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**Meeting Agenda  
Continuum of Care (CoC) Board  
Wednesday, April 13, 2022  
3:30pm-5pm**

Zoom Meeting ID: 895 1247 6256  
<https://us02web.zoom.us/j/89512476256>

1. Call to Order
2. Board Comments
3. CoC Staff Comments
4. Public Comments: Public Comment is an opportunity for the public to participate in public meetings by addressing the Ventura County Continuum of Care Board in connection with one or more agenda or non-agenda items. This meeting is subject to the Brown Act and public comments may be submitted by using one of the following options:

**Email in advance of the meeting:** If you wish to make public comment on an agenda item via email, please submit your comment via email by 4:30pm on the day prior to the Board meeting. Send emails to: [venturacoc@ventura.org](mailto:venturacoc@ventura.org) Please indicate the agenda item you would like to speak on if relevant and whether you would like your message read by staff or you will be participating and would like to provide your comments during the live meeting.

**During the meeting:** Participants may use the chat function in zoom to indicate they would like to make a comment. Staff will call on participants during the public comment section of the meeting or during specific item following staff presentation of the item.

Continuum of Care Governance Board Business

5. Approval of Board Minutes from February 9, 2022.
6. Receive and file the submittal of FY21 (October 1, 2020 - September 30, 2021) System Performance Measures Report as submitted to the U.S. Department of Housing & Urban Development.
7. Review and approve the adoption and implementation of the Ventura County Continuum of Care Vulnerability Assessment Tool.
8. Receive a copy of the Ventura County 2022 Homeless Count Executive Summary; Provide input on the 2022 recommendations and authorize staff to submit the final Point-in-Time Count and Housing Inventory County Reports to the U.S. Department of Housing and Urban Development No Later than April 29, 2022.
9. Receive a notice of an unscheduled Board member vacancy for Michael Powers and receive a nomination for Interim County Executive Officer Dr. Sevet Johnson to fill this board seat.
10. Receive and file the Ventura County Continuum of Care Staff and Committee Reports



### **Meeting Minutes**

Continuum of Care (CoC) Board  
Wednesday, February 9, 2022  
3:30pm-5pm

Join Zoom Meeting

<https://us02web.zoom.us/j/81096420542?pwd=VWdENENsYlgwM293WWI1K21mdThpUT09>

Meeting ID: **810 9642 0542**

Passcode: **098649**

**IN ACCORDANCE WITH GOVERNMENT CODE SECTION 54953(e)(1)(A) AND IN RESPONSE TO THE DECLARED STATE AND LOCAL EMERGENCIES DUE TO THE NOVEL CORONAVIRUS AND LOCAL HEALTH OFFICER RECOMMENDATION REGARDING SOCIAL DISTANCING, THE VENTURA COUNTY CONTINUUM OF CARE IS HOLDING ALL BOARD, ALLIANCE AND COMMITTEE MEETINGS ELECTRONICALLY WHICH ARE ACCESSIBLE ONLINE VIA ZOOM WITH LINKS POSTED ON [www.venturacoc.org](http://www.venturacoc.org) TO FIND OUT HOW TO PROVIDE PUBLIC COMMENT, SEE INFORMATION CONTAINED BELOW ON THIS AGENDA.**

1. **Call to Order** - Dawn Dyer, CoC Board Chair, called the meeting to order at **3:23 pm**

**Board Members:** Dawn Dyer, Susan Englund, Manuel Minjares, Carolyn Briggs, Pam Marshall, Michael Powers, Kevin Clerici, Nancy Wharfield, Emilio Ramirez, Mara Malch, Michael Nigh, Supervisor Carmen Ramirez, Drew Powers

**New Board Member:** Ingrid Hardy

**Staff:** Felipe Flores, Alicia Morales-McKinney, Jennifer Harkey, Tara Carruth, Christy Madden

**Public Attendees:** Elizabeth Stone, Christopher Debbas, Michal Dunn, Mackenzie Hanrahan, Susan White Wood

2. **Board Comments:**

Dawn Dyer, Drew Powers, Emilio Ramirez, Supervisor Ramirez, Manuel Minjares, Michael Nigh and Michael Powers provided well wishes on Tara's departure, including gratitude for her outstanding work.

3. **CoC Staff Comments:**

Jenn Harkey, CoC Staff, expressed words of gratitude and acknowledged Tara's numerous accomplishments as well.

4. **Public Comments:**

There were none.

#### Continuum of Care Governance Board Business

5. **Approval of Board Minutes from January 13, 2022.**

Manuel Minjares moved to approve. Carolyn Briggs was second; All in favor.

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### **6. Receive a notice of an unscheduled Board member vacancy for Drew Powers and receive a nomination for Assistant City Manager Ingrid Hardy to fill this board seat.**

Tara explained that Drew Powers was stepping down from the CoC Board due to an increased workload however, he recommended that Ingrid Hardy, City of Thousand Oaks Staff, fill his seat. Drew expressed gratitude to the CoC Board for his term of service and for helping accomplish a great deal of work, including a Project HomeKey proposal containing 77 units in East County. He then introduced Ingrid and nominated her as his CoC Board replacement. Dawn concluded Ingrid's introduction and spoke about her work and accomplishments with the City of Thousand Oaks. Supervisor Ramirez also acknowledged Ingrid's work and welcomed her addition to the CoC Board. Supervisor Ramirez moved to approve the nomination, Michael Nigh was second; All in favor.

### **7. Review the U.S. Department of Housing and Urban Development Regulations Regarding the Continuum of Care Board Membership and Provide Input on Expansion or Diversification of Membership.**

Tara informed that there was a need for greater diversification within the CoC Board. She further informed that a request to add a member representing the City of San Buenaventura was made and for this, she consulted the Governance Charter for guidance on expansion. She shared that, while the Charter indicated that the Board could have a maximum number of 13, the Charter can also be modified to accommodate growth. Tara then indicated that the HUD Regulation (included in the Board packet) disclosed that representation from specific sectors was not required, but it did mention that Persons with Lived Experience/Expertise should serve on the Board who could then be able to give recommendations on a variety of items such government, service providers, hospitals and law enforcement, as examples. She then proceeded to give a breakdown of current Board member representations and showed that for some areas, there is no designated representation for hospitals, law enforcement and public safety and the County Executive could encompass that as a County Representative. Tara then asked the Board for thoughts and suggestions on new member representation, diversification and possible expansion as some Board members term off towards the end of the year.

Dawn shared that the current Board was successful and had an advantage because about half of the members were also government representatives. She further shared that Pam Marshall, CoC Board member with lived experience, will be terming off the Board at the end of the current term. As a result, there will be a need to find a replacement with Lived Experience/Expertise. The floor was open for discussion and the Board was asked for input.

Carolyn Briggs, as a Community Advocate Board member, confirmed she will be terming off the Board. As her replacement as a Community Advocate, she recommended that a service provider be offered a seat on the Board, including representation from law enforcement. Carolyn also asked which community had asked for Board representation and Tara confirmed that it was the City of San Buenaventura. In this regard, Supervisor Ramirez asked what the options for inclusion were, and if a sitting Board member needed to be exited to make room. Tara explained that there were a couple of viable options. One was via expansion and the other was to fill open seats with key stakeholders.

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Tara further shared that a final decision on how to fill or grow the CoC Board was not needed at this meeting and input from the full CoC Alliance was needed to make modifications to the Governance Charter. Supervisor Ramirez affirmed the need to have the City of San Buenaventura join. She also felt that it was important to have the City of Oxnard fill a seat in an official capacity, not just having Emilio Ramirez as City of Oxnard Housing Director representing the City. Michael Nigh shared that he didn't want the Board to grow too much in order to keep it manageable and felt that 13 (members) was a good number. Susan England asked who else was terming off the Board and also agreed with Michael's input on Board size. Dawn took a simple vote to determine Board size and there was no majority to keep the size at 13. Manuel Minjares spoke in favor of increasing the size, perhaps even expanding to 15. In reply to Susan's question, Tara indicated that there were 3 members in their final term and 5 that will have one term remaining, which may result to turnover in the coming years. Dawn asked what the categories of service were for the terming members and Tara replied it was non-governmental, which were Susan Englund, Pam Marshall and Carolyn Briggs. Dawn asked that if CoC Staff could begin prep work ahead of the CoC Alliance Spring meetings, should the Board be interested in expansion up to 15 members and Tara confirmed. Tara further noted that some members may be "conflicted" since they are receiving government funding and that a balance must be found between these board members and those who have experience delivering services.

Dawn noted that Michael Dunn submitted an application to the Alliance as a person with 7 years of Lived Experience in the City of Ventura.

Through the chat, Elizabeth R. Stone asked about the term "conflicted". Tara explained that the term meant having a Conflict of Interest with funding recommendations if they are grant fund recipients.

### **8. Receive a Presentation on Project Roomkey Re-Housing Strategy**

Tara made a presentation on Rehousing Strategies for Project RoomKey, noting the following highlights:

- 785 total persons were served through PRK from March 2020 – end of January
- 66% of those served are Non-Hispanic/Latino
- Under PRK, services provided include: monthly motel voucher, food delivery through VCAAA, case management support, onsite visits by HSA and Addiction Medicine, Covid-19 testing, Housing Navigation Services and links to other community support
- CDSS funding available from April – September 2022
- Current housing pipeline for PRK clients show consistent entries/placement into Permanent Housing through 2024

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**9. Receive and File a Report on Progress to End Homelessness Among Veterans in Ventura County.**

Jenn Harkey, CoC Staff acknowledged and gave thanks to the Veteran’s Administration (VA), Supportive Services for Veterans Families (SSVF) and Gold Coast Veteran’s Foundation (GCVF), for the headway made in housing Veterans. Jenn shared that the number of sheltered vs. unsheltered veterans has had a significant increase in links to programs, services and housing, compared to 3 or 4 years ago. A large number of veterans have been linked to Veteran’s Administration Supportive Housing (VASH) vouchers thanks to strong partnerships with VA Staff and with local Housing Authorities. Monthly case conference meetings are held with partners who are serving veterans, and these are helpful when connecting to services, developing housing strategies or placing veterans into housing. Jenn also shared that the coordination and collaboration between the veteran service providers has made a big difference. She further indicated that in 2021, despite the COVID-19 response 26 veterans were able to become housed through various resources. This was also thanks in part to creative solutions such as private rentals and shared housing. There are many more housing needs, but more importantly, space is needed to be able to use VASH vouchers, especially 1-bedroom units at Fair Market Rent. In conclusion, Jenn gave special thanks to United Way’s Landlord Engagement Program (LLE) for their support. Supervisor Ramirez asked if it were possible to generally calculate how many homeless Veterans there were in the County. Jenn explained that the number of unaccounted has decreased significantly but those tracked through or working in various programs across the County is 58. Dawn also acknowledged and appreciated United Way’s LLE program.

**Closing comments**

Dawn shared that a land transfer of 9.6 acres from the City of San Buenaventura to the Community of Friends and U. S. Vets, will be breaking ground next week for the development of 122 affordable housing units.

Dawn adjourned the meeting at **4:40 pm.**



April 13, 2022

CoC Governance Board

**SUBJECT:** Receive and file the submittal of FY21 (October 1, 2020-September 30, 2021) System Performance Measures Report as Submitted to the U.S. Department of Housing & Urban Development.

**BACKGROUND:** The System Performance Measures report is required to be submitted by all Continuums of Care to HUD each year. This report includes all projects which collect data in the Homeless Management Information System (HMIS). Continuum of Care (CoC) and Emergency Solutions Grant (ESG) funded programs, as well as other programs that receive State or local funding are included in the overall system performance evaluation.

**DISCUSSION:** The System Performance metrics include the following measures:

1. **Length of time homeless** (for those in emergency shelter, transitional housing, and permanent housing programs prior to housing move-in date);
2. **Returns to homelessness** (the extent to which persons who were housed by programs return to homelessness within 2 years);
3. **The total number of homeless persons** (Point in Time Count compared to annual counts of persons utilizing shelter and transitional housing programs);
4. **Employment and Income Growth** for homeless persons in CoC funded programs;
5. **Number of persons who become homeless for the first time;**
6. **Housing Placements** from Street Outreach and other programs;
7. **HMIS Data Quality**

System Performance is a key portion of the annual CoC competition. The Ventura County CoC has gained more participation across the service system with the onboarding of new programs and providers; however, the system has struggled to improve the overall system performance in the areas of the length of time homeless and the returns to homelessness. The evaluation of the system performance will need to be an area of focus for the VC CoC Data and Evaluation Committee, to determine areas for improvement and assist in the funding recommendations for new grant opportunities. The HMIS team has been assisting with data quality review and providing technical assistance to our service providers. This support has improved the overall system performance by ensuring accurate data.

The attached report is the full report submitted to HUD on March 2022.

# FY2021 - Performance Measurement Module (Sys PM)

## Summary Report for CA-611 - Oxnard, San Buenaventura/Ventura County CoC

### Measure 1: Length of Time Persons Remain Homeless

This measures the number of clients active in the report date range across ES, SH (Metric 1.1) and then ES, SH and TH (Metric 1.2) along with their average and median length of time homeless. This includes time homeless during the report date range as well as prior to the report start date, going back no further than October, 1, 2012.

**Metric 1.1: Change in the average and median length of time persons are homeless in ES and SH projects.**

**Metric 1.2: Change in the average and median length of time persons are homeless in ES, SH, and TH projects.**

a. This measure is of the client's entry, exit, and bed night dates strictly as entered in the HMIS system.

	Universe (Persons)		Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Revised FY 2020	FY 2021	Submitted FY 2020	Revised FY 2020	FY 2021	Difference	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
1.1 Persons in ES and SH	887	995	126	118	167	49	68	72	147	75
1.2 Persons in ES, SH, and TH	999	1045	147	136	225	89	90	78	169	91

b. This measure is based on data element 3.17.

This measure includes data from each client's Living Situation (Data Standards element 3.917) response as well as time spent in permanent housing projects between Project Start and Housing Move-In. This information is added to the client's entry date, effectively extending the client's entry date backward in time. This "adjusted entry date" is then used in the calculations just as if it were the client's actual entry date.

# FY2021 - Performance Measurement Module (Sys PM)

	Universe (Persons)		Average LOT Homeless (bed nights)				Median LOT Homeless (bed nights)			
	Revised FY 2020	FY 2021	Submitted FY 2020	Revised FY 2020	FY 2021	Difference	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
1.1 Persons in ES, SH, and PH (prior to "housing move in")	901	1267	710	710	1485	775	392	390	809	419
1.2 Persons in ES, SH, TH, and PH (prior to "housing move in")	1020	1579	721	711	1488	777	409	401	730	329



## FY2021 - Performance Measurement Module (Sys PM)

### Measure 2: The Extent to which Persons who Exit Homelessness to Permanent Housing Destinations Return to Homelessness

This measures clients who exited SO, ES, TH, SH or PH to a permanent housing destination in the date range two years prior to the report date range. Of those clients, the measure reports on how many of them returned to homelessness as indicated in the HMIS for up to two years after their initial exit.

	Total # of Persons who Exited to a Permanent Housing Destination (2 Years Prior)		Returns to Homelessness in Less than 6 Months			Returns to Homelessness from 6 to 12 Months			Returns to Homelessness from 13 to 24 Months			Number of Returns in 2 Years	
	Revised FY 2020	FY 2021	Revised FY 2020	FY 2021	% of Returns	Revised FY 2020	FY 2021	% of Returns	Revised FY 2020	FY 2021	% of Returns	FY 2021	% of Returns
Exit was from SO	14	26	0	1	4%	1	2	8%	0	0	0%	3	12%
Exit was from ES	68	100	2	11	11%	1	7	7%	5	3	3%	21	21%
Exit was from TH	55	70	0	4	6%	1	0	0%	2	0	0%	4	6%
Exit was from SH	35	17	3	4	24%	0	0	0%	0	0	0%	4	24%
Exit was from PH	491	704	5	18	3%	8	15	2%	10	21	3%	54	8%
TOTAL Returns to Homelessness	663	917	10	38	4%	11	24	3%	17	24	3%	86	9%

### Measure 3: Number of Homeless Persons

#### Metric 3.1 – Change in PIT Counts

## FY2021 - Performance Measurement Module (Sys PM)

This measures the change in PIT counts of sheltered and unsheltered homeless person as reported on the PIT (not from HMIS).

	January 2020 PIT Count	January 2021 PIT Count	Difference
Universe: Total PIT Count of sheltered and unsheltered persons	1787		
Emergency Shelter Total	330	735	405
Safe Haven Total	14	10	-4
Transitional Housing Total	178	204	26
Total Sheltered Count	522	949	427
Unsheltered Count	1265		

### Metric 3.2 – Change in Annual Counts

This measures the change in annual counts of sheltered homeless persons in HMIS.

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Unduplicated Total sheltered homeless persons	790	1018	1066	48
Emergency Shelter Total	621	898	991	93
Safe Haven Total	61	61	36	-25
Transitional Housing Total	127	127	61	-66

## FY2021 - Performance Measurement Module (Sys PM)

### Measure 4: Employment and Income Growth for Homeless Persons in CoC Program-funded Projects

Metric 4.1 – Change in earned income for adult system stayers during the reporting period

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Number of adults (system stayers)	142	120	136	16
Number of adults with increased earned income	6	6	11	5
Percentage of adults who increased earned income	4%	5%	8%	3%

Metric 4.2 – Change in non-employment cash income for adult system stayers during the reporting period

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Number of adults (system stayers)	142	120	136	16
Number of adults with increased non-employment cash income	43	43	37	-6
Percentage of adults who increased non-employment cash income	30%	36%	27%	-9%

Metric 4.3 – Change in total income for adult system stayers during the reporting period

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Number of adults (system stayers)	142	120	136	16
Number of adults with increased total income	46	46	41	-5
Percentage of adults who increased total income	32%	38%	30%	-8%

## FY2021 - Performance Measurement Module (Sys PM)

### Metric 4.4 – Change in earned income for adult system leavers

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Number of adults who exited (system leavers)	102	102	51	-51
Number of adults who exited with increased earned income	5	7	6	-1
Percentage of adults who increased earned income	5%	7%	12%	5%

### Metric 4.5 – Change in non-employment cash income for adult system leavers

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Number of adults who exited (system leavers)	102	102	51	-51
Number of adults who exited with increased non-employment cash income	16	16	13	-3
Percentage of adults who increased non-employment cash income	16%	16%	25%	9%

### Metric 4.6 – Change in total income for adult system leavers

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Number of adults who exited (system leavers)	102	102	51	-51
Number of adults who exited with increased total income	20	20	16	-4
Percentage of adults who increased total income	20%	20%	31%	11%

## FY2021 - Performance Measurement Module (Sys PM)

### Measure 5: Number of persons who become homeless for the 1st time

Metric 5.1 – Change in the number of persons entering ES, SH, and TH projects with no prior enrollments in HMIS

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Person with entries into ES, SH or TH during the reporting period.	779	919	872	-47
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	193	209	286	77
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time)	586	710	586	-124

Metric 5.2 – Change in the number of persons entering ES, SH, TH, and PH projects with no prior enrollments in HMIS

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Person with entries into ES, SH, TH or PH during the reporting period.	1437	1587	1256	-331
Of persons above, count those who were in ES, SH, TH or any PH within 24 months prior to their entry during the reporting year.	322	347	394	47
Of persons above, count those who did not have entries in ES, SH, TH or PH in the previous 24 months. (i.e. Number of persons experiencing homelessness for the first time.)	1115	1240	862	-378

## FY2021 - Performance Measurement Module (Sys PM)

### Measure 6: Homeless Prevention and Housing Placement of Persons defined by category 3 of HUD's Homeless Definition in CoC Program-funded Projects

This Measure is not applicable to CoCs in FY2021 (Oct 1, 2020 - Sept 30, 2021) reporting period.

### Measure 7: Successful Placement from Street Outreach and Successful Placement in or Retention of Permanent Housing

Metric 7a.1 – Change in exits to permanent housing destinations

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Persons who exit Street Outreach	72	89	180	91
Of persons above, those who exited to temporary & some institutional destinations	12	17	65	48
Of the persons above, those who exited to permanent housing destinations	25	28	61	33
% Successful exits	51%	51%	70%	19%

Metric 7b.1 – Change in exits to permanent housing destinations

## FY2021 - Performance Measurement Module (Sys PM)

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Persons in ES, SH, TH and PH-RRH who exited, plus persons in other PH projects who exited without moving into housing	1092	1224	824	-400
Of the persons above, those who exited to permanent housing destinations	690	767	458	-309
% Successful exits	63%	63%	56%	-7%

### Metric 7b.2 – Change in exit to or retention of permanent housing

	Submitted FY 2020	Revised FY 2020	FY 2021	Difference
Universe: Persons in all PH projects except PH-RRH	299	324	308	-16
Of persons above, those who remained in applicable PH projects and those who exited to permanent housing destinations	290	316	296	-20
% Successful exits/retention	97%	98%	96%	-2%

# FY2021 - SysPM Data Quality

## CA-611 - Oxnard, San Buenaventura/Ventura County CoC

	All ES, SH				All TH				All PSH, OPH				All RRH				All Street Outreach			
	2017-2018	2018-2019	2019-2020	2020-2021	2017-2018	2018-2019	2019-2020	2020-2021	2017-2018	2018-2019	2019-2020	2020-2021	2017-2018	2018-2019	2019-2020	2020-2021	2017-2018	2018-2019	2019-2020	2020-2021
1. Number of non-DV Beds on HIC	103	144	159	322	175	113	99	114	522	547	629	693	399	617	644	683				
2. Number of HMIS Beds	47	82	79	182	131	111	99	109	318	365	466	530	399	617	644	683				
3. HMIS Participation Rate from HIC ( % )	45.63	56.94	49.69	56.52	74.86	98.23	100.00	95.61	60.92	66.73	74.09	76.48	100.00	100.00	100.00	100.00				
4. Unduplicated Persons Served (HMIS)		207	530	763		167	195	161		272	322	264		876	1342	1050		128	429	429
5. Total Leavers (HMIS)		163	351	457		93	79	74		30	22	17		450	450	618		46	113	183
6. Destination of Don't Know, Refused, or Missing (HMIS)		8	15	15		3	5	1		1	0	2		19	22	30		2	2	17
7. Destination Error Rate (%)		4.91	4.27	3.28		3.23	6.33	1.35		3.33	0.00	11.76		4.22	4.89	4.85		4.35	1.77	9.29



## **FY2021 - SysPM Data Quality**

April 13, 2022

CoC Governance Board

**SUBJECT:** Review and Approve the Adoption and Implementation of the Ventura County Continuum of Care Vulnerability Assessment Tool

**BACKGROUND:** With the development and implementation of Coordinated Entry Systems (CES) as mandated by the U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) program, many communities complied with the requirement to adopt a vulnerability prioritization tool by utilizing the Vulnerability Index-Service Prioritization Decision Assistance Tool or VI-SPDAT. This tool developed by OrgCode, a Canada-based consulting firm was selected by the Ventura County CoC and over 75% of other CoCs because of its availability within many Homeless Management Information Systems (HMIS) as an assessment tool. In late 2020, OrgCode announced that they were phasing out of use of this tool related to concerns that the tool 1) does not help assess for vulnerabilities related to domestic violence and safety, 2) poses challenges with assessment questions and self-reported data, 3) leaves room to perpetuate and maintain racial disparities in the homeless service system and 4) leaves room for bias with both the interviewer/provider and the client.

**DISCUSSION:** The current assessment tool, Vulnerability Index Service Prioritization Decision Assistance Tool (VI-SPDAT) for singles, family and transitional aged youth has been the tool utilized by the community, however, has shortcomings when addressing various groups. The groups include the aged population, those who do not require immediate emergency services and those who do not partake in substance use. Identifying that the VI-SPDAT does not fully address the full continuum of client needs requires that providers to conduct additional multi-disciplinary team meetings to address a client's current vulnerable state.

The VCHMIS/CoC team assembled a Vulnerability Tool Workgroup as CoC's were notified of this change. The workgroup consisted of 24 VCHMIS/CES Providers with various service type expertise and backgrounds. Agencies and departments included the Ventura County Continuum of Care, Human Services Agency (Homeless Services, RAIN TH), Help of Ojai, Interface Children and Family Services (211 and Runaway Homeless Youth), Turning Point Foundation, Mercy House, Lutheran Social Services, Ventura County Behavioral Health (RISE, ASSIST and various clinic staff), National Health Foundation, Whole Person Care, Salvation Army, Ventura County Area Agency on Aging, Homeless Management Information System, and various other stakeholders via the Alliance. The workgroup began April 13th and met bi-monthly addressing various topics and reviewing numerous documents to help launch the direction of tool development. Workgroup members reviewed survey results from HMIS service providers related to the VI-SPDAT, reviewed seven vulnerability assessment tools from other Continuums of Care

across the nation, ranked and prioritized each tool including domains and question sets. Attached is a document further outlaying the tasks and process workgroup members took when evaluating assessments, determining domains to utilize, question development and scoring methodologies.

In February 2022, workgroup participants completed the final stages of tabletop testing and adjusted during each testing phase to address discrepancies and concerns brought forth by individuals experiencing homelessness, assessors, and committee members. The VCHMIS/CES team worked with providers and reviewed samplings of data to compare currently prioritized clients, looking at their current VI-SPDAT score and completing a new Vulnerability tool with them, making recommended changes to ensure diversity, equity and inclusion with the new tool. The VCHMIS/CES Steering committee reviewed the tool and policy changes on February 16, 2022, and have endorsed the use of the community grown tool referred to as the Vulnerability Assessment Tool (VAT).

Policy Changes	
Current	New
Complete VI-SPDAT in HMIS under CES	Upload VAT into HMIS in the Coordinated Entry System Project for global visibility
Case note date of VI-SPDAT and score	Case note date of VAT and score
n/a	Submit VAT with Homeless Documentation for case conferencing
Complete MDT revision form if VI-SPDAT is not accurately depicting <u>post</u> case conference	Complete MDT if VAT is not accurately <u>prior to</u> case conference and complete all previous steps noted above

**RECOMMENDATIONS:**

1. Approve the community developed tool, whereas named the Ventura County Continuum of Care Vulnerability Assessment Tool (VAT)

Transition Plan
1. Provided required training on the new Vulnerability Assessment Tool: March 15 <sup>th</sup> , 17 <sup>th</sup> , 22 <sup>nd</sup> and 24 <sup>th</sup> for all service providers

2. Require providers to update currently prioritized client's vulnerability score using the new Vulnerability Assessment Tool: Firm dates-March 23rd to April 10<sup>th</sup>, 2022

a. VAT submissions were emailed to [hsa-hmis-caseconference-documentation@ventura.org](mailto:hsa-hmis-caseconference-documentation@ventura.org)

3. Removed the VI-SPDAT from HMIS beginning March 23rd, 2022, so there is no confusion about which tool to use.

- CES providers recognize that during this transition period, case presentations may require discussions to include previous VI-SPDAT score and the updated
- Old VI scores would remain valid for 6 months then fully fall off the prioritization list
- The new VAT score would be the primary prioritization score, the VI-SPDAT would remain as a talking point



VENTURA COUNTY  
**CONTINUUM OF  
CARE ALLIANCE**

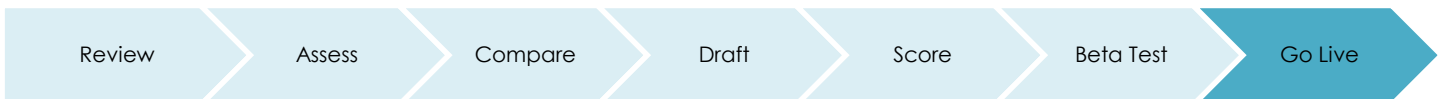
ENDING HOMELESSNESS  
IN VENTURA COUNTY

## Coordinated Entry System- Pathways to Home



### Vulnerability Tool Reassessment Workgroup Update

In April 2021, the HMIS/CES team and CoC service providers embarked on a mission to address the recent announcement and retirement of the vulnerability tool (VI-SPDAT). The VI-SPDAT helped systems of care across the country further evolve from managing homelessness with a "housing readiness" service orientation to a movement to prevent and end homelessness. Time for innovation and evolution is primed and our CoC providers are hoping for an even more community, equity and evidence-driven tool to help us address inequities within Coordinated Entry. The VI-SPDAT is currently used in our community to prioritize individuals and families with securing housing based on their vulnerability and service level needs. With the retirement announcement, your homeless service community has begun next steps in addressing the current vulnerability assessment tool and began making service level agreements in creating a home-grown Ventura County Vulnerability tool to help with prioritization. Please see the timeline below for updates on the workgroups progress.



Completed by	Task
✓ CES Coordinator/ VCCoC Providers	Service providers across the VCCoC completed a survey requesting feedback related to the VI-SPDAT.
✓ CES Coordinator/ VCCoC Providers	Providers reviewed various assessment tools across the country gaining a greater understanding of what other communities are using. Providers completed a score card for all assessment tools providing in depth feedback and scoring of each vulnerability tool, examples of models reviewed included Massachusetts CES Priority Model, Houston Model, Austin, TX Model, Arizona Measurements Tool Model, etc.
✓ CES Coordinator/ VCCoC Providers	Diversity Equity and Inclusionary discussions occurred during various workgroup meetings to prepare providers for question development.
✓ CES Coordinator/ VCCoC Providers	Priority Tool Development: providers worked together to address 5-10 high hitting domains they would like addressed in the vulnerability tool. E.g. Physical health, mental health, risk, socialization, etc. Providers noted their FIVE NON- Negotiable questions they wanted to see in a community developed tool.
✓ CES Coordinator/ VCCoC Providers	Providers branched off into small workgroups to begin question development for each subpopulation (singles, families and transitional aged youth). The small work group committees included outside representatives such as the youth collaborative.

✓	CES Coordinator	<p>CES invited Shelter Operators to deploy the <u>Vulnerabilities Amongst Those with Lived Experiences of Homelessness Survey</u> in each shelter/ transitional. The goal of the survey was to seek out individuals and families/households who have experienced homelessness; to understand how any specific vulnerabilities may have impacted them.</p> <ul style="list-style-type: none"> <li>• Mercy House: Oxnard Emergency Shelter, The Arch Ventura Emergency Shelter, and The Non-Congregate Shelter</li> <li>• Salvation Army: Men's/ Women's Emergency Shelter and Grant Per Diem Veterans Shelter</li> <li>• Spirit of Santa Paula Emergency Shelter</li> <li>• Turning Point: Safe Haven Shelter, River Haven and Veterans Transitional Housing</li> <li>• Humans Services Agency RAIN Transitional Housing</li> <li>• Human Services Agency Homeless Services: Family Emergency Shelter</li> <li>• Kingdom Center: Emergency Shelter and Transitional Housing</li> </ul>
✓	CES Coordinator/ VCCoC Providers	Draft Tool development submitted (150 questions- non deduplicated). The workgroup addressed each question, combined questions, reworded questions using the Turner Rule (5 <sup>th</sup> grade language), omitted questions that did not address vulnerabilities and agreed upon the final set of questions.
✓	CES Coordinator/ VCCoC Providers	Deduplication process: providers reviewed the draft tool and deduplicated. Draft consists of 48 questions. Another deduplication process occurred using the same techniques applied in the prior step. Some questions were added to address domains that were not fully equipped with ranking vulnerability.
✓	CES Coordinator/ VCCoC Providers	<p>Providers worked on scoring and ranking each question set. Each question was thoroughly reviewed and given response options such as yes or no or using Likert scale models. Each mini workgroup addressed the responses and made agreements on how to score each question using various modalities. Each domain had agreed upon subtotals and overall score for the tool. The great workgroup convened, and members agreed upon overall scoring for each question, addressing each line by line. Members also agreed upon what is deemed low, medium, and high vulnerability for prioritization, considering current prioritized clients and their current scoring to help balance.</p> <p>Note: Scoring adjustments may occur during beta testing</p>
✓	CES Coordinator	Diversity, Equity and Inclusion lens re-review. CES Coordinator will submit the draft version to Human Services Agency DEI Advocates for final feedback and review and Business Technology Team Manager for scoring review



Completed by		Updated Timeline
✓	CES Coordinator/ VCCoC Providers	November 1- November 30, 2021 : Beta Testing (Table Top Testing) -Compare currently prioritized clients, looking at their current VI score and completing a new Vulnerability tool with them.
✓	CES Coordinator/ VCCoC Providers	December 1-February 22 <sup>nd</sup> , 2022: Make revisions as needed to accommodate Beta Testing Numerous revisions occurred to address questions and how they were asked, scoring and overall scoring recommendations. Committee members agreed to the following: 0-5 Not recommended for housing support 6-14 Recommended for Rapid Re-Housing and Transitional Housing and Permanent Housing 15+ Recommended for Permanent Supportive Housing
✓	CES Coordinator/ VCCoC Providers	March 25 <sup>th</sup> - April 10 <sup>th</sup> , 2022: Convert current VI scores to new Vulnerability tool for ALL active prioritized clients.
✓	CES Coordinator/ VCCoC Providers	March 25 <sup>th</sup> , 2022: Go Live Date with new Vulnerability Assessment Tool and retired the VI-SPDAT in HMIS.



# Vulnerability Assessment Tool Scoring Guide

Domain	Questions	Response	Points
A. Physical Health	Do you or anyone in your household have a chronic physical health condition?	Yes	1
		No	0
	Do you or anyone in your household have a physical disability that limits your mobility and need an assistive device? (using a cane, walker, motorized wheelchair)	Yes	1
		No	0
	Are you or anyone in your household currently pregnant or breast feeding?	Yes	1
		No	0
	In the last 12 months, has your doctor ever discussed the need for surgery or transplant for you or anyone in your household?	Yes	2
		No	0
	Has your doctor ever prescribed medical equipment that you or anyone in your household cannot use because you're homeless, such as motorized wheelchair, oxygen tank or other breathing machine or medicine that needs to be refrigerated?	Yes	2
		No	0
	Do you or anyone in your household have a medical condition that requires a special diet (excluding food intolerances)?	Yes	1
		No	0
	How many times have you or anyone in your household sought or received emergency services in the last 12 months due to a chronic physical health issue (eg: lung disease, asthma, organ transplant, serious heart condition, bone marrow immunodeficiencies, lung disease, severe obesity, diabetes, HIV/AIDS, liver disease, kidney disease, cancer, etc.)	0 Times	0
		1-3 Times	1
		4-9 Times	2
		10+ Times	3
		Not Applicable	0
	0 Times	0	



	How many times have you or someone in your household been admitted to the hospital in the last 12 months due to a health medical emergency (eg: hip fall/break, attacked, hypothermia, infection, etc)?	1-3 Times	1
		4-9 Times	2
		10+ Times	3
		Not Applicable	0
	Do you have any medical conditions that put you or anyone in your household at high risk of infection, such as immune system issues, open wounds, colostomy bag, TB, etc?	Yes	1
		No	0
		<b>Sub Total</b>	
<b>B. Mental Health</b>	Have you or anyone in your household used a crisis service or spoke to a staff person for a mental health crisis, distress call, suicide prevention, etc. in the past 12 months?	Yes	1
		No	0
	How many times has the crisis team met with you or anyone in your household in the past 12 months? (If no selected on question above please select Not Applicable)	0 Times	0
		1-3 Times	1
		4-9 Times	2
		10+ Times	3
		Not Applicable	0
	Have you or anyone in your household been recommended or do you feel you are in need of mental health services?	Yes	1
		No	0
	If yes, are you/they utilizing mental health services?	Yes	0
		No	1
	How many times have you or anyone in your household sought emergency services or been to the hospital (inpatient or outpatient) for your mental health in the last 12 months?	0 Times	0
		1-3 Times	1
		4-9 Times	2
		10+ Times	3
Not Applicable		0	
		Yes	1

	Have you threatened to or tried to harm yourself or anyone else in the last 12 months?	No	0
C. Substance Use	Has alcohol or drug use contributed to your homelessness or your ability to gain housing?	Yes	1
		No	0
	If yes, how often do you use?	More than once a week	3
		Once a week	2
		Once a month	1
		Not Applicable	0
	In the past 12 months...have you or anyone in your household overdosed by using alcohol or drugs (whether intentionally or accidentally)? If yes, how many times?	0 Times	0
		1-3 Times	1
		4-9 Times	2
		10+ Times	3
	If yes, was emergency medical treatment, narkan, or some other medical intervention required to revive you?	Yes	1
		No	0
Not Applicable		0	
	<b>Subtotal</b>		
D. Risk and Safety	Have you or anyone in your family experienced any of the following in the past 12 months (domestic violence, assault, traded sex for things such as food, shelter or money, been forced to do work you were not paid for, victim of a crime, someone using your money or food stamp card without your permission, being forced to do things that make you feel uncomfortable or unsafe)?	Yes	1
		No	0
		Not Applicable	0
	What is your Age Range?	18-24	1
		25-30	0
		31-40	0
		41-49	0
		50-59	1
		60-69	1
		70-79	1
		80+	1
	Have you or anyone in your household been prescribed medication for mental health, substance use or medical conditions? If yes, how often do you/they take the prescribed	Take as prescribed	0
		Take occasionally	1
		Do not take	1

	medication?	Not applicable	0
	Where do you sleep most frequently?	Shelter/Safe Haven/Motel paid for by Organization	0
		Transitional Housing or other institutional setting	0
		Outdoors/ Vehicle	1
	If in a shelter or transitional housing, do you have an upcoming exit date within the next 30-60 days?	Yes	1
		No	0
	<b>Subtotal</b>		
<b>E. Socialization and Daily Functioning</b>	Do you or anyone in your household have challenges with completing activities of daily living such as bathing, toileting, walking, etc?	Yes	1
		No	0
	If yes, do you have a reliable support person that can help you <b>DAILY</b> with these activities?	Yes	1
		No	0
		Not Applicable	0
	Do you or anyone in your household have difficulty reading or writing?	Yes	1
		No	0
	Is there someone you can count on for emotional support if you're feeling down and need to talk?	I have someone	0
I do not have someone		1	
<b>Subtotal</b>			
<b>F. Family</b>	In a household w/ children, are there any issues with alcohol or drugs?	Yes	1
		No	0
	If yes, are there minor children with these issues?	Yes	1
		No	0
	Is there MORE than one member of your household that has a chronic physical health condition?	Yes	1
		No	0
	Is there MORE than one member of your household that has a chronic mental health condition?	Yes	1
		No	0
How often does your housing situation impact your child(ren) school attendance?	More than once a week	3	
	Once a week	2	

		Once a month	1
		Not applicable	0
	Do you have an open Children and Family Services (CFS) Case?	Yes	1
		No	0
Total			

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# Ventura County CoC Provider Combined Vulnerability Tool

Client Name: \_\_\_\_\_ Age: \_\_\_\_\_

Client HMIS #: \_\_\_\_\_ Date Completed: \_\_\_\_\_

Agency Name: \_\_\_\_\_

Case Manager Name: \_\_\_\_\_

## Physical Health Domain

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- 1 Do you or anyone in your household have a chronic physical health condition?
- 2 Do you or anyone in your household have a physical disability that limits your mobility and need an assistive device? (using a cane, walker, motorized wheelchair)
- 3 Are you or anyone in your household currently pregnant or breast feeding?
- 4 In the last 12 months, has your doctor ever discussed the need for surgery or transplant for you or anyone in your household?
- 5 Has your doctor ever prescribed medical equipment that you or anyone in your household cannot use because you're homeless, such as motorized wheelchair, oxygen tank or other breathing machine or medicine that needs to be refrigerated?
- 6 Do you or anyone in your household have a medical condition that requires a special diet (excluding food intolerances)?
- 7 How many times have you or anyone in your household sought or received emergency services in the last 12 months due to a chronic physical health issue (eg: lung disease, asthma, organ transplant, serious heart condition, bone marrow immunodeficiencies, lung disease, severe obesity, diabetes, HIV/AIDS, liver disease, kidney disease, cancer, etc.)
- 8 How many times have you or someone in your household been admitted to the hospital in the last 12 months due to a health medical emergency (eg: hip fall/break, attacked, hypothermia, infection, etc)?
- 9 Do you have any medical conditions that put you or anyone in your household at high risk of infection, such as immune system issues, open wounds, colostomy bag, TB, etc?

## Mental Health Domain

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- 10 Have you or anyone in your household used a crisis service or spoke to a staff person for a mental health crisis, distress call, suicide prevention, etc. in the past 12 months?
- 11 How many times has the crisis team met with you or anyone in your household in the past 12 months ?

# Ventura County CoC Provider Combined Vulnerability Tool

12 Have you or anyone in your household been recommended or do you feel you are in need of mental health services?

12a If yes, are you/they utilizing mental health services? *(if no selected on question 12 please select Not Applicable)*

13 How many times have you or anyone in your household sought emergency services or been to the hospital (inpatient or outpatient) for your mental health in the last 12 months?

14 Have you threatened to or tried to harm yourself or anyone else in the last 12 months?

## Substance Use Domain

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15 Has alcohol or drug use contributed to your homelessness or your ability to gain housing?

15a If yes, how often do you use? *(if no selected on question 15 please select Not Applicable)*

16 In the past 12 months...have you or anyone in your household overdosed by using alcohol or drugs (whether intentionally or accidentally)? If yes, how many times?

16a If yes, was emergency medical treatment, narcan, or some other medical intervention required to revive you? *(if no selected on question 16 please select Not Applicable)*

## Risk & Safety Domain

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17 Have you or anyone in your family experienced any of the following in the past 12 months (domestic violence, assault, traded sex for things such as food, shelter or money, been forced to do work you were not paid for, victim of a crime, someone using your money or food stamp card without your permission, being forced to do things that make you feel uncomfortable or unsafe?

18 What is your Age Range?

19 Have you or anyone in your household been prescribed medication for mental health, substance use or medical conditions? If yes, how often do you/they take the prescribed medication?

20 Where do you sleep most frequently?

## Socialization & Daily Functioning Domain

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21 Do you or anyone in your household have challenges with completing activities of daily living such as bathing, toileting, walking, etc?

21a If yes, do you have a reliable support person that can help you **DAILY** with these activities? *(if no selected for question 21 please select Not Applicable)*

22 Do you or anyone in your household have difficulty reading or writing?

# Ventura County CoC Provider Combined Vulnerability Tool

23 Is there someone you can count on for emotional support if you're feeling down and need to talk?

## ONLY FOR Families with children 18 years old and under

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24 In a household w/ children, are there any issues with alcohol or drugs?

24a If yes, are there minor children with these issues? *(If no selected for question 24 please select Not Applicable)*

25 Is there **MORE** than one member of your household that has a chronic physical health condition?

26 Is there MORE than one member of your household that has a chronic mental health condition?

27 How often does your housing situation impact your child(ren) school attendance?

28 Do you have an open Children and Family Services (CFS) Case?

Physical Health Domain Score	
Mental Health Domain Score	
Substance Use Domain Score	
Risk & Safety Domain Score	
Socialization & Daily Functioning Domain Score	
Family Domain Score SCORE	
<b>TOTAL VULNERABILITY SCORE</b>	

# Multi-Disciplinary Team Meeting Vulnerability Score Revision Worksheet

**Directions:** To fill out this form have the individual or Head of Households original Vulnerability score in front of you. You must be designated as the lead in your agency to complete this revision worksheet through a Multi-Disciplinary Team Meeting (minimum 3 providers). For each category where the score is not reflective of the client’s vulnerability, indicate the original response as self-reported and the revised response in the adjacent column. Provide clear, specific rationale for the adjustment. Please note what type of records are available to validate the new score should follow up be needed per HUD regulation. Please use the Vulnerability Tool Score Guide to tally the total at the bottom of each column. Program manager/director must review and sign prior to submission. You may complete this prior to case conferencing to support clients Severity of Service Needs.

**Email with encryption to:** [hsa-hmis-caseconference-documentation@ventura.org](mailto:hsa-hmis-caseconference-documentation@ventura.org), upon completion along with all other CES documents.

<b>Client Name:</b>		<b>HMIS ID:</b>		<b>Person Completing the Form:</b>	
<b>Agency:</b>		<b>Date of Completion:</b>		<b>Program Manager / Supervisor Name:</b>	
		<b>Case Manager Signature:</b>		<b>Program Manager / Supervisor Signature:</b>	
<b>Domain</b>	<b>Questions</b>	<b>Original Score</b>	<b>Revised Score</b>	<b>Rationale (Please explain your reason and indicate what kind of records or documentation are available to validate your rationale). You may type your answers on a separate worksheet if you need more room.</b>	
<b>A. Physical Health</b>	Do you or anyone in your household have a chronic physical health condition?				
	Do you or anyone in your household have a physical disability that limits your mobility and need an assistive device? (using a cane, walker, motorized wheelchair)				



	Are you or anyone in your household currently pregnant or breast feeding?			
	In the last 12 months, has your doctor ever discussed the need for surgery or transplant for you or anyone in your household?			
	Has your doctor ever prescribed medical equipment that you or anyone in your household cannot use because you're homeless, such as motorized wheelchair, oxygen tank or other breathing machine or medicine that needs to be refrigerated?			
	Do you or anyone in your household have a medical condition that requires a special diet (excluding food intolerances)?			
	How many times have you or anyone in your household sought or received emergency services in the last 12 months due to a chronic physical health issue (eg: lung disease, asthma, organ transplant, serious heart condition, bone marrow immunodeficiencies, lung disease, severe obesity, diabetes, HIV/AIDS, liver disease, kidney disease, cancer, etc.)			
	How many times have you or someone in your household been admitted to the hospital in the last 12 months due to a health medical emergency (eg: hip fall/break, attacked, hypothermia, infection, etc)?			

	Do you have any medical conditions that put you or anyone in your household at high risk of infection, such as immune system issues, open wounds, colostomy bag, TB, etc?			
<b>B. Mental Health</b>	Have you or anyone in your household used a crisis service or spoke to a staff person for a mental health crisis, distress call, suicide prevention, etc. in the past 12 months?			
	How many times has the crisis team met with you or anyone in your household in the past 12 months?			
	Have you or anyone in your household been recommended or do you feel you are in need of mental health services?			
	If yes, are you/they utilizing mental health services?			
	How many times have you or anyone in your household sought emergency services or been to the hospital (inpatient or outpatient) for your mental health in the last 12 months?			
	Have you threatened to or tried to harm yourself or anyone else in the last 12 months?			
<b>C. Substance Use</b>	Has alcohol or drug use contributed to your homelessness or your ability to gain housing?			
	If yes, how often do you use?			
	In the past 12 months...have you or anyone in your household overdosed by using alcohol or drugs (whether intentionally or accidentally)? If yes, how many times?			

	If yes, was emergency medical treatment, narcan, or some other medical intervention required to revive you?			
<b>D. Risk and Safety</b>	Have you or anyone in your family experienced any of the following in the past 12 months (domestic violence, assault, traded sex for things such as food, shelter, or money, been forced to do work you were not paid for, victim of a crime, someone using your money or food stamp card without your permission, being forced to do things that make you feel uncomfortable or unsafe?			
	What is your Age Range?			
	Have you or anyone in your household been prescribed medication for mental health, substance use or medical conditions? If yes, how often do you/they take the prescribed medication?			
	Where do you sleep most frequently?			
	If in a shelter or transitional housing, do you have an upcoming exit date within the next 30-60 days?			
<b>E. Socialization and Daily Functioning</b>	Do you or anyone in your household have challenges with completing activities of daily living such as bathing, toileting, walking, etc?			
	If yes, do you have a reliable support person that can help you <b>DAILY</b> with these activities?			
	Do you or anyone in your household have difficulty reading or writing?			

	Is there someone you can count on for emotional support if you're feeling down and need to talk?			
<b>F. Family</b>	In a household w/ children, are there any issues with alcohol or drugs?			
	If yes, are there minor children with these issues?			
	Is there MORE than one member of your household that has a chronic physical health condition?			
	Is there MORE than one member of your household that has a chronic mental health condition?			
	How often does your housing situation impact your child(ren) school attendance?			
	Do you have an open Children and Family Services (CFS) Case?			
		<b>Total</b>	<b>Total</b>	Please use the Score guide to help with scoring the updated results

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# Ventura County Continuum of Care Vulnerability Assessment Tool

Ventura County Homeless Management Information Systems (VCHMIS)

And Ventura County Continuum of Care (VCCoC)

2/16/2022

# Agenda

Learning Objectives for Providers

System Overview and point of Vulnerability Assessment Tool implementation

Vulnerability Assessment Tool Overview and Recommendations

Vulnerability Assessment Tool Revision Worksheet

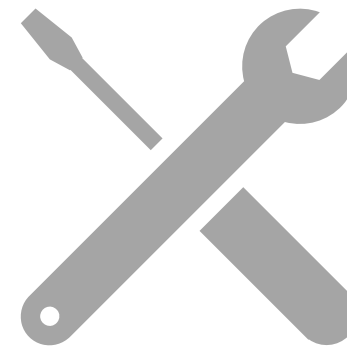
Policy Changes

Transition Plan

# Learning Objectives

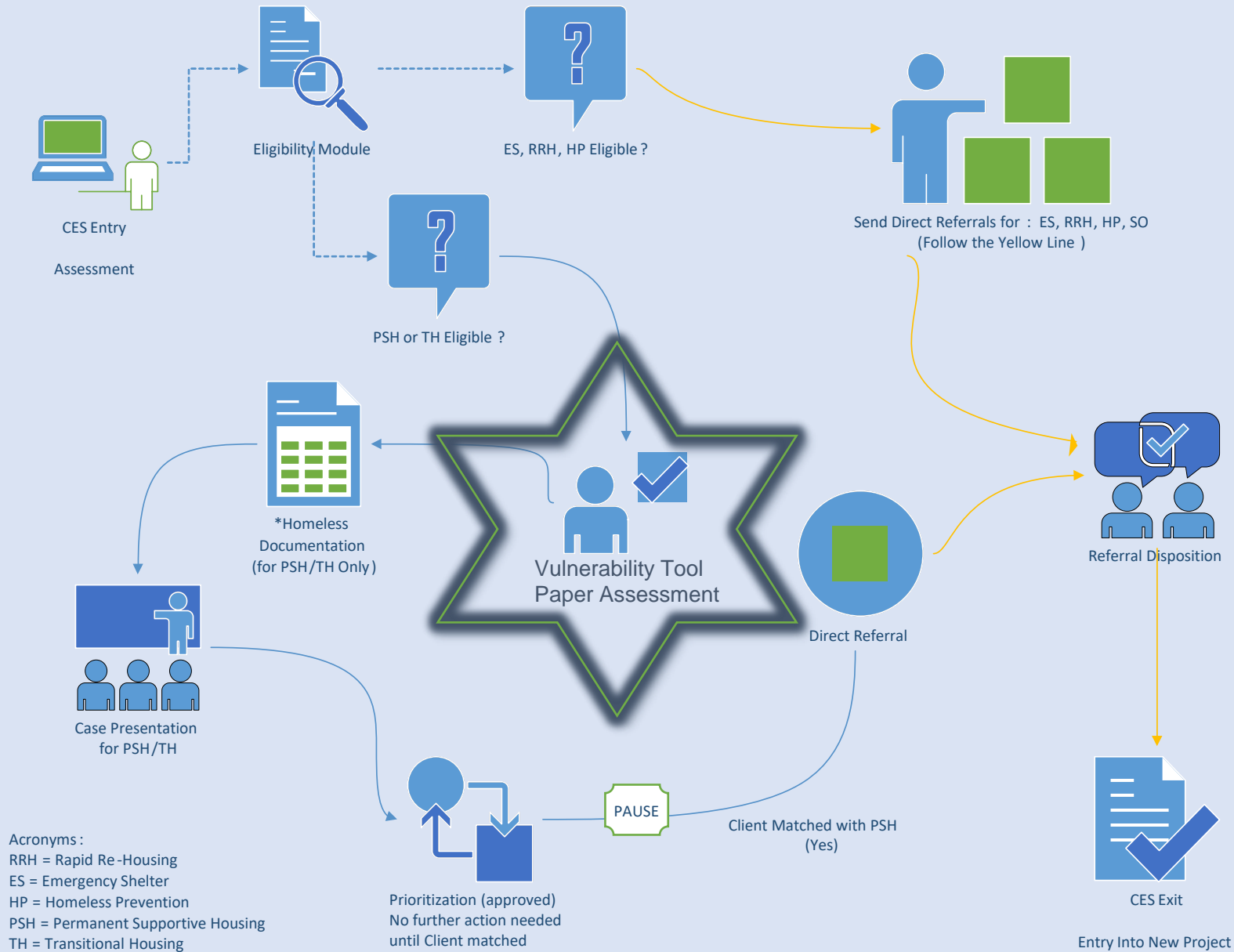


Learn how to complete Vulnerability Assessment Tool



Learn the CES process once Vulnerability Tool is completed and where to input data

# CES System Overview



Acronyms :  
 RRH = Rapid Re-Housing  
 ES = Emergency Shelter  
 HP = Homeless Prevention  
 PSH = Permanent Supportive Housing  
 TH = Transitional Housing

\*Homeless Documentation: Homeless Packet, COVID assessment, Vulnerability Assessment Tool, ROI



# Vulnerability Assessment Tool Review and Recommendations

## Scoring

- 0-5 Not recommended for a housing support
- 6-14 Recommended for Rapid Re-housing and Permanent Supportive Housing
- 15+ Recommended for Permanent Supportive Housing

# Vulnerability Assessment Tool Revision Worksheet

- The Vulnerability Assessment Tool captures the clients' responses which is 100% self reported. To balance social worker observations, providers may complete a revision worksheet by conducting a Multi-disciplinary team meeting (3 or more providers) to discuss the client responses/score and provide social worker observations/input with a new score to reflect the clients' current state.

# Policy Changes

*General updates:  
Removed VI-SPDAT  
language and replaced  
with Vulnerability  
Assessment Tool*

Current	New
Complete VI-SPDAT in HMIS under CES	Upload VAT into HMIS in the Coordinated Entry System Project for global visibility
Case note date of VI-SPDAT and score	Case note date of VAT and score
n/a	Submit VAT with Homeless Documentation for case conferencing
Complete MDT revision form if VI-SPDAT is not accurately depicting <u>post</u> case conference	Complete MDT if VAT is not accurately <u>prior to</u> case conference and complete all previous steps noted above

# Transition Plan

Provided required training on the Vulnerability Assessment Tool: March 15th-24th to all service providers

Required providers to update currently prioritized client's vulnerability score using the new VAT: March 25th to April 10th, 2022

Removed the VI-SPDAT from HMIS beginning March 25th, 2022, so there is no confusion about which tool to use.

- CES providers recognize that during this transition period, case presentations may require discussions to include previous VI-SPDAT score and the updated
- Old VI scores would remain valid for 6 months then fully fall off the prioritization list
- The new VAT score would be the primary prioritization score, the VI-SPDAT would remain as a talking point

Q & A

April 13, 2022

CoC Governance Board

**SUBJECT:** Receive a copy of the Ventura County 2022 Homeless Count Executive Summary; Provide input on 2022 recommendations and authorize staff to submit the final Point in Time Count and Housing Inventory Count reports to the U.S. Department of Housing and Urban Development no later than April 29, 2022.

**Background:** The Ventura County Continuum of Care staff and community volunteers conduct the Point-in-Time Count and Subpopulation Survey of homeless persons and families throughout the county each year. This survey includes a one-day count of all sheltered persons/families and surveys of unsheltered persons/families which results in a snapshot of one day of homelessness across Ventura County. The annual Housing Inventory Count includes all emergency shelter, transitional housing, rapid re-housing, permanent supportive housing, and other housing dedicated to homeless persons. These reports are submitted to the U.S. Department of Housing and Urban Development as required for HUD Continuum of Care funding. The data collected in these reports helps to inform the CoC Board and our community on the need for resources as well as trends in the populations experiencing homelessness.

**Discussion:** We had approximately 400 community volunteers participate in this year's unsheltered count, as well as city staff, county staff and law enforcement partners. The 2022 Homeless Count was conducted on the night of February 22<sup>nd</sup> and the unsheltered surveying began on the early morning of February 23, 2022. All persons surveyed were asked where they slept on the night of February 22, 2022. Surveys were conducted at various service sites and encampment locations during the week following the night of the count, as allowed by HUD. This was the first year we utilized the County of Ventura's Esri system for the mobile application surveys with geographic information system (GIS) mapping technology. The final written report that was developed in partnership with Dr. Joe Colletti and Urban Initiatives includes subpopulation data and detailed information for each jurisdiction. The report will be released to the public no later than April 29, 2022.

As anticipated, there was a relatively significant increase (360 persons) in the number of sheltered persons experiencing homelessness due primarily to Project Roomkey, a temporary program funded through FEMA to protect highly vulnerable unsheltered persons from COVID-19. There was a more modest increase in unsheltered homelessness – up 91 persons from 2020. More detailed information is available in the attached executive summary.

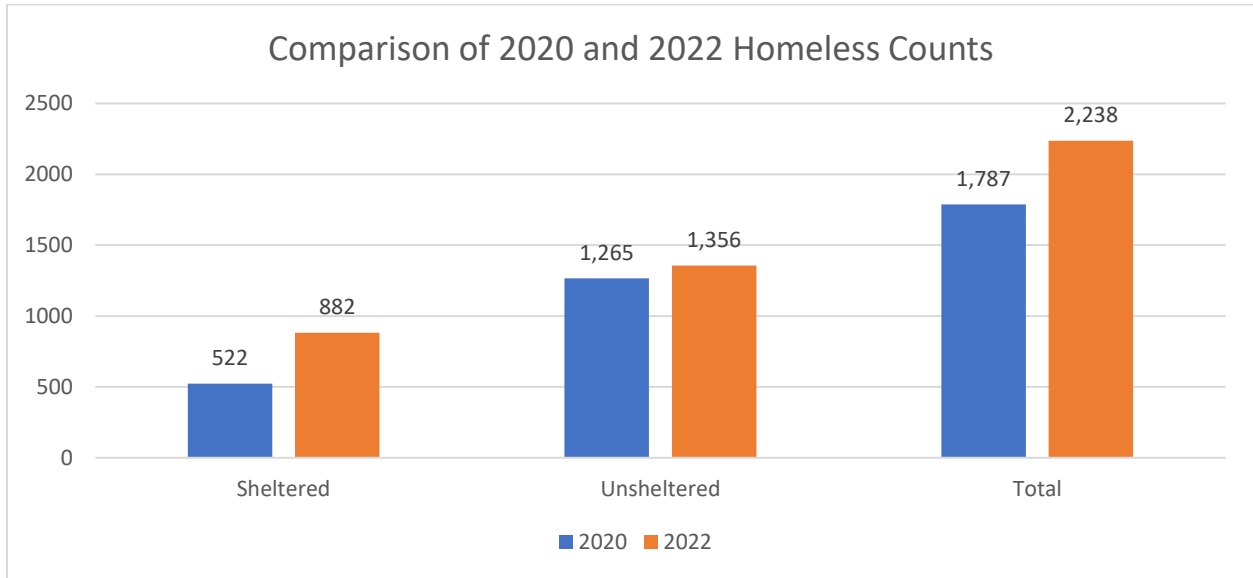
**Recommendations:**

- 1) Receive the Ventura County 2022 Homeless Count Executive Summary and authorize staff to submit the final report to HUD no later than April 29, 2022.
- 2) Provide input on and adopt recommendations to be included in the written 2022 Homeless Count and Subpopulation Survey Final Report. Draft recommendations for consideration are as follows:
  1. Achieve functional zero with homeless veterans in 2022 in collaboration with Veteran Affairs and local veteran service providers;
  2. Further the efforts to end homelessness among unsheltered youth including unaccompanied transitional-age-youth (18-24);
  3. Encourage each jurisdiction to review their updated unsheltered homeless count and review local strategies to reduce unsheltered homelessness;
  4. Reorganize the Housing and Services Committee to focus on homelessness prevention efforts, housing solutions and ways to address gaps in services;
  5. Formalize a Ventura County Continuum of Care Workgroup to include people with lived experience to solicit feedback and provide recommendations.

# Ventura County 2022 Homeless Point-In-Time Count

## Executive Summary

There were 2,238 adults and children who were counted as homeless during the point-in-time count according to the Ventura County 2022 Homeless Count and Survey. As noted in the chart below, this number represents an increase of 451 persons or 25.2% when compared to the number of homeless persons who were counted in 2020\*, which was 1,787.



\*The Ventura County CoC received an exception from HUD not to conduct an unsheltered count in 2021 because of pandemic related reasons.

The total number of persons counted as sheltered and unsheltered increased:

- The total number of persons counted as sheltered increased from 522 in 2020 to 882 in 2022, which represents an increase of 360 persons <sup>1</sup>or 69%.
- The total number of persons counted as unsheltered increased from 1,265 in 2020 to 1,356 in 2022, which represents an increase of 91 persons or 7%.

Regarding sheltered homelessness, the U.S. Department of Housing and Urban Development (HUD) states that

- CoCs must count all individuals or families who meet the criteria in paragraph (1)(ii) of the homeless definition in 24 CFR 578.3. This includes individuals and families ***“living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing, and hotels and motels paid for by charitable organizations or by federal, state, or local government programs for low-income individuals)”*** on the night designated for the count. This includes individuals residing in Safe Haven projects.

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<sup>1</sup> Of the 360 persons, Project Roomkey sheltered 243 adults or 67.5%, as a temporary non-congregate shelter program in response to COVID 19.



Regarding unsheltered homelessness, HUD states that

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

Ventura County first conducted a homeless count and subpopulation survey in 2007 as listed in Table 1. The following table compares the homeless counts since 2007. However, the homeless count and survey has been conducted every year beginning in 2009.

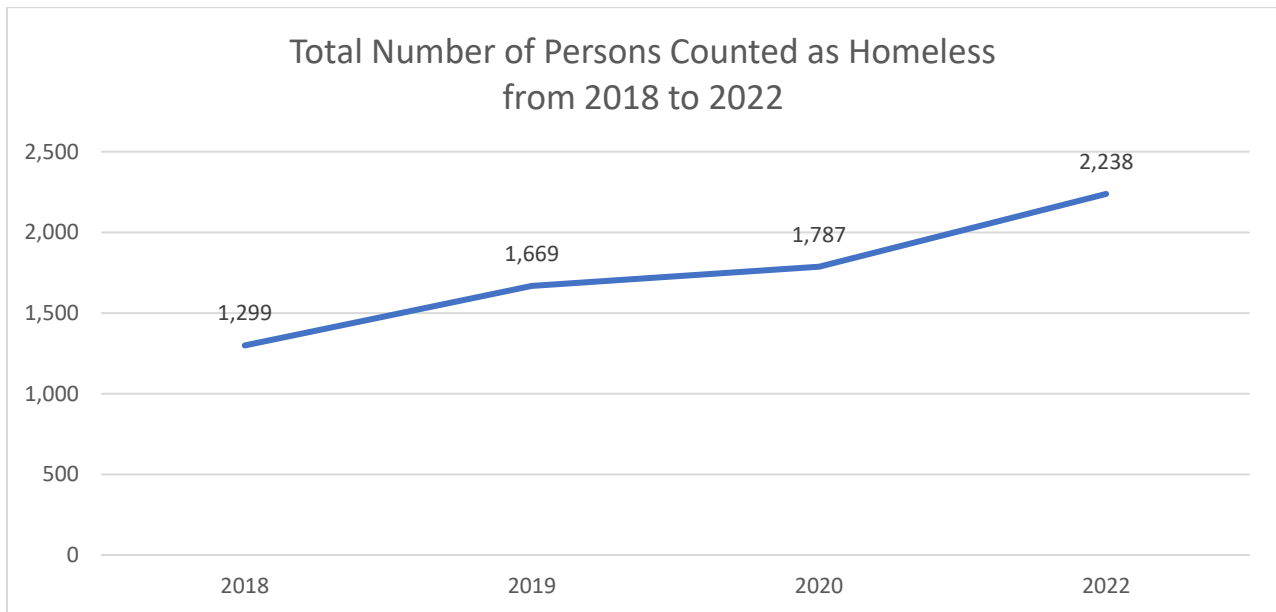
Table 1: Ventura County Homeless Counts from 2007 – 2022.

Year	Total # of Homeless Persons	% of Increase or Decrease from Previous Year
2007	1,961	-
2009	2,193	+12
2010	1,815	-17
2011	1,872	+3
2012	1,936	+3
2013	1,774	-8
2014	1,449	-18
2015	1,417	-2
2016	1,271	-10
2017	1,152	-9
2018	1,299	+12.8
2019	1,669	+28.5
2020	1,787	+7.1
2021	*	*
2022	2,238	+25.2

\*The Ventura County CoC received an exception from HUD not to conduct an unsheltered count because of pandemic related reasons.

The next chart shows that the number of persons counted as homeless has increased significantly between 2018 and 2022.

- The number of persons counted as homeless in 2018 was 1,299 and 2,238 in 2022, which represents an increase of 939 persons or 72%.



The next table provides the number of homeless persons counted since 2007 by cities and unincorporated area. A count was not conducted in 2008.

Table 2. Comparison of the total number of unsheltered and sheltered persons counted since 2007 by cities and unincorporated area

Year	Camarillo	Fillmore	Moorpark	Ojai	Oxnard
2007	10	5	13	82	671
2009	13	4	7	60	679
2010	15	5	1	52	520
2011	29	10	7	40	638
2012	30	16	5	41	522
2013	27	13	9	43	645
2014	38	6	15	62	379*
2015	35	7	7	40	603
2016	24	6	4	29	584
2017	27	0	7	19	461
2018	49	2	3	31	335
2019	33	10	2	47	548
2020	30	10	0	49	567
2021	**	**	**	**	**
2022	49	8	0	38	793

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

\*\*An unsheltered count was not conducted because of pandemic related reasons.

Table 2. (con't)

Year	Port Hueneme	Santa Paula	Simi Valley	Thousand Oaks	Ventura	Unincorporated
2007	9	97	163	81	588	242
2009	1	91	303	147	623	265
2010	9	54	229	106	601	223
2011	6	50	226	87	570	209
2012	12	60	284	90	701	175
2013	17	34	211	121	519	135
2014	13	31	194	130	495	86
2015	22	20	202	83	334	64
2016	7	56	99	104	300	58
2017	18	35	105	102	301	77
2018	19	44	143	80	516	77
2019	30	106	121	103	555	114
2020	19	95	162	152	531	128
2021	**	**	**	**	**	**
2022	30	115	141	210	713	109

\*\*An unsheltered count was not conducted because of pandemic related reasons

Table 3 provides a breakdown of the 2022 homeless count by sheltered and unsheltered persons for each city and unincorporated areas. The City of Oxnard had the largest number of unsheltered persons (463) and the largest number of sheltered persons (330). The City of Ventura had the second largest number of unsheltered (382) and sheltered persons (331).

Table 3. Total Number of Sheltered and Unsheltered Adults and Children by Jurisdiction

Jurisdiction	Sheltered		Unsheltered	Total
	Shelter	Transitional Hg		
Camarillo	3	0	46	49
Fillmore	0	0	8	8
Moorpark	0	0	0	0
Ojai	6	0	32	38
Oxnard	318	12	463	793
Port Hueneme	3	0	27	30
Santa Paula	39	0	76	115
Simi Valley	18	0	123	141
Thousand Oaks	105	0	105	210
Ventura	203	128	382	713
Unincorporated	0	15	94	109
Countywide*	32	-	-	32
<b>Total:</b>	<b>727</b>	<b>155</b>	<b>1,356</b>	<b>2238</b>

\*DV Shelters

Table 4. 2020 - 2022 Comparison of Unsheltered and Sheltered Persons by Jurisdiction

Incorporated and Unincorporated Areas	Total Number of Unsheltered Persons				Total Number of Sheltered Persons				Total Number			
	2020	2022	Difference		2020	2022	Difference		2020	2022	Difference	
	#	#	#	%*	#	#	#	%*	#	#	#	%*
Camarillo	28	46	+18	64.3	2	3	+1	50.0	30	49	+19	63.3
Fillmore	10	8	-2	20.0	0	0	0	0.0	10	8	-2	20.0
Moorpark	0	0	0	0.0	0	0	0	0.0	0	0	0	0.0
Ojai	36	32	-4	11.1	13	6	-7	53.8	49	38	-11	22.4
Oxnard	379	463	+84	22.2	184	330	+146	79.3	563	793	+230	40.9
Port Hueneme	16	27	+11	68.7	3	3	0	0.0	19	30	+11	57.9
Santa Paula	74	76	+2	2.7	21	39	+18	85.7	95	115	+20	21.0
Simi Valley	150	123	-27	18.0	12	18	+6	50.0	162	141	-21	12.9
Thousand Oaks	130	105	-25	19.2	22	105	+83	377.3	152	210	+58	38.2
Ventura	386	382	-4	1.0	48	331	+283	589.6	434	713	+279	64.3
Unincorporated	56	94	+38	67.9	11	15	+4	36.4	67	109	+42	62.7
County-wide**	-	-	-	-	-	32	-	-	-	32	-	-
<b>Total:</b>	<b>1,265</b>	<b>1,356</b>	<b>+91</b>	<b>7.2</b>	<b>316</b>	<b>882</b>	<b>+566</b>	<b>179.1</b>	<b>1,581</b>	<b>2,238</b>	<b>+657</b>	<b>41.6</b>

\*percentages were only provided for differences that were 200% or less.

\*\*includes DV programs.

### Unsheltered Persons

Of the 2,238 persons counted in 2022, 1,356 or 60.6% were unsheltered, which is defined by the U.S. Department of Housing and Urban Development (HUD) as

“An individual or family who lacks a fixed, regular, and adequate nighttime residence, meaning: (i) An individual or family 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.”

Of the 1,356 unsheltered persons, 1,350 were adults and six (6) were accompanied children under age 18.

### Surveyed vs Observation

The goal was to survey, meaning to interview, as many adults who were counted about themselves and any children who were living homeless with them. Survey questions focused on requirements from HUD and local information desired by the Ventura County Continuum of Care (CoC). The number and percentage of adults surveyed is noted in Table 5.

HUD requires CoCs to report the number of various subpopulations that include chronically homeless individuals and families, persons with serious mental illness, substance use disorders, AIDS or an HIV-related illness, and veterans. The CoC desired local information included a focus on foster youth, employment, income, and involvement with the justice system.

Counters surveyed 735 adults that answered questions about themselves and the six (6) children living homeless with them. Thus, survey information was collected for 741 persons. The survey included questions about gender, age, race, ethnicity, and length of time homeless for adults and children. Other questions about disability, health, mental health, substance use, employment/income, and veteran status pertained only to adults.

Persons were observed and not surveyed if volunteer counters felt unsafe or a unsheltered person was sleeping. Volunteer were asked to count the person by recording an estimate of the individual’s gender, age, race, and ethnicity. Of the 615 persons observed, 615 were adults and none were children.

Table 5. Total Number and Percent of Persons Surveyed and Observed

Year	Surveyed		Observed		Total	
	#	%	#	%	#	%
2019	907	72.1	351	27.9	1,258	100
2020	874	69.1	391	30.9	1,265	100
2022	741	54.6	615	45.5	1,356	100

The next table provides a breakdown of the total number and percent of persons surveyed and observed by jurisdiction.

Table 6. Total Number and Percent of Persons Surveyed and Observed by Jurisdiction

Year	Surveyed		Observed		Total	
	#	%	#	%	#	%
Camarillo	11	23.9	35	76.1	46	100
Fillmore	6	75.0	2	25.0	8	100
Moorpark	0	0	0	0	0	0.0
Ojai	23	71.9	9	28.1	32	100
Oxnard	260	56.2	203	43.8	463	100
Port Hueneme	23	85.2	4	14.8	27	100
Santa Paula	51	67.1	25	32.9	76	100
Simi Valley	50	40.7	73	59.3	123	100
Thousand Oaks	45	42.9	60	57.1	105	100
Ventura	216	56.5	166	43.5	382	100
Unincorporated	56	59.6	38	40.4	94	100
<b>Total</b>	<b>741</b>	<b>54.6</b>	<b>615</b>	<b>45.4</b>	<b>1,356</b>	<b>100</b>

The following four tables focus on gender, ethnicity, race, and age for the 1,356 unsheltered adults and children who were surveyed and observed.

## Gender

The following table provides a breakdown by gender for 1,350 adults and six (6) children under age 18 in families. HUD requires the summary to consist of male, female, transgender, and gender non-conforming (i.e. not exclusively male or female).

Table 7. Gender for Adults and Children

	Adults		Children in Families	
	#	%	#	%
Male	973	72.1	5	83.3
Female	367	27.2	1	16.7
Transgender	10	0.7	0	0.0
Gender Non-Conforming	0	0.0	0	0.0
<b>Total:</b>	<b>1,350</b>	<b>100</b>	<b>6</b>	<b>100</b>

## Ethnicity

Table 8 provides a breakdown by ethnicity for the 1,350 adults and six (6) children under age 18 in families. HUD requires the summary to consist of Hispanics or Latinos and non-Hispanics or Latinos.

Table 8. Ethnicity for Adults and Children

	Adults		Children in Families	
	#	%	#	%
Hispanic or Latino	672	49.8	3	50.0
Non-Hispanic or Latino	678	50.2	3	50.0
<b>Total:</b>	<b>1,350</b>	<b>100</b>	<b>6</b>	<b>100</b>

## Race

Table 9 provides a breakdown by race of the 1,350 adults and six (6) children under age 18 in families. It is important to note that instructions from HUD were to include Hispanics or Latinos in the race categories listed below because the designation "Hispanic or Latino" does not denote race.

Table 9. Ethnicity for Adults and Children

	Adults		Children in Families	
	#	%	#	%
American Indian or Alaska Native	16	1.2	0	0

Asian	19	1.4	0	0
Black or African American	90	6.7	1	16.7
Native Hawaiian or Other Pacific Islander	38	2.8	0	0
White	1,048	77.6	5	83.3
Other	139	10.3	0	0
<b>Total:</b>	<b>1,350</b>	<b>100</b>	<b>6</b>	<b>100</b>

Table 10. Breakdown by age of the 1,350 adults and six (6) children under age 18 in families.

<b>Adults:</b>	<b>#</b>	<b>%</b>
Under Age 18	6	0.4
Ages 18 - 24	62	4.6
Age 25 - 34	227	16.7
Age 35 - 44	324	23.9
Age 45 - 54	340	25.1
Age 55 - 61	248	18.3
Age 62+	149	11.0
<b>Total:</b>	<b>1,356</b>	<b>100</b>

#### Other Subpopulations

Table 10. Unsheltered Adults n=1,350

<b>Subpopulations:</b>	<b>2020</b>		<b>2022</b>		<b>Difference</b>	
	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>	<b>#</b>	<b>%</b>
Chronically Homeless Adults	342	27.4	629	46.6	+287	83.9
Families including Chronically Homeless Families	7*	***	6**			
Persons w/Chronic Health Conditions	430	34.5	355	26.3	-75	-17.4
Persons w/a Developmental Disability	124	9.9	121	9.0	-3	-2.4
Persons w/HIV/AIDS	12	0.1	15	1.1	+3	+25.0
Persons w/Mental Health Problems	282	22.6	340	25.2	+58	+20.6
Persons w/a Physical Disability	339	27.2	278	20.6	-61	-18.0
Substance Users	495	39.7	447	33.1	-48	-9.7
Veterans	94	7.5	71****	5.3	-23	-24.5
Experiencing Homelessness Because Fleeing Domestic Violence, Dating Violence, Sexual Assault, or Stalking	95	7.6	130	9.6	+25	+26.3

\*7 families consisted of 11 adults and 16 children. One family with two adults and one child was chronically homeless.

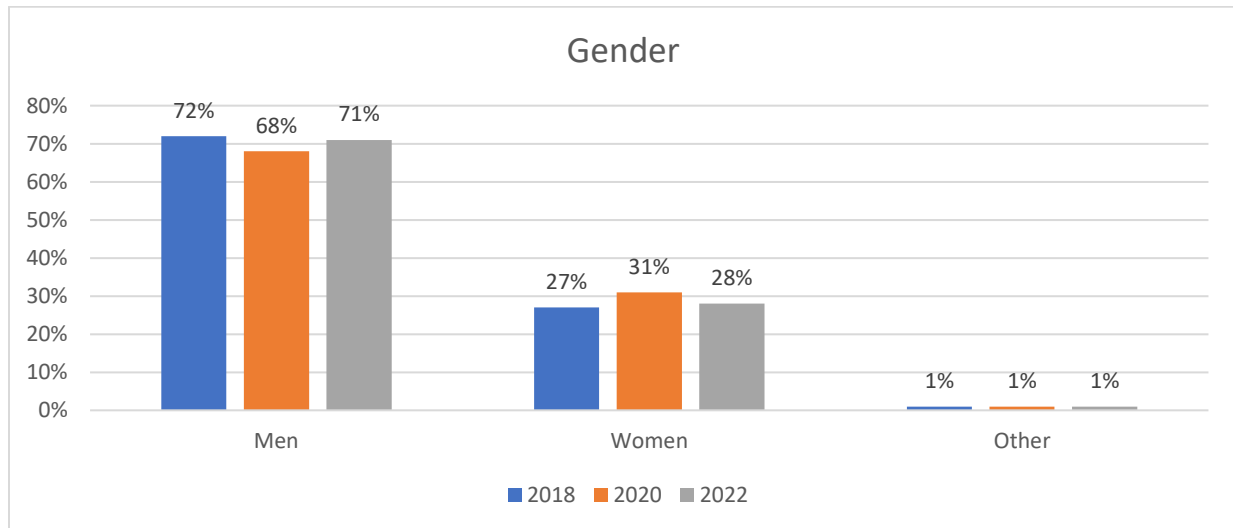
\*\*Of the six families 0 families were chronically homeless.

\*\*\*The total number of adults in the six families was 11 and represents 0.8% of the total adult population of 1,247.

\*\*\*\* 28.8% or 27 veterans were chronically homeless individuals.

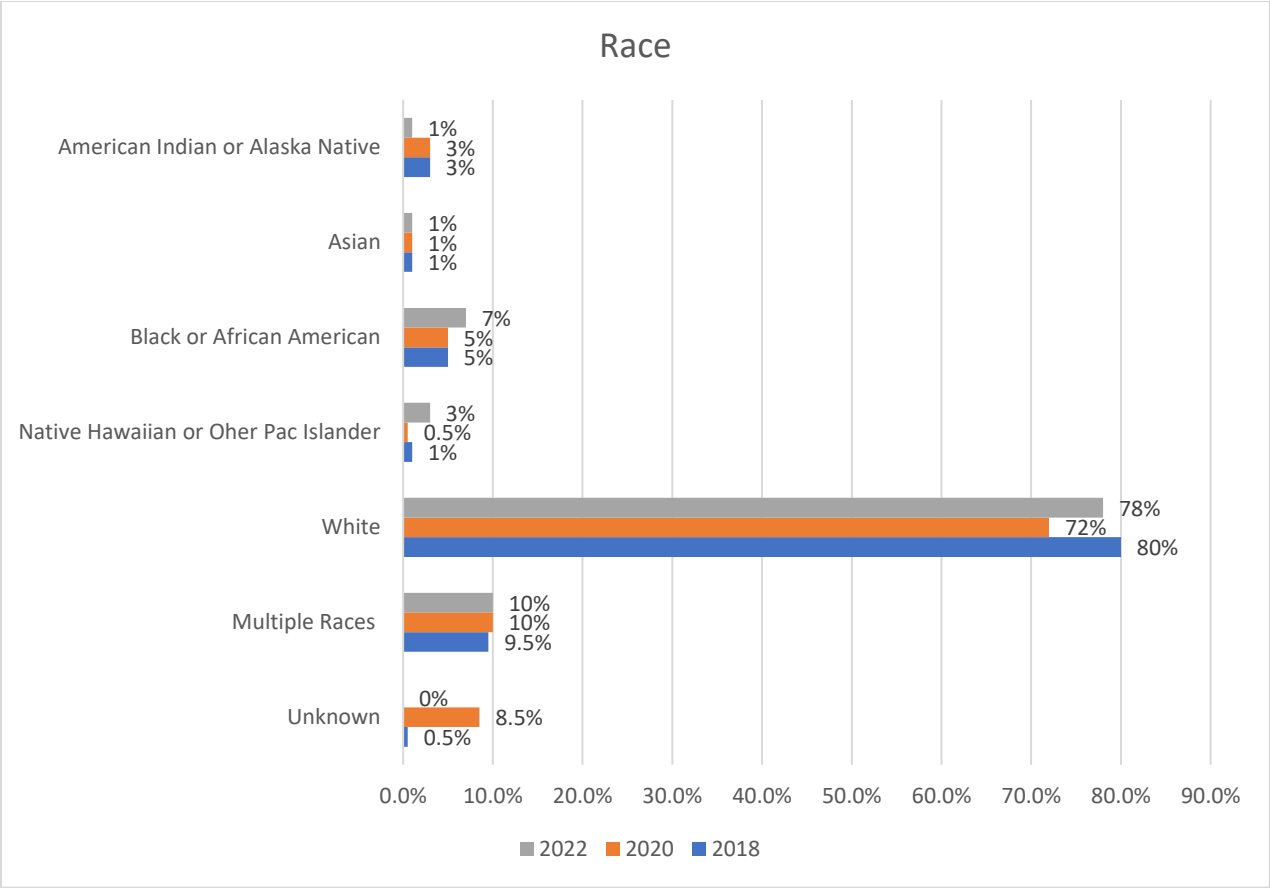
### Subpopulation Trends

- The following chart shows the percentage of women counted as unsheltered has increased slightly since 2018 while the percentage of men has remained virtually constant.

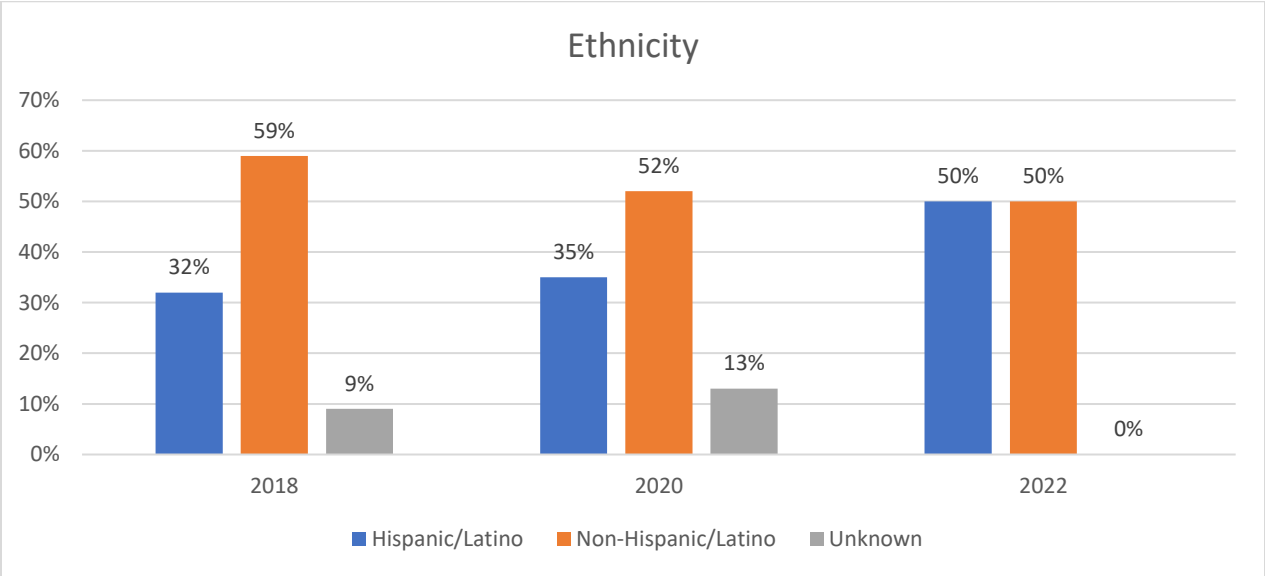


- The next chart does not show any notable subpopulation trends concerning race.



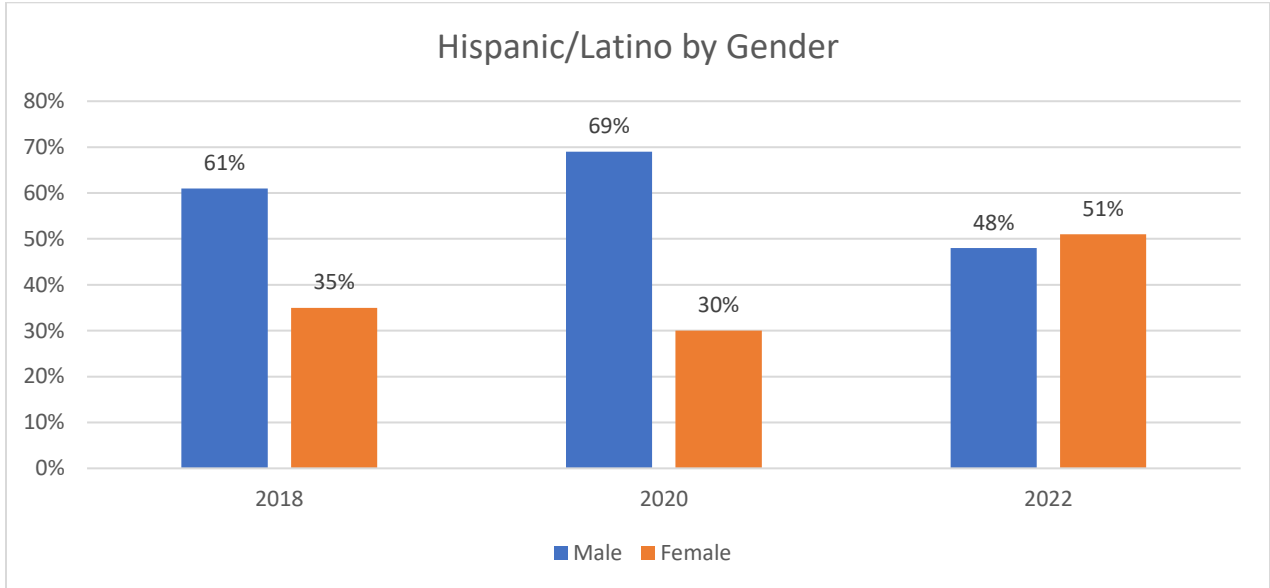


- The following chart shows that the percentage of adults counted as unsheltered who were Hispanic/Latino has increased from 32% in 2018 to 50% in 2022. There were no 'unknown' reported in 2022.

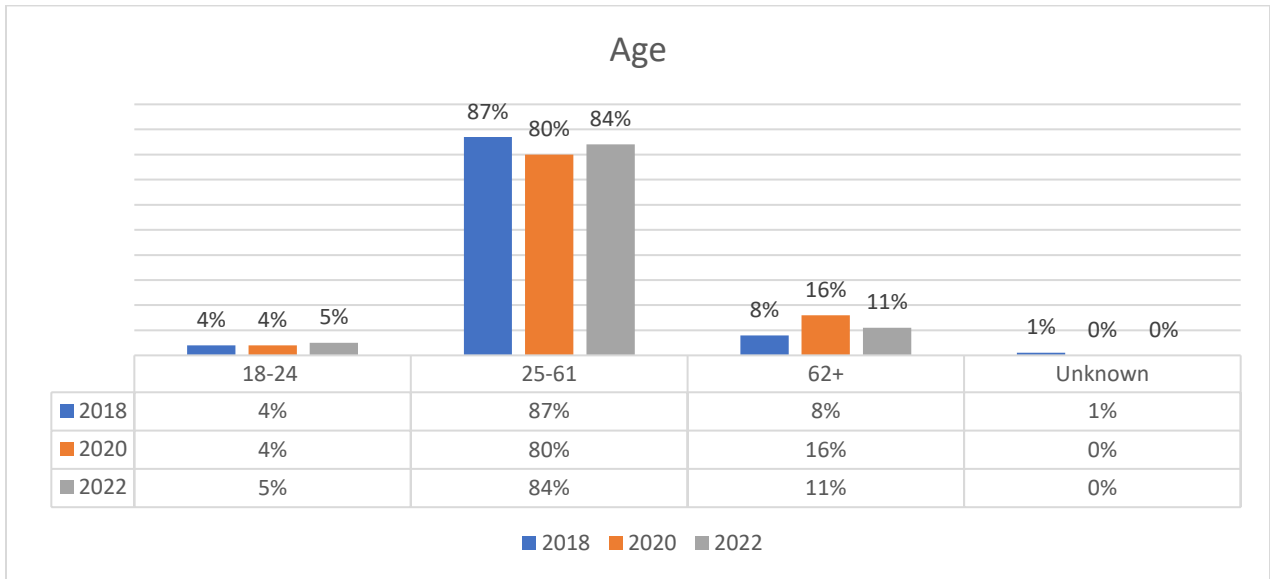


- The next chart shows that the percentage of females among unsheltered Hispanics or Latinos increased significantly between 2018 and 2022. Females made up approximately

one-third of Hispanics or Latinos in 2018 and 2020 but more than half (51%) of Hispanics or Latinos counted as unsheltered in 2022.



- The following chart shows the percentage of persons age 62+ counted as unsheltered has increased slightly since 2018.



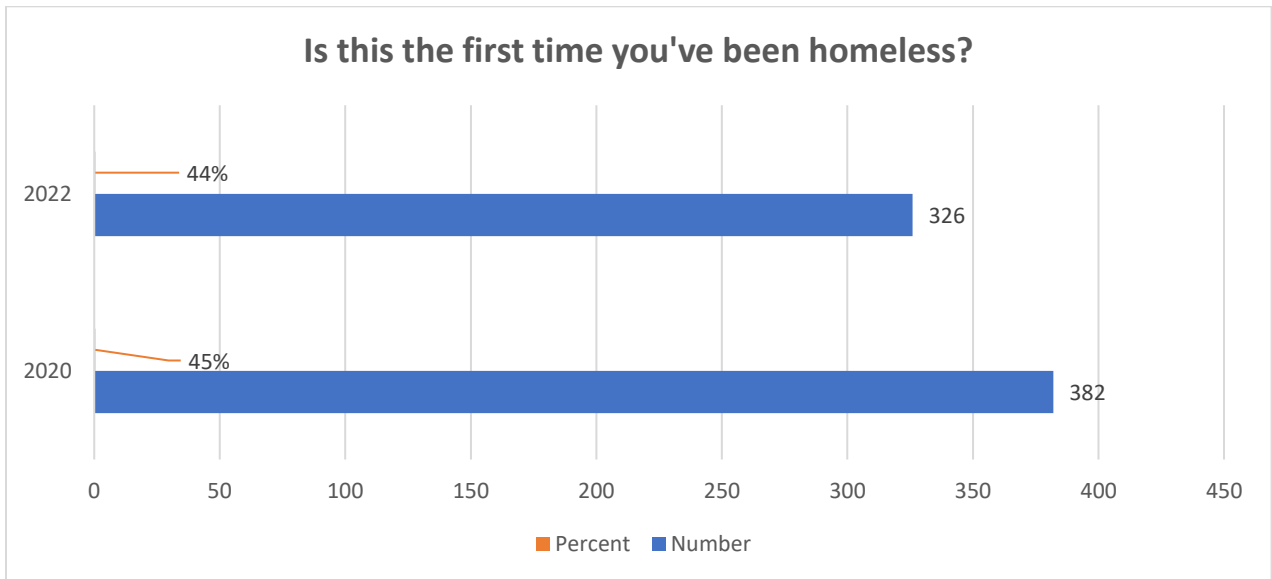
### Other Survey Questions

There were additional questions that were added to the survey that were shaped by local stakeholders. The questions are noted below. Volunteers were able to elicit responses from 735 adults in 2022 compared to 858 adults in 2020.

### Is this the first time you've been homeless?

- 45% or 382 of the 858 adults stated “yes” in 2020 and 44% or 326 of 735 adults in 2022 as noted in chart 1 below.

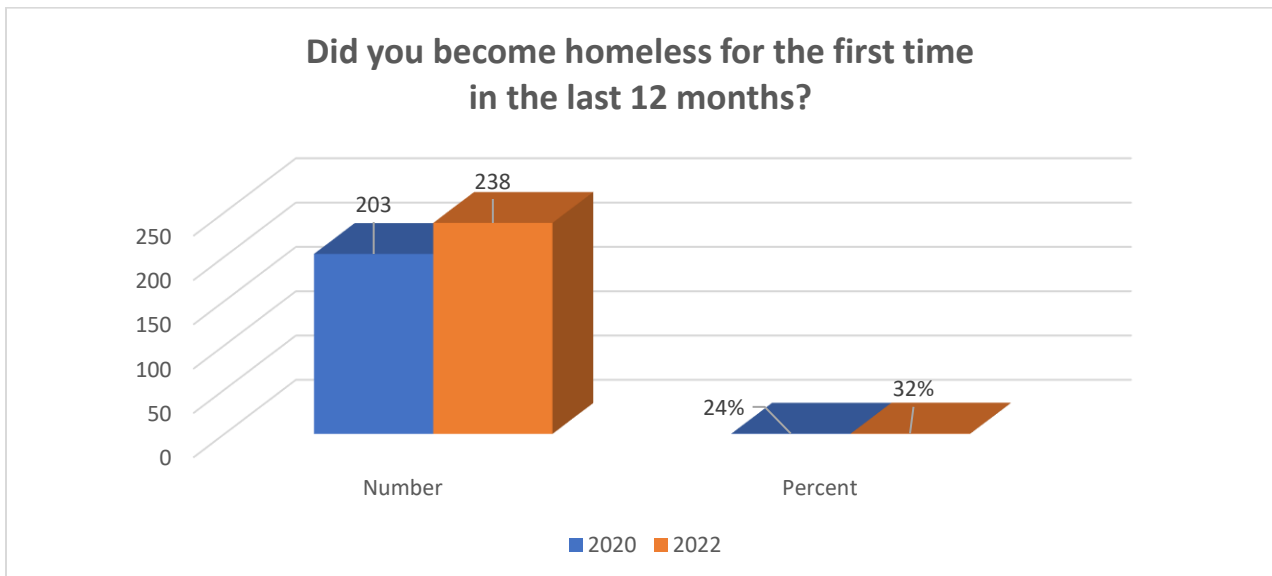
Chart 1.



### Did you become homeless for this first time in the last 12 months?

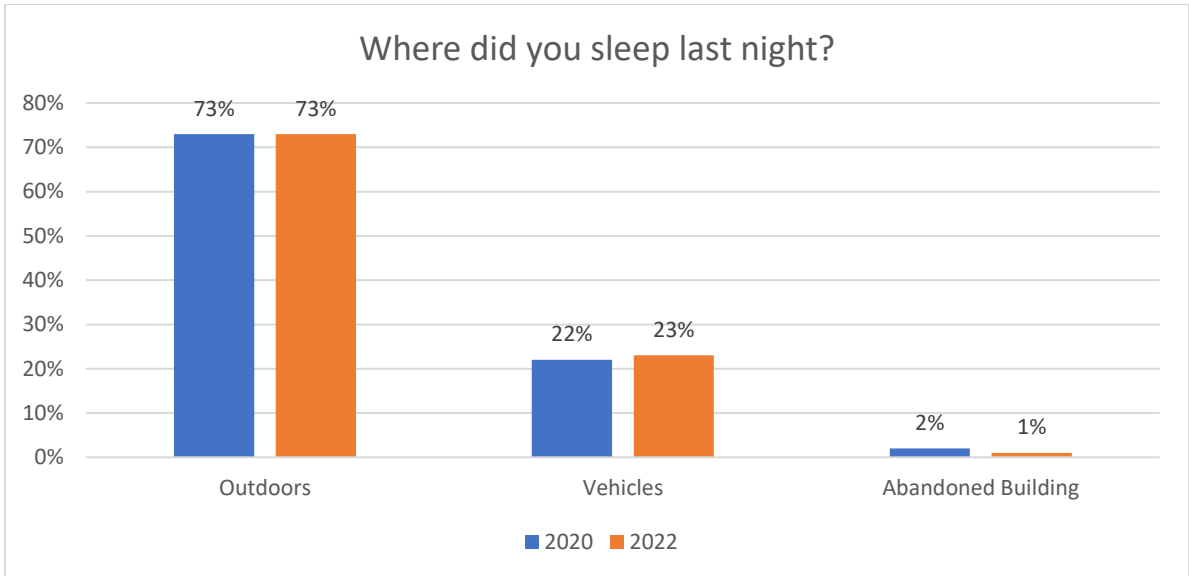
- 24% or 203 of the 858 adults stated “yes” in 2020 and 32% or 238 of 735 adults in 2022 as noted in chart 2 below.

Chart 2.



### Where did you sleep last night?

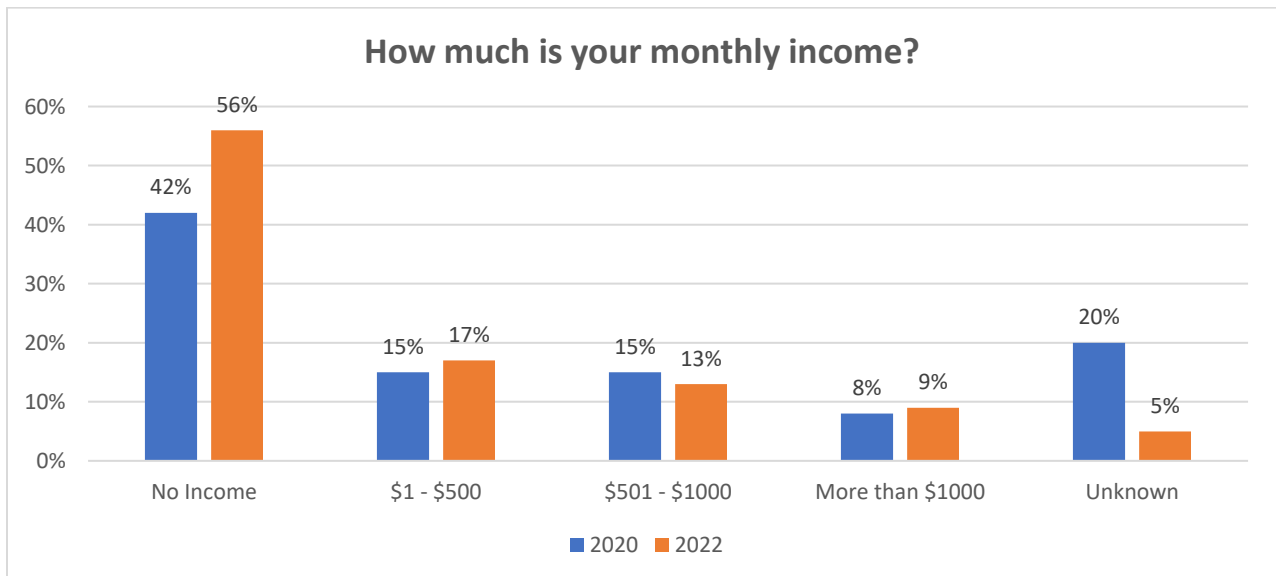
- 73% of unsheltered persons slept outdoors in 2020 and in 2022 and 22% of unsheltered persons slept in a vehicle in 2020 and 23% in 2022.



### How much is your monthly income?

- 24% of the 858 adults stated “no income” in 2020 and 56% of 735 adults in 2022 as noted in chart 3 below.

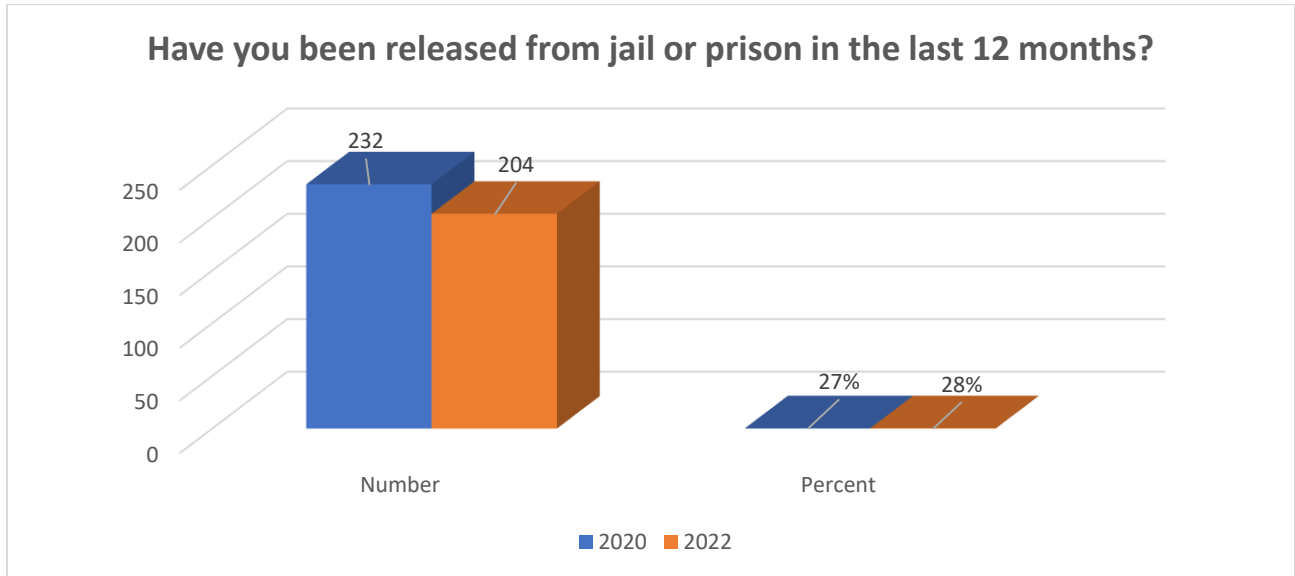
Chart 3.



**Have you been released from jail or prison in the last 12 months?**

- 27% or 232 of the 858 adults stated “yes” in 2020 and 28% or 204 of 735 adults in 2022 as noted in chart 4 below.

Chart 4.



**Has a doctor or other medical professional ever told you that you have a chronic health condition that is life-threatening such as heart, lung, liver, kidney or cancerous disease?**

- 18% or 133 of 735 adults stated “yes” in 2022. The question was not included in the 2020 survey.

April 13, 2022

CoC Governance Board

**SUBJECT:** Receive a Notice of an Unscheduled Board Member Vacancy for Michael Powers and Receive a Nomination for Interim County Executive Officer Dr. Sevet Johnson to Fill this Board Seat.

**RECOMMENDATION:**

It is recommended that your Board receive and file the unscheduled vacancy and review and approve the Board nomination of Interim County Executive Officer Dr. Sevet Johnson to fill this vacancy.

Board Member	Date of Resignation	Term End Date
Michael Powers	3/10/22	12/31/23

Per the VC CoC Governance Charter section 6.07E: *Whenever an unscheduled vacancy occurs on the CoC Board whether due to resignation, death, termination or other causes, the Governing Board may appoint such a qualified person(s) necessary to fill the vacancy. The person(s) appointed 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 voting membership.*

Discussion: The Governance Charter currently limits the VC CoC Board to a maximum of 13 Board members. The Board recently discussed the need to include representation from the City of San Buenaventura and Persons with Lived Experience/Expertise. Three current Board members will be terming off in December 2022, including Susan Englund, Pam Marshall and Carolyn Briggs. The Governance Charter requires a Nominations Committee to review other nominations received, confirm adequate representation among community sectors and geography, and verify each nominees' qualifications. The Nominations Committee will need to make recommendations to the VC CoC Board for a majority vote at a future meeting.



April 13, 2022

CoC Governance Board

**SUBJECT:** Receive and file CoC Committee, Workgroups and Staff updates

**Staff:** Staff are continuing to work on managing five major funding programs (CoC, ESG, ESG-CV, CESH & HHAP) in addition to pursuing other funding opportunities, staffing CoC Board and committees, attending regional meetings on homelessness and a variety of initiatives and funding-related activities. CoC staff have also been managing the Project Roomkey motel voucher program for nearly two years during COVID response.

**CoC Committees:** CoC staff is working on a redesign of the CoC Housing & Services Committee to improve membership and integration of workgroups.

**HMIS Steering Committee:** Continuing to onboard programs onto HMIS and train newly licensed staff. HMIS and CoC staff continue to review the onboarding requests to ensure priority is given to the appropriate programs.

**Data, Performance & Evaluation Committee:** The Data Committee will be reviewing and analyzing the Homeless Housing Assistance and Prevention (HHAP) Program Round 3 applications in May 2022. Funding recommendations will be brought to the CoC Board in June 2022. CoC staff will be providing quarterly updates with system performance measures for the Data Committee to review.

**Public Information and Outreach Committee:** Assisted CoC staff with the volunteer recruitment for the 2022 Homeless Count which resulted in nearly 400 volunteers countywide. CoC staff continue to use social media to educate the public and raise awareness on homelessness issues. This committee will be assisting with the expansion of incorporating people with lived experience this year.

**Veterans Case Conference Workgroup:** This workgroup includes staff from the Veteran Affairs Supportive Housing (VASH) program, local housing authorities, transitional housing providers, street outreach teams and Supportive Services for Veteran Families (SSVF). The meetings have been moved from quarterly to monthly as the workgroup is focused on ending veteran homelessness in Ventura County with an upcoming veteran focused housing project and several VASH vouchers approved but not yet leased.

**Youth Collaborative Workgroup:** Several youth service providers participated in the 2022 Homeless Count to ensure homeless youth were surveyed. Interface Children & Family Services continues to operate the Minor Youth Shelter, which is being supported by Runaway & Homeless Youth funding and the State Homeless Housing Assistance and Prevention (HHAP) Program funding. This workgroup is now actively pursuing the FY 2021 HUD Youth Homelessness Demonstration Program (YHDP) Round 6 funding opportunity, posted by HUD on March 24, 2022. CoC staff will bring the collaborative proposal and recommendations to the CoC Board in May 2022.