18 (HP-18): Ensure that beds and housing units are compatible with the neighborhood and will not have an adverse impact on the character of the area or the public health, safety, and general welfare.

Homeless Population Objective 19 (HP-19): Develop criteria for good neighbor plans/agreements and require that all new beds or housing units be reviewed and approved by the appropriate reviewing authority for conformance with the good neighbor plan/agreement.

Homeless Population Objective 20 (HP-20): Any new or additional housing or service programs for the homeless located in the City and the County must be coordinated with the appropriate department.

B. All Homeless Individuals and Families

Homeless Population Objective 21 (HP-21): Maintain the requirement that all emergency shelters meet minimum standards for shelter prior to approval for funding.

Homeless Population Objective 22 (HP-22): Continue Front Line Worker Training (FLWT), updating curriculum at least annually based on needs data and expanding offerings to provide training for aides/advocates/ house manager level workers.

Homeless Population Objective 23 (HP-23): Support agency use of HMIS data in determination of program effectiveness and for staff evaluations.

Homeless Population Objective 24 (HP-24): Ensure that beds and housing units are compatible with the neighborhood and will not have an adverse impact on the character of the area or the public health, safety, and general welfare.

Homeless Population Objective 25 (HP-25): Develop criteria for good neighbor plans/agreements and require that all new beds or housing units be reviewed and approved by the appropriate reviewing authority for conformance with the good neighbor plan/agreement.

Homeless Population Objective 26 (HP-26): Institute a template for case plan maintenance, which will follow the homeless client.

Homeless Population Objective 27 (HP-27): Any new or additional housing or service programs for the homeless located in the City and the County must be coordinated with the appropriate department.

Homeless Population Goal 4: Access/Paradigm Shift - Homeless persons efficiently and effectively obtain any and all mainstream resources and community systems or services for which they are eligible.

A. Specific to Chronic Homeless

Homeless Population Objective 28 (HP-28): Maintain the current level of coordination and services for outreach to chronically homeless street persons and increase the level for young adults and persons with substance abuse issues.

Homeless Population Objective 29 (HP-29): Expand the Central Access Point (CAP) program to enable the single homeless individuals to connect with information and referral services.

B. All Homeless Individuals and Families

Homeless Population Objective 30 (HP-30): Implementation of systems to improve access to housing/services needed by the homeless population exclusive of the chronically homeless.

Homeless Population Objective 31 (HP-31): Maintain the Central Access Point (CAP) program for families to enable homeless families to gain access to emergency shelter or family homelessness prevention services.

Homeless Population Objective 32 (HP-32): Expand the Central Access Point (CAP) program to enable the single homeless individuals to connect with information and referral services.