

**STRATEGIC PLAN TO ADDRESS HOMELESSNESS
IN MENDOCINO COUNTY**

Revision to Section IV. Goals, Strategies, and Action Steps

**Draft approved by the Mendocino County Homeless Services
Continuum of Care on September 19, 2022**

OUR VISION

All Mendocino County residents have access to housing that fosters dignity, safety, and wellness.

FIVE YEAR FUNDING OBJECTIVES – HOMELESSNESS IN MENDOCINO COUNTY

1. Provide **support to existing and well-functioning homelessness projects** in Mendocino County, while demanding a high level of performance as measured by outcomes that are appropriate to the project.
2. Invest in developing and supporting **new and creative housing inventory** for people experiencing and at-risk-of homelessness.
3. Intensify efforts to **eliminate homelessness in households with children**.
4. Build a robust and collaborative response network for those experiencing housing instability in order to **prevent homelessness**.
5. Develop and implement a framework that ensures that decision-making and service delivery is **rooted in equity and justice**.

IV. GOALS, STRATEGIES, AND ACTION STEPS

The goals, strategies, action steps delineated in this section were initially derived in 2020 over the course of approximately four months by the Strategic Planning Committee of the CoC governing board. Many of the recommendations from the 2018 Homelessness Assessment by Dr. Marbut are included as strategies here. In addition, the Strategic Planning Committee benefitted from technical assistance provided by the Technical Assistance Collaborative through a grant from the Department of Housing and Community Development to improve the delivery of homelessness programs. The Strategic Planning Committee was inspired by the All Home collaborative of Kings County, Washington in deciding on its overarching goals.

In 2022, the Strategic Planning Committee oversaw a comprehensive evaluation of the strategies and action steps to assess which have and have not been accomplished, which are still relevant, and what additions might be warranted. The strategies have been scored as to the progress made toward achieving them as follows: “significant progress,” “some progress,” and “marginal or no progress.”

Goal 1: Making Homelessness Rare

Making homelessness rare will require addressing the [causes of homelessness](#), which are myriad and institutional. A [2013 national study](#) found that community rates of homelessness are driven by rent increases in the housing market, the availability of a strong safety net, economy, demographics, and influx of people moving to a region. Working together with community advocates, providers, and partners, the CoC aims to align efforts toward prevention, increasing affordable housing, and focusing with intention on resolving homelessness and housing insecurity in households with children to make homelessness RARE in Mendocino County. Our intention is to simultaneously focus on developing long-term solutions to homelessness, as well as to provide pathways to quick and permanent recovery from literal homelessness.

Goal 1: Make homelessness rare			
#	Strategy	Action Steps	Progress Notes
1.1	Source new housing opportunities of all types whenever possible.	1.1.1 Identify and direct new funding to the development of housing for homeless households and those at-risk-of homelessness 1.1.2 Review current housing projects and identify possible areas of expansion and/or operating support 1.1.3 Partner with local housing developers to reserve/fund units for households experiencing homelessness	<ul style="list-style-type: none"> • Project Homekey, the “Live Oak Apartments” in Ukiah are now home to 35 households (72 people) with 18 more units coming online in 2022. • RCHDC completed the first phase of Orr Creek Commons in 2021 and is near completion of 19 units funded by HEAP for persons experiencing homelessness. • The City of Fort Bragg and Danco Group are near completion of the Plateau apartment complex, of which 20 units were funded by HEAP for persons experiencing homelessness. • The Community Development Commission (CDC) received 82 Emergency Housing Vouchers from HUD to assist individuals and families who are homeless or at risk of homelessness. The limited housing supply has impeded full use of the vouchers. • The CDC has streamlined eligibility procedures and hired additional housing staff. These changes have resulted in more people accessing permanent supportive housing.
Significant progress			

Strategic Plan Revision – draft approved by CoC Board on 9.19.22

1.2 Some progress	Identify and support programs that provide effective homelessness prevention and diversion services.	<p>1.2.1 Identify and provide funds to address homelessness prevention and diversion specifically.</p> <p>1.2.2 Seek technical assistance on the effective design and implementation of homeless prevention, diversion, and housing problem solving solutions.</p> <p>1.2.3 Launch a Family Homelessness Initiative that includes a rigorous focus on Housing Problem Solving for all families experiencing or at-risk-of homelessness.</p> <p>1.2.3 Explore the use of the Coordinated Entry System for homelessness prevention programs, with attention to reducing barriers to access.</p> <p>1.2.4 Support a community-wide Housing Needs Flex Fund that can support one-time and short-term housing-related needs that may not fit within more restrictive sources of funding (e.g. Rapid Rehousing, PSH, CalWorks Housing Support, etc.)</p>	Local homelessness prevention providers were restricted from assisting with payment of rent arrears due to a statewide moratorium. And while agencies are implementing homelessness diversion services, there has not been a concerted effort to follow the action steps to <i>identify</i> and <i>support</i> programs that provide effective homelessness prevention and diversion services specifically.
1.3 Significant progress	Review and evaluate overall system volume needs on a regular basis for continuous program improvement.	<p>1.3.1 Conduct the annual Point In Time (PIT) and Housing Inventory Count (HIC)</p> <p>1.3.2 Identify and collect data from sources outside the PIT/HIC that could inform the evaluation of overall system volume needs</p> <p>1.3.3 Review and analyze annual data from PIT and HIC, and gathered from other sources</p>	<ul style="list-style-type: none"> • The Unsheltered 2021 PIT Count was canceled due to COVID-19 related barriers and the 2022 PIT Count was held on February 24 and includes both Sheltered and Unsheltered Counts • Data Dashboards are available on the CoC’s website that provide summary data on all HMIS participating projects, the most recent System Performance Measures, and data specific to Mendocino County from the State of California’s Homelessness Data Integration System (HDIS)

HOW WE WILL KNOW IT WORKED

ADD HHAP-3 OUTCOME GOALS HERE.

GOAL 2: Making Homelessness Brief and One-Time

To make homelessness brief and one-time, funding and programs must be aligned to support the strengths and address the needs of people experiencing homelessness. Shortening the length of time families and individuals are homeless reduces trauma and also creates capacity in the crisis response system for others in need. Ensuring that those who to move to permanent housing do not become homeless again and return to our crisis response system also increases capacity of crisis services to serve more individuals.

Goal 2: Make homelessness brief and one-time			
#	Strategy	Action Steps	Progress Notes
2.1 Some progress	Identify the most effective homelessness programs within the County, particularly those that provide emergency, non-congregate, transitional, and permanent housing to individuals experiencing homelessness, and provide support to expand or maintain services.	2.1.1 Gather outcomes of annual Housing Inventory Count report. 2.1.2 Seek technical assistance and/or a consultant to assist in the establishment of performance measurement goals for all types of projects 2.1.3 Create project monitoring processes to enable continuous program improvement, and provide operating support when warranted and fiscally reasonable. 2.1.4 Pilot new non-congregate shelter programs, particularly for those exiting or entering institutional settings.	<ul style="list-style-type: none"> Implementation of Action Step 2.1.1 will begin on the night of the 2022 PIT and HIC Counts 2.1.2. is required by HHAP Round 3 – will receive guidance from Cal ICH in the next few weeks Program evaluation is required now by funders (HCD is doing mini monitoring)
2.2 Significant progress	Increase utilization of housing resources already available in the community.	2.2.1 Recruit and hire a Landlord-Tenant Navigator focused on centralizing recruitment and retention of landlords. (new position) 2.2.2 Analyze and evaluate Rapid Re-housing resources and “matching” processes to maximize effectiveness. 2.2.3 Review the utilization of resources and maximize (e.g. are all available beds being used?)	<ul style="list-style-type: none"> The Landlord-Tenant Navigator has been hired by CDC and CDC is ramping up their Coordinated Entry System administrative work. CDC Staff is streamlining procedures at and will create a quarterly newsletter for landlords. The remaining Action Steps are being implemented gradually. HCD is providing technical assistance training on best practices to implement them.
2.3 Some progress	Create quicker and seamless movement through the homelessness system for all individuals and families experiencing homelessness (e.g., operating at maximum capacity by increasing utilization of the overall system).	2.3.1 Identify and support a CE Lead Agency 2.3.2 Hire or contract with a Coordinated Entry List manager (new position) 2.3.3 Improve Coordinated Entry System through expansion of access points and simplified enrollment procedures. 2.3.4 Formalize practices and referrals through the CES 2.3.5 Ensure all appropriate programs are able to effectively use CES to meet their project goals and parameters.	<ul style="list-style-type: none"> HCD is providing significant Technical Assistance on the Coordinated Entry System and is assisting the Coordinated Entry with updating its policies. There seems to be inconsistency among service providers in terms of use of the VISPDAT and Coordinated Entry.

Goal 2: Make homelessness brief and one-time			
#	Strategy	Action Steps	Progress Notes
2.4 Some progress	Develop and implement collaborative strategies to engage individuals experiencing street-level homelessness	2.4.1 Establish collaboration between County, Cities and law enforcement agencies regarding Homeless Outreach Teams in each region. 2.4.2 Consider implementing a Homeless Multi-Disciplinary Personnel Team to provide collaborative case conferencing about individual homeless individuals with complex needs. 2.4.3 Establish Homeless Encampment Coordination protocols to facilitate communication and outreach when a law enforcement agency takes action within an encampment 2.4.4 Evaluate, and improve if necessary, the geographic coverage of Homeless Outreach Teams once they are active.	<ul style="list-style-type: none"> County Social Services Department initiated a small Homeless Outreach Pilot project, centered primarily in the Ukiah Valley area. Contracted outreach workers conduct homeless outreach 10 hours/week. Their goal is to identify strengths, weaknesses, and gaps in the system of care. Homeless MDT meetings are scheduled as necessary and needed. BHRS operates a Mobile Outreach and Prevention Services (MOPS) program in conjunction with the Sheriff Department. MOPS focuses on addressing mental health issues in the field. A minority of those served through MOPS are unhoused. Homeless outreach is needed on the South Coast. Fort Bragg police department is hiring two social workers.
2.5 Substantial progress	Fully build out and robustly use HMIS.	2.5.1 Develop training curriculum for new HMIS end users 2.5.2 Create ongoing training for HMIS end users and organization administrators 2.5.3 Increase HMIS bed coverage rate by engaging homeless housing providers that are not participating in HMIS.	<ul style="list-style-type: none"> There is widespread agreement that significant progress was made in transitioning to the new HMIS and most service providers are using it. DSS staff did an excellent job. CDC is working to expand the capabilities of HMIS to track new data points, e.g., security deposits. DSS is in the process of recruiting a contractor to implement Action Steps 2.5.1 and 2.5.2. Work still needs to be done to fully implement 2.5.3. HMIS not always used when clients exit out of the system.
2.6 Marginal progress	Launch an initiative specifically focused on the unique needs of homeless families with children.	2.6.1 Identify and select model for family shelter(s), and seek an agency willing to apply for funding to operate a family shelter. 2.6.2 Identify building or location for the shelter to function with highest access to community supports and services, e.g., childcare, workforce development, and permanent housing navigation. 2.6.3 Develop a framework for efficiently providing housing navigation and problem-solving for families with children through partnerships with CBOs naturally engaging with families. 2.6.4 Encourage agencies working with families to commit to HMIS and countywide case management system for referring families and triaging needs.	<ul style="list-style-type: none"> Re: Action Step 2.6.1—There has not been identification of a model for a family shelter and there are still not any “no barrier” shelters for families with children in the County. Ford Street Project, Building Bridges, and Project Sanctuary retain small motel voucher programs for families with children. Project Homekey is permanent housing that includes some families with children. Families with children are not presenting at Hospitality Center in Fort Bragg—the extent of the need is unclear. Re: Action Step 2.6.3—There needs to be better coordination between Transitional-age youth (TAY)—serving organizations and CalWorks.

HOW WE WILL KNOW IT WORKED

ADD HHAP-3 OUTCOME GOALS HERE.

GOAL 3: Improve community and policy maker engagement around homelessness

Goal 3: Improve community and policy maker engagement around homelessness			
#	Strategy	Action Steps	Comments
3.1 Substantial progress	Gain buy-in and agreement for one overarching strategic plan—with action steps.	3.1.1 Engage leadership in underserved areas of the County’s jurisdiction. 3.1.2 Use data (worldwide/national) on promising and evidence based practices to highlight successful strategies that can be used in our communities. 3.1.3 Provide informational presentations to policy making bodies, community agencies, and public on purpose, process and importance of having a consistent and coordinated approach to addressing homelessness. 3.1.4 Seek endorsement of Strategic Plan from entities within various jurisdictions.	<ul style="list-style-type: none"> • Re: Action Step 3.1.1—This has largely been achieved in Ukiah and Fort Bragg but less so in the more remote and underserved areas of the County. • Re: Action Step 3.1.2—DSS staff have made informal presentations on the status of projects, such as Project Homekey, to the Ukiah City Council and regional Housing Action Teams. More such presentations are needed to policy-making bodies as well as community groups. • Re: Action Step 3.1.4—Presentations on the Strategic Plan have been made to the Board of Supervisors and the city councils in Ukiah, Fort Bragg, Willits, and Point Arena. These jurisdictions endorsed the Strategic Plan.
3.2 Some progress	Improve strategic coordination between the CoC, the County and cities.	3.2.1 Set up regular meeting between CoC and County leadership to conduct homelessness planning. 3.2.2 On all regular CoC agendas, there shall be a standing item for jurisdictional updates related to homelessness. 3.2.3 Members of the CoC shall engage local jurisdictions early in the development of capital projects. 3.2.4 Request the appointment of a representative from the CoC on the Behavioral Health Advisory Board.	<ul style="list-style-type: none"> • Re: Action Step 3.2.1—Coordination between the CoC and County leadership has become a funding requirement for many programs. • Re: Action Step 3.2.2—There has been a standing item for jurisdictional updates related to homelessness.
3.3			

Goal 3: Improve community and policy maker engagement around homelessness			
#	Strategy	Action Steps	Comments
Minimal progress	Develop a community understanding of the scope, scale, and structure of the homelessness problem and need to use common nomenclature to improve decision making.	3.3.1 Form an Outreach and Public Relations team to prepare and make public presentations. 3.3.2 Create a press release once per year on PIT count and other homeless data. 3.3.3 The CoC shall make annual presentations to the governing body of each jurisdiction once each year to report on strategic plan progress and upcoming initiatives/projects. 3.3.4 CoC leadership will actively attend events to speak with leaders in the community to make sure that local needs are being accomplished by the CoC board’s long term goals and objectives. 3.3.5 Talk to local media about what is being addressed, the CoC’s challenges and limitations, what the public can do to help.	<ul style="list-style-type: none"> • There has not much progress with this strategy but there is widespread agreement that it is important. • There is not unified agreement at the CoC level about the scope, scale, structure, and theory of change vis-à-vis the homelessness problem. Consensus around these issues should be established before communicating to the general community. • The new HMIS presentation capabilities will make this easier as will resumption of the PIT count. • Outreach to community groups, such as the Rotary Club, would be beneficial.
Minimal progress	Increase engagement of persons with lived experience with homelessness in planning, implementation and decision making for the CoC.	3.4.1 Conduct focus groups with people experiencing homelessness regarding service provider training and education. 3.4.2 Follow up with provider trainings as identified in focus groups. 3.4.3 Develop and implement a process to compensate or incentivize people who are currently or formerly shelterless to participate in the governance of the County’s homeless system of care. 3.4.4 Establish a ‘Client Council.’	<ul style="list-style-type: none"> • Gaining the engagement of persons experiencing homelessness is always difficult but the pandemic made it even harder. • Re: Action Step 3.4.3—No progress made on a formal protocol but one is needed. • Re: Action Step 3.4.5—Consider establishing multiple client councils for different populations.

HOW WE WILL KNOW IT WORKED

We will see increased engagement of residents as measured by increased attendance at CoC board and committee meetings.

We will see increased engagement and leadership of business and faith leaders increased attendance at and/or joining the CoC board.

We will see homeless services expanded to the outlying regions of the County, such as the South Coast and North County, including Covelo.

MAKE THIS SECTION CONSISTENT WITH HHAP-3 OUTCOME GOALS.

Goal 4: Improve the CoC’s capacity to govern itself			
#	Strategy	Action Steps	Comments
4.3 Some progress	Continue the establishment of a diverse board that fills perspective, skills and knowledge gaps in dealing with the mission of the CoC.	4.4.1 Engage Membership Committee in developing recommendations to the CoC Board on the potential revision of the composition of the Board in order to increase effectiveness, efficiency, and to ensure that all stakeholders are represented.	The CoC board is currently engaged in the process of revising the board membership to increase diversity and effectiveness, researching potential board structures as a model for the CoC.

HOW WE WILL KNOW IT WORKED

We will have effective and efficient governance at the CoC and within the homeless system infrastructure as measured by surveys conducted before and after listening sessions by whomever conducts listening session.

HHS and CoC contracts all include measurable performance measures.