CITY OF SAN ANTONIO DEPARTMENT OF COMMUNITY INITIATIVE FEM NO. 5A+8 CITY COUNCIL AGENDA MEMORANDUM 3 pm

TO:

Mayor and City Council

FROM:

Dennis J. Campa, Director, Department of Community Initiatives

SUBJECT:

Ten-Year Plans to End Hunger and Chronic Homelessness

DATE:

January 13, 2005

SUMMARY AND RECOMMENDATIONS

A. This resolution approves the *Ten-Year Plan to End Chronic Homelessness in San Antonio* and authorizes implementation of the plan.

B. This resolution approves the *Ten-Year Plan for Food Security in San Antonio* and authorizes implementation of the plan.

Staff recommends approval of these resolutions.

BACKGROUND INFORMATION

To address the problem of hunger and the interconnected issue of homelessness in San Antonio, Mayor Ed Garza established the Mayor's Task Force on Hunger and Homelessness in July 2003. The Task Force is comprised of representatives of the community, as well as agencies that serve homeless individuals and provide food assistance. The chairpersons of the Task Force are City Councilmembers Julian Castro and Patti Radle.

The Task Force was charged with developing short and long-term strategies to address hunger and homelessness. The Task Force made recommendations to the City Council regarding hunger and homelessness initiatives on July 30, 2003. In response to the Task Force recommendations, City Council appropriated \$1,014,000 in one-time resources from the fiscal year 2004 Operating Budget to augment existing support of hunger prevention and support services for homeless individuals. For fiscal year 2005, \$1,183,039 was allocated to hunger and homelessness initiatives, which included an additional \$250,000 approved by City Council for a Day Center and/or Mobile Canteen that will serve homeless individuals and families. Services for this new initiative are anticipated to begin in March 2005.

The ten-year plans are a result of a 16-month process of the Task Force. It draws on data from the 2003 U.S. Conference of Mayor's Report, San Antonio/Bexar County Continuum of Care (CoC), the 2003 Census report, as well as substantial input by CoC members and other key community stakeholders.

Hunger

The hunger plan, A Ten-Year Plan for Food Security in San Antonio identifies the following four strategic areas of work: 1) Build Resources to Meet Food Security Needs; 2) Educate to Improve Quality of Life; 3) Create Synergy; and 4) Act on Meaningful Data. For each of these areas, the Task Force Hunger Subcommittee members outlined milestones against which to measure San Antonio's progress at the one, five and ten year intervals.

Homelessness

The Ten-Year Plan to End Chronic Homelessness in San Antonio incorporates the National Alliance to End Homelessness four steps for planning: 1) Plan for Outcomes, 2) Homelessness Prevention, 3) Stabilization/Housing First, and 4) Build the Infrastructure. Each step includes objectives, strategies and action plans for prevention and intervention of homelessness to be carried out in 10 years. A timeline with milestones and target dates for completion is contained in the Plan.

POLICY ANALYSIS

These resolutions support the City's core issue of providing a safety net of services to our most vulnerable residents. Temporary emergency assistance is provided to individuals and families who are food insecure, as well as those who are homeless. Specific strategies to address hunger and homelessness in the next ten years in San Antonio are detailed in the two plans.

As one part of its continuing review of services to the hungry and homeless, the City is evaluating the feasibility of selling its two homeless shelters and reinvesting the proceeds in two new facilities: a campus style setting for family emergency shelter and transitional housing, and second facility to serve downtown homeless singles. Reinvestment options include the possibility of joining with other community providers and investors to create a new community facility.

FISCAL IMPACT

There is no immediate direct financial impact by the adoption of this resolution supporting the Ten-Year Plan for Food Security and the Ten-Year Plan to End Chronic Homelessness by the City of San Antonio. The adoption of these plans improves the City's competitiveness for federal and state funding available surrounding these issues. Moreover, the success of these plans will be dependent on the co-investment by numerous partners. This action requires no General Fund commitment.

COORDINATION

These efforts have been coordinated with the Mayor's Task Force on Hunger and Homelessness and the Continuum of Care. The Task Force includes academicians, businesses, congregations, service providers, and consumers. The Continuum of Care and the Homeless Action Coalition will oversee implementation of the Homelessness Plan and the Department's Leadership in

Action Program will oversee the implementation of the Hunger Plan. Both plans will be presented to the Economic and Human Development Committee on January 11, 2005.

SUPPLEMENTARY COMMENTS

Provisions of the City Ethics Ordinance do not apply.

Dennis J. Campa, Department Director Department of Community Initiatives

Frances A. Gonzalez Assistant City Manager

J. Rolando **B**ono

Interim City Manager

A RESOLUTION

APPROVING THE TEN-YEAR PLAN TO END CHRONIC HOMELESSNESS IN SAN ANTONIO; AND AUTHORIZING IMPLEMENTATION OF THE PLAN.

WHEREAS, Mayor Ed Garza established the Mayor's Task Force on Hunger and Homelessness in the Summer of 2003 and appointed City Council Member Patti Radle to serve as the chairperson of the Homelessness Subcommittee of the Task Force; and WHEREAS, Mayor Garza charged the Task Force with developing short and long-term strategies for addressing the interconnected issues of hunger and homelessness; and WHEREAS, the Ten-Year Plan to End Chronic Homelessness in San Antonio advances the City of San Antonio toward a concerted effort to address issues of homelessness as a community; and WHEREAS, the Plan is the result of a sixteen-month process of the Mayor's Task Force on Hunger and Homelessness; and WHEREAS, efforts were coordinated with academicians, businesses, congregations, the Continuum of Care, consumers, the Homeless Action Coalition, service providers, state agencies and other community stakeholders; NOW THEREFORE: BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF SAN ANTONIO: SECTION 1. The Ten-Year Plan to End Chronic Homelessness in San Antonio is approved and authorized for implementation. A copy of said plan is attached hereto and incorporated herein for all purposes as Attachment I. **SECTION 2.** This Resolution shall become effective on and after December 23, 2004. PASSED AND APPROVED this _____ day of _____, 2004. MAYOR ATTEST: _____ City Clerk

City Attorney

APPROVED AS TO FORM:

City of San Antonio, Texas Mayor's Task Force on Hunger and Homelessness

Ten-Year Plan to End Chronic Homelessness

January 13, 2005

Executive Summary

To address the problems of hunger and homelessness, Mayor Ed Garza established the Mayor's Task Force on Hunger and Homelessness in the summer of 2003, comprised of representatives of the community, as well as agencies serving the homeless and providing food assistance. The Mayor charged the Task Force with developing short and long-term strategies for addressing the interconnected issues of hunger and homelessness.

In response to short-term recommendations from the Mayor's Task Force on Hunger and Homelessness, the City Council of the City of San Antonio appropriated \$1.014 million in its Fiscal Year (FY) 2004 Operating Budget to augment hunger prevention and support services for the homeless. In addition to several food security programs, the funding was used to support a Mobile Canteen for homeless individuals who do not access shelters, and to expand day center services. This support has allowed these agencies to substantially increase contact with chronically homeless individuals, and to expand key services which assist homeless individuals in transitioning to self-sufficiency. As of September 2004, 29 individuals accessing Corazon Ministries' day center had gained employment with the assistance of Corazon staff, and an additional 10 individuals per month are employed and paid by Corazon to do cleaning and maintenance work. City Council allocated \$1.183 million in the FY 2005 Operating Budget for hunger and homelessness programs.

The Task Force's primary task was to develop long-range strategic plans to address hunger and homelessness in San Antonio including. The Homeless Subcommittee was chaired by Councilmember Pattie Radle. The Ten-Year Plan to End Chronic Homelessness draws on data from the U.S. Conference of Mayor's report and the San Antonio/Bexar County Continuum of Care (CoC) 2003 Census as well as substantial input from CoC members and other key community stakeholders. The plan utilized the National Alliance to End Homelessness checklist following four steps; 1) Plan for Outcomes, 2) Homelessness Prevention, 3) Stabilization/Housing First, 4) Build the Infrastructure.

Pending Council approval, the Task Force will begin to engage more community stakeholders in the plan, identify responsible parties for each action step and establish evaluation mechanisms. In this way, the Task Force will ensure that this plan will remain a working guide for community leaders for years to come so that over the course of the next decade San Antonio may achieve the milestones detailed in this report.

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Vision Statement

By the year 2014, all individuals facing chronic homelessness in the greater San Antonio area will have alternatives and access to safe, decent and affordable housing and the resources and supports needed to sustain housing.

Introduction

To address the problems of hunger and homelessness, Mayor Ed Garza established the Mayor's Task Force on Hunger and Homelessness in the summer of 2003, comprised of representatives of the community, as well as agencies serving the homeless and providing food assistance. The Mayor charged the Task Force with developing short and long-term strategies for addressing the interconnected issues of hunger and homelessness. The Task Force's primary task was to develop a strategic plan to address hunger and homelessness in San Antonio including: 1) a five year plan to address the problems of hunger in San Antonio, including a short-term plan to address hunger among seniors; 2) a five year initiative to stabilize the city's ability to manage the existing homeless service delivery system, and; 3) a ten-year plan, in conjunction with the San Antonio/Bexar County Continuum of Care, to end chronic homelessness.

President Bush made ending chronic homelessness in the next decade a top objective in his 2003 budget and the U.S. Conference of Mayors subsequently adopted the goal. San Antonio is one of over 100 cities around the country to commit to develop a plan to end chronic homelessness over the next ten years.

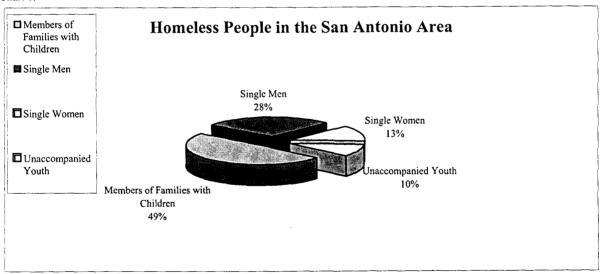
This report provides background on the homeless problem in San Antonio, details existing resources serving the homeless population in San Antonio and Bexar County, and notes existing barriers to addressing the needs of the homeless population. The report also describes the process followed by the Mayor's Task Force in developing the Ten-Year Plan to End Chronic Homelessness, including the assumptions that they made in developing the strategic plan.

I. A Snapshot of Homelessness in San Antonio

In 2003, the U.S. Conference of Mayors (USCM) surveyed 25 major cities to obtain estimates on the causes of food security and homelessness as well as the capacity of local agencies to meet the demand. The report cites unemployment, mental illness, substance abuse, domestic violence, poverty, a lack of affordable housing and limited life skills as the key reasons for homelessness in San Antonio. (The survey data is included in Appendix A.) According to the 2000 U.S. Census, the poverty rate in Bexar County is 16%. The USCMR data indicates that nearly half of the homeless people in San Antonio are either mentally ill, substance abusers or suffering from HIV or AIDS. The San Antonio/Bexar County Continuum of Care 2003 Census¹ data indicates that domestic violence was cited as the reason that 12% of the families were homeless.

Homelessness in San Antonio cuts across all segments of the population. San Antonio's homeless population can be divided into four major subgroups: members of families with children, single men, single women and unaccompanied youth. Chart 1 breaks down the population between these four main groups using data from the USCM Report. The graph illustrates that nearly 50% of the population are families with children, while single men, single women and unaccompanied youth combined nearly 50%. Chart 2 illustrates the breakdown of other subpopulations. (This information is based on agency self-reports and is not a point in time data.)



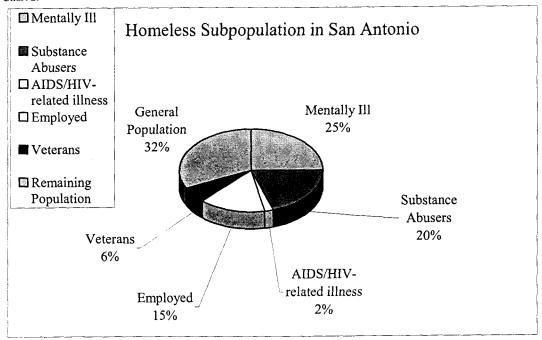


¹ As part of the San Antonio/Bexar County Continuum of Care's preparation for its annual consolidated Supportive Housing proposal, it conducted a local homeless census in February of 2003, covering San Antonio and Bexar County.

Further analysis of the available data shows that the homeless population in the San Antonio area has the following characteristics:

- The City of San Antonio's homeless population is 50% Hispanic, 33% Caucasian, 16% African-American, and 1% Asian. (USCMR 2003 Report)
- 37% of the homeless in San Antonio are children. (2003 CoC Census)

Chart 2:



Of those surveyed, 44% had been homeless for more than one year. Many (35%) stated that they were homeless because they could not locate or secure affordable housing. It is apparent that the City of San Antonio (COSA) must find a way to increase options for the homeless as 79% of them stated that they intended to stay in San Antonio for more than a year.

Even as agencies in San Antonio/Bexar County continue to add new shelters, 28% of those surveyed through the 2003 CoC Census indicated that they had been turned away from a shelter because the shelter was full. Emergency shelter space for families is particularly needed. In 2003, the San Antonio Metropolitan Ministries (SAMM) also reported that they were turning away 40 families per month who were seeking emergency shelter. During periods of inclement weather, this problem is heightened.

II. Current Efforts to Address Homelessness

San Antonio/Bexar County Continuum of Care

The Continuum of Care (CoC) is a community-based coalition that addresses the needs of homeless persons in order to help them reach maximum self-sufficiency. The Continuum of Care is developed through collaboration with a broad cross section of the community and based on a thorough assessment of homeless needs and resources. The Continuum of Care is recommended by the U.S. Department of Housing and Urban Development (HUD) as a comprehensive and strategic approach to addressing homelessness.

The mission of the San Antonio Bexar County Continuum of Care (CoC) is to organize community agencies and streamline access to services. The Continuum will also design, develop and deliver services that meet the specific needs of the homeless and of those at risk for homelessness.

The vision of the CoC is:

- For each homeless family and individual to be able to access the spectrum of community services and utilize them to break the cycle of homelessness.
- For each family and individual at risk of becoming homeless to be able to also access the same spectrum of services, utilizing them to stabilize and strengthen their situation and offset the threat of homelessness
- Each recipient will move toward stable housing and maximum self-sufficiency.

The objectives of the San Antonio/Bexar County Continuum of Care are:

- Identify the scope of the homeless problem in Bexar County.
- Prioritize service needs for the Bexar County homeless population.
- Identify the service gaps in the continuum of available resources.
- Develop and implement plans and timeliness to make new services available to the community.
- Foster the development and implementation of a community-wide advocacy, action and activity in response to emerging needs and issues of the target population.
- Develop and implement a community plan to streamline access to services.
- Enhance service integration, interagency collaboration and effective service coordination by providing regular opportunities for service providers to develop and enhance professional relationships, communications, and interagency networking.
- Identify and continuously update information on available community resources.
- Organize and coordinate training for service providers on needs of the homeless and those at risk of homelessness, available services, and methods of access.
- Provide technical assistance to participating organizations that are not active members and foster their participation.
- Review, rank, and endorse agency grant requests and proposals in accordance with identified priorities of need.

Implementation of the Task Force's Short-term Recommendations

In response to short–term recommendations from the Mayor's Task Force on Hunger and Homelessness, the City Council of the City of San Antonio appropriated \$1.014 million in its FY 2004 Operating Budget to augment support to hunger prevention and support services for the homeless. In addition to several food security programs, the funding was used to support a Mobile Canteen for the homeless individuals who do not access shelters, and to expand day center services. The City is in the process of negotiating extended contracts to continue these services through FY 2005. City Council allocated \$1.076 million for hunger and homeless programs in its FY 2005 Operating Budget.

Between January and September of 2004, the Mobile Canteen, operated by Corazon Ministries, served a total of 13,294 meals to 3,747 unduplicated clients. This program, intended to provide meals and hygiene assistance to chronic homeless individuals who do not typically access shelters, has allowed that agency a means to assist those individuals with applications for food stamps and other services that could eventually put them on a path toward self-sufficiency. Intake specialists accompany the Canteen and provide referrals to services provided by Corazon and other local agencies such as counseling and health care. Additionally, a nurse and "urban ministers" do outreach with the Canteen periodically.

Expanded funding for day center services, provided by the City of San Antonio, also allowed for increased services for the homeless population. In the first six months of 2004, Christian Assistance Ministries (CAM) served 290 unduplicated clients at their day center, and referred many to nearby healthcare services, provided individuals hygiene products & showers, job information and assistance, and counseling. CAM assisted 396 homeless individuals to obtain identification cards, and helped twenty individuals with food stamp applications. During the same period Corazon Ministries' day center served over 2,619 unduplicated clients, providing them with access to hygiene, clothing, an onsite a nurse, healthcare referrals, & free eyeglasses. As of September 2004, 29 of these individuals had gained employment with the assistance of Corazon staff, and an additional 10 individuals per month are employed and paid by Corazon to do cleaning and maintenance work. One of the most critical programs in helping individuals to gain self-sufficiency is the I.D. Recovery Program which assists 20-30 individuals per month to obtain identification, a critical step in securing a residence and/or employment.

Implementation of the Homeless Management Information System (HMIS) Project

In 2004, the City of San Antonio received \$686,156 through HUD's Supportive Housing Program to implement the HMIS Project. The City is scheduled to launch the system with a pilot group of agencies in January 2005. HMIS will improve the availability of data on the chronic homeless population, allowing the Continuum of Care to better plan for and evaluate services. The HMIS Project will also serve as a clearinghouse of information regarding available homeless services that individuals and families can access through participating agencies. The project will address a critical lack of hard data regarding

client demographics and service utilization and will provide meaningful data upon which to measure the success of future efforts.

III. The Mayor's Task Force on Hunger and Homelessness

To address the problems of hunger and homelessness, Mayor Ed Garza established the Mayor's Task Force on Hunger and Homelessness in the summer of 2003, comprised of representatives of the community, as well as agencies serving the homeless and providing food assistance. The Mayor charged the Task Force with developing short and long-term strategies for addressing the interconnected issues of hunger and homelessness. The Task Force's primary task was to develop a strategic plan to address hunger and homelessness in San Antonio including: 1) a five year plan to address the problems of hunger in San Antonio, including a short-term plan to address hunger among seniors; 2) a five year initiative to stabilize the city's ability to manage the existing homeless service delivery system, and; 3) a ten-year plan, in conjunction with the San Antonio/Bexar County Continuum of Care, to end chronic homelessness. A list of the members of the Task Force is included in Appendix B.

Progress to Date

On July 30, 2003, the Task Force completed its process of prioritizing recommendations.

- The first priority for hunger was to expand the San Antonio Food Bank's Project HOPE so that local seniors receive groceries at the City's Comprehensive Nutrition Program sites.
- The second priority for hunger was to increase funding for food pantries that serve the hungry and increase food stamp access through those food pantries.
- The first priority for homelessness was to develop 12 emergency shelter units for families. An additional priority was to support a mobile canteen for the chronically homeless.
- The second priority was expanding day center services.

As detailed above the City Council of the City of San Antonio, in response to the Task Force recommendations, appropriated \$1.014 million in one-time resources from its FY 2004 Operating Budget to augment hunger prevention and support services for the homeless.

In order to address the complexity of each issue, the Task Force decided to divide into two subcommittees to develop ten year plans, one for homelessness and one for hunger. Councilman Julian Castro chaired the Hunger Subcommittee and Councilwoman Patti Radle chaired the Homelessness Subcommittee. Each subcommittee consisted of Task Force members, as well as diverse community stakeholders. Ana Novoa of St. Mary's University School of Law and Bob Martindale of San Antonio Metropolitan Ministries were also elected as co-chairs of the Homeless Subcommittee. Smaller working groups were then set up to review goals and strategies to make outcomes which were more concrete and measurable.

Framework for the Plan

COSA has utilized the continuum of care model in order to ensure that programs are the product of thoughtful program analysis and policy-making, rather than a patchwork of services implemented without coordination or consultation. The Ten-Year Plan to End Chronic Homelessness moves the San Antonio toward a concerted effort to address the problem as a community. In working to ensure a comprehensive strategic plan draws on the most effective means to end homelessness in the next decade the Task Force based their work on several key assumptions:

- Costs of homelessness: It is not sufficient for a community to establish a goal of placing all homeless persons in shelter beds. By doing so, homelessness individuals become institutionalized and communities incur a substantial cost in terms of shelter beds, hospitalization, and incarceration.²
- Root causes of homelessness: Homelessness is the result of a combination of structural issues and individual risk factors, far too complex for a one-size-fits-all solution. The growth in the size and diversity of the homeless population is the result of a complex interplay of structural trends. Strategies to break the cycle of homelessness and prevent future homelessness must be based on a common understanding of the root causes of homelessness, the degrees of homelessness that exist, and the factors that cause homelessness to persist. Appendix C includes further detail regarding roots causes, defines degrees of homelessness, and provides details regarding the range of housing options.

In order to approach the planning process based on national best practices, COSA used the National Alliance for the Homeless *Ending Homelessness Checklist: Ten Essentials for Communities* as a tool. The plan is organized into the following four areas of concentration:

- 1) Plan for Outcomes The existing paradigm has been to manage homelessness. In order to *eradicate* chronic homelessness, there must a paradigm shift in dealing with this issue. The community must focus on collecting better data about the needs of the homeless in order to plan for outcomes that actually can end homelessness.
- 2) Homelessness Prevention Many times clients fall through the cracks of these systems of care. Research indicates that prevention of a homeless episode or ensuring a speedy placement into permanent housing can be more effective and efficient.

² According to a report in the New England Journal of Medicine, homeless people spent an average of four days longer per hospital visit than did comparable non-homeless people. This extra cost, approximately \$2,414 per hospitalization, is attributable to homelessness. According to a University of Texas two-year survey of homeless individuals, each person cost the taxpayers \$14,480 per year, primarily for overnight jail. The cost of an emergency shelter bed funded with HUD's Emergency Shelter Grants (ESG) program is approximately \$8,067 more than the average annual cost of a federal housing subsidy (Section 8 Housing Voucher.)

- 3) Stabilization / Housing First There are clients in the Continuum of Care whom demand considerable time and consume a great deal of resources. These groups are typically chronically homeless disabled individuals who are high utilizers of shelters, hospitals and even jails. For these clients, the system must utilize the housing first model. They must be quickly provided permanent supportive housing (housing with services). This process will better address their needs, while lowering the long-term cost of serving them.
- 4) Build the Infrastructure No plan to end homelessness can make demonstrable progress unless there is an adequate supply of affordable housing. Along with housing, the community must coordinate access to existing services in order to avoid recidivism. Previous efforts indicate that providing housing without support only continues the cycle.

Future Steps

In order to accomplish our community's goal of ending chronic homeless in the next ten years, the Mayor's Task Force on Homelessness is seeking input and endorsement on the ten-year plan from City Council. The Task Force will continue to refine the plan through focus groups in the community, and will work to ensure that the plan serves as a guide to community leaders for years to come. Future work will include:

- Involvement of additional stakeholders. It is important to the Task Force to engage stakeholders from the private sector, businesses, academia, and other government entities to enhance the community plan that will have a lasting impact in San Antonio/Bexar County.
- Designation of responsibilities. The roles and responsibilities of each stakeholder must be defined, and the Task Force will identify a responsible party for each action step to ensure effective implementation of the plan.
- Develop internal evaluation mechanism, and establish coordinator/task manager. Stakeholders need to determine how performance against stated goals will be measured. This step includes designating a point person whose responsibility is coordination and ensuring implementation of the action steps by all parties.
- External evaluation. Finally, an annual, external, independent evaluation should be conducted in order to ascertain the efficacy and worth of the plan, with a mechanism in place to use this information for continuous improvement and refinement of this plan.

The complete Ten-Year Plan to End Chronic Homelessness, which include objectives, strategies and action plans for prevention and intervention of homelessness is attached. A timeline with milestones and target dates for completion is included in Appendix E.

The Ten Year Plan to Break the Cycle of Homelessness and Prevent Future Homelessness

1) Plan for Outcomes

The existing paradigm has been to manage homelessness. In order to *eradicate* chronic homelessness, there must a paradigm shift in dealing with this issue. The community must improve collection of data about the needs of the homeless in order to plan for outcomes that can actually end homelessness.

The City of San Antonio is exploring the use technology to increase the efficiency of our service delivery to the chronic homeless, those homeless for a short time, and the indigent. The City is determined to collect better data at the local level and to study that data in order to meet the needs of the chronic homeless and to develop outcomes that better address this sub-population's issues. The City of San Antonio is preparing a bid for the purchasing of a Homeless Management Information System (HMIS), and to assist programmers and designers as they seek to implement a system that is user friendly and comprehensive.

The proposed HMIS will provide the following information:

- Length of stay: The HMIS will calculate length of stay in program after the client has exited.
- Needs Needs, fully met, partially met and not met, which can be documented in the client's *service transactions*. Providers can demonstrate that they provided a service to meet the need, referred the client to another provider for service, or that the need remained unmet.
- Causes of homelessness -A system that tracks and lists a number of possible causes of homelessness. Some examples are:
 - o Addiction
 - o Aging out of foster care
 - o Domestic violence
 - o Mental illness
 - o Physical disability
 - o Gambling
 - o Unemployment/underemployment
- Interaction with mainstream programs The HMIS should allow documentation of mainstream programs in which the client is currently involved and also documents whether an application for mainstream resources has been completed and the outcome of the application if applicable.

- Effectiveness of interventions outcomes of case plans, goals and action steps put in place with case management should be documented in the HMIS.
- Population Count The HMIS should allow a provider to report the number of clients that received services over any date range selected. The report will break down the number of clients into race, age, and gender categories for single individuals and for persons in families with children.

The following are the objectives, strategies and action steps that COSA has identified as necessary to develop a comprehensive data collection tool:

Objective: Collect better data throughout the region.

Strategy: Implement & expand the use of the HMIS throughout the greater San Antonio area.

Action Steps:

- o Require certification from all HUD Continuum of Care recipients that they will enter certain standard data required by COSA.
- Require certification from all contractors to enter certain standard data required by COSA.
- o Identify barriers and address issues that continue to prevent agencies, particularly state and federal mainstream agencies, from using the HMIS.
- o Develop Memoranda Of Understandings (MOUs) with mainstream providers that lead to real time data collection regarding mainstream service delivery.

The system is anticipated to be fully in place over the course of the next three years, with an initial pilot group of 20 agencies using the system in January 2005, and 15 agencies coming online each of the remaining two years.

Objective: Plan for outcomes.

Strategy: Develop outcome measures and monitoring procedures to determine program effectiveness.

Action Steps:

- o Develop monitoring tools and standards.
- o Monitor all Continuum of Care Homeless Assistance programs for effectiveness.
- o Determine HUD goals are being met.

Strategy: Expand outreach to build and strengthen relationships with chronic homeless and with community at large.

Action Steps:

- Expand CoC mobile outreach team and develop mobile crisis response team that includes mental health, addictive disorder, veterans and medical component, this includes recruiting and training 100 volunteer spotters for outreach.
- O Deliver sack lunch and other basic needs to street chronic homeless at least once a week.
- o Provide CoC emergency info cards to street homeless and those who come in contact with population.
- o Provide CoC pamphlets to homeless and those who serve them.
- Educate staff at hospitals and jails regarding info and referral to housing and services.
- Allow for partial access of HMIS system to public to use an online directory of resources.

Strategy: Utilize HMIS reporting tools as a mechanism for service delivery design and implementation.

Action Steps:

- o Produce data on homeless recidivism and utilization of mainstream programs and services.
- o Measure outcomes of current discharge planning efforts.
- O Identify percentage of population being released to homelessness from institutions (shelters/hospitals/jails/prisons/mental health institutions/treatment centers/ foster care systems).
- Produce data on current request and utilization of homeless prevention (rent and utility assistance).
- o Coordinate project development throughout the region addressing identified gaps based on documented need.

2) Homelessness Prevention

COSA's focus on homeless prevention has seen real effort and much success. In the course of ten years, the Task Force will work to establish a trust for homeless issues. In order to do this, there will be a lobbying effort to authorize a tax on the sale of alcohol and tobacco. Also, a legislative agenda will be designed to pass a state law for special local fees.

Additionally, improvement in discharge planning in state hospitals and correction facilities are sought. The Texas Department of Mental Health and Mental Retardation (MHMR) and Texas Commission on Alcohol and Drug Abuse (TCADA) address homeless prevention through continuity of care policy; however, many times their clients fall through the cracks and end up homeless again. Emergency Shelter Grants (ESG) available from the balance of state and entitlement city funding do not require grantees to coordinate or collaborate on prevention efforts. Therefore funding is not coordinated to address prevention issues such as one-time or short-term rent or mortgage assistance or housing placement services throughout the community. Individual agencies utilize this funding to fill the gaps in their existing service delivery.

Another issue to be addressed in a long-term homeless prevention plan is the lack of comprehensive discharge planning from public treatment centers and correction facilities. While the MHMR has a continuity of care policy that addresses discharge, there is not tracking beyond delivery out of the public system. It is much the same with TCADA and within correction facilities with mental health components; however, virtually none of these facilities provide discharge planning to stable and decent permanent supportive housing. These clients then end up either back on the streets, in the hospitals or incarcerated.

CoC will seek to build relationships with public agencies and officials who set funding policy that can assist prevention efforts in this region. The leadership will meet with key public officials to ascertain CoC's role in directing the flow of prevention dollars in a collaborative and coordinated effort. The intent is to collaborate with the Emergency Food and Shelter Grant Board for coordination with the FEMA "Local Recipient Organizations" using the HMIS system so that appropriate referrals for rent and utility assistance are addressed. These funds will be matched with existing TANF grant funds to maximize prevention efforts.

Objective: Prevent homelessness through comprehensive strategies including early intervention and discharge planning.

Strategy: COSA will advocate for housing trust funds to expand housing for low-income and homeless individuals.

Action Steps:

- Create a statewide advocacy coalition on homelessness comprised of membership of the various continuums in Texas.
- o Focus advocacy effort to authorize public levies to establish the trust.
- O Design a legislative agenda to pass a state law for special local fees.
- CoC and Homeless Action Coalition will pursue the possibility of a merger.
- o Create a micro-lending program for the homeless.

Strategy: Improve 24-hour access to information and referral hotline coordinated through 2-1-1 that will direct clients to appropriate prevention resources.

Action Steps:

- Support development and implementation of 211 system (social service call line) by working with legislators to establish appropriate funding for 24-hour service.
- o Develop regimen of agency and staff training to assure appropriate information and referral knowledge exists in the community.
- o Identify at risk clients and link to prevention programs.
- o Provide ongoing community resources to support sustainability.
- Pursue prevention efforts at all food pantries throughout the region, utilizing messaging to alert information and referral experts in efforts to prevent homelessness.

Strategy: Increase linkage to permanent housing and services for persons leaving institutions and for the chronic homeless.

Action Steps:

- o Interact with leadership in public systems of care to establish multidisciplinary re-entry teams prior to discharge.
- Actively seek to collaborate with Emergency food and Shelter Grant local boards to coordinate prevention dollars.
- Utilize HOME funds available through participating jurisdictions to provide tenant-based rental assistance.
- o Provide symposium focusing on homeless prevention.
- o Create ex-offenders resource guides.
- o Initiate planning to coordinate discharge of chronically homeless with CoC's case management program or HMIS.
- Ensure that service agencies establishes case plans prior to discharge that includes selection of appropriate supportive housing and track services in HMIS to follow client beyond supportive housing placement.
- o Facilitate creation and training for community-based teams to provide prevention services in targeted neighborhoods.
- o Ensure youth aging out of foster care have access to resources.
- o Increase number of respite beds and youth group homes available in the community.

Strategy: Continue to educate community, consumers and program staff regarding the legal rights of tenancy.

Action Steps:

- o Fair Housing Program will continue to provide staffing sessions regarding tenant rights.
- CoC and Fair Housing Program will continue to provide information to landlords regarding special needs of the homeless.

3) Stabilization: Housing First

According to the National Alliance to End Homelessness (NAEH) plan to end homelessness, most people who become homeless enter and exit homelessness relatively quickly. Although there may be a shortage of affordable housing, many individuals cope with the shortage and find a place to live. A much smaller group of homeless people spends more time in the system utilizing more of the housing resources at a higher cost. Many chronically homeless individuals actually live in the system and use these resources and other public high cost resources such as hospitals and jails.

Objective: Assist those who are homeless to exit as quickly as possible through a housing first approach.

Strategy: Expand the availability of affordable permanent and supportive housing.

Action Steps:

- Create 800 new permanent supportive housing units for persons with disabilities utilizing Homeless Assistance CoC over the next 10 years.
- Within 24 months, build/locate a minimum of 50 units of permanent supportive housing for the chronically homeless utilizing HOME funds.
- Continue to work with housing agencies and CoC members to facilitate additional housing subsidies for persons with disabilities who can live independently in market rate housing with appropriate supportive services.
- o Develop additional safe haven units for those reluctant to enter the current system of care.
- Address appropriate permanent supportive housing models to serve youth who are homeless.

COSA must also address housing availability in the short term by developing a housing placement service that can link households in interim housing with appropriate housing in the community. Current CoC members must be willing to seek new alternatives to the current managing homelessness approach. In moving to the Housing First model, it is critical to ensure that appropriate standards are in place all phases of housing (emergency, transitional and permanent housing) and that and that individuals are placed in suitable settings with the least restrictive environments possible. It is also crucial to work with shelter and transitional housing providers in the conversion to Housing First, assuring them of a place in the new housing and service delivery system.

Strategy: Improve access and coordination of affordable housing and services.

Action Steps:

- Rapidly re-house the homeless by instituting the Housing First Model for special homeless populations within the next 24 months.
- o Provide on-site support services to the chronic homeless living in permanent housing.
- Utilize existing housing stock owned by the City for affordable housing development with HOME and CDBG funds.
- Secure ongoing public revenue streams dedicated to housing, such as the Housing Trust Fund and rental assistance programs.
- o Coordinate housing services through preventive case management.
- Develop bridge funding for tenant-based rental assistance utilizing HOME funds.
- Coordinate with the San Antonio Housing Authority and local homeless shelters to create a MOU that will facilitate rapid housing of clients while the agencies provide services that lead to self-sufficiency.

Strategy: Locate and access more affordable permanent housing units.

Action Steps:

o Increase access to public housing using the model proposed to the San Antonio Housing Authority.

4) Build the Infrastructure

COSA and the CoC believe that housing stability cannot be attained or maintained without the ability to access resources and supports that sustain the homeless in a time of crisis. Homeless individuals need appropriate health care that includes mental health and substance abuse treatment and they need income supports. For those who live in abject poverty with a frightening disease the need for services is intense and calls for totally integrated case management. The existing system is referral-based and the result is many times fragmented care. COSA is also evaluating the effectiveness of its current housing and service delivery system in serving homeless families and the chronic homeless. Currently, COSA facilities mix both populations together. The City's current strategy is to consolidate these populations in separate facilities to better serve the particular needs of each group.

Objective: Address housing, income and service needs of the homeless in San Antonio.

Strategy: Collaborate to provide seamless access to services. Case managers across agencies and systems work together to develop one plan of action for the client.

Action Steps:

- Each agency assures that the client attains goals as documented in the HMIS.
- o Utilize the HMIS to determine goal success and unmet need.
- o Provide the training necessary to build this team approach for the client.
- Combine aggressive street outreach with integrated systems of primary care, mental health and substance abuse services, case management, and client advocacy.
- o Increase access to public bathrooms.

Strategy: Periodically revise strategy for shelter infrastructure.

Action Steps:

- O Place current City properties offering homeless service on the market within the next three years (the Dwyer Center and the San Antonio Metropolitan Ministries shelter).
- o COSA will use proceeds from the sale to create more campus-like environments better suited to the needs of these populations.

The current system for determining food stamp eligibility is extremely complex and burdensome to both the recipient and the state. Health and Human Services Commission (HHSC) administrators report over-burdened staff, with caseloads that are increasingly unmanageable. Technologically and administratively restructuring the intake process in the Food Stamp program could improve the effectiveness by reducing the administrative burden and by improving access to benefits for those in need. This effort will be coordinated with the state's plan to establish call centers, as well as with the City's Leadership in Action Program, and food stamp outreach through delegate agency contracts.

The service delivery must also address income and employment. While many who are homeless get by and make due with little or no income, the provision of supports to access additional income and supported employment are necessary if we are to truly address ending homelessness. Attempts to change the system must also work within current transportation systems to assure access to services and to employment are met.

Strategy: CoC members will initiate a collaborative effort through the San Antonio Food Bank and other food pantries in the region to develop intake procedures.

Action Steps:

- Simplify the food stamp application and eligibility determination systems technologically and administratively.
- o Improve public access, awareness, and understanding of the food stamp program.
- Coordinate the efforts of private non-profit and for profit corporate entities within the region's local assistance programs to ensure a more seamless and accessible network of services.
- Oreate four one-stop centers to provide services, including medical service and ID recovery. Instead of many agencies duplicating services, and only providing referrals, the one-stop center will function as a way for a homeless person to be informed of all services available to them.
- O Pilot program results as a model for implementation in all regions of Texas and potentially for other federal, state and local assistance programs.

Strategy: Strengthen the provision of integrated, coordinated supports through mainstream resources that are necessary for successful transitions to permanent supported housing.

Action Steps:

- Expand and integrate employment services to ensure a continuum of employment opportunities for the homeless.
- Identify core services offered to homeless under Workforce Investment Act.
- o Connect to local group, Texas Workforce Advocates.
- O Perform gaps analysis to determine gaps in available mainstream employment services.
- o Expand availability of supported employment and vocational rehabilitation.
- Create expanded transportation services to increase employment opportunities.
- Expand availability of subsidized transportation options through MOU with local transit system to offer reduced rates for the homeless.
- Coordinate with the San Antonio Housing Authority and local homeless shelters to create a MOU that will facilitate rapid housing of clients while the agencies provide services that lead to self-sufficiency.

Objective: Inform and educate legislative and civic and authorities on issues related to homelessness and progress on the implementation of the 10 Year Plan to End Homelessness.

Strategy: Update public officials regularly utilizing multi-focal approach.

Action Steps:

- Designated Continuum of Care members will meet with two City Council and two County Commissioners per quarter to inform and update on the issues relating to homelessness.
- Send monthly emails with content provided by CoC members to public officials.
- Create and implement an annual "state of the community" focusing on homeless (and hunger) issues.

Objective: Inform and educate the general public on issues related to homelessness, prevention of homelessness and progress on the implementation of the 10 Year Plan.

Strategy: Create and launch a public awareness campaign.

Action Steps:

- Create a speakers bureau which could address a variety of civic, religious, and corporate groups.
- Run public service announcements regarding homelessness on public radio/TV once a week.
- o Develop one program on homelessness per month on Catholic TV.
- Open an art exhibit highlighting the homeless at one local university in conjunction with the Texas Homeless Network Conference.

###

Appendix A: 2003 San Antonio Survey Data for the USCM Report

| Homeless Population | Number | Percentage |
|--------------------------|--------|------------|
| Mentally Ill | 6,292 | 25% |
| Substance Abusers | 5,034 | 20% |
| AIDS/HIV-related illness | 503 | 2% |
| Employed | 3,775 | 15% |
| Veterans | 1,510 | 6% |

| Homeless Population | Number | Percentage |
|-----------------------------------|--------|------------|
| Members of Families with Children | 12,333 | 49% |
| Single Men | 7,047 | 28% |
| Single Women | 3,272 | 13% |
| Unaccompanied Youth | 2,517 | 10% |
| Total | 25,169 | 100% |

Appendix B: Members of the Mayor's Task Force on Hunger and Homelessness

The chairs of the Task Force are Council member Patti Radle and Council member Julian Castro. Many of the Task Force members also participate in the San Antonio/Bexar County Continuum of Care. The members of the Task Force are:

- Warren Alexander (First Presbyterian Church)
- Jessica Arevalo (District 7 for Councilmember Castro)
- Tim Baisdon (Christian Hope Resource Center)
- Renee Barrett (Texas Department of Human Services
- Sharon Baughman (Christian Senior Services)
- Rod Chisholm (Oak Hills Church)
- Laura Cisneros (City of San Antonio)
- Joseph Bonilla (University of the Incarnate Word)
- Chula Boyle (San Antonio Independent School District)
- Rebecca Brune (United Way of San Antonio/Bexar County)
- Dennis Campa (City of San Antonio, Department of Community Initiatives)
- Rosalinda Cisneros (Community Representative)
- Eric Cooper (San Antonio Food Bank)
- Michele Cortez (Roy Maas Youth Alternatives)
- Jim de la Cruz (Roy Maas Youth Alternatives)
- Dena Dalton (Trinity Baptist Ministries)
- Mary Damsgaard (United Way of San Antonio and Bexar County)
- Catarina Delgado (American GI Forum)
- Ramiro Fernandez (City of San Antonio, Department of Community Initiatives)
- John Flowers (Travis Park United Methodist Church)
- Estella Garza (San Antonio Independent School District)
- Sue Gelinas (Travis Park United Methodist Church)
- Ed Grubb (Centro Med)
- Rene Gauna (City of San Antonio, Department of Community Initiatives)
- Matthew Hackler (City of San Antonio, Department of Community Initiatives)
- Thomas P. Harrell (Seton Home)
- Holly Harrison (City of San Antonio, Department of Community Initiatives)
- Cindy Hatch (Family Violence Services)
- Llewellyn Hille (Bread for the World)
- Marissa Jimenez (City of San Antonio)
- Seth Keuhn (Daily Bread Ministries)
- Frankie Klonek (Daily Bread Ministries)
- Loressa Leal (Holy Spirit Catholic Church)
- Winnie Martin (MANNA)
- Grace Moser (Health and Human Services Commission)
- Yvette Mouton (SBC)
- Michael Ledesma (VIA Metropolitan Transit)
- Ignacio Leija (American GI Forum)
- Bob Martindale (San Antonio Metropolitan Ministries)
- Gayle McDaniel (University Methodist Church)
- Milt McFarland (Christian Assistance Ministries)

- Carolyn Meyer (Holy Spirit Catholic Church)
- Peter Monod (Archdiocese of San Antonio)
- Rolando Morales (City of San Antonio, Department of Community Initiatives)
- Ana Novoa (St. Mary's University School of Law)
- Chris Pantuso (Pantuso Enterprises)
- Luther Payne (Travis Park United Methodist Church)
- Marta Pelaez (Family Violence Services)
- Council Member Patti Radle
- John Reason (Travis Park United Methodist Church)
- Arlene Rhodes (Health and Human Services Commission)
- Ernest Lee Robinson (Center for Health Care Services)
- Cecilia Rodriguez (District 5 for Council Member Radle)
- Howard Rogers (San Antonio Metropolitan Ministries)
- Henry Ross (City of San Antonio)
- Norma Saldaña (City of San Antonio, Department of Community Initiatives)
- Steve Saldaña (Catholic Charities)
- Jay Sanchez (El Centro de Barrio)
- Connie Sheppard (Texas Cooperative Extension, Bexar County)
- Major Robert Stutts (The Salvation Army)
- Sister Yolanda Tarango (Visitation House)
- Pamela Taylor (Dress for Success)
- Joe Tedesco (Serving San Antonio Newspaper)
- Linda Tedesco (Serving San Antonio Newspaper)
- Paco Velez (San Antonio Food Bank)
- Ed Violett (St. Mary's University)
- Doug Watson (Healy Murphy)
- Warren Weir (Holy Spirit Catholic Church)
- Brian Wicks (Resurrection Ministries)
- Barbara Zachary (Health and Human Services Commission)
- Bob Zepeda (The Salvation Army)

Appendix C: Underlying Assumptions & Definitions; Factors Influencing Homelessness, Degrees of Homelessness, and Housing Options

Factors Influencing Homelessness:

Systemic Factors:

Conditions beyond an individual or family's direct control that act to create and/or perpetuate homelessness include:

- The critical lack of affordable housing, including a significant reduction in public housing units;
- Fragmented, under-funded mental health and substance abuse treatment system;
- Low-wage jobs that do not pay enough for a worker, working 40 hours a week, to afford decent housing;
- Limited or non-existent transportation to better-paying jobs in suburbs; and
- An educational system that leaves many unprepared for the job market.

Individual Risk Factors:

Conditions or characteristics that make it difficult for an individual to function well enough to meet his or her housing needs or meet the housing needs of children in their care, and often lead to homelessness include:

- Substance abuse/addiction;
- Severe and persistent mental illness and mental disorders, such as post-traumatic stress disorder, that impair an individual's ability to function well enough to work and/or remain appropriately housed without supportive services;
- Histories of abuse as children and/or as adults:
- Learning disabilities;
- Low educational levels:
- Poor financial management and resultant bankruptcy/credit issues;
- Poor job skills;
- Poor job histories;
- Histories of dependence on public assistance.

The Degrees of Homelessness:

Episodically Homeless

Individuals and families experiencing one or more episodes of literal homelessness are episodically homeless. It is homelessness over the course of a stated period of time. For example, an individual or family may spend one or more nights in an emergency shelter twice over the course of three years.

Chronically Homeless

The U.S. Department of Housing and Urban Development currently defines chronically homeless as an unaccompanied, disabled individual who has been persistently homeless for more than a year or who has been homeless for four or more episodes in the prior three years. This definition, recently adopted after extensive debate within the federal government, appears to

acknowledge that chronically homeless people are highly likely to cycle in and out of housing, the streets, emergency shelters, hospitals, mental health facilities, and jail for varying periods of time.

Temporarily Displaced or Transitional Homelessness

Individuals and families that usually manage to maintain residential stability but are temporarily displaced from permanent housing due to a variety of factors and simply need temporary shelter/housing assistance to regain residential stability. Displacing factors may include a sudden loss of income, a medical emergency, a catastrophic illness, a fire, or other destabilizing situation.

Precariously or Marginally Housed

Individuals or families who lack a permanent residence and are most often living doubled-up or tripled-up with other family members or friends, and who are subject to having to leave that housing in the very near future. Others are living more or less independently on extremely limited income, often in sub-standard housing, with a high potential for eviction due to non-payment of rent, utility cutoff, or condemnation of the property due to the condition of the property.

Housing Options:

Emergency Shelter

Temporary shelter provided as an alternative to sleeping in places not meant for human habitation. Emergency shelter provides a place to sleep, humane care, a clean environment and referrals to other agencies. Length of stay is typically limited to 60 days, and there are generally no minimal criteria for admission (*i.e.*, mental illness, alcohol and/or drug addicted). Shelter is usually free for some period of time, with clients required to pay for additional nights of shelter depending on client's income and circumstances.

Transitional Housing Programs

Temporary housing situations that offer opportunities and comprehensive services for up to 24 months in an effort to assist homeless persons in obtaining a level of self-sufficiency. Residential facilities for providing drug and/or alcohol treatment or treatment and supportive services for persons with mental illness and/or dual diagnoses are included in this category if the population served is homeless.

Permanent Supportive Housing

Safe, decent, affordable housing that provides the necessary support services to enable formerly homeless persons with special needs to live independently. Permanent supportive housing options are designed to meet the specific needs of clients based on the client's level of functioning. Housing options typically range from group homes to single-room occupancy units to apartment units and include a range of service options such as:

- 24-hour (awake), seven days per week supervision by staff;
- 24-hour (peak hours awake) seven days per week supervision by staff;
- Supervision by staff during peak hours only;
- Supervision on-site part-time as needed;

• No staff on site, but extensive services provided by project sponsor or collaborating agency.

Safe Haven

A specialized facility for providing shelter and services to chronically homeless, mentally ill individuals who are unable or unwilling, because of their illness, to comply with the rules of traditional shelters and transitional housing programs. Safe Havens are low-demand, high expectation with few requirements other than the clients abstain from alcohol or other drug use on the premises and not exhibit threatening behavior. High expectations reflect the fact that operators of these facilities recognize that with time and appropriate, non-threatening services, clients often become more amenable to accepting medications and other stabilization services as a first step toward obtaining appropriate housing, services and benefits.

Public Housing

The San Antonio Housing Authority serves the housing needs of nearly 21,000 households in the San Antonio area. SAHA owns and manages more than 6,300 public housing units, which includes 30 family housing developments and 31 senior housing developments, along with a number of scattered site properties. SAHA also administers the Section 8 Housing Choice Voucher Program for over 12,000 households though privately owned rental property. In November of 2003, the number of people on the waiting list was 11,160.

Appendix D: Funding Streams

Federal "Mainstream" Programs Include:

- The U.S. Department of Agriculture Food and Nutrition Services, Food Stamp Program
- The U.S. Department of Labor's Workforce Investment Act Program, providing an
 orientation to services offered; updates on available jobs; computers for researching job
 opportunities and self-assessment of work interests; assistance with transportation to
 apply for jobs, and assistance with transportation until the client receives his/her
 paycheck.
- The U.S. Department of Housing and Urban Development's Community Development Block Grant (CDBG); HOME Program; Housing Opportunities for Persons with AIDS (HOPWA) Program; Section 8 Housing Assistance Payment Program; and public housing program.
- The Social Security Administration's Supplemental Security Income (SSI) Program and the Social Security Disability Insurance Program.
- The U.S. Department of Justice's Program for Victims of Domestic Violence.
- The U.S. Department of Health and Human Services. Temporary Assistance for Needy Families (TANF); Social Services Block Grant Program; Alcohol, Drug and Mental Health Block Grant Program; Ryan White Program; Women, Infants and Children (WIC) nutrition program, and the Children's Health Insurance Program (CHIP).

Federal Programs Providing Funding for Local Homeless Assistance Programs:

- The U.S. Department of Housing and Urban Development's Continuum of Care Program.
- The Federal Emergency Management Agency's (FEMA) Emergency Food and Shelter Program.
- The Veterans Administration's Per Diem Program; and permanent housing voucher programs for homeless veterans.
- The U.S. Department of Labor's Homeless Veterans Reintegration Program
- The U.S. Department of Health and Human Services. Health Care for the Homeless and Projects to Assist in Transition from Homelessness (PATH) Programs.
- The U.S. Department of Education's Homeless Children's Program.

Appendix E: Timeline

| O | bjectives, Strategies and Action Steps with Timeline: | | | | | | | | | | |
|-----|--|-----------|-------|--|------|-----------|----------|------|------|----------|------|
| Not | te: The checkmark indicates when action step should be completed. | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |
| 1) | Plan for Outcomes | | | | | | | | | | |
| Ol | bjective: Collect better data throughout the region | | | | | | | | | | |
| St | rategy: Implement & expand the use of the Homeless Management Information System | | | | | | | | | | |
| 1 | Require certification from all contractors to enter certain data required as standard by COSA | | | R | | | | | | | |
| 2 | Require certification from all HUD Continuum of Care recipients that they will enter certain data | | | Ŋ | | | | | | | |
| 3 | Identify barriers and address issues that continue to prevent agencies, particularly state and federal mainstream agencies, from using the HMIS | Ŋ | | | | | | | | | |
| 4 | Develop Memoranda Of Understandings (MOUs) with mainstream providers that lead to real time data collection regarding mainstream service delivery | | M | | | | | | | | |
| O | bjective: Plan for outcomes | | | | | | | | | | |
| St | rategy: Develop outcome measures and monitoring procedures to determine program | | | | | | | | | | |
| | fectiveness | | | | | | | | | | |
| 1 | Develop monitoring tools and standards | \square | V | | | | | | | | |
| 2 | Monitor all Continuum of Care Homeless Assistance programs for effectiveness | Ø | Ø | ⊴ | Ø | Ø | Ø | | Ŋ | | |
| 3 | Determine HUD goals are being met | M | A | N | Ŋ | \square | A | A | K | N | V |
| St | rategy: Expand outreach to build and strengthen relationships with chronic homeless | | | | | | | | | | |
| 1 | Expand CoC mobile outreach team and develop mobile crisis response team that includes mental health, addictive disorder, veterans and medical components | | | | | Ø | | | | | |
| 2 | Deliver sack lunch and other basic needs to street chronic homeless at least once a week | 2 | - | | | | ├- | - | | | |
| 3 | Provide CoC emergency info cards to street homeless and those who come in contact with population | <u>*</u> | Ø | - | | - | - | | - | \vdash | |
| 4 | Provide CoC pamphlets to homeless and those who serve them | - | N | | | + | \vdash | | - | | |
| 5 | Educate staff at hospitals and jails regarding info and referral to housing and services | | G. S. | Ø | | | | | | | |

| | bjectives, Strategies and Action Steps with Timeline: | | | | | | | | | | |
|-----------------------|--|------|----------|------------|------|-----------|------|------|------|------|------|
| Not | e: The checkmark indicates when action step should be completed. | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |
| 6 | Allow for partial access of HMIS system to public to use an online directory of resources | | | | | V | | | | | |
| | rategy: Utilize HMIS reporting tools as a mechanism for service delivery design and plementation | | | | | | | | | | |
| 1 | Produce data on homeless recidivism and utilization of mainstream programs and services | | | Z I | | | | | | | |
| 2 | Measure outcomes of current discharge planning efforts | | Ø | | | | | | | | |
| 3 | Identify percentage of population being released to homelessness from institutions (shelters/hospitals/jails/prisons/mental health institutions/treatment centers/ foster care systems) | | Ø | | | | | | | | |
| 4 | Produce data on current request and utilization of homeless prevention (rent and utility assistance) | | B | | | | | | | | |
| 5 | Coordinate project development throughout the region addressing identified gaps based on documented need | | | Ŋ | | | | | | | |
| Ob | Homelessness Prevention ojective: Prevent homelessness through comprehensive strategies including early tervention and discharge planning | | | | | | | | | | |
| | | | | | | | | | | | |
| an | rategy: COSA will advocate for housing trust funds to expand housing for low-income d homeless individuals | | | | | | | | | | |
| an 1 | d homeless individuals Create a statewide advocacy coalition on homelessness comprised in membership by the various | | | 3 1 | | | | | æ | | |
| 1 | d homeless individuals Create a statewide advocacy coalition on homelessness comprised in membership by the various continuums in Texas | | | N | | Z | | | , a | | |
| 1 2 3 | d homeless individuals Create a statewide advocacy coalition on homelessness comprised in membership by the various | | | N | | \square | | | | | |
| 2 | d homeless individuals Create a statewide advocacy coalition on homelessness comprised in membership by the various continuums in Texas Focus advocacy effort to authorize a public levies to establish the trust | | ☑ | N | | | | | 2 | | |
| 1 2 3 | d homeless individuals Create a statewide advocacy coalition on homelessness comprised in membership by the various continuums in Texas Focus advocacy effort to authorize a public levies to establish the trust Pass a legislative agenda will be designed to pass a state law for special local fees | | Ø | ☑ | | | | | | | |
| 1 2 3 4 5 | d homeless individuals Create a statewide advocacy coalition on homelessness comprised in membership by the various continuums in Texas Focus advocacy effort to authorize a public levies to establish the trust Pass a legislative agenda will be designed to pass a state law for special local fees CoC and Homeless Action Coalition will pursue possibility of merger | | Z | | | | | | | | |
| 1 2 3 4 5 | Create a statewide advocacy coalition on homelessness comprised in membership by the various continuums in Texas Focus advocacy effort to authorize a public levies to establish the trust Pass a legislative agenda will be designed to pass a state law for special local fees CoC and Homeless Action Coalition will pursue possibility of merger Create a micro-lending program for the homeless | | ☑ | | | | | | | | |
| 1 2 3 4 5 | Create a statewide advocacy coalition on homelessness comprised in membership by the various continuums in Texas Focus advocacy effort to authorize a public levies to establish the trust Pass a legislative agenda will be designed to pass a state law for special local fees CoC and Homeless Action Coalition will pursue possibility of merger Create a micro-lending program for the homeless rategy: Improve 24-hour access to information and referral hotline coordinated through | | ⊠ | | | | | | | | |

| o | bjectives, Strategies and Action Steps with Timeline: | | | | | | | | | | |
|-----|--|------|------|------|------|------|------|------|---------------|------|------|
| Not | e: The checkmark indicates when action step should be completed. | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |
| 3 | Identify at risk clients and link to prevention programs | | | Z | | | | | | | |
| 4 | Provide ongoing community resources to support sustainability | | | | | K | | | | | |
| 5 | Pursue prevention efforts at all food pantries throughout the region, utilizing messaging to alert information and referral experts in efforts to prevent homelessness | | N | | | | | | | | |
| | rategy: Increase linkage to permanent housing and services for persons leaving stitutions and for the chronic homeless | | | | | | | | - 13° - 3° | | |
| 1 | Interact with leadership in public systems of care to establish multi-disciplinary re-entry teams prior to discharge | | | | 73 | | | | | | |
| 2 | Actively seek to collaborate with Emergency food and Shelter Grant local boards to coordinate prevention dollars | | | | | A | | | | | |
| 3 | Utilize HOME funds available through participating jurisdictions to provide tenant-based rental assistance | | Ø | | | | | | | | |
| 4 | Provide symposium focusing on homeless prevention | | | | | K | | | | | |
| 5 | Create ex-offenders resource guides | | M | L | | | | | | | |
| 6 | Initiate planning to coordinate discharge of chronically homeless with CoC's case management program or HMIS | | Ø | | | | | | | | |
| 7 | Ensure that service agencies establishes case plans prior to discharge that includes selection of appropriate supportive housing and track services in HMIS to follow client beyond supportive housing placement | | | | | M | | | | | |
| 8 | Facilitate creation and training for community-based teams to provide prevention services in targeted neighborhoods | | Ø | | | | | | | | |
| 9 | Ensure youth aging out of foster care have access to resources | | | 丒 | | | | | | | |
| 10 | Increase number of respite beds and youth group homes available in the community | | | | | M | | | | | |
| | rategy: Continue to educate community, consumers and program staff regarding the | | | | | | | | | | |
| 1 | Fair Housing Program will continue to provide staffing sessions regarding tenant rights | N | N | N | N | R | Ŋ | | Ŋ | N | M |
| 2 | CoC and Fair Housing Program will continue to provide information to landlords regarding special needs of the homeless | 3 | 3 | Ŋ | Ø | Ø | Ø | Ø | Ŋ | Z | Ø |

| | | | | | | - | | | | \neg | |
|-----|--|----------|------|------|------|------|------------|----------|-------------------|--------------|----------|
| 0 | bjectives, Strategies and Action Steps with Timeline: | | | | | | | | | | |
| Not | e: The checkmark indicates when action step should be completed. | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |
| 3) | Housing First | | | | | | | | | | |
| | ojective: Assist those who are homeless to exit as quickly as possible through a housing st approach | | | | | | | | | | |
| Stı | rategy: Expand the availability of affordable permanent and supportive housing | | | | | | | | | | |
| 1 | Create 800 new permanent supportive housing units for persons with disabilities utilizing Homeless Assistance CoC over the next 10 years | | - | | | | | | | | Ø |
| 2 | Within 24 months, build/locate a minimum of 50 units of permanent supportive housing for the chronically homeless utilizing HOME funds | | Ø | | | | | | | | |
| 3 | Continue to work with housing agencies and CoC members to facilitate additional housing subsidies for persons with disabilities who can live independently in market rate housing with appropriate supportive services | | | | | A | | | | | i I |
| 4 | Develop additional safe haven units for those reluctant to enter the current system of care | | | | | R | | | | | |
| 5 | Address appropriate permanent supportive housing models to serve youth who are homeless. | | | | | | | M | | | |
| St | rategy: Improve access and coordination of affordable housing and services | | | | | | | | | | |
| 1 | Rapidly re-house the homeless by instituting the Housing First Model for special homeless populations within the next 24 months. | | Ø | | | | | | | | |
| 2 | Provide on- site support services to the chronic homeless living in permanent housing | | M | | | | | | | | |
| 3 | Utilize existing housing stock owned by the city for affordable housing development with HOME and CDBG funds | | | | | A | | | | | |
| 4 | Secure ongoing public revenue streams dedicated to housing, such as the Housing Trust Fund and rental assistance programs | | | | | Ø | | | | | |
| 5 | Coordinate housing services through preventive case management. | | 1 | | | M | <u>L</u> . | | $ldsymbol{f eta}$ | ot | <u> </u> |
| 6 | Develop bridge funding for tenant-based rental assistance utilizing HOME funds. | <u> </u> | | | | N | | <u> </u> | <u> </u> | $oxed{oxed}$ | <u> </u> |
| 7 | Coordinate with the San Antonio Housing Authority and local homeless shelters to create an MOU that will address the need of quickly housing clients while the agencies provide services that lead to self-sufficiency | | | | | | | | | | |

| O | bjectives, Strategies and Action Steps with Timeline: | | | | | | | | | | |
|-----|---|----------|----------|----------|---------|----------|----------|------|----------|------|------|
| Not | e: The checkmark indicates when action step should be completed. | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |
| Str | ategy: Locate and access more affordable permanent housing units | | | | | | | | | | |
| 1 | Increase access to public housing using the model proposed to the San Antonio Housing Authority | | | | | M | | | | | |
| 4) | Build the Infrastructure | | | | | | | | | | |
| | ejective: Address housing, income and service needs of the homeless in San Antonio | | | | | | | | | | |
| Sti | rategy: Implement a wraparound service approach that encourages case managers ross agencies and even across systems to work together to develop one plan of action for e client | | | | | | | | | | |
| 1 | Provide the training necessary to build this team approach for the client | | M | | | | | | | | |
| 2 | Utilize the HMIS to determine goal success and unmet need | | | | | M | | | | | |
| 3 | Each agency assures that the client attains goals as documented in the HMIS | | <u> </u> | | | M | <u> </u> | | | | |
| 4 | Combine aggressive street outreach with integrated systems of primary care, mental health and substance abuse services, case management, and client advocacy | | | | | M | | | | | |
| 5 | Increase access to public bathrooms | | M | | | | | | | | |
| Sti | rategy: Periodically revise strategy for shelter infrastructure | | | | | | | | | | |
| 1 | Put on the market current city properties offering homeless service, the Dwyer Center and the San Antonio Metropolitan Ministries shelter. | | | | Ŋ | | | | | | |
| 2 | COSA will use proceeds from the sale to create more campus-like environments better suited to the needs of these populations. | | | | N | | | | | | |
| Q4 | rategy: CoC members will initiate a collaborative effort through the San Antonio Food | | | | | | | | | | |
| Ra | ank and other food pantries in the region to develop intake procedures | | | | | | | | | | |
| 1 | Simplify the food stamp application and eligibility determination systems technologically and | | | | | | | | | | |
| | administratively | <u> </u> | - | | \perp | | _ | - | <u> </u> | | |
| 2 | Improve public access, awareness, and understanding of the food stamp program | 1 | 1 | I | | | | | | | |

| Coordinate the efforts of private non-profit and for profit corporate entities within the region's local assistance programs to ensure a more seamless and accessible network of services In the course of ten years, the Task Force will work to open four one-stop centers for Homeless Services. Instead of many agencies duplicating services, and only providing referrals, the one-stop center will function as a way for a homeless person to be informed of all serves available to them. Pilot program results as a model for implementation in all state regions of Texas and potentially to other federal, state and local assistance programs Strategy: Strengthen the provision of integrated, coordinated supports through mainstream resources that are necessary for successful transitions to permanent supported housing Expand and integrate employment services to ensure a continuum of employment opportunities for the homeless Identify core services offered to homeless under Workforce Investment Act Connect with Texas Workforce Advocates Perform gaps analysis to determine gaps in available mainstream employment services Perform gaps analysis to determine gaps in available mainstream employment services Expand availability of supported employment and vocational rehabilitation Coreate expanded transportation services to increase employment opportunities | Objectives, Strategies and Action Steps with Timeline: | | | | | | | | | | |
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| 3 Create and implement an annual "state of the community" focusing on homeless (and hunger) issues | | | M | | | | | | | | |
| | 3 Create and implement an annual "state of the community" focusing on homeless (and hunger) issues | | Ø | | | | | | | | |
| | preventation of homelessness and progress on the implementation of the 10 Year Plan | | | | | | | | | | |

| Objectives, Strategies and Action Steps with Timeline: | | | | | | | | | | |
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| Note: The checkmark indicates when action step should be completed. | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |
| Strategy: Create and launch a public awareness campaign through major media outlets as | | | | | | | | | | |
| well as community art exhibits, and the internet | | 1 | 1 | | | | | | | |
| 1 Create a speakers bureau which could address a variety of civic, religious, and corporate groups | | M | | | | LI | | | | |
| 2 Run public service announcements on homelessness on public radio/TV once a week | | M | | | | | | | | |
| 3 Develop one program on homelessness a month on Catholic TV | | Ø | | | | | | | | |
| 4 Open an art exhibit highlighting homelessness at one local university in conjunction with the Texas | | Ø | İ | | | ((| | | İ | Ì |
| Homeless Network Conference | | <u> </u> | | | | <u> </u> | | | | |

A RESOLUTION

APPROVING THE TEN-YEAR PLAN FOR FOOD SECURITY IN SAN ANTONIO; AND AUTHORIZING IMPLEMENTATION OF THE PLAN.

WHEREAS, Mayor Ed Garza established the Mayor's Task Force on Hunger and Homelessness in the Summer of 2003 and appointed City Council Member Julian Castro to serve as the chairman of the Hunger Subcommittee; and WHEREAS, Mayor Garza charged the Task Force with developing short and long-term strategies for addressing the interconnected issues of hunger and homelessness; and WHEREAS, the Ten-Year Plan for Food Security in San Antonio (Plan) advances the City of San Antonio toward a concerted effort to address issues of hunger as a community; and WHEREAS, the Plan is the result of a sixteen-month process of the Mayor's Task Force on Hunger and Homelessness; and WHEREAS, efforts were coordinated with academicians, businesses, congregations, consumers, state agencies, service providers and various community stakeholders; NOW THEREFORE: BE IT RESOLVED BY THE CITY COUNCIL OF THE CITY OF SAN ANTONIO: **SECTION 1.** The Ten-Year Plan for Food Security in San Antonio is approved and authorized for implementation. A copy of said plan is attached hereto and incorporated herein for all purposes as Attachment I. **SECTION 2.** This Resolution shall become effective on and after December 23, 2004. PASSED AND APPROVED this _____ day of ______, 2004. **MAYOR** ATTEST: ____ City Clerk

City Attorney

APPROVED AS TO FORM: ____

Attachment I

City of San Antonio, Texas Mayor's Task Force on Hunger and Homelessness

Ten-Year Plan for Food Security

January 13, 2005

Executive Summary

For the past two years there has been a twenty-eight percent increase demand for emergency food assistance in San Antonio/Bexar County [U.S. Conference of Mayors Report (USCMR); 2003]. Thirty-eight percent of individuals requesting emergency food assistance are members of families with children. The number of elderly persons requesting emergency food assistance in San Antonio and Bexar County increased by 49% from 2002 to 2003 (USCMR). To address the issue of hunger and the interconnected issue of homelessness in San Antonio, Mayor Ed Garza established the Mayor's Task Force on Hunger and Homelessness in the summer of 2003.

The Task Force made recommendations to the City Council of San Antonio regarding hunger and homelessness initiatives on July 30, 2003. In response to the Task Force recommendations, City Council appropriated \$1,014,000 in one-time resources on September 18, 2003 of its Fiscal Year 2004 Operating Budget to augment support to hunger prevention and support services for homeless individuals. This included funding for two downtown day centers for homeless individuals; a mobile canteen to feed homeless and/or hungry persons; two food stamp outreach programs, and additional support to food pantries. A partnership between the Department of Community Initiatives and the San Antonio Food Bank (SAFB) was created to enhance food stamp outreach efforts where SAFB staff trained volunteers and food pantry staff on how to complete food stamp applications. From January 2004 to September 2004, 2,727 families were assisted with Food Stamp applications.

The establishment of a Mobile Canteen, which provides evening meals to chronic homeless individuals who do not access shelters, served a total of 13,294 meals to 3,747 unduplicated clients between January and September 2004. Additionally, the City of San Antonio provided funding to expand SAFB's Project Hope, which distributed 2.8 million pounds of food to 4,478 seniors in Fiscal Year 2004.

Aside from short term plans to address the immediate food security needs of San Antonio, the subcommittee on Hunger, chaired by Council member Julian Castro, created the following ten-year plan to address food security in San Antonio/Bexar County. The present report includes an overview of food security in San Antonio/Bexar County as well as one, five, and ten-year strategies to address food security and hunger in San Antonio. The Hunger subcommittee, comprised of health and human service providers, a local food bank, food pantries, churches, city and state agencies, university researchers, and representatives of the community, identified the following four goal areas of work to be addressed in one, five, and ten year intervals: (1) Build Resources to Meet Food Security Needs; (2) Educate to Improve Quality of Life; (3) Create Synergy; and (3) Act on Meaningful Data.

Organizations from the Mayor's Task Force on Hunger and Homelessness have been identified to lead implementation efforts of each of the four goal areas. The Annie E. Casey Foundation's Leadership in Action Program (LAP) in San Antonio will oversee implementation and evaluation for the hunger and homelessness plans. The four work groups established by LAP to improve the well being of families, children and the community of San Antonio, are Food Security, Shelter Security, Health Security, and Financial Security.

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Vision Statement

By the year 2014, San Antonio will have an expanded commitment to children and seniors, coordinated access and outreach, effective and responsive public policy, comprehensive food supply and distribution, compassionate community action, increased prosperity for all, and an informed community on health and wellness.

Introduction

In 2003, the U.S. Conference of Mayors (USCM) surveyed 25 major cities to obtain estimates on 1) the demand for emergency food assistance and emergency shelter and the capacity of local agencies to meet the demand; 2) the causes of hunger and homelessness and the demographics of the populations that experience these problems; 3) exemplary programs or efforts in the cities to respond to hunger and homelessness; 4) the availability of affordable housing for low income people; and 5) the outlook for the future and the impact of the economy on hunger and homelessness.

A Snapshot of Hunger in San Antonio

The U.S. Conference of Mayors Report: The 2003 data for the USCM Report indicates that from 2002 to 2003 there was a 7% increase demand for emergency food assistance in San Antonio/Bexar County. The increase in 2003 follows the previous year's increase demand of 20%. Community-based providers and government agencies in San Antonio

surveyed in the USCM Report state that the principal local cause of hunger could be attributed to poverty.

According to the United States Health and Human Service Federal Poverty guidelines, an individual that earns \$9,310 or less in one year is considered to live in poverty (2004). A family of four that makes \$18,850 or less is considered to be in poverty and most at risk of being food insecure. Of all families with children under 18 years, 20% live in poverty in San Antonio. Other major reasons families struggle to put food on the table include: unemployment and other employment-related problems; homelessness; poverty or lack of income; substance abuse; and limited life skills (USCMR, 2003).

Food Insecurity in San Antonio/Bexar County and Texas

The average rate of poverty for Bexar County is 16% (US Census, 2000). That means one in six people in our area live in poverty and, consequently, probably need to utilize emergency food services at least a few times annually. One in four children in Bexar County live in poverty and experience hunger at least once a month.

According to the 2000 U.S. Census, there are 144,314 adults, 65 years and older living in Bexar County. It is reported that 12.4% of these seniors live at or below the Federal Poverty guidelines (U.S. Census, 2000). The number of seniors 60 years and older requesting emergency food assistance in San Antonio and Bexar County increased by 49% from 2002 to 2003 (USCMR, 2003). The continued increase of food requests from seniors in San Antonio further underscores the existing need for services for this age group. High medication costs also place financial strains on seniors who at times find they need to choose between medical care and food. There are also older adults not only needing to provide food for themselves, but more and more of them are also supporting grown children and grandchildren. Nationally 6.3% of all children live in grandparent headed households (US Census, 2000).

Local agencies are reporting that families are requesting both emergency and long-term assistance. Thirty-eight percent of individuals requesting emergency food assistance are members of families with children. From 2002 to 2003, the number of families with children requesting emergency food assistance in San Antonio increased by 13% (USCMR, 2003). Last year's increase in the number of families with children requesting emergency food assistance follows a 17% increase from the year before.

While food requests have continued to increase for the past few years in San Antonio/Bexar County, food assistance facilities have, for the most part, been able to meet the demand (USCMR, 2003). The majority of food assistance providers stated that they have not had to turn people away who requested food assistance. The USCM Report however, still estimates that the overall demand for emergency food assistance that goes unmet in San Antonio is 10%.

Overview of Food Insecurity and Hunger in the United States

According to the United States Department of Agriculture (USDA) (2002), Texas is the second most food insecure state in the country. Food insecure families, as defined by the USDA, have a limited or uncertain availability of nutritionally adequate foods. These families may involuntarily cut back on meals, food portions or not know where they will receive their next meal. Adults in food insecure households may skip meals so children can eat and they may also take other serious measures to improve their financial situation that jeopardizes the adequacy of the family's diet.

The United States Department of Agriculture (USDA) defines **food security** as: access to enough food for an active, healthy life. At a minimum, food security includes: (1) the ready availability of nutritionally adequate and safe foods, and (2) an assured ability to acquire acceptable foods in socially acceptable ways (e.g., without resorting to emergency food supplies, scavenging or other coping strategies).

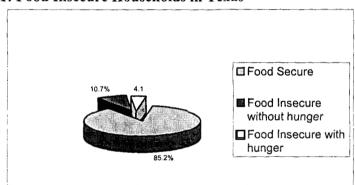
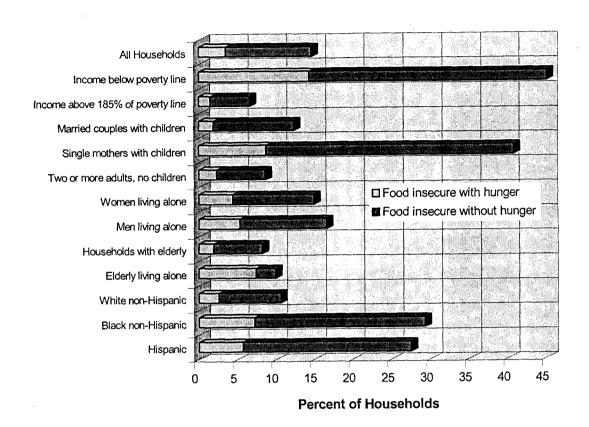


Chart 1: Food Insecure Households in Texas

In an annual report conducted by USDA, 11.1% of US households were found to be food insecure. The percentage of food insecure households in Texas was said to be 14.8% (Chart 1). Utilizing Texas food insecurity data and 434,948 as the number of households in San Antonio (US Census Bureau 2003 American Community Survey), there would be over 64,000 food insecure households in San Antonio (Chart 1).

Of the 14.8% food insecure households in Texas, over one-third had one or more household members who were hungry at some time during the previous year. National statistics indicate that those most at risk of food insecurity are households with incomes below the poverty level and single mothers with children (Chart 2). Families that are food insecure could improve their situation by taking advantage of USDA Food and Nutrition Services programs.

Chart 2: Food Insecure Households in the United States



Food Stamp Outreach

Specifically created by the Federal Food Stamp Act of 1964, Food Stamps are meant to supplement the incomes of low wage earning families to ensure they are able to purchase an adequate and affordable diet. In Bexar County however, 116,353 individuals, or 42% of eligible individuals did not participate in the Food Stamps Program (July 2004); they instead may have only utilized food pantries and other emergency food sites to make ends meet (Health and Human Services Commission). Stigma, misinformation, or language barriers are reasons cited by Food Stamp Outreach Workers for low participation.

In October 2003, changes were made in the food stamp criteria that deems many applicants previously denied now eligible. Unfortunately, individuals who are in a food-insecure environment are not aware of these changes.

To increase participation of the Food Stamp program the Department of Community Initiatives provided one time support to the Advocates Social Services of San Antonio and implemented a Food Stamp Outreach program with the San Antonio Food Bank (SAFB) in January of 2004. The efforts of 2004 were an enhancement to the SAFB outreach program. SAFB trained dozens of volunteers and food pantry staff on how to complete food stamp applications. Literature was also distributed to inform citizens of the availability of food stamps.

Through this enhancement of food stamp outreach, the SAFB has submitted 2,727 completed food stamp applications from January 2004 through September 2004. Through collaborative efforts with the Texas Association of Community Action Agencies and Health and Human Services Commission, the San Antonio Food Bank has assisted more than 10,000 people with their Food Stamp applications.

Through 2004/2005 contracts, The Department of Community Initiatives will continue to make provisions to its delegate agencies by requiring that they disseminate information to the general public on information about the Texas Food Stamp Program. Agencies are asked to assist families, who may be eligible for food stamps, in locating a program office and provide the necessary referrals to families.

The Mayor's Task Force on Hunger and Homelessness

To address the problems of hunger and homelessness in San Antonio, Mayor Ed Garza established the Mayor's Task Force on Hunger and Homelessness (Attachment A) in the summer of 2003, comprised of representatives of the community, as well as agencies that serve the homeless and provide food assistance. The chairs of the Task Force are Council member Patti Radle and Council member Julian Castro.

The Mayor appointed Council member Patti Radle to chair the Homelessness subcommittee and Council member Julian Castro to chair the subcommittee on Hunger. The charge of the taskforce was to develop short and long-term strategies for addressing the interconnected issues of hunger and homelessness. The long term goal was to develop a strategic plan to address hunger and homelessness in San Antonio including: 1) a ten year plan to address the problems of hunger in San Antonio, including a short-term plan to address hunger among seniors; 2) a five year initiative to stabilize the city's ability to manage the existing homeless service delivery system, and; 3) a ten-year plan, in conjunction with the San Antonio/Bexar County Continuum of Care, to end chronic homelessness.

On July 30, 2003, the Task Force completed its process of prioritizing recommendations.

- The first priority for hunger was to expand the San Antonio Food Bank's Project HOPE so that local seniors receive groceries at the City's Comprehensive Nutrition Program sites.
- The second priority for hunger was to increase funding for food pantries that serve the hungry and increase food stamp access through those food pantries.

- The first priority for homelessness was to develop 12 emergency shelter units for families. An additional priority was to support a mobile canteen for the chronically homeless.
- The second priority was expanding day center services.

Short Term Results

The City Council of the City of San Antonio, in response to the Task Force recommendations, appropriated \$1,014,000 in one-time resources on September 18, 2003 of its Fiscal Year 2004 Operating Budget to augment support to hunger prevention and support services for the homeless. This included funding for a partnership between the Department of Community Initiatives and the San Antonio Food Bank (SAFB) to enhance current food stamp outreach efforts. SAFB staff train volunteers and food pantry staff on how to complete food stamps applications. Through this program, as of September 2004 the SAFB had submitted 2,727 completed food stamp applications.

General Fund dollars also supported Food Pantry Enhancement, which allows contracting organizations to augment the purchase of food staples for their pantries. This program has successfully increased the amount of food available, while allowing pantries to obtain more nutritious food items, which tend to be more costly. A new initiative this year is the establishment of a Mobile Canteen, which provides evening meals to chronic homeless individuals who do not access shelters. Between January and September 2004, this program served a total of 13,294 meals to 3,747 unduplicated clients. During this same period, a congregate meal program also run by Corazón Ministries had served a total of 10,987 meals to 962 unduplicated clients. Additionally, the City has provided funding to expand SAFB's Project Hope, which has distributed 2.8 million pounds of food to 4,478 seniors in Fiscal Year 2004.

Long Term Plan to Address Hunger:

The Hunger Subcommittee of the Mayor's Task Force on Hunger and Homelessness, led by Council Member Julian Castro, has refined a 10-year plan to improve food security in San Antonio. Members of the task force include providers, pantries, food banks, churches, and civic organizations. The Subcommittee is seeking the Council's endorsement of the plan, which includes four goal areas:

- Build Resources to Meet Food Security Needs
- Educate to Improve Quality of Life
- Create Synergy
- Act on Meaningful Data.

In each of these areas, the Subcommittee members have outlined milestones against which to measure our community's progress at one, five and ten year intervals.

Implementation and Evaluation

Several organizations from the Mayor's Task Force on Hunger and Homelessness have been identified to lead implementation efforts of each of the four food security goal areas. Lead organizations that will carry out the implementation of specific goals and strategies are listed within this document. The Annie E. Casey Foundation's Leadership in Action Program (LAP) in San Antonio will oversee implementation and evaluation for the hunger plan. San Antonio was selected by the Annie E. Casey Foundation as a Leadership in Action Program city in 2003. LAP officially launched and began the first phase of implementation in November 2004. The four work groups established by LAP to improve the well being of families, children and the community of San Antonio, are Food Security, Shelter Security, Health Security, and Financial Security.

YEAR 1 GOALS:

GOAL 1: BUILD RESOURCES TO MEET FOOD SECURITY NEEDS

- 1. Develop Hunger Awareness Strategy to raise the profile of food insecurity. Recommended Actions:
 - Promote client awareness and utilization of existing resources (After-School Snack Program, Food Stamps, Senior Home Delivered Meal Programs, SNAP, and WIC).
 - Promote community awareness of scope of food insecurity. Target potential volunteers and financial support.
 - Convey hunger messages through television and print media (English and Spanish).
 - Promote awareness and provide resources for food insecure individuals and families at community events.

<u>Lead Organizations</u>: City of San Antonio and Leadership in Action Food Security Committee

- 2. Leadership in Action Program (LAP) to serve as an implementation and evaluation mechanism for ten-year plan for food security in San Antonio.

 Recommended Actions:
 - LAP work groups focus on portions of the plan that are relevant to their group; i.e., food security, financial security, health security, and shelter security.

Lead Organization: Annie E. Casey Leadership in Action Program

3. San Antonio Food Bank to begin construction of food warehouse to address growing nutritional needs of San Antonio/Bexar County.

Recommended Actions:

• The San Antonio Food Bank will begin construction of a food warehouse to increase its capacity from its current 40,000 ft² warehouse that holds 25 million pounds of food to a 90,000 ft² facility that contains 40 million pounds of food.

Lead Organization: San Antonio Food Bank

4. Create community partnerships to collaborate on food purchases (interagency, public/private, etc.)

Recommended Actions:

- Identify providers involved in food purchases.
- Decide on vendors for commonly purchased food items
- Create formal structure for group to come to discuss food-purchasing procedure.

Lead Organization: Christian Senior Services, San Antonio Food Bank

5. Increase participation in child and senior nutrition programs.

Recommended Actions:

- Identify barriers to participation in child and senior nutrition programs.
- Direct resources to help address barriers (i.e. volunteer resources, etc.)
- Promote resource sharing among agencies serving eligible population.

<u>Lead Organizations</u>: City of San Antonio, Elderly Services and Youth Services; Christian Senior Services

6. Advocate for the enactment of the Charity, Aid, Recovery and Empowerment Act of 2003 (CARE Act - S. 476), a measure that will allow family farmers, ranchers and restaurant owners to deduct the costs of food donated to hunger-relief charities.

Recommended Actions:

- City of San Antonio Department of Community Initiatives to address CARE Act with federal initiative plan.
- Anti-hunger fighting agencies mobilize constituents.

Lead Organization: City of San Antonio

GOAL 2: EDUCATE TO IMPROVE QUALITY OF LIFE

1. Provide comprehensive nutrition and budgeting skills curriculum to 30 volunteers who will in turn teach classes to 1,500 parents.

Recommended Actions:

- Work with Texas A&M Cooperative Extension to identify appropriate nutrition and parenting programs such as "Families Moving Forward".
- Identify volunteers/staff to run trainings.
- Partner with agencies, adult continuing education programs, and existing parenting programs to identify potential participants and to promote classes
- Secure funding for volunteer training estimate cost is \$2,250.

<u>Lead Organization</u>: Texas Cooperative Extension, *Bexar County*

2. Offer Super Cupboard Classes at 100 of the 150 food pantries in San Antonio and Bexar County.

Recommended Actions:

- Inform food pantries within San Antonio/Bexar County of Super Cupboard Initiative and communicate that the goal of the classes is to enable low-income participants to prepare and consume healthy foods and to learn to manage their food dollars wisely., including non "Food Bank" agencies.
- Determine interest of target agencies; identify 25 initial agencies to participate.
- Develop promotional materials.

- Schedule classes & train the trainers.
- Deliver classes to 25 pantries.

<u>Lead Organization</u>: Texas Cooperative Extension, *Bexar County*; San Antonio Food Bank

3. Identify and train three school districts to participate in the Nutrition Quiz Bowl.

Recommended Actions:

- Survey school districts for interest. Identify three school districts to participate.
- Meet with school district representatives and schedule presentation of program.
- Set up training classes for each district.
- Set up schedule for Quiz Bowls.
- Schools identify a nutrition quiz bowl sponsor and practice with selected students.

Lead Organization: Texas Cooperative Extension, Bexar County

GOAL 3: CREATE SYNERGY

1. Create a food security coalition within each council district.

Recommended Actions:

- Identify lead food providers in council districts.
- Lead food providers identify surrounding agencies whose mission either broadly or specifically targets household food security.

Lead Organization: Leadership in Action Food Security Workgroup

2. Increase Food Stamp enrollment by 12% - from 158,501 in July 2004 to 177,521 in July 2005.

Recommended Actions:

- Incorporate door-to-door outreach campaign in nine zip codes targeted by LAP.
- Initiate action steps with community partners that include:
 - o Grocers to place flyers in bags of select stores.
 - o SAWS and CPS: to add notices to customers' bills.
- Conduct Food Stamp outreach at community fairs.
- Continue to involve KENS 5 to promote initiatives such as fairs and services that make Food Stamp applications available to the community.

<u>Lead Organization</u>: Health and Human Services Commission, City of San Antonio Department of Community Initiatives, San Antonio Food Bank

3. Continue to identify hunger as a priority funding area.

Recommended Actions:

- Form a consortium of food providers to target area funders.
- Identify foundations that support food security programs.
- Contact about 15 foundations and ask if they would increase funding in the area of food security by 5% or 10%.

<u>Lead Organizations</u>: San Antonio Food Bank; City of San Antonio Department of Community Initiatives; Christian Senior Services

GOAL 4: ACT ON MEANINGFUL DATA

1. Create food security survey to be placed in select public assistance application and re-certifications.

Recommended Actions:

- Identify academic partners to assist with creation of food insecurity survey.
- Collect baseline data from broad based food security survey.
- Analyze and report the results of food insecurity survey in San Antonio and Bexar County (total population versus disadvantaged).

Lead Organization: University of Incarnate Word

2. Begin zip code gap analysis to identify food and health services.

Recommended Actions:

• Annie E. Casey Leadership in Action partners to begin census tract gap analysis.

Lead Organization: University of Incarnate Word

3. Develop system to analyze nutrition of food distributed.

Recommended Actions:

- Conduct a community wide inventory at the San Antonio Food Bank.
- Review inventory checklist of food pantries.
- Translate inventory into needed food based on nutritional content.
- Identify needed food items.

<u>Lead Organization</u>: University of Incarnate Word University and San Antonio Food Bank

YEAR 5 GOALS:

GOAL 1: BUILD RESOURCES TO MEET FOOD SECURITY NEEDS

1. Simplify Food Stamp enrollment process to better assist clients.

Recommended Actions:

- Compare Texas' enrollment process with other states.
- Facilitate application process.
- Require less documentation, especially from adults 60 and over.

Lead Organization: Health and Human Services Commission

2. Encourage businesses to have the majority of their employees earn a livable income with positive recognition to those businesses that participate.

Recommended Actions:

- Collaborate with organizations already working on living wage issues in strategy development (i.e. ACORN, COPS/Metro Alliance).
- Build consensus among policymakers and key stakeholders regarding incentives for businesses that provide livable wages for employees.

Lead Organization: City of San Antonio

3. San Antonio Food Bank increases distribution of food from 25 million pounds to 40 million lbs. in a new 90,000 ft² storage facility (an increase from the 2004 40,000 ft² facility).

Recommended Actions:

- The San Antonio Food Bank will secure the necessary facility for storage and distribution of 40 million lbs. of food.
- San Antonio and Bexar County funders will partner with San Antonio Food Bank and delegate agencies to meet the communities' food demand.

Lead Organization: San Antonio Food Bank

GOAL 2: EDUCATE TO IMPROVE QUALITY OF LIFE

1. Provide comprehensive nutrition and budgeting skills curriculum to 150 volunteers who will in turn teach classes to 7,500 parents.

Recommended Actions:

- Continue to work with outreach organizations to provide nutrition and parenting programs such as "Families Moving Forward".
- Encourage City of San Antonio, Department of Community Initiatives (DCI) delegate agencies to involve their clients in nutrition and parenting classes.
- Provide a comprehensive nutrition, budgeting, and parenting class curriculum to students of Adult Continuing Education centers.
- Secure funding for volunteer training estimate cost is \$11,250 for five years.

Lead Organization: Texas Cooperative Extension, Bexar County

- 2. Host Citywide Nutrition Quiz Bowl competitions in each City Council district.

 Recommended Actions:
 - Identify school district to host citywide nutrition quiz bowl competition.
 - Schools will incorporate nutrition education curriculum in core classes.
 - Quiz Bowl sponsors from all grades will practice with students.

Lead Organization: Texas Cooperative Extension, Bexar County

3. Expand volunteer programs to include alternatives such as family or group volunteering.

Recommended Actions:

- Identify professionals from hunger fighting agencies to create a family / community group volunteer program.
- Provide family volunteer program to faith-based organizations in communities most at risk to have food insecure families.
- Hunger network of San Antonio to partner with neighborhood associations in order to create family volunteer committees that include nutrition education outreach.

Lead Organization: Texas Cooperative Extension, Bexar County

GOAL 3: CREATE SYNERGY

1. San Antonio/Bexar County area policy makers and funders review capacity of collaborative agencies to serve food security needs.

Recommended Actions:

 Host a state funding conference centered on food security issues where funders, emergency food and senior meal providers are invited to address critical issues related to food security and hunger.

Lead Organization: City of San Antonio

2. Increase Food Stamp enrollment from 58% to 75% of potentially eligible population.

Recommended Actions:

- Continue door-to-door outreach campaign in 9 target zip codes.
- Identify new community partners.
- Conduct Food Stamp outreach at community fairs.
- Continue to involve media to promote initiatives such as fairs and services that make food stamp applications available to the community.

<u>Lead Organization</u>: Health and Human Services Commission, City of San Antonio Department of Community Initiatives, San Antonio Food Bank

GOAL 4: ACT ON MEANINGFUL DATA

- 1. Implement system to provide food of high nutritional value within schools. Recommended Actions:
 - Involve stakeholders in planning process: School Districts' Food Service Department; Child Nutrition Program at Region 20.
 - Survey area schools to determine nutritional value of food made available to students.
 - Identify 10 schools that will incorporate USDA's Team Nutrition Program, whose goal is to improve children's lifelong eating and physical activity habits through nutrition education.
 - Partner with local schools to apply for USDA Team Nutrition Funding.

Lead Organizations: Texas Cooperative Extension, Bexar County

2. Complete zip code tract gap analysis to identify needed food and health services.

Recommended Actions:

- Utilize GIS mapping techniques and Bexar County's Community Health Collaborative Assessment to identify areas where services are most needed.
- Train community health workers from target areas.
- Community health workers familiar with target areas inform eligible non-participants of available services.

Lead Organizations: University of Incarnate Word

YEAR 10 GOALS:

GOAL 1: BUILD RESOURCES TO MEET FOOD SECURITY NEEDS

1. Increase participation rate of those potentially eligible for Food Stamps residing in San Antonio/Bexar County from 58% to 90%.

Recommended Actions:

- Encourage public private partnerships to distribute information (i.e. with local grocery stores).
- Increase food stamp applications through door-to-door outreach campaign.
- City of San Antonio's Community Initiatives Department to hold annual Community Fair as in Summer of 2004.
- Identify ways for volunteers to accompany & advocate for clients through certification process.

<u>Lead Organizations</u>: Health and Human Services Commission, City of San Antonio, San Antonio Food Bank

2. Actively involve Public/Private partnerships (volunteers) in services to hungry individuals.

Recommended Actions:

- Encourage employers to organize corporate teams to participate in door-to-door outreach campaign, or to volunteer for hunger-fighting agencies.
- Partner with local universities to provide community service elective credit to students.
- Recruit interns and volunteers from universities and the community to become involved with hunger-fighting agencies.

Lead Organization: San Antonio Food Bank, Christian Senior Services

3. Increase participation of seniors in nutrition programs throughout Bexar County from about 7,000 (2004) to 20,000 (2014).

Recommended Action:

- Create 150 senior congregate nutrition sites.
- Increase distribution of home delivered meals to homebound seniors.
- Incorporate programs that attract a broader range of adults 60+ to senior centers.

<u>Lead Organization</u>: City of San Antonio, Elderly and Disabled Services and Christian Senior Services

GOAL 2: EDUCATE TO IMPROVE QUALITY OF LIFE

2. Provide comprehensive nutrition and budgeting skills curriculum to 300 volunteers who will in turn teach classes to 15,000 parents.

Recommended Actions:

- Continue to work with outreach organizations to provide nutrition and parenting programs such as "Families Moving Forward".
- Encourage DCI delegate agencies to involve their clients in a comprehensive nutrition, budgeting, and parenting class curriculum.
- Provide comprehensive curriculum to students of Adult Continuing Education centers.
- Secure funding for volunteer training estimate cost is \$22,500 for ten years.

Lead Organization: Texas Cooperative Extension, Bexar County

- 3. Teach comprehensive, age appropriate nutrition education across all schools. Recommended Actions:
 - Identify national best practice curriculums.
 - Review success of schools that incorporate comprehensive age appropriate nutrition education across all grade levels.
 - Advocate at the state level to incorporate comprehensive nutrition education among all grade levels.

Lead Organization: Texas Cooperative Extension, Bexar County

GOAL 3: CREATE SYNERGY

1. Food providers serve 90% of eligible Food Stamp participants.

Recommended Actions:

- Compare the number of potentially eligible individuals that can participate in Food and Nutrition Service programs to the numbers that receive them.
- Increase funding to organizations that meet 90% of food needs.

<u>Lead Organization</u>: Health and Human Services Commission, City of San Antonio Department of Community Initiatives, San Antonio Food Bank

GOAL 4: ACT ON MEANINGFUL DATA

1. Institutionalize data collection and analysis with central data repository and remote agency access.

Recommended Actions:

- Identify comparable outcome indicators for agencies to track.
- Identify appropriate organization to manage database.
- Training workshops made available to area agencies.

Lead Organization: University of Incarnate Word and LAP Partner Agencies

2. Create shared client data base system for human services.

Recommended Actions:

- Communicate cost benefits in development of database system as opposed to keeping information separate.
- Identify common data requirements and best practices of all state systems.
- Create common application for social services, i.e., WIC, Food Stamps etc., so that clients enter information one time.

<u>Lead Organization</u>: University of Incarnate Word and Health and Human Service Commission

Appendix A: Members of the Mayor's Task Force on Hunger and Homelessness

The chairs of the Task Force are Council member Patti Radle and Council member Julian Castro. Many of the Task Force members also participate in the San Antonio/Bexar County Continuum of Care. The members of the Task Force are:

- Warren Alexander (First Presbyterian Church)
- Jessica Arevalo (District 7 for Councilmember Castro)
- Tim Baisdon (Christian Hope Resource Center)
- Renee Barrett (Texas Department of Human Services
- Sharon Baughman (Christian Senior Services)
- Rod Chisholm (Oak Hills Church)
- Laura Cisneros (City of San Antonio)
- Joseph Bonilla (University of the Incarnate Word)
- Chula Boyle (San Antonio Independent School District)
- Rebecca Brune (United Way of San Antonio/Bexar County)
- Dennis Campa (City of San Antonio, Department of Community Initiatives)
- Rosalinda Cisneros (Community Representative)
- Eric Cooper (San Antonio Food Bank)
- Michele Cortez (Roy Maas Youth Alternatives)
- Jim de la Cruz (Roy Maas Youth Alternatives)
- Dena Dalton (Trinity Baptist Ministries)
- Mary Damsgaard (United Way of San Antonio and Bexar County)
- Catarina Delgado (American GI Forum)
- Ramiro Fernandez (City of San Antonio, Department of Community Initiatives)
- John Flowers (Travis Park United Methodist Church)
- Estella Garza (San Antonio Independent School District)
- Sue Gelinas (Travis Park United Methodist Church)
- Ed Grubb (Centro Med)
- Rene Gauna (City of San Antonio, Department of Community Initiatives)
- Matthew Hackler (City of San Antonio, Department of Community Initiatives)
- Thomas P. Harrell (Seton Home)
- Holly Harrison (City of San Antonio, Department of Community Initiatives)
- Cindy Hatch (Family Violence Services)
- Llewellyn Hille (Bread for the World)
- Marissa Jimenez (City of San Antonio)
- Seth Keuhn (Daily Bread Ministries)
- Frankie Klonek (Daily Bread Ministries)
- Loressa Leal (Holy Spirit Catholic Church)
- Winnie Martin (MANNA)
- Grace Moser (Health and Human Services Commission)
- Yvette Mouton (SBC)
- Michael Ledesma (VIA Metropolitan Transit)
- Ignacio Leija (American GI Forum)
- Bob Martindale (San Antonio Metropolitan Ministries)
- Gayle McDaniel (University Methodist Church)
- Milt McFarland (Christian Assistance Ministries)

- Carolyn Meyer (Holy Spirit Catholic Church)
- Peter Monod (Archdiocese of San Antonio)
- Rolando Morales (City of San Antonio, Department of Community Initiatives)
- Ana Novoa (St. Mary's University School of Law)
- Chris Pantuso (Pantuso Enterprises)
- Luther Payne (Travis Park United Methodist Church)
- Marta Pelaez (Family Violence Services)
- Council Member Patti Radle
- John Reason (Travis Park United Methodist Church)
- Arlene Rhodes (Health and Human Services Commission)
- Ernest Lee Robinson (Center for Health Care Services)
- Cecilia Rodriguez (District 5 for Council Member Radle)
- Howard Rogers (San Antonio Metropolitan Ministries)
- Henry Ross (City of San Antonio)
- Norma Saldaña (City of San Antonio, Department of Community Initiatives)
- Steve Saldaña (Catholic Charities)
- Jay Sanchez (El Centro de Barrio)
- Connie Sheppard (Texas Cooperative Extension, Bexar County)
- Major Robert Stutts (The Salvation Army)
- Sister Yolanda Tarango (Visitation House)
- Pamela Taylor (Dress for Success)
- Joe Tedesco (Serving San Antonio Newspaper)
- Linda Tedesco (Serving San Antonio Newspaper)
- Paco Velez (San Antonio Food Bank)
- Ed Violett (St. Mary's University)
- Doug Watson (Healy Murphy)
- Warren Weir (Holy Spirit Catholic Church)
- Brian Wicks (Resurrection Ministries)
- Barbara Zachary (Health and Human Services Commission)
- Bob Zepeda (The Salvation Army)

| Not | ppendix B: Food Security Recommendations with Timeline e: The checkmark indicates when strategy should be completed. | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 |
|-----|--|------|----------|------|------|------|------|------|------|------|------|
| | EAR 1 PRIORITY GOALS/PLANS: DAL 1: Build Resources to Meet Food Security Needs | | | | | | | | | | |
| 1 | Develop Hunger Awareness Strategy to raise the profile of food insecurity. | | Ŋ | | | | | | | | |
| 2 | Leadership in Action Program (LAP) to serve as an implementation and evaluation mechanism for ten-year plan to address food security in San Antonio. | | K | | | | | | | | |
| 3 | San Antonio Food Bank to begin construction of food warehouse to address growing nutritional needs of San Antonio/Bexar County. | | Ŋ | | | | | | | | |
| 4 | Create community partnerships to collaborate on food purchases (inter-agency, public/private, etc.). | | Ŋ | | | | | | | | |
| 5 | Increase participation in all child and senior nutrition programs. | | Ø | | | | | | | | |
| 6 | Advocate for the enactment of the Charity, Aid, Recovery and Empowerment Act of 2003 (CARE Act – S. 476), a measure that will allow family farmers, ranchers and restaurant owners to deduct the costs of food donated to hunger-relief charities. | | Ŋ | | | | | | | | |
| G | OAL 2: Educate to Improve Quality of Life | | | | | | | | | | |
| 1 | Provide comprehensive nutrition and budgeting skills curriculum to 30 volunteers who will in turn teach classes to 1,500 parents. | | Ø | | | | | | | | |
| 2 | Offer Super Cupboard Classes at 100 of the 150 food pantries in San Antonio and Bexar County. | | 3 | | | | | | | | |
| 3 | Identify and train three school districts to participate in the Nutrition Quiz Bowl. | | Ø | | | | | | | | |

| | ppendix B: Food Security Recommendations with Timeline te: The checkmark indicates when strategy should be completed. | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|---|--|----------|----------|---------|----------|------|------|------|------|----------|------|------|
| | OAL 2. Croate Symanox | | | | | | | j. | | | | |
| 1 | OAL 3: Create Synergy Create a food security coalition within each council district. | | 丒 | | | | | | | | | |
| 2 | Increase Food Stamp enrollment by 12% - from 158,501 in July 2004 to 177,521 in July 2005. | | Ŋ | | | | | | | | | |
| 3 | Continue to identify hunger as a priority funding area. | | 4 | | | | | | | | | |
| G | OAL 4: Act on Meaningful Data | | | | | | | | | | | |
| 1 | Create food security survey to be placed in select public assistance application and recertifications. | | Ŋ | | | | | | | | | |
| 2 | Begin zip code gap analysis to identify food and health services. | | Ø | | | | | | | | | |
| 3 | Develop system to analyze nutrition of food distributed. | | | | | | | | | | | |
| Y | EAR 5 PRIORITY GOALS/PLANS: | | | | | | | | | | | |
| G | OAL 1: Build Resources to Meet Food Security Needs | | | | | | | | | | | |
| 1 | Simplify Food Stamp enrollment process to better assist clients. | | | | | | Ŋ | | | | | |
| 2 | Encourage businesses to have the majority of their employees earn a livable income with positive recognition to those businesses that participate. | | | | | | K | • | | | | |
| 3 | San Antonio Food Bank increases distribution of food from 25 million pounds to 40 million lbs. in a new 90,000 ft ² storage facility (an increase from the 2004 40,000 ft ² facility). | | | | | | N) | | | | | |
| G | OAL 2: Educate to Improve Quality of Life | | | | | | | | | | | |
| 1 | Provide comprehensive nutrition and budgeting skills curriculum to 150 volunteers who | <u> </u> | <u> </u> | <u></u> | <u> </u> | L | M | | | <u> </u> | Ш | |

| | ppendix B: Food Security Recommendations with Timeline e: The checkmark indicates when strategy should be completed. | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|---|---|------|------|------|------|------|------|------|------|------|------|------|
| | will in turn teach classes to 7,500 parents. | | | | | | - | | | | | |
| 2 | Host Citywide Nutrition Quiz Bowl competitions in each City Council district. | | | | | | Ø | | | | | |
| 3 | Expand volunteer programs to include alternatives such as family or group volunteering. | | | | | | Ø | | | | | |
| G | OAL 3: Create Synergy | | | | | | | | | | | |
| 1 | San Antonio/Bexar County area policy makers and funders review capacity of collaborative agencies to serve food security needs. | | | | | | Υ | | | | | |
| 2 | Increase Food Stamp enrollment from 58% to 75% of potentially eligible population. | | | | | | ব্য | | | | | |
| G | OAL 4: Act on Meaningful Data | | | | | | | | | | | |
| 1 | Implement system to provide food of high nutritional value within schools. | | | | | | Ø | | - | | | |
| 2 | Complete census tract gap analysis to provide needed services. | | | | | | Ø | | | | | |
| | EAR 10 PRIORITY GOALS/PLANS: OAL 1: Build Resources to Meet Food Security Needs | | | | | | | | | | | |
| 1 | Increase participation rate of those potentially eligible for Food Stamps residing in San Antonio/Bexar County from 58% to 90%. | | | | | | | | | | | Ā |
| 2 | Actively involve Public/Private partnerships (volunteers) in services to hungry individuals. | | | | | | | | | | | K |
| 3 | Increase participation of seniors in nutrition programs throughout Bexar County from about 7,000 (2004) to 20,000 (2014). | | | | | | | | | | | N |

| A] | opendix B: Food Security Recommendations with Timeline 3: The checkmark indicates when strategy should be completed. | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2010 | 2011 | 2012 | 2013 | 2014 |
|-------------|---|------|------|------|------|----------|------|------|------|------|------|----------|
| G(1 | Provide comprehensive nutrition and budgeting skills curriculum to 300 volunteers who will in turn teach classes to 15,000 parents. | | | | | | | | | | | A |
| 2 | Teach comprehensive, age appropriate nutrition education across all schools. | | | | | | | | | | | N |
| G (1 | Food providers serve 90% of eligible Food Stamp participants. | | | | | | | | | | | N |
| G 1 | OAL 4: Act on Meaningful Data Institutionalize data collection and analysis with central data repository and remote agency access. | | | | | | | | | | | Z |
| 2 | Create shared client data base system for human services. | | | | | <u> </u> | | | | | | N |