

**COMPREHENSIVE HOMELESS
ASSISTANCE PLAN**

City of Cambridge

September, 1987

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I. Statement of Need

In the winter of 1986-1987 the City of Cambridge experienced greater need for services to the homeless than ever before. This increased need is consistent with national trends.

Last May, the City of Cambridge's Department of Human Services commissioned a housing study, An Outline of Supportive Housing Needs in Cambridge. This report concluded that "the supply of supported housing of all kinds is insufficient to meet the needs" of the homeless. The study indicates that among the unmet housing and shelter needs in Cambridge are the following: for every non-abusing individual sheltered, two went unsheltered; for every family with children housed, eight remained homeless; for every mentally ill person housed, seven went without shelter; for every alcoholic/substance abuser sheltered, another stayed on the streets; for each adolescent housed, two went without; and for every battered woman taken in, three remained at risk. In addition, homeless elderly people face a nine to twelve month wait for subsidized housing. Based on a comprehensive inventory of all available housing resources for the homeless, the report asserted that "the need for the following shelter types exists:

- Transitional shelter for families
- Emergency shelter for individuals and families
- Short-stay transitional shelter for individuals
- Long-term transitional housing for individuals.
- Transitional shelter for adolescents
- Permanent supportive housing.
- Follow-up and continued supportive services in independent housing.

The report went on to address "some of the most critical unmet needs" of the special needs homeless persons:

- group homes, supervised apartments and congregate housing for persons with mental illness;
- specialized group homes for retarded persons;
- emergency shelter and halfway houses for recovering alcoholics
- emergency shelter for adolescents."

The subgroupings of homeless in need of services in Cambridge include but are not limited to: families with two parents as well as single parent families; individuals with substance and alcohol abuse, the mentally ill; physically handicapped; veterans, the elderly; adolescents who are in transition from family setting to being on their own, and individuals who are victims of the economy and unable to secure permanent housing. Additionally, there is an emerging need for shelter and support services for people with Aids/ARC.

Statement of Need According to Subtitle Programs under Title IV

A. Emergency Shelter Grant Program

The Department's Study clearly shows that one of the barriers to the development of emergency shelters is the lack of "access to capital and operating funds." Cambridge has a need to create emergency shelters to serve the variety of the homeless populations - adolescents, individuals (both men and women), families with children, elderly individuals and families. In each of these groups there is a need to create additional shelters to address the unmet need, including specialized emergency shelters for the mentally ill and alcohol/substance abusing segments of these populations. Additionally, for each of these groups further social services will be necessary.

B. Transitional Housing

A central aspect of the City of Cambridge's strategy to assist all homeless groups is focused on the concept of a "continuum of services." Movement of homeless persons from emergency shelters to stabilization to independent living provides the outline of that continuum. That movement is facilitated by Transitional Housing for a number of the populations.

The report mentioned earlier indicates a need for the creation of Transitional Housing for deinstitutionalized homeless who are mentally handicapped or retarded. Clients with severe psychosocial problems are not rehoused effectively in a short period; rather, a longer program addressing the special needs of persons with mental illness or alcoholism would be necessary for the return to more independent living.

Transitional Housing for families with children would provide some with a necessary short-term stay and others with the necessary long period necessary to receive intensive support services and to find affordable housing.

One of the dominant characteristics of homeless families is their struggle to maintain local ties and support systems. The efforts of families to double and triple up with friends or relatives in an effort to stay in Cambridge creates a largely hidden problem submerged in overcrowding.

Economic factor represent the overwhelming reasons behind family homelessness. Predominately young mothers with children, the families have very limited resources.

On the whole homeless families are free from the debilitating problems, alcoholism and psychiatric illness, which are common among homeless individuals. However, a family remains homeless, its resources, are eroded. Children in particular, "suffer social, emotional, and intellectual needs which remain unaddressed".

For adolescents leaving an emergency shelter, a Transitional Housing program would be an effective step in their eventual rehousing. Young people unable to live a home through abuse, rejection, or emotional problems, often are not ready to live alone. Additionally, adolescents in age-based entitlement programs are no longer categorically eligible for services when they turn eighteen. Finally, there are adolescents in particular kinds of difficulty, substance abuse and parenting teens, who require specialized housing.

Elderly persons, as they become less capable physically, require supportive housing. And the many elderly or fixed incomes are threatened with homelessness or displaced by spiraling rents.

Battered women are also served well by Transitional Housing. They have need of safe place to stay with anonymity. Many need job training, parenting skills, and help with benefits and security to rebegin their lives.

Ex-offenders would benefit from another step in their reintroduction into a productive role in society. The re-learning of basic life skills in a structured living environment would facilitate that entrance.

For homeless veterans needing psychological and emotional support, a Transitional Housing program could provide support and encouragement. Such a program could serve to reconnect veterans to their benefits and introduce them to various housing options.

C. Permanent Housing for the Handicapped

With escalating rents in Cambridge handicapped persons are faced with the prospect of losing their independent living situations. As a result an increasing number of handicapped persons are at risk. There is a need to create small, community based long-term housing which will provide specially designed apartments with social and financial support available to the residents.

D. Supplemental Assistance Program

As a program designed to supplement assistance received under the Emergency Shelter Grants Program and the Transitional Housing Program, this element of Title IV will be applied to meet the needs of homeless populations described above in sections a and b. While any of those populations might be served, the special needs of homeless families with children and elderly indicated above would be targeted. One of the especial needs of homeless families is accessible child care which in turn provides heads of households with the time and space to pursue job interviews and permanent housing.

Additionally, every population in sections a and b suffers from inadequate medical assistance. The need for outpatient health services cuts across age, gender, and psychological state.

The grouping of support services for the varied populations also would respond to the complex needs of the homeless. Innovative programs combining housing counseling and referral services with benefits and income counselling would provide resources vital for homeless persons and families to regain permanent housing. Ancillary services including transportation, psychological counselling, elderly placement, housing search, and other such programs would address the needs of homeless persons to move toward independent living.

E. Section 8 Assistance/SRO

The loss of SRO housing stock in urban areas is a nationwide phenomenon. The recent report on supportive housing needs indicated that of the remnant of SRO operators remaining in Cambridge over fifty percent are planning to leave the business within ten years. Nationally YMCA's and YWCA's have been leaving the residency business, a prospect Cambridge faces in the next few years. Among the problems facing such operators is lack of funds for rehabilitation.

Such SRO units have features which make them attractive to individuals whose ability to maintain themselves in private housing is marginal. While the structure provides privacy, the social context provides necessary support for both men and women, from late adolescence to elderly, some with slight mental disabilities, this form of housing provides one of the cheapest forms of lodging in the effort to prevent homelessness.

II. Inventory of Facilities and Services to Assist Homeless

Shelters

- The Emergency Service Center - A 55 bed emergency shelter for actively drinking alcoholics.
- Shelter, Inc. - A 21 bed shelter, 15 men and 6 women, providing emergency and longer term stays.
- Armory Shelter - A 20 bed emergency shelter for men.
- University Lutheran Shelter - A 23 bed emergency shelter for men and women operating only between November and April.
- First Church Shelter - A 12 bed emergency transitional shelter for men operating only between November and April.
- Shortstop - An emergency shelter for seven adolescents located in Somerville, but serving Cambridge and Somerville adolescents..
- YMCA - Emergency/Transitional rooms for 4 men.

Transitional Programs

- Cambridge and Somerville Cooperative Apartment Program, Inc. (CASCAP) - CASCAP operates two community residences housing 20 persons, 24 staffed apartments, 12 rooms at the YMCA and YWCA, and through its subsidiary, Organization for Elder Cooperative Housing Options (OECHO), a group residences of 19 beds for elderly women. All of CASCAP'S resources are accessible to Cambridge and Somerville individuals with mental health disabilities.
- Wellmet, Inc. - Operates two residences with a total of 24 beds serving adults with chronic mental illness.

- Walnut Street Center, Inc. - The Center houses 76 mentally retarded persons in both Cambridge and Somerville, 19 of whom live in Cambridge.
- Cambridge and Somerville Program for Alcohol Rehabilitation (CASPAR) - CASPAR operates a 20 bed detox program, 48 beds in men's halfway houses, 20 beds in a women's halfway house, and a 15 bed "graduate house." (CASPAR also operates the 55 bed emergency shelter mentioned above). Of these programs available to Cambridge residents, the women's house and one men's house are in Cambridge.
- YWCA Family Rooms - The Y operates two rooms for homeless families with children in association with the Cambridge Housing Authority and the Cambridge Department of Human Service Programs.
- Y Transitional Rooms - Both the YWCA with five rooms and the YMCA with four rooms maintain transitional programs with the aid of the Cambridge Department of Human Services.
- Hastings House - A group residence for twelve emotionally disturbed adolescents aged thirteen to seventeen years old.
- Castle School - A group residence for ten emotionally disturbed adolescents.
- Catholic Charities Apartment Program - A program for group parenting teenagers, sixteen and seventeen year old.
- Transition House - Battered women housing accommodating seven families.

Permanent Housing for the Handicapped

- The Cambridge Housing Authority maintains apartments for handicapped persons in all of its elderly housing.

Supplemental Assistance Programs

- Emergency Drop-In Child Care - A two half-day a week program situated at the Salvation Army providing child care for children of homeless families.

- Multi-Service Center for the Homeless - An innovative program combining multiple services to the homeless from various agencies, in one location.

Section 8 Assistance/SRO

- The Cambridge Housing Authority utilizes housing subsidies to rehabilitate rooms for homeless persons at the YWCA and YMCA.

Other Facilities and Service Assisting the Homeless Population in Cambridge

- North Charles Institute for the Addictions - Provides outpatient treatment for homeless persons with drug dependencies.

- Salvation Army Drop In Program - Homeless are persons provided with lunch, clothing, and showers two half days per week.

- Community Meals - In addition to the lunches provided in above, dinners targeted to the homeless are offered on Sunday nights at the Salvation Army, on Wednesday nights at the Committee of Elders, on Thursday nights at the Harvard Square Meal Program, and on Saturday nights at the Pilgrim Church.

- Mental Health Services - A mental health worker for the homeless jointly funded by the City and the Department of Mental Health (DMH) provides crisis intervention and case management services to the homeless.

- The City's Department of Human Services has an Emergency Services office which is comprised of six staff - a coordinator, case managers, housing assistance/search worker, intake and referral worker, and a social worker for adolescents all working with homeless and near homeless population.
- Community Development Block Grant Programs - CDBG funds are used to support Department of Human Services and linguistic minority agency programs which provide counseling information and referral services to the homeless.
- Teen Transitional Resource Center - This collaborative effort addresses needs of older adolescents by creating an independent living skills program and providing five transitional homes for homeless adolescents.
- FEMA funds -Federal funds administered by DHSP used to expand the number of shelter rooms in the City.
- Department of Public Welfare (DPW) - The DPW provides a variety of benefits from income to job training to homeless individuals and families.
- Department of Social Services Caseworker - A Department of Social Service worker who provides limited social services to homeless families in hotels and motels.

III. Strategy Matching Needs of the Homeless (Part I) with Available Services (Part II)

The City of Cambridge's response to the needs of the homeless is based on the creation of a "continuum of services". The City's strategy links municipal efforts to state and federal initiatives and funding in order to provide for the movement of homeless persons toward supported and independent permanent housing. This movement relies on the provision of various types of shelter and of housing for diverse homeless populations along with appropriate supportive social services. In matching the needs of the homeless with the services presently available it is found that there are major lacunae in the necessary continuum of services for many of the homeless in Cambridge. The step by step movement of the homeless toward independent living requires a complete and continuous spectrum of services. Unmet needs leave the continuum incomplete and result in the continuation of cyclical homelessness.

Two populations can serve as models for the possibilities offered to the homeless by a completed continuum of housing options.

The mentally ill who gain access to the continuum through several sources. One entry point is through emergency shelters where they have sought basic subsistence; another through displacement from an SRO; or, more commonly, through placement after release from Metropolitan State Hospital. If a specialized emergency shelter existed for these homeless, they could find placement there as a first step in the continuum. The next step after social service support and stability at the shelter would be a group home placement. After an accretion of living skills the client moves to a sheltered apartment with staff support which provides an increased level of independence. Finally, after development of further independent life skills, the formerly homeless mentally ill person is able to secure an independent, unstaffed apartment.

The second model is a homeless family who have lost their apartment through condo-conversion, rent increases, divorce or separation, landlord's relatives moving in, or any other number of ways, and are unable to secure housing. The Emergency shelter provides the entry step in maintaining or regaining stability. The family would be placed in transitional housing as soon as possible where a panoply of social services would be available to both the head of the household and the children. Families often face a range of psychological and financial

difficulties and such social services are vital in the continuing stabilization process and in the replacement of the family in an independent living situation. As a part of these services, housing counselling would provide encouragement and incentive in the restoration of permanent housing.

For both the mentally ill person and the family with children every step in the continuum is crucial toward the end of the stable, permanent placement. Each housing option along with the attendant social services in the continuum is necessary. When such a continuum is complete and seamless, the chances of a stable, permanent rehousing are greatly increased.

Emergency Shelters

There is in Cambridge a need to create emergency shelters for a number of homeless population groups. These shelters, when available to various groups, will provide access into the other more supported housing options in the continuum of housing services. The lack of such an emergency response leaves the homeless with either no option or inappropriate ones. While the six emergency shelters listed in the "Inventory" provide some availability, the comprehensive survey cited in the Department's study indicates a need for additional emergency shelters for alcoholic/substance abusing homeless, adolescent homeless, mentally handicapped homeless, elderly homeless, and non-abusing, non-mentally ill homeless.

At present there are no emergency shelters for homeless families with children or for elderly individuals or families. Homeless families are displaced from Cambridge or live in doubled and tripled up illegal circumstances. The elderly await placement in public housing, having no options during a wait that can take on year. Both populations need the creation of stabilizing shelters to allay the deteriorating impact of homelessness.

While the six emergency shelters listed in the "Inventory" provide some availability, comprehensive survey cited in the OUTLINE report indicates a need for additional emergency shelters for alcoholic/substance abusing homeless, adolescent homeless, mentally handicapped homeless, elderly homeless, and non-abusing, non-mentally ill homeless. As indicated previously, veterans comprise a significant portion of several of these populations and secure emergency beds in concert with these other groups. For example, of persons constituting the population of the Emergency Service Center for homeless active alcoholics, fifty-eight percent are veterans.

Transitional Housing

Again in this category of housing option along the continuum, the OUTLINE shows that Cambridge has incomplete resources for its homeless populations for mentally handicapped adults the need for transitional housing exceeds availability by 800%; for mentally retarded adults needs exceed availability by 120%; for alcoholic/substance abusing, 70%; for families with children, 1500%; for non-mentally ill, non-abusing individuals, 1000%, for adolescents, 180%; and for battered women, 300%;

In all of the groups named above there are inventoried transitional housing programs except for non-mentally ill, non-abusing individuals for this population there are no transitional options in the City. The percentage assigned is based on the need if there was one 10 bed facility.

Obviously, in all areas there is substantial need for transitional housing options for the homeless. Included in several of the groups above are the elderly and veterans populations, which as indicated previously, cut across various populations and add to the unmet need.

Permanent Housing for the Handicapped

As has been mentioned, the pressure on housing in Cambridge is often felt most severely by handicapped persons and elderly persons on fixed income. The apartments made available through the Cambridge Housing Authority for the handicapped need to be increased to accommodate the increasing demand for this specialized group.

Supplemental Assistance Program

The child care program for homeless children operates only two mornings each week. Given the importance of such a program in the accessing of resources by heads of households, the need is not only to increase the number of slots but also to expand the program to five full days per week.

The Cambridge Hospital under financial duress finds itself unable to continue providing on-site medical services to the homeless. That discontinuance of service places more importance on outpatient health services focused on the homeless.

The innovative Multi-Service Center for the Homeless, primarily staffed by Department of Human Services workers, combines a number of service providers and resources. In providing this one stop aid for individuals and families, the Center offers necessary supportive action to persons throughout the continuum of services. A clinical coordinator/director of the Center is needed and would serve to coalesce such complementary services and further assist the homeless in the movement through the continuum toward independent living.

Section 8 Assistance/SRO

As one of the most inexpensive forms of permanent lodging, SRO's offer a stable, permanent housing option vital to recently homeless, low income persons. For some homeless the movement along the continuum ends with an SRO, for others it is another important step along the continuum of independent housing. Of the 300 lodging houses in Cambridge in the fifties, only 22 remain. There is a direct correlation between the loss of these rooms and the increase in homelessness in the City. The 22 lodging houses are continuously full and are in effect non-available housing. This number needs to be increased and resources to reverse this trend are critical to addressing the homelessness of individuals. The preservation of SRO's in the form of lodging houses and Y rooms will help address the unmet housing needs of several of the homeless groupings. Elderly persons, especially, who in the past relied upon SRO's for inexpensive lodging, are severely impacted by the depletion of such housing.

Other Facilities and Services (Emergency Shelter Grant Program and the Supplemental Assistance Program)

In addition to a continuum of housing options, social support services are an important aspect of moving homeless persons along the continuum to independent living. The programs discussed in Section II leave many needs unmet which in turn hamper the capacity of homeless person to move to permanent housing. Outlined below are area which need to be enlarged and incorporated in the continuum of housing services.

- Daily Meals - While the Salvation Army provides two lunches per week, there is need to complete a full week's lunch program for the homeless.
- Evening Meals - There are four evening meals per week for the homeless. Meals are needed on the other three nights.

Day Programs - Most of the emergency shelter for individuals in the City are available only in the evenings and overnight. Homeless persons must then seek out secure and safe places during the day. There is no day program, in Cambridge for the homeless during the ten to sixteen hours the shelters are closed. Supplemental social services are best administered during the day. Day programs are natural and ideal settings for their administration. The absence of such programs in the continuum of services directly correlates with sustained homelessness for many persons, and hampers efforts to address the casual factor of homeless.

Mental Health Services - While both a mental health outreach worker and case manager are providing services to the homeless, the population requires more workers. The study commissioned by the City states that "staff in Cambridge shelters has estimated that 40% - 60% of guests have psychiatric illness severe enough to impair functioning." Additional controlled studies conducted by the Department of Mental Health in the Greater Boston area indicate that 38% of individuals on the street suffer from major mental illness. Such studies indicate the need for an increased number of mental health workers to facilitate the movement of mentally ill homeless persons to group home placements. Without such workers, the mentally ill will remain sheltered inappropriately, often requiring a disproportionate commitment of time from shelter staff who could otherwise be moving other clients along toward independent living.

Social Workers and Case Managers - Cambridge has in place several assistance workers, social workers, and case managers to aid homeless persons in securing income and benefits, finding shelter, providing counselling, and searching for housing. All such workers are overwhelmed with the increasing numbers of homeless individuals and families. The population to be served grows geometrically while the helper population increase arithmetically. Many more such workers are needed.

Funding - The CDBG and FEMA funds received by the City and non-profits aid in the creation of assistance programs for the homeless. But as the various housing and social service needs indicated above demonstrate, a greater infusion of funds is necessary to fund and leverage funds for additional needed programs.

Various Other Services - As indicated, social services of varied types provide the necessary aid and support for the homeless to move toward independent living and permanent housing. Beyond the unmet needs listed above, the hope for movement is also facilitated by vocational training programs, transportation provision, home match for elderly, furniture banks, and veteran's services all specifically for the homeless.

IV. Explanation of How Assistance Will Complement and Enhance Available Services

The intent of Cambridge's strategy to aiding the homeless is simple - to bring to an end their homelessness. Whether an individual or a family, whether mentally ill or abusing alcohol, whether adolescent or elderly, the goal is the same. Some would be immediately ready for permanent housing and others will need various types of supported housing all will need to enter and move along a continuum of services - social and housing which Cambridge intends to put in place. Cambridge has created a strategy resting on the completeness of the continuum. When completed it will ensure appropriate, stable permanent housing placement for homeless individuals and families.

As demonstrated, each continuum is presently incomplete: in some cases a particular population group has no program; in others; the group has a program but the housing resources are insufficient; and, in others, the group has a program with sufficient housing resources but insufficient social service support. Thus, the assistance available under the Title IV Subtitles considered in the Comprehensive Plan would be utilized to complement and enhance the continuum, where appropriate, in order to facilitate more expeditiously the movement of homeless persons into permanent housing.

Emergency Shelter Grant Program

To provide a first step into the housing continuum and a first step toward creating and accessing the correspondence social services, the Emergency Shelter Grant will be used to rehabilitate or convert a building or buildings for one or more of the needed programs below and will also be used for the payment of operating expenses and social service expenses in connection with one or more of the emergency shelter program groups listed below: (all identified as unmet need by the OUTLINE report):

1. Homeless families with children
2. Mentally ill or retarded individuals.
3. Alcoholic/Substance abusing
4. Elderly
5. Adolescents
6. Individuals, especially veterans

Transitional Housing

Severe shortages of Transitional Housing exists in Cambridge as demonstrated by the percentages in section 3 of this report. Any advances, grants, operating expenses, or technical assistance will be utilized to complement what already exists and to "provide housing and supportive services to help facilitate the transition to independent living for homeless persons" in the population groups below:

Families with children,

Mentally ill and retarded, including the
deinstitutionalized,

Alcohol/Substance abusing,

Elderly,

Individuals, non-mentally, non-abusing,
especially veterans,

Adolescents and,

Battered women and,

Persons with AIDS/ARC and,

Ex-offenders

Permanent Housing for the Handicapped

Given the specialized nature of this housing, any advance, grant, operating expense funds, or technical assistance would be utilized to supplement the efforts of the local housing authority in the creation of such housing and the attendant social services.

Supplemental Assistance Program

Assuming the provision of Supportive Housing Demonstration funds, further assistance will be necessary to meet the needs of homeless families with children, elderly homeless, and the handicapped. In addressing the emergency shelter and transitional housing needs of these populations, the securing of housing for them will be necessary. The Multi-Service Center for the Homeless will require additional staff and space. Any advances or grants secured under the Supplemental Assistance Program will be applied to the above needs for additional facilities and to the creation of social service supports for such efforts. Especially helpful would be the assistance available to provide outpatient health services for the homeless as well as assistance for childcare facilities.

Section 8 Assistance/SRO

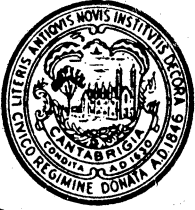
With SRO options in Cambridge increasingly threatened, the assistance available has two uses. First, to prevent further attrition by financial support to operators; second, to rehabilitate and restore to proper codes current SRO's. The two largest SRO operators in Cambridge, the YMCA and the YWCA, are faced with increased need for rehabilitation assistance as well as social services support. The housing assistance made available under this subtitle would be used to assist these SRO operators in maintaining and rehabilitating their residences, and, in doing, so, preserve them as housing.

Other Facilities and Services (Emergency Shelter Grant Programs and Supplemental Assistance Act)

The additional funds especially earmarked under the Emergency Shelter Grant and Supplemental Assistance Programs for "supportive services for homeless individuals" would be targeted to completion services indicated above. Again, the concern would be to strengthen the social service continuum, and, in doing so, aid homeless persons to secure permanent housing.

- Expansion of meal programs - To provide lunch and dinner each day of the week.
- Provision of day programs - To secure and make operative facilities for day programs, especially programs for the mentally ill and elderly. Such programs to include increased social services.
- Supplemental Mental Health Workers - To address the increasing need for mental health services at all services delivery points for the homeless. To provide training to shelter staff regarding mental health issues.

- Creation of vocational services and increased income/benefits counselling - To respond to the need of the homeless to earn/receive sufficient funds to support independent living. To provide assistance to homeless persons for vocational counselling, job training, and employment.
- Provision of transportation - To provide for heads of homeless household, elderly homeless, and homeless individuals transport to and from programs and resources designed to facilitate their movement to independent living.
- Renovation/Creation of handicapped accessibility - To enable all shelter and housing programs to provide for disabled persons.
- Expansion of referral services - To create a more expansive and responsive system of referral to expedite the accessibility of resources along the housing and social service continua.



CITY OF CAMBRIDGE

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EXECUTIVE DEPARTMENT
ROBERT W. HEALY
City Manager

RICHARD C. ROSSI
DEPUTY CITY MANAGER

November 13, 1987

To the Honorable, the City Council,

I am enclosing for your review for this evening's hearing on homelessness the City's recently approved Comprehensive Homeless Assistance Plan. This plan was required by the Federal agency of Housing and Urban Development (HUD) in order for the City to be eligible for the recently appropriated Federal funds under the Stewart B. McKinney Homeless Assistance Act.

Upon review of this plan it is clear that the City has many of the necessary components in place to address the needs of individuals and families in this City who are homeless or in need of specialized housing. This plan indicates where the remaining gaps in service exist and provides information and data to assist in developing additional responses.

Very truly yours,

Robert W. Healy

Agenda Item No. 3

St669

Re: enclosed copy of the City's Comprehensive Homeless Assistance Plan which has been approved by the U.S. Dept. of Housing & Urban Development.

In City Council,

November 16, 1987

Referred to Hearing,
Scheduled 11/16/87
@ 7 P.M.
Hearing Held
Placed on S. L.