

STAFF REPORT

DATE: February 19, 2019

TO: City Council

FROM: Ryan Collins, Police Services Specialist Supervisor – Homeless Outreach & Services
Darren Pytel, Police Chief

SUBJECT: Homelessness Strategy Update

Recommendation

Receive presentation from staff, which will cover the following:

- Updates to the City’s Social Services Strategic Plan, focused on homelessness, to address how the City can manage and ultimately reduce homelessness.
- New information, including alignment with the January 2019 Yolo County Plan to Address Homelessness, recommendations of staff, and local priorities identified by the Council

Fiscal Impact

There is no fiscal impact to this report. If Council provides direction, future actions could have fiscal impacts.

Council Goal(s)

These efforts fall mainly into the goal of ensure a safe, healthy, and equitable community. This report specifically addresses one of seven shorter-term focus items established by the Council, “Develop a homelessness strategy.”

Background and Analysis

Traditionally, counties administer local social service programs. However, Davis, like other cities throughout the country, has responded to increased concerns about the local need for solutions to social issues, especially homelessness.

In March 2017, the Davis City Council formally adopted a Housing First approach, committing to a methodology of practices rooted in evidence that everyone needs a permanent home to successfully address mental health conditions, substance use disorders, or other issues that contribute to becoming or remaining unhoused.

The Davis City Council approved its first Social Services Strategic Plan focusing on homelessness in September 2017. Grounded in Housing First principles, this plan has three overarching goals: maximizing results of DavisPathways; expanding capacity; and reducing panhandling. This plan will be updated to fulfill one of the Council’s focus items to develop a homelessness strategy. The updated plan will be informed by lessons learned from

DavisPathways, the Yolo County Plan to Address Homelessness, local consumer and agency feedback, and the priorities of the Council.

In January 2019, as part of the preparation for No Place Like Home (NPLH) grant submissions to the State, the County led an effort to author a county-wide strategic plan to address homelessness in our community that met the NPLH grant requirements. This plan is intended to be a living document, to be regularly reviewed, expanded, and localized to each community's specific priorities.

Davis Pathways

The City's initiatives to address homelessness are known collectively as DavisPathways. At present, DavisPathways consists of the following four components:

1. **Police Services Specialist Supervisor - Homeless Outreach & Services (Police Supervisor –Homeless Services)**—a City-funded position meant to engage persons experiencing homelessness, facilitate appropriate service linkages, as well as participating in Continuum of Care system-level planning.
2. **Pathways to Employment**—a jobs training program that employs homeless individuals for up to 12 hours per week to beautify the downtown
3. **New Pathways**—a four-bed short-term supportive housing program
4. **Getting to Zero Vouchers and Case Management**—a rental assistance voucher program paired with supportive services

It is important to note that these components do not reflect the significant work of Davis nonprofits and other community-based organizations. Rather these components are City-led efforts where the City has either secured grant funds or allocated local funds to establish the programming.

The following sections provide an overview of each component followed by an analysis of performance measure data. The City utilizes a results-based accountability model to track performance based on the questions of:

1. How much did we do?
2. How well did we do it?
3. Is anyone better off?

Homeless Outreach & Services

In August 2017, the City hired Ryan Collins as a Police Services Specialist Supervisor to help coordinate homeless outreach and services. Embedded within the Police Department, this position provides direct client-level services as well as systems-level planning to improve the city's response to homelessness.

Performance Measure Data from August 2017 through February 1, 2019

Table 1—How much did we do?
<p>Calls for Service and Unique Individuals Served: # of Davis Police Department (DPD) calls for service responded to by Ryan Collins and # of unique individuals experiencing homelessness served during these incidents</p> <ul style="list-style-type: none"> • Responded to 514 calls for service • Served 203 individuals to date in the course of emergency responses and proactive outreach

Table 2—How well did we do it?
<p>Service connections to Continuum of Care agencies: # (%) of persons contacted who connected with wraparound supportive services provided by the City or other Continuum of Care partner agencies</p> <ul style="list-style-type: none"> • 125 of 203 (62%) of individuals contacted engaged in personalized services to improve their physical health, mental health, social supports, income, and/or housing

Table 3—Is anyone better off?
<p>Attained permanent housing: # (%) of participants who attained permanent housing as a result of service enrollment</p> <ul style="list-style-type: none"> • 75 of 125 (60%) participants obtained permanent housing

From August 2017 through February 1, 2019, Ryan Collins responded to 514 police calls for service in the community, contacting 203 unique individuals. The majority of those individuals contacted (62%) expressed interest in and followed through with connecting to agencies in the Continuum of Care to improve their situations.

The only unifying factor in this population of individuals served was that all met one of the U.S. Department of Housing and Urban Development’s definitions of homelessness per the HEARTH Act. Each participant received personalized assessment and “warm hand-off” referral to appropriate agencies in the Continuum of Care to provide case-relevant wraparound supportive services, including case management, emergency shelter, housing placement, housing advocacy, primary and specialty medical care, substance abuse treatment, legal services, and veteran’s services as appropriate. When a local agency providing services for a participant’s individual needs was not available, Ryan Collins provided ongoing services to fill this service gap until appropriate resources could be mustered. The direct client service engagements with Ryan Collins included intensive case management from 15 minutes (a case involving a person displaced in our community needing assistance in reuniting with family) to 100+ hours (a case involving a senior citizen with multiple comorbid medical conditions, psychosocial disabilities, high emergency services utilization, and no initially identified social supports).

To date, Ryan Collins’ direct services have primarily been funded through Police Department funds, applying IRWS supportive services funds when applicable. However, in December 2018, the City secured a \$173,834 California Emergency Solutions and Housing (CESH) grant to

establish a flexible fund administered by the Police Department. The fund will offer operational support for emergency housing interventions and housing stabilization services. Services include, but are not limited to:

- Outreach supplies for individuals experiencing homelessness;
- Transportation assistance;
- Motel/hotel stays for those who cannot utilize the local shelters; and
- Rental assistance, housing relocation, and stabilization services to individuals encountered via street outreach.

The addition of the CESH grant will provide a cost center for ongoing operations focused on flexibly filling gaps in our services landscape over the next two years.

Pathways to Employment

Operated under contract by Davis Community Meals and Housing since April 2017 and guided by an Advisory Board comprised of public, private, and faith-based representatives, the program employs up to five unhoused individuals to work approximately 12 hours per week. Jobs include beautifying downtown and landscape maintenance. In addition to earning an hourly wage, participants receive assistance completing job training programs and finding permanent employment. The program has an annual operating budget of \$64,500 for which the City originally secured a Sutter Health grant. The Davis Downtown Business Association also donated \$5,000 to support the program and the City provided bridge funding of \$14,000 this past fall. After expending those dollars, the City has since secured a \$129,000 Homeless Emergency Aid Program (HEAP) grant to fund Pathways to Employment for another two years.

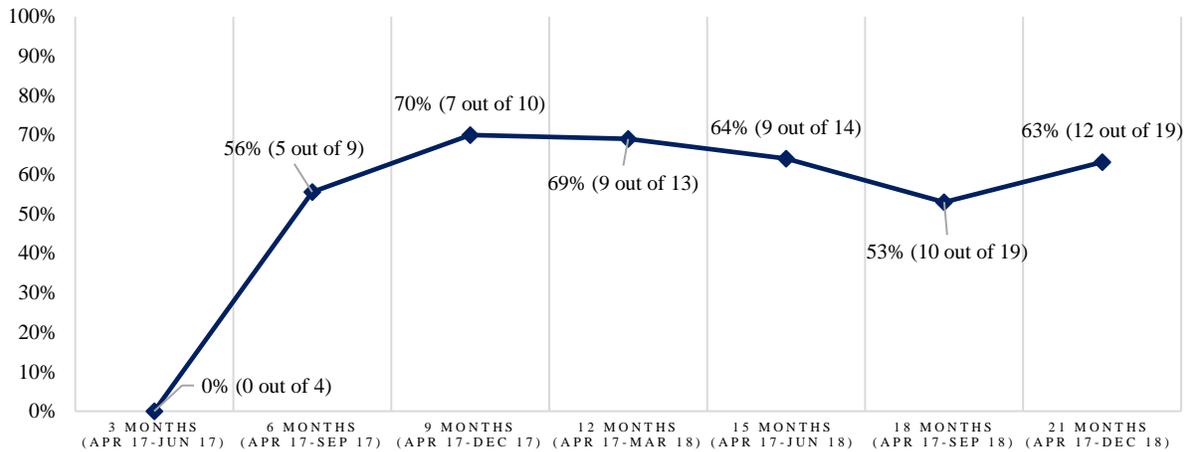
Performance Measure Data from April 2017 through December 2018

Table 4—How much did we do?
Served to Date: # of participants
<ul style="list-style-type: none"> • Served 22 individuals to date • Demographic information: <ul style="list-style-type: none"> ○ Gender—19 males and 3 females ○ Average age—42 years ○ Average length of time homeless—5 years ○ Average length of time in Davis—14 years

Table 5—How well did we do it?
Retention Rate: # (%) of participants who remain enrolled or successfully completed the program
<ul style="list-style-type: none"> • 19 out of 22 (86%) remained enrolled or successfully completed the program

Table 6—Is anyone better off?

Figure 1—Obtained Employment: # (%) of participants who obtained employment



Explanation

- 12 out of 19 (63%) obtained employment since the program began in April 2017

Increased Skill and Confidence/Self-Esteem: # (%) of participants who increased their skill and confidence/self-esteem levels

- 19 out of 19 (100%) who remain enrolled or successfully completed the program reported increased skill and confidence/self-esteem levels

From April 2017 through December 2018, Davis Community Meals and Housing assisted 12 out of 19 participants (63%) secure employment. The placements range from the City, the School District, Target, the food service industry to truck driving.

In terms of participant retention, the program has an 86% retention rate. For those who dropped out, most left because of personal reasons unrelated to the program. For example, one person relocated to the Bay Area and another person stopped due to a scheduling conflict after enrolling in substance use disorder treatment. Another factor impacting retention, however, is the overall health and wellness of individuals. Davis Community Meals and Housing is observing that some individuals are in such poor health that they are incapable of performing many tasks. To address this, staff is trying to vary the training opportunities to include other experiences that do not rely on physical labor.

As the City and Davis Community Meals and Housing transition to utilizing HEAP grant funds as opposed to Sutter Health grant funds, one key difference will be that Davis Community Meals and Housing will focus participant recruitment on individuals who are already enrolled in one of the City’s supportive housing programs. This change will not only allow Davis Community Meals and Housing to capitalize on the intensive case management associated with the housing programs, but also enrich the wraparound services by adding an employment component. Research suggests that lack of income and employability is one of the largest barriers to keeping

individuals stably housed. Moreover, research also suggests that self-sufficiency is essential to improve confidence, self-esteem, and overall well-being.

New Pathways

New Pathways is a short-term supportive housing project located at 512 Fifth Street in a city-owned, two-bedroom, one-bathroom house. Operated under contract by Davis Community Meals and Housing since February 2016, the program offers up to four unhoused individuals short-term housing, supportive services, and housing navigation assistance. The program works in tandem with Yolo Housing’s Getting to Zero Voucher program with the aim of moving individuals as quickly as possible into permanent housing with continued supportive services. The program has an annual operating budget of \$130,401 of which the City and Yolo County each contribute \$65,200.50.

Performance Measure Data from February 2016 through December 2018

Table 7—How much did we do?	
Served to Date: # of participants	
•	26 individuals served to date

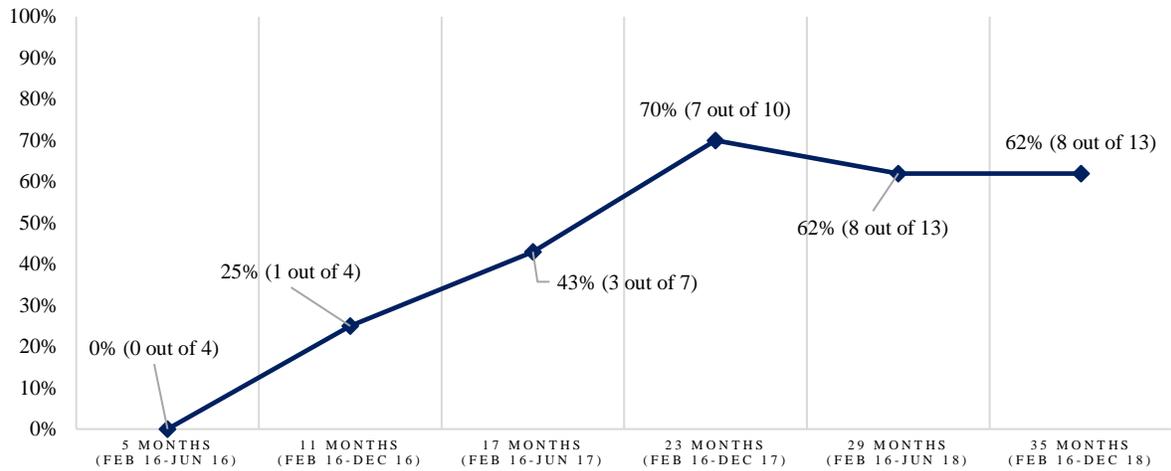
Table 8—How well did we do it?
Figure 2—Length of Time to Permanent Housing: For those who exited to permanent housing, average # of days to find permanent housing



Explanation	
•	Of the 8 who exited to permanent housing, 161 days is the average # of days it took for participants to find permanent housing
Retention Rate: # (%) of participants who remain enrolled or successfully completed the program	
•	13 of the 26 (50%) remain enrolled or successfully completed the program since the program began

Table 9—Is anyone better off?

Figure 3—Obtained Permanent Housing: # (%) of participants who obtained permanent housing



Explanation

- 8 of the 13 (70%) obtained permanent housing since the program began

Retained Permanent Housing: # (%) of participants who retained permanent housing during the reporting period

- 8 of the 8 (100%) remain stably housed

From February 2016 through December 2018, eight New Pathways participants secured permanent housing. Of the eight, one moved into market rate housing, four participants moved into subsidized housing owned and managed by Yolo Housing, one moved into a Project-Based Voucher unit in Davis, and two live in Davis apartments owned by a landlord participating in the Getting to Zero Voucher program and have since transitioned to the tenant based Housing Choice Voucher program. While described in more detail in the Getting to Zero section below, the biggest obstacles to moving participants into permanent housing are a lack of subsidized housing as well as an unwillingness of landlords to accept less than market rate.

Another challenge encountered is that participants must share a bedroom. Originally, staff selected individuals for the program based solely on high vulnerability scores as determined by the community’s coordinated entry assessment tool, the Vulnerability Index and Service Prioritization Decision Assistance Tool. Although their scores were high, several of the initial residents displayed behaviors that were not appropriate for shared living situations such as sexual misconduct and drug usage/possession. More recently, staff has begun to take into account the shared living situation when making resident selections. As a result, staff has had to discharge fewer residents from the program.

Getting to Zero Vouchers and Case Management

Operated by Yolo Housing and funded by Sutter Health since July 2017, the Getting to Zero program provides grant-funded vouchers to up to 15 unhoused individuals who are seeking permanent housing. These vouchers provide an interim housing subsidy to those who qualify for the federal subsidized housing program, Housing Choice Vouchers, but remain on the waitlist. Serving as bridge assistance until the recipients can seamlessly transition onto the permanent Housing Choice Vouchers, the temporary Getting to Zero vouchers play a vital role in addressing the backlogged waitlist and housing people more quickly. In addition to the rental subsidy, the program offers robust case management to those who are willing. As mentioned previously, when practicable, Yolo Housing works with New Pathways participants, but processes other general referrals as well. The City secured a \$162,000 Sutter Health grant to fund the program through June 30, 2019.

Performance Measure Data from July 2017 through December 2018

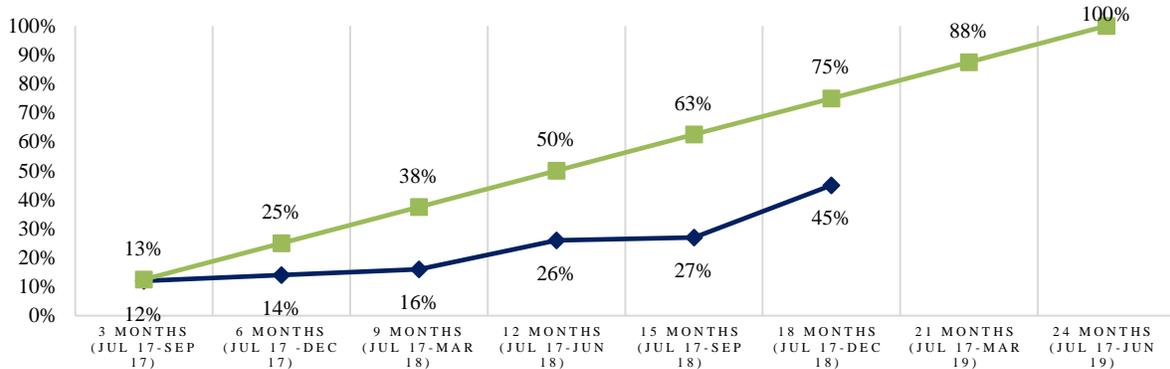
Table 10—How much did we do?	
Served to Date: # of participants	
<ul style="list-style-type: none">• 1 individual transitioned directly to market rate housing and full employment without needing a voucher• 4 individuals transitioned to subsidized housing owned and managed by Yolo Housing without needing a voucher• 1 individual received a Project-Based Voucher• 5 individuals received Getting to Zero Vouchers and transitioned to a Housing Choice Voucher• 10 individuals received case management• Demographic information<ul style="list-style-type: none">○ Gender—7 males, 4 females○ Average age—47 years○ Average length of time homeless—6 years○ Average length of time in Davis—6 years	

Table 11—How well did we do it?

Case Management Retention Rate: # of individuals who received case management following a permanent housing placement

- 10 of the 10 (100%) remain actively engaged with a case manager—the one participant who transitioned straight to market rate housing opted not to receive case management

Fiscal Capacity: Actual expenditures divided by budgeted expenditures



Explanation

- Eighteen months into project implementation, Yolo Housing spent 45% of the funds budgeted. To be fully on target with the amount budgeted, Yolo Housing should have spent 75% of the amount budgeted. The underspending is largely due to earlier transition than expected from a Getting to Zero Voucher to a Housing Choice Voucher or placement in subsidized housing

Table 12—Is anyone better off

Obtained Permanent Housing: # (%) of participants who obtained permanent housing

- 5 of the 15 (33%) available GTZ voucher slots are in use

Retained Permanent Housing: # (%) of participants who maintained permanent housing

- 11 of the 11 (100%) remain stably housed

From July 2017 through December 2018, Yolo Housing secured permanent housing for 11 individuals using a combination of Getting to Zero Vouchers, Housing Choice Vouchers, Yolo Housing subsidized units, and market rate units. While outside the reporting period, in January 2019, Yolo Housing secured permanent housing for an additional 10 people—one family of nine and one single older adult. This brings the total number of persons housed to 21 individuals.

Another noteworthy accomplishment is the success of Yolo Housing’s case management, which has achieved a perfect record of success to date:

- All 21 of the permanently housed individuals remain stably housed
- No one has used the emergency room inappropriately
- No one has had a psychiatric hospitalization
- No one has been involved with the police or criminal justice system

Research suggests robust case management, along with stable affordable housing, is a critical component to keeping individuals housed and thriving. Despite knowing the efficacy of this research, before Sutter Health funds, the City did not have available dollars to provide comprehensive case management. Now, however, the City contracts with Yolo Housing who pays a graduate level social work student through the Masters in Social Work internship program at Sacramento State University to provide intensive supportive services.

In terms of fiscal capacity, the program continues to expend less than the amount budgeted. The low spending is the result of two key factors. The first factor is that in many cases Yolo Housing transitioned participants onto a Housing Choice Voucher or into permanently subsidized public housing quicker than expected—thereby limiting the need to utilize local Getting to Zero Voucher funds. The second factor is the difficulty in recruiting/incentivizing landlords to participate in the program. Despite telling landlords about the program’s robust case management and promising to cover the cost of any damages, most landlords are unwilling to participate because the allowable rent (set annually by the federal government) is lower than what landlords can charge in the private market.

In July 2018, the City and Yolo Housing tried to address the issue of landlord participation by hiring a part-time Lease and Rental Coordinator. The Coordinator’s responsibilities include conducting outreach to local landlords with the hope of bolstering participation in the program as well as providing landlord mediation services. Thus far, the Coordinator has identified 20 new units with landlords willing to accept Getting to Zero Vouchers. The Coordinator has also assisted each referred participant through the screening, qualifications, placement, and move-in process. To date, the Coordinator has assisted five participants secure and maintain housing as well as provided 25 unique mediation services.

Other Efforts

In addition to the DavisPathways components described above, the City is playing an active role in numerous other efforts.

- ***Interfaith Rotating Winter Shelter On-Site Supportive Services***—Initially piloted during 2017-18 shelter season, the City allocated \$10,000 to fund the on-site provision of wraparound supportive services. This included paying for a CommuniCare Health Centers nurse practitioner and medical assistant to make weekly visits. In total, the nurse practitioner treated 36 of the 141 individuals (26%) of those who stayed at the shelter.

In addition to the medical services, Ryan Collins, Joan Planell, the City’s Social Services Consultant, and Nadia Waggener, the County’s Housing Coordinator, spent one night per week meeting with shelter guests. In total, City and County staff met with 49 of the 141 individuals (35%) of those who stayed at the shelter. Of the 49, a total of 6 individuals

obtained housing and 12 continued to receive case management from Ryan Collins following the end of the season.

Given the pilot's success, in 2018-19, the City and County agreed to a 50% cost-share (\$6,962.50 each) to again fund the provision of on-site medical services via CommuniCare Health Centers. Similarly, Ryan Collins and Nadia Waggener are on-site providing supportive services and permanent housing navigation assistance.

- ***Continuum of Care/Yolo County Homeless and Poverty Action Coalition (HPAC) and Countywide Homeless Services Partner***—The City remains an active member of the region's Continuum of Care, also known as the Yolo County Homeless and Poverty Action Coalition. Ryan Collins serves as elected Chair of the body and presides over its monthly meetings. In addition, staff regularly collaborates on countywide homeless service initiatives. Most recently, two City staff members served on the Steering Committee responsible for creating the County's No Place Like Home Strategic Plan to End Homelessness.
- ***Housing for low income individuals, including those at risk of homelessness and exiting homelessness***—In partnership with Davis Community Meals and Housing, Taormino and Associates, Yolo Community Care Continuum, and Yolo Housing, the City has provided financial subsidies, facilities, and staff time commitment to multiple housing projects wholly or partially dedicated to providing permanent housing to members of the community with extremely low incomes. These housing projects currently include Cesar Chavez Plaza, Eleanor Roosevelt Manor, Homestead, Pacifico Student Co-op, as well as the Creekside and Bretton Woods projects in development. Placement in permanent supportive housing, which pairs permanent housing with on-site supportive services, is considered the best practice for securing permanent places to live for those who have experienced chronic homelessness.
- ***Weekly office hours***—Ryan Collins hosts drop-in office hours on Tuesdays from 10:00-4:00 at the Hunt-Boyer police substation. Individuals experiencing homelessness can meet with Ryan Collins and Continuum of Care service providers for individualized case planning and services referral and enrollment.
- ***Continuum of Care Supportive Housing Program (SHP) Grant***—The City continues to partner with Davis Community Meals and Housing to administer a \$66,282 U.S. Department of Housing and Urban Development Continuum of Care SHP grant. The grant helps support Davis Community Meals and Housing's 10-bed transitional housing program.
- ***Community Development Block Grants (CDBG)***—In addition to the SHP grant, the City in partnership with Yolo County Housing also manages several CDBG grants that support homeless service initiatives.
- ***Health and Social Services Guides***—In July 2018, the homeless outreach services program released a resource guide in trifold brochure and folding wallet-sized card

formats for distribution throughout the community. An updated version of these resource guides was completed in January 2019. Ryan Collins updates and maintains this resource guide with the assistance of the City Manager's Office.

- ***NorCal Homeless RoundTable***—Ryan Collins participates in the planning of this quarterly event held in West Sacramento. It is convened by HomeBase, a Bay-area law firm dedicated to addressing issues of homeless policy. Ryan Collins has also been a panelist on such subjects as the best practices in street outreach.
- ***Fresh Cuts, Fresh Starts***—Organized by H.O.P.E. at Davis, a UC Davis student group dedicated to addressing issues of homelessness, the Police Department sponsored this free public haircutting event at Central Park in October 2018.

Attachments

1. Yolo County Plan to Address Homelessness



Yolo County Plan to Address Homelessness

January 2019

Abstract

An analysis of the current status of homelessness countywide, with next steps to assist community partners and stakeholders in implementing proposed solutions, in compliance with required criteria for county homeless plans for the No Place Like Home (NPLH) Program.

Yolo County Health and Human Services Agency

January 2019

Yolo County Plan to Address Homelessness

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I. Executive Summary Letter

January 2019

Dear Friends,

Like many communities across California, Yolo County is experiencing a homelessness crisis. In 2017, the Point-in-Time (PIT) Count in Yolo County identified 459 people as experiencing homelessness, 209 of whom were experiencing unsheltered homelessness. Utilizing new state funding while identifying opportunities to pursue new resources to support the County's homelessness system of care will be critical in order to address the housing and health needs of those experiencing and at-risk of homelessness.

This County Homelessness Plan (the Plan) was developed out of the opportunity provided by the No Place Like Home (NPLH) Program. The plan provides an overview of the current state of homelessness in the County and highlights a set of solutions that County and City Leadership, in coordination with community homelessness partners, can utilize in the next three years to improve and expand the homelessness system of care in Yolo. This plan was developed around the strategies highlighted in One at a Time: Preventing and Ending Homelessness for Yolo County Residents, the 2017 revised version of the County's General and Strategic 10-year Plan to Address Homelessness. As we conclude the original timespan envisioned in the 10-Year Plan to end homelessness, cities and counties should examine the best governance structure to maximize collaboration and competitiveness for State and Federal funds and how to successfully achieve the goals within the Plan.

Through a set of stakeholder interviews, consumer focus group, and community meetings the community identified four key issue areas to focus on in developing solutions and action steps to improve the homelessness system of care and ultimately improve housing and health outcomes for participants, encouraging greater self-sufficiency. The solutions focus on:

- Strengthening the homeless crisis response system with an emphasis on developing prevention services.
- Increasing affordable housing options for the most vulnerable.
- Stabilizing and maintaining physical and behavioral health for those with the highest needs.
- Examining systems-level coordination and identifying opportunities for improved partnership.

Within each of these areas, the County alongside city and community partners will focus on implementing a set of strategies and action steps across the County to ensure that those at-risk of or experiencing homelessness are able to access services, connect with housing, and find support in a comprehensive, coordinated system of care. For each goal, these strategies include:

Goal #1: Strengthen the Homeless Crisis Response System, Developing Prevention Services

- **Strategy 1.A:** Map the homeless crisis response system and prevention resources available.
- **Strategy 1.B:** Leverage new state funding sources to invest in prevention and crisis response services.

Yolo County Plan to Address Homelessness

- **Strategy 1.C:** Develop and pilot an early identification tool to assess those in need of prevention services.

Goal #2: Increase Affordable Housing Options for the Most Vulnerable

- **Strategy 2.A:** Invest in alternative housing models to more efficiently develop affordable housing.
- **Strategy 2.B:** Create public-facing resource materials that outline the benefits of affordable housing development.
- **Strategy 2.C:** Explore options for a local funding source for affordable housing development.

Goal #3: Stabilize and Maintain Physical and Behavioral Health for Those with the Highest Needs

- **Strategy 3.A:** Increase access to mobile and co-located health services.
- **Strategy 3.B:** Improve connections between health and housing efforts.

Goal #4: Examine Systems Level Coordination, Identifying Opportunities for Improved Partnership

- **Strategy 4.A:** Leverage the Continuum of Care structure to strengthen coordination and partnerships.

This plan and the proposed set of goals, strategies, and action steps, detailed in full starting on page 20, is meant to be used by the community in coordination with existing County and city homelessness plans and offers a workplan (Appendix B) for how to take action over the next three years. By working to address homelessness through these concrete strategies and action steps, Yolo County can make strides in strengthening services and improving coordination. Taking the actions outlined in this plan will strengthen the County's entire homeless system of care, improving the lives of those it serves.

Sincerely,



Patrick S. Blacklock
County Administrator

II. Introduction

Sparked by the opportunity presented through the NPLH Program, this Plan was developed through a multi-phased, collaborative community process. The process began with a Launch Summit held on November 13th, 2018, where community stakeholders and representatives were invited to participate in a discussion regarding:

1. The need to develop a county plan that included current information on the status of unsheltered and sheltered homelessness in Yolo County;
2. The efforts and initiatives being implemented to address the issue;
3. Progress to date;
4. Solutions of priority identified by the community; and
5. The need to include specific additional criteria to comply with the requirements of NPLH as outlined in the NPLH Program Guidelines.¹

Yolo County Health and Human Services Agency (HHS) partnered with HomeBase to facilitate the Launch Summit, three Issue Summits, and a consumer focus group, conduct an Environmental Scan to solicit specific feedback from key stakeholders, and prepare the final Plan. Topics for the Issue Summits were informed by the Launch Summit, where participants utilized the 2017 update to the 10-Year Plan to End Homelessness, conducted by Yolo County Housing, to identify three objectives of priority. The Issue Summits were held in the cities of Davis, West Sacramento, and Woodland, between December 4-5, 2018, to further discuss strategies and action steps to achieve the objectives identified for priority, which are outlined in detail in the section of the Plan devoted to “Solutions to Homelessness in Yolo County.” To see a complete list of those who provided input in the development of this Plan please see Appendix A.

III. Homelessness in Yolo County

In alignment with the recently issued Yolo County HHS Homeless Services State Fiscal Year (SFY) 17/18 Year End Report,² the below “snapshot” of homelessness countywide in Yolo is comprised of data collected in partnership with local jurisdictions through the annual PIT Count, the Housing Inventory Count (HIC), and via the Yolo County Homeless Management Information System (HMIS). This snapshot provides data on the current population of persons experiencing homelessness in Yolo, parsed out into demographics of significance. Additionally, data was also collected specifically to reflect the population of persons experiencing homelessness with serious mental illness or co-occurring disorders, to meet the criteria of the No Place Like Home program requirements.

A. 2017 Point-in-Time Count

The 2017 Yolo County PIT Count was conducted on January 23, 2017, by the Yolo County Continuum of Care (CoC), referred to as the Homeless and Poverty Action Coalition (HPAC).³ The count is mandated by the U.S Department of Housing and Urban Development (HUD), which requires all

¹ NPLH Program Guidelines; <http://www.hcd.ca.gov/grants-funding/active-funding/docs/NPLHGuidelines082519-v1.pdf>

² Yolo County Homeless Services Update FY 17/18: Fiscal Year 2017-2018 Year End Report; November 9, 2018; <https://www.yolocounty.org/home/showdocument?id=55903>

³ 2017 Yolo County Homeless Count Report; <https://www.yolocounty.org/home/showdocument?id=41677>, page 1.

Yolo County Plan to Address Homelessness

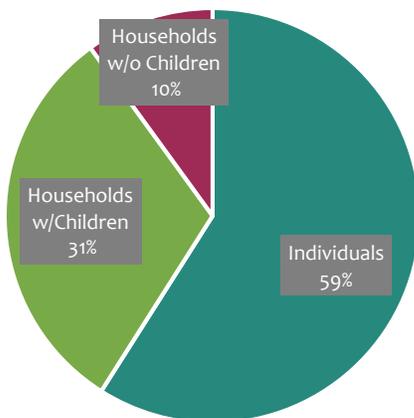
communities that receive grant funding from HUD for addressing homelessness to conduct an annual count of people experiencing sheltered homelessness and a biannual count of people experiencing unsheltered homelessness within the boundaries of the CoC geographic region on a single night in January.⁴ According to the 2017 Yolo County Homeless Count Report, the PIT count identified a total of **459** persons experiencing homelessness on a single night countywide. Of that number, **209** persons were unsheltered.

i. Demographics of Persons Experiencing Homelessness

Household Status

Of the 459 persons experiencing homelessness identified in 2017, **270 (59%)** were **single individuals**, while **143 (31%)** adults were in **households with children**, and **46 (10%)** adults were in **households without children**.⁶

Household Status



Sheltered vs. Unsheltered ⁵		
	Sheltered	Unsheltered
Individuals	40.7%	59.3%
Households w/o Children	4.3%	95.7%
Households w/ Children	96.5%	3.5%

Age

Of the total number of persons experiencing homelessness identified in the PIT Count, **272 (59%)** were between the ages of **25-54**, while **79 (17%)** were adults **aged 54 and over**; **22 (5%)** were **Transitional Aged Youth (TAY)** between the ages of **18-24**, and **86 (19%)** were **youth aged 0 to 17 years old**. Of the **Transitional Aged Youth (18-24)**, **18 (67%)** were **unaccompanied** by an adult over age 25, while only **2 (2%)** of **youth aged 17 and younger**, were unaccompanied.⁷

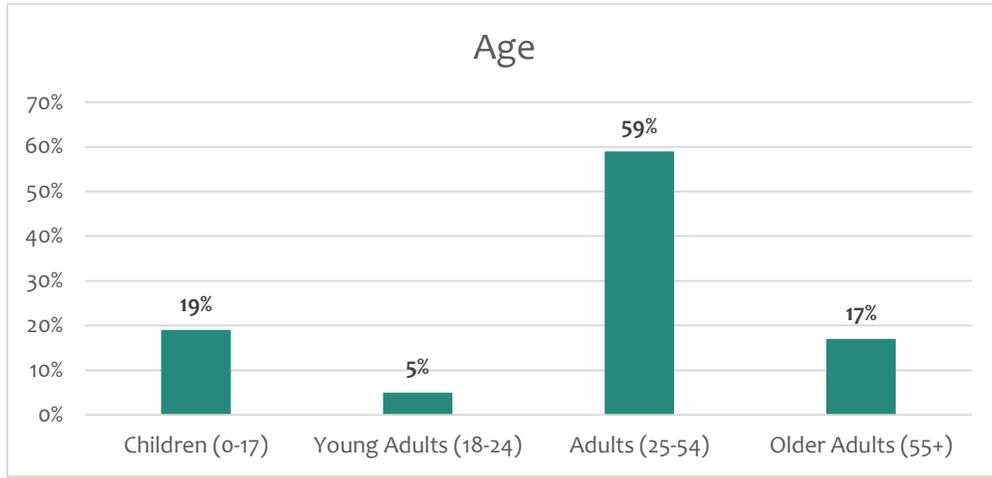
⁴ 2017 Yolo County Homeless Count Report; page 7.

⁵ 2017 Yolo County Homeless Count Report; page 2.

⁶ 2017 Yolo County Homeless Count Report; page 13, "Appendix B: Household Status."

⁷ 2017 Yolo County Homeless Count Report; page 12, "Appendix B: Age."

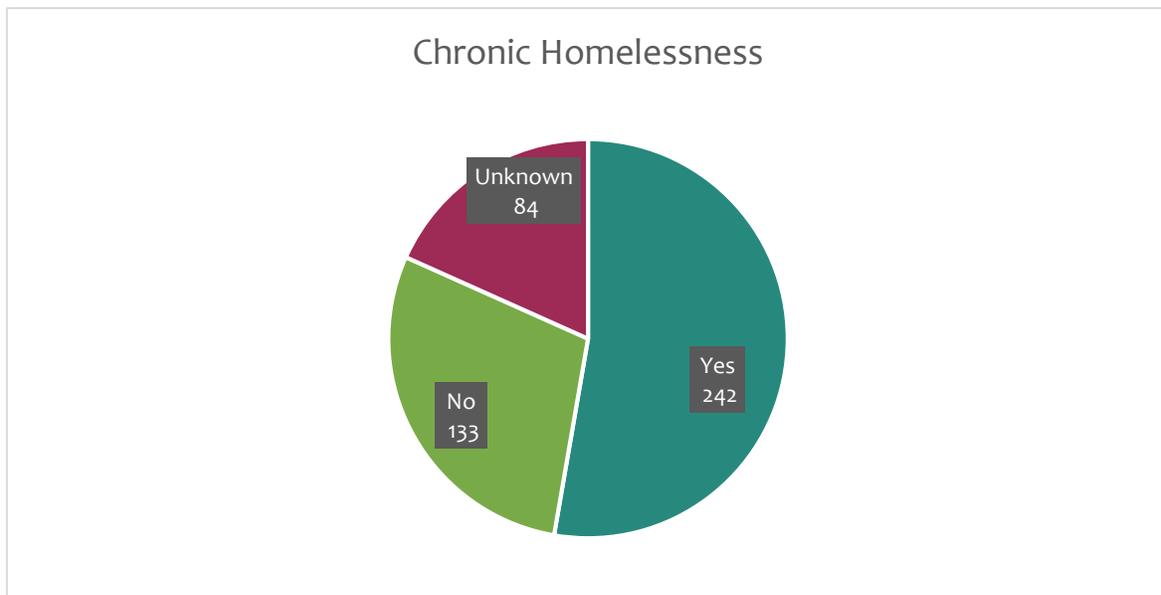
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Of the children, 2% (2) were unaccompanied by an adult. Of the young adults, 67% (18) were unaccompanied by an adult over age 25.

Chronic Homelessness

242 (53%) persons identified during the PIT Count were identified as experiencing **chronic homelessness**.⁸ Per the final rule on Chronic Homelessness, HUD considers a person to be chronically homeless where that person is an individual or family that is homeless and resides in a place not meant for human habitation, a safe haven, or in an emergency shelter, and has been homeless and residing in such a place for at least 1 year or on at least four separate occasions in the past 3 years. The statutory definition also requires that the individual or family has a head of household with a diagnosable substance use disorder, serious mental illness, developmental disability, posttraumatic stress disorder, cognitive impairment(s) resulting from a brain injury, or chronic physical illness or disability.⁹



⁸ 2017 Yolo County Homeless Count Report; page 18, "Appendix B: Chronic Homelessness."

⁹ Section 401(2) of the McKinney-Vento Homeless Assistance Act, 42 U.S.C. 11360

B. Persons Experiencing Homelessness with SMI, SED, & Co-Occurring Disorders

On the night of the 2017 Point-In-Time Count, of the total number of persons experiencing homelessness identified countywide, **114 (25%)** were experiencing serious mental illness (SMI); of those 114 persons, **42 (37%)** were sheltered, while **72 (63%)** were unsheltered.¹⁰ This is consistent with data from the Yolo County Homeless Management Information System (HMIS) for the last day of Federal Fiscal Year (FFY) 16/17. The Yolo County HMIS includes not only information on the number of people experiencing homelessness (as captured by the PIT Count), but also information on the number of persons formerly homeless and now housed through subsidized housing programs or participating in homeless prevention programs. In both cases, we see between 23-25% have self-reported serious mental illness.

According to Yolo County HMIS data, on September 30, 2017, the following numbers of “active”¹¹ adult participants were reported in Permanent Supportive Housing (PSH), Rapid Rehousing (RRH), Transitional Housing (TH), Shelter, Places Not Fit for Human Habitation, and in unstably housed situations (signaling participants were “At Risk” of homelessness):

Location	Serious Mental Illness (SMI) (Only)	Co-Occurring Disorders (COD)	Total of SMI and COD	Total of all Active Participants
PSH	9	21	30	114
RRH	1	0	1	46
TH	1	0	1	12
Shelter	5	5	10	77
At Risk	3	0	3	37
Place Not Fit	32	58	90	275
			135 (24%)	561

While information on the current **estimate of children and adolescents experiencing homelessness concurrently with Serious Emotional Disturbance (SED)** is not being tracked in a way that is consistent with the definition used by the Mental Health Services Act (WIC Section 5600.3)¹², a portion of the estimated 489 homeless youth enrolled in Yolo County schools receive special education supports for Emotional Disturbance.¹³ An emerging strategy identified by community partners and stakeholders has been to further enhance and coordinate the data that is being collected through the Yolo County HHSA Child, Youth & Family Branch as well as the Yolo County Office of Education via the school districts of the various jurisdictions.

¹⁰ 2017 Yolo County Homeless Count Report; page 20, “Appendix B: Serious Mental Illness.”

¹¹ Yolo County HMIS data report for persons with serious mental illness and co-occurring disorders, for the date of September 30, 2017; The report is generated off of a By-Name List, which provides information on individuals in permanent housing, rapid rehousing, transitional housing, emergency shelter, those at-risk of experiencing homelessness, and those who are experiencing unsheltered homelessness. Data related to unsheltered individuals includes those participating in programs serving individuals living homeless and those whose last exit from a project was to a destination considered unfit for human habitation.

¹² Seriously Emotionally Disturbed children or adolescents, defined as: Minors under the age of 18 years who have a mental disorder as identified in the most recent edition of the DSM, other than a primary substance use disorder or developmental disorder and, (1) The minor has substantial impairment in at least two of the following areas: self-care, school functioning, family relationships, or ability to function in the community, or (2) The child displays one of the following: psychotic features, risk of suicide or risk of violence due to a mental disorder.

¹³ Information provided by the Yolo County Office of Education; estimate current as of November 20, 2018.

IV. The Homeless System of Care in Yolo County

The Yolo County homeless system of care provides housing assistance for Yolo County residents as well as a robust range of services for persons experiencing homelessness; resources include emergency shelter, transitional housing, rapid rehousing, permanent supportive housing, homeless outreach, as well as housing case management and housing navigation.¹⁴ The system of care is led by decision and policymakers, including the following:

- Yolo County Board of Supervisors,
- City Councils of the cities of Davis, West Sacramento, Winters, and Woodland,
- Local non-profit boards, as well as the Yolo County Housing Authority (Yolo County Housing), and developer boards.

Local initiatives to prevent and end homelessness in Yolo are spearheaded by three main collaborative groups:

- the 10-Year Plan to End Homelessness Executive Commission (staffed by Yolo County Housing),
- the Cities and County Workgroup (composed of city managers from the above jurisdictions, the County Administrator, the Director of the Yolo County HHSA, and Homeless Coordinators from the cities of Davis, West Sacramento, and Woodland), and
- the Homeless and Poverty Action Coalition (the Yolo Continuum of Care, staffed by the County Homeless Coordinator).¹⁵

This section details recent strides made by the Yolo system of care in improving outcomes for persons experiencing homelessness through selected System Performance Measures as reported annually to HUD and details the work underway to continue seeing progress in ending homelessness countywide.

A. System Performance Measures

A source of data that is helpful in understanding the efficacy of work conducted by Yolo County partners in ending homelessness is the annual System Performance Measures¹⁶ report submitted to HUD. This report focuses on performance at the system-level as opposed to performance at the project-level, which is the intent of the Homeless Management Information System (HMIS). While Yolo County is committed to improving performance under all seven system-level performance measures, four measures provide particular insight into the efficacy of the system of care on the whole:

- the length of time persons remain homeless in emergency shelter and transitional housing projects,
- the number of persons experiencing homelessness for the first time,
- the extent to which persons experiencing homelessness return to homelessness after placement in permanent housing, and

¹⁴ <https://www.yolocounty.org/health-human-services/homeless-services>

¹⁵ Yolo County Homeless System chart, updated October 31, 2018.

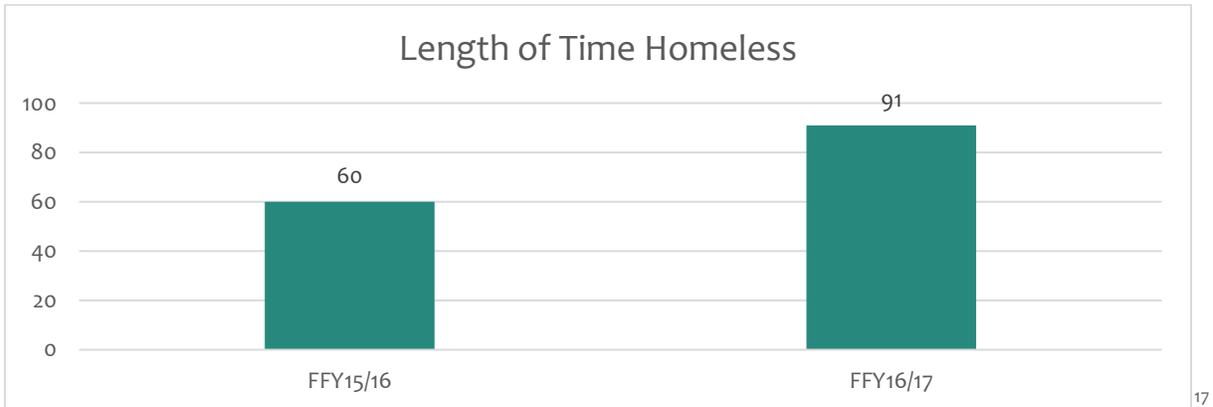
¹⁶ For more information on HUD System Performance Measures, please follow the link: <https://www.hudexchange.info/programs/coc/system-performance-measures/#guidance>

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- the percentage of successful placements in permanent housing.

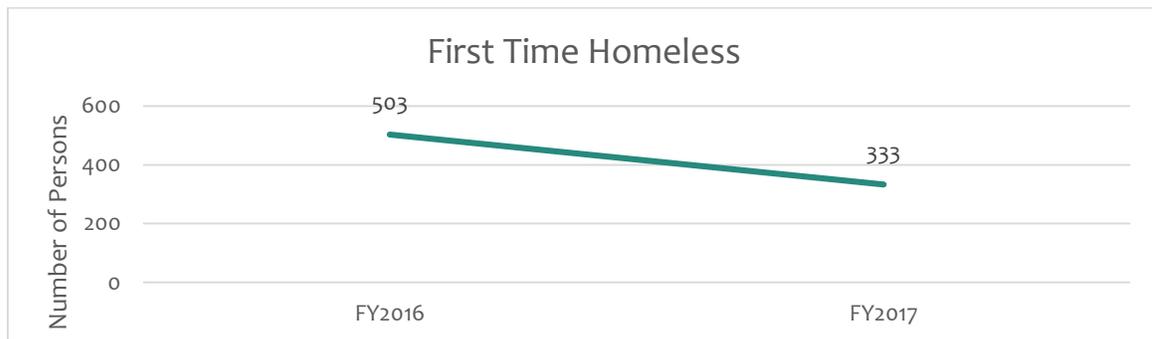
i. Length of Time Homeless

Yolo County experienced an increase in average Length of Time Homeless from FFY15/16 to FFY16/17 of 31 nights, captured by entries into and exits from emergency shelter. While bed nights for participants in emergency shelter in FFY15/16 averaged 60 nights, beds nights in FFY16/17 averaged 91.



ii. First Time Homelessness

In FFY16/17, the number of persons who became homeless for the first time in Yolo County, demonstrated by the number of entries into Emergency Shelter, Safe Haven, Transitional Housing, and Permanent Housing programs, was 333.¹⁸ This was a 34% decrease from the previous FFY15/16, where 503 total entries into these programs were reported. However, it is unclear how indicative the decrease in the number of entries is of a decrease in overall entries into homelessness countywide; correlated with an increase in Length of Time Homeless from FFY15/16 to FFY16/17, because emergency shelter beds were occupied for longer lengths of time, this meant that fewer beds were available for persons experiencing first-time homelessness in FFY16/17.

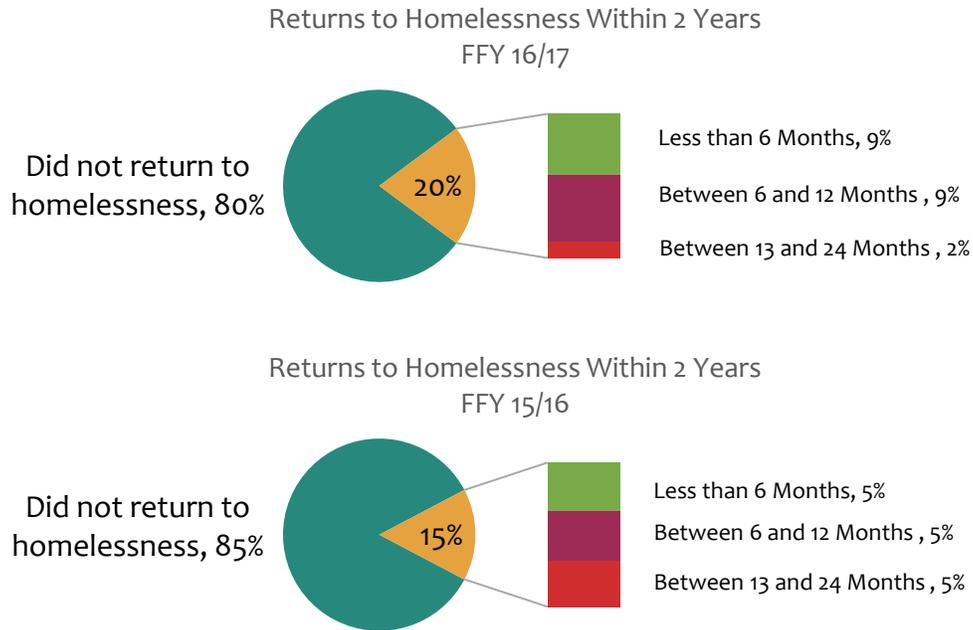


¹⁷ Yolo County CoC FY2017 System Performance Measures, submitted May 25, 2018; Measure 1.a., Metric 1.1

¹⁸ Yolo County CoC FY2017 System Performance Measures, submitted May 25, 2018; Measure 5, Metric 5.2

iii. Returns to Homelessness

In FFY16/17, 300 persons had exited homelessness to a permanent housing destination in the 2 years prior.¹⁹ Of those 300, a total of 61 persons had returned to homelessness within 2 years of securing permanent housing: 26 returned to homelessness less than 6 months after placement, 28 returned between 6 and 12 months, and 7 returned between 13 and 24 months. In FFY15/16, by comparison, of the 324 persons who had exited homelessness to a permanent housing destination, a total of 50 had returned to homelessness within 2 years: 17 returned to homelessness less than 6 months after placement, 17 returned between 6 and 12 months, and 16 returned between 13 and 24 months.



iv. Successful Placements & Rate of Retention in Permanent Housing

Of the total 52 persons residing in permanent housing (excluding Rapid Rehousing) during FY2017, 51 (or 98%) remained in permanent housing or exited to another permanent housing destination; this is an improvement from the 95% performance reported in FY2016.²⁰



¹⁹ Yolo County CoC FY2017 System Performance Measures, submitted May 25, 2018; Measure 2

²⁰ Yolo County CoC FY2017 System Performance Measures, submitted May 25, 2018; Measure 7, Metric 7b.2

B. Work Underway to End Homelessness in Yolo County

As mentioned above, Yolo County HHS has partnered with various entities that are working to end homelessness countywide; a description of each partner entity/agency can be found below, along with a summary of its current efforts and projects aimed at addressing homelessness. Please note the list of providers is not exhaustive.

i. Partners in Ending Homelessness

Yolo Continuum of Care – HPAC

The Davis/Woodland/Yolo County Continuum of Care, referred to as the Homeless and Poverty Action Coalition (HPAC), is a local planning body that provides leadership and coordination on the issues of homelessness and poverty in Yolo County.²¹ HPAC provides leadership on the efforts to end and prevent homelessness and poverty in Yolo County, with a vision of creating and sustaining a comprehensive, coordinated, and balanced array of human services for homeless and low-income individuals and families within the county.

In its role of fulfilling many of the federal, state, and local government mandates, HPAC serves numerous roles and responsibilities including locally implementing the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act, as well as the region’s Homeless Management Information System (HMIS). In addition to maintaining a coordinated response among service providers to ensure continuity of services, HPAC assists with assessing the need and identifying gaps in services for persons facing homelessness in Yolo County on an ongoing basis, as well as supporting the planning, funding and development of services to meet prioritized needs within Yolo County. HPAC also works to plan, develop, and sustain options to meet the housing needs of people facing homelessness, and promote access to and effective utilization of mainstream human services programs.

Efforts at the City Level

One of Yolo County’s unique assets is the strong partnership that exists between the individual city jurisdictions, and between the cities and the county. Representatives from each city participate on the Homeless and Poverty Action Coalition, as well. Below are a few recent developments in efforts to address homelessness locally:

In a resolution passed by the Davis, West Sacramento, and Woodland City Councils, each city has adopted the “Getting to Zero” resolution.²² As part of the campaign, the City of Davis has entered into contracts with local non-profit partner Davis Community Meals and Housing and Yolo County Housing, the local Housing Authority, to redouble its efforts to address homelessness, bolstered by a \$233,000 matching grant from Sutter Health. Expanded programs include bridge rental assistance, jobs training program, and case management, as well as New Pathways, a housing and support services program.²³

²¹ County homepage for the Homeless and Poverty Action Coalition; <https://www.yolocounty.org/health-human-services/boards-committees/homeless-and-poverty-action-coalition-hpac>; for more info on the HPAC, please see the CoC Governance Charter: <https://www.yolocounty.org/home/showdocument?id=45939>

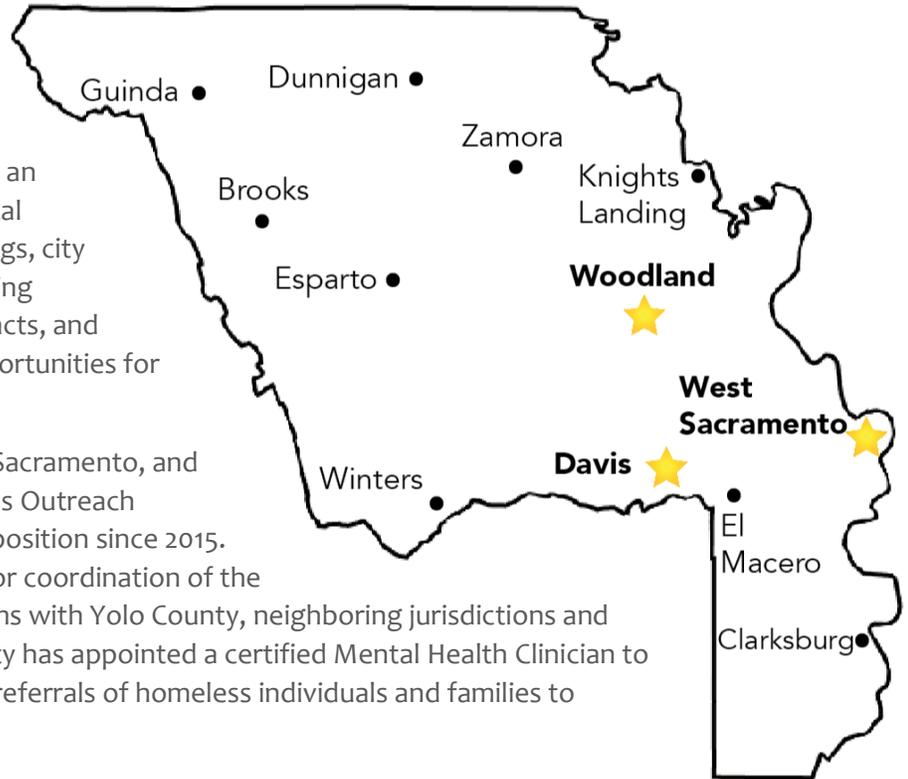
²² For more on Getting to Zero in Yolo County, please visit <https://wecangettozero.com/our-region/yolo-county>

²³ Davis Pathways website; <http://davispathways.org/>

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In November of 2016, the City of West Sacramento passed Measure E, enacting a 1/4 percent transactions and use tax (sales tax) raising approximately \$3.3 million annually on an ongoing basis for general governmental purposes.²⁴ It funds, among other things, city services and initiatives aimed at reducing homelessness and its community impacts, and improving educational and career opportunities for youth.

Additionally, the cities of Davis, West Sacramento, and Woodland have added a new Homeless Outreach Coordinator/Social Services Manager position since 2015. This position is primarily responsible for coordination of the City's homeless initiatives and programs with Yolo County, neighboring jurisdictions and service providers. In Woodland, the city has appointed a certified Mental Health Clinician to the position, who will also assist with referrals of homeless individuals and families to available services.²⁵



Homeless Housing and Service Providers

Yolo County HHSA works to ensure the health, safety, and economic stability of children and adults, particularly individuals that are vulnerable, through the administration of approximately 50 state and federally mandated programs and services as well as non-mandated programs that improve community well-being. HHSA provides services directly through internal services and indirectly through contracts with community partners.²⁶ For a current snapshot of efforts by the county, please see the Yolo County Homeless Services Year End Report for Fiscal Year 2017-2018.²⁷

Nonprofit partner agencies across Yolo County, (listed in detail in Appendix A to this plan, starting on page 29), provide low-income and homeless individuals and families with housing, food, and human services through various programs, including emergency shelter and transitional housing, residential treatment programs, permanent supportive housing program, resource center/day shelters, street outreach, and meals programs.²⁸

Public Housing Authority

Yolo County Housing, the local public housing authority, has a robust presence in Yolo County.²⁹ In partnership with Yolo County HHSA and the city of West Sacramento, Yolo County Housing has implemented a homelessness preference system called “Bridge to Housing,” a bridge voucher program that prioritizes persons living unsheltered in encampment situations. The partnership

²⁴ <https://blob.cityofwestsacramento.org/civica/filebank/blobdload.asp?BlobID=15497>

²⁵ <https://www.cityofwoodland.org/1042/Homeless-Coordination>

²⁶ <https://www.yolocounty.org/home/showdocument?id=50191>

²⁷ Yolo County Homeless Services Update FY 17/18: Fiscal Year 2017-2018 Year End Report, November 9, 2018.

²⁸ <https://daviscommunitymeals.org/programs/>

²⁹ Informational interview with community stakeholder; December 5, 2018.

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provides funding for move-in costs, bridge rental assistance, job training program and case management for individuals who are chronically homeless. The intent of the program is to target persons experiencing homelessness who are waiting for a Housing Choice Voucher and are likely to receive one in the next year or two.³⁰ Additionally, Yolo County Housing partners with the Davis Pathways program, which refers persons experiencing chronic homelessness to the housing authority for prioritization according to Yolo County Housing's homelessness preference.

Physical and Behavioral Health Providers

As mentioned above, the Sutter Healthcare Foundation provides funding for "Pathways to Employment," as well as bridge rental assistance through "Getting to Zero" vouchers, and intensive support services in the form of case management, the latter two both managed by Yolo County Housing.³¹ Additionally, CommuniCare (located in Davis, West Sacramento, and Woodland),³² as well as the Winters Healthcare Foundation, (located in Winters), provide medical and dental health care services without regard to a patient's ability to pay.³³

In West Sacramento, the Yolo County First Responders Mental Health Urgent Care Clinic offers services available to individuals experiencing a mental health crisis in Yolo County who are brought to the site by a first responder, law enforcement, family member or friend, and those who self-refer.³⁴ The Urgent Care's multi-disciplinary team offer services including crisis assessment and supportive counseling, medication intervention, safe discharge planning, and referrals to other local community services. Additionally, the West Sacramento Mental Health Services Act (MHSA) Adult and TAY Wellness Center provides a variety of rehabilitative services, skill-building groups, and a computer lab with internet access for eligible mental health consumers in a drop-in setting, for both Transitional Age Youth (16-24) and adults.³⁵

Service Providers for Domestic Violence Survivors

Empower Yolo provides Rapid Rehousing and services including emergency shelter to victims of domestic violence, sexual assault, stalking and trafficking in Yolo County. Additionally, Empower Yolo offers regular training to the HPAC and partner agencies regarding best practices for providing services to victims of domestic violence, sexual assault, stalking and trafficking, such as safety planning, and education on available resources.³⁶

Legal Services Providers

Legal Services of Northern California (LSNC) provides crucial civil legal services to low-income individuals and families across 23 counties in Northern California. LSNC engages in litigation, legislation, administrative advocacy, and community development work in a number of priority

³⁰ 2018 Yolo County CoC Collaborative Application. p. 13; <https://www.yolocounty.org/home/showdocument?id=54367>

³¹ For more information on the Sutter Health Foundation's "Getting to Zero" efforts, as part of a regional collaboration with the City of Davis and other partners across Yolo County, please follow the link; <http://davispathways.org/about/>

³² For more information on CommuniCare, please follow the link at <https://www.communicarehc.org/>

³³ Informational interview with Community Stakeholder; December 5, 2018.

³⁴ For more information on the First Responders' Mental Health Urgent Care, please follow the link at <https://www.cityofwestsacramento.org/Home/Components/News/News/792/67>, or see the flyer at <file:///Users/HomeBase/Downloads/MentalHealthClinicFlyer.pdf>

³⁵ <https://www.yolocounty.org/health-human-services/mental-health/mental-health-services>

³⁶ 2018 Yolo County CoC Collaborative Application. p. 8-9, 26; <https://www.yolocounty.org/home/showdocument?id=54367>

fields, such as preservation of housing, health care, enhancing economic stability, support for families, civil rights, education, and supporting populations with special vulnerabilities. LSNC continues to be a strong partner and a voice for vulnerable populations in Yolo County.³⁷ In conjunction with Yolo County Housing, LSNC facilitates an annual Fair Housing Conference attended by approximately 100 landlords, property owners, and CoC agencies, which provides education and support to both landlords and tenants regarding rights under state and federal legislation and available resources to enhance housing stability, prevent evictions, and preserve availability of affordable housing in Yolo County.³⁸

C. Community-Based Resources

The Yolo County homeless services system of care provides a robust range of community-based resources through collaboration between Yolo County HHSA, the cities of Davis, West Sacramento, and Woodland, as well as local service providers.³⁹ Resources include, but are not limited to, the following:

- Prevention and Diversion Resources (food, clothing, transportation, cash assistance, etc.)
- Crisis Intervention
- Emergency Shelter
- Rotating Winter Shelters/Warming Center
- Transitional Housing
- Rapid Rehousing
- Permanent Housing
- Homeless Outreach
- Housing Case Management
- Housing Navigation

As mentioned under “Partners in Ending Homelessness,” the most recent information on current community-based resources across Yolo County can be found in the Yolo County Homeless Services Update for FY 17/18.⁴⁰ However, a selection of highlighted resources can be found below.

i. Crisis Response Resources

The following resources comprise the crisis response resources in Yolo County; “crisis response resources” herein refers to the continuum of services and housing available to persons who are experiencing homelessness or are at imminent risk of experiencing homelessness. These resources include those focused on homelessness “prevention,” supporting persons at risk of homelessness to remain in housing, while others focus on “diversion” away from the homeless system of care, and back into stable housing situations.⁴¹

³⁷ For more information on Legal Services of Northern California, please follow the link; <https://lsnc.net/what-we-do>

³⁸ 2018 Yolo County CoC Collaborative Application. p. 8-9, 26; <https://www.yolocounty.org/home/showdocument?id=54367>

³⁹ For more details regarding resources provided by community partners, please visit <https://www.yolocounty.org/health-human-services/homeless-services>

⁴⁰ Yolo County Homeless Services Update FY 17/18: Fiscal Year 2017-2018 Year End Report; November 9, 2018;

⁴¹ Yolo County Homeless and Poverty Action Coalition (HPAC) Coordinated Entry Policies and Procedures, Adopted January 17, 2018; p. 31.

Prevention & Diversion

Prevention assistance is part of a targeted approach, where individuals' experience of falling into homelessness is prevented by resolving the underlying issue that would cause the individual to fall into homelessness. Diversion, on the other hand, focuses on diverting persons away from the homeless system of care by resolving their housing need outside of the system, such as aiding the individual or family in securing community-based housing. Diversion differs from prevention in that diversion is utilized once an individual or family is already homeless or homelessness is imminent, while prevention effectively prevents the individual from becoming homeless and keeps the individual or family in their current housing situation.⁴²

Yolo County partners provide homelessness prevention services under the HUD Emergency Solutions Grant (ESG) program. Under the program, clients can receive financial assistance for rental assistance, security and utility deposits, legal assistance, and credit repair. Additionally, other local nonprofit partners provide immediate, short-term emergency aid to families and individuals with incomes at or below the federal poverty level who live in Yolo County. Other resources to prevent homelessness or divert persons away from entering the system of care include rental assistance to help prevent evictions, cash assistance for first month's rent, and utility assistance to prevent utilities from being turned off or to have them restored.

Emergency Shelters & Warming Center

Both city and nonprofit partners in Davis and Woodland provide emergency shelters and rotating winter shelters across Yolo County;⁴³ as of 2018, a rotating Warming Center has also been added as a resource in West Sacramento.⁴⁴

At emergency shelters across Yolo, individuals and families experiencing a housing crisis can come and receive assistance to identify their particular needs and be connected to appropriate resources. Though services provided by individual programs may vary, emergency shelters in Yolo provide food, showers, clothing, laundry facilities, personal hygiene products, and other necessities, as well as access to a telephone, transportation arrangements, and mail address service. Overnight shelters, such as the Interfaith Rotating Winter Shelter, provide a nightly meal, sleeping materials and a designated location in which to sleep for the night.⁴⁵

Emergency shelter participants are also often provided with resources and information on accessing substance abuse recovery programs, career counseling, mental health counseling, and mainstream benefits such as CalFresh and Medi-Cal. They may also receive direct assistance in life skills training, individual planning, and obtaining housing. Additionally, shelter providers may offer homeless prevention services to help pay delinquent rent and utility bills is also provided.⁴⁶

⁴² Yolo County Homeless and Poverty Action Coalition (HPAC) Coordinated Entry Policies and Procedures, Adopted January 17, 2018; p. 32.

⁴³ For more information on emergency shelters, rotating winter shelters, transitional housing, and warming centers provided in Yolo County, please follow the links to city and agency pages found at the following link; <https://www.yolocounty.org/health-human-services/homeless-services>

⁴⁴ Mercy Coalition website; <https://wsmercycoalition.org/about/our-history/>

⁴⁵ Examples of resources provided by the Interfaith Rotating Winter Shelter; <http://interfaith-shelter.org/irws-history/>

⁴⁶ Examples of emergency shelter resources provided by the Resource Center at Davis Community Meals & Housing; <https://daviscommunitymeals.org/resource-center/>

Outreach

As described in the city of Woodland’s recent Homeless Action Plan, the Woodland Police Department has launched a Homeless Outreach Street Team (HOST) as part of a city-wide joint effort, which provides an email and hotline number for citizens to use to inform the HOST members as an alternative to calling law enforcement when concerns arise regarding activities associated with homelessness.⁴⁷ In February 2017, provider Fourth and Hope contracted with HHS to provide outreach services through the Substance Abuse and Mental Health Services Administration (SAMHSA) Cooperative Agreements to Benefit Homeless Individuals (CABHI) grant.⁴⁸

Additionally, launched in West Sacramento in October, 2018, the Downtown Streets Team is a work-experience program for volunteer Team Members, who are persons experiencing or at risk of becoming homeless in West Sacramento.⁴⁹ Through the program, Team Members have the opportunity to engage in beautification projects across the city, such as street cleaning and creek restoration, in exchange for non-cash stipends to cover basic needs. At the same time, Team Members are provided with case management and employment services.⁵⁰

ii. Interim and Permanent Housing Resources and Supports

In addition to the permanent housing resources and supportive services provided by partners, the HPAC also currently provides Permanent Supporting Housing for persons experiencing chronic homelessness through the HUD CoC program. For more information on the complete list of current housing available for persons experiencing homelessness, please see the HUD Continuum of Care Homeless Assistance Programs Housing Inventory Count (HIC) Report for 2018.⁵¹ For a comprehensive explanation of enhanced supportive services and residential treatment programs, please see the Yolo County Homeless Services Year End Report for Fiscal Year 2017-2018.⁵²

D. County Efforts to Prevent Criminalization of Homelessness

The county and individual city jurisdictions of Yolo have employed the following initiatives in an effort to better address the needs of persons experiencing homelessness who are in need of assistance. These initiatives seek to prevent unnecessary involvement in the criminal justice system and to support local law enforcement who are often the first to engage persons experiencing homelessness.

i. City Police Department Homeless Coordinators

The City Police Departments of Davis, West Sacramento, and Woodland have each hired a homeless coordinator, embedded within the police departments to assist with coordination of outreach and engagement to assist local police in responding to unsheltered homelessness.⁵³ Through these

⁴⁷ City of Woodland website; <https://www.cityofwoodland.org/532/Homeless-Outreach-Efforts>

⁴⁸ Yolo County Homeless Services Update FY 17/18: Fiscal Year 2017-2018 Year End Report; November 9, 2018;

⁴⁹ Downtown Streets Team website, West Sacramento webpage; <http://streetsteam.org/westSacramento>

⁵⁰ Downtown Streets Team website, program model webpage; <http://streetsteam.org/model>

⁵¹ HUD 2018 Continuum of Care Homeless Assistance Programs Housing Inventory Count (HIC) Report; https://www.hudexchange.info/resource/reportmanagement/published/CoC_HIC_State_CA_2018.PDF

⁵² Yolo County Homeless Services Update FY 17/18: Fiscal Year 2017-2018 Year End Report; November 9, 2018; pages 5-9.

⁵³ 2018 Yolo County CoC Collaborative Application. P.15; <https://www.yolocounty.org/home/showdocument?id=54367>

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partnerships, homeless coordinators ensure persons experiencing homelessness receive outreach and referrals to appropriate services while training local law enforcement on evidenced-based practices for engaging with and assisting individuals experiencing homelessness. Through coordinating efforts with law enforcement, these partnerships enhance and inform outreach practices to ensure that those who are most vulnerable and least likely to seek services receive special housing-focused outreach and avoid unnecessary or continued involvement with the criminal justice system where possible.

Homeless coordinators anchor the Community Services Unit within each department and are tasked with providing services for homeless individuals within the city. These services include direct outreach, intake assessment, referral to applicable services, connections to case management, and assistance with navigating to permanent housing. Homeless coordinators work very closely with senior lead police officers and other patrol officers and take referrals from community members and police dispatch who identify persons who may be in need of outreach and mental health services. In addition to phone referrals, certain of the homeless coordinators also provide walk-in office hours during the week at the local police or HHS department for those seeking services.⁵⁴ Building on these advancements, the homeless coordinators have begun to meet regularly to discuss ways in which efforts can be further coordinated between the jurisdictions, and to identify opportunities to conduct additional training and provide support to one another. Doing so will ensure consistency and maximize effectiveness of strategies to prevent criminalization of activities associated with homelessness and serious mental illness or co-occurring disorders countywide.

ii. Programs Serving Persons At-Risk of/Exiting Homelessness with Criminal Justice Involvement

Criminal Justice Diversion Program: Steps to Success

Yolo County HHS partnered with the local District Attorney's Office, Probation Department, and Public Defender's Office in February, 2017, to submit an application to the Board of State and Community Corrections for Proposition 47 grant funds to support a criminal justice diversion program called Steps to Success. After Yolo County's proposal was selected, the awarded \$6M will be administered over a 38-month period to provide wraparound services for individuals who are eligible for a criminal justice diversion program, but unlikely to succeed without supports due to their history of mental health issues and/or substance use disorders. Supports include intensive case management, employment assistance, civil legal assistance, and permanent housing assistance.⁵⁵

Transitional Housing for Probationers

Part of the criminal justice "realignment" strategy, the passage of AB 109 and AB 117 specifies new local responsibilities for managing certain adult offenders and provide certain local flexibility with regard to direction and service provision to these populations. Funded by AB 109, the Transitional Housing for Probationers program provides housing, food, and sober living oversight to probationers who would otherwise likely return to homelessness. The Yolo County Probation Department contracts with Fourth and Hope and Cache Creek Lodge to provide services.⁵⁶

⁵⁴ Informational Interview with community stakeholder; December 13, 2018.

⁵⁶ Yolo County Homeless Spending Inventory FY 16/17, p. 2

Yolo County Step-Down Housing

Funded through Intergovernmental Transfer (IGT) funds, the Yolo County Department of Health and Human Services contracted with Yolo County Housing to purchase a facility that provides safe, stable shelter to individual on probation. The Yolo County Probation Department provides onsite daily case management services.⁵⁷

E. Coordinated Entry in Yolo County

In January of 2017, HUD published the Notice CPD-17-01, which announced the requirement that all Continuums of Care must establish or update a Coordinated Entry System in accordance with the criteria set forth in 24 CFR 578.7(a)(8). According to the notice, all CoC- and ESG-funded projects operating within the CoC's geographic area must also work together to ensure the CoC's coordinated entry process allows for coordinated screening, assessment and referrals for all CoC and ESG projects.⁵⁸

On January 17, 2018, HPAC adopted policies and procedures for the **Yolo County Coordinated Entry System**. This system allows for people experiencing a crisis to access emergency homeless and housing services with as few barriers as possible, and “ensures that the most vulnerable individuals or families are prioritized first for permanent housing placements”.⁵⁹

i. Overview of Yolo County Coordinated Entry System

Coordinated Entry in Yolo County operates as a multi-site centralized system. Access to the Coordinated Entry System occurs through either points of referral or points of entry when an individual reaches out to a local organization to access mainstream services, or homeless specific services. Though participants may access the system through various sites, they can only be assessed at specific “Entry Point” sites, administered by Davis Community Meals and Housing, Empower Yolo, Fourth and Hope, and Yolo County HHSA, in addition to Davis, West Sacramento, and Woodland Police Departments (which provide access through outreach services).⁶⁰

Yolo's Coordinated Entry System covers the CoC's entire geographic area. Historically, the rural communities in Yolo County are the most difficult to reach, for which reason outreach programs operate throughout the community to reach individuals and families that live in the rural areas. Additionally, various community partners serve as “Referral Sites,” which may administer the HPAC Diversion and/or Prevention Tools to assist them in determining whether an individual should be referred to the Coordinated Entry System. If it is determined that the household's homelessness or risk of homelessness cannot be resolved by resources outside of the homeless system, a full assessment will be completed within 48 hours of the household's contact with the Coordinated Entry system. The primary assessment tool utilized to determine vulnerability is the Vulnerability Index and Service Prioritization Decision Assistance Tool (VI-SPDAT).⁶¹

⁵⁷ Yolo County Homeless Spending Inventory FY 17/18, p. 2

⁵⁸ HUD Notice CPD-17-01; <https://www.hudexchange.info/resources/documents/Notice-CPD-17-01-Establishing-Additional-Requirements-or-a-Continuum-of-Care-Centralized-or-Coordinated-Assessment-System.pdf>

⁵⁹ Yolo County Homeless and Poverty Action Coalition (HPAC) Coordinated Entry Policies and Procedures, Adopted January 17, 2018; <https://www.yolocounty.org/home/showdocument?id=54313>

⁶⁰ Yolo County Homeless and Poverty Action Coalition (HPAC) Coordinated Entry Policies and Procedures, Adopted January 17, 2018; p. 9.

⁶¹ Yolo County Homeless and Poverty Action Coalition (HPAC) Coordinated Entry Policies and Procedures, Adopted January 17, 2018; p. 20.

ii. Yolo Coordinated Entry Affirmative Marketing and Outreach

Yolo County is committed to ensuring that the Coordinated Entry System allows for people experiencing a housing crisis to access emergency homeless and housing services with as few barriers as possible; these services include homeless prevention assistance, domestic violence and emergency services hotlines, drop-in service programs, emergency shelters and other short-term crisis residential programs. Coordinated Entry is also linked to street outreach efforts so that people sleeping on the streets are prioritized for assistance in the same manner as any other person assessed through the coordinated entry process.⁶²

HPAC, the Yolo County Continuum of Care, affirmatively markets its housing and supportive services to eligible persons regardless of race, color, national origin, religion, sex, sexual orientation, gender, age, familial status, history of domestic violence, or disability, who are least likely to apply in the absence of special outreach and maintains records of those marketing activities. Housing made available through the Coordinated Entry System is also made available to individuals and families without regard to actual or perceived sexual orientation, gender identity, or marital status in accordance with 24 CFR 5.105 (a)(2). Additionally, HPAC follows the nondiscrimination and affirmative outreach requirements for the Emergency Solutions Grant program in accordance with 24 CFR § 576.407(a) and (b).⁶³

iii. Referrals & Data Collection for No Place Like Home-Assisted Units

Persons experiencing homelessness, chronic homelessness, and those “at risk” of chronic homelessness with serious mental illness or co-occurring disorders will continue to be prioritized and referred to appropriate housing and services to meet their needs, including NPLH-Assisted Units, through the Yolo County Coordinated Entry System.

Referrals Through Yolo County Coordinated Entry for Persons Experiencing Homelessness, Chronic Homelessness, or “At Risk” of Chronic Homelessness with SMI/SED

The tenant selection process shall be in compliance with NPLH Program Guidelines Section 205(a)(2)A., and Section 211, and with 25 CCR Section 8305. The Coordinated Entry Referral Process described below shall be utilized in compliance with 24 CFR 578.7(a)(8). All NPLH projects will follow the Coordinated Entry Policies and Procedures, as most recently adopted by the local continuum of care at the time of unit vacancy. These policies incorporate all NPLH target populations, including: homeless, chronically homeless, individuals at-risk of chronic homelessness, individuals with SMI, and families with children with emotional disturbance.

The Yolo County Health and Human Services Agency (HHS) will facilitate the NPLH Coordinated Entry Referral Process, in its capacity as staff to the Davis/Woodland/Yolo County Continuum of Care (CoC). The standardized assessment tool utilized will be the Vulnerability Index and Service Prioritization and Decision Assistance Tool (VI-SPDAT), as programmed in the Yolo County Homeless Management Information System (HMIS) at the time of unit vacancy.

When a NPLH unit is available, HHS will notify participating Coordinated Entry service providers of the vacancy, and solicit referrals through targeted outreach to community service providers that

⁶² Yolo County Homeless and Poverty Action Coalition (HPAC) Coordinated Entry Policies and Procedures, Adopted January 17, 2018; p. 12.

⁶³ Yolo County Homeless and Poverty Action Coalition (HPAC) Coordinated Entry Policies and Procedures, Adopted January 17, 2018; p. 13.

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serve the project’s target populations, for a specified “referral period”. This ensures that any potentially eligible individuals who are not already on the existing countywide Community Queue in HMIS, have the opportunity to be assessed and considered for the vacancy. Service providers will review previous referrals and make new referrals to the Community Queue. For providers who are not HMIS Partner Agencies, HHSa will facilitate completion of the VI-SPDAT and referral to the Community Queue in HMIS. After the referral period has ended, HHSa screens all referrals active on the Community Queue for eligibility to NPLH Assisted Units: Referrals that meet eligibility requirements for NPLH Assisted Units move forward for prioritization according to highest vulnerability as indicated by the VI-SPDAT numerical score. Referrals that are ineligible to the NPLH program remain on the Community Queue to be considered for other housing options.

Systems in Place to Collect NPLH Data

All data points listed in Section 214 of the NPLH Program Guidelines will be collected by Yolo County HHSa using HMIS and information provided by Project Site Management. Aggregated data on emergency room visits for NPLH tenants before and after move in, the average number of hospital and psychiatric facility admissions and in-patient days before and after move in, and the number of arrests and returns to jail or prison before and after move in will be collected through the State Data Quality/Full Service Partnership Database, as available for these categories.

Additionally, the following practices will be adopted by NPLH-funded supportive housing projects in Yolo County: an independent audit will be submitted from a certified public accountant for each NPLH-funded supportive housing project 90 days after the end of each program year; compliance reports will be submitted by program managers to Yolo County HHSa for all NPLH-Assisted units; by the last day of the Fiscal Year, data will be submitted to the California Department of Housing and Community Development including all items listed in Section 214 (e) of the NPLH Program Guidelines.

V. Service & Outreach Challenges

Yolo County has strong and diverse partnerships and resources as described above in the continued effort to prevent and end homelessness. However, partner entities and community stakeholders have identified the following barriers and challenges the County experiences in providing housing, services, and conducting outreach to persons experiencing homelessness:

Challenges Understanding and Accessing Crisis Resources

While Yolo County providers have had much success in connecting persons experiencing homelessness with permanent housing, other resources that assist with preventing individuals’ homelessness or diverting them from the homeless system of care may be difficult to utilize. Challenges to accessing and utilizing these resources include a lack of consistent information and understanding concerning all available resources countywide aimed at crisis response. Additionally, county partners experience challenges identifying and assisting persons at risk of homelessness, before falling into homelessness becomes unavoidable.⁶⁴

⁶⁴ Informational interview with community stakeholder; December 12, 2018.

Need for Increased and Diverse Stock of Affordable Housing

In order to meet the housing needs of persons experiencing homelessness in Yolo County, additional and more diverse affordable housing must be developed for persons with very-low to no-income.⁶⁵ Without additional available affordable housing, housing navigators often must compete against each other for the same limited housing stock.⁶⁶ Community partners also noted that additional opportunities to foster partnerships between the cities/county and housing developers of all kinds should be identified and pursued.⁶⁷

Challenges Providing Outreach and Coordinated Care to Persons Experiencing Homelessness with Behavioral Health Needs

Continued efforts by the various city and county outreach teams to facilitate referrals to resources for persons experiencing homelessness identified as likely benefitting from behavioral health assistance have been largely successful. However, outreach and service providers noted challenges in coordinating referrals to mental health resources for some of these individuals, who may also have had multiple engagements with the criminal justice system. Similar to challenges accessing consistent information on available crisis response resources, information on all available mental health services and strategies must be collected and disseminated to providers. Additionally, methods for co-locating services or enhancing capacity of mental health providers should be considered.

A. Barriers to Serving the No Place Like Home Target Population

i. Need for Increased Collaboration - Data Collection and Analysis Capacity

One challenge in understanding the current scope of the need of children and adolescents experiencing homelessness concurrent with serious Emotional Disturbance is the lack of integration of the data systems that currently collect this level of information. School districts may have barriers to capturing this type of data because data on these services largely seem to be collected outside of the school-setting and kept confidential.

Additionally, while school districts and the Office of Education are able to capture data regarding the number of children and adolescents experiencing homelessness who receive special education services for “emotional disturbance,” this definition is inconsistent with the definition as housed in the Mental Health Services Act (WIC Section 5600.3). Where it can benefit the provision of housing and services to children and adolescents who may be eligible for NPLH-Assisted housing, methods for capturing and streamlining sharing of the various data sets for comparison purposes must be developed for all eligible children, adolescents, and their families to be identified for assistance through the NPLH program.

⁶⁵ Informational interview with community stakeholder; December 5, 2018.

⁶⁶ Informational interview with community stakeholder; December 4, 2018.

⁶⁷ Informational interview with community stakeholder; December 4, 2018.

ii. Emerging Implementation and Expansion of the Yolo County Coordinated Entry System

As explained in detail above, additional components of the Yolo County Coordinated Entry System must be further developed and expanded in order to accommodate identification, assessment, and prioritization for eligible members of the NPLH Target Population, in order to facilitate referrals to NPLH-Assisted Units. This includes enhancements to discharge planning protocols and practices with institutional settings, including jails, probation, hospitals, and residential treatment facilities, etc.

VI. Solutions to Homelessness in Yolo County

Through a community process, the Plan identified four issue area objectives from the County's 2017 General and Strategic Plan to End Homelessness to focus on. Yolo County's 2017 General and Strategic Plan to End Homelessness is a revision to the County's 10-year Plan to End Homelessness and outlines the move from the County's traditional homeless service delivery model to a coordinated model based on Housing First principles.⁶⁸ The areas of focus for this Plan include:

1. Strengthen the homeless crisis response system with an emphasis on developing prevention services.
2. Increase affordable housing options for the most vulnerable.
3. Stabilize and maintain physical and behavioral health for those with the highest needs.
4. Examine systems-level coordination and identify opportunities for improved partnership.

Over the next three years, the goals, strategies and action steps that are detailed below around each of these issue areas will be reviewed by community partners on an annual basis to assess the level of progress in each of these areas. As part of its work, leadership will also review these action steps and tie them into a larger workplan with identified leadership to drive each piece of the work.

Goal 1: Strengthen the Homeless Crisis Response System, Focusing on Prevention

As described earlier, the 2017 PIT Count data found that 45.5% (209) of those who are homeless are unsheltered. Yolo County saw an overall decrease in the number of individuals experiencing homelessness between 2015 and 2017 (498 compared to 459), but the number of those unsheltered increased slightly during 2015-2017 from 194 to 209. Unsheltered homelessness in the County has seen little movement from 2009-2017 (202 vs. 209 individuals), indicating a need for increased crisis response and prevention services to make headway in reducing those experiencing unsheltered homelessness.

Over the next three years, success toward strengthening the crisis response system and building out prevention services will be measured by:

1. A decrease in the number of people experiencing unsheltered homelessness in Yolo County, as measured through the bi-annual Point-in-Time Count.

⁶⁸ Yolo County 2017 General and Strategic Plan to End Homelessness: <https://www.yolocounty.org/Home/ShowDocument?id=55468>.

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2. An increase in the available funding and resources for prevention services county-wide, which will be tracked through the year-end report of homelessness funding in Yolo County.
3. An increase in the number of emergency shelter beds, as indicated in the annual Housing Inventory Count.

Strategy 1.A. Map the Homeless Crisis Response System and Prevention Resources Available.

Action 1.A.1: Create a crisis response and prevention services guide. Yolo County's homelessness services are located across the County and have evolved over time, responding to community need and funding changes. Mapping the homeless crisis response system will involve two main undertakings. First, in order to better understand where homeless crisis response and prevention services currently exist the County will work with partners over the next year to compile a complete list of resources, including who provides the resource and where. Crisis response and prevention services can include flexible funding pools, rental assistance, emergency shelter, transitional housing, and outreach services. This information will help inform the larger social service community and public about what resources are available across the County. This guide will live online and updated on a regular basis to ensure that all partners and community stakeholders have access to a complete and current list of what crisis response resources exist in Yolo County. This guide will also be leveraged in outreach to landlords, businesses, and other organizations looking for resources to help support those experiencing housing instability and at-risk of experiencing homelessness.

Action 1.A.2: Complete an intercept map for the homeless services system. The second component of mapping the crisis response system and prevention resources will utilize sequential intercept mapping. Yolo County HHSA completed intercept mapping for the criminal justice system and partner with the community and HPAC to conduct a similar process for the homeless crisis response system. Sequential intercept mapping provides the opportunity to identify intercepts, or points along an individual's or family's engagement in the homelessness system of care, detailing where opportunities for engagement are and what types of resources are available at each point. This framework offers the opportunity to map out resources with partners while also working strategically to identify gaps and opportunities for improved outreach and coordination. This intercept mapping exercise will be a more in-depth planning activity that the County undertakes in the next three years to identify longer-term intervention strategies.

Strategy 1.B. Leverage New State Funding Sources to Invest in Prevention and Crisis Response Services.

According to Yolo County's 2017 HIC, there were 157 emergency shelter beds in the County. The County has one permanent emergency shelter in Woodland, a domestic violence shelter, and seasonal winter shelters and warming centers located in Davis, Woodland and West Sacramento. This number of shelter beds does not meet current need. In order to address the number of unsheltered individuals living in the County, there must be an increase in the County's shelter capacity by turning seasonal shelters into year-round shelters and developing new shelter beds. In addition, preventing individuals and families from becoming homeless requires investing in resources that can in turn be used to help those at-risk. While the County currently has a small amount of prevention funding, there is a need to increase this funding and make it more flexible.

Action Step 1.B.1: Apply for state funding as available. New state funding, including the California Emergency Solutions and Housing (CESH) funding and the Homeless Emergency Aid Program (HEAP), provide more flexible sources of funds that can be used for prevention and crisis response. The County plans to leverage \$198,411 of CESH funds to for rental assistance, housing relocation, and stabilization services across the county. In addition, using HEAP funding Yolo will expand crisis response services through expanded shelter capacity. There are also plans to expand shelter capacity in Woodland by 25-35 beds and add 60 new supportive housing units as part of a larger relocation and expansion effort to develop more supportive housing and new treatment facilities.

Action Step 1.B.2: Utilize SB 2 funding for crisis response and prevention services. While these are one-time funding sources, there are opportunities to leverage other new state funding. For example, funding through the real estate transaction tax (2017's SB 2 Building Jobs and Homes Act) will provide funding directly to local governments starting in 2019.⁶⁹ This funding may go toward assistance to those experiencing homelessness, including rental assistance and funding for emergency shelters. SB 2, in addition to a second round of CESH, can help increase investments in crisis response and prevention services. The County will track how funds for these services grow year over year with an emphasis on finding new opportunities to invest in the County's crisis response system.

Strategy 1.C. Develop and Pilot an Early Identification Tool to Assess Those in Need of Prevention Services.

Action Step 1.C.1: Coordinate partners and identify existing tools. A screening tool that assesses the need for prevention services will assist in determining what type of resources an individual or family at-risk of homelessness needs and provide support to them before they enter the homelessness system. In order to develop the screening tool, partners from across systems, including food banks, libraries, and schools, will determine how to define those at-risk of homelessness and identify any existing methods for assessing who is at-risk.

Action Steps 1.C.2 and 1.C.3: Develop a prevention tool and partner with providers to pilot. Building off of the review of existing tools, partners will develop a short screening tool. The tool will be piloted and evaluated to determine its ability to appropriately identify those at-risk and provide assistance that prevents them from experiencing homelessness. This screening tool will be paired with the resource guide so that when someone is identified as in-need of services, they are connected to appropriate services.

Goal 2: Increase Affordable Housing Options for Those Experiencing or At-Risk of Experiencing Homelessness

Yolo County is in a housing crisis and, like many areas across the state, is in need of developing a range of affordable housing options. While additional housing is needed for those at low and moderate-income levels, there is a significant need for housing for individuals and families who are economically the most vulnerable and living at very and extremely low-income levels. Within this

⁶⁹ California Department of Housing and Community Development: <http://www.hcd.ca.gov/policy-research/housing-package/cahp-faq.shtml#sb2>

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group there is especially a need for developing housing that assists those experiencing homelessness. According to Yolo County Housing's Annual Update for FY 2018, there are 7,700 renter families with housing needs who earn between 0-30% area median income (AMI). Developing housing that targets those most vulnerable, living at the lowest income level and experiencing or at-risk of homelessness, is critical. Connecting those experiencing or at-risk of homelessness to stable housing is crucial to supporting increased self-sufficiency and improved economic security. Progress toward this goal will be measured by:

1. An increase in the number of rental affordable housing units permitted (with secured funding) or developed and targeted toward those at 0-30% AMI as tracked through the California Department of Housing and Community Development Annual Housing Element Progress Report.
2. An increase in the number of individuals exiting homelessness to permanent housing as tracked through HMIS.
3. An increase in the number of individuals remaining housed for one year following experiencing homelessness as tracked through HMIS.

Developing new housing can take years, so observing significant progress toward these goals in three years may be challenging, which means examining the development that is permitted and has secured funding will help the County measure improvements in development. In order to achieve this goal, the County will work with the cities and housing partners to implement a series of strategies and action steps to increase affordable housing development.

Strategy 2.A. Invest in Alternative Housing Models to More Efficiently Develop Affordable Housing.

Developing more affordable housing units is critical in order to provide a wider range of housing options for those who are most in need while also helping prevent future homelessness. The County is leveraging new funding through NPLH to develop more affordable housing units. In the first round of competitive funding, West Sacramento and Woodland are applying for funding to develop 85 units (41 units NPLH) and 60 units (29 units NPLH), respectively. This investment in new affordable housing is an important step but the community recognizes a need to pursue additional opportunities for creating more affordable housing.

Action Step 2.A.1: Identify alternative housing models to pilot. County and City Leadership will partner with Planning Departments to explore opportunities for developing alternative models of housing, looking specifically at opportunities to develop Accessory Dwelling Units (ADUs), tiny homes, and utilize modular building techniques to build housing more quickly and efficiently. As part of assessing and creating pilots around these alternative models, Yolo will look to other communities who have piloted this type of housing development specifically to house those who have experienced homelessness. Los Angeles County and Multnomah County in Oregon are both piloting efforts around providing homeowners with financial incentives to develop ADUs if these units are rented out to those who have experienced homelessness or have a housing voucher.⁷⁰

⁷⁰ LA County ADU Pilot: <https://www.mas.la/adu-pilot-project/>; Multnomah County ADU Pilot Program: <https://enhabit.org/adus/wrapping-up-a-place-for-you-adu-pilot/>.

Action Steps 2.A.2 and 2.A.3: Review existing zoning laws and fees and partner with City Planning Departments to pilot models. As part of this work, partners will also review how to ease zoning and fee requirements in order to expedite this type of development and make it financially feasible. City planners will be an important partner in these efforts, helping develop and message new housing opportunities and the benefits of participating.

Additionally, the County will pair the housing opportunities with needed wraparound and mediation services. This additional service provision will help in maintaining tenant health while also providing support for landlords who may be hesitant to participate. Providing these services increases housing retention and stability. These alternative models for housing must also be pursued with efforts to continue expanding other supportive housing environments, like room and board housing.

Strategy 2.B. Create Public-Facing Resource Materials that Outline the Benefits of Affordable Housing Development.

Action Step 2.B.1: Create an FAQ document on the benefit and need for affordable housing in Yolo.

As a community, there is a need for greater education around the benefits of affordable housing development and the potential for positive impact in Yolo County. In order to help provide the public with more information around the importance of developing a range of affordable housing options, especially for those who are most vulnerable, the County will develop a set of resource materials to help make the public case for more affordable housing development. This information will help dispel myths around affordable housing and lift up the need for increased development in the community. This information will be posted online, easily accessible to the public. In addition, these materials can be used at community meetings and forums to speak to the need for affordable housing with accurate information that is specific to Yolo.

Strategy 2.C. Explore Options for a Local Funding Source for Affordable Housing Development.

Action Step 2.C.1: Review successful local funding measures. Ultimately, more housing development requires more funding. State programs like NPLH and tax credits help in encouraging affordable housing development, but these are not enough funds. Yolo County is experiencing a housing crisis and must explore the potential of developing new funding sources to address this crisis. Yolo County can look to what other communities in California have done to create new local funding for housing and homelessness services. For example, the 2018 election saw many cities taking up special measures to levy taxes to fund homelessness services and/or housing development.⁷¹ In 2016, the City of Los Angeles passed Proposition HHH, which increased property taxes by \$0.348 per square foot, providing \$1.2 billion in funding for supportive housing for those experiencing or at-risk of experiencing homelessness.⁷² While these efforts are primarily in larger cities and counties, Yolo County can learn how different communities are approaching generating new funds and can scale a proposal appropriately for Yolo County.

⁷¹ CityLab, “California Ballots Get Creative on Homelessness and Affordable Housing.” October 31, 2018. <https://www.citylab.com/equity/2018/10/november-california-ballots-homelessness-affordable-housing>.

⁷² Los Angeles Housing + Community Investment Department: <https://hcidla.lacity.org/prop-hhh>.

Action Steps 2.C.2 and 2.C.3: Partner with County and City leadership to discuss options for Yolo County and develop a proposal. Over the next three years, Yolo County will partner with county housing and homeless agencies, county leadership, and city council leadership to explore creating a local funding source for affordable housing development. This work will include working with Board of Supervisors and City Council representatives to review and evaluate potential options for providing new, local revenue for development. By the end of the three-year period, city and county leaders will have a recommendation and plan for pursuing a local funding stream for affordable housing development.

Goal 3: Stabilize and Maintain Physical and Behavioral Health for Those with the Highest Needs

The 2017 PIT Count found that 52% of those experiencing homelessness in Yolo County reported having one or more health issues.⁷³ Of those who reported having health issues, 57% identified having two or more health issues.⁷⁴ Of those experiencing homelessness in the County, 38% are chronically homeless. Homelessness is a health care issue and Yolo County recognizes how interconnected healthcare and housing are. Current efforts across the County have been successful in providing health care service outreach and co-located health care, but further development and expansion of these services is needed to reach all those experiencing homelessness. Yolo County will assess its progress toward stabilizing and maintaining physical and behavioral health for those with the highest needs by tracking:

1. Reductions in the number of health conditions reported by those identified as experiencing homelessness through the annual Point-in-Time Count.
2. Reductions in the number of Emergency Room visits by those experiencing homelessness as reported by existing data reporting systems.

In order to achieve this goal and realize these reductions, Yolo County will work to expand current mobile health outreach and co-located services while also leveraging new opportunities to build partnerships across health, housing, and homelessness services.

Strategy 3.A. Increase Access to Mobile and Co-located Health Services.

Action Step 3.A.1: Map current mobile health outreach and co-located services. Yolo County currently has a number of mobile health outreach efforts, including on-site medical service provision and outreach to those staying in shelters. However, the current status of health outreach efforts and where in the County services exist is not centralized in one place. As a first step, the County and its partners will map where existing mobile health outreach efforts exist, including those that reach individuals in shelters.

Action Steps 3.A.2 and 3.A.3: Identify areas of need and expand outreach and co-located services. After mapping where services exist, this information will be used to identify gaps in current services, both geographic and in terms of need. For example, community members indicated a need for behavioral health outreach. The inventory of current health outreach will then be used to help create

⁷³ Yolo County 2017 Homeless Count Report, p. 4.

⁷⁴ Ibid.

partnerships where there is the greatest need for mobile outreach services. In addition to having health workers go into the field, Yolo County will also work to expand mobile clinic outreach to a wider geography. The County can build off existing local models, like Elica Health Center's Health on Wheels, to scale mobile clinic outreach efforts.⁷⁵ By increasing health outreach efforts, service providers will also increase and form closer relationships with those who are experiencing homelessness. Developing these closer relationships will in turn help encourage engagement and the use of services by those experiencing homelessness while also providing opportunities to offer warm handoffs to other types of needed services. The connection to and provision of comprehensive services will offer the opportunity for those experiencing homelessness to improve their health and housing outcomes, ultimately leading to greater self-sufficiency.

Strategy 3.B. Improve Connections Between Health and Housing Efforts.

Critical to stabilizing and maintaining physical and behavioral health is having coordinated partners who are able to provide warm handoffs and assist clients in navigating services which support improved self-sufficiency such as access to public benefits or other sources of incomes. One example of how health and housing can be better connected is through medical respite. There is currently a four-bed medical respite program in Woodland, which provides intensive health and housing support. Expanding this type of model for those with serious health and housing needs is crucial to helping those with the most serious health concerns.

Action Step 3.B.1: Utilize AB 210 to improve information sharing between agencies. New state laws provide an opportunity to further develop partnerships between healthcare, housing, and homelessness services in the County. The new AB 210 legislation around information sharing and the creation of multidisciplinary teams (MDTs) makes it easier to share information between participating agencies and service providers in a homeless MDT. This allows partners from across different healthcare providers, housing and homelessness services to share and discuss relevant information about clients in order to help connect them to services and housing. This new information sharing opportunity can help bring new partners to the table, creating connections that improve coordination and client services. Yolo County already utilizes MDTs in helping connect those experiencing homelessness to housing and services. This existing MDT infrastructure will make it easier for the County to pursue the partnership and information sharing allowable under AB 210.

Action Steps 3.B.2 and 3.B.3: Utilize SB 1152 to create standardized hospital discharge policy and leverage this to engage with other system discharge efforts. A second new piece of state legislation, SB 1152, requires each hospital to include a written homeless patient discharge planning policy and process within a hospital's discharge policy. This bill was signed into law in 2018 and goes into effect on July 1, 2019. This new law provides the County the opportunity to standardize and coordinate its hospital discharge policies. In addition, this work can help spur discussions with other systems around discharge planning and be used as a template for engaging partners around this topic.

Yolo County is in a position to utilize both pieces of legislation to improve health and homelessness service delivery and partnerships, which ultimately will help improve coordination at the provider level and lead to improved outcomes for clients.

⁷⁵ Elica Health Centers, Health on Wheels: <https://www.elicahealth.org/health-on-wheels.html>.

Goal 4: Examine Systems Level Coordination

With multiple jurisdictions and service providers, the Yolo County system of care contains many components and partners. These partnerships require coordination in order to be successful. The prior goals incorporate elements of coordination, but this goal explicitly focuses on examining how to better coordinate and strengthen partnership efforts in order to improve service delivery, funding, and policy opportunities. Yolo County will qualitatively look at the following measures to assess whether systems level coordination and partnering is improving:

1. Increase in partners' awareness of the homelessness services offered across the County and cities.
2. Increase funding coordination across the County for homelessness services and housing development.

While these measures of success cannot be quantified through data that is currently collected, they can be measured through surveying and interviewing partners over the next three years to determine what current perceptions of coordination are, what additional improvements could be made, and whether progress is being made toward this goal.

Strategy 4.A. Leverage the Continuum of Care Structure to Strengthen Coordination and Partnerships.

Action Step 4.A.1: Utilize HPAC to review current coordination and partnership efforts. Yolo County's CoC, HPAC is a natural place for coordinating and strengthening partnerships around homelessness services and housing. Using HPAC as the convener, the CoC will review its current coordination efforts and partner engagement to determine how well coordination is happening currently. Over the next year, HPAC will reach out to partners via survey and interviews to determine what current perceptions of coordination are and what are opportunities for improvement. HPAC will also engage with cities, who have already begun meeting at the homeless outreach coordinator-level, to assess their thoughts on how to better coordinate across the entire County.

Action Steps 4.A.2 and 4.A.3: Look at how other CoCs in California partner and create a set of recommendations for increased partnership. HPAC will also research other potential models for improved coordination, looking to how other CoCs in California and across the country have approached CoC organization and coordination. Improved coordination and partnership will be assessed with an eye toward improving how direct services are coordinated, current and new funding applications and allocations are coordinated, and how policy coordination can be utilized to improve homelessness and housing services across the entire County. The County's Coordinated Entry System is another lens that will be utilized to assess opportunities for improvement. These efforts will be exploratory over the next three years, with follow-up action steps developed to reflect initial findings.

VII. Conclusion

Yolo County has a strong homeless system of care with an extensive network of providers throughout the County and across its cities that are working to deliver services and connect

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individuals and families with housing. While the system has a number of strengths there are also areas in need of improvement. By focusing on shoring up and expanding the County's crisis response and prevention services, working toward developing new affordable housing for those at the lowest end of the income spectrum, investing in services to stabilize physical and behavioral health, and improving coordination among all partners, the County will see tangible improvements in its larger homeless system of care. Making progress in each of these areas will help further strengthen the system, working toward comprehensively meeting the needs of those most vulnerable.

Appendix A. Acknowledgements

HHSA would like to thank the following partners for their assistance in compiling this County Homelessness Plan (the Plan), and for their dedication in moving toward our shared goal of ending homelessness.

- County and City Representatives
 - City of Davis
 - City of West Sacramento
 - City of Winters
 - City of Woodland
 - Yolo County Health and Human Services Agency (HHSA)
- County Health Plans & Health Care Providers
 - Local Hospitals – Dignity Health/Woodland Memorial Hospital and Sutter Health/Sutter Davis Hospital
 - CommuniCare Health Centers
- Criminal Justice
 - City of Davis Police Department
 - City of West Sacramento Police Department
 - City of Winters Police Department
 - City of Woodland Police Department
 - Yolo County District Attorney’s Office
 - Yolo County Sheriff’s Office
- Education
 - Local School Districts
 - Yolo County Office of Education
- Housing and Homeless Service Providers
 - Davis Community Meals and Housing
 - Davis Opportunity Village
 - Downtown Streets Team
 - Empower Yolo/Family Resource Center
 - Fourth and Hope
 - Interfaith Rotating Winter Shelters (Davis and Woodland) and Mercy Coalition (West Sacramento)
 - Resources for Independent Living
 - Rural Innovations in Social Economics (RISE)
 - Shores of Hope
 - Turning Point Community Programs
 - Volunteers of America (VOA)
 - U.S. Department of Veterans Affairs (VA) Health Care
 - Yolo Community Care Continuum
 - Yolo Conflict Resolution Center
 - Yolo County Children’s Alliance
 - Yolo Healthy Aging Alliance
- Local Homeless Continuum of Care
 - Members of the Yolo County Homeless and Poverty Action Coalition (HPAC)
- Public Housing Authority
 - Yolo County Housing
- Representatives of Family Caregivers of Persons Living with serious mental illness (SMI)

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- National Alliance on Mental Illness (NAMI) Yolo
- Other Valuable Partners
 - Legal Services of Northern California (LSNC)
 - Meals on Wheels Yolo County
 - Yolo Adult Day Health Center
 - Yolo County Library
 - Yolo Food Bank

Appendix B. Solutions At-A-Glance

The chart below provides an overview of the solutions and actions steps outlined above and a time frame for completing these actions. The “Lead(s)” column is intentionally left blank and will be used by partners to help assign leadership for each strategy and action step in the coming months.

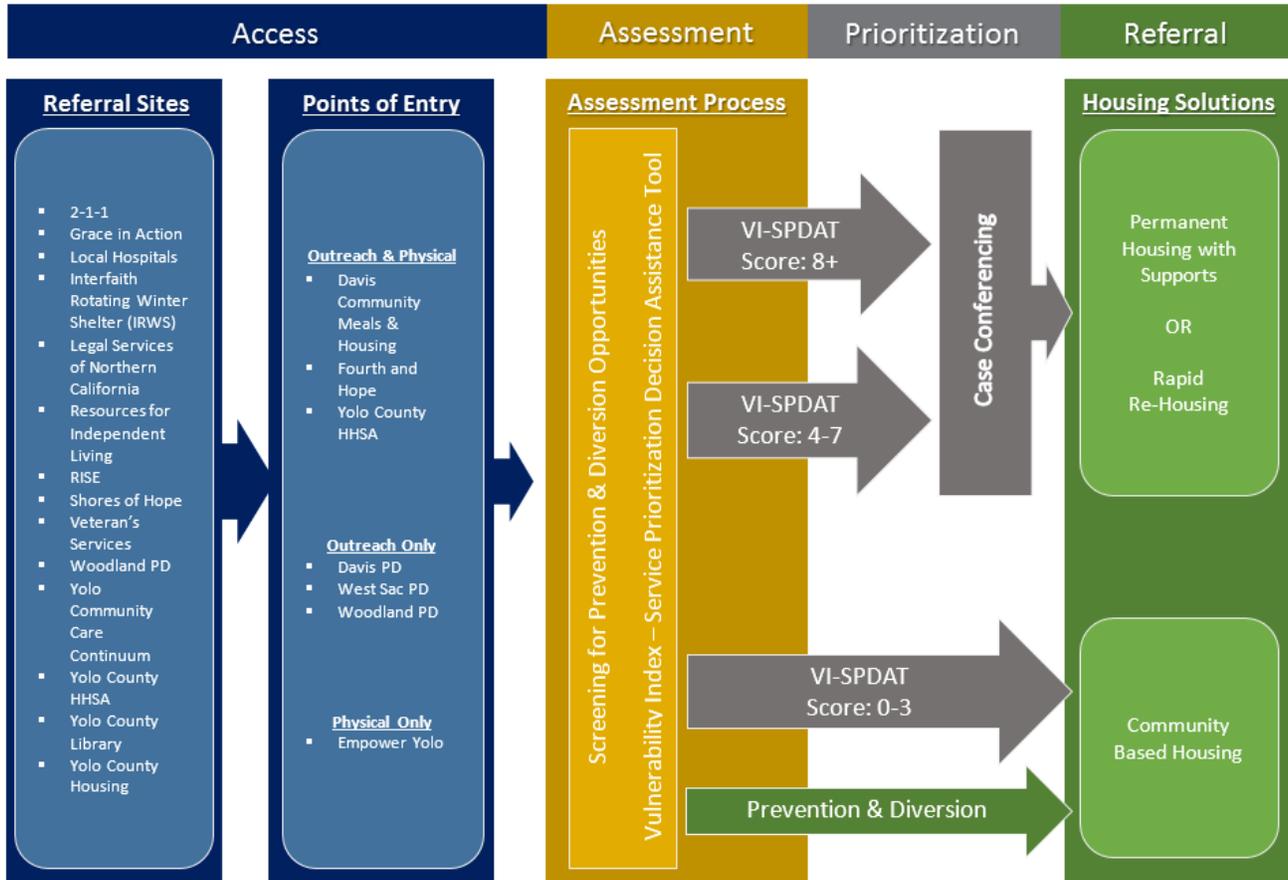
Goal 1. Strengthen the Homeless Crisis Response System, Developing Prevention Services			
Strategy	Action Steps	Timeframe	Lead(s)
1.A. Map the homeless crisis response system and Prevention Resources Available.	<ol style="list-style-type: none"> 1. Map and Generate List of Homeless Crisis Response Services 2. Conduct Sequential Intercept Mapping 	<ol style="list-style-type: none"> 1. Year 1 2. Years 1-3 	
1.B. Leverage new state funding sources to invest in prevention and crisis response services.	<ol style="list-style-type: none"> 1. Apply for additional CESH and HEAP money as available 2. Consider utilizing SB 2 funding for investing in crisis response system 	<ol style="list-style-type: none"> 1. Year 1 2. Years 1-3 	
1.C. Develop and pilot an early identification tool to assess those in need of prevention services.	<ol style="list-style-type: none"> 1. Coordinate partners and identify existing tools 2. Develop/adapt screening tool 3. Partner with providers to pilot 	<ol style="list-style-type: none"> 1. Year 1 2. Years 1-2 3. Years 2-3 	
Goal 2. Increase affordable housing options for the most vulnerable			
Strategy	Action Steps	Timeframe	Lead(s)
2.A. Invest in alternative housing models to more efficiently develop affordable housing.	<ol style="list-style-type: none"> 1. Identify alternative housing models to focus on piloting 2. Review existing zoning laws and fees 3. Partner with City Planning Departments to pilot 	<ol style="list-style-type: none"> 1. Year 1 2. Years 1-2 3. Years 2-3 	
2.B. Create public-facing resource materials that outline the benefits of affordable housing development.	<ol style="list-style-type: none"> 1. Create an FAQ-like document to outline the benefits and need for affordable housing development 	<ol style="list-style-type: none"> 1. Year 1 	
2.C. Explore options for a local funding source for affordable housing development.	<ol style="list-style-type: none"> 1. Review successful local funding measures 2. Meet with County and City Leadership to discuss options for Yolo County 3. Develop local funding proposal for Yolo County 	<ol style="list-style-type: none"> 1. Year 1 2. Years 1-3 3. Year 3 	

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Goal 3. Stabilize and maintain physical and behavioral health for those with the highest needs			
Strategy	Action Steps	Timeframe	Lead(s)
3.A. Increase access to mobile and co-located health services.	<ol style="list-style-type: none"> 1. Map current mobile health outreach and co-located services 2. Identify areas of need 3. Expand mobile health outreach and co-located services 	<ol style="list-style-type: none"> 1. Year 1 2. Year 1 3. Years 2-3 	
3.B. Improve connections between health and housing efforts.	<ol style="list-style-type: none"> 1. Utilize AB 210 to improve information sharing between agencies 2. Utilize SB 1152 to create and standardized hospital discharge policy 3. Engage with other system's discharge efforts 	<ol style="list-style-type: none"> 1. Years 1-2 2. Year 1 3. Years 2-3 	
Goal 4. Examine systems level coordination, identifying opportunities for improved partnership			
Strategy	Action Steps	Timeframe	Lead(s)
4.A. Leverage the Continuum of Care structure to strengthen coordination and partnerships.	<ol style="list-style-type: none"> 1. Utilize HPAC to review current coordination and partnership efforts 2. Look at how other CoCs in California partner 3. Create a set of recommendations for increased partnership 	<ol style="list-style-type: none"> 1. Year 1 2. Year 1 3. Year 2 	

Appendix C. Overview of Yolo Coordinated Entry System

YOLO COUNTY COORDINATED ENTRY SYSTEM



1/23/2019