10 YEAR PLAN TO END HOMELESSNESS IN THE FAIRBANKS NORTH STAR BOROUGH

Working together to improve housing and decrease homelessness in the Fairbanks North Star Borough

Fairbanks Housing and
Homeless Coalition

Adopted 7-1-2013

Executive Summary:

This Ten Year Plan to address homelessness in the Fairbanks North Star Borough (FNSB) is based on years of work by the Fairbanks Housing and Homeless Coalition (FHHC) and the input of dozens of people and homeless service providers. It is realistic and achievable. It will reduce the number of homeless individuals and families in total and decrease the duration of time spent in homelessness.

The Plan recommends:

- ✓ Short term Homeless Prevention and Crisis Intervention
- ✓ Increase Community Awareness/Education of Issues and Data Collection
- ✓ Increase Housing Options for Target Populations
- ✓ Increase Housing Options for low income population with no support (case management)
- ✓ Community Infrastructure – Local Planning Efforts to Coordinate Activities

The plan establishes realistic strategies and details specific action steps to achieve them. This plan assumes that current efforts will be maintained and that additional collaboration and resources will help create future successes. The plan will be reviewed annually to determine if action steps have been completed or need to be updated.

Recent community successes include Tanana Chiefs Conference (TCC) opening Housing First with 47 Permanent Supportive Housing beds available for the Chronic Homeless; and the Fairbanks Youth Advocates (FYA) award of the Community Development Block Grant to build an Emergency Youth Shelter, "The Door", to open in late 2013. The FHHC was instrumental in both of these projects. This demonstrates the strong commitment, passion, and collaboration efforts of our community.

The amount of additional collaboration and funding needed to reduce homelessness in our community is achievable despite the declining funding and resources available. All efforts will be made to redirect and streamline existing resources and create greater interagency cooperation by aligning with the national best practices that have proven successful.

There isn't a single solution to the issue; but rather a combination of efforts that will match what is needed at the time it is needed. This will offer the best support with the best success rate based upon the situation. This plan focuses on approaches that have been proven successful throughout the US in addressing homelessness and that are a good fit for our community.

Introduction

The face of homelessness is synonymous throughout the country. It is a child playing in a shelter. It is a veteran struggling with post-traumatic stress, estranged from family and distrustful of "the system." It is a camp concealed in the trees until discovered, dismantled and all of the inhabitants' possessions are taken. It is a foster child who suddenly became a legal "adult" on their birthday and must provide for themself. The face of homelessness is people of every age and ethnic group who are looking for the path that will lead them home and are often caught up in circumstances beyond their control. Homelessness is not a character flaw.

This document is the product of a continuing effort to strategically reduce the tragedy of long-term homelessness in the FNSB. For many years the FHHC, a grass-roots organization with most services located in Fairbanks, has been collecting data and promoting practices that would more aggressively address this growing problem.

Our Community

The FNSB has a geographical area encompassing 7,361 square miles with a population estimated to be 97,581 as of the 2010 Census. The FNSB is the interior regional hub to approximately 40 Athabascan villages, and the small cities of Nome, Barrow, and Delta Junction. People from outlying areas frequently travel to Fairbanks for Alaska Native Festivals, annual dog mushing races, and other seasonal events to receive medical or dental services, to seek employment, or to visit friends and family. Some find themselves without the means to return to their own communities, which contributes to Fairbanks' homeless population.

Fairbanks is located 125 miles south of the Arctic Circle and the homeless in our community face unique climatic challenges: winter temperatures dipping down to 50 degrees below zero can freeze exposed skin within minutes; snow remains on the ground six months of the year; and winter daylight is less than four hours at the winter solstice, December 21. Many people have died from exposure due to Fairbanks' severe winter weather.

Addressing the issue of homelessness is not new to the FNSB. The first plan of the Fairbanks Continuum of Care System was developed after the City of Fairbanks Mayor's Task Force on Homelessness presented their findings on the "economic and social impact and recommendations on how to address the needs of the homeless" in January 1994.

For the next ten years, several "Fairbanks CoC" plans were put into place and the key element to breaking the cycle of chronic homelessness in adults was identified as more intensive supportive services to address the key areas creating the homeless situation. The FHHC became the group that continued the efforts of addressing the homeless situation.

Time has shown that the homeless are not often ready to accept or seek out the supportive services offered when they have no place to live. The "Housing First" model is a current best practice approach, which seeks to change the way homeless families and individuals are served

by placing them in housing as a first step. It is premised on the idea that individuals and families are more responsive to interventions and support once they are in permanent housing.

The FHHC developed more intent collaborations in 2010 when the first paid Coordinator position began. Monthly meetings are well attended and representatives from a dozen or more agencies are always present. During the past two years, projects such as TCC Housing First and the FYA Emergency Youth Shelter "The Door" were developed as a result of our joint efforts. Housing First is now at full capacity and *The Door* will become part of our community soon.

More than ten years ago, funding was lost for the Family Focus Transitional Living Program serving youth between 18 and 21 and Family Focus also stopped providing the Basic Center Program. The loss of those programs has left many youth with no options but to live on the streets or in sub-standard housing. This plan will address those and many other housing gaps for targeted populations.

The overall lack of affordable housing for low income individuals and families in Fairbanks needs to be addressed. In the Out of Reach 2013 report from the National Low Income Housing Coalition (NLIHC), Alaska now ranks #9 from #12 in 2012 for the most expensive state to rent a two bedroom apartment. If being paid minimum wage, an Alaskan needs to work 110 hours per week. If working a traditional 40 hour a week job 52 weeks a year, an Alaskan must make a wage of at least $21.37/hour.[1] The cost of living in Fairbanks is approximately 40% above the national average. The price of fuel and electricity has doubled in the past ten years and continues to rise. This plan will look for alternatives and options to address that.

Another key component of this plan is to prevent homelessness. The most expensive way to address homelessness is to wait until a situation becomes a crisis requiring reliance on emergency assistance. A small amount of money (less than $2,000), made available at the right time, can prevent a family or individual from becoming homeless. This often includes rental assistance for families and individuals that need short term assistance to get back into the work force. This plan will look at developing a coordinated effort in this area.

How We Measure Up

To measure the extent of homelessness, communities throughout the country have embraced the "Point-In-Time" (PIT) Count approach for gathering statistical information. In conformance with guidelines issued by the U.S. Department of Housing & Urban Development (HUD), PIT Counts are conducted during the last week in January each year. The Alaska Housing Financial Corporation (AHFC) has coordinated the Alaska counts. Fairbanks has participated in those coordinated counts and the FHHC reviewed the data gathered since 2009 in the development of this plan.

Point-in-time count methodologies vary and are imperfect. As such the aggregated numbers do

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[1] http://nlihc.org/oor retrieved March 20, 2013

not represent a precise count of homeless people. The counts, however, when compared over time, provide a way to assess whether the homeless population has increased or decreased.[2] Homelessness increased overall in Alaska by 7% from 2009 to 2011.[3]

Nationally, overall chronic homelessness decreased by 13% since 2007. This is attributed to a re-targeting of HUD resources and the narrow definition HUD uses that includes a person sleeping in an 1) emergency homeless shelter; 2) a transitional housing facility that targets homeless persons or; 3) a place not suitable for human habitation like a sidewalk or car.

Not included in HUD reports are those who have been turned away because a shelter is full and those who live in a community without a shelter and turn to family or friends to avoid living on the streets.

Alaska's PIT count distinguishes homeless populations that fit in HUD-prescribed charts from those that are homeless by: displacement, lack of permanent housing, temporarily staying in a motel, or staying with friends or relatives. Homeless persons counted in Fairbanks represent the sum of all groups. AHFC has a statutory definition of "homelessness" that aligns with the McKinney-Vento definition as it applies to the Department of Education and Department of Health and Human Services and is inclusive of all groups.

In 2009 and 2010, the FHHC organized a PIT Count in January. In March 2010, the FNSB organized the first Project Homeless Connect (PHC) Event, a one-day, one-stop service fair, to coincide with the US Census. In 2011 and 2012 in conjunction with the annual "Point In Time" (PIT) count, the FHHC organized a PHC Event. In 2013, the FHHC reverted back to the PIT count only used in 2009 and 2010; but with a "mini" PHC offered at various locations with limited services. The focus in 2013 was the street count that attempted to locate those who may not attend a PHC event; but are homeless.

The results of PHC and PIT count data are as follows: January 2009 - 428 (PIT only), January 2010 - 395 (PIT only), March 2010 (PHC done with Census, no count available), January 2011 - 250 (PHC only) and 522 (PHC/PIT combined), January 2012 - 338 (PHC only, PIT from AHFC unavailable) and January 2013 – 232 (PIT only). While clear conclusions cannot be made, it is apparent the issue of homelessness is not decreasing.

Of the 2012 participants attending PHC, 73.5% were attending for the first time, and less than 1% had attended all three PHC events. In the last three years nearly 16% stated they had been homeless zero times, 62% stated they had been homeless one to three times and 23% reported they had been homeless four or more times. Of the 2013 participants, 170 of the 232 counted were households without children. Due to difficulty of collating their data into the PIT count, AHFC asked the FNSB School District to conduct a separate PIT count and their total was 266.

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[2] National Alliance to End Homelessness "The State of Homelessness in America 2012", pp3
[3] National Alliance to End Homelessness "The State of Homelessness in America 2012", pp14-15

These figures indicate there are a significant number of people who are not finding permanent housing or a way out of homelessness. They also show that for many, prevention and early intervention reduces the duration of a homeless episode.

Success is Achievable

The ever-increasing momentum of government, corporate and philanthropic investment in supportive housing has been bolstered by research documenting its effectiveness. Supportive housing is a term used to describe housing that combines a residential environment with support services that address each family or individual's particular service needs.

While we haven't conducted our own study, research shows that supportive housing costs far less than a stay in a correctional facility, a hospital, or psychiatric institution and it decreases the cost of emergency services. According to research compiled by the Alaska Coalition of Housing and Homelessness[4], the cost of supportive housing is $60 per day. Whereas the cost of incarceration in jail is $136 per day and admission to a hospital including the Alaska Psychiatric Institute is $1264 per day.

In addition, the Corporation for Supportive Housing has spearheaded a national effort to document the costs and benefits of supportive housing. They report studies to indicate:[5]

Positive impacts on health. Decreases of more than 50% in tenants' emergency room visits and hospital inpatient days; decreases in tenants' use of emergency detoxification services by more than 80%; and increases in the use of preventive health care services.

Positive impacts on employment. Increases of 50% in earned income and 40% in the rate of participant employment when employment services are provided in supportive housing, and a significant decrease in dependence on entitlements - a $1,448 decrease per tenant each year.

Positive impacts on treating mental illness. At least a third of those people living in streets and shelters have a severe and persistent mental illness (20% in Alaska). Supportive housing has proven to be a popular and effective approach for many mentally ill people, as it affords both independence and as-needed support.

A study of nearly 900 homeless people with mental illness provided with supportive housing found 83.5% of participants remained housed a year later, and that participants experienced a decrease in symptoms of schizophrenia and depression[6]. A study of almost 5,000 homeless individuals with mental illness placed in supportive housing through the NY/NY program confirmed that nearly 80% remained housed a year later, with 10% moving on to independent

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[4] Alaska Coalition on Housing and Homelessness Facts 2012, released September 2012
[5] Corporation for Supportive Housing, Research Summaries, www.csh.org , 2009
[6] US Dept. of Health and Human Services. *Making a Difference: Report of the McKinney Research Demonstration Program for Homeless Mentally Ill Adults.* 1994.

settings.

Positive impacts on reducing or ending substance use. Once people with histories of substance use achieve sobriety, their living situation is often a factor in their ability to stay clean and sober. A one-year follow-up study of 201 graduates of the Eden Programs chemical dependency treatment programs in Minneapolis found that 56.6% of those living independently remained sober; 56.5% of those living in a halfway house remained sober; 57.1% of those living in an unsupported SRO remained sober; while 90% of those living in supportive housing remained sober.

In addition to PIT information, the Department of Corrections reported that in 2012, they discharged 13,755 persons from prison. Many had no identified housing arrangement. The University of Alaska's Institute of Social and Economic Research (ISER)[7] completed a study in January 2009 of the cost benefit of treatment and re-entry programs on the Alaskan prison population and the long term cost savings to the Corrections system from an investment in these programs.

The results are conclusive: Investing in treatment and rehabilitation programs reduces the recidivism rate. The ISER report found that for an additional $4 million annual investment, through existing programs, the state could save $321 million over the next 20 years. That's equivalent to an average return of approximately $16 million or 400%.

The Alaska Mental Health Trust Authority (AMHTA) and its partners operate the Bridge Home program which helps beneficiaries obtain stable living environments through the provision of rental assistance and support services. An AMHTA report showed that Bridge Home participants had 38% less admissions to API and 48% less incarcerations to Corrections. The number of days spent in both these systems dropped 32% for API and 68% for Corrections.

Plan Description

This Plan encompasses several guiding principles and areas of focus:

Preservation and Full Utilization of Existing Resources with Increases

All of the resources in our current housing continuum (including shelters, transitional housing and permanent supportive housing) are necessary to maintain the level of services we have today. However, some of these resources can be re-directed to increase the impact on homeless populations, for instance by decreasing the amount of transitional housing and increasing the amount of permanent supportive housing.

Our community experiences have shown that transitional housing is inadequate for some

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[7] ISER Research Summary January 2009, RS NO. 7

persons and the loss of the transitional housing which cannot be maintained beyond 24 months, without permanent supportive housing in place, puts them back where they started when they first became homeless. Increasing the options for the type of housing needed given the unique circumstances of an individual or family that is homeless is also critical to reducing homelessness.

Collaboration for Prevention and Early Intervention is integral to addressing long-term homelessness

Experience shows that preventing a family or individual from becoming homeless is far easier and less costly than providing any type of housing or service assistance after the fact. Not all homeless people need intensive support services to move out of homelessness. Some just need a helping hand on a temporary basis. Better coordination in allocating funding resources means greater efficiency in the distribution of funds and more direct impact on the problem. Our plan envisions the creation of a centralized pool of prevention resources with a Network of Care of available services.

Increased Community Awareness/Education and Data Collection with Community Infrastructure

As the funding for services declines, the community must be made aware of the extent of the issue and the efforts to solve it. Continuing to gather relevant data to measure the extent of the problem and identify those who place the biggest financial burden upon the community is critical. The FHHC intends to join the 100k Homes Campaign, send selected individuals to "boot camp" and conduct a Vulnerability Survey to identify those who need to be housed first to have the greatest impact on our community.

Increasing low income housing options

The majority of families and individuals who find themselves homeless at any given time are there as a result of economic circumstances. The lack of affordable housing options in Fairbanks cannot be overlooked. This plan will address how to increase those options as well as how to assist individuals and families to keep the housing they have and be better consumers of the housing market through targeted education.

Plan Format

This plan is organized into a matrix with five overall categories that outline one or more strategies for that category. Each strategy contains one or more action steps with projected outcomes after one year, two years, three years, five years and ten years. The success of this ten year plan will be based on the participation of local governments, for- profit housing developers, and non-profit and faith based organizations.

Measuring Our Success

Throughout the planning process, FHHC members have acknowledged the need to attach measurable outcomes to every action taken or dollar invested. Each focus area has a baseline upon which progress will be evaluated. Not only will homeless counts and units added be measured, but also the degree of housing stability after a housing crisis is resolved. As more agencies link into the AK Homeless Management Information System (AKHMIS), more will become known about migration patterns and characteristics of homeless subpopulations. The system can also be used as a tool to determine which programs and services are the most effective. All of these resources will be used to generate an annual progress report.

The FHHC will serve as the guiding force for the accomplishments of the Ten Year plan. The plan will be reviewed annually to determine if the outcomes for the previous year were met and if the strategy and action steps are on track for the next year. This plan is a living document and will be revised as appropriate.

GLOSSARY OF TERMS

Chronic Homeless – HUD term that refers to a subset of the homeless populations that experience repetitive instances of homelessness and suffer from disabilities or co-occurring disorders like substance abuse.

CoC Continuum of Care - HUD planning process that coordinates the application of projects to HUDs McKinney-Vento Homeless programs, the Shelter Plus Care and Supportive Housing programs.

"Homeless" as defined in AHFC Statutes – much broader definition of "homelessness" than federal definition, includes people in shelters and doubled up family or friends.

McKinney-Vento – federal enabling legislation that authorizes the distribution of funds for homeless programs through the US, by HUD, the Department of Education and other federal agencies.

Supportive Housing – term that refers to housing where the families and individuals participate in one or more service programs. These programs can support the participants in transitioning back into the mainstream after a period of homelessness or institutionalization.

Short-Term Homeless Prevention / Crisis Intervention							
Baseline: 2012 PHC (265 responses) - 65 staying in Emergency Shelter, 7 in DV shelter, 17 in place not meant for habitation. 2013 PIT Count (232 counted) - 154 in Emergency Shelter, 60 in Transitional Housing, 18 Unsheltered. 114 adult, 10 youth, and 46 domestic violence Emergency Shelter beds available.							
Strategy	Action Steps	By 6-30-2014	By 6-30-2015	By 6-30-2016	By 6-30-2018	By 6-30-2023	Responsible Party
1. Create a Network of Care of Available Services aka Homeless Phonebook	1a. Expand Access to Information for Available Services 1b. Advocate for automated 211 for 24 hour access 1c. Identify available services 1d. Place how to access phonebook of resources at local homeless hubs	1c. Research what services/resources are available	1a. Create book and distribute to service providers 1d. Designate and advertise # for information	1a. Solicit feedback of usefulness	1a. Evaluate use of phonebook		1. Careline (IAC)
2. Provide services geared to meet immediate short term needs	2a. Identify lead agency to find a secure location to store valuables 2b. Offer access to service outside regular business hours M-F	2a. Identify lead agency	2a. Research storage options 2b. Contact providers for after hour options	2a. Provide storage 2b. Distribute and publicize after hours options	2a. Evaluate storage services		2. FHHC - identify lead agency
3. Create centralized pool of prevention resources for rent, mortgage, & utility arrearages; or to pay housing costs for persons hospitalized, in substance abuse treatment; or for persons serving short-term incarceration (less than 60 days)	3a. Coordinate existing resources (i.e. ESG, HAP or other grants) 3b. Develop framework for central prevention pools 3c. Set aside % of funding authorization for prevention activities	3a. Identify existing resources and local agency to manage resources 3b. Central framework developed	3a. Find local operational funds for administration 3b. Gather prevention baseline data 3c. Determine % of funding set aside	3b. 25% increase in number of households served	3b. 75% increase in number of households served	3b. 150% increase in number of households served	3a. Resources sub-committee

	3d. Develop a coordinated homeless fund to assist more households at-risk of homelessness		3d. Offer funds	40% retention rate	65% retention rate	85% retention rate	
4. Increase ability of the homeless to access available resources	4a. Increase number of service provider employees that receive SOAR training	4a. 12 new service provider employees trained	4a. 12 new service provider employees trained	4a. 12 new service provider employees trained	4a. Evaluate on-going need for training		4. Behavioral Health sub-committee
	4b. Involve Fairbanks Social Security Administration Office in process	4b. Contact Fairbanks SSA Office					
5. Create a Beans Café Model	5a. Evaluate existing model(s) in AK and potential here	5a.Evaluate existing models	5a. Make recommendation	5a. Identify lead agency			5. FHHC

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Increase Community Awareness/Education of Issues and Data Collection

Baseline: 2012 PHC (265 responses) - 63 attended a PHC event previously. 2013 PIT Count (232 counted) - 16 agencies responded to and participated in the 2013 PIT Count and 4 use HMIS

Strategy	Action Steps	By 6-30-2014	By 6-30-2015	By 6-30-2016	By 6-30-2018	By 6-30-2023	Responsible Party
1. Participate in Project Homeless Connect thru "mini" event approach	1a. Hold at least 3 mini events each calendar year targeting existing events, offer services isolated to a category corresponding to the event, and obtain survey data from participants at each event	1a. Hold Events with these in mind: PIT - Jan; Job Fair - Mar; Health Fairs - Apr or Oct; National HIV Testing - Jun 27; World AIDS Day - Dec 1; and any other events	1a. Evaluate mini PHC strategy - number of events, response and any other ideas for future events	1a. Make recommendations for future events			1. PHC sub-committee
2. Join 100k Homes Campaign	2a. Join 100k Homes Campaign	2a. Identify lead agency / Boot Camp training opportunity	2a. Join Campaign / attend boot camp	2a. Report survey results to 100k Homes			2. FHHC - to identify lead agency
	2b. Obtain funding and select people to attend Registry Week Boot Camp	2b. Write mini-grant for 2-3 people to attend Boot Camp	2b. Select lead coordinator for Vulnerability Index survey				

Strategy	Action Steps	By 6-30-2014	By 6-30-2015	By 6-30-2016	By 6-30-2018	By 6-30-2023	Responsible Party
	2c. Conduct Vulnerability Index - encourage 100% participation of agencies 2d. House people on most vulerable list		2c. Conduct Vulnerability Index survey	2c. Evaluate Vulnerability Index results/ create list 2d. House 5 people from list	2c. Plan follow up survey(s) and frequency 2d. House 20 people from list	2d. House 40 people from list	
3. Increase HMIS participation	3a. Identify agencies that are not part of HMIS and determine feasibility for them to use it - including participation through an existing HMIS agency (pool resources)	3a. Identify agencies that are using HMIS and those agencies that are not but could be	3a. Contact agencies that are not using HMIS and determine feasibility of using HMIS	3a. Offer alternatives from an existing HMIS agency to non-HMIS agencies (resource pooling)	3a. 50% agency coverage	3a. 85% agency coverage	3. FHHC
4. Host Bridges Out of Poverty training for agencies/ community	4a. Organize a one day community training for agencies/organizations and second day for clients - Getting Ahead in a Getting by World	4a. Explore funding options for training and schedule	4a. Hold training event for agencies and community	4a. Evaluate results and make recommendations for future training			4. Fairbanks Rescue Mission

Increase Housing Options for Target Populations

Baseline: 2012 PHC (265 responses) - 160 homeless 1-3x and 61 homeless 4x or more in the last 3 years; 112 qualified as a trust beneficiary; 21 fleeing DV; 9 homeless due to release from jail/prison; 1 in foster care. 2013 PIT Count (232 counted) - 33 chronically homeless; 75 qualified as a trust beneficiary; 35 victims of DV. There are 114 adult, 10 youth, and 46 domestic violence emergency shelter beds; 90 transitional housing beds; and 110 permanent supportive housing beds available.

Strategy	Action Steps	By 6-30-2014	By 6-30-2015	By 6-30-2016	By 6-30-2018	By 6-30-2023	Responsible Party
1. Increase options for Emergency shelter for Youth	1a. FYA to open *The Door* emergency youth shelter	1a. The Door opens with 6-12 beds	1a. Evaluate unmet need - make recommendations			1a. No unmet shelter needs	1. Fairbanks Youth Advocates
2. Increase options for Emergency shelter for Adults	2a. Review Family Promise Model for Adult(s) w/children 2b. Evaluate need for a "Damp" Cold Weather Shelter (CWS) for chronic homeless w/substance abuse issue(s)	2a. Assess need for family housing	2a. Develop plan to assist families with children, if needed 2b. Assess impact of TCC Housing First and need for CWS	2b. Develop a plan for a CWS	2b. 20 beds available at CWS	2a. No unmet shelter needs 2b. No unmet shelter needs	2a. Shelter Alternatives sub-committee 2b. Cold Weather Shelter sub-committee or Fairbanks Native Association

Increase Housing Options for Target Populations continued

Strategy	Action Steps	By 6-30-2014	By 6-30-2015	By 6-30-2016	By 6-30-2018	By 6-30-2023	Responsible Party
3. Increase Transitional Shelter for Youth	3a. Identify number of beds needed - estimate is 20 individual and 1-5 youth w/children	3a. Conduct survey(s) to determine the need	3a. Research existing models/make recommendations				3. Fairbanks Youth Advocates
	3b. Develop a Shelter Model to include Teen Pregnancy/ Parenting		3b. Select shelter model	3b. Develop plan	3b. 10 units available	3b. 10 new units available	
	3c. Assist youth with establishing a rent history	3c. Research options to assist youth and develop plan	3c. Identify funding source for rental assistance/master lease option(s)	3c. Secure funding			
4. Increase Transitional Housing options for Adults w/Case Management Services	4a. Develop sites for men and women ready to establish rental history	4a. Open Men's House	4a. Develop plan for a Women's House	4a. Identify a site for Women's House	4a. Open Women's House		4a. Fairbanks Rescue Mission
	4b. Develop units to house victims of abuse and rural clients to receive services	4b. Research options for victims of abuse and rural clients	4b. Develop a plan for victims of abuse and rural client units	4b. Select site(s) for victims of abuse and rural client units	4b. 12 new units for victims of abuse and rural clients		4b. Interior Alaska Center
	4c. Develop residential units with a substance abuse free environment	4c. and 4d. Form transitional housing sub-committee (FRM, IAC, FNA, + others interested)	4c. Research options for residential substance abuse free units	4c. Make recommendations for residential substance abuse free units			4c. and 4d. Transitional Housing sub-committee
	4d. Develop housing options for persons with mental health disability		4d. Develop plan to increase options and seek assistance from Mental Health Trust	4d. Make recommendations for mental health disability units			

	4e. Research the unmet need for those released from incarceration with no housing identified	4e. Identify the number of Tenant Based Rental Asst vouchers available	4e. Make recommendations for housing options	4e. Develop plan and identify funding needed			4e. Prisoner Re-entry Sub-committee
5. Create long term shelter solution for Youth	5a. Develop Host Homes Program	5a. Develop Host Homes protocol	5a. Have 6 Host Homes available	5a. Increase Host Homes to 12	5a. Evaluate need for more homes		5. Fairbanks Counseling and Adoption
6. Increase Permanent Supportive Housing	6a. Develop units for victims of abuse	6a. Identify Site/funds for 24 units to house victims of abuse	6a. Develop plan and Secure site funds	6a. Implement plan for site	6a. 12 new units	6a. 12 new units	6a. Interior AK Center
	6b. Identify unmet Housing First need	6b. Gather umet need data from TCC Housing First	6b. Make recommendations				6b. FHHC
	6c. Develop Substance Free housing	6c. Research site and funds for Substance Free Housing	6c. Make recommendations				6c. Fairbanks Rescue Mission
	6d. Identify the need for those persons transitioning from incarceration that need on-going support/housing	6d. Research the need/prisoner re-entry options offered in other AK communities	6d. Make recommendations				6d. Prisoner Re-entry Sub-committee
7. Research Master Lease program for hard to house program clients	7a. Contact Anchorage users and determine the scope of the program and requirements	7a. Provide program information to determine viability	7a. Identify lead agency for 7b.				7a. FHHC
	7b. Implement program if strategy viable		7b. Develop plan to fund leases	7b. Identify incentives for landlords to participate	7b. Build network of landlords		

Increase Housing Options for low income population with no support (case management)

Baseline: 2012 PHC (265 responses) - 66 own a house, rent an apt/house or live in subsidized housing; 88 stay with family/friends or hotel/motel. 2013 PIT Count - 232 persons and 189 households are homeless whether sheltered (214) or unsheltered (18).

Strategy	Action Steps	12 Month Outcome	By Year 2015	By Year 2016	By Year 2018	By Year 2023	Responsible Party
1. Increase low income housing options	1a. Determine how many vouchers we have and how many needed 1b. Increase access to public housing 1c. Increase stock of low income housing	1a. Obtain data 1c. Contact Fbks Neighborhood Hsg (CHDO) for assistance and get involved w/FHHC	1a. Make recommendations 1c. Make recommendations				1a. and 1c. FHHC
2. Provide rapid re-housing services for households w/children	2a. Develop coordinated homeless fund for move-in costs and/or short term assistance 2b. Lead agency to provide short term assistance	2a. Research available grants/funding sources and contact FNSB grant writer	2a. Select best agency to apply for funds and manage funds 2b. Apply for funds and establish protocols for dispensing funds	2b. 25% of households re-housed within 90 days	2b. 50% of households re-housed within 90 days	2b. 85% of households re-housed within 90 days	2a. Resources sub-committee
3. Provide responsible tenant certification to prevent eviction and increase desirability as a tenant	3a. Increase availability of tenant certification program currently offered by local agencies	3a. Assess cost of current program(s), i.e. Ready to Rent curriculum	3a. Secure funding	3a. Offer certification to 50 persons a month	3a. Assess on-going need		3. Fairbanks Rescue Mission

Community Infrastructure – Local Planning Efforts to Coordinate Activities

Baseline: FHHC Coalition meetings and sub-committee to continue work for restructuring plan.

Strategy	Action Steps	By 6-30-2014	By 6-30-2015	By 6-30-2016	By 6-30-2018	By 6-30-2023	Responsible Party
1. Establish Homeless Clearing House / Care Coordination	1a. Develop and implement a uniform Housing Assessment Tool or apply the state's uniform assessment tool to identify barriers to housing stability	1a. Form temporary sub-committee to select and/or develop tool to be used	1a. Tool disseminated and training completed	1a. Assessment completed on 20% of prevention cases	1a. Assessment completed on 60% of prevention cases	1a. Assessment completed on 100% of prevention cases	1. Housing Assessment Tool sub-committee
2. Develop plan to continue the FHHC	2a. Determine how FHHC will function in absence of a paid coordinator	2a. Create a plan for website maintenance, checking email account, notifying members					2a. FHHC
	2b. Get local government more involved to access local funding	2b. Meet with government officials	2b. Build relationship with local government and find common ground				2b. FHHC
	2c. Attempt to secure funding to sustain coordinator position	2c. Solicit funding from FHHC members	2c. Develop membership guidelines and dues structure for those that can afford to contribute				2c. Interior Alaska Center
3. Increase Community participation through outreach efforts	3a. Identify stakeholders and divide into categories: those who do care - encourage participation; those who should care - advocate for participation	3a. Identify who is not participating that members want participating and contact	3a. Add three new member agencies	3a. Add three new member agencies	3a. Assess new member agencies needed		3. FHHC

Community Infrastructure – Local Planning Efforts to Coordinate Activities continued							
Strategy	Action Steps	By 6-30-2014	By 6-30-2015	By 6-30-2016	By 6-30-2018	By 6-30-2023	Responsible Party
4. Advocate for Behavioral Health options	4a. Advocate to increase or restructure behavioral health services to meet the need - only 10 beds at Ralph Perdue and 10 beds for women and children at Women and Children Inner Healing	4a. Meet with stakeholders and providers	4a. Develop plan to increase options and seek assistance from Mental Health Trust				4. Behavioral Health sub-committee
5. Sustain current level of services offered to the homeless community	5a. Support grants currently used to provide services to the homeless community	5a. Review and endorse requests for support as appropriate	5a. Review and endorse requests for support as appropriate	5a. Review and endorse requests for support as appropriate	5a. Review and endorse requests for support as appropriate	5a. Review and endorse requests for support as appropriate	5. FHHC