



**Meeting Agenda
Continuum of Care (CoC) Board
Wednesday, January 9, 2019
1:00pm-2:30pm**

**Ventura County Office of Education Administration
5189 Verdugo Way, 2nd floor, Simi Room
Camarillo, CA**

1. Call to Order
2. Approval of Minutes of the meeting of Governance Board held Wednesday, November 14, 2018
3. Board/Staff Comments
4. Public Comments:

Continuum of Care Governance Board Business

5. Closed Session Review of HMIS Lead Agency.
6. Authorization for the HMIS Lead to apply for the U.S. Department of Housing & Urban Development's HMIS Capacity Building NOFA.
7. Ratification of CoC Board membership, review of filling unscheduled vacancy and selection of Board Chair and Vice-Chair.
8. Approval of the 2019 Point in Time Homeless Count and Subpopulation Survey Implementation Plan.
9. Review and Approve the Ventura County Plan to Prevent & End Homelessness.
10. Receive and file an update on countywide winter shelter programs and ongoing planning for year-round sheltering options.
11. Receive and File a Report on the new Longitudinal Systems Analysis (LSA) Report to meet U.S. Housing & Urban Development reporting requirements for the Continuum of Care program.



**Meeting Minutes
Continuum of Care (CoC) Board
Wednesday, November 14, 2018
1:00pm-2:30pm**

Ventura County Behavioral Health
1911 Williams Drive
(Large Training Room – 1st Floor)
Oxnard, CA

1. Call to Order. CoC Board Chair, Mike Taigman, called the meeting to order at 1:05pm.

Attendees:

Board members: Carolyn Briggs, Kevin Clerici, Susan Englund, Pam Marshall, Manuel Minjares, Michael Nigh, Mike Powers, Carmen Ramirez, Mike Taigman

Staff: Tara Carruth, Amy Duganne, Christy Madden

HMIS Staff: Marissa Mach, Tisha Maeda, Alicia Morales

Absent: Dawn Dyer (excused), Drew Powers (excused), Nancy Wharfield (excused)

Public Attendees: Marjorie Corpuz (SVDP), Helen Shields (SVDP), Alexa Martin (ILRC), Joelle Vessels (ICFS), Chelsee Bente (CSUCI), Susan Kulwicz (SPIRIT), Susan White Wood (HCA), Maria Collier (CAVC), Loretta Denering (VCBH), Hilary Carson (VCBH), Karl Lawson (Oxnard), Mark Alvarado (Oxnard), Mara Malch (Simi Valley), Sandra Troxell (Sal Army), Nicholas Birck (HACSB), Jeff Lambert (Ventura), Cathi Nye (VCOE)

2. Approval of Minutes of the meeting of Governance Board held October 10, 2018.

Minutes unanimously approved. Motion by Carolyn Briggs, seconded by Susan Englund.

3. Board/Staff Comments: None

4. Public Comments: Carmen Ramirez announced Oxnard's Forum on Homelessness 11/15/18, 5:15pm, council chambers. Forum for downtown merchants and open to the public.

Continuum of Care Governance Board Business

5. Approval of the recommendations for 2018 State of California Business, Consumer Services & Housing (BCSH) Agency Homeless Emergency Aid Program (HEAP) funding as developed by the CoC Data Committee and Authorization for CoC staff to submit the application to BCSH no later than November 20, 2018.

Staff provided a presentation/PowerPoint of the recommendations with explanation of the recommendation process. Discussion followed. Mike Nigh asked if the review committee made any changes from staff recommendations. Tara Carruth noted a change with the CSUCI recommendation and also an increase in funding recommended for the request made by the Salvation Army in order to facilitate a flexible housing subsidy. Mark Alvarado and Jeff Lambert commented on city contributions for their shelter plans and both expressed their appreciation for recommendations. Karl Lawson discussed the countywide social impacts of not having a year-round shelter, noted the bulk of the homeless population exists in Oxnard and Ventura, and thus the need for shelters in those communities. Mike Powers commended the regional cooperation of all jurisdictions for finalizing crisis declarations, applauded the role of leadership, acknowledged the difficult task of making funding recommendations, encouraged advocacy for another round of HEAP funding. Tara Carruth commented that there is possibility of round 2 funding in Spring 2019.

Recommendations unanimously approved. Motion by Susan Englund, seconded by Carolyn Briggs.

6. Receive a presentation from the HMIS Lead Agency on development of Data Dashboards for sharing CoC system utilization and performance with the CoC Alliance stakeholders and community.

Tisha Maeda presented a PowerPoint on the newly developed HMIS system data dashboards, both external (for the CoC website) and internal (for HMIS users). Discussion included Mike Taigman's inquiry about positive exits or destinations that are considered positive outcomes and the actual numbers reported; he also inquired about showing actual number of unduplicated clients reflected by the positive outcome figures; he requests data that helps measure progress towards ending homelessness; he would like an internal beta test of the dashboards before public launch. Manuel Minjares would like numbers of literally homeless individuals. Pam Marshall would like the data to show where gaps exist. Susan Englund mentioned that more verbiage/definitions/explanations might be needed for the site.

7. Review and Approve the Process for Soliciting Stakeholder Feedback on Development of the Ventura County Continuum of Care's Draft of the "Ventura County Plan to Prevent and End Homelessness".

Staff discussed initial feedback, including suggestions that plan goals and strategies need greater clarity and expansion. In response to initial feedback, plan components and strategies have been identified and added to the current plan draft. Pam Marshall inquired about the timing of plan's feedback process and it was discussed that the plan's time line is aligned with the No Place Like Home process. It was agreed that the plan is going to be a living document; a document that meets all requirements, but can be added to and amended. Manuel Minjares offered assistance, as needed.

Unanimous approval to revise plan and solicit feedback. Moved by Manuel Minjares, seconded by Kevin Clerici.

8. Approval of Cancellation of December 12, 2018 CoC Board Meeting and tentative schedule

for 2019.

Unanimous approval. Moved by Susan Englund, seconded by Pam Marshall.

9. Receive and File CoC Committees, Workgroups & Staff Updates
10. Board Closed Session Item: HMIS Lead Agency Annual Review –Rescheduled until January 2019

Meeting adjourned. Next meeting on January 9, 2019 at 1:00pm at Ventura County Office of Education.

January 9, 2019

CoC Governance Board

SUBJECT: Authorization for the HMIS Lead Agency to apply for the U.S. Department of Housing and Urban Development HMIS Capacity Building NOFA.

BACKGROUND: The U.S. Department of Housing and Urban Development (HUD) released a Notice of Funding Availability (NOFA) to invest in Homeless Management Information Systems. HUD recognizes that some Continuum of Care (CoCs) have an HMIS infrastructure that is nimble and has the capacity to adapt to ever-changing information needs. Other CoCs struggle and would benefit from funding dedicated to improving HMIS. This NOFA includes \$5 million dollars nationally in one-time funding to help communities improve their CoC's HMIS.

DISCUSSION: In the HMIS Capacity Building NOFA, HUD identified communities that have the highest needs related to their HMIS. Some of these communities do not have a functioning HMIS. Ventura County CoC was not listed as one of these HUD-identified communities but is still eligible to compete for funding. HUD determined high-need CoCs based on 2017 report submissions including the Annual Homeless Assessment Report, Data Quality and HMIS bed coverage.

The Ventura County CoC has been able to submit all 12 tables for the Annual Homeless Assessment Report but some data is not useable because of the HUD requirement to have over 85% of the beds of any emergency shelter, transitional housing, rapid rehousing or supportive housing program in HMIS. In Ventura County the bed coverage for all of these programs falls below the HUD target threshold because of programs that do not use HMIS including faith-based and privately funded programs and housing programs.

The HMIS Lead Agency requests authorization to apply for this one-time funding to build capacity through training and technical assistance.

The grant application is due on January 31, 2019.

RECOMMENDATIONS: Authorize the HMIS Lead Agency to apply for the HMIS Capacity Building NOFA.

January 9, 2019

CoC Governance Board

SUBJECT: Ratification of CoC Board membership, review of filling unscheduled vacancy and selection of Board Chair and Vice-Chair.

BACKGROUND: The CoC Alliance Governance Board includes representatives of relevant stakeholders, private and public officials, philanthropic representatives, business and service organizations and projects serving homeless populations. Representation of a broad array of stakeholders will enhance the capacity to coordinate and leverage resources from various community sectors across the Region.

The CoC Governance Charter allows for a minimum of 7 and maximum of 13 Board members. In the event of a vacancy, the Governing Board may appoint qualified person(s) necessary to fill the vacancy. The person(s) appointment shall serve the unexpired term of the previous Board member and is subject to re-election by the Board and ratification by the full Alliance membership.

Nominations for board members are solicited through open invitation (social media, direct invitation and by Alliance membership).

DISCUSSION: The terms of the following board members expired in December 2018 and are willing to continue serving on the Board if confirmed by the remaining membership:

Carolyn Briggs—community advocate

Kevin Clerici, Vice-Chair—Downtown Ventura Partners

Manuel Minjares—City of Fillmore, Supervisor Long’s office

Pam Marshall—advocate, formerly homeless

Carmen Ramirez—City of Oxnard

Nancy Wharfield--healthcare

There is one remaining vacant seat that was vacated by Sommer Barwick. Staff have reached out to the City of Simi Valley, advocates and the full Alliance for membership nominees and have not received a formal nomination.

RECOMMENDATIONS:

1. Vote on board membership
2. Make recommendation on filling board vacancy;

3. Select Chair and Vice-Chair for 2019

January 9, 2019

CoC Governance Board

SUBJECT: Approval of the 2019 Point in Time Homeless Count and Subpopulation Survey Implementation Plan

BACKGROUND: The Point in Time (PIT) Count is a regulatory requirement of communities that receive Housing and Urban Development (HUD) Continuum of Care (CoC) funding. HUD regulations require the count be conducted on one night in the last 10 calendar days of January. The count includes a survey of persons who are considered sleeping in places not meant for human habitation (unsheltered) as well as those who are temporarily living in emergency shelters or transitional housing programs (sheltered). The PIT Count is scheduled to take place on the night of January 21, 2019 (sheltered count) and the morning of January 22, 2019 (unsheltered/street count).

The Point in Time Count numbers are also used by the State of California to determine funding allocations for several programs. The Homeless Emergency Aid Program (HEAP) funding was allocated based on each CoC's PIT numbers from 2017.

The VC CoC continues to partner with Joe Colletti, PhD with Urban Initiatives to provide technical assistance, deduplication and analysis to ensure accurate survey data is reported to HUD. The survey data will be collected using the same technology as the prior year through the Simtech Solutions mobile app called "Counting Us".

Volunteer recruitment began in mid-December through email, social media posts, flyers, posters and news media outreach. United Way of Ventura County has opened a volunteer registration page at www.volunteerventuracounty.org which includes the training dates/times and count leads for each city. Also, the County of Ventura's bilingual Assistant Public Information Officer released a Spanish flyer and press release to expand the outreach to the Spanish-speaking media outlets as well.

DISCUSSION: Attached to this report is the 2019 VC CoC Homeless Count Implementation Plan which includes a timeline of activities, count methodology and a draft of the 2019 Homeless Count Survey.

Service Sites: Services site locations that operate on days outside of the street count day can count individuals who are homeless on a day the program is in operation for up to 7 days following the night of the count. For example, the One Stop in Oxnard is open on Wednesdays. This site will be able to survey persons and ask where they slept on Monday January 21st. Those who were unsheltered should have a survey completed.

Data and Reporting: The annual homeless count report is released to the public in April of each year. The report includes data on the number of unsheltered persons found during the count and the number of persons served by shelter and transitional housing programs. Although we receive real-time data through the mobile app during the week of the homeless count, the review and deduplication process takes time to ensure accurate data is reported to HUD. Also, staff must collect data from the local shelters and transitional housing programs as well. Staff will continue to include an annualized number from HMIS in the report, to accurately reflect the number of persons served by the system in 2018 and give the community broader context. Last year, reports to the community also included data from 2-1-1 and the Healthcare for the Homeless program.

RECOMMENDATIONS: Approval of the 2019 Point in Time Homeless Count and Subpopulation Survey Implementation Plan

Attachment: 2019 VC CoC Homeless Count Implementation Plan



VENTURA COUNTY
CONTINUUM OF
CARE ALLIANCE



Let's Make Everyone Count!

Homeless Point-In-Time Count
Tuesday, January 22, 2019

Why: This effort helps to better understand who is homeless in Ventura County and gain access to state and federal funding.

What: Volunteers canvass the community in pairs and collect survey data through interviewing homeless persons or reporting observations.

Who: Volunteers must be 18 years or older and have the ability to walk distances in designated locations. A smart phone/device will be needed to download the Counting Us app for the survey. More information will be shared during the training.

Please register as a volunteer online at:

www.volunteerventuracounty.org

For more information, visit

**www.venturacoc.org or contact
Jennifer Harkey at #805-658-4342
or jennifer.harkey@ventura.org**



The Point-in-Time Homeless Count and Survey Implementation Plan

The Ventura County Homeless Count and Survey will take place on the morning of January 22nd, surveying persons who were unsheltered the night of January 21, 2019.

The Point-in-Time (PIT) Homeless Count and Survey Implementation Plan (Plan) consists of three parts: I) activities prior to the night of the count; II) activities during the night of the count; and III) activities after the night of the count.¹

I. Activities Prior to the Point-in-Time Count:

a. Point-in-time count must be carried out on one night during the last 10 days of January

The U.S. Department of Housing and Urban Development (HUD) requires that a count of sheltered and unsheltered persons who are homeless (as defined in Appendix A) must be carried out on one night in the last 10 calendar days of January unless a request to count outside of this period of time is granted by HUD.²

b. Ensure that the sheltered and unsheltered count occur during the same time period

HUD states that

“A critical step to ensuring that the same number of persons is reported on the HIC and the PIT is to conduct both counts during the same time period. HUD requires that CoCs identify the date on which the count was conducted; however, the term ‘night’ signifies a single period of time from sunset to sunrise, which spans two actual dates. The ‘night of the count’ begins at sunset on the date of the count and ends at sunrise on the following day, as shown in the illustration below.”³

It is important to note that “HUD strongly recommends that CoCs conduct the sheltered and unsheltered count, and the HIC, at the same time.”⁴

¹ “CoCs must designate a single night for their count so that the sheltered and unsheltered counts, as well as the Housing Inventory Count (HIC), are all based on the same night (2014 Point-in-Time Methodology Guide, p. 23).”

² “Notice for Housing Inventory Count (HIC) and Point-in-Time (PIT) Data Collection for Continuum of Care (CoC) Program and the Emergency Solutions Grants (ESG) Program,” August 4, 2016, p. 18.

³ Ibid., p. 20

⁴ Point-in-Time Count Methodology Guide: 2014, p. 23.

c. Guarantee that the point-in-time count accurately reflects the entire geographic area

HUD states that

“In some CoCs, there might be geographic areas that CoCs are not required to incorporate into the count. These might include deserts, dense forests, and other remote locations that are uninhabitable by people. Additionally, there are some areas where the CoC may have counted for several years and found no persons experiencing homelessness. In making the decision to exclude some geography, it is important that CoCs discuss these regions with people knowledgeable about the areas, and then document the decision-making process that is used to decide if a specific area will not be included in the PIT count. Areas that are excluded from a CoCs unsheltered count should be identified in the CoC’s PIT count plan that is approved by the CoC governing board. CoCs should be prepared to provide this information to HUD through HUD’s CoC Program Competition.”⁵

d. Organize the point-in-time count by geography

Organizing the point-in-time count by geography will consist of the following four actions:

- a. the county will be divided into organizational regions;
- b. the organizational regions will be divided into planning communities;
- c. the planning communities will be divided into implementation areas; and
- d. the implementation areas will be divided into count zones.

e. County will be Divided into Organizational Regions

The County will be divided into the following organizational regions:

- East County
- West County

f. Organizational Regions will be Divided into Planning Communities

Planning communities will consist of incorporated cities and unincorporated areas.

East County will include:

⁵ Ibid., p. 18.

Cities

- Fillmore
- Simi Valley
- Thousand Oaks
- Moorpark

Unincorporated areas:

- Piru
- Casa Conejo

West County will include:

Cities

- Camarillo
- Ojai
- Oxnard
- Port Hueneme
- Santa Paula
- Ventura

Unincorporated areas include:

- Casitas Springs
- El Rio
- Meiners Oaks
- Mira Monte

g. Planning Communities will be Divided into Implementation Areas

Each of the Planning Communities will be divided into Implementation Areas which will be designated as Red, Yellow, or Green Areas according to the definitions below.

- **Red Areas** will be defined as implementation areas where there are no homeless persons as determined by local community representatives and stakeholders;

- **Yellow Areas** will be defined as implementation areas where only professional outreach workers might go. These areas may prove too difficult to cover and/or unsafe for volunteer counters, such as community representatives or stakeholders, in their effort to count and survey homeless persons. Immediately prior to, or immediately after the count, local professional representatives involved in the homeless count such as law enforcement or street outreach workers will verify if homeless persons lived in these areas and determined the number of homeless persons who will be included in the count;
- **Green Areas** will be defined as implementation areas where homeless persons can be found as determined by local community representatives.

All of the incorporated cities in the county, along with significant areas within their surrounding unincorporated territory, will likely be identified by local key person teams as Green Areas.

h. Implementation Areas will be Divided into Count Zones

Implementation Areas that were designated as Green Areas will be divided into Count Zones. Teams of Counters will be deployed to designated count zones within each of the Green Areas. Teams of Counters will not be deployed to Yellow or Red Areas.

i. Coordinate the Count and Subpopulation Survey

Coordinating the count and subpopulation survey will include implementing the following activities in each local Planning Community: 1) establishing a key person team; 2) distinguishing areas within the planning community where homeless people live; 3) identifying places where homeless people live within the identified areas; 4) identifying places where homeless people receive social services; 5) raising public awareness and community involvement; and Implementing the Count and Subpopulation Survey.

1. Establishing a Community Key Person Team

A Community Key Person Team will be established for each planning community and consist of representatives from public and private organizations who are knowledgeable about homelessness and where homeless persons live. Such key persons will include representation from business, civic, educational, faith-based, law enforcement, local government, neighborhood, and nonprofit organizations. Homeless and formerly homeless persons will also be encouraged to join.

2. Distinguishing Implementation Areas within the Planning Community

Each Community Key Person Team will distinguish implementation areas within their planning community where homeless people can be found. Such areas will include a quadrant or section of a city or unincorporated area or an entire neighborhood. Those sections of the planning

community where homeless persons could be found will be designated as Green Areas. Conversely, those sections where homeless persons are known not to live or spend time will be designated Red Areas.

3. Identifying Verifiable Places where Homeless People Live/Congregate

Each Community Key Person Team will also identify specific locations where homeless people live and/or congregate within their designated Green Areas. Such places will include abandoned buildings, commercial areas, parks, sidewalks, vacant lots and vehicles. Known encampments will also be specifically identified within Green Areas. Other places may include a whole neighborhood or a specific length of a street. Such information will be kept confidential.

4. Identifying Places where Homeless People Receive Social Services

Each Community Key Person Team will also identify non-residential locations and/or programs where homeless people go to receive social services and other forms of assistance. Programs will include locations that distributed packaged food and/or clothing, serve meals, and provide shower or laundry services, including those operated by faith-based organizations. Other program sites will include those that were known to provide domestic violence, health care, mental health care, substance abuse, transportation, and veteran services for homeless persons.

5. Raising Public Awareness and Community Involvement

The primary purpose of raising public awareness and community involvement will be to recruit volunteers to help implement the count in each planning community. Volunteers will be recruited both locally and countywide from a wide-range of sources including city and county employees, homeless service providers, other social service agencies, non-profit organizations, faith-based institutions, local businesses, civic organizations, educational institutions, currently and formerly homeless individuals and other interested community stakeholders.

Flyers and other materials will be developed for distribution at community meetings and forums, media outlets and various public facilities, service locations, churches, college campuses and other public locations. A project website will be established with general project information and volunteer outreach materials. Volunteer registration will also be promoted through the web site during the months leading up to the day of the count.

Community involvement will include creating teams of volunteers to count homeless persons in designated Green zones. Teams will include persons who are involved in community service or interested in community service. Teams will also include persons who have considerable exposure as well as little exposure to homelessness.

j. Establish a methodology consistent with HUD requirements

HUD requires that point-in-time counts “be conducted in compliance with HUD counting standards and related methodology guidance, as described in HUD’s *Point-in-Time Count Methodology Guide* available on the HUD Exchange.⁶

Unsheltered Count

HUD requires Continuums of Care (CoC) to indicate the methods used to count unsheltered homeless persons in the annual Continuum of Care Program application which include those listed below. The methods checked will be those used to complete the unsheltered count.

- Night of the Count Complete Census: The CoC canvassed the entire geographic area covered by the CoC.
- Night of the Count Known Locations: The CoC canvassed only specific neighborhoods, blocks, census tracts, or other geographic areas within the CoC to count unsheltered homeless people staying in those locations.
- Night of the Count Random Sample: The CoC identified all geographic areas in the community where people who are unsheltered might be located and selected a random sample of these areas to canvas. The CoC then extrapolated the data from the random sample to derive the unsheltered count estimate.
- Service Based Count: The CoC surveyed people at various social service locations or other public or private locations to identify people who were unsheltered, but not counted, on the night of the count (either because CoCs did not use a night of the count approach or because unsheltered people were missed on the night of the count). In order to obtain an unduplicated count, every person interviewed in a service-based count must be asked where that person was sleeping on the night of the most recent count.
- HMIS: CoCs may use HIMIS with their street outreach to survey people within the geographic area.

HUD also requires Continuums of Care (CoC) to note what approaches were used to collect demographic and subpopulation data for unsheltered homeless persons and to report those approaches used in the annual point-in-time chart due to HUD during the spring through its Homelessness Data Exchange (HDX) website. The approaches checked below will be those used to complete the unsheltered count.

⁶ Ibid., p. 19.

- Surveys/interviews of people identified as unsheltered on the night of the PIT count
- Surveys/interviews of people identified as unsheltered on the night of the PIT count, but completed at a later date
- Surveys/interviews of people identified within 7 days following the night of the PIT count night who may have been unsheltered on the night of the PIT count (e.g., “service-based” surveys at locations where people who are homeless go for assistance)
- HMIS data from street outreach and/or other providers
- Other (Please Specify)

In regards to the survey/interview, HUD also asks that CoCs verify in HDX whether “all people who were encountered during canvassing on the night of the count or during post night of the count PIT activities asked to complete a survey/interview.” The answer is “yes” and will be reported to HUD in HDX as follows:

- All people encountered were surveyed
- A subset of people were surveyed

Also, in regards to the survey/interview, HUD also asks that CoCs verify in HDX the information or method(s) “used to produce an unduplicated total count of homeless people across your sheltered and unsheltered populations.”

- Comparison of personally identifying information (PII), such as name, date of birth, and Social Security Number
- Comparison of unique client identifiers (not PII)
- Blitz count of unsheltered people (i.e., sheltered and unsheltered counts occurred at same time to avoid double counting)
- Interview survey question(s) with screening questions (e.g., have you already completed a count survey)
- No specific approach was used
- Other (Please Specify)

In order to ensure data quality collection, HUD requires that CoCs engage

“in activities to reduce the occurrence of counting unsheltered homeless persons more than once during a PIT count. These strategies are known as deduplication techniques. Deduplication techniques should always be implemented when the PIT count extends beyond a single night or when the PIT count is conducted during the day at service locations used by homeless people as well as at night shelters.”⁷

Within the annual CoC Program Application, HUD lists steps and asks that CoCs select those steps “taken to reduce the occurrence of counting unsheltered homeless persons more than once during the PIT count.” The steps checked below will be those used to ensure persons are not counted more than once.

- Training: The CoC conducted training(s) for PIT enumerators or CoC staff;
- Blitz Count: The CoC used a “blitz” approach, or a one-night count that was completed on the same night as the sheltered count, where the CoC counts persons experiencing homelessness at a time when it is unlikely they would be counted more than once by different counters (i.e., late in the night or early in the morning);
- Unique Identifier: The CoC used a unique identifier, such as a combination of date of birth, first and last name initials, or gender assigned to unsheltered homeless persons to ensure accuracy of data collected;
- Survey Question: The CoC asked specific survey question(s) of each participant, including asking if they have already been interviewed, to ensure accuracy of data collected; or
- Enumerator Observation: The enumerator(s) recorded observations of unsheltered homeless persons that assisted in ensuring the data quality.

Sheltered Count

HUD requires CoCs to update their Housing Inventory Count (HIC) and identify all projects listed as emergency shelter (ES), Safe Havens (SH), or Transitional Housing (TH) because all persons residing in these projects should be included in the sheltered PIT count. Any new projects should be added and any projects no longer in existence should be deleted.

HUD States that

“For the sheltered count, preparations should begin as early as practical to identify and confirm emergency shelter, Safe Haven, and transitional housing projects in the CoCs that should be included in the PIT count. These are the same projects CoCs must inventory and include in their HIC. CoCs should review their HIC to ensure that they are including all

⁷ “FY 2016 Continuum of Care (CoC) Application Detailed Instructions,” p. 42.

projects listed in the count. On an ongoing basis, but minimally when updating the HIC, CoCs should seek to identify any new projects to ensure the HIC is a complete inventory, including projects that might not have been on the previous year's HIC because they are new or have not cooperated with the CoCs in the past.”⁸

The unsheltered count and survey instrument will be used to collect required data for those emergency shelters, safe havens, and transitional housing programs that do not participate in HMIS including those that serve survivors of domestic violence.

HUD also requires Continuums of Care (CoC) to indicate the methods used to count sheltered homeless persons in the annual Continuum of Care Program application which include those listed below.⁹ The methods checked will be those used to complete the unsheltered count.

Complete Census Count:

- a. providers counted the total number of sheltered homeless persons residing in each program on the night designated as the PIT count.
- b. CoCs that relied completely on their HMIS to conduct their sheltered PIT count should select this option.

Random Sample and Extrapolation:

- a. the CoC used a random sample and extrapolation techniques to estimate the number and characteristics of sheltered homeless persons from data gathered at most emergency shelters and transitional housing programs.
- b. the random sample may be based on HMIS data or some other data source.

Non-random Sample and Extrapolation:

- a. the CoC used a non-random sample and extrapolation techniques to estimate the number and characteristic of sheltered homeless persons from data gathered at most emergency shelters and transitional housing programs.
- b. the non-random sample may be based on HMIS data or some other data sources.

HUD also requires Continuums of Care (CoC) to indicate the methods used to gather and calculate subpopulation data for sheltered homeless persons in the annual Continuum of Care Program application which include those listed below.¹⁰ The methods checked will be those used to complete the unsheltered count.

HMIS—The CoC used HMIS to gather subpopulation information on sheltered homeless persons without extrapolating for any missing data;

⁸ Point-in-Time Count Methodology Guide: 2014, p. 26.

⁹ Ibid., p. 36.

¹⁰ Ibid., p. 37.

HMIS plus Extrapolation-The CoC used HMIS data and extrapolation techniques to estimate the subpopulation information of sheltered homeless persons in the CoC. Extrapolation techniques accounted for missing data;

Interview of sheltered persons-The CoC conducted interviews in emergency shelters, Safe Havens, and transitional housing to gather subpopulation information on sheltered homeless persons without extrapolating for any missing data;

Sample of PIT interviews plus extrapolation-The CoC conducted interviews with a sample of sheltered homeless adults and unaccompanied youth to gather subpopulation information. The results from the interviews were extrapolated to the entire sheltered homeless populations to provide statistically reliable estimates for all sheltered persons.

In order to ensure data quality collection, HUD requires that CoCs indicate the “methods used to ensure the quality of data collected during the sheltered PIT count.”¹¹ Within the annual CoC Program Application, HUD lists methods and asks that CoCs select those methods taken to ensure that “high quality was collected on sheltered persons. The methods checked below will be those used to ensure data quality.

Training: The CoC trained providers on the protocol and data collection forms used to complete the sheltered PIT counts;

Follow-up: The CoC reminded providers about the sheltered PIT count and followed-up with providers to ensure the maximum possible response rate from all programs;

HMIS: The CoC used HMIS to verify data collected from providers for the sheltered PIT count;

Non-HMIS Un-duplicated techniques: The CoC used non HMIS based strategies to verify that each sheltered homeless person was only counted once during the sheltered PIT count;

k. Establish a timeline

	Date(s):
October Activities:	
Organize planning committees	October 3, 2018
Recruit key persons	October 24, 2018
Begin volunteer recruitment	November 2018
Begin updating Housing Inventory Chart	November 2018
Begin reviewing count and survey instrument	November 2018

¹¹ Ibid., p. 39.

Meet with entitlement jurisdictions	December 2018
Complete implementation plan	December 27, 2018
December Activities:	
Continue volunteer recruitment	
Continue updating Housing Inventory Chart	
Finalize count and survey instrument	
Meet with key persons	
January Activities:	
Provide volunteer training	January 10 - 18, 2019
Collect and review mobile app survey data	January 22, 2019
February Activities:	
Enter, clean, and analyze unsheltered count and survey data	
Continue to collect sheltered data	
Analyze sheltered data	
March Activities:	
Provide draft of homeless count and survey report for review by stakeholders	
April Activities:	
Submit final homeless count and survey report to stakeholders	
Submit Point-in-Time Chart to HUD in HDX	
Provide final report to all entitlement jurisdictions	

I. Publicize the count

Per HUD’s suggestion, the CoC will designate “one person to discuss with the media the purpose, plan, and limitations of the PIT count, as well as how the PIT count data are utilized by both the CoC and HUD.”

“This person can work with the media to:

- **Draw attention to local homelessness issues.** Publicizing current local data on homelessness can garner additional funding and resources to support the count and local programming to help homeless people. Take the opportunity to educate volunteers about the homeless data and plans in the CoC.
- **Recruit volunteers.** Volunteer recruitment should begin by late fall. To recruit volunteers, CoCs should briefly describe the different roles for volunteers and which dates their assistance is needed.
- **Increase participation among the unsheltered population.** Informing and educating unsheltered homeless people about the unsheltered count will help to prevent widespread avoidance of the enumerators (see Chapter 5, *Executing the Unsheltered Count*, for more information on this topic).
- **Report count results.** After all of the data has been tabulated, unduplicated, and verified, the CoC membership should review and interpret the count totals.”¹²

Key media tips by HUD will also be considered which include:

- Use local and statewide media outlets to both publicize the event and recruit volunteers to assist with the count.
- Use the media to report the PIT count results to communities.
- Create a press release. The release can either focus on local data or cumulative statewide results (for Balance of State CoCs).
- Address trends in data. Provide contextual information that might help explain trends.
- Articulate the uses *and* the limitations of count data. The CoC’s count results alone might not answer ‘why’ questions, but they will usually provide good answers to ‘where’ and ‘who’ questions. Personalize data, provide anecdotes—but do not compromise the privacy rights of homeless persons.

Also, per HUD’s suggestions, the CoC will leverage community support. HUD notes that “Gaining political support and active participation from several key partner organizations can lead to wider community participation.”

HUD also notes that “Some potential options for leveraging community support include:

- **Local government officials (city, county, state):** Contact the local mayor’s office or town/city council. Invite them to participate in the count. Ask if they can provide publicity, financial support, and if necessary, a letter encouraging reluctant or non-participating providers to participate. It is especially important to engage local government officials

¹² Ibid.

responsible for submitting Con Plans because PIT count data will be used to complete their Con Plans.

- **Community leaders/homelessness advocates:** Often communities have people who are well connected and influential in the community who have a particular interest in ending homelessness. Look to local homeless coalitions, or boards of directors for these individuals. They can be very helpful in leveraging other necessary support and resources.
- **Local funders:** Community foundations and United Way can fund a number of human service organizations and have wide outreach capacity and influence. The organizations might be able to fund a particular part of the count or provide a volunteer base.
- **Faith-based community:** Religious leaders often have wide influence in their respective religious communities and larger community, and often have their own programs to serve homeless people. The leaders can be particularly influential in engaging the cooperation of faith-based missions that might be reluctant to participate in the PIT count.
- **Local colleges and universities:** Staff or faculty of local colleges or universities can assist in the development of count methodology, data analysis, and sampling tools. In addition, students can obtain field work experience by serving as PIT count volunteers.
- **Local law enforcement:** Local law enforcement (e.g., police and sheriff departments) can be a valuable resource for the unsheltered count. Officers can provide accurate information about known locations where people who are homeless live and sleep. Police officers are also sometimes needed to accompany enumerators and surveying areas that are known to be unsafe (e.g., abandoned buildings and alleys). In addition, increased vehicle patrols in higher crime areas might improve volunteer safety and participation.

However, CoCs should carefully consider how extensively they should involve law enforcement officers in the PIT count, especially if they will be in uniform and driving official vehicles. There is a fine line between providing safety and protection for enumerators and the potential suspicion and fear a law enforcement presence might elicit among people who are homeless, especially among people with criminal records, who could be engaged in illegal activities, or those who have had negative experiences with police.”¹³

m. Engaging reluctant service providers

CoC will pursue the following HUD tips to gain the participation of service providers reluctant to participate in the count and survey:

- Meet in person with providers to address and alleviate their concerns directly.
- Hear their specific concerns in the planning process; integrate their ideas when practicable.
- Offer volunteer resources to assist them in conducting interviews and collecting data.
- Discuss the value of data collection for understanding local needs and securing needed resources and offer data and information gleaned from the count in return for their

¹³ Ibid., pgs 32 and 33.

participation. This practice helps providers better understand the characteristics of homeless people outside of the clients they serve and offers information that can be used for resource development or other purposes.

In the event a provider chooses not to participate with its own staff, CoCs should ask if the provider would allow the CoC to send volunteers to administer surveys or at least conduct a basic observation-based count. If a provider continues to refuse, CoCs must strive to report as accurately as practicable about the homeless population residing in that project.¹⁴

n. Preparing for a youth count

CoC will develop a specific strategy to count homeless youth that will include the following activities encouraged by HUD:

- **Collaborate with local school district homeless liaisons.** Schools can be important partners for PIT counts. Local school districts should be contacted to help conduct outreach and increase awareness about the count. Schools liaisons have crucial insights about how best to access and communicate with homeless youth, and can be important resources for spreading information about events and organizations associated with the CoCs' PIT counts. CoCs should also collaborate with the local school district homeless liaisons to help identify all homeless children who are unsheltered or staying in a shelter on the night designated for the count are included in the PIT count. Since schools use a more expansive homeless definition than HUD's definition used for the PIT count, it is important to confirm that only children and youth meeting the HUD definition are included in the PIT count results reported to HUD.
- **Recruit currently or formerly homeless youth to assist with the count.** For the unsheltered count, communities that have successful strategies for conducting counts of unsheltered youth often enlist homeless or formerly homeless teenagers and young adults to assist with the count. Before the count, these youth can assist in identifying where unaccompanied youth might be staying or congregating. They can also provide input on survey design, provide assistance to outreach efforts on the night of the count, and engage homeless children and youth in the PIT count process.
- **Engage organizations serving homeless youth.** Identify and engage all stakeholders that might encounter or serve unaccompanied, homeless youth age 24 or under to participate in local PIT count planning meetings. Key providers include:
 - Runaway and Homeless Youth (RHY) programs
 - Youth shelters
 - Youth drop-in centers
 - Street outreach teams
 - Youth-focused transitional housing programs
 - Faith-based organizations and youth groups

¹⁴ Ibid., p. 34.

- Local churches that serve hot meals
 - Health clinics—youth-based and adult, including mobile health outreach
 - Local middle schools, high schools, and alternative education programs
 - Youth employment programs
 - Food banks
- **Identify locations where homeless youth congregate.** Get input from youth and youth providers to identify locations, or “hot spots,” which might include:
 - Abandoned buildings
 - High traffic urban areas (i.e., nightclubs, tattoo parlors, record stores, arcades)
 - Pizza places, soda shops, etc. near high schools
 - Parks
 - Malls
 - Fast food restaurants
 - LGBTQ friendly gathering spots (school support groups, bookstores, coffee houses identified by LGBTQ service providers and youth)
 - Encampments inside and outside of urban areas
- **Hold magnet events.** Develop special events located at easily accessible and non-threatening locations that include activities, food, or other appropriate incentives that might draw in youth who do not typically use shelters and services and are difficult to locate on the streets.
 - **Use social media to raise awareness and outreach.** Data from studies indicates that even youth living on the street use social media. Social media can be used to spread the word about the count, including information about location and incentives, which could lead to a larger number of youth participating in the count.
 - **Identify a lead homeless youth PIT count coordinator to facilitate data collection, engage other youth providers, and coordinate collection of data from locations where homeless youth congregate.**
 - **Provide services, food, and incentives to youth being counted.** The incentive could be advertised as part of the general mobilization effort to attract youth to participate in the count. Observations and anecdotal evidence from Youth Count! partners suggest that the incentives work for many youth. Examples of incentives include two-way public transportation tickets, a credit card with \$10 credit, a backpack filled with hygiene items and information about services, a \$5 restaurant card, bag lunches, and/or providing food, movies, and games, and a warm, dry place to spend time with friends for the night.
 - **Survey locations during multiple times throughout the day of the count.** Youth might not be visible on the street during school hours. Consider assessing count routes prior to the count to ensure that teams are in the right places at the right times. A location that is crowded in the morning might be empty only a few hours later. A CoC may choose to extend the hours of the count into the evening hours to reach youth during the time between when drop-in programs close for the day and when they retire for the night. CoCs choosing to do this must take the steps necessary to ensure people are not double

counted. CoCs surveying an area multiple times throughout the day must use an interview that allows for deduplication.¹⁵

II. **Activities during the night of the count**

Unsheltered Count

The following activities will occur during the night of the count

a. Homeless count volunteers will gather at deployment centers before 6 am on the night of the count

Before 6 am homeless count volunteers will gather at their assigned deployment centers on the night of the count.

b. Teams of homeless count volunteers will begin counting at 6 am within their count zones on the night of the count

Before sunrise of the night of the count, teams of homeless count volunteers will begin counting at 6 am within their count zones until 10 am.

c. Counters must return to deployment centers after they are finished counting

Counters will return to their assigned deployment center after they are finished counting within their assigned count zones.

d. Who should be included in the count

As required by HUD, counters “must count all individuals or families who meet the criteria in paragraph (1)(i) of the homeless definition in 24 CFR 578.3.”

This includes individuals and families

“with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground” on the night designated for the count. RRH assisted households who are still unsheltered on the night

¹⁵ Ibid., pgs 62 and 63.

of the count (e.g., staying in an encampment and being assisted by a RRH project to obtain housing) must be included as part of the unsheltered count.”

e. Who should not be included in the count

Also, as required by HUD, the CoC must not count households residing in the following locations:

- Persons residing in PSH programs, including persons housed using HUD Veterans Affairs Supportive Housing (VASH) vouchers.
- Persons residing in RRHD projects, funded in the FY2008 CoC Competition.
- Persons residing in OPH housing, including persons in a GPD Transition in Place (TIP) project on the night of the count.
- Persons counted in any location not listed on the HIC (e.g., staying in projects with beds/units not dedicated for persons who are homeless).
- Persons temporarily staying with family or friends (i.e., “doubled-up” or “couch surfing”).
- Persons residing in housing they rent or own (i.e., permanent housing), including persons residing in rental housing with assistance from a RRH project on the night of the count.
- Persons residing in institutions (e.g., jails, juvenile correction facilities, foster care, hospital beds, detox centers).¹⁶

f. Who should be included in the survey

All persons counted will be surveyed. However, before surveying someone, counters will inform persons that

- the Ventura County Continuum of Care is conducting a count of persons who are homeless;
- their participation is **completely anonymous and confidential**;
- they will not be asked their name, social security number, or any personal information that can be linked to the person;
- their participation will help provide better programs and services for people who are homeless.

Safety Comes First

¹⁶ “Notice for Housing Inventory Count (HIC) and Point-in-Time (PIT) Data Collection for Continuum of Care (CoC) Program and the Emergency Solutions Grants (ESG) Program,” August 4, 2016, p. 18.

All counters will be given the following instructions:

- **If you believe a person is homeless and if the individual does not wish to speak to you** -- thank them and complete questions 4 through 7 based upon your observations ONLY if you are certain that the person meets HUD's criteria of sleeping in a place not meant for human habitation (e.g., sidewalk, abandoned building, tent, vehicle, park bench, etc.).
- **If you believe a person is homeless and if you do not wish to disturb the person because the person is sleeping** --complete questions 4 through 7 based upon your observations ONLY if you are certain that the person meets HUD's criteria of sleeping in a place not meant for human habitation (e.g., sidewalk, abandoned building, tent, vehicle, park bench, etc.).
- **If you believe a person is homeless and if you feel it is unsafe for you to engage the person**-- complete questions 4 through 7 based upon your observations ONLY if you are certain that the person meets HUD's criteria of sleeping in a place not meant for human habitation (e.g., sidewalk, abandoned building, tent, vehicle, park bench, etc.).
- **NOTE:** The goal is to have all of your questions answered by at least 90% of all persons counted. Therefore, please ask each person that you are counting each question unless noted otherwise. For example, asking a question may be contingent on the answer of the previous question.
- Having all questions answered will help ensure that enough data has been collected for each subpopulation that is required by HUD for each city within the county. The less data the less chances of accurate data.

g. Subpopulation data must be collected by counters

HUD requires all CoCs to “provide demographic data for both sheltered and unsheltered persons according to the following three household types:

- **Persons in households with at least one adult and one child.** This category includes households with one adult and at least one child under age 18.
- **Persons in households without children.** This category includes single adults, adult couples with no children, and groups of adults (including adult parents with their adult children).
- **Persons in households with only children.** This category includes persons under age 18, including children in one-child households, adolescent parents (under age 18) and their children, adolescent siblings, or other household configurations composed only of children.”

Also, “CoCs must collect and report information on the demographic characteristics of all people reported as sheltered or unsheltered by household type and, within each household type, by age category, gender, race, and ethnicity. CoCs must also report information by household type for veteran and youth households.”¹⁷

HUD also requires CoCs to collect data regarding the following subpopulations:

- Adults with a serious mental illness
- Adults with a substance use disorder
- Adults with HIV/AIDS
- Chronically homeless individuals
- Chronically homeless families
- Veterans
- Victims of Domestic Violence (optional)
- Youth – unaccompanied under age 18 (includes parenting youth and their children)
- Youth – unaccompanied ages 18 – 24 (includes parenting youth and their children?)

The count and survey instrument that will be used to meet HUD requirements will include the following:

1. Where did you sleep last night (Monday night)? (select the choice below that is closest to answer given)
If person slept in a vehicle, what kind? How many persons slept overnight in same vehicle?
2. Did you become homeless because of the recent fires?
3. What is the first initial of your first name?
What is the first initial of your last name?
4. What is your gender?
Female; Male; Transgender; Gender Non-Conforming; Don't Know; Refused
5. Age
6. What is Your Race?
1=African American or Black; 2=American Indian or Alaskan Native;
3=Asian; 4=Native Hawaiian or Pacific Islander; 5=White;
6=Multiple Races or Other; 7=don't know; and 8=refused to answer
7. Are you Hispanic or Latino?

¹⁷ Ibid., p. 21.

8. State Born (select or record state under other)
If the person was born outside of U.S., select or record country.
9. Is this the first time you've been homeless?
10. Did you become homeless for the first time during the past 12 months?
11. Have you been living in a shelter and/or on the streets or in abandoned buildings, or vehicle for the past year or more?
12. Have you stayed in a shelter and/or on the streets or in abandoned buildings, or vehicle at least 4 separate times during the last 3 years including now?
13. If yes, was combined length of time 12 months or more?
14. How long in months have you been living in this community?
15. Do you have a substance use disorder that is ongoing and limits your ability to live independently?
16. Do you have a chronic health condition such as diabetes, heart trouble, high blood pressure, seizures, hepatitis, respiratory problems, epilepsy, tuberculosis, or arthritis?
If yes, has it continued for a long time or indefinitely?
17. Do you have a serious mental illness or emotional impairment that seriously limits your ability to live independently?
18. Do you have a long-lasting developmental disability that limits your ability to live independently?
19. Do you receive disability benefits?
20. Do you have AIDS or an HIV related illness?
21. Are you experiencing homelessness because you are fleeing domestic violence, dating violence, sexual assault, or stalking?
22. Are you a veteran? (served in the U.S. Armed Forces OR been called into active duty as a member of the National Guard or as a Reservist)
23. Were you recently released from prison or jail after serving 90 days or less?
23a. If yes to prison, were you released on parole or probation?
23b. If yes to jail, were you released on probation?
24. If no to question 23, were you released from prison or jail during the past 12 months?
24a. If yes to prison, were you released on parole or probation?
24b. If yes to jail, were you released on probation?
25. Do you have any children under the age of 18 who are homeless and living with you today?
If yes, how many children are living with you today?
NOTE: If 18 or older please enter the persons as an adult
26. What is the child's gender?
27. Is the child Hispanic/Latino?
28. What is the child's race?
29. What is the child's age?
30. Is the child enrolled in school?
31. Do you have a spouse or partner who is also homeless and living with you? (A partner is a person you live with and share a common family life but not joined in a traditional marriage).
NOTE: Please interview and complete a survey for the spouse or partner.

h. Service-based counts

Service-based counts will be conducted during the three days after the night of the count. The persons counted, per HUD's requirements, "must ensure that the persons counted are limited to persons who were unsheltered on the night chosen for the PIT count." Also, all unique identifier information must be completed in the homeless count and survey instrument in order to de-duplicate.¹⁸

In order to help CoCs determine the use of a service based count, HUD raised the following question and provide an answer

"Does the CoC believe that there might be people experiencing homelessness that enumerators are not likely to identify during an unsheltered count or are there other barriers that could limit the ability of enumerators to conduct interviews during the night of the count?"

"If yes, the CoC may combine a known locations count on the night of the count with a service-based count approach to attempt to account for any homeless persons who might not have been identified on the night of the count."¹⁹

HUD further states that

"Service-based counts may only be conducted within the 7-day period after the designated count night. Service-based counts are conducted at locations frequented by people who are homeless, including soup kitchens, day shelters, libraries, and other community locations and include interviews to determine whether people were unsheltered on the night of the count, as well as their characteristics."²⁰

Also, as noted by HUD,

"If CoCs' methodology involve counting homeless persons over multiple days, they must use a survey instrument as part of its deduplication strategy. If CoCs want to complete a multi-day count without a survey that allows for deduplication, they must seek an exception from HUD. The exception must include a justification for why the count must occur over multiple days and why the CoCs do not intend to use a survey instrument for deduplication purposes."²¹

¹⁸ Point-in-Time Count Methodology Guide: 2014, p. 17.

¹⁹ Ibid., p. 20.

²⁰ Ibid., p. 19.

²¹ Ibid., p. 26.

HUD also notes that

“The level of training required for a service-based count is typically higher, since service-based enumerations require more detailed interviews and typically rely on a combination of service provider staff (or other personnel at the location being canvassed), outreach workers, and volunteers. Service providers, especially mainstream service providers such as welfare agencies, might not ordinarily ask clients about their homeless status and housing needs. As a result, service providers and staff at other locations who are directly involved in post-night counts will require instructions on conducting the interviews and a clear and simple survey form. PIT count volunteers will similarly require considerable training.”²²

i. Provision of incentives

HUD notes that

Many CoCs provide incentives to homeless people who participate in the PIT count. These items can include bus passes, meal gift cards, toiletries, backpacks, blankets, and socks. Some CoCs compile significant donations from local hotels, volunteer groups, and restaurants. Other communities hold drives at local sporting events, schools, or churches. Incentives not only provide necessities of daily living to those participating in the count, but also can raise community awareness about the count and homelessness. In addition, providing participants with distinctive and visible incentives can assist the enumerators in identifying those who have already been counted and help to reduce duplicate counting.²³

j. Outreach and engagement

Veterans

k. Youth count

Note:

CoCs that count unaccompanied children and youth under the age of 18 should consult with local justice, child welfare, and other social services officials to develop a protocol for interviewing these children and youth and connecting them to appropriate services in the community. CoCs should consider whether questions asked of youth should be stated differently than questions asked of homeless adults.

²² Ibid., p. 39.

Sheltered Count

HUD strongly encourages CoCs “to use HMIS to generate PIT data for projects with 100 percent of their beds participating in HMIS.” The unsheltered count and survey instrument will be used to collect required data for those emergency shelters, safe havens, and transitional housing programs that do not participate in HMIS including those that serve survivors of domestic violence.

The CoC will also prepare the HMIS for the sheltered count and survey by carrying out the suggestions made by HUD which are noted below:

- “Generate data quality reports for each participating project.
- Identify and correct any deficiencies in the data (e.g., have projects collect and enter missing data, correct obvious errors, ensure correct entry and exit dates).
- Produce a system-level occupancy report that includes all projects for review. It might be useful to break out the report by project type and household type to determine whether sufficient data are collected for extrapolation purposes. It might also be helpful to examine bed inventory and utilization information for projects on the night of the count. For many CoCs, this is a standard off-the-shelf report provided by the HMIS vendor. Consider contacting the HMIS vendor to see if this type of report is available for use.
- Generate a data quality report that provides the percentage of records with missing or nonresponsive (Don’t Know or Refused) values in HMIS data elements used for the count and subpopulation information.
- Hold regular count meetings involving the HMIS administrator for the CoC and the PIT count committee to help address these issues and finalize the CoC’s PIT count plan.”²⁴

III. Activities after the night of the count

Activities after the night of the count will include the following:

a. Collect all sheltered data in HMIS which will include the following steps

- refer to their Housing Inventory Count (HIC) and identify all projects listed as emergency shelter (ES), Safe Havens (SH), or Transitional Housing (TH) and all people residing in these projects should be included in the sheltered PIT count.
- verify with project staff that HMIS data are complete and correct for the night of the PIT count and that exit dates have been entered for all persons who exited the project on or before the date of the PIT.

²³ Ibid., p. 27.

²⁴ Ibid., p. 43.

- use the Project Descriptor Data Elements to filter these projects in HMIS.
- identify the universe of people to include in the sheltered count using Universal Data Elements.
- use other Universal Data Elements and Program Specific Data Elements to identify demographic and other subpopulation data.²⁵

NOTE: A summary of data elements that CoCs will need to query in HMIS is described in the “Sheltered PIT Count and HMIS Data Element Crosswalk” which can be obtained through the following link: <https://www.hudexchange.info/resources/documents/Sheltered-PIT-Count-and-HMIS-Data-Element-Crosswalk.pdf>.

- b. Collect data sheets from all projects that do not participate in HMIS and include in data collected in HMIS**
- c. Collect, enter, clean, and analyze unsheltered data after de-duplicating data**
- d. Write draft homeless count and survey reports for local stakeholders to review including recommendations for next steps**
- e. Complete a final homeless count and survey report that incorporates stakeholder comments and changes**
- f. Enter homeless count and survey data into HUD’s Point-in-Time Chart and submit to HUD through the HUD Data Exchange (HDX) web site as required by HUD**
- g. Submit relevant homeless count and survey data to the entity responsible for each Consolidated Plan jurisdiction as required by HUD.**

NOTE: HUD states that the “PIT count and Housing Inventory Count (HIC) are integrally related. The sum total number of persons reported in emergency shelter, Safe Haven, and transitional housing projects in the PIT count fields of the HIC must match the sum total of sheltered persons reported in the PIT count. This constitutes the universe of sheltered people for whom CoCs must provide actual or estimated demographic characteristics for the sheltered PIT count. Because the PIT and HIC data must match, it is critical that CoCs conduct their PIT count and HIC at the same time.”²⁶

²⁵ “Sheltered PIT Count and HMIS Data Element Crosswalk,” p. 1.

²⁶ Point-in-Time Count Methodology Guide: 2014, p. 15.

January 9, 2019

CoC Governance Board

SUBJECT: Review and Approve the Ventura County Plan to Prevent & End Homelessness

BACKGROUND:

The CoC Board adopted an initial draft of the Ventura County Plan to Prevent and End Homelessness during the October 10, 2018 meeting to fulfill requirements of the California Emergency Solutions & Housing funding. Further development of the plan is needed to fulfill requirements associated with No Place Like Home funding for supportive housing and to use the plan as a strategy for allocating resources and measuring progress. The Board approved the plan for soliciting feedback from stakeholders at its November 12, 2018 Board meeting. The approved final plan will be submitted with the initial No Place Like Home application to the State after approval by the Board of Supervisors on January 15, 2019.

DISCUSSION: CoC staff made updates to the draft plan as directed by the CoC Board and began circulating the plan among stakeholders for review and input. The feedback received was positive and constructive. Revisions made to the plan include updates on history and resource allocation, general edits and clarifications from service providers. Additional questions and suggestions include:

- 1) Provide clarification around strategic priorities: Are they in priority order?
- 2) How will the CoC address the needs of homeless subpopulations such as seniors?
Suggestion received that more detailed workplans be developed focused on subpopulations;
- 3) Add a directory of partners and service providers as an appendix with contact information;
- 4) Is there a plan for disseminating and sharing this plan with the broader community?
- 5) Is there a plan for partnering with jurisdictions and sharing data/information on a more regular basis?

The following components and strategies have been included in the draft plan

Components

- Pathways to Home, Coordinated Entry System
- Homeless Management Information System
- Housing First/Low Barrier Programs & Services
- Data-Driven Decision making
- Creating sustainable & effective programs & interventions

Strategies

1. Develop a comprehensive crisis response system
2. Increase affordable housing opportunities for households who are homeless or at-risk of homelessness;
3. Create & provide wrap-around services to keep households housed;
4. Create opportunities for homeless persons/families to obtain sustainable income;
5. Community outreach & education;
6. Cross-system integration
7. Capacity building

The following stakeholders have been engaged to provide feedback on the draft plan: community task forces, cities, county, education partners/providers, healthcare partners, social service agencies, criminal justice, business community, faith community, homeless service providers, housing developers, real estate, landlords, philanthropic groups, persons who are currently homeless and persons who are formerly homeless.

RECOMMENDATIONS:

- 1: Provide feedback on draft Ventura County Plan to Prevent & End Homelessness
- 2) Approve Ventura County Plan to Prevent & End Homelessness



**VENTURA COUNTY
PLAN TO PREVENT
AND
END HOMELESSNESS**

**Plan developed by the stakeholders and members of the
Ventura County Continuum of Care Alliance**

Adopted by the Ventura County Continuum of Care on January 9, 2019

To learn more about the VC CoC and how you can help make homelessness rare, brief and non-recurring in Ventura County, visit our website at

www.venturacoc.org

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EXECUTIVE SUMMARY

This plan was developed to create a community-wide roadmap to prevent and end homelessness in Ventura County. The Ventura County Continuum of Care (VC CoC) hopes this plan can serve as a guide for governmental partners, non-profits, homeless service organizations, affordable housing providers and other community members as they make decisions about funding, programs, priorities and needs. The plan was created through work of the Ventura County Continuum of Care Alliance, its committees and input from a diverse group of community stakeholders.

Homelessness can happen to anyone: a job loss, a medical condition, missing a rent payment, a costly car repair; any type of crisis. There are many ways in which someone can become homeless and only one way really to solve it. Homelessness only ends when everyone has a home.

In 2018, Ventura County saw the first significant increase in the annual Point-In-Time Homeless Count and Survey in recent years. A 12.8% increase in homelessness was found during this one-day survey with a nearly 24% increase in unsheltered homelessness. This significant increase in homelessness despite efforts to improve access and coordination of the homeless service system indicates the work of preventing and ending homelessness is more important than ever.

This updated plan reaffirms the ambitious goals of the 10 Year Plan to End Homelessness while expanding our scope and commitment to housing Ventura County's most vulnerable residents.

The plan is divided into strategic priorities and recommendations that will help us achieve the goals of:

- Ending homelessness among Veterans
- Ending homelessness among families with children
- Ending chronic homelessness among persons with disabilities
- Ending homelessness among unaccompanied youth
- Ending homelessness among all other individuals

This plan includes seven strategic priorities that have been adopted by the Ventura County Continuum of Care and represent best practices on preventing and ending homelessness. Additionally, the plan details eight recommendations to improve the crisis response and

homeless service system. The VC CoC Board will use the adopted strategies and priorities to guide the collaborative work of the Alliance and its committees. Each year the VC CoC will use the framework of this plan to inform the development of annual goals and guide the work of its committees and workgroups. It is the intent for this plan to be updated and reviewed annually by the VC CoC, its members and stakeholders. Making homelessness rare, brief and non-recurring in Ventura County will be a multi-year effort and as system accomplishments are made, data demonstrates new trends and new funding becomes available, the plan will need to be updated. The plan calls out the need for a unified and strategic response. Although established systems and programs to address homelessness exist in our community, we are recommitting to carrying out and expanding solutions to help our most vulnerable residents – and the whole community – to succeed and thrive.

The strategic priorities and goals include the following (detailed in section II):



I. HISTORY OF RESPONDING TO HOMELESSNESS IN VENTURA COUNTY

In 2007, Ventura County adopted a 10 Year Plan to Prevent and End Homelessness. The plan set forth an ambitious agenda for ending homelessness by 2017. The plan was recalibrated in 2013; incorporating national best practices as promoted by the United States Interagency Council on Homelessness (USICH) and the United States Department of Housing & Urban Development (HUD).

Since adoption of the recalibrated plan, Ventura County's Continuum of Care (VC CoC) and homeless service provider network have undergone significant shifts in leadership and structure. The VC CoC experienced a merger between Oxnard and Ventura County Continuums of Care creating one countywide VC CoC. At the Ventura County Homeless and Housing Coalition's request, administrative support for the VC CoC was also transitioned to the County Executive Office to facilitate capacity building and compliance with increasing federal mandates.

In 2016, the VC CoC Board and Alliance membership updated the VC CoC's mission, vision, values and guiding principles and adopted strategies and goals to align with the 10 Year Plan:

Mission: The Ventura County Continuum of Care Alliance is a collaborative group dedicated to promoting a safe, desirable and thriving community by ending homelessness in Ventura County.

Vision: Homelessness in Ventura County is rare, brief and non-recurring.

Values: The dignity of every human life; The well-being of the community; The power of the community working together to solve community problems.

Guiding Principles:

Collaboration & Coordination: Invest in evidence-based, results-driven and client-focused systems of support that integrate practices, procedures, and services within and across public and private agencies, programs and policies.

Housing First: People experiencing homelessness require very affordable permanent housing solutions as quickly as possible, providing services as needed to keep people housed.

Strength-Based: Start with and build upon the skills, strengths and positive characteristics of each person.

Trauma-Informed: Homelessness is a complex, high-risk and individualized condition, not a character trait. Recognize that most people experiencing homelessness have experienced trauma; build relationships, responses and services on that knowledge.

Harm Reduction: Seek to reduce the effects of risky behavior in the short-term and eliminate its effects in the long-term.

The following are list of the Ventura County partners in ending homelessness:

Ventura County Board of Supervisors	City of Ventura
City of Oxnard	City of Camarillo
City of Ojai	City of Santa Paula
City of Fillmore	City of Moorpark
City of Simi Valley	City of Thousand Oaks
City of Port Hueneme	County of Ventura
Area Housing Authority of County of Ventura	Housing Authority of City of San Buenaventura
Santa Paula Housing Authority	Oxnard Housing Department
Salvation Army	Turning Point Foundation
Community Action of Ventura County	Project Understanding
The Kingdom Center & Gabriel’s House	The City Center Transitional Living Center
RAIN, Inc.	SPIRIT of Santa Paula
The Samaritan Center	LSS Community Care
Many Mansions	People’s Self-Help Housing
Area Agency on Aging	Ventura County Public Defender
Ventura County Human Services Agency	Ventura County District Attorney
Ventura County Behavioral Health	Ventura County Health Care Agency
Hospital Association of Southern California	National Health Foundation
Dignity Healthcare	Gold Coast Health Plan
Simi Valley Hospital	Community Memorial Hospital
Los Robles Hospital	Ventura County Public Health
Ventura County Rescue Mission	United Way
Ventura County Community Foundation	Ventura County Office of Education
Ventura County Housing Trust Fund	NAMI (National Alliance on Mental Illness) Ventura County

Help of Ojai	Ojai Family Shelter
Interface Children & Family Services	Pacific Clinics
Coalition for Family Harmony	Ventura County Medical Center
Catholic Charities	California State University Channel Islands
American Medical Response	Cabrillo Economic Development Corporation
Downtown Ventura Organization	Gold Coast Veterans Foundation
Independent Living Resource Center	Ventura Social Services Taskforce
Goodwill Industries	US. Dept of Veterans Affairs
Khepera House	Free Clinic of Simi Valley
VC Community Development Corp.	Lift Up Your Voice
Jewish Family Services VC	McCune Foundation
Dyer Sheehan Group	Prototypes
VCOG (Ventura Council of Governments)	PATH (People Assisting the Homeless)
Diversity Collective VC	The Nature Conservancy
One Step a la Vez	Step Up Ventura
Re-Entry Council Ventura County	Partnership for Safe Families
VC Military Collaborative	First 5
Aegis Treatment Centers	Coalition for Family Harmony
Ventura County Libraries	Ventura Chamber of Commerce
US Vets	Law Enforcement agencies

Ventura County achieved significant outcomes under the Ventura County 10 Year Plan to End Homelessness that resulted in slow but steady decrease in homelessness among families with children and other subpopulations of homeless individuals and families. Most of the achievements accomplished are directly related to allocation of resources and collaboration among community partners to maximize use of available resources. Achievements include:

- 2016 Launch of Pathways to Home, the local coordinated entry system.
- Increase in Homeless Prevention & Rapid Re-Housing resources made available through commitment from the Ventura County Board of Supervisors to provide local funding in addition to the resources through State and Federal programs.
- Progress toward the goal of ending *veteran homelessness* with dedicated housing resources (VASH & SSVF) being made available to veterans.

- Behavioral Health and Healthcare focused programs have been implemented including *outreach efforts* through the RISE and PATH programs of Ventura County Behavioral Health and the Healthcare for the Homeless and Whole Person Care programs of the Health Care Agency including expansion of outreach efforts and recuperative care beds.
- Improvement of the crisis response system through creation of low-barrier emergency shelter/navigation center programs.

II. STRATEGIC PRIORITIES

The seven adopted strategic priorities were developed and adopted as part of the VC CoC strategic plan in 2017. After working on these strategies over the past couple of years, stakeholders requested that the VC CoC further develop these strategies and include them in a formalized regional plan.

STRATEGIC PRIORITY 1: DEVELOP A COMPREHENSIVE CRISIS RESPONSE SYSTEM

Goal: Create an effective crisis response system that prevents homelessness whenever possible and rapidly returns people who experience homelessness to stable housing.

Overview: Ventura County needs a clear, consistent, and targeted crisis response system that quickly and compassionately assesses a household's needs and provides tailored resources to individuals and families in crisis. Strategic and efficient interventions can reduce the number of people entering the homeless system and quickly stabilize people who are already experiencing homelessness. An effective crisis response system will target prevention and diversion resources to those most at risk of entering emergency shelter, equip emergency shelter and interim housing providers with necessary resources to rapidly re-house people, and coordinate outreach for those currently on the streets.

Key Objectives:

- Homeless prevention targeted at those most likely to become homeless
- Diversion from shelter whenever possible
- Provision of coordinated entry and access to homeless persons and families
- Creation of access and points of entry for hard-to reach populations countywide
- Increase of emergency housing options across the County of Ventura
- Enhanced outreach efforts
- Housing navigation services to assist with navigating services and connecting to housing

STRATEGIC PRIORITY 2: INCREASE AFFORDABLE HOUSING OPPORTUNITIES FOR HOUSEHOLDS WHO ARE HOMELESS OR AT-RISK OF HOMELESSNESS

Goal: Create and maintain stable and affordable housing for households who are experiencing or at-risk of homelessness.

Overview: A stable and affordable home for everyone is the vision of the homeless plan. In order to realize this vision, a range of permanent housing options is needed. For many, a short-term

subsidy and stabilizing case management is all that is needed to regain stable housing. For people who are disabled and require additional time and supports, permanent supportive housing has proven to be a cost-efficient and effective intervention. For those struggling with high rents and low paying jobs, subsidized, affordable housing can end their homelessness. Investment in a range of permanent and affordable housing options is needed in order to create strong families and strong neighborhoods.

Key Objectives:

- Housing location efforts to build partnerships with landlords
- Leveraging of funding opportunities to increase supply of supportive housing for persons with disabilities including serious mental illness and substance use disorders
- Partnerships with affordable housing providers and public housing authorities

STRATEGIC PRIORITY 3: CREATE AND PROVIDE WRAP-AROUND SERVICES TO KEEP HOUSEHOLDS HOUSED

Goal: Ensure that households have access to a full range of fundamental resources and services – including physical and mental health care, substance use treatment, child care, employment, and connection to mainstream resources.

Overview: Wrap-around, individualized, comprehensive services protect the stability of housing, especially in times of crisis.

Key Objectives:

- Home-based case management services
- Access to behavioral health services
- Access to substance use treatment and support services
- Access to healthcare services
- Access to education and employment services
- Access to other services needed to maintain housing
- Increase the number of households connected to mainstream resources

STRATEGIC PRIORITY 4: CREATE OPPORTUNITIES FOR HOMELESS PERSONS/FAMILIES TO OBTAIN SUSTAINABLE INCOME

Goal: Increase meaningful and sustainable employment opportunities for people experiencing or most at-risk of homelessness.

Overview: For many non-disabled people, finding living wage employment is an essential part of moving on from homelessness – and usually one of the biggest challenges. To better meet the needs of people experiencing homelessness, the workforce development system must be expanded to increase capacity and flexibility. Homeless providers need to be better equipped with tools to assess and connect clients for whom employment is appropriate to the most suitable resources. Innovative approaches to creating career opportunities for the most vulnerable individuals need to be developed.

Key Objectives:

- Partnerships with education/workforce programs to increase meaningful and sustainable employment opportunities for people experiencing or at-risk of homelessness
- Increased connection to SSI outreach; access and recovery (SOAR) program to increase the number of persons with serious mental illness and other disabilities able to access social security benefits and Medicaid

STRATEGIC PRIORITY 5: COMMUNITY OUTREACH AND EDUCATION

Goal: Engage the community in a robust plan that creates a path to securing a home for everyone in Ventura County.

Overview: Successful implementation of the homeless plan will require the commitment and sustained advocacy of all community partners. In order to increase resources and maximize policy opportunities, the profile and urgency of the homeless and housing crisis must be raised in order to educate and inspire change.

Key Objectives:

- Sharing of data, best practices and proven practices with CoC partners
- Expansion and diversification of CoC membership
- Sharing of data, best practices and success stories through community outreach and engagement
- Expand the use of social media, press releases and CoC website to educate and disseminate information
- Solicitation of input from community on strategic goals and performance
- Advocate for additional resources to meet the needs of people experiencing homelessness

STRATEGIC PRIORITY 6: CROSS-SYSTEMS INTEGRATION

Goal: Work across public and private systems of care to ensure ending homelessness is a shared priority.

Overview: The people at the heart of the homeless plan are more than a label of “homeless.” They are families, learners, survivors, and job seekers. Sometimes they are ill, sometimes they are in recovery, and sometimes they are building a new life after incarceration. Each person is unique and each person touches multiple systems of care in our community beyond the homeless assistance system. To ensure everyone, regardless of situation, has a home, creativity and efficiency across systems of care is needed. Successful cross-systems integration will lead to lasting change by improving access to comprehensive services and continuity of care, by reducing duplication and inefficiency, and by establishing greater accountability for meeting shared goals.

Key Objectives:

- Work across public and private systems of care to ensure ending homelessness is a shared priority
- Fostering and facilitation of high-level coordination among government entities on the issue of homelessness
- Increase of data sharing among systems of care

STRATEGIC PRIORITY 7: CAPACITY BUILDING

Goal: Ensure a strong homeless assistance system capable of implementing the homeless plan.

Overview: Ventura County’s homeless assistance system is comprised of tireless providers and volunteers working across the county. It includes advocates and systems-level professionals striving to improve the county’s chances of ending homelessness. Most importantly, the system incorporates thousands of people who might need help today, but also want an opportunity to give back tomorrow. Ensuring strength, resiliency, and creativity of the system will allow the homeless plan’s goals to be realized.

Key Objectives:

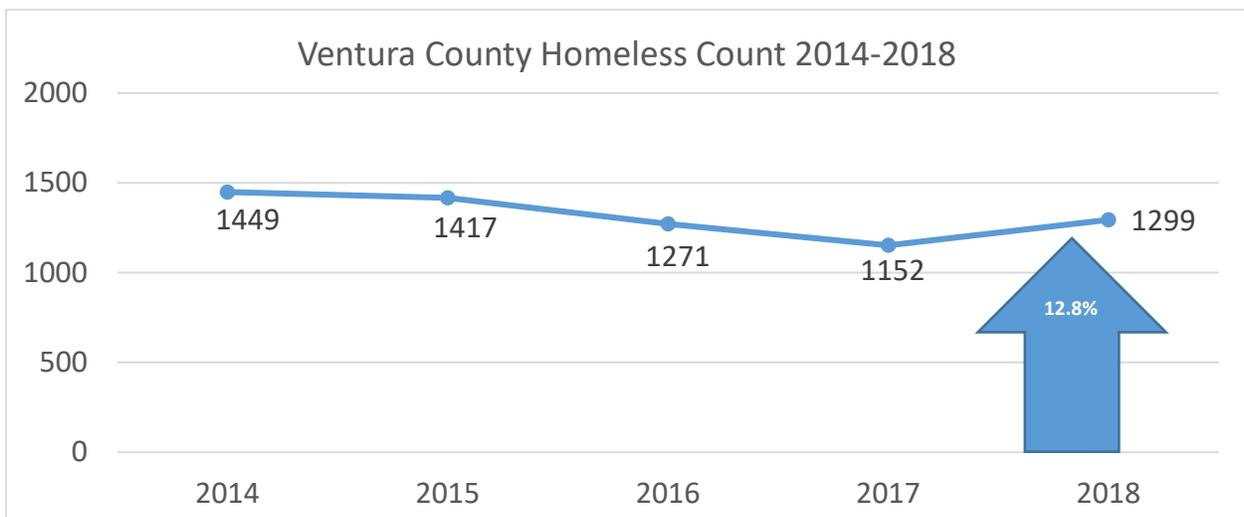
- Ensuring a strong system capable of meeting strategic goals and locally adopted system performance thresholds (in alignment with State/Federal funding)
- Increase of bed coverage and data quality in Homeless Management Information System (HMIS) to identify gaps
- Facilitation of training opportunities and technical assistance to all homeless service providers

III. WHO IS HOMELESS IN VENTURA COUNTY?

Each year the Ventura County Continuum of Care and community partners conduct the Point-in-Time Homeless Count and Survey with the goal to survey and count each person who was homeless on one night in January. This activity assists with evaluating trends and gaining a better understanding of the needs of the population who meet the United States Housing and Urban Development (HUD) definition of homelessness (sleeping in places not meant for human habitation or staying in an emergency shelter or transitional housing program).

In 2018, there were 1,299 adults and children who were homeless during the Point-in-Time Count. Of the 1,299 persons counted, 821 or 63.2% were unsheltered and 478 or 36.8% were sheltered. The 2018 count accounted for the first significant increase in the annual count in several years with an overall increase of nearly 13% and a significant increase in the overall unsheltered population, rising nearly 26% from the 2017 count.

Figure 1



Based on the 2018 Point in Time Homeless Count, the cities of Oxnard and Ventura accounted for nearly two-thirds (65.4%) of the 1,299 homeless persons (515 persons representing 40.0% and 335 persons representing 26%, respectively). The City of Simi Valley had the third highest population of homeless persons (143 persons representing 11%) followed by the City of Thousand Oaks (80 persons representing 6%). The following table lists the total number of unsheltered and sheltered persons for each jurisdiction in Ventura County:

Figure 2

Jurisdiction	2007	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Camarillo	10	13	15	29	30	27	38	35	24	27	49
Fillmore	5	4	5	10	16	13	6	7	6	0	2
Moorpark	13	7	1	7	5	9	15	7	4	7	3
Ojai	82	60	52	40	41	43	62	40	29	19	31
Oxnard	671	679	520	638	522	645	379*	603	584	461	335
Port Hueneme	9	1	9	6	12	17	13	22	7	18	19
Santa Paula	97	91	54	50	60	34	31	20	56	35	44
Simi Valley	163	303	229	226	284	211	194	202	99	105	143
Thousand Oaks	81	147	106	87	90	121	130	83	104	102	80
Ventura	588	623	601	570	701	519	495	334	300	301	516
Unincorporated	242	265	223	209	175	135	86	64	58	77	77
Total:	1,961	2,193	1,815	1,872	1,936	1,774	1,449	1,417	1,271	1,152	1,299

*This number was artificially low due to an unresolved reporting discrepancy and the winter warming shelter hosted in Ventura.

The following figures 3 - 7 provide a breakdown of demographics from the 2018 Point in Time Homeless Count:

Figure 3

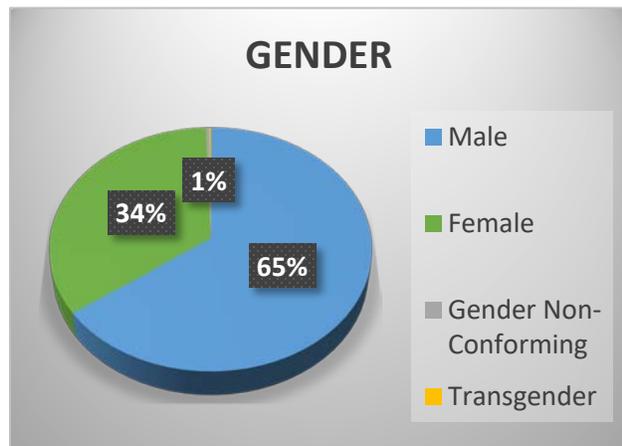


Figure 4

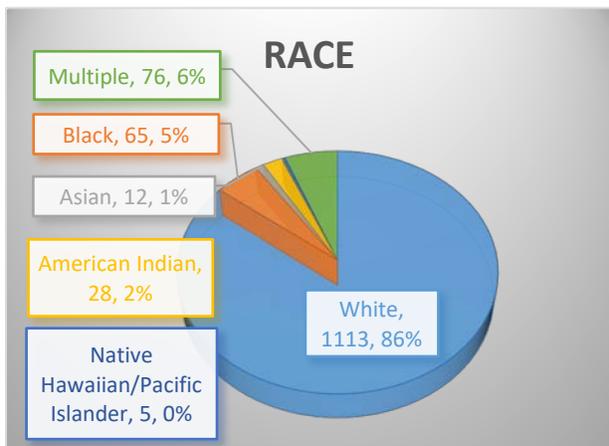


Figure 5

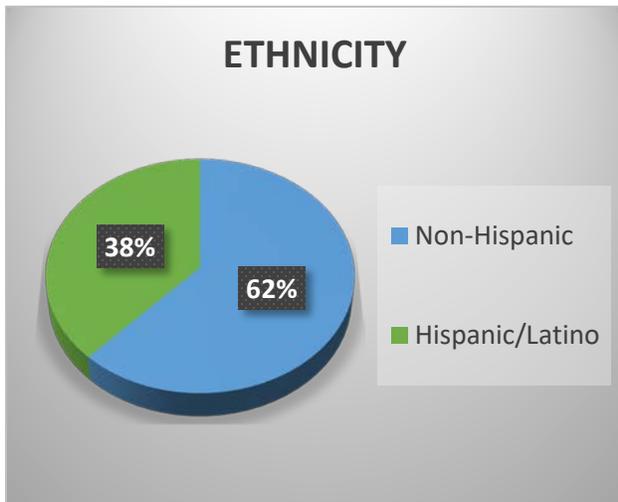


Figure 6

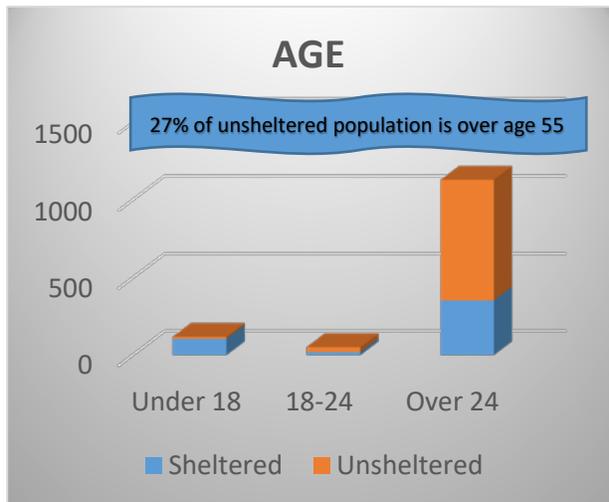
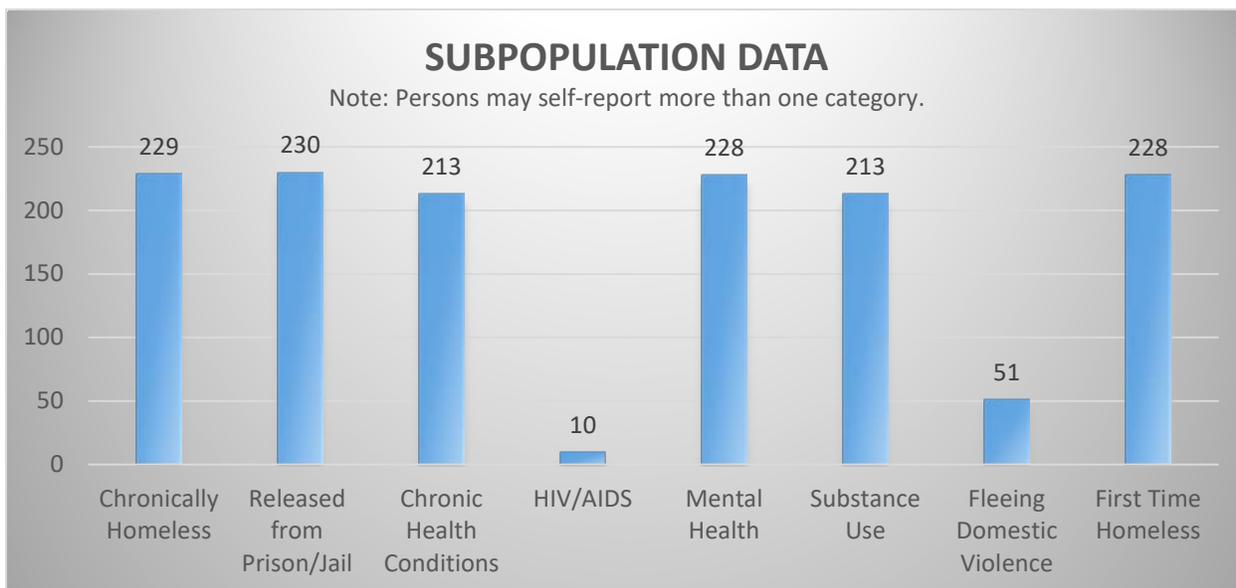


Figure 7



While the homeless count provides annual trend information it provides a snapshot glance and not a day-to-day look at the needs of residents experiencing homelessness. During the 17-18 Federal Fiscal Year, 2,309 unduplicated persons requested assistance from the Ventura County Continuum of Care partners. The Ventura County Homeless Management Information System (VC HMIS) is designed to be an integrated network of homeless and other service providers that use a central database to collect, track, refer and report uniform information on client needs and services, as required by the U.S. Department of Housing and Urban Development (HUD). The Ventura County Human Services Agency (HSA) is the Lead Organization for the VC HMIS. This system assists with countywide data collection and gives us a better understanding of

homelessness in our communities. The following figures 8 - 10 provide some demographic information from VC HMIS during the 17-18 Federal Fiscal Year:

Figure 8

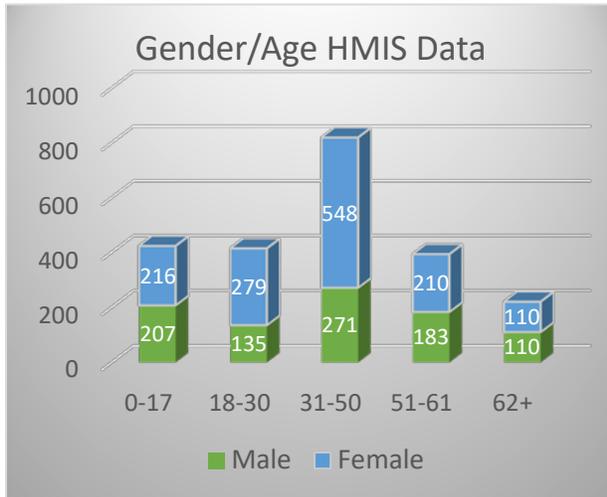


Figure 9

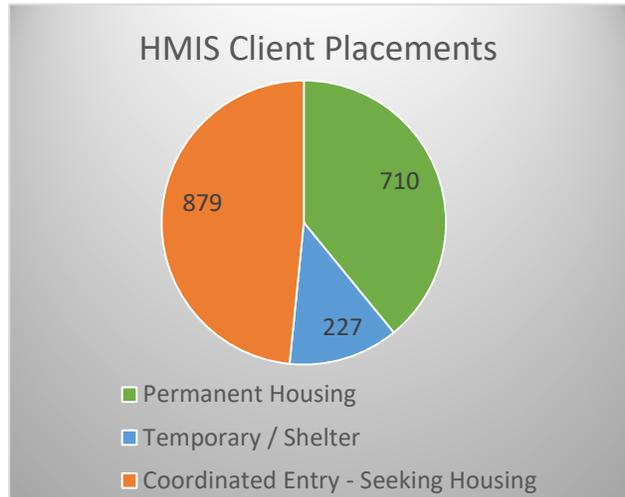
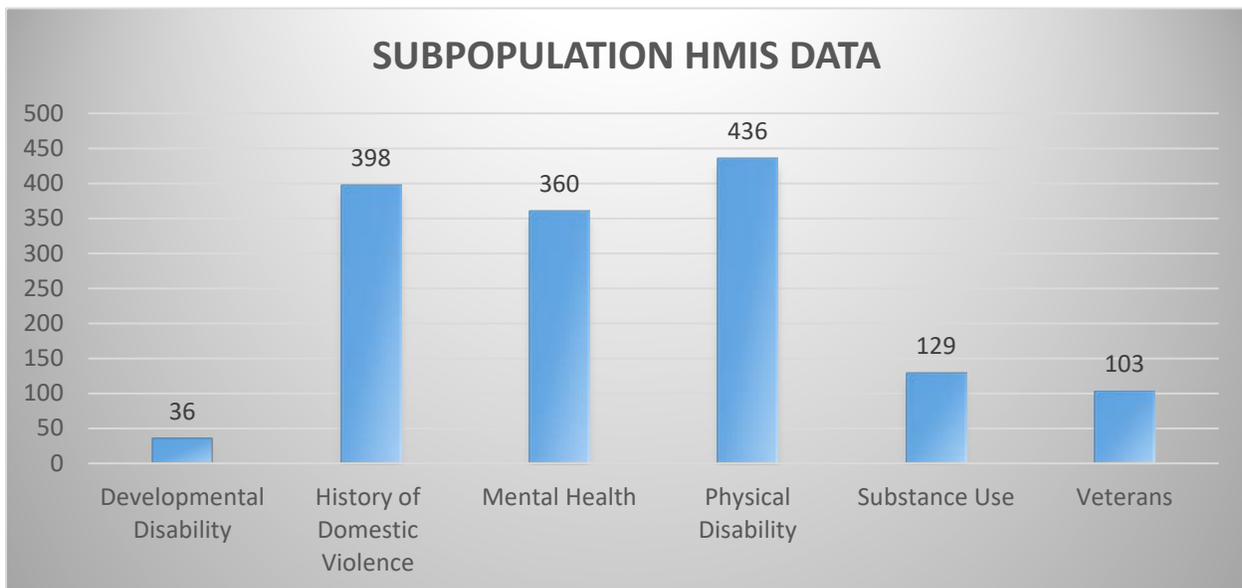


Figure 10



The number of people who are at-risk of homelessness is significant in Ventura County’s high cost/low vacancy housing market. The United States Census Bureau noted that 9.9% or approximately 84,000 of the 854,223 residents of the county were living below the poverty level as reported in the 2017 American Community Survey. These persons are at-risk of homelessness because of the cost of housing relative to their household income. According to Ventura County 2-1-1 (phone-based resource and referral system), the request for housing assistance is the top unmet need in our community.

Other program data to help us evaluate the number of people who are homeless and at-risk of homelessness comes from Ventura County healthcare and education providers using a broader definition of homelessness which includes individuals and families who are temporarily staying with family or friends including being doubled up, paying for a motel or couch surfing. In 2017, the County of Ventura Healthcare for the Homeless reported 14,521 persons enrolled that meet the Health Resources & Services Administration (HRSA) definition of homeless (includes doubled up and at-risk persons). Of this number, 4,456 or 30% of persons were literally homeless (on the streets, emergency shelter or transitional housing).

Ventura County Office of Education also tracks the number of homeless students through a broader definition of homelessness set by the federal Department of Education. Data collected in the 2017 school year showed 4,400 students temporarily doubled-up or at-risk of homelessness, 569 or 13% of students met the HUD definition of homelessness. This data includes all public K-12 schools in Ventura County.

Contributing factors to homelessness can include many social and economic matters, as well as health related issues. The most significant barrier to serving homeless individual and families in Ventura County is limited access to low barrier emergency shelter and available affordable housing opportunities. The VC CoC is maximizing the availability of these limited resources through the Pathways to Home coordinated entry system and working with partners to increase low barrier shelter beds and affordable and supportive housing opportunities. Despite these efforts to maximize resources, more housing opportunities are needed for all subpopulations experiencing homelessness.

The VC CoC partners have been working to address barriers to serving those experiencing homelessness including partnering with domestic violence service providers, LGBTQ organizations, criminal justice systems, healthcare partners, behavioral health providers and mainstream service providers that serve families and individuals. These partners are assisting the VC CoC with reaching populations that may not traditionally seek services or are hard to reach based on locations they are living. Homeless encampments have grown in Ventura County and have been pushed into the river bottoms and open spaces making it challenging to engage persons in services and address the impacts of persons living in these often environmentally sensitive locations.

There are several strategies addressed in this plan that will assist in reaching and serving unsheltered persons including improved outreach efforts and increasing shelter and housing

opportunities that utilize a housing first approach and provide appropriate wrap-around services. Employing these strategies will assist with efforts to prevent the criminalization of homelessness by creating alternative locations for persons to be appropriately served.

IV. METHODOLOGY

The Ventura County Continuum of Care has developed this regional strategy with input from stakeholders including local jurisdictions, homeless service providers, affordable housing developers and supportive housing providers, county service agencies, law enforcement, faith-based partners, the business community, policymakers, advocates, persons who are currently or formerly homeless and many others focused on serving homeless subpopulations.

This plan was developed through extensive community dialogue and feedback from a variety of stakeholders. It focuses on creating a crisis response system that is organized around the goal of helping all people who are without shelter quickly return to housing. The 10-year plan included recommendations of creating new shelter programs and housing inventory. The County Board of Supervisors (BOS) allocated \$3 million dollars to bring social model detox beds to Ventura County, establish a local Housing Trust Fund and allocated match funding for creation of year-round shelters. Additional local funding was also allocated to specific housing projects and the County's Homeless Prevention & Rapid Re-Housing program. Shelter programs were not created despite the funding from the BOS for a variety of reasons including community support and a lack of operational funding. In 2019, the BOS committed to providing matching capital and operational funding to cities that establish new emergency shelter programs. With new State funding available and reaffirmed local commitment, comes an opportunity to invest in best practices and proven solutions to prevent and end homelessness for individuals and families.

The Ventura County Plan to Prevent and End Homelessness was created by combining these primary activities:

- Making and evaluating key findings since the 10-Year Plan to expand upon and ensure homeless intervention sustainability;
- Establishing core requirements and recommending core practices for programs working to prevent and end local homelessness;

- Using core requirements and practices to shape recommendations and solutions to prevent and end homelessness;
- Implementing the locally shaped recommendations with new and existing federal, state, and local funding opportunities;
- Soliciting and incorporating input and feedback from stakeholders;
- Adopting strategic priorities.

a. CORE REQUIREMENTS

The Ventura County Continuum of Care has adopted the following core requirements for all publicly funded programs serving homeless individuals and families, which is consistent with federal and state legislative requirements. Privately funded programs are strongly encouraged to participate as well:

1. Participation in Ventura County Homeless Management Information System

The local Homeless Management Information System (HMIS) is the primary repository for client level data for consumers of homeless services in the Ventura County. The HMIS allows the Continuum of Care to collect and analyze data from within the service system and evaluate essential information related to the provision and assessment of services provided within all levels of the continuum of care, including outreach and prevention, emergency shelter, transitional housing and permanent supportive housing. The VC HMIS has set goals to gain participation of all programs and services with a primary mission to serve person who are experiencing homelessness. The VC CoC utilizes data from VC HMIS to submit required reports to the State and Federal government including system performance measures, utilization of the service system and outcomes associated with serving individuals and families. The VC HMIS Lead Agency in partnership with the VC CoC and partner agencies develops an annual strategic plan (http://www.venturacoc.org/images/Documents/HMIS/HMIS_Policy_and_Procedures_2017.pdf)

2. Participation in Pathways to Home Coordinated Entry System

Pathways to Home is the Ventura County Continuum of Care’s Coordinated Entry System. This system connects individuals and families to services needed to move them out of a state of homelessness as quickly as possible. Pathways to Home includes a client-focused approach to

minimize the complexity and challenges associated with accessing multiple programs to avoid or exit homelessness. Service providers within the VC CoC work collaboratively to coordinate services and information with the intent to provide the most effective and efficient client services.

- The coordinated entry process makes referrals to all projects receiving Emergency Solutions Grant (ESG) and Continuum of Care (CoC) program funding, including Emergency Shelter (ES), Rapid Re-Housing (RRH), Permanent Supportive Housing (PSH), and Transitional Housing (TH), as well as other housing and homelessness projects.
- Service providers use HMIS to complete a client assessment and determine which service(s) the client is eligible for. Referrals to Emergency Shelter, Safe Haven, Rapid Re-Housing, Homeless Prevention and Street Outreach projects are completed directly and immediately. Referrals for Permanent Supportive Housing and Transitional Housing projects are completed through systemwide case conferencing which includes specific documentation and prioritization based on eligibility and vulnerability.
- Prioritization is based on a specific and definable set of criteria that are documented, made publicly available and applied consistently throughout the Ventura County CoC. All supportive housing units are matched through this process based on eligibility criteria specific to the funded program/unit. The written policies and procedures include the factors and assessment information with which prioritization decisions are made. All policies and procedures are posted on the CoC website (http://www.venturacoc.org/images/VCCoC_CES-PTH_Prioritization_Procedures.pdf)

3. Implementing a Housing First Approach that is Strength Based, Trauma Informed, and Harm Reducing

Housing First is a low barrier approach that prioritizes the placement of people experiencing homelessness in permanent housing, regardless of their service needs or challenges. HUD encourages all recipients of CoC and ESG program funding to follow a Housing First approach. The State of California requires all state funded housing and homeless programs to adopt a Housing First approach. Barriers are removed that have hindered homeless persons from **obtaining** housing which include:

- too little income or no income;
- active or history of substance use;
- criminal record, with exceptions for state-mandated restrictions; and

- history of having been or currently a victim of domestic violence (e.g., lack of a protective order, period of separation from abuser, or law enforcement involvement).

Barriers are removed that have hindered homeless persons from **maintaining** housing which include:

- failure to participate in supportive services;
- failure to make progress on a service plan;
- loss of income or failure to improve income; and
- fleeing domestic violence.

4. Implementing the locally shaped recommendations with new and existing federal, state, and local funding opportunities.

Local recommendations will be shaped by integrating the core requirements and components described above into new and existing federal, state, and local funding opportunities.

Four new state funding opportunities include:

State Funding Opportunity	Amount Available for Ventura County	Eligible Activities
No Place Like Home Program	\$1,566,826	Development funding for permanent supportive rental housing for people with serious mental illness, who are homeless, chronically homeless, or at-risk of chronic homelessness
Housing for a Healthy California	TBD	Development funding for permanent housing for homeless individuals enrolled in Medi-Cal who receive services through the Whole Person Care pilot program.

Homeless Emergency Aid Program (HEAP)	\$4,831,856	One-time flexible block grant funds to address immediate and emergency homelessness challenges. A minimum of 5% is dedicated to serve homeless youth up to age 24. City and County jurisdictions must adopt a resolution declaring a shelter crisis to be eligible for funding.
California Emergency Solutions and Housing (CESH) Program	\$701,401	<p>Rental assistance and housing relocation and stabilization services to ensure housing affordability to people experiencing homelessness or at risk of homelessness. Rental assistance provided pursuant to this paragraph shall not exceed 48 months for each assisted household and rent payments shall not exceed two times the current HUD fair market rent for the local area, as determined pursuant to Part 888 of Title 24 of the Code of Federal Regulations.</p> <p>Operating subsidies in the form of 15-year capitalized operating reserves for new and existing affordable permanent housing units for homeless individuals and families.</p> <p>Flexible housing subsidy funds for local programs that establish or support the provision of rental subsidies in permanent housing to assist homeless individuals and families. Funds used for purposes of this paragraph may support rental assistance, bridge subsidies to property owners waiting for approval from another permanent rental subsidy source, vacancy payments, or project-based rent or operating reserves.</p> <p>Operating support for emergency housing interventions, including, but not limited to, the following:</p> <p>(A) Navigation centers that provide temporary room and board and case managers who work to connect homeless individuals and families to income, public benefits, health services, permanent housing, or other shelter.</p> <p>(B) Street outreach services to connect unsheltered homeless individuals and families to temporary or permanent housing.</p>

		(C) Shelter diversion , including, but not limited to, homelessness prevention activities, and other necessary service integration activities to connect individuals and families to alternate housing arrangements, services, and financial assistance.
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b. CORE PRACTICES

Core practices are based upon a range of evidence-based, best, and promising practices that have been used to help solve local homelessness in other communities.

1. Street Outreach and Engagement

Outreach to individuals in a Housing Crisis; begins the initial steps for building personal connections, assessing immediate needs with a basic needs assessment, and working to identify and overcome barriers to improve health status, social support network and address their housing crisis.

Engagement is continued multiple contacts with individuals living on the street, continued attempts to develop and establish a rapport that leads to a trusting relationship to facilitate the development of a housing plan as well as addressing their medical, mental health and service needs. The process begins after the initial street outreach contact, when individuals in a housing crisis are identified. Engagement periods can be as short as one or two contacts or may take years including hundreds of contacts. Staff who provide the engagement services are aware that refusals of contacts can rapidly shift and that initial rejections can eventually lead to acceptance of services and development of a housing plan. It is important that the community, agencies or government policies and resources recognize the length of time that may be needed for regular and persistent contact to result in active engagement and progress towards creation of a housing plan.

- Preventing Criminalization of Homelessness through partnerships between local law enforcement agencies and service providers to collaboratively connect persons to appropriate services. These partnerships include law enforcement officers assigned to outreach to homeless persons, probation agency and public defender partners. Community Intervention Court and Homeless Court are utilized to address criminal charges and connect persons to substance use treatment, behavioral health services, housing and other resources to divert persons from the criminal justice system.

Street Outreach & Engagement Providers in Ventura County	
Community Action of Ventura County	Supportive Services for Veteran Families
County Human Services Agency Homeless Services	The Salvation Army
County Health Care Agency Homeless Services	The Samaritan Center
HELP of Ojai	The Spirit of Santa Paula
Interface Children & Family Services	Turning Point Foundation
Lutheran Social Services	Ventura County Behavioral Health
Local Law Enforcement Agencies	Ventura County Backpack Street Medicine

2. Housing Search

Housing search uses Housing Locators who, with support from a wide-range of community members, find housing options for street outreach workers to engage homeless persons. Engaging a wide-range of community representatives in housing search activities with the leadership of Housing Locators results in an increase of affordable housing opportunities, thus freeing street outreach workers to concentrate on developing the relationships necessary to motivate homeless persons to obtain and maintain the housing.

Housing Search/Location Providers
*The Salvation Army has been awarded HEAP funding to launch a pilot Housing Location Program beginning in 2019

3. Housing Navigation

Housing navigation focuses on helping homeless households develop a housing plan, addressing the barriers identified during the plan or regular navigation activities, and assisting the household with acquiring documentation and completing forms required for housing. Navigation includes attending property owner meetings and setting appointments and assisting with completing paperwork needed around housing applications. Navigation also

involves the securing of housing through inspections, utility startups and actual move in into housing. Each housing navigator provides services until a linkage with an assigned long-term case manager occurs once the individual is residing in housing. Thus, navigation differs from active case management in that the primary focus is assisting the individual with obtaining housing whereas case management is long term and ongoing and helps the household maintain their housing once achieved.

Housing Navigation Providers in Ventura County	
County Human Services Agency Homeless Services	Supportive Services for Veteran Families
HELP of Ojai	The Salvation Army
Lutheran Social Services	Turning Point Foundation

4. Low Barrier Emergency Shelter

Low barrier shelter is temporary housing that is in contrast with shelters and transitional housing programs that have “housing-ready models” in which residents must address various issues (e.g., substance use) that led to their episode(s) of homelessness prior to entering permanent housing. In ‘housing-ready models’, treatment and compliance are required in exchange for help with obtaining permanent housing.

In low barrier shelter, however, there are no preconditions such as sobriety or medication compliance. A Housing First approach is embraced and anyone facing a housing crisis is offered immediate and low barrier access. Residents work with housing navigators to move into permanent housing as quickly as possible and receive home-based supportive services including substance use treatment or behavioral health services if agreed upon and needed.

Low Barrier Shelter Providers in Ventura County*	
The Kingdom Center Emergency Shelter (women & children)	Turning Point Foundation Safe Haven (mentally ill adults)
The Salvation Army Emergency Shelter (adults only)	
*Three additional shelters are expected to be in operation by the end of 2019, including Interface Children & Family Services Minor Youth Shelter, the City of Oxnard 24/7 Emergency Shelter and the City of Ventura 24/7 Emergency Shelter.	

5. Rapid Re-housing

Rapid Re-Housing is an intervention that connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services. Rapid Re-Housing programs assist individuals and families living on the streets or in emergency shelters solve the practical and immediate challenges to obtaining permanent housing. The primary focus of the program is to help a household find housing as quickly as possible and receive case management for stabilization purposes. Rapid re-housing incorporates a trauma-informed approach that supports households in their own housing which can allow children to remain in school, adults can maintain or more easily obtain employment/income and families can easily stay together.

Rapid Re-Housing Providers in Ventura County	
County Human Services Agency Homeless Services	Supportive Services for Veteran Families
Lutheran Social Services	Turning Point Foundation
The Salvation Army	

6. Permanent Supportive Housing

Permanent supportive housing is an evidence-based housing intervention for persons who have a qualifying disabling condition and need subsidized housing for which they pay no more than 30% of their adjusted monthly income. Services are provided on-site and off-site. The type of services depends on the needs and the will of the residents. Services may be short-term, sporadic, or ongoing indefinitely. Supportive services may include education, emergency assistance, employment, health care, mental health care, substance use counseling and treatment, transportation and trauma care. Supportive housing is the ideal intervention for persons with serious and persistent mental illness, substance use disorders and other disabilities that put them at high-risk of institutionalization.

Permanent Supportive Housing Providers in Ventura County	
County Human Services Agency Homeless Services	The Salvation Army
Housing Authority of the City of San Buenaventura	Turning Point Foundation
Many Mansions	Ventura County Behavioral Health
People’s Self Help Housing	Veterans Affairs Supportive Housing

7. Home-based Case Management (Supportive Services)

Home-based case management or supportive services focus on helping persons with maintaining housing by providing a balanced approach that helps clients receive necessary on-site and off-site supportive services but does not evict clients for failure to participate in supportive services, to make progress on a service plan, loss of income or failure to improve income. These strategies are consistent with a Housing First approach. Services are tailored with a focus on maintaining housing and can include assistance with budgeting, maintaining housing unit, working with a landlord, being a good neighbor and engaging in services for overall optimal health and well-being.

V. DEVELOPMENT OF PLAN RECOMMENDATIONS

The development of this plan includes recommendations and proposed solutions to prevent and end homelessness in Ventura County. This incorporates application of core requirements and practices, and evaluation of barriers and challenges.

Recommendations shaped by core requirements and components include:

1. Implementing a homeless prevention approach that will help ensure that those individuals and families most at-risk do not become homeless.

This approach focuses on providing flexible limited cash assistance and a wide-range of free or low cost supportive services and supplies to those households most likely to become homeless. The approach also focuses on providing a wide-range of free and low cost supportive services and supplies to those households less likely to become homeless but in need of such services and supplies.

Households most likely to become homeless will receive appropriate cash assistance. Such assistance may include:

- rental and utility assistance;
- utility deposits;
- security deposits;
- move-in costs;
- legal fees;
- transportation; and
- credit repair costs.

A wide-range of free or low cost supportive services and supplies include:

- clothing;
- educational assistance;
- employment services;
- food;
- health care;
- household equipment and furniture;
- household supplies;
- hygienic supplies;
- mental health care;
- public assistance;
- school supplies; and
- substance use counseling and treatment.

Households most likely to become homeless will be identified by using the characteristics of the local sheltered population as the criteria for determining if a household is likely to become homeless and should receive prevention assistance. Such information is available through the Homeless Management Information System (HMIS). Characteristics will likely include:

- history of homelessness including number of, and length of, previous homeless episodes;
- very low-income household;
- disabilities in household;
- employment status of adults.

Households less likely to become homeless will receive the wide-range of free or low-cost services and supplies noted above when needed.

2. Expanding street outreach and engagement

Expand street outreach and engagement to all areas of the county to ensure that outreach workers engage persons living in homeless encampments. Such persons are often the most vulnerable who have been languishing on the streets and prone to injury and death.

Outreach workers should be full-time and dedicated to outreach and engagement ideally assigned to the same community for extended periods of time. Outreach includes building a personal connection with the individuals, assessing their immediate needs with a basic needs assessment, and working to identify barriers that the individual must address and overcome to improve health status, social support network and address their housing crisis. Engagement involves multiple contacts with individuals living on the street or in encampments.

Outreach and engagement also involves collaborating with outreach workers who may not be full-time and dedicated solely to outreach and engagement. Collaboration will also include cross-training.

Outreach and engagement also includes responding to community requests for street outreach intervention from local government including law enforcement, businesses, land owners, environmental advocates, faith organizations and neighbors. Developing

partnerships with these groups to improve linkages to the service system through access to coordinated entry will be key to reaching the most vulnerable.

3. Promoting Housing Search

Hire Housing Locators, with support from a wide-range of community members, to focus on finding various housing options for street outreach workers to engage homeless persons. Housing Locators engaging a wide-range of community representatives in housing search activities will result in an increase of affordable housing opportunities. This will allow street outreach workers to concentrate on developing relationships with homeless persons, particularly chronically homeless persons, to connect with appropriate housing.

Housing Locators should create and coordinate a Housing Search Task Force that will be made up of a wide-range of community representatives that are committed to identifying and recruiting prospective landlords and affordable housing units for people who are experiencing homelessness. Task Force members to include representatives from:

- Civic groups;
- Faith communities;
- For-profit corporations;
- Local government;
- Real Estate/Landlord groups;
- Non-profit agencies.

Together, Task Force representatives will identify and recruit potential providers of affordable housing for persons experiencing homelessness with outreach to:

- property owners;
- property managers;
- residential care providers,
- affordable housing developers;
- affordable housing operators;
- single room occupancy corporations;
- permanent supportive housing providers.

Types of affordable housing for persons who are experiencing homelessness will include:

- Scattered site housing which includes individual apartment units throughout the community;

- Single-site housing which includes apartment buildings;
- Set-aside housing which includes a designated number or set of apartments within a larger apartment building;
- Shared housing that provides a household with a private bedroom and shared living space that includes bathrooms, kitchen, dining area, and other living spaces.
- Supportive Housing units dedicated to persons experiencing homelessness who have a disability including serious mental illness, substance use disorders, physical or developmental disabilities.

4. Augmenting housing navigation

Augmenting housing navigation will include hiring full-time Housing Navigators that are solely dedicated to housing navigation, which means focusing on helping homeless households with developing a housing plan, addressing the barriers identified during the plan or during regular navigation activities, and assisting the household with acquiring documentation and completing forms required for housing. Navigation will also include attending property owner meetings and setting appointments and assisting with completing paperwork needed around housing applications. Navigation will also involve the securing of housing through inspections, utility startups, and actual move in into housing.

5. Increasing the number of low barrier emergency shelter beds

Expanding the number and distribution of low-barrier emergency shelter beds ensures that resources are available for those persons who want to come indoors. Also, without access to low-barrier emergency shelter beds, outreach and engagement workers have limited options to offer those who are willing to engage in strategies to address their homelessness. Low barrier emergency shelter is often a first step, free from preconditions such as sobriety, to moving as quickly as possible into permanent supportive housing.

6. Augmenting Rapid Rehousing assistance

Augmenting Rapid Rehousing assistance will help more families and individuals who are not chronically homeless obtain permanent housing immediately and to stabilize themselves as

soon as possible. Targeted households have not been living on the streets for years with physical disabling conditions such as serious mental illness, substance use disorders, and/or chronic physical illness, have lived independently in permanent housing in the past and need temporary assistance for several months instead of years. They may need short-term rental assistance (six months or less) and longer-term non-monetary assistance to prevent the loss of their housing such as free or low-cost clothing, food, health care, household supplies, and transportation.

7. Increasing the number of permanent supportive housing units

More permanent supportive housing is needed for persons who have a disabling condition and need subsidized housing for which they pay no more than 30% of their adjusted monthly income. Supportive housing is the best practice solution for persons with serious and persistent mental illness, substance use disorders and other disabilities. Services are provided on-site and off-site. The type of services will depend on the needs and the will of the residents. Services may be short-term, sporadic, or ongoing indefinitely and be focused on helping residents maintain their housing. Supportive services may include education, emergency assistance, employment, health care, mental health care, substance use counseling and treatment, and trauma care.

8. Ensuring home-based case management

Effective, consistent and appropriate home-based case management services are essential for the success of those living in permanent supportive housing and facilitate success for others once rapid re-housing financial assistance ends. It is important that there are enough case managers to provide case management services for all needing assistance to improve outcomes and minimize loss of housing for these populations.

Appendix A

Federal and State Funding Sources:

Shelters and Prevention	Emergency Solutions Grant (ESG): ESG is a HUD program grant administered by the California Department of Housing and Community Development (HCD). ESG provides funding to help improve the quality of existing emergency shelters for the homeless, make additional shelters available, meet the costs of operating shelters, provides street outreach and helps prevent homelessness. The program also provides short-term homelessness prevention assistance to persons at imminent risk of losing their housing due to eviction, foreclosure or utility shutoffs. The State of California runs an Emergency Solutions Grant Program.	Metropolitan cities, urban counties, territories and state
Housing	HOME Investment Partnerships Program (HOME): HOME is a HUD program that provides formula grants to states and units of local government used by communities – often in partnership with local nonprofit groups – to fund a wide range of activities that build, buy and/or rehabilitate affordable housing for rent or homeownership or provide direct rental assistance to low-income people.	State and local and communities, including cities and counties
Housing Case Management	HUD Continuum of Care Program: This program is designed to promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers and state and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families and communities by homelessness; promote access to and effect utilization of mainstream programs by homeless individuals and families; effectively manage, promote and utilize the coordinated entry system and optimize self-sufficiency among individuals and families experiencing homelessness.	State and local governments, nonprofit organizations
Housing	Community Development Block Grants (CDBG): CDBG is a flexible program that provides communities with resources to address a wide range of unique community development needs. Among these needs is low barrier shelter.	Counties with fewer than 200,000 residents in unincorporated areas and cities with fewer than 50,000 residents that do not participate in the U.S. (HUD) Community Development Block Grant (CDBG)

		entitlement program
Housing, Families, Seniors and Disabilities	Section 8 Housing Choice Vouchers: This housing program targets low-income families, seniors and those with disabilities by providing a direct housing subsidy to landlords, with the enrollee paying any difference in cost.	Local public housing agencies
Veterans Case Management	HUD-Veterans Affairs Supportive Housing (VASH) vouchers: This program combines Housing Choice Voucher (HCV) rental assistance with case management and clinical services provided by the U.S. Department of Veteran Affairs (VA), for disabled veterans who are homeless.	Local public housing agencies
Housing		
Veterans, Families and Prevention	U.S. Department of Veterans Affairs' Supportive Services for Veteran Families (SSVF): This nationwide program is intended primarily to serve individuals experiencing crisis homelessness. It provides temporary financial assistance and a range of other flexible services geared toward preventing homelessness among those at risk and rapidly stabilizing in permanent housing those who do become homeless. It is important to note that, despite its name, the program serves both families with children and individual veterans.	Private nonprofit organizations and consumer cooperatives who can provide supportive services to eligible populations
Veterans Prevention Housing	Veterans Housing and Homelessness Prevention Program (VHHP): The purpose of VHHP is the acquisition, construction, rehabilitation and preservation of affordable multifamily housing for veterans and their families to allow veterans to access and maintain housing stability.	Sponsors and borrowing entities may be organized on a for-profit or not for-profit basis. Any public agency or private entity capable of entering into a contract is eligible to apply.
Behavioral Health	Substance Abuse and Mental Health Services Administration (SAMHSA) Grants: These are federal block grant funds available through the Center for Substance Abuse Prevention, the Center for Substance Abuse Treatment and the Center for Mental Health Services to support local programs for substance use disorders and mental illness.	County mental health plans
Health	Medicaid/Medi-Cal: Medi-Cal is California's Medicaid program. Medi-Cal is a public health insurance program financed by the state and federal governments that provides health care services for low-income individuals, including: <ul style="list-style-type: none"> • Families with children; • Seniors; • Persons with disabilities; • Foster youth; • Pregnant women; and 	California Department of Health Care Services (administered by counties in California)

	<ul style="list-style-type: none"> • Low-income people with specific diseases such as tuberculosis, breast cancer or HIV/AIDS. <p>In California, counties have a unique perspective on the Medi-Cal program. County welfare departments determine eligibility for the Medi-Cal program, and county behavioral health departments act as the health plan provider for Medi-Cal. California counties do not, however, have a share of cost for the Medi-Cal program. Counties can leverage their unique position within the Medi-Cal program to conduct outreach to help eligible homeless individuals receive Medi-Cal services.</p>	
Families Prevention Employment	Temporary Assistance for Needy Families (TANF)/CalWORKs: Operated by local county welfare departments, CalWORKs provides families in need with a combination of financial assistance and work opportunities to help them become more financially independent. This program also offers housing support and case management for those at-risk of homelessness.	State and tribal agencies (administered by counties in California)
Families Food	CalFRESH: CalFRESH, formerly known as Supplemental Nutrition Assistance Program (SNAP), is a federally mandated, state-supervised, and county-operated government program that provides monthly food benefits to help low-income households purchase the food they need to maintain adequate nutritional levels. While CalFresh benefits generally cannot be used to purchase hot or prepared food, the CalFresh Restaurant Meals Program allows homeless, disabled and adults age 60 and older to use their Electronic Benefits Transfer (EBT) at select restaurants in some counties. Some individuals also qualify for SNAP employment and training benefits. Children who live in households that receive CalFresh or SNAP benefits are eligible to receive free school meals, including free summertime meals.	State and tribal agencies (administered by counties in California)
Families	Promoting Safe and Stable Families (PSSF): Funded through Title IV-B funding, PSSF is a program to develop a coordinated and integrated service system that builds on the strengths of families and communities.	Child welfare agencies and eligible Indian tribes
Families, Housing and Case Management	CalWORKs Housing Support Program: This program targets CalWORKs homeless families or those at risk for homelessness. Major components include housing identification, rent and moving assistance, and case management and services.	Counties
Seniors and Housing	Section 202: Supportive Housing for Elderly: This program provides grants for supportive housing for the elderly who are very low-income and at least 62 years old.	Private nonprofit organizations and nonprofit consumer cooperatives
Youth	McKinney-Vento grants: The State of California receives a limited amount of federal funding to support efforts to address the needs of homeless students, which is sub-granted to local education agencies (LEAs) such as school districts and can support collaborative projects. Each school district is required to have a McKinney-Vento liaison. LEAs are also mandated to comply with	Local education agencies

	objectives outlined in the State of California’s Every Student Succeeds Act (ESSA) plan, www. cde.ca.gov/re/es/ .	
Youth	Local Control Funding Formula/Local Control Accountability Plans (LCFF/LCAP): The State of California’s funding formula for local school districts to meet outlined objectives, particularly related to priority populations (i.e., English-language learners, foster youth and low-income youth) must now also specifically address the needs of homeless students. LCAPs are developed by school districts but may present opportunities for collaboration. Some school districts combine their objectives to serve homeless students with those designed to serve foster youth. LCAPs are available on school district websites.	School districts
Youth and Food	CalFresh: Homeless youth not living with parents/guardians or “under parental control” may be eligible for CalFresh benefits. There is no age requirement to apply for benefits, no need to supply a permanent address, and a school identification card is sufficient for identification requirements.	Individuals
Youth and Food	USDA school nutrition programs: These programs include school breakfast, school lunch, summer meals and after-school meal programs and provide free meals to students with income below the federal poverty level. Homeless students may be easily enrolled into the school lunch and breakfast programs through McKinney-Vento liaisons. In areas with significant numbers of homeless students and challenges getting to school, cities and counties can encourage school districts to implement or expand Breakfast in the Classroom or other Second Chance Breakfast programs. Summer meal and after-school meal programs are drop-in programs that present opportunities to avoid any stigma associated with accessing school meal programs. These programs also provide jobs to community members. Many high-poverty schools are eligible to participate in the Community Eligibility Provision, www.frac.org/community-eligibility , which enables schools to provide free breakfast and lunch to all students without requiring household applications.	Individuals
Youth	Homeless Youth and Exploitation Program: This program, administered by the Governor’s Office of Emergency Services, addresses the various needs of homeless youth including housing, outreach, signing up for available public benefits, employment training and educational support.	Nonprofit organizations
Law Enforcement Behavioral Health Housing	Proposition 47 (Year): Prop. 47 was a voter-approved initiative to enact the Safe Neighborhoods and Schools Act that is administered by the Board of State and Community Corrections (BSCC). The act includes a grant program aimed at supporting mental health treatment, substance abuse treatment and diversion programs for people in the criminal justice system, with an emphasis on programs that reduce recidivism of people convicted of less serious crimes.	Local public agencies
Law Enforcement Prevention	Law Enforcement Assisted Diversion (LEAD) Grant: This \$15 million grant, administered by BSCC, allows law enforcement officers to redirect people suspected of committing low-level offenses to community-based services rather than to jail, addressing underlying	Cities and counties

<p>Housing</p> <p>Behavioral Health</p>	<p>factors that drive criminal justice contact. The program focuses on providing substance use and mental health treatment and housing.</p>	
<p>Law Enforcement</p>	<p>AB 109 Funding: Police officers may often serve as an initial point of contact with homeless individuals and families. Law enforcement agencies are implementing many new tools to help reduce incarceration of homeless individuals and connect them to services. Counties have used their AB 109 public safety realignment funding to help provide temporary and transitional housing for AB 109 offenders and individuals involved in the local criminal justice system. This typically is part of a comprehensive case management plan for the offender.</p>	<p>Counties</p>
<p>Case Management</p>	<p>Medi-Cal Whole Person Care Pilots: In 2016, Medi-Cal began funding 25 Whole Person Care Pilots designed to improve coordination of health, behavioral health and social services at the local level. The Whole Person Care Pilots are being conducted as part of the Medi-Cal 2020 Waiver, which will allow participating counties and the City of Sacramento to coordinate health, behavioral health and social services in a patient-centered manner aiming to improve beneficiary health and well-being through a more effective and efficient use of resources. The pilots will work toward supporting the integration of care for a vulnerable group of Medi-Cal beneficiaries — who have been identified as high-frequency users of multiple systems and continue to have poor health outcomes — with the goal of providing comprehensive coordinated care for the beneficiary, leading to better health outcomes. Some counties view these pilots as a way to help more homeless individuals achieve better health outcomes.</p>	<p>Counties and one city</p>

Appendix B

GLOSSARY OF KEY TERMS:

Best practices: Methods or techniques that have been generally accepted as superior to alternatives because they produce results which are superior to those achieved by other means. These practices are not considered evidence-based because not enough rigorous research has shown them to be effective, which may yet happen. Examples include street outreach and engagement, housing navigation, and rapid rehousing.

Chronically Homeless: Individual or family who has been continuously homeless for a year or more, or has had at least four episodes of homelessness in the past three years, and has a disabling condition.

Emergency Shelter: Low-demand, site-based, short-term housing designed to remove individuals and families from the imminent danger of being on the street.

Evidence-based practices: Methods founded on the integration of research results with clinical expertise, which help professionals make decisions on proven results and not on personal experience or anecdote. Examples include permanent supportive housing and Housing First.

Harm Reduction: A range of policies and services designed to reduce the harmful consequences associated with drug use and other high-risk activities in order to maintain housing stability.

Homeless Management Information System (HMIS): Computerized data collection system designed to capture client-level information on characteristics and service needs.

Homeless Prevention: Short-term (0-3 months) and medium-term (4-18 months) financial assistance and stabilization services to prevent shelter entrance and promote housing retention.

Housing First: Rather than moving homeless individuals and families through different “levels” of housing until they are “housing ready,” this strategy moves households immediately from the streets, emergency shelter, or interim housing into their own housing with wraparound services.

Interim Housing: Short-term housing program that provides housing-focused services aimed at quickly re-housing persons who are homeless into appropriate permanent housing.

Mainstream Resources: Services made available to the general population including mental health services, substance use treatment, income supports, health care, education, job training, and child care.

Permanent Supportive Housing (PSH): Long-term rental assistance with supportive services. Majority of programs serve people with disabilities, but requirements vary by subsidy source.

Point in Time Count (PIT): A HUD-required count during the last 10 days in January of all individuals and families in shelter and on the streets.

Rapid Rehousing (RRH): Short-term housing subsidy and strategic case management provided to persons who are homeless in order to reduce the length of time households spend homeless and increase the rate at which households are placed into permanent housing.

Promising practices: Methods or techniques that have the potential to effectively address issues of concern in a community. They are solutions or approaches that are new, innovative and “startup” in nature and may not have been sufficiently tested, but still hold promise and potential. These practices can warrant additional research and testing to eventually become best practices. Examples include coordinated entry system, low barrier shelter, and housing search.

Shelter Diversion: At the point of shelter entry, providing temporary alternative housing options when appropriate in order to divert households away from homelessness.

Strength Based Philosophy: Start with and build upon the skills, strengths, and positive characteristics of each person.

Systems Integration: A strategy to identify barriers to resources and then develop, coordinate, and improve the availability, quality, and comprehensiveness of resources. The goal is to improve consumer outcomes through greater access to resources within and across multiple service systems.

Trauma-Informed Care: An approach to engaging people with histories of trauma that recognizes the presence of trauma symptoms and acknowledges the role that trauma has played in their lives when building relationships, responses, and providing services.

January 9, 2019

CoC Governance Board

SUBJECT: Receive and file an update on countywide winter shelter programs and ongoing efforts for year-round low barrier shelter programs.

BACKGROUND: 2018-19 Seasonal winter shelters have been open since November (Simi Valley) and December (Ojai and Conejo Valley). West County (Oxnard & Ventura) efforts have been focused on establishing new year-round low barrier shelters in both cities and a foul weather shelter system to address cold and/or wet weather events. Santa Paula recently agreed to partner with SPIRIT of Santa Paula to open a nightly winter shelter program beginning January 2019.

Year-round shelter programs that are currently in operation include the following:

The Salvation Army in Ventura	12 beds
Turning Point Foundation's Our Place Safe Haven Shelter	14 beds for persons with serious mental illness
Gabriel's House/The Kingdom Center	39 beds for women and children
Ventura County Rescue Mission	increased from 36-50 beds for men starting 11/1/18
Lighthouse:	22 beds for women and children

DISCUSSION:

Oxnard/Ventura: Staff are working with a West County shelter committee led by the County of Ventura Human Services Agency to assist with development of year-round emergency shelter programs. Mercy House has been selected as the operator of these programs which are anticipated to open in late 2019/early 2020. Ventura's location has been identified as a county building (2323 Knoll Drive) and plans to renovate the first floor of the building for residential use are underway. Oxnard has not yet identified a permanent shelter location but is working to use the former Oxnard Armory building as a Temporary Emergency Shelter (TES) location. The TES will differ from the standard Winter Warming Shelter model by being open for 24 hours per day for improved service connection. Oxnard was unable to identify a nonprofit to operate the TES and has stepped up to serve as the employer of record and hire staffing

needed to operate the program. Hiring of staff has been delayed by inability to complete Department of Justice background checks because of the Federal Government shutdown.

West County Foul Weather Shelter: The County Board of Supervisors directed staff to work to establish a foul weather shelter system to respond to cold and wet weather events. Foul weather shelter systems in other communities are activated to expand existing shelter capacity in response to foul weather events. Without an existing shelter system in place, partners have struggled to establish a foul weather shelter system. The County, City of Oxnard and City of Ventura have executed a foul weather MOU to establish criteria for activating foul weather shelter (average lows of 45 degrees or colder and significant rain events). Identifying available buildings, volunteers and other resources to stand up a shelter on short notice has proven challenging. Outreach is being conducted in both Ventura and Oxnard to identify faith-based and community organizations that are willing to host and assist with operating a foul weather shelter program. To date there have been no churches that have agreed to host such a program. In the meantime the City of Oxnard has authorized, and activated last weekend, use of the former Armory building for foul weather shelter.

Santa Paula: SPIRIT of Santa Paula applied to the VC CoC for HEAP funding for a winter warming shelter beginning in December of 2019. With the cold weather in recent weeks, SPIRIT of Santa Paula requested that the city permit them to quickly activate a winter shelter program. SPIRIT of Santa Paula is now operating a nightly winter shelter program in partnership with a local church.

Ojai: Ojai Valley Family Shelter continues with their annual shelter and meal program. Utilization of the shelter program is averaging more than 20 persons per night. The Ojai program does not currently use HMIS for data collection.

Thousand Oaks: The Conejo Valley Meal and Shelter program opened on December 1st and rotates location nightly with a different church hosting the program each night. The program utilizes HMIS for data collection and connects persons to rapid rehousing and other housing resources.

Simi Valley: The Samaritan Center in partnership with churches and civic groups operates their winter shelter program beginning November 1 of each year. The Simi Valley program also rotates locations nightly and uses HMIS for data collection and service connection.

CoC staff work with each program to collect utilization and outcomes data. This data is used to complete reports such as the annual Point in Time (PIT) Count, Housing Inventory Count (HIC) and the Annual Homeless Assessment Report (AHAR).

January 9, 2019

CoC Governance Board

SUBJECT: Receive and File a Report on the Longitudinal Systems Analysis (LSA) Report as required by the U.S. Department of Housing and Urban Development for the Continuum of Care program.

BACKGROUND: Annually, each Continuum of Care (CoC) across the country submits a report called the Annual Homeless Assessment Report (AHAR). The data and information from this report is compiled by HUD and submitted annually to Congress. The AHAR is a national-level report that provides information about homeless service providers, people and households experiencing homelessness and various characteristics of that population. The report informs strategic planning for federal, state and local initiatives designed to prevent and end homelessness. The report includes data from each CoC's Homeless Management Information System (HMIS).

Beginning in FY18, "AHAR" now refers to the annual written report to Congress on the state of homelessness in the United States. "LSA" refers to the Longitudinal Systems Analysis which provides the annual HMIS-based data used to write the AHAR.

The LSA data provided by CoC's contains community-level information on people and households served by continuum projects over the course of the year. Formerly, these data elements were simply referred to as "AHAR data". However, because the scope of this annual report is expanding significantly beginning with fiscal year 2018, CoCs are now expected to submit much more granular data that will be used to inform the written AHAR to Congress. This will assist in tracking progress against the federal strategic plan to prevent and end homelessness. The LSA data includes:

- Demographic characteristics like age, race, gender and veteran status;
- Length of time homeless and patterns of system use;
- Information specific to populations whose needs and/or eligibility for services may differ from the broader homeless population, such as veterans, people and households experiencing chronic homelessness and others; and
- Housing Outcomes for those who exit the homeless services system.

DISCUSSION: The LSA was due to HUD on December 14, 2018. Communities all across the country were struggling to submit the report because of data quality and programming challenges. The VC HMIS lead agency worked with the HMIS vendor and CoC lead to make adjustments, correct missing or inaccurate data and resolve warnings within the system. The VC CoC submitted the LSA report to HUD on November 28, 2018 with zero warnings. HUD extended the deadline to December 14th because of challenges across the country and WellSky (HMIS vendor) made updates to the system. Staff are now waiting to hear from the HUD assigned Technical Assistance provider on feedback to our LSA submission.