



A Ten-Year Plan to End Homelessness in Dakota County

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Executive Summary

On any given night, nearly 1,000 children, women, and men can be experiencing the hardships of homelessness or extreme housing instability in Dakota County, even though it may be less visible here than elsewhere in the Twin Cities. Stable housing is a basic human need and is vital for maintaining a healthy stable community. Loss of housing magnifies and compounds challenges that are often precipitating factors in becoming homeless: loss of employment; failure to complete basic educational goals; physical, mental, and chemical health issues; and unstable family structures. All of these challenges become much more difficult to address successfully without the foundation of stable housing.

Community members from across Dakota County collaborated to create **Heading Home Dakota**, a 10-year plan to end homelessness in our community. The Dakota County Heading Home Committee convened in spring 2010 and met over the course of the following year to:

- Understand the nature and extent of homelessness in Dakota County (*Plan Section III*)
- Identify service, program, and funding gaps (*Plan Section IV, VII*)
- Develop a strategic approach with corresponding progress metrics (*Plan Section VIII*)
- Foster stronger collaboration and partnerships (*Plan Section V, VI*)
- Prepare a plan to document the community's vision and framework for ending homelessness
- Provide a platform for securing implementation resources

Heading Home Dakota Goals: the following six goals form the strategic base of this plan and are comparable to goals in existing Heading Home Plans across Minnesota. Each goal includes specific strategies, existing resources, and anticipated ten-year outcomes. (*Plan Section V*)

Goal 1: Prevent Homelessness

Prevention strategies focus on accurate and timely needs assessment for people experiencing a housing crisis, enhancing services and resources to keep people in their homes, and helping ensure that people don't depart institutional settings into homelessness.

- 1.1 Align and scale resources and funding for homeless prevention services to the need
- 1.2 Improve protocol, policies, and funding available for people exiting public institutions: corrections, mental health facilities, hospitals, foster care
- 1.3 Increase access to legal services
- 1.4 Increase conflict resolution services to assist singles, youth, and families in retaining stable housing
- 1.5 Improve targeting of limited homeless prevention resources to those who will benefit most



Goal 2: Ensure Adequate Supply of Housing Opportunities

Affordable housing is a key aspect of preventing and ending homelessness. New funding and partnership resources for housing will be explored, to meet community needs.

- 2.1. Ensure capacity in short-term and long-term housing opportunities commensurate with need, and preserve existing resources
- 2.2. Build new relationships with housing developers

Goal 3: Increase Outreach to People Experiencing Homelessness

People experiencing a housing crisis for the first time often do not know how to navigate county and nonprofit systems to access the help they need. Those who have experienced repeated or long-term homelessness may lack trust in our safety net system. Enhancing outreach strategies in Dakota County is needed to establish an effective information network countywide. Strategies employ multiple outreach avenues, customized for specific populations.

- 3.1. Effectively utilize emergency shelter and connection to available resources for all populations
- 3.2. Increase and improve connections and communication with police, hospitals, and landlords
- 3.3. Create drop-in centers for youth
- 3.4. Increase and improve communication between schools, students, and homeless/precariously housed families
- 3.5. Increase community outreach staffing
- 3.6. Develop and market a common intake and assessment system for all housing related programs in the county.
- 3.7. Host regular local Community Connect and Stand Down events

Goal 4: Improve Service Delivery

Securing housing is one element of ending homelessness. For many residents in Dakota County, supportive services are essential to maintaining stable housing over the long-term. These strategies propose providing the right services efficiently when they are needed, streamlining screening and program enrollment processes, and providing additional training opportunities to build life skills for stable independent living.

- 4.1. Ensure capacity for supportive services for permanent supportive housing scaled to the need
- 4.2. Create “step-down” support options for persons who don’t qualify for intensive services

- 4.3. Increase and promote low/no-fee training opportunities on skills such as independent living, parenting, and financial literacy for homeless and precariously housed households
- 4.4. Assist people with the process of enrolling in Supplemental Security Income (SSI) in a timely manner

Goal 5: Engage the Community in Ending Homelessness

Communities that are well informed about how homelessness manifests locally, and the solutions for ending it, will become empowered to stand together in confronting the problem. Building community awareness on homelessness is a first step toward actively engaging the community as a resource, partner, and advocate.

- 5.1. Create a comprehensive community education campaign
- 5.2. Increase use of volunteers
- 5.3. Increase participation from people experiencing homelessness in community
- 5.4. Coordinate an annual policy platform to advocate for state/federal legislation

Goal 6: Improve Systems for Addressing Homelessness

Strategies for improving “systems” will remove fundamental barriers that cut across geographic, community, institutional, cultural, and program boundaries.

- 6.1. Increase collaborations and partnerships and improve effectiveness of systems
- 6.2. Improve efficiencies and streamline processes
- 6.3. Address racism and build cultural competency
- 6.4. Improve data collection and sharing

Implementation of this plan will be coordinated through the Dakota County Affordable Housing Coalition, with implementation sub-committees established to prioritize their efforts as they work in each of the six goal areas. *(Plan Section VI)*

Funding to implement this plan will be drawn from multiple sources and applied to each of the six goal areas. The plan budget identifies likely income sources and provides summary information on anticipated capital, program, and staffing expenses over the next five years. *(Plan Section VII)*

Progress Evaluation is a cornerstone of plan implementation. Tracking progress will assist in making any needed course corrections over time and targeting efforts on the most effective actions for ending homelessness. Evaluation will be coordinated with other Heading Home plans across the state, so impact can be captured on a state-wide basis and Heading Home Dakota’s performance can be compared with other regions. *(Plan Section VIII)*

I. Introduction

Why Plans Addressing Homelessness are Being Prepared

Twenty-five years ago, homelessness in America was episodic and experienced by a very small portion of our community (mostly adult men facing chemical and mental health challenges). Today, homelessness permeates all communities (urban, rural, and suburban) and all ages and family compositions. Among industrialized nations, the United States has the largest number of women and children experiencing homelessness. In any given year, more than 2 million adult Americans and nearly 1.4 million American children face the reality of homelessness. On any given night, 640,000 men, women, and children in the United States are without housing.¹

The individual physical suffering associated with homelessness is not difficult to imagine on a January night in the Upper Midwest. For adults, homelessness can include much more than physical discomfort: including isolation, stigmatization, hopelessness, fear for personal safety, and despair at not being able to provide for their families. Homelessness takes an especially heavy toll on children, who, without the secure structure that stable housing provides, are at increased risk for compromised physical and mental health, lowered educational attainment, impaired social development, as well as an increased likelihood of experiencing homelessness as an adult.

As a response to the growing needs of homeless and precariously housed families, communities from across the country have come together to create plans to end homelessness that strive to move from *managing* a rapidly growing homeless system to *ending* homelessness. To date, more than 250 plans to end homelessness have been developed nationwide. In Minnesota, 14 plans cover 86 of the state's 87 counties. As vision documents, these plans set forth a community-wide goal of safe, stable housing for all residents. As near-term guidance documents, these plans help communities:

- Coalesce around shared strategies and expectations
- Assess current and emerging trends
- Evaluate and improve their systems
- Prioritize their efforts
- Identify new funding sources and retain funding for homeless prevention and housing efforts

Defining Homelessness

The experience of homelessness can cover a wide range of living conditions and situations. On May 20, 2009, President Obama signed the Homeless Emergency and Rapid Transition to Housing (HEARTH) Act of 2009, which provides a comprehensive definition of **homelessness**. For many households experiencing homelessness, a combination of these situations is usually the case over extended periods of time:

¹ *OPENING DOORS: Federal Strategic Plan to Prevent and End Homelessness*, 2010. United States Interagency Council on Homelessness



- i. Lacking a fixed, regular, and adequate nighttime residence
- ii. Having a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, transit station, airport, mall, or camping ground
- iii. Living in a supervised public or private shelter designated for temporary living, including hotels and motels paid for by public programs or by charitable organizations, congregate shelters, and transitional housing
- iv. Residing in a shelter or place not meant for human habitation and exiting an institution
- v. Facing imminent loss of housing (within two weeks), as evidenced by a court ordered eviction, residence in a hotel or motel and where one cannot afford to stay for more than 14 days, or landlord refusal to allow continued residence beyond 14 days. In addition, no subsequent residence is identified and resources or support needed to obtain permanent housing are lacking.
- vi. Unaccompanied youth and homeless families with children and youth defined as homeless under other federal statutes who
 - a) have experienced a long term period without living independently in permanent housing,
 - b) have experienced persistent instability measured by frequent moves over such period,
 - c) can be expected to continue in such status because of chronic disabilities, chronic physical health or mental health conditions, substance addiction, histories of domestic violence or childhood abuse, the presence of a child or youth with a disability, or multiple barriers to employment.

The US Department of Housing and Urban Development (HUD) defines **chronic homelessness** as:

- Lacking a permanent place to live continuously for one year or more, or
- Lacking a permanent place to live at least four times in the past three years

Costs of Homelessness

Plans and studies suggest that the societal costs of homelessness are not borne equally across systems, and allowing homelessness to persist unaddressed in a community can be more costly than providing services that end homelessness. The costs of homelessness in the community are challenging to calculate with precision and are not always immediately apparent. Costs can include homelessness prevention, sheltering, and public provision of intensive services outside of routine health care – such as emergency room visits, detox treatment, and hospitalization. The emergency room often is the best available medical care option for homeless people lacking access to preventive health care.

To illustrate the point, the following table compares the typical nightly costs of intensive inpatient treatment facilities, correctional facilities, and a variety of shelter and transitional housing facilities. The table generally demonstrates that the nightly and monthly costs of stable housing, particularly transitional or permanent supportive housing, are much less than mental and medical treatment facilities, and generally less than correctional facilities.

Cost Comparison of Homeless Prevention

Facility	Cost per night/person	Cost per 30 days
County Detox Facility	\$218	\$6,540
Regional Mental Health Treatment	\$618	\$18,540
County Jail	\$80	\$2,400
State Prison	\$77	\$2,310
Emergency Room Visit	\$335	N/A
Inpatient Stay at Hospital	\$1996	N/A (Average Stay 4.45 Days: \$8884)
Emergency shelter ²	\$28—\$43	\$846—\$1306
Domestic Violence Shelter	\$77	\$2310
Transitional and Permanent Supportive Housing	\$47 per single adult \$22 per family ³	\$1410 \$684 ⁴

Minnesota is a national leader in research on the cost impact of homelessness, demonstrating the efficacy of interventions that end homelessness by connecting people experiencing homelessness with appropriate housing and services. Hearth Connection, a local nonprofit based in Saint Paul that serves Dakota County residents, conducted a seminal longitudinal study of people with long histories of homelessness, finding that *while people were homeless*, society spent \$14,000 each year for single adults, \$4,600 per year per parent and \$3,700 per year for each child. When the same participants were offered housing and services, the costs of care shifted away from emergency rooms, jails and institutions, toward preventive and routine health care, medications and community-based support. Most importantly, outcomes and housing stability increased significantly, while the costs to taxpayers did not.⁵

Similarly, Hennepin County identified 266 individuals who collectively spent 70,000 nights in county shelters, jail and detox over a five year period. In response, Hennepin County and St. Stephen’s Human Services initiated a project in 2008 focused on these high-cost users without stable housing for a housing-focused intervention, with an array of flexible support services available as needed. In analyzing the costs of just six participants, Hennepin County found that total costs for this group dropped from \$95,000 per year while people were unstably housed, to just \$16,000 per year after housing, an average decrease of \$13,000 per person per year.⁶

Other longer-term social costs stemming from homelessness accrue to the community over time, and can be nearly impossible to quantify. For example, national research has shown that 36 percent of homeless children will repeat a grade in school⁷, at an average cost to the school district of roughly \$10,000 per student. School districts in Dakota County documented that 186 of their students experienced homelessness in the 2010-2011

² Emergency shelter costs reflect current figures for Dakota Woodlands and Cochran House, shelter providers within Dakota County.

³ Data from Dakota County Supportive Housing Unit

⁴ Data from Dakota County Supportive Housing Unit

⁵ *The Supportive Housing and Managed Care Pilot: Evaluation Summary*, published by Hearth Connection, the National Center on Family Homelessness and the Robert Wood Johnson Foundation, March 2009.

⁶ *Frequent User Service Enhancement (FUSE) Program*. Hennepin County’s Research, Planning and Development Department.

⁷ National Center on Family Homelessness, 1999



school year. If fully 36 percent of these students need to repeat a grade, the additional annual cost to Dakota County school districts could exceed \$670,000.

The strong foundation that sufficient, stable housing provides can deliver greater community benefits than the costs associated with bricks and mortar. Loss of housing magnifies and compounds some of the challenges that, ironically, can be precipitating factors in becoming homeless: finding and keeping employment; completing educational goals; maintaining physical, mental, and chemical health; and having strong, healthy families. All of these things become much more difficult without stable housing.

II. Why a Plan Is Needed for Dakota County

Plan Purpose and Audience

Homelessness is a real problem that can touch nearly 1,000 individuals and families on any given night in Dakota County, even though it may be less visible here than in other parts of the Twin Cities. Community members from across Dakota County collaborated to create **Heading Home Dakota**, a 10-year plan to end homelessness in our community. As part of this process, a community retreat was held on September 30, 2010, in which 50 community members identified needs and gaps in addressing homelessness in Dakota County and discussed strategies to meet these needs. **Heading Home Dakota** seeks to end homelessness in Dakota County through six avenues:

- 1) Prevent Homelessness
- 2) Increase Housing Opportunities
- 3) Increase Outreach to People Experiencing Homelessness
- 4) Improve Service Delivery
- 5) Engage the Community in Ending Homelessness
- 6) Improve Systems for Addressing Homelessness

Heading Home Dakota focuses on three populations experiencing homelessness: youth, families, and single adults. The needs of each group are unique and a one-size-fits-all approach will not be as effective as customized strategies. This plan presents a range of targeted strategies for securing safe and stable housing.

Heading Home Dakota was drafted as a resource for the community that addresses homelessness in Dakota County, including public agencies, community service organizations, faith-based groups, and private entities. The community adopted the following mission and vision:

Pauline is a 58 year old woman who has done house cleaning and been a personal care attendant for over 30 years. She raised two children who now have families of their own and have moved out of state. Physical issues forced Pauline to drop a couple of cleaning jobs, so she moved to a smaller, more affordable apartment. Two of the people she cared for moved into nursing homes and her income was no longer sufficient to pay her rent.

Pauline moved to the Dakota Woodlands family shelter. With career counseling, staff support, and tutoring, Pauline was able to update a resume, brush up on math, and gain enough computer skills to feel comfortable on a cash register. She began part-time at a local retailer to supplement her other job, but was soon offered full time employment – they loved her dependability and maturity and wanted to have her start training newer and younger employees. She loves her new job.

Heading Home Dakota Mission and Vision

Stable housing is the foundation that allows people to be successful in our Dakota County communities. We will prevent and end homelessness for every man, woman, and child in Dakota County within ten years, partnering with residents and private and public stakeholders.

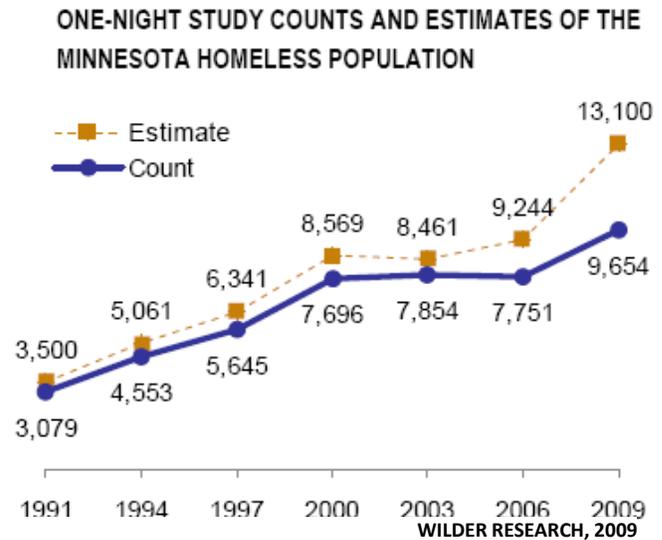
III. Homelessness in Minnesota and Dakota County

How Many People are Homeless?

Statewide:

Since 1991, Wilder Research has conducted a triennial statewide survey of people in Minnesota without permanent shelter. The survey provides a point-in-time count and a demographic snapshot of the homeless population, related to age, gender, race, economics, history, and reasons for homelessness. Wilder Research’s last survey in October 2009 counted **9,654 homeless adults, youth and children in Minnesota**, a 25 percent increase over the 2006 study.

Using a formula developed by the US Department of Housing and Urban Development (HUD), Wilder estimates that **13,000 people may be homeless in Minnesota on any given night**. This estimate does not include people who are doubled up, temporarily residing with family or friends, or otherwise precariously housed.



Minnesota’s homeless include families, singles, and youth. Children (under 18) are more than one-third of Minnesota’s homeless. Children and youth (18-21) together are more than half of Minnesota’s homeless population (57 percent). The largest increase was among youth, ages 18-21, up 57 percent from 2006. This is real cause for concern: data suggest a cyclical nature to homelessness, with nearly half of homeless adults having experienced homelessness before they were 21.

Statewide Groups	2009 Percent of Homeless Count
Children under 18, with parents	34%
Adult males (22 or older)	30%
Adult females (22 or older)	23%
Unaccompanied youth (18-21)	11%
Unaccompanied minors (12-17)	2%

The Wilder statewide study noted racial disparities, with Blacks and American Indians over-represented among the homeless compared to their make-up of the population.

Statewide Group	2009 Percent of Homeless Count	Percentage of State Population
Black	41%	4%
American Indian	11%	1%
White	39%	88%



The statewide count included 669 veterans, who comprised roughly 7 percent of the homeless population surveyed.

Dakota County Point in Time Count: 841 People Homeless

Dakota County’s Point-In-Time Count was last completed in January 2011 for reporting on federal HUD Continuum of Care funding. The table below reports the numbers of people sheltered in emergency or transitional housing as well as those who are unsheltered, e.g., living on the street or in a car.

2011 Dakota County Point-in-Time Count Homelessness	Households and Individuals
<u>Households</u> sheltered in emergency or transitional housing:	130
Families	85: 101 adults 140 children
Adult individuals	37
Unaccompanied youth	1
Single young adults 18-21	7
<u>Persons sheltered</u> in emergency or transitional housing	286
<u>Persons unsheltered</u> on the street, in a car or place not fit for habitation	16
TOTAL PERSONS HOMELESS , counted	302
TOTAL PERSONS AT RISK OF IMMINENT HOMELESSNESS , see table below	539
TOTAL	841

In addition to the 302 homeless people identified in 2011, the PIT count identified another 539 people at extreme risk of becoming homeless in the near-term, including living doubled-up with others, sheltered in self-paid motels in Dakota County, or in other metro shelters (below). Wilder Research’s 2009 survey identified 47 households in Hennepin County and Ramsey County shelters who had lost their last permanent housing in Dakota County.

2011 Dakota County Point-in-Time Count Precariously-Housed Households						
	Family	Single	Youth and Single Young Adults			Total
		Aged 25+	Aged 18	18-21	22-24	
Doubled-up, self-pay at motels, or in non-County shelter	429	55	9	26	20	539

PIT counts provide information on different age groups who are homeless in Dakota County. In the last count and in previous years, **nearly half of Dakota County’s residents experiencing homelessness are children under the age of 18.**

Dakota County Groups	2011 Percent of Homeless Count (Sheltered)
Children under 18, with parents	46%
Adults (22 or older)	46%
Unaccompanied youth	<1%
Single young adults (18-21)	2%

To further understand homelessness in Dakota County, data were extracted from the 2009 Wilder Research Statewide Survey. The survey is extensive and provides valuable insight into who is homeless in Dakota County and why, including information on personal history and past housing situations. It also provides information on the services that are acutely needed, including medical needs, social services, and financial and legal assistance.

Because the survey is heavily comprised of shelter populations (including scattered transitional housing), it reflects the nature of shelter facilities in Dakota County and populations that they generally serve. Dakota County policy emphasizes homelessness services for families and disabled adults and the majority of shelter beds in the County are for families, often mothers with children. Dakota County’s counted homeless population therefore includes more women than men. In other respects (race, education, income, and military service backgrounds) Dakota County’s homeless population was similar to the statewide homeless population.

Age and Gender - Dakota County’s homeless included more women than men, with women generally younger than men

- 74% Women: half of whom were aged 20-29, 83% were less than 40 years old
- 26% Men: ages spread evenly across late teens, 20’s, 30’s and 40’s; oldest in 60’s

Household Status - More than half of the 2009 survey respondents were families with children.

- 80% have children, with 2.2 as the average number of children (notably smaller than the statewide average)
- 57% had their children with them at time of survey, a total of 90 children
- 5 years average age of children who were with their mother

Race - As with the statewide findings, minorities are over-represented among homeless surveyed. African Americans and American Indians were present among the homeless at more than four times their make-up of the general population.

Dakota County, Race	Homeless Count	County Homeless %	Overall % Population	Representation
African American	25	19.5%	4.5%	4.3
American Indian	5	4.0%	<1%	4.0+
Multi-Racial	7	5.8%	2.2%	2.6
Hispanic (of any race)	7	5.7%	4.6%	1.2
White	79	61.6%	87.3%	0.7
Asian	0	-	4.1%	-

Education and School Attendance - One-third of homeless adults surveyed in 2009 did not graduate from High School or get a GED certificate. On average, educational attainment by people experiencing homelessness was higher for Dakota County than statewide.

Children of homeless families residing in shelters in Dakota County continue to attend school. Under the McKinney-Vento Act reporting requirements, Independent School Districts in Dakota County identified 290 homeless schoolchildren in Dakota County public schools for the 2009-10 school year, nearly three times the number identified in the 2005-06 school year.

ISD	District	2005-06	2006-07	2007-08	2009-10
191	Burnsville Public Schools	8	48	73	64
192	Farmington Public Schools	9	11	23	21
200	Hastings Public Schools	-	9	10	-
917	Intermediate District 917	-	2	3	7
199	Inver Grove Heights Schools	4	5	9	22
194	Lakeville Public Schools	30	20	28	16
195	Randolph Public Schools	-	-	-	3
196	Rosemount-Apple Valley-Eagan	28	48	98	125
6	South St. Paul Schools	16	17	12	19
197	West St. Paul-Mendota Hts-Eagan	8	9	8	13
	Totals	103	169	262	290

Employment and Income - Fully one-third of Dakota County’s homeless adults surveyed in 2009 are employed, substantially higher than the statewide figure of 20 percent. Of these, 37 percent work full-time and the majority, 61 percent, earn less than \$10/hour. Of the unemployed, more than half were actively searching for work.

Military Service-Veteran Status - Lower than statewide figures (7%), only 3 percent of County residents experiencing homelessness surveyed in 2009 identified themselves as veterans (3 men, 1 woman). Overall, Wilder’s 2009 survey found that 1 in 10 adults in homelessness and nearly 1 in 5 homeless men have served in the military at some time. At a statewide level, the number of homeless veterans increased by 7 percent over the last count.

Wilder Research’s statewide figures offer a more complete picture of homeless veterans, as well as their needs. Nearly 90 percent of the statewide homeless veterans were male and nearly half of statewide homeless veterans were persons of color, with African American veterans substantially over-represented in the Twin Cities metro area. On average, statewide homeless veterans had higher educational attainment, with half having completed some college coursework. Compared to statewide figures for homeless men, homeless male veterans were more likely to have serious mental, chemical, or physical health issues.

Who is Homeless? Populations and Specific Needs

Statewide Health Needs: Wilder’s survey found that serious physical, chemical, and mental health issues are reported by the state’s homeless population and often occur in combination.

Serious mental illness – was reported by 55 percent of adults homeless for at least one year, an increase over 2006.

Chronic health conditions – were reported by 46 percent of adults homeless for at least one year

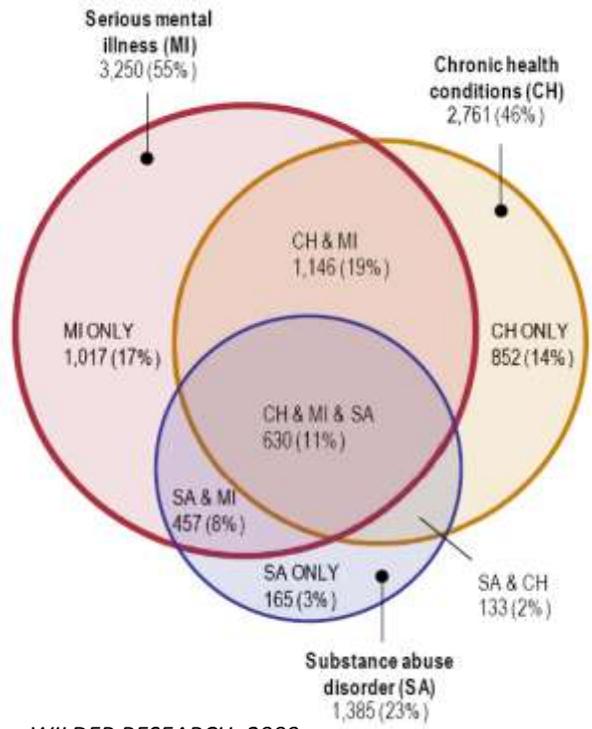
Chemical dependency – was reported by 23 percent of adults homeless for at least one year

Traumatic brain injury– was reported by 35 percent of adults homeless for at least one year

Combinations of the above issues– 74 percent report at least one if not more of three major health issues: mental illness, chronic health conditions, and/or substance abuse. Eleven percent of those surveyed cited all three issues.

Domestic violence – 29 percent of adult homeless women are fleeing domestic violence and 58 percent of these have children less than 18 years of age with them.

Dakota County Health Needs: As with statewide findings, acute mental, physical, and chemical health issues are prevalent among Dakota County’s homeless. In many cases, one or more of these conditions limits the ability of the homeless people surveyed to work or support themselves.



WILDER RESEARCH, 2009

Mental Health– 41 percent report some form of mental illness, less than noted in statewide findings (55 percent). Major depression was cited by 29 percent of Dakota County’s homeless adults and **nearly 38 percent report having considered suicide.**

Physical Health– 32 percent report having a chronic health condition, lower than the statewide figure (46%). Specific health issues commonly identified include:

- Untreated dental problems (49%)
- Having been hit hard on the head, half report problems (37%)
- Having used an ER in the last 6 months; most more than once (33%)

Substance Abuse– 29 percent of respondents considers themselves to be an alcoholic or drug addict, somewhat higher than statewide figures (23%). Substance abuse included alcohol (13%) and drugs (20%). Nearly 30 percent of Dakota County’s homeless people interviewed overall have been in treatment, most (71 percent) within the past two years.

Combined Issues – Similar to statewide totals, 74 percent of the County’s homeless people surveyed (adults) report a life-limiting mental illness, chemical dependency or other condition. Nearly one-third are limited in the type or amount of work they can do by their condition(s). Mental illness combined with substance abuse was reported by 18 percent, similar to statewide findings.

Dakota County Personal and Housing History: **Nearly half of Dakota County’s homeless people meet the HUD definition of long-term homelessness** (lacking a permanent place to live continuously for a year or more or at least four times in the last three years). The majority of the county’s homeless population has been homeless in



the past and had been homeless (or couch hopping) at the time of the survey for more than one year. Commonly-identified life circumstances and challenges include a personal history with housing instability, out-of-home placement, and abuse.

Homelessness History - fully 60 percent have been homeless or couch hopping for 1 year or more

- 69% report having been homeless in the past
- 47% meet the definition of Long-Term Homelessness
- 17% experienced homelessness as children
- 11% have been without a permanent place 3 or more years

Out-of-Home Placement - Nearly half of Dakota County’s homeless surveyed have lived in a foster or group home, treatment facility, residence for people with physical disabilities, halfway house, mental health facility, correctional facility, or adoptive home at some point in their lives.

- 32% have been in one or more of these settings as a child
- 22% have been in one of these settings in the last year. Of these, half had a stable place to live when they left, but were homeless by the time of the survey

History of Abuse - more than 40 percent have experienced abuse or mistreatment in youth.

- 42% report being physically mistreated as a youth
- 31% overall report being sexually abused as a youth
- 40% of females report being sexually abused as youth
- 24% of all females report having been abused while without regular housing

Barriers to Housing

Statewide – Identified Barriers to Housing: At a statewide level, the following barriers to stable housing were most frequently identified by homeless survey participants. Participants could identify more than one issue.

- 51% Lack of income
- 43% Lack of affordable housing
- 16% Criminal record
- 16% Credit problems
- 9% Court eviction or bad rental history, labeling as “unrentable”

Dakota County – Identified Barriers to Housing: Barriers to stable housing for Dakota County’s homeless population also include financial, legal, social, and domestic problems. More than half of the 2009 survey respondents identified the lack of affordable housing and adequate income as primary obstacles to stable housing. Common legal issues include having been evicted or receiving an unlawful detainer, cited at a substantially higher level than in the statewide findings.

Financial and Legal Barriers – were reported by half of respondents

- 58% report the lack of a job or income
- 55% cite a lack of affordable housing. Of these, 68% can afford no more than \$400/month for rent and utilities; 50% can afford \$300/month
- 51% report having received an Unlawful Detainer
- 69% report a court order for child support, with half actually receiving support

Why Last Permanent Housing Was Lost – reasons included one or more of the following

- 62% eviction
- 55% lack of affordable housing
- 52% relationship breakup
- 42% job loss
- 34% domestic violence (29% statewide figure)
- 27% drugs or drinking in the house

Housing Voucher or Subsidy Needs - many people homeless in Dakota County are already on the Section 8 waiting list or have been for an extended period of time. Others cannot get on the list due to closure.

- 69% report being on a Section 8 waiting list for subsidized housing
- 39% report being on a Section 8 waiting list for more than one year
- 18% report not being on a Section 8 waiting list due to list closure

Discharge from Correctional Institutions – up to 36 percent of the county’s homeless surveyed have been held in a juvenile or adult correctional facility

- 26% had been held as juveniles
- 32% have been held as adults

Trends to Note from the Wilder Research 2009 Survey and Other Studies:

Long-term homelessness and duration of homelessness is increasing – Wilder Research documented that 52 percent of homeless individuals in 2009 meet the HUD Long Term Homeless (LTH) definition. Short-term homelessness is decreasing: 8 percent of the 2009 survey population experienced homelessness for less than one month, continuing the steady decline from 21 percent in 1991.

Impacts of a tough economy –Wilder’s 2009 survey found that 40 percent of homeless adults reported job loss or reduced hours as a reason why they lost housing. Statewide, just 20 percent of homeless adults reported they were currently employed, compared to 28 percent in 2006. Median monthly income of homeless adults was \$300 in 2009, down from \$400 in 2006.

Exiting foster care – Among people experiencing homelessness, an estimated 25 to 40 percent have lived in foster care or other out-of-home placement. The largest longitudinal national study of youth leaving foster care



is the Midwest Study on the Functioning of Former Foster Youth, published by the University of Chicago, 2010: The study followed former foster youth up to age 26 and noted these outcomes for their population:

- 14.0 %: Living with a non-parent relative
- 7.0 %: In jail (16 percent for males)
- 6.5 %: Living with friends
- 4.0 %: Homeless at the time of the study
- 31.5 % Not residing in a permanent stable residence

The report notes: “Although less than 1% of young adults with a foster care history were homeless at the point of interview, 24% had been homeless and 28% had couch-surfed since exiting care. Because there was overlap between the two groups, **37% of the sample had been homeless or had couch-surfed.**”

The Urban Institute suggests that up to 40% of youth aging out of foster care experience homelessness within two years of exiting the system. Wilder Research prepared a study on youth homelessness in 2003, documenting the following homelessness survey statistics among former foster youth.

Homeless individuals with a history of foster care:	1997	2000	2003
	38%	41%	53%

Wilder Research found that one-fourth of those who left foster care or a correctional facility within the past year had no stable housing afterward: they had no place to go. What are potential implications for Dakota County? On average, 15-20 youth age out of foster care every year in Dakota County. Many more (300+) are part of a foster care experience at some point in their lives, often short-term, without termination of parental rights.

Housing Instability – How Many Are at Risk?

While the preceding data focuses on people already experiencing homelessness – i.e., in shelters and unsheltered – many more people at any point in time are in an unstable financial and housing situation with little guarantee of continuing in their current housing arrangement. The national recession and housing crisis have had further impact on housing stability in Dakota County. In recent years, Dakota County’s Supportive Housing Unit (SHU) typically has received 6,000 or more referrals and calls for assistance from individuals experiencing homelessness or housing instability on an annual basis.

Dakota County biennially prepares a county-wide Indicators Report, which provides a contemporary summary of key trends and emerging issues related to community demographics, housing, economics, education, health, safety, natural resources, and transportation. Several measures look at specifically financial stress and housing instability. Data included below are largely from the **2010 Dakota County Community Indicators Report** and provide a revealing look at populations who are not yet homeless, but may be at increased risk near-term. Updated figures have been included, as available.

Cost-Burdened Housing - cost-burdened households contribute 30 percent or more of their gross monthly income to housing, including rent, mortgage, taxes, utilities and fees. In Dakota County, the percentage of

cost-burdened mortgaged households almost doubled between 2000 and 2009 to 32 percent. Approximately 45% of Dakota County's renters are cost-burdened.⁸ According to the Dakota County Community Development Agency, it takes an annual income of about \$49,160 to afford an average three bedroom apartment in Dakota County. This is an hourly rate of about \$24, significantly higher than many county residents and workers earn.

Job Loss: Although Dakota County's unemployment rate consistently has remained below state and national averages over the last decade, it increased sharply since 2006, from 3.6 percent to 7.3 percent in 2009. Peaking at over 8 percent in January 2010, the unemployment rate has dropped and was last reported in June 2011 at 6.7%⁹

Poverty Rates: Poverty is defined as living below an accepted threshold annual income, federally-defined as \$22,050 or less for a family of four. Dakota County's poverty rate remains below state and national rates and is among the lowest of the metro counties. Dakota County's overall poverty, as estimated by the American Community Survey, rose slightly from 4.9 percent in 2006 to 5.1 percent in 2009. Poverty in families with children under 18 also rose from 4.9 percent in 2006 to 5.2 percent in 2009.¹⁰

Rental Vacancy Rates: At just 3.4 percent, availability of rental housing reached a ten-year low in Dakota County in 2011.

Help on the Way - The Lakeville Resource Center, a satellite food shelf of the Eagan Resource Center, recently opened its doors in downtown Lakeville to fill an ever-expanding hunger for food assistance. This is in response to the growing demographic of the working poor in Dakota County. Having food on hand is only half the struggle to get families fed. Most families are one paycheck from using the shelf and that tough economic times have reversed the roles of community members. With the loss of jobs, many families who never used the food shelf are now accessing the food shelf. "It's really tough for them to make that first call," said volunteer Mary Freeman. "You can feel their discomfort."

Monetary donations allow the shelf to maintain a consistent inventory by getting food from Second Harvest Heartland at a reduced cost. Both the Eagan and Lakeville Resource Centers partner with local businesses and residents to fill their shelves, daily pickups to grocery stores for near-expiration date items, and other retailers have provided damaged laundry detergent – unfit for sale, but definitely usable. During the holidays, donations are up, but afterwards, donations slow down dramatically. Executive director, Lisa Horn, stressed the importance of monetary donations to help sustain the food shelf through the summer months – a time when many families struggle with kids at home, without school-provided lunches. - *Story from Apple Valley, Rosemount & Eagan Sun-Current, Thursday, Dec. 2, 2010, written by Patrick Loch.*

Food Shelf Use and Food Support: According to Hunger Solutions¹¹ Minnesota, one in ten Minnesotans has

⁸ U.S. Census Bureau, 2000 and the American Community Survey, 2001-2008

⁹ MN Department of Employment and Economic Development (DEED), Local Area Unemployment Statistics

¹⁰ U.S. Census Bureau, 2000 and the American Community Survey, 2006 and 2008



inadequate food resources and seeks assistance to help feed their family. Between 2003 and 2008, the number of people served in Dakota County increased 132 percent, the number of households served increased 129 percent, and the pounds of food distributed increased 109 percent.

Food support (formerly known as food stamps) use also increased: the number of **people served within Dakota County's food support caseload almost doubled between 2003 and 2008**, from 10,300 to 19,200. Between 2010 and 2011, Hunger Solutions reports that food stamp use in Minnesota as a whole increased 19 percent, the sixth largest increase among all states in the nation the same period.

Foreclosures: Foreclosures in Dakota County increased from 0.1 percent of residential properties in 2000 to a peak of 1.6 percent in 2008, with 2,063 properties processed under Sheriff's Certificates of Sale. Foreclosures dropped off in 2009, with 1,859 properties, but spiked again in 2010 with 2,147 Sheriff's Sale properties. The number of foreclosed properties for the first half (January-June) of 2011 is nearly on par with levels from the first half of 2010.¹²

Housing Waiting Lists: The Dakota County Community Development Agency administers programs to provide affordable housing for seniors, families and disabled households earning modest incomes, and manages more than 2,100 units of affordable rental housing.

¹¹ Hunger Solutions does not collect data for every food shelf in the state but does provide a consistent measure to identify statewide and county level trends. Increases between 2003 and 2008 may be partially due to new food shelf locations being added to the database.

¹² 2010 Data provided by Dakota County Community Development agency (CDA).

Scattered Site Public Housing

Program: In August 2011, 2,800 households were on the public housing list and 280 households were awaiting public high rise placement. Numbers are up from 2,659 households on the list in 2009, and up significantly from 1,992 in 2008.

Federal Section 8 Housing Choice

Voucher Program: As of August 2011, 4,000 households were on the wait list, up from 3,835 in 2009. The list had re-opened in January 2008 after being closed since September 2005. The list closed again on March 31, 2010 and is expected to be closed for at least three years.

CDA Senior Housing: As of August 2011, the senior housing wait list included 1,300 households, up from the 2009 list of 1,123 households.

Family Townhome Program: In August 2011, the family townhome wait list totaled 1,600, down from January 2010 list total of 1,939 households, but still higher than the total of 1,424 in 2008.

Public Assistance Caseloads: Since 2000, Dakota County's Department of Employment and Economic Assistance has experienced increasing caseloads in programs that provide income, food, and medical assistance to County residents. Between 2000 and 2010, cases increased from a monthly average of 24 active cases per 1,000 residents to 70 active cases per 1,000 residents. Early reports for the first quarter of 2011 show continued increases in caseload numbers.

Beth, Mike, and their three children

were living in a nice apartment in West St. Paul. Mike had a great job and all seemed well. Beth was able to participate in the children's school activities, volunteer at school and church, and began looking for a part time job or home business.

Then Mike suffered a heart attack. Through his recovery he learned he wouldn't be able to return to work. Recovery was complicated by other health issues and family medical insurance became unaffordable. Beth sought a full time job but nothing was working fast enough. They fell behind on their rent, the car broke down and they struggled financially. Unable to pay for car repairs and rent, they used all of their savings, including money set aside for long term needs. They started selling belongings and found themselves in a downward spiral with no way out. Eventually they were homeless. Unable to follow doctor's orders and under stress, Mike's health declined.

The family came to Dakota Woodlands family shelter. While there, Mike's health stabilized, Beth found work, and the kids thrived with other kids to play with and other caring adults who were able to listen to the kid's concerns. The family participated in supportive educational services, found an organization that repaired the car and found cheaper car insurance. The family stayed at Dakota Woodlands for three months and moved back to West St Paul to a new more basic apartment complex knowing that once they get on their feet, they could move again when it fits their income.

IV. Gaps in Addressing Homelessness

Community Workshop Findings: More than 50 community members engaged in addressing homelessness in Dakota County participated in a workshop on September 30, 2010 and discussed trends, needs, and barriers for people experiencing homelessness in the county, including 1) unaccompanied youth, 2) single adults, and 3) families with children. The following are anecdotal observations summarizing workshop participant insights on homelessness in Dakota County from multiple perspectives including advocate, former homeless, community liaison, public official, and service provider.

Unaccompanied Youth: Trends, Needs, and Housing Barriers

Trends: Workshop participants noted that the number of youth and young adults (18-25 year-olds) who are homeless is increasing. They are seeing more youth who finished high school just in the past year. More parents “kick out” kids at earlier ages (typically after high school graduation) in part due to financial stresses.

Service providers see more foster youth aging out of foster care at age 18 and becoming homeless, often sleeping in cars.

Entry level jobs are being filled by 30-40 year-olds, leaving fewer employment opportunities for youth.

Needs

- Shelters with family reunification programs
- Education to build independent living skills at ages 16-17
- Kinship and friendship connections for youth who don’t have family connections
- Improved data collection
- Assistance in finding resources (e.g., social worker), completing paperwork
- Educational resources for youth without Individual Educational Programs or special services
- More case management for teens related to employment and housing
- Online outreach resources, including a resource website for homeless youth
- Coordinated services – one-stop shopping for social services and other needs

Barriers

- Growing poverty, lack of jobs
- Lack of funding for more school social workers and counselors
- Language and communication barriers
- Eligibility for services and assistance
- Lack of awareness about existing resources
- Poor coordination of services among a broad range of providers
- Lack of transportation options
- Stigma
- Inadequate data to clearly define needs
- Lack of community will related to poverty, language barriers, jobs
- Services are provided through schools or programs – inaccessible for those outside of system



Adults: Trends, Needs, and Housing Barriers

Trends: Workshop participants stressed that single adults without disabilities can be a lower priority for housing assistance services than families with children, and fall through the cracks for lack of resources. Single adults often leave Dakota County to find services elsewhere in the Twin Cities metropolitan area.

Foreclosure rates have increased for people with disabilities, often related to a new disability or job loss. For people with new disabilities, timeframes for acquiring Social Security disability payments can be lengthy. Foreclosure rates have also increased for landlords, and tenants may lose housing even though they are current on rent payments.

More women veterans are in danger of foreclosure, but don't meet the definition of homeless. More veterans are doubling-up in housing. Service groups historically have been vitally important in helping at-risk veterans, but younger veterans are not joining and service groups are receiving less funding.

Among adults in jail, Corrections staff sees a high incidence of mental illness and chemical dependency.

Needs

- Public transportation options, especially in southern Dakota County. Without transportation, people can't get to jobs, medical appointments, services, or probation
- More funding and subsidies to transition from shelter to permanent housing
- More emergency housing and shelter
- Outreach and assistance for veterans to connect to system and resources
- Subsidies and services to help people stay in housing
- Greater flexibility with resources, greater coordination among agencies dedicated to single adults
- Access to services and healthcare for people not receiving General Assistance medical care
- Effective planning for discharge from corrections, follow-up on mental and chemical health issues

Barriers

- Stigma and pride can interfere with seeking and accepting help
- Funding and services are decreasing, as needs among homeless populations increase
- Lack of felon-friendly housing in the community

Families: Trends, Needs, and Housing Barriers

Trends: Workshop participants emphasized that homeless count numbers underestimate the total numbers of families experiencing homelessness. From individual stories, doubling-up is markedly undercounted. Another identified trend is an increase in housing changing hands within the family.

Racial and ethnic diversity in Dakota County is increasing, with more recent immigrants and a wider range of cultural norms. Among recent immigrants, doubling-up is more becoming more common, but is not formally counted as homelessness.

Local food shelf staff observed that more of their visitors are Latinos, who report 6-8 family members per family, and 2-3 families living doubled up, often renting basements. From conversations with food shelf users, what their clients really want are self-supporting jobs, not food.

One of the impacts of the recession is a new eldercare dynamic: more families are supporting their elderly within families because they can't afford nursing home care as the level of needed care escalates. More women are moving in with adult children for economic as well as cultural reasons.

School staff report seeing more children cared for by non-parent relatives. The Dakota Woodlands family shelter ensures that their children attend school, but are seeing adults who are less able to address their children's problems.

In the current recession and housing crisis, funded housing options for families are still typically rental-based, despite the large numbers of vacant houses. Existing federal and state program funds often can't be applied to these houses, despite the fact that home ownership can be far more cost-effective – purchasing a house can be half the amount of rent over time. Neighbors are concerned about empty houses in their neighborhood and cities have purchased empty houses, but cannot use them for housing people experiencing homelessness.

Needs

- Awareness of cultural norms – understanding different definitions of “family” and preferences for living arrangements
- Definitive studies on the societal costs of homelessness
- More funding to assist families in homelessness
- Housing that leads to ownership, ability to use vacant houses
- Community engagement and ownership of homelessness solutions
- Stability for young children
- More education coordinators

Barriers

- A tough economy and the lack of jobs
- Lack of transportation options and full-service public transportation
- Cross-cultural and language barriers
- Community perception and stereotyping
- Community lack of will to address homelessness
- Program guidelines and funding rules



Shelter and Housing Resources in Dakota County

Housing facilities and assistance in Dakota County includes a mix of emergency shelters, transitional housing, permanent housing, and economic assistance including housing subsidies. The following table identifies major providers of homeless housing, shelter, and services in Dakota County, and their service focus. It should be noted that the total capacity (beds and subsidies) in Dakota County is a constantly-changing figure, as new units are regularly added or removed from the overall inventory.

Organization	Service Focus
360 Communities	Domestic Violence, Single Mothers with Children
CAP Agency	Single Men and Women, Households with Children
Chancellor Manor	Single Men or Women, Households with Children
Cochran	Single Males
Dakota County Community Services	Households with Children, Households with Disabilities
Dakota County CDA	Single Men or Women, Households with Children
Dakota Woodlands	Single Women, Households with Children
Guild Incorporated	Single Men or Women
Hearth Connection	Single Men or Women, Households with Children, Youth
Lincoln Place	Youth
Mental Health Resources	Single Men or Women
Safe Haven for Youth	Single Men or Women
South St. Paul HRA	Single Men or Women, Households with Children

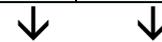
Housing subsidies available for homelessness and homelessness prevention represent a mix of programs and funding streams, shown below:

Subsidies in Dakota County for Homelessness and Homelessness Prevention	General Availability
Bridges/Bridges Long-term homeless (LTH): State bridge to Section 8 subsidy, applicable anywhere in Dakota County. Priority given to those who are homeless or at-risk.	35
Shelter Plus Care: HUD subsidy matched by service dollars, applicable throughout Dakota County. Must meet the federal homelessness definition, with disability and need for support services.	24
GRH Demo Project: subsidy & support services (mental illness requiring case management), funding from GRH. Applicable to homelessness prevention.	26
PATH Homeless Program: outreach services for homelessness and homelessness prevention coupled with severe mental illness.	80
Metro Long-Term Homeless Program: rent subsidy and case management for long-term homelessness.	11
CAP Mainstream Vouchers: HUD subsidy, priority given to people with disabilities. Applicable for homelessness prevention.	50
South St. Paul-HRA Long term Homeless: State funds, applicable anywhere in Dakota County, state-defined long-term homelessness.	25
Crisis Housing Fund: short-term housing assistance to pay housing costs during inpatient psychiatric admission of 90 days or less. Homelessness prevention.	Flexible
Total	251+

Housing Resource Needs Formula

The following formula identifies resource needs, now and over the ten-year lifespan of this plan.

Heading Home Dakota Housing Needs Estimate/Formula	Households		
	Point-in-Time	Annual	10-Year
January 2011 PIT Count (One Day) ¹³	126		
Annualized ¹⁴		353	3530
Total Households Estimated as not served by current system ¹⁵		177	1765
Of 177, households needing Prevention ¹⁶ (40 percent)		71	706
Of 177, households needing Emergency Shelter ¹⁷ (60 percent)	9	106	1059



Households Exiting Shelter/Homelessness		106	1059
		Annual	10-Year
Of 106 households exiting Shelter/Homelessness, the number that stabilize on their own ¹⁸ (25 percent)		26	265
Of 106 households exiting Shelter/Homelessness, the number that need rapid re-housing ¹⁹ (25 percent)		26	265
Of 106 households exiting Shelter/Homelessness, the number that need affordable/supportive housing : ²⁰		53	530
Short-Term Supportive Housing ²¹		8	85
Long-Term Supportive Housing ²²		18	180
Long-term Subsidy/Affordable Housing ²³		26	265
	Development ²⁴	40	397
	Vouchers	13	132

¹³ Count established 126 homeless households as baseline, supported with data from Wilder 2009 survey.

¹⁴ Annualized formula is based on Wilder Research state-wide annualized percentage (36 percent higher than PIT count). The number of annualized households decreases by 15 percent each year in years 6-10.

¹⁵ Assume that 50 percent of new homeless households would be helped by existing resources or will stabilize on their own; remaining 50 percent would be served by new resources.

¹⁶ Of 177 households not served by the current system, assume 40 percent need **prevention services**.

¹⁷ Of 177 households not served by the current system, assume 60 percent need **emergency shelter**.

¹⁸ Of 106 unserved newly homeless households, assume 25 percent will stabilize through their own resources.

¹⁹ Of 106 unserved newly homeless households, assume 25 percent will stabilize through **rapid re-housing services**.

²⁰ Of 106 unserved newly homeless households, assume 50 percent stabilize through **supportive/affordable housing**.

²¹ Of 53 households needing supportive/affordable housing, assume 16 percent will need **short-term supportive housing**.

²² Of 53 households needing supportive/affordable housing, assume 34 percent will need **long-term supportive housing**.

²³ Of supportive/affordable housing, assume 50 percent will stabilize with **affordable housing, subsidies**.

²⁴ Of 53 households needing affordable/supportive housing units required annually, assume 67 percent will be served through **new development or rehab**; and 33 percent will be served through **housing subsidies**.



The formula starts with Dakota County’s most recent Point-in-Time count of households experiencing homelessness. The count figure was then annualized, to determine the expected incidence of new homeless households over the course of 12 months (353). It is estimated that half of these newly homeless households are served by existing resources or manage to stabilize their housing situation by themselves (177).

For the other 177 households that are not currently served and that do not stabilize on their own, the remaining portions of the formula estimate new resources needed annually and over the ten-year planning period. The following table summarizes needs for new resources in the following service areas: 1) prevention and rapid rehousing, 2) supportive housing, 3) new housing development and housing rehabilitation, and 4) subsidies.

Summary of New Homelessness Resources Needed	Annual	10-Year
1) Total Prevention and Rapid Rehousing	97	971
2) Total Supportive Housing (Long & Short Term)	26	265
3) Total Housing Development	40	397
4) Total Subsidies	13	132

Affordable Housing Needs

Affordable housing plays an important role in a community’s housing stability and in homelessness prevention. Forty-three percent of Dakota County respondents to Wilder’s 2009 survey cited a “lack of affordable housing” as a major reason for losing their housing.

The Metropolitan Council periodically evaluates the stock of affordable housing in communities in the seven-county metropolitan area, and projects future needs related to population growth and other trends. Affordable housing target figures are provided to communities for use in updating local comprehensive plans. “Affordable” is defined as at or below 30 percent of the gross income of a household earning 60 percent of the Twin Cities median family income.

The Metropolitan Council’s affordable housing targets for communities in Dakota County are identified in the following table to provide context and a broader perspective on general affordable housing needs. Throughout the county, more than 7,600 new affordable housing units will be needed between 2011 and 2020. The largest gaps are in Lakeville and Apple Valley, whose combined total represents nearly half of Dakota County’s projected affordable housing needs.

Metropolitan Council: 2011 - 2020 Needs for New Affordable Housing	
Apple Valley	1,307
Burnsville	737
Eagan	530
Empire Township	100
Farmington	492
Hampton	4
Hastings	241
Inver Grove Heights	714
Lakeville	2,260
Mendota	3
Mendota Heights	86
Rosemount	923
South St. Paul	104
Vermillion	6
West St. Paul	104
Dakota County Total	7,611

Data Collection Needs

Good data tell an important part of the story of homelessness in any community –reliable data that characterize the degree and nature of homelessness provide a good starting point for addressing the issue effectively. Data collection and counting methods have been continuously improving, to provide the best understanding of homelessness possible. While counts may inevitably underestimate the problem, they offer insight into the larger problem. The counts represent the “floor” of identified need, not the “ceiling,” due to issues that cause underestimating, include the following:

- Assessing unaccompanied youth and young adults is especially challenging; in suburban areas they can be doubling-up or couch-hopping and thus difficult to count.
- Data privacy issues make it difficult to collect accurate data on youth.
- Methods used in counts vary among partner organizations.

V. Goals and Strategies

Heading Home Dakota includes the following mission and a series of six goals as cornerstones of this plan. Together, they articulate the community's vision to end homelessness in Dakota County through a comprehensive approach supported by open collaboration:

Heading Home Dakota Mission and Vision

Stable housing is the foundation that allows people to be successful in our Dakota County communities. We will prevent and end homelessness for every man, woman, and child in Dakota County within ten years, partnering with residents and private and public stakeholders.

Heading Home Goals:

The following major goals were developed by the Dakota County community as distinct avenues to attaining the above vision and mission:

- Goal 1:* **Prevent Homelessness**
- Goal 2:* **Ensure Adequate Supply of Housing Opportunities**
- Goal 3:* **Increase Outreach to People Experiencing Homelessness**
- Goal 4:* **Improve Service Delivery**
- Goal 5:* **Engage the Community in Ending Homelessness**
- Goal 6:* **Improve Systems for Addressing Homelessness**

For each Heading Home Dakota goal, specific strategies to reach the goal are identified, along with the desired outcome within a ten-year horizon. Existing resources and organizations that could have a role in achieving the strategy are noted.

To assist in plan implementation, a separate and more detailed document, the ***Heading Home Dakota County Implementation Guide***, will provide a series of specific action steps for each strategy, with milestone timelines and potential project partners.

Goal 1: Prevent Homelessness

Prevention strategies focus on accurate and timely needs assessment for people experiencing a housing crisis, enhancing services and resources to keep people in their homes, and helping ensure that people don't depart institutional settings into homelessness.



- Prevention Strategy 1.1: Align and scale resources and funding for homeless prevention services to the need**
- Ten-Year Outcome: All households facing housing instability and homelessness in Dakota County will be able to quickly access housing that fits their needs
- Existing Resources: Housing Link, Family Homeless Prevention and Assistance Program, Dakota County Supportive Housing Unit, Cenheidigh/KCQ, Inc.
- Prevention Strategy 1.2: Improve protocol, policies, and funding available for people exiting public institutions, such as corrections, mental health facilities, hospitals, foster care**
- Ten-Year Outcome: Policies and funding are in place to ensure people leaving such institutions do not become homeless
- Existing Resources: Existing discharge plans (Hennepin, Ramsey, St Louis), Continuum of Care discharge planning
- Prevention Strategy 1.3: Increase access to legal services for housing**
- Ten-Year Outcome: Legal services will be readily available to ensure that all crises that could be addressed by through legal advice or intervention do not lead to homelessness
- Existing Resources: Southern Minnesota Regional Legal Services, Law Schools, Legal Assistance of Dakota County, Dakota County Bar Association, First Judicial District Bar Association
- Prevention Strategy 1.4: Increase conflict resolution services to assist youth, singles & families in retaining stable housing**
- Ten-Year Outcome: In circumstances other than domestic violence, support will be readily available and provided to families in conflict in order to prevent homelessness
- Existing Resources: Dakota County Supportive Housing Unit, The Link, Freeport West (Minneapolis), YouthLink (Minneapolis), Storefront, Dakota County Community Development Agency-Family Unification Program vouchers
- Prevention Strategy 1.5: Improve targeting of limited homeless prevention resources to those who will benefit most.**
- Ten Year Outcome: Intake and eligibility determination practices will continuously improve Dakota County's homeless response system's ability to target limited resources only to those in need of intervention.
- Existing Resources: Iain De Jong of OrgCode, Hennepin County's scoring tool, State-wide Committee on Re-Structuring Homeless Prevention

Goal 2: Ensure Adequate Supply of Housing Opportunities

Affordable housing is a key aspect of preventing and ending homelessness. New funding and partnership resources for housing will be explored, to meet community needs.

Housing Strategy 2.1: Ensure capacity in short-term and long-term housing opportunities commensurate with need, and preserve existing resources

Ten-Year Outcome: Sufficient housing opportunities exist to meet needs

Existing Resources: Transitional housing programs, Dakota Community Development Agency, South St Paul Housing and Redevelopment Agency, Supportive Housing Providers, Corporation for Supportive Housing, St Paul Foundation

Housing Strategy 2.2: Build new relationships with housing developers

Ten-Year Outcome: Active partnerships exist with key development partners

Existing Resources: Dakota Community Development Agency, Shelter Corp, Sherman, Twin Cities Housing Development Corporation, CommonBond, Duffy Development

Goal 3: Increase Outreach to People Experiencing Homelessness

People experiencing a housing crisis for the first time often do not know how to navigate county and nonprofit systems to access the help they need. Those who have experienced repeated or long-term homelessness may lack trust in our safety net system. Enhancing outreach strategies in Dakota County is needed to establish an effective information network countywide. Strategies employ multiple outreach avenues, customized for specific populations.

Outreach Strategy 3.1: Efficiently utilize emergency shelter and connection to available resources for all populations

Ten-Year Outcome: Emergency shelter solutions provide resources needed to resolve housing crises

Existing Resources: B. Robert Lewis House, Dakota Woodlands, Cochran

Outreach Strategy 3.2: Increase and improve connections and communication among police, hospitals, and landlords

Ten-Year Outcome: Police, Landlords, Hospitals have increased awareness and are part of a coordinated response to help people maintain their housing

Existing Resources: Cenneidigh/KCQ, Inc., Dakota County Supportive Housing Unit, Police and Landlord collaboratives, Dakota County Crisis Response Unit



Outreach Strategy 3.3: Create drop-in centers for youth

Ten-Year Outcome: All Dakota County Youth will have a local resource for drop in services
Existing Resources: Storefront, The Garage

Outreach Strategy 3.4: Increase and improve communication between schools, and homeless/precariously housed families

Ten-Year Outcome: All families, youth, and children facing housing instability in Dakota County will have information and supports readily available to them to meet their needs.
Existing Resources: Storefront, Schools, MN Department of Education

Outreach Strategy 3.5: Increase community outreach staffing

Ten-Year Outcome: All households in need that are not utilizing or connected to services will be provided assistance in connecting to supports that can help them maintain or regain housing stability
Existing Resources: Cenneidigh/KCQ, Inc., Mental Health Resources, Guild, Inc., Dakota Woodlands

Outreach Strategy 3.6: Develop and market a common intake & assessment system for all housing related programs in Dakota County.

Ten-Year Outcome: A clearly understood and universal system will be in place that will appropriately guide households to the resources to best able meet their needs.
Existing Resources: Resource and public websites, Cenneidigh/KCQ, Inc. handbook, faith communities

Outreach Strategy 3.7: Host regular local Community Connect and Stand Down events

Ten-Year Outcome: Annual Connect events will allow household to connect more rapidly to services that will lead to greater housing stability
Existing Resources: Social Service agencies, East Metro Project Homeless Connect, Heading Home Minnesota, Minnesota Assistance Council for Veterans, Minnesota Department of Corrections, Faith Communities

Goal 4: Improve Service Delivery

Securing housing is one element of ending homelessness. For many residents in Dakota County, supportive services are essential to maintaining stable housing over the long-term. These strategies propose providing the right services efficiently when they are needed, streamlining screening and program enrollment processes, and providing additional training opportunities to build life skills for stable independent living.

Service Strategy 4.1: Ensure capacity for supportive services for permanent supportive housing scaled to the need

Ten-Year Outcome: Sufficient services resources are available to ensure that all people who need supportive housing to exit homelessness can access it

Existing Resources: Housing First, Guild Incorporated, Mental Health Resources, Hearth Connection

Service Strategy 4.2: Create “step-down” support options for persons who don’t qualify for intensive services.

Ten-Year Outcome: People in Dakota County who need services to obtain and maintain housing will not have to wait until they are disabled to access needed services

Existing Resources: Dakota County Adult Mental Health, Family Homeless Prevention and Assistance Program, Medicaid

Service Strategy 4.3: Increase and promote low/no-fee skill training opportunities such as independent living, parenting, and financial literacy for homeless and precariously housed households

Ten-Year Outcome: All precariously housed households in Dakota County will have access to educational resources that will help them enhance their skills needed to obtain and maintain housing

Existing Resources: Dakota Woodlands, The Link, CAP Agency

Service Strategy 4.4: Assist people with the process of enrolling in Supplemental Security Income (SSI) in a timely manner

Ten-Year Outcome: All people who are eligible for SSI are rapidly assisted in accessing this entitlement

Existing Resources: SSI/SSDI Outreach Access and Recover (SOAR), DHS initiatives, Guild Incorporated, Mental Health Resources and Tasks Unlimited, Inc.

Goal 5: Engage the Community in Ending Homelessness

Communities that are well informed about how homelessness manifests locally, and the solutions for ending it, will become empowered to stand together in confronting the problem. Building community awareness on homelessness is a first step toward actively engaging the community as a resource, partner, and advocate.

Engagement Strategy 5.1: Create a comprehensive community education campaign

Ten-Year Outcome: Community has broad understanding of homeless issues and how to become involved in ending homelessness.

Existing Resources: Other Heading Home Plans, lessons learned, County data, agencies—Stories, spokespeople, BCBS DVDs



Engagement Strategy 5.2: Increase use of volunteers

Ten-Year Outcome: Improved system-wide use of volunteers will bring down costs and improve shelter & housing services.

Existing Resources: Volunteer MN website

Engagement Strategy 5.3: Increase participation from people experiencing homelessness in community

Ten-Year Outcome: Actions to end homelessness will be adequately informed by people who have experienced homelessness

Existing Resources: Hearth Connection, Minnesota Coalition for the Homeless, Homeless Against Homelessness, Open Access, Dakota County Affordable Housing Coalition

Engagement Strategy 5.4: Coordinate an annual policy platform to advocate for local/state/federal legislation

Ten-Year Outcome: Heading Home Dakota establishes clear and consistent policy recommendations to local, state, and federal elected officials that lead to policy and funding changes that move our plan forward

Existing Resources: Existing plans, MICAH, Minnesota Coalition for the Homeless, Heading Home Minnesota

Goal 6: Improve Systems

Improving the basic “systems” under which Heading Home Dakota County operates can remove obstacles that cut across community, institutional, cultural, and program boundaries.

Systems Strategy 6.1: Increase collaborations and partnerships and improve effectiveness of systems

Ten-Year Outcome: Inefficiencies and barriers to resources will be reduced through the improvement of system-wide collaboration and partnership.

Existing Resources: Organizations’ missions and plans, existing collaborations and partnerships, Regional Metro Committee, Hearth Connection, Heading Home Minnesota

Systems Strategy 6.2: Address racism and cultural competency

Ten-Year Outcome: All Heading Home Dakota strategies have been analyzed and revised to aggressively combat racism and to address cultural competency

Existing Resources: Strategies as outlined in this plan and the partner organizations named throughout this plan

Systems Strategy 6.3: Improve data collection and sharing

Ten-Year Outcome: All data needed to measure the impact and progress of Heading Home Dakota is gathered, is accurate, and is used to reform any system inefficiencies

Existing Resources: Dakota County Social Services and Supportive Housing Unit, Homeless Management Information System, Hearth Connection, Heading Home Minnesota, Point in Time reporting

VI. Implementation Framework and Partnerships

The implementation of Heading Home Dakota (HHD) will result in housing stability, permanency, and an improved quality of life for our community members and neighbors. The Dakota County Affordable Housing Coalition (AHC) will serve as the lead entity responsible for the HHD’s implementation. AHC is comprised of service providers, local business leaders, faith communities, representatives of state and local government, engaged citizens, schools, and many more. This citizen-run coalition created the HHD Steering Committee, and charged it with drafting the Plan. Now that this initial phase is complete, the HHD Steering Committee will sunset and new workgroups will be formed to move the Plan forward.

As with any complex task, having adequate leadership and a structured system for organizing the work will maximize opportunities for participation, while dividing the work into more manageable tasks. Because of the magnitude of the effort, supporters of the plan may wish to identify funding to establish a Heading Home Dakota Coordinator—a staff position whose primary responsibility will be to coordinate efforts to move the goals and strategies in the plan forward. In addition, the proposed implementation framework will create six workgroups, one for each goal identified in the Plan. By entitling them *Workgroups*, we hope to convey that people power is a critical component to the implementation of this Plan. Its realization is reliant on engaged stakeholders, willing to commit and give their time.

Dakota County Affordable Housing Coalition	Goal 1 Workgroup: Prevent Homelessness
	Goal 2 Workgroup: Ensure Adequate Supply of Housing Opportunities
	Goal 3 Workgroup: Increase Outreach to People Experiencing Homelessness
	Goal 4 Workgroup: Improve Service Delivery
	Goal 5 Workgroup: Engage the Community in Ending Homelessness
	Goal 6 Workgroup: Improve Systems for Addressing Homelessness

Each Workgroup will be responsible for the following:

- Assign leadership roles to Workgroup members. This may include a Chair and Secretary.
- Recruit additional Workgroup members who are not currently involved with AHC.
- Establish a regular meeting schedule, which is, at minimum, bi-monthly.
- Prioritize, implement, refine, and measure outcomes for the strategies outlined.
- Provide quarterly updates to AHC. This may include soliciting feedback and requesting additional partners or resources.
- Update its Goal in the Plan on an annual basis to reflect progress and changes in strategies.



The Plan contains specific strategies for each Goal, based on fully engaging and coordinating mainstream housing, human services, and educational programs, while also being user friendly and implementable. The plan's companion, *Heading Home Dakota Implementation Guide*, provides greater detail for each strategy, including a series of action steps, timelines and outcome measures. Each Workgroup should be able to jump right in and begin their efforts to realize the Plan's vision.

Strategies and action steps must be prioritized in the implementation of HHD. Because implementation will occur over many years, the feasibility of some strategies and the realistic ability to meet some of the outcome measures will need to be continually assessed. Some strategies may need to be added, based on new data, changes in community needs, and an influx of resources. Some strategies may be determined not to be viable and will need to be removed or have outcome measures adjusted accordingly. Several other things, some of which are beyond the control of the Collaborative, may also have dramatic impacts on the implementation of this Plan. These include:

- The implementation of the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act.
- Changes to Community Development Block Grant (CDBG) entitlement districts and funding levels.
- Changes in Continuum of Care regions and planning processes.
- State and Local budget and policy actions.

Despite the inevitable barriers that are bound to arise during any dynamic process, the strategies and goals that we hope to realize in this Plan are based on best practices and are achievable with the full engagement of our community.

Connie is a single mom with two teenage children. They lived in Egan and Connie was working as a school bus driver in a local School District. Her hours were cut to 30 hours per week and she was ineligible for overtime pay. At full-time, Connie was managing with her income, but had no savings plan. When the hours were reduced, she fell behind on her rent and couldn't catch up on her bills. She saw her expenses mounting and income reduced.

Over the course of five months, she was behind two months of rent and was formally evicted. With no family in the state, and a desire to keep her children in their school, she became homeless and arrived at Dakota Woodlands homeless shelter. Within two months, Connie got a new full time job driving bus again. The kids continued in school and finished the school year with great grades. They all moved to a new apartment in Apple Valley, so the children could continue in their same school.

VII. Implementation Budget

The budget on the following page consists of 1) anticipated funding resources (income) and, 2) the expenses associated with implementation of this Plan's goals and strategies (expenses). The authors of this plan recognize the real constraints and pressures on resources. At the same time, as a plan to end homelessness in Dakota County, the projected income sources and expenses are essential for a plan to achieve that goal.

Income

Anticipated income is based on mix of federal and state grants, county and city resources, and funds from private sources. Much of the income balance consists of public resources that are currently available on an ongoing and renewable basis, and therefore generally considered reliable into the future. A large portion of the state and federal funding is administered by Dakota County Community Services Division and the Dakota County Community Development Agency (CDA) under established program or grant guidelines. In addition to County government and the CDA, cities and many private non-profit and for-profit entities have a role in providing housing and/or services with the funding resources represented in the income portion of the budget.

One of the challenges that the community will face in implementing this plan is that funding resources are constrained. After rapid population growth throughout the 1990s and 2000's, Dakota County is now Minnesota's third most populous county. Despite this growth, the recession and other impacts have reduced the amount of funding available for homelessness efforts in Dakota County, at the same time that the need for these services has steadily grown.

Expenses

Identified expenses fall into two major categories:

- a) Development, renovation, and preservation of affordable housing (i.e., brick and mortar efforts), which represent the major share (nearly 80 percent) of plan implementation costs
- b) Programs and services that support people experiencing homelessness or who are at imminent risk of becoming homeless.

The expense portion of the budget focuses the more costly and the more readily quantifiable plan implementation expenses, such as new construction projects and new staff positions (including a Plan implementation coordinator). Community investments of time will be needed, but were not translated into direct expenses in this document.

The budget shows a desired balance between income and expenses. As plan implementation proceeds, budget will be regularly re-visited and refined, as needed.



INCOME	Annual	Five-Year
Targeted Potential Resources		
HUD-Continuum of Care	\$100,000	\$350,000
HUD-ESG	\$60,000	\$240,000
Family Homeless Prevention & Assistance Program (FHPAP)	\$145,500	\$436,500
Group Residential Housing (rent/services)	\$100,000	\$500,000
Construction/Rehab Resources (bonding, tax credits, HUD, etc.)	\$6,800,000	\$34,000,000
Rental Vouchers	\$136,800	\$1,333,800
DHS-Long-term Homeless Supportive Services Funding	\$363,000	\$2,178,000
Heading Home Minnesota--Private Foundations	\$200,000	\$1,000,000
Medicaid Waivers and Targeted Case Management	\$250,000	\$1,000,000
Other (DHS-outreach, DHS-OEO, etc.)	\$375,000	\$745,000
Additional Potential Resources		
Community fundraisers	\$15,000	\$75,000
Other (City, County, and Community Investments)	\$25,000	\$125,000
Total income	\$8,570,300	\$41,983,300
EXPENSES	Annual	Five-Year
Homeless Prevention		
New Homeless Prevention and Rapid Rehousing (97 HH@ \$1500/HH)	\$145,500	\$436,500
Landlord Outreach (1 FTE, beginning 2013)	\$60,000	\$180,000
Discharge Coordinator (1 FTE, beginning 2013)	\$70,000	\$210,000
Provide Conflict Resolution	\$50,000	\$250,000
Housing		
Affordable Housing--New or Acquisition/Rehab 400 Units	\$6,800,000	\$34,000,000
Rental subsidies: 13 New Vouchers each year	\$136,800	\$1,333,800
Outreach		
Drop In Centers (1 site beginning in 2013)	\$250,000	\$750,000
Increased School Social Workers (3 FTE, beginning in 2013)	\$180,000	\$540,000
1 FTE Outreach Staff (1 FTE, beginning 2013)	\$45,000	\$135,000
Community Connect Events (1 per year)	\$5,000	\$25,000
Supportive Services		
Drop In Centers	\$100,000	\$400,000
Supportive Housing Services for 33 HH/YR for 8 Years	\$363,000	\$2,178,000
Increased Services for non-disabled	\$200,000	\$1,000,000
Add SOAR Worker (1 FTE in 2013, may be non-County staff)	\$70,000	\$210,000
Implementation, Education & Awareness		
Plan Coordinator	\$70,000	\$210,000
Other (marketing, copies, events)	\$25,000	\$125,000
Total Expenses	\$8,570,300	\$41,983,300
Balance	\$0	\$0

VIII. Progress Evaluation

The Affordable Housing Coalition currently provides guidance, oversight, or advice on existing programs aimed at reducing homelessness. These include HUD CoC and state-funded FHPAP. The Affordable Housing Coalition’s involvement will assure that the Heading Home Dakota plan remains alive and on task throughout its ten year life. Such monitoring will assist us in making any adjustments to the plan to strengthen and target our efforts most effective to end homelessness. It should be noted that all efforts will be made to coordinate our evaluation with other plans to end homelessness across the state to ensure that the impact is captured on a state-wide basis, and that we are able to measure and our strategies based upon our performance in comparison with other regions.

Goal ²⁵	Measure	Impact on People	Systems Change	Activity Counts	Collections Tool
Goal 1: Prevent Homelessness	<i>Number of households accessing mainstream/prevention resources</i>	X			HMIS
	<i>Households in housing at program exit (FHPAP, transitional housing, ESP)</i>	X			HMIS
	<i>Households returning to FHPAP/homelessness</i>	X			HMIS
	<i>Discharge policy improvements</i>		X		Affordable Housing Coalition
	<i>Number of households avoiding homelessness through legal assistance</i>	X			HMIS, Affordable Housing Coalition
	<i>Number of households avoiding/ending homelessness through family reunification</i>	X			HMIS, CDA
Goal 2: Ensure Adequate Supply of Housing Opportunities	<i>Housing subsidies created</i>			X	CDA, MHFA, HUD
	<i>Housing units developed</i>			X	CDA, MHFA, HUD
	<i>Households in subsidized housing</i>	X			HMIS
	<i>Households remaining in permanent supportive housing for ≥12 months</i>	X			HMIS
	<i>Households with a “positive exit” from supportive housing</i>	X			HMIS

²⁵ Evaluation model adapted from *Heading Home: Minnesota’s Roadmap for Ending Homelessness*

Goal	Measure	Impact on People	Systems Change	Activity Counts	Collections Tool
Goal 3: Increase Outreach to People Experiencing Homelessness	Shelter opportunities provided	X			HMIS, Affordable Housing Coalition, COC
	Drop-in centers created			X	Affordable Housing Coalition
	Strengthen School Connections		X		Affordable Housing Coalition, COC
	Street outreach contacts	X			HMIS
	Awareness campaign accomplishments			X	Affordable Housing Coalition
	Community connect events, attendees	X		X	Affordable Housing Coalition, HMIS
Goal 4: Improve Service Delivery	Households served in supportive housing	X			HMIS
	Number of households served by county housing/assistance funds	X			Dakota County, MAXIS, HMIS
	Number of turnaways from county housing/assistance funds	X			Dakota County, MAXIS, HMIS
	Number of people provided with skill training opportunities			X	Affordable Housing Coalition
	Number of households enrolled on SSI	X			Affordable Housing Coalition, MN-DHS

Goal	Measure	Impact on People	Systems Change	Activity Counts	Collections Tool
Goal 5: Engage the Community in Ending Homelessness	Community events			X	Affordable Housing Coalition
	Number of people with raised awareness, involvement			X	Event documentation, surveys
	Media Coverage			X	Housing Collaborative
	Number of volunteers, hours			X	Housing Collaborative
	Active homeless/formerly homeless participants in planning		X		Housing Collaborative
Goal 6: Improve Systems for Addressing Homelessness	<i>Partnerships created</i>		X		Affordable Housing Coalition
	<i>Policy/protocol improvements</i>		X		Affordable Housing Coalition

Appendices

Appendix A: Glossary²⁶

Affordable housing: Housing for which the occupant is paying no more than 30 percent of his or her income for gross housing costs, including utilities. For the purposes of this plan, “affordable housing” is further defined as housing that is partially or fully subsidized by a governmental agency OR housing that is affordable at 30% of the area median income²⁷.

Continuum of Care: A community plan to organize and deliver housing and services to address homelessness. Funded by the U.S. Department of Housing and Urban Development (HUD), the Continuum of Care includes prevention, outreach and assessment, emergency shelter, transitional housing, and permanent supportive housing. <http://www.hudhre.info/documents/CoC101.pdf> or <http://www.mnhousing.gov/initiatives/housing-assistance/continuum/index.aspx>

Family: At least one adult with custody or guardianship of at least one dependent child.

Family Homelessness Prevention and Assistance Program (FHPAP): Provides direct services, training and case management to prevent homelessness and rapidly re-house families with children, youth and single adults who are homeless or at imminent risk of homelessness. Administered by Minnesota Housing, grants are awarded biennially to counties or community-based nonprofit organizations on a competitive basis. <http://www.mnhousing.gov/initiatives/housing-assistance/prevention/index.aspx>

Group Residential Housing (GRH): State-funded income supplement program that pays for room-and board costs for low-income adults who have been placed in a licensed or registered setting with which a county human service agency has negotiated a monthly rate. http://www.dhs.state.mn.us/main/idcplg?IdcService=GET_DYNAMIC_CONVERSION&RevisionSelectionMethod=LatestReleased&dDocName=id_002549

HEARTH Act: Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009, which amends and reauthorizes the McKinney-Vento Homeless Assistance Act with substantial changes, including: consolidation of HUD competitive grant programs; creation of a Rural Housing Stability Program; change in HUD definition of homelessness and chronic homelessness; simplified match requirement; increased prevention resources; and, increased emphasis on performance. See [The McKinney-Vento Homeless Assistance Act as amended by S.896, The Homeless Emergency Assistance and Rapid Transition to Housing \(HEARTH\) Act of 2009.](#)

Homeless: Based on the definition established by the U.S. Congress in the McKinney-Vento legislation, someone is homeless if they (1) lack a fixed, regular and adequate nighttime residence; or (2) has a primary nighttime residence that is a supervised, publicly or privately operated temporary living accommodation, including shelters, transitional housing, and battered women’s shelters or (3) has a nighttime residence in any place not meant for human habitation, such as under bridges or in cars. For children and youth, this definition is extended to also include children and youth under 18 who are (1) sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason (sometimes referred to as “doubled-up”); or (2) living in motels,

²⁶ This glossary is adapted from Heading Home Hennepin: The Ten-Year Plan to End Homelessness in Minneapolis and Hennepin County; and Heading Home: Minnesota’s Roadmap for Ending Homelessness

²⁷ 2009-2010 AMI is \$83,900.



hotels, trailer parks, or (3) camping grounds due to lack of alternative adequate accommodations; abandoned in hospitals; or awaiting foster care placement.

Homelessness Prevention and Rapid Rehousing Program (HPRP): Established by the American Recovery and Reinvestment Act (ARRA), HPRP provides temporary funding for homelessness prevention and rapid re-housing assistance. Financial assistance and services are intended to assist people who are homeless or would be homeless but for this assistance. Funds can be used for payment for back rent, current and back utilities, moving costs, security deposits, rental assistance and case management.

<http://www.hudhre.info/hprp/index.cfm>

Housing First: An approach to homelessness that allows an individual or family to move directly from the streets or shelter to their own apartment. Services are available once the household is in housing. The idea behind Housing First is to minimize the time homeless and maximize the value of services such as linkage to benefits, mental and physical health care, and training.

<http://www.endhomelessness.org/content/article/detail/1425>

Housing opportunities: Refers to production of new units and access to units in the existing market.

Long-term homelessness: Lacking a permanent place to live continuously for a year or more or at least four times in the last three years.

Medical Respite: Acute and post-acute medical care for homeless people who are too ill or frail to recover from a physical illness or injury on the streets, but who are not ill enough to be in a hospital. Unlike “respite” for caregivers, “medical respite” is short-term residential care that allows homeless individuals the opportunity to rest in a safe environment while accessing medical care and other supportive services.

<http://www.nhchc.org/Respite/>

MFIP: The Minnesota Family Investment Program is the state’s welfare reform program for low-income families with children. MFIP helps families move to work and includes both cash and food assistance.

Operating Costs: Costs associated with the physical, day-to-day operations of a housing residence such as maintenance and repair, operations staff, utilities, equipment, supplies, insurance, food, relocation, and furnishings. <http://www.hudhre.info/index.cfm?do=viewSupportiveHousingProgram> or http://www.mnhousing.gov/idc/groups/public/documents/document/mhfa_003854.pdf for description of operating costs eligible for funding by Minnesota Housing

Permanent supportive housing: Supportive housing is affordable housing linked with services that help people live more stable, productive lives. It can be either project-based or scattered-site housing. It is permanent because it does not limit the tenant’s stay; rather, the individual household decides when to leave. (Corporation for Supportive Housing)

Rental Assistance: Payment to a landlord of a portion of a low-income family or individual’s rent. Most commonly, the tenant pays rent equal to 30% of income and rental assistance pays the difference between the tenant’s payment and the cost of rent. Rental assistance programs vary in length and eligibility criteria.

<http://www.mnhousing.gov/initiatives/housing-assistance/rental/index.aspx>

Safe Haven: A form of supportive housing that serves hard-to-reach homeless persons with severe mental illness and other debilitating behavioral conditions who are on the street and have been unable or unwilling to participate in housing or supportive services.

<http://www.hudhre.info/index.cfm?do=viewSupportiveHousingProgram>

Services: Social services needed to assist people who have been homeless—individuals, youth, and families—to remain in housing and improve their lives. Services can cover a broad spectrum of needs ranging from medication management to assistance in applying for benefits. Services differ from operating costs in that they are not needed to operate a building but to assist residents to remain in housing and improve their well-being.

Single adult: An individual age 22 or older who does not have children or currently does not have custody of their children.

TBR: Tenant-based rental assistance programs provide households with portable vouchers they can use to access existing housing units.

Transitional Housing: Time-limited supportive housing designed to help those experiencing homelessness to obtain and maintain long term housing. Programs serve participants for a minimum of 30 days and agree to provide a private space with a locked door, housing subsidies, and access to services. Participants agree to comply with program rules and expectations which at minimum include an initial assessment, the development of a service plan, and work on plan goals which always includes the goal of transitioning to housing that is not time limited.

Youth/Transitional Youth: An individual or household aged 22 or younger, unaccompanied by an adult. Homeless youth are addressed separately from adults as they often become homeless for different reasons, face different issues once they become homeless, and require different programs and services.

Appendix B: Acronyms

ACT	Assertive Community Treatment
AHC	Affordable Housing Coalition
CD	Chemical Dependency
CDA	Dakota County Community Development Agency
CVSO	County Veterans Service Officer
DHS	Minnesota Department of Human Services
EITC	Earned Income Tax Credit
FHPAP	Family Homelessness Prevention and Assistance Program
GED	General Equivalency Diploma
HMIS	Homeless Management Information System
HRA	Housing & Redevelopment Authority
HUD	U.S. Department of Housing & Urban Development
MACV	Minnesota Assistance Council for Veterans
MI/MH	Mental Illness / Mental Health
PSH	Permanent Supportive Housing
SOAR	SSI/SSDI Outreach, Access, and Recovery
SHU	Dakota County Supportive Housing Unit
SSDI	Social Security Disability Insurance
SSI	Supplemental Security Income
VA	U.S. Department of Veterans Affairs



Appendix C: Resources to Address Homelessness

1. Housing and Shelter Providers in Dakota County²⁸

The following list includes service providers located within Dakota County. Many more facilities and services are located throughout the greater Twin Cities area.

CAP Agency

2496 145th Street West, Rosemount

Phone: 651-322-3500

CAP Agency and the Housing and Homeless Prevention programs help people who are homeless or at risk of being homeless, to secure transitional housing or maintain existing housing.

Cenneidigh/KCQ, Inc. – Dakota Outreach

4555 Erin Drive Ste. 260, Eagan

Phone: 651-287-0956

Cochran Shelter

1294 18th Street, Building 2, Hastings, MN 55033

Phone: 651-437-4585

Community Development Agency (CDA)

1228 Town Centre Drive, Eagan

Phone: 651-675-4400

The CDA is a local government agency administering over 30 programs and managing over 2,100 units of affordable workforce and senior housing serving the communities and residents of Dakota County. Key affordable housing programs include:

Scattered Site Public Housing: includes 242 affordable rental units dispersed in neighborhoods throughout the county. Residents pay 30 percent of their income toward rent.

Federal Housing Choice Voucher (Section 8): provides rent assistance to low-income families, elderly, handicapped and disabled persons in the private rental market. CDA administers Section 8 for Dakota County except South St. Paul, and assists 2,200 households monthly. South St. Paul HRA serves 300 households.

CDA Senior Housing: The CDA has 22 senior buildings providing 1,277 homes to seniors. Twenty buildings have all affordable rental units and two have a mix of affordable and market-rate units.

Family Townhome Program: The CDA has 17 developments providing 512 homes for moderate-income families with children younger than 18.

²⁸ From Homeless Outreach Resource Guide for Dakota County, Cenneidigh, Inc., 2010

Dakota County Supportive Housing Unit (SHU)

Phone: 651-554-5751

The Supportive Housing Unit assists eligible residents and their families in securing housing and supportive services through the following programs:

- U.S. Housing & Urban Development (HUD) Grants
- Family Homeless Prevention Assistance Program (FHPAP)
- Youth Services, singles 18 – 22 years old
- HUD - Homeless Management Information System Data Collection

Dakota Woodlands Shelter (Women & Children)

3430 Wescott Woodlands, Eagan

Phone: 651-456-9110

Dakota Woodlands provides emergency shelter and supportive services for women and children experiencing homelessness in Dakota County.

Lewis House (Domestic Violence Shelter)

Eagan, MN or Hastings, MN

Phone: 651-452-7288, 651-437-1291

Lewis House provides shelter and services for women escaping domestic violence. Services are available for women and children who are non-English speaking and women and children with disabilities.

Lincoln Place

1997 Gold Trail, Eagan MN

Phone: 651-209-1681

Supportive housing for young adults ages 18-24

Minnesota Housing Finance Agency (MHFA): statewide

400 Sibley Street, Suite #300, St. Paul, MN 55101

Phone: 651.296.7608 (General Info)

651.296.8215 (Single Family Housing)

651.296.9832 (Multi-family Housing)

MHFA provides affordable housing opportunities for low- and moderate-income Minnesotans, to enhance quality of life and foster strong communities.

South St. Paul Housing and Redevelopment Authority (HRA)

125 Third Avenue North, South St. Paul, MN 55075

Phone: 651-554-3270

The South St. Paul HRA administers the Housing Choice Voucher Program for the City of South St. Paul. Housing Choice is a federally funded program designed to provide affordable rental housing for families of two or more and eligible single persons including those who are at least 62 years of age, disabled or displaced by a natural disaster.



2. Economic Assistance²⁹

CAP Agency

2496 145th Street West, Rosemount

Phone: 651-322-3500

Energy Assistance Program (EAP) provides grants to help pay residential heating bills. Additional funds are available for energy crisis situations and energy-related repairs. Information on energy conservation practices is also offered. The EAP funding year runs October 1, 2009 - May 31, 2010. Applicants are encouraged to apply early. Funds are not guaranteed to last the entire year.

Dakota County Child Care Assistance

Northern Service Center: 1 Mendota Road West, Suite 100, West St Paul, MN 55118

Phone: 651-554-5611

The Child Care Assistance Program (CCAP) helps low income families so they can work, job search, or attend school while moving towards self-sufficiency. CCAP helps pay for children up to age 12 and for children with special needs up to age 14.

360 Communities (formerly known as Community Action Council)

501 East Highway 13, Ste. 102, Burnsville, MN 55337

Phone: 952-985-5300

14521 Cimarron Avenue West, Rosemount (Family Resource Center)

Phone: 651-322-5113

360 Communities participates in the Low-Income Home Energy Assistance Program (LIHEAP), a federally funded program that provides assistance to help low-income families and individuals pay heating bills during the winter. Assistance is paid directly to the utility or energy provider on the client's behalf. Homeowners may also qualify for limited heating system repairs. Assistance is limited to eligible households, one time per year. Additional energy assistance may also be available from specific private utility Fuel Funds.

Dakota County Public Health Nursing

1 Mendota Rd W, West St Paul MN 55118

Phone: 651-554-6115

Public Health nurses have special training in mother and baby care, and can advise mothers on labor and delivery, how to have a healthy baby, and how to be a good parent to new infants. Services are provided for teens who are pregnant or already have a child under 3 years old; women who are pregnant with their first child; and families who have children less than 3 years old with special needs. For some programs, families may need to meet income requirements.

Dakota County Economic & Employment Assistance (EEA)

1 Mendota Rd W, Ste 100, West St Paul MN 55118

Phone: 651-554-5611

²⁹ From Homeless Outreach Resource Guide for Dakota County, Cenneidigh, Inc., 2010

The Department of Employment and Economic Assistance administers financial assistance programs and support services to County residents, to assist them in achieving and maintaining economic self-sufficiency. EEA offers help with Minnesota Family Investment Program, emergency assistance, food support, Medical Assistance applications, child care assistance, and workforce services.

Hastings Family Service

121 3rd St. E., Hastings

Phone: 651-437-7134

Service programs include Volunteer Income Tax Assistance, Emergency Financial Assistance, and Energy Assistance.

Heat Share – The Salvation Army

13901 Fairview Drive, Burnsville

Phone: 952-898-2763

HeatShare provides emergency assistance with heating and utility bills on a year-round basis. Funds are used for natural gas, oil, propane, wood, electricity and emergency furnace repairs. HeatShare is a voluntary nongovernmental program of The Salvation Army.

Neighbors, Inc.

218 13th Avenue South, South Saint Paul, MN 55075

Phone: 651-455-1508

Issues grants to provide assistance to persons who qualify and who are at risk of eviction or utility shutoff. In addition, Neighbors, Inc. can assist a limited number of persons who need car repairs to get to work or to deal with a crisis, or who need financial assistance dealing with a medical need such as a co-payment for necessary medicine are assisted each year.

3. Services

CLUES Aging Well Services

882 South Robert Street

West St. Paul, MN 55118

651-379-4280

CLUES provides services to advance and enhance the quality of Latinos' lives in Minnesota. They provide a continuum of five core services: Mental Health Services, Chemical Health Services, Family Services, Aging Well Services, Employment Services, and Educational Services.

Dakota County Adult Services

1 Mendota Rd W, St. Paul, MN 55118

Phone: 651-554-6000

Social Services provide assessments and case management to adults who are vulnerable due to age or disability. Program areas include developmental disabilities, adult protection, vulnerable adults, adult mental health, chemical health, and long-term care.



Dakota County Developmental Disabilities (DD)

Phone: 651-554-6000

The program serves children 5 years old and younger with substantial developmental delays as determined by school districts or medical professional, as well as children over 5 with developmental limits or other conditions that limit self-care, communication, social skills, learning, mobility, self-direction, and independent living. Pre-assessment is required and Dakota County may be able to pay for the assessment if there is no other funding source.

Dakota County Family Services and Child Protection

14955 Galaxie Ave, Apple Valley MN 55124

Phone: 952-891-7400

Family Services and Child Protection provides assessments and case management to people who are vulnerable due to age or disability. Program areas include child protection (abuse or neglect), children's mental health, child care licensing, developmental disabilities for children and adults, adult mental health, chemical health, and long term care/waivered services.

Eftin

13755 Nicollet Ave, Burnsville MN 55337

Phone: 952-435-7404

Eftin helps strengthen and empower immigrant families and local communities by providing outreach, advocacy, education, and resource building. Their focus is health and education.