**U.S. Conference of Mayors – Housing and Homelessness**

Talking Points for Alison Barkoff – HSRC & HSPA, 8/1/24 (10 minutes, Q&A to follow later)

**Slide 1 – HSRC**

* Will discuss ACL’s Housing and Services Resource Center, but a bit of background on why we created it.
* Those of you less familiar with the Administration for Community Living, or ACL for short, we are the federal agency within HHS that supports the right of PWD and OAs to live in the community, in the place they call home.
* We support an incredible network of 20,000 community-based organizations, often associated with area agencies on aging, centers for independent living and other federally funded social services programs that operate in communities in all states and territories.
* Since Inauguration Day 2021, my colleagues and I at the Administration for Community Living have been working with HUD to address the lack of stable housing for PWD and OAs.

**Slide 2 – Housing Alone is Not Enough**

* As you know, the lack of affordable, accessible housing is a primary cause of homelessness.
* And the reality is that many people experiencing, or at risk of homelessness, are PWD, OAs, or people with behavioral health needs.
* For them, housing alone is not enough to support their ability to live stably housed in the community.
* Without wraparound supports we will never achieve our shared goal of housing stably and ensuring full community participation for OA’s and PWD.
* To help bring together the housing sector and ACL’s aging and disability network, in 2021 HHS & HUD launched the Housing and Services Resource Center, or HSRC.

**Slide 3 – HSRC Collaborating Among Federal Agencies and Our Networks**

* In its 3-years of existence, the HSRC has grown to a cross-sector federal team led by ACL and works very closely with HUD.

**Slide 4 – Networks**

* But the HSRC is far from an insular federal convening: it partners with states, tribal nations and organizations, local governments; disability and aging agencies and organizations; homeless advocates, substance use disorder and mental health providers; homelessness Continuums of Care, public housing authorities, and housing providers and developers.

**Slide 5 – HSRC Infographic and Overview**

* In just three years, the HSRC has grown to become:
  + A hub for providing broad-based technical assistance;
  + It has helped build partnerships and teach agencies and organizations how to braid funding streams;
  + It is now the go to centralized source of information, guidance, and research around coordination of housing and services;
  + And it’s the central forum for peer-to-peer sharing between states and communities.

**Slide 6 – HSRC Examples and Resources**

* Read from Slide

**Slide 7 – Housing and Services Partnership Accelerator**

* I want to tell you about one specific initiative of the HSRC, which was launched this year: the Housing and Services Partnership Accelerator − or HSPA.
* The HSPA is a peer-to-peer learning collaborative focused on building partnerships across health, housing, aging and disability to support states and local communities to braid the array of federal resources including Medicaid to help people at risk of, or experiencing, homelessness to obtain and maintain stable housing and supportive services.
* The goal is to take a select set of states and hit fast-forward to build a replicable approach and show examples of success.
* The reason? Because the coordination of housing assistance and wraparound supportive services—such as in the form of supportive housing—is a proven, cost-effective approach to assisting people with disabilities and chronic/complex health conditions transition from homelessness, exit or avoid institutional settings, and live in the community.

**Slide 8 – HSPA Map and Participants**

* Of the 16 applicants for the HSPA, eight states − Arizona, California, Hawai’i, Maryland, Massachusetts, Minnesota, North Carolina, and Washington − and DC were selected for this first year.
* It’s been amazing to see each state working with such focus, guided by their individual coaches.
* They have all been participating in peer-to-peer learning sessions and we’ve seen federal-state-local partnerships taking off around coordination of affordable, accessible housing and community services.

**Slide 9 – Advancing Housing, Health, and Social Care Partnerships Conference**

* In June ACL, SAMHSA, and HUD held a major convening of states and communities focused on supporting and strengthening partnerships that align health, housing, and social care programs, including the Housing Accelerator participants plus HRSA’s Health and Housing Institute and the US Interagency Council on Homelessness ALL INside initiative.
* There were approximately 200 people in attendance from state and local leaders of Medicaid, Aging and Disability, Housing and Homelessness, and Behavioral Health agencies and organizations, as well as federal staff from partner agencies.
* Through peer-to-peer sharing, states and cities from all three initiatives shared best practices, lessons learned, challenges and accomplishments about partnerships among housing, health, aging & disability agencies and networks.
* They also had the opportunity to speak directly with federal partners in a listening session about the challenges they have identified in their work over the past several months and how to solve them.
* We heard from state & community leaders that they left eager to apply insights they gained.
* Success will be about removing silos and building bridges to form effective collaborations among the federal government, states, counties, and cities and the housing, homelessness, healthcare, disability, and aging organizations in those communities.
* We believe that the results emerging from the Housing and Services Partnership Accelerator will demonstrate to the country that we can effectively address the housing and service needs for Medicaid-eligible people with disabilities and behavioral health needs as well as older adults who are experiencing, or at risk of, homelessness.

**Slide 10 – Local Leadership**

* We are already seeing great models of what collaboration can do at the local level.
* In LA; Multnomah County Oregon; Toledo; Oak Park, Illinois; Phoenix and Mesa; and in Seattle and Virginia, as just a partial list of examples.
* In one example from Maricopa County, they have come together to develop a regional plan to reduce homelessness, employing three actions steps:

1. Commitment to work regionally to reduce homelessness,
2. Increasing safe housing options, and
3. Supporting a diverse partnership to address homelessness. That is so key, to develop that diverse partnership.

**Slide 11 – Opportunities at the Local Level**

* This Administration and HHS, HUD and other federal departments have an important role to play, but we need the leadership of mayors willing to bring together disability, aging, health, housing and other agencies with community organizations that support PWD and OAs to work as a team to address affordable, accessible housing and homelessness.
* Bringing these powerful change agents together and helping keep a spotlight on solutions is guaranteed to yield results.
* Mayors in states that have already received federal approval for coverage of housing-related services under Medicaid can help ensure that local providers in your city are aware, credentialed, and trained in how to receive third party payments, which is a major way you can secure funding to address housing and homelessness.
* If you are a mayor in a state that has not yet received or sought federal approval for coverage of housing-related services under Medicaid, you may want to join with other mayors to encourage your state leadership to do so.
* Even without a Medicaid waiver or state plan amendment to cover housing-related services, you can convene managed care or your local or regional health authority, aging and disability organizations, your chamber of commerce, and housing agencies and organizations about how to cover housing *and* services to help address homelessness in your community.
* And it is so important that we learn from the successful examples that are emerging.

**Side 12 - Closing Slide**

* Close by saying that the H-S-R-C is your resource center. We welcome your questions at [hsrc@acl.hhs.gov](mailto:hsrc@acl.hhs.gov) and are happy to provide technical assistance and make referrals to help your cross-sector partnerships.
* Your staff can join the HSRC listserv to receive notices about upcoming webinars, new resources or tools, get the latest updates, and connect with solutions.
* Thank you so much for listening.