

**Regional Task Force on the Homeless
San Diego Community Plan to End Homelessness**

**Strategic Framework for a System
to Effectively End Homelessness in San Diego County**

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Executive Summary

On any given night an estimated 9,000 people in the San Diego region are living outdoors, in vehicles or in emergency shelters. While the community has invested in programs and projects that are innovative and effective, homelessness remains a persistent and growing problem. The community has taken steps to strengthen the Regional Task Force on the Homeless (RTFH) so that it can lead a process to shift the community's efforts from having a collection of projects and initiatives to having a coordinated, region-wide system to effectively end homelessness. With leadership from RTFH Board Chair San Diego County Supervisor Ron Roberts and Vice Chair City of San Diego Councilmember Chris Ward, the RTFH has developed this Strategic Framework to guide our efforts to develop and implement a Community Plan. The Plan will be strongly data-informed and guided by best practices and evidence about what works. Analysis of San Diego's local data will provide a roadmap to help the community achieve significant reductions in homelessness.

This Framework identifies a strategic pathway to creating a regional system to effectively end homelessness. There are five key areas of work:

1. Unified Leadership, Effective Governance and Aligned Funding.

Achieving reductions in homelessness will require continuing to build the capacity of the RTFH to coordinate a unified leadership and governance structure that brings together the community leadership and key system funders, both public and private. To truly create a regional system, all the community leadership must be engaged and aligned around a common set of objectives.

2. System Access/Entry: Outreach, Coordinated Entry and Diversion.

A coordinated regional system will require a consistent, streamlined and efficient region-wide process and policy governing how people experiencing homelessness access the resources they need to regain housing. The Coordinated Entry System is beginning to fulfill this role, but more work needs to be done to bring coordinated entry up to scale and integrate it with both street outreach and system diversion work.

3. Emergency Responses: Shelter, Transitional Housing, Interim Housing.

Emergency responses such as emergency shelter and other types of interim beds must serve as a pathway from homelessness to housing. These temporary interventions are essential elements of the system, but they are not destinations in and of themselves. In an effective system, performance is measured based on how effectively emergency responses help people make the transition from homelessness into permanent housing.

4. System Exits: Housing Interventions.

In a system to effectively end homelessness, the ultimate goal is that people secure housing, not shelter. Our strategies must focus on expanding the range of housing opportunities for people experiencing homelessness. This includes permanently subsidized affordable and supportive housing, which is critical, as well as lower-intensity, flexible, short-term and medium-term rental subsidy options for the many people who are not chronically homeless and do not require long-term assistance to be housed.

Maximizing the inventory available in the existing rental market will be essential to making significant reductions in homelessness.

5. System Infrastructure: Data, Evaluation, Training, Capacity Building

Finally, our regional system must have the infrastructure to support ongoing assessment of performance and the learning and culture change needed to approach the challenge differently. Our work must include building the data and analysis infrastructure at the RTFH, as well as training, technical assistance and capacity building support for the housing and service providers in our community.

This Strategic Framework lays out a path to begin aligning an array of programs and initiatives into a cohesive, streamlined system. The Implementation Plan that will come next will include measurable objectives and carefully calibrated action steps designed to achieve the greatest possible reduction in homelessness given available resources. Success year-over-year will be measured by changes in the size of the homeless population and performance of the system compared to established targets. This work will be difficult but is critical that we rise to meet this challenge – both for the well-being of those experiencing homelessness and of our community as a whole.

I. Purpose of Strategic Framework

The Regional Task Force on the Homeless (RTFH) is embarking on a process to develop a Community Plan to Effectively End Homelessness. The San Diego community has already put in place many successful programs and initiatives to address homelessness. With leadership from RTFH Board Chair, San Diego County Supervisor, Ron Roberts, and Vice Chair, City of San Diego Councilmember, Chris Ward, as well as technical assistance from Focus Strategies, the RTFH now seeks to take the next critical step of developing a plan that will bring all of these components together into a coordinated, region-wide system. The Community Plan will be strongly data-informed and guided by best practices and evidence about what works. Analysis of San Diego's local data will provide a roadmap to help the community achieve significant reductions in homelessness.

The Community Plan will be developed in two phases. The first phase is the creation of this Strategic Framework, which sets forth the vision of a regional system. This framework describes the features and elements of what that system will look like and identifies the strategies needed to make the shift from what is currently in place to the new system. In the second phase, a detailed multiyear implementation plan to create the new system will be developed. The second phase will be informed by a comprehensive data analysis and predictive modeling effort that will allow the RTFH to pinpoint what is working, where there are opportunities for improvement, and where to focus efforts to have the maximum impact.

II. Background and History

The San Diego community continues to grapple with the persistent and complex issue of homelessness. On any given night, thousands of individuals and families are without shelter or lack a permanent place to live. San Diego's leaders, service providers, governmental agencies, and concerned citizens have responded with a high level of commitment. Resources have been invested in emergency shelter, services and permanent housing. Over the years, these efforts have helped many thousands to resolve their crises and return to stable housing. However, homelessness in San Diego is increasing. In 2017, the annual Point-in-Time Count identified 9,116 homeless people, a 5 percent increase from the year before.

In the past several years, community leaders and homeless system stakeholders have recognized that while regional efforts have been significant, they also lack sufficient coordination. Many innovative and effective programs and initiatives have been implemented. Now, a shift is needed from a collection of programs that serve homeless people to a system that effectively ends homelessness.

In 2017 San Diego's leadership approved a merger between the RTFH and the Regional Continuum of Care Council (RCCC) to create a single entity tasked with coordinating the region's response to homelessness. The vision is that the RTFH will serve as the "backbone" of the San Diego region's collective efforts, bringing together the work of the County of San Diego, City of San Diego, other cities and jurisdictions, the business community, service providers and advocates. The RTFH has just completed an organizational assessment that identifies the capacity-building needed to effectively fill this expanded role. This Strategic Framework lays out RTFH's vision for what the new system will look like and outlines key tasks for the next year as RTFH guides the community's continuing development of a coordinated, region-wide system to effectively end homelessness.

III. Methodology

The RTFH has developed this Strategic Framework with technical assistance from Focus Strategies, a national consulting firm dedicated to helping communities develop data-driven solutions to addressing homelessness. Information to inform the development of this document was gathered from several sources:

- Review of available data on homelessness in San Diego County, including the 2017 We All Count census (Point-in-Time Count). A summary of data is provided in Appendix A.
- Review of existing plans, reports, policies, Requests for Proposals (RFPs), and other documents relating to current efforts to address homelessness in the San Diego region. Appendix B presents a list of documents reviewed.
- Development of an inventory of existing projects, programs and initiatives to address homelessness in the San Diego region. This inventory is presented in Appendix C.
- Interviews with 45 key stakeholders representing a range of sectors, including elected officials, city and county staff, service providers, funders, business leaders, advocates, staff from regional collaboratives, and technical assistance providers. A summary of stakeholder input and list of interviewees is provided in Appendix D.
- In-person input and information sharing meetings with planning groups working on homelessness throughout the county. A summary of input from the meetings is provided in Appendix E.
- Review of research and national best practices on effectively ending homelessness.

IV. Goal: A Coordinated and Effective Regional System

A. Defining a System to End Homelessness

San Diego's experience has shown that strong programs, financial investment and committed providers are not sufficient to create measurable and visible reductions in homelessness. Evidence from around the United States and a shift in federal policy direction all point to the importance of developing systems to effectively end homelessness – sometimes referred to as a Homeless Crisis Response System. A system to effectively end homelessness treats a loss of housing as an emergency to be responded to quickly and effectively with a housing solution, targeting resources to this end. To achieve this system approach, all resources and programs must be aligned around a consistent set of strategies and work toward shared, measurable objectives. The system's work is shaped by data – continuous analysis shows what is working and where improvement is needed. The leaders and funders of the system hold all stakeholders accountable for results.

The RTFH envisions a region-wide, coordinated effort, in which all of the parts of the system work together toward a common goal. Every actor in the system, regardless of the role they play, views each person who is literally homeless (living outside or in a shelter) as someone with a housing need that can be addressed immediately and without preconditions. Everyone is understood to be “housing ready.” When a person enters the homeless system, programs and services are set up to quickly determine where this individual or family can live and provide the appropriate amount of assistance to help them

re-enter housing – even if they have unmet behavioral health issues, lack income or have other challenges. Data systems are used to continuously collect and analyze information about who remains housed and who does not. If patterns emerge, these are analyzed, and adjustments are made.

The system that RTFH is planning will build upon the many critical elements currently in place. The San Diego region has a collection of homeless programs that provide services and housing to some of the people who are experiencing homelessness and some people who are struggling with unstable or unaffordable housing. To date, the San Diego region has responded to the gaps in its system by adding more programs and launching more pilots and initiatives. However, a framework has not been in place to help integrate and align all of these pieces into a system that is effective. The difficult work of rigorously evaluating results and ensuring the maximum impact from the investment of resources needs to be done. Once the shift is made to a system focus, the region will be able to create a Homeless Crisis Response System that responds to the needs of *all* San Diegans who are without housing, reverse the trend of increasing homelessness, and set a path toward consistent, measurable reductions in homelessness.

A note on the limitations of the homeless system. The vision articulated in this Strategic Framework reflects a commitment to solve the problem of increasing homelessness – relieving the suffering of those living outdoors or in shelters and improving overall community well-being. The goal is to house those who are unsheltered by achieving the highest and best housing outcomes possible with the resources available. This is a pragmatic, not ideological, vision. In keeping with this pragmatic approach, it is critical to emphasize that the results that can be achieved with the resources that are invested in homelessness programs do not include meeting broader anti-poverty objectives. San Diego’s affordable housing crisis is acute. Many households are extremely rent-burdened and struggle to reliably secure food and meet other basic needs. Creating a Homeless Crisis Response System will only contribute in a small way to bridging the gap between the housing inventory that exists and what is needed to ensure everyone has a safe, high-quality and affordable place to live. In addition, there are inadequate resources to meet the health, behavioral health, employment and educational needs of people with extremely low incomes. Overwhelmingly, the evidence indicates that people can be successfully housed even when these other service needs remain unaddressed. Waiting to house people experiencing homelessness until all other needs are met yields a system in which a very few are well-served, and the majority remain unsheltered. RTFH’s immediate goal is to guide the community in reducing homelessness and its associated impacts on the community. Future steps can include strengthening the anti-poverty and health systems that provide essential quality-of-life services.

B. Principles of San Diego’s System to Effectively End Homelessness:

Much is already known about what works to effectively end homelessness. The RTFH has integrated these best practices, philosophies and principles into its governing documents and plans, including its recently adopted Community Standards.

The San Diego Homeless Crisis Response System will embrace the following key principles:

1. Housing-Focused: The only intervention that ends homelessness is housing. While creating new housing inventory is a critical strategy, it is not feasible to build a new housing unit for every

homeless person. *San Diego's Homeless Crisis Response System will be oriented to make the greatest possible use of the existing housing inventory and help people access housing first, before addressing other issues.* While ideally each homeless person or family would access a permanently subsidized housing unit, the reality is this inventory is insufficient to meet the need. There are many people in our community who have little or no income and yet never become homeless. They maintain housing by doubling up with friends or family, living in rent-burdened situations or in neighborhoods that lack amenities and services. The Homeless Crisis Response System recognizes that having housing is better than living outside or in a car, and many people who are poor do not live in ideal housing situations. Helping people return to a safe and secure housing situation is a success, even if it is just the first step on the path to a more ideal housing situation.

2. Person-centered: This system to effectively end homelessness will be focused on meeting people's needs for housing, not on meeting provider needs to fill their programs. It will respect client choice and preferences about where and how they will be housed. It must be easily understood and navigated, with minimal barriers to access.
3. Data-informed: Data will be collected and analyzed to understand what the system is accomplishing. Success will be measured by whether people who are homeless secure a housing solution and do not return to homelessness. Decisions about what approaches to invest in will be informed by data, not by assumptions about what works.
4. Effective Use of Resources. The system will be designed to achieve the best possible results using the resources that exist and realistic expectations about what additional resources can be garnered. Funders of the system will base investment decisions on data and hold grantees accountable for results. Resources will be dedicated to programs and projects that demonstrate they are reducing homelessness, not just that they are providing services to homeless people.

C. Features and Elements of the System to Effectively End Homelessness

The Homeless Crisis Response System will have five main components. Below, these components are described in general terms. Section IV provides a detailed assessment of what elements of this system are already in place and what work still needs to be done.

1. Unified Leadership, Effective Governance and Aligned Funding

The most critical element of the system is that it must have a unified leadership and governance structure that brings together the community leadership and key system funders, both public and private, within a single governance structure. This structure must do more than just support collaboration across the different parts of the system. To be effective, the system governance has to be empowered to guide system-level decision-making – bringing all the leadership together to develop, adopt and implement a single shared set of strategies and policies, including policies governing how funds are invested.

2. System Access/Entry: Outreach, Coordinated Entry and Diversion.

In the homeless crisis response system, there is a consistent process and policy that determines how people experiencing homelessness access the resources they need to regain housing. Entry pathways into the system are designed to streamline access for people with the highest needs – those who are unsheltered and chronically homeless. The system also has policies and processes to divert and re-direct those who are struggling with unstable housing but who are not homeless. Outreach, coordinated entry and diversion (also known as housing problem-solving) are all critical system components to manage access.

3. Emergency Responses: Shelter, Transitional Housing, Interim Housing.

The unifying goal of the homeless system is to help each household quickly secure a housing solution. In many cases, the pathway from homelessness to housing will include a stay in a short-term program, whether an emergency shelter bed, transitional housing, or “interim” housing/“bridge” housing. These interventions are essential elements of the system, but they are not destinations in and of themselves. Their performance is measured based on how effectively they help people make the transition from homelessness into permanent housing.

4. System Exits: Housing Interventions.

The ultimate goal of the system is to help people secure housing, not shelter. In the system, there is a broad array of housing interventions available to help people exit from unsheltered homelessness or a shelter stay into a safe and permanent housing situation. This includes permanently subsidized affordable and supportive housing, which is critical, as well as lower-intensity, flexible, short-term and medium-term rental subsidy options for the many people who are not chronically homeless and do not require long-term assistance to be housed. Maximizing the inventory available in the existing rental market will be essential to making significant reductions in homelessness.

5. System Infrastructure: Data, Evaluation, Training, Capacity Building

Finally, this system must have the infrastructure to support ongoing assessment of performance and the learning and culture change needed to approach the challenge differently. This includes having a robust Homeless Management Information System (HMIS) data system that has high participation rates and data quality. Expertise and strong data analysis capacity are also needed so that data can be used for ongoing system assessment and continuous improvement. In addition, providers and other stakeholders will require assistance to change their policies and practices. Training, technical assistance and capacity building efforts are all essential infrastructure elements.

D. Measures of Success

As the RTFH works with community leadership and stakeholders to design and implement this system to effectively end homelessness, RTFH will track the success of its efforts using the following measures. These are applicable to the system as a whole, as well as the individual programs that make up the system:

- **Targeting:** *Increase* the percentage of people entering the system’s programs and services who come from unsheltered homelessness, especially chronically homeless individuals.
- **Housing Solutions:** *Increase* the number of people who enter each program in the system who are assisted to secure a stable housing solution.

- **Time Homeless:** *Shorten* the time people spend being homeless and expedite how *quickly* programs assist people experiencing homelessness to secure a stable housing solution.
- **Return to Homelessness:** *Decrease* the rate at which people assisted by the system to secure housing end up homeless again.
- **Cost Effectiveness:** Funders will *invest* in programs that have the lowest cost per successful housing exit for each program type.

These measures will be calibrated for each part of the system. For example, a shelter is not expected to contribute to housing outcomes at the same level as a rapid rehousing program. However, each part of the system will be accountable to make progress along the same set of measures. Regular reporting on performance through readily accessible dashboards and real-time data will transform the way work is evaluated and hold the RTFH, providers and the system as a whole accountable for achieving success.

Though not directly part of the Homeless Crisis Response System, some associated measures are also critical to the overall success of efforts to reduce homelessness in the region:

- **Housing Inventory:** Increases in the stock of rental housing affordable to people with extremely low incomes.
- **Services:** Increases in the numbers of persons receiving publicly funded health and behavioral health services.
- **Income:** Increases in the numbers of homeless persons securing income and effective pathways to employment.

V. Strategy

This section describes what is currently in place and what is needed to realize the vision of a Homeless Crisis Response System. The description of current programs and services is a high-level overview, not a comprehensive list of every program or initiative currently operating in the community. Please refer to Appendix C for a more detailed system inventory.

A. Unified Leadership, Effective Governance, Aligned Funding

San Diego is a geographically large community with many political jurisdictions and a large number of homeless system funders, housing and service providers (including six distinct regional housing authorities), and collaborative groups and sectors working on this issue. To truly create a regional system, all the community leadership must be engaged and aligned around a common set of objectives. The RTFH has been tasked as the entity that will guide the development and implementation of this the system, but this work can only be effective if the community's leaders and funders are unified in support of the system design and willing to make policy and funding decisions that are aligned with the system's goals and strategies and informed by local data.

What Is in Place:

Over the past several years, the community has taken significant steps to create a coordinated, regional leadership and governance structure and has begun to discuss how to better align funding processes. Key pieces already in place include:

- Regional Task Force on the Homeless (RTFH) – As a result of the recent merger with the Regional Continuum of Care Council (RCCC), the RTFH is now positioned to assume the role of the system coordinator – bringing together stakeholders from all key sectors (public, private, nonprofit) and geographic areas of the community to oversee system planning and implementation efforts. The naming of two elected leaders as the Chair and Vice Chair – San Diego County Supervisor Ron Roberts and City of San Diego Councilmember Chris Ward, respectively – is a key step to integrating the work of the RTFH with the County and the City of San Diego.
- The City and County elected leaders and staff, including City of San Diego Mayor Kevin Faulconer and Supervisor Ron Roberts and staff County of San Diego Health and Human Services Agency, San Diego Housing Commission, have begun meeting regularly with each other and with RTFH staff to discuss regional solutions and coordinate City/County programs and initiatives.
- The San Diego City Council has convened a Select Committee on Homelessness to refine the City’s homelessness strategy.
- Local private and public funders have joined together under the umbrella of a San Diego chapter of Funders Together to End Homelessness (FTEH), which is represented on the RTFH board.
- Collaborative groups representing specific sub-regions of the County are working to coordinate among the smaller cities and jurisdictions, including the Alliance for Regional Solutions, East County Homeless Collaborative, and El Cajon Collaborative.
- The business community has become engaged in this issue, and some business leaders have been meeting regularly, both privately and as members of the FTEH Board of Directors to address homelessness and support work that will be impactful.

What Is Needed:

- Continuing work to build a unified leadership, governance and accountability structure. While the RTFH now has been designated as the entity to fill the role of guiding homeless system design and coordination, there is still work to be done to determine how RTFH will be empowered to make and implement decisions that can produce the needed system shifts. Issues to be addressed include:
 - How will the RTFH lead the process of coordinating and aligning the funding streams supporting the homeless system? Currently RTFH directly oversees the allocation of Continuum of Care (CoC) funds, which represent only a portion of the overall system. While the City, County and private funders sit at the RTFH table, this alone is not sufficient to ensure that these public and private funding streams will all be coordinated and working to a common set of objectives.
 - How will policies developed by the RTFH, such as the recently adopted Community Standards, be implemented beyond the group of programs that receive CoC funding? This relates to the question above about funder alignment. The leadership is fully committed; what remains is determining how all of the different programs and projects will be brought together into a system. This shift requires the system’s leadership to agree to shared goals and objectives, as well as a shared set of implementation

strategies. For example, issuing joint RFPs for related funding streams, shifting to performance-based contracting using a common set of performance requirements, and creating incentives for non-CoC funded programs to participate in coordinated entry. In other words, deeper coordination is needed, moving beyond policy work to day-to-day system development and practice.

- Focused efforts to engage and involve smaller cities and more rural areas of the County. While the smaller cities and more rural areas are represented to some degree on the RTFH board, there is significant work to be done to engage their community leadership and stakeholders and craft strategies to integrate their work into the broader regional system. These communities have somewhat smaller homeless populations, but also less access to resources to address the problem. Some are understandably beginning to devise their own separate initiatives and approaches, but these will be more effective and yield better results throughout the county if they are coordinated with the broader regional system as it develops.

B. System Access: Outreach, Coordinated Entry, Diversion

In the system to effectively end homelessness, there must be a consistent, streamlined and efficient region-wide process and policy governing how people experiencing homelessness access the resources they need to regain housing. This includes community-wide intensive outreach and engagement with people who are unsheltered that is designed to rapidly and efficiently speed their movement into housing. At the same time, we must identify those who are not literally homeless, but experiencing unstable housing, and divert or re-direct them to other systems and resources. The Coordinated Entry System is beginning to fulfill this role, but more work needs to be done to bring coordinated entry up to scale and integrate it with both street outreach and system diversion work.

What Is in Place:

As a region, San Diego is beginning to put in place the policies, structures and interventions needed to create a streamlined, standardized and coordinated way for people experiencing homelessness to access the homeless system. Existing elements already in place or planned include:

- Street Outreach: There are a number of outreach efforts already deployed across the region, though not all are specifically dedicated to homelessness. Outreach teams that have a homeless focus or homeless component include the City of San Diego and other city Homeless Outreach Teams (HOT), Psychiatric Emergency Response Team (PERT), Serial Inebriate Program (SIP), People Assisting the Homeless (PATH), and the San Diego Clean & Safe Streets homeless outreach. Project One for All (POFA) also includes a homeless outreach component. The cities of El Cajon and Encinitas have both funded outreach efforts and housing navigation. The San Diego Housing Commission (SDHC) will be investing in a new outreach pilot in July 2017 through the next phase of HOUSING FIRST – SAN DIEGO, SDHC’s homelessness action plan. The SDHC funds will support the RTFH to begin developing a coordinated regional homeless outreach plan. These efforts reflect a growing understanding of the critical role that outreach can play in engaging chronically homeless people and setting them on a pathway to housing.

- Coordinated Entry: RTFH has put in place the first phase of a region-wide Coordinated Entry System built on national best practices and with the assistance of highly qualified technical assistance consultants. The existing system is organized on a “no wrong door” model, in which any HMIS-participating agency can conduct assessments and place literally homeless people into a prioritized list to be matched to a housing intervention. Housing Navigators assigned to people who have been assessed provide the linkage between homelessness and housing – they work with people who have been assessed to get them ready to be matched (including keeping in contact, assisting with collecting needed paperwork, helping with needed service linkages, etc.). At this time, the available housing interventions that are receiving referrals through Coordinated Entry are CoC-funded rapid rehousing and permanent supportive housing and some additional programs. Supportive Services for Veteran Families (SSVF) and Veterans Affairs Supportive Housing (VASH) are in the process of being integrated.
- Shelter Diversion/System Diversion: Diversion to keep people who are homeless or on the verge of homelessness from entering emergency shelter or other homeless interventions is a relatively new activity for San Diego County. A pilot diversion initiative is launching in July as part of SDHC’s HOUSING FIRST – SAN DIEGO homelessness action plan – this is a collaborative effort between the RTFH, SDHC, 2-1-1 San Diego, and emergency shelter operators in the City of San Diego. The goal of this program is that families will be assisted to remain in their current housing or move directly to other housing instead of entering shelter. Diversion training will also be offered to providers in the system.

What Is Needed:

While some outreach, coordinated entry and diversion elements are in place, there is still much work to be done before San Diego has a region-wide and efficient system for coordinating access into needed interventions for people experiencing homelessness. RTFH identified the following critical gaps and improvements needed:

- Refine Coordinated Entry System Design – Currently the Coordinated Entry system is designed to “*assess and wait*.” Most of the activity taking place involves conducting assessments to place people into a single waiting list or pool; that pool is then used to fill vacancies in some housing programs. Most people never receive a referral, and a great deal of time is spent trying to locate people who were assessed many months before and now are nearing the top of the list.

Coordinated Entry needs to be more than just managing waiting lists, and the U.S. Department of Housing and Urban Development’s (HUD) most recent guidance specifically urges communities to avoid creating lists where anyone has to wait longer than 90 days for a match to permanent or interim housing. To make San Diego’s Coordinated Entry System more effective, it needs to shift away from “*assess and wait*” and toward an “*engage, prioritize, and house*” approach that identifies the highest priority unsheltered people and expedites their movement into housing.

The RTFH has already identified a number of needed improvements that will help streamline and improve coordinated entry. The recently completed organizational assessment by OrgCode

makes some additional specific recommendations that will help achieve this objective. Critical needed shifts include:

- Re-structuring the region’s outreach activities to be more housing-focused, so that outreach team contacts with unsheltered people are oriented toward finding housing solutions, not just offering services, and outreach contacts are entered into HMIS;
 - Training outreach workers and housing navigators in housing problem-solving/diversion;
 - Integrating outreach, diversion/housing problem-solving and housing navigation into a single Coordinated Entry function to simplify the Coordinated Entry work flow and ensure that each person who touches Coordinated Entry has a pathway to securing housing that is more than being placed on a waiting list;
 - Refining the prioritization policy and developing an active, “by name” list of high-priority unsheltered, chronically homeless persons who are currently living outside and have been engaged about a housing solution; and
 - Re-working eligibility criteria and processes for both rapid rehousing and permanent supportive housing so that those prioritized by Coordinated Entry have priority access to these housing resources (see section on Housing Interventions).
- Expand and Bring Coordinated Entry to Scale: The Coordinated Entry System currently only touches a small component of the overall system inventory and lacks sufficient resources to provide assistance to everyone in a consistent way. Critical changes needed include:
 - Expanded resources for housing problem-solving and navigation functions and a systematized policy for allocating these resources. Currently, many high-need individuals are being assessed but not housed because there is no RTFH “community navigator” capacity to help them navigate the system; while those with lower needs but who can access navigation through another mechanism (navigators funded by service providers, cities, or other entities) are assisted.
 - Expand the universe of programs participating in Coordinated Entry – emergency shelter, transitional housing and non-CoC funded rapid rehousing and permanent supportive housing all must be integrated into Coordinated Entry if the system is to be effective. Closing side doors is a critical strategy and will require strong leadership and funder alignment. (See above under Leadership, Governance and Funding.)
- Integrate Diversion/Problem Solving Throughout the System: A few shelters are beginning to implement diversion practices. However, to make faster progress on effectively ending homelessness, housing problem-solving has to be built in wherever people access the system – including at drop-in and multiservice sites, shelters, in other systems of care as people are being discharged (health, behavioral health, criminal justice), and even at housing programs. Given the gap between the number people who need housing assistance and the available affordable housing inventory, it is crucial to have a systematic, system-wide effort to help people remain housed or quickly return to housing situations they may have recently lost. Helping people stay in safe, informal shared housing situations or in rent-burdened situations has to be viewed as a positive outcome in relation the alternative of homelessness.

C. Emergency Responses: Shelter, Transitional Housing, Interim Housing

Emergency shelter and other short-term forms of housing – Interim Housing, Bridge Housing or Transitional Housing – are essential elements of the system that is being developed. In the Homeless Crisis Response System, shelter or interim housing is a place where individuals go to obtain housing:

- Emergency shelter generally refers to beds in congregate facilities that offer short stays, with the goal of providing a safe indoor place where people can connect with needed services and develop a plan to return to housing.
- Transitional Housing is a model that has typically provided up to 24 months of housing while participants gain skills and income to secure permanent housing.
- Interim or Bridge Housing typically refers to a short-term placement in a shelter or transitional housing program for an individual or family that has been placed in a housing program (rapid rehousing or permanent supportive housing) through Coordinated Entry and needs a place to stay while they are searching for or waiting for a unit.

Each of these intervention types can play an effective role in the Homeless Crisis Response System. However, they must serve as a rapid pathway to housing. If not, people will continue to cycle from the street to shelter and back, resulting in an ever-increasing number that experience chronic homelessness. In the new system, these programs will have minimal barriers to access and program participation requirements. All residents receive immediate assistance with devising and executing a plan to secure housing quickly, including access to trained and knowledgeable housing locators or housing specialists. Programs may offer other crisis services and connections to other service systems, but the main focus is on helping residents secure housing.

What Is In Place

The San Diego region has a diverse inventory of emergency shelter and transitional housing programs serving adults, families with children, Veterans, and youth. The 2017 Housing Inventory Count recorded a total of 3,635 year-round shelter and transitional housing beds.

Program Type	Family Beds	Adult-Only Beds	Child-Only Beds	Total Beds	Veteran Beds*	Youth Beds (up to age 24)*
Emergency Shelter	646	665	18	1,329	10	0
Transitional Housing	978	1,328	0	2,306	450	307
Total	1,624	1,993	18	3,635	460	307

*Veteran and youth beds are included in the Total Beds column.

**Seasonal beds are not included in this table.

About 30 different agencies operate shelter and/or transitional housing in the community, with a wide range of public and private funding sources. Programs that share a common funding source tend to have similar features (for example, U.S. Department of Veterans Affairs (VA) funded Grant and Per Diem programs or CoC-funded transitional housing). However, for the most part, each program operates

independently according to their individual agency mission, philosophy, and history. Maximum lengths of stay, eligibility requirements, program rules, and services offered tend to vary widely across programs.

For many years, much of the focus in San Diego has been on making a shift from temporary winter shelter to more permanent forms of shelter to meet the needs of the unsheltered population more consistently. More recently, the emphasis has begun to shift toward how to make the year-round interim housing programs and transitional housing system more housing-focused and more effective at helping clients exit into permanent housing. Current efforts in this arena include:

- Interim Housing Toolkit. SDHC and LeSar Development Consultants have developed an Interim Housing Toolkit for our community that offers a range of practical strategies and policies for shelters and transitional housing to become more housing-focused (embracing a “housing first” approach, removing entry barriers, providing services that are housing focused) and how to be more data-informed. It also describes models for integrating interim housing into an overall Homeless Crisis Response System, including using shelter or transitional housing as “bridge” housing for individuals who have been matched to a housing program through Coordinated Entry and need a place to stay while conducting their housing search. This toolkit was the result of lessons learned from an SDHC evaluation of emergency shelter operations.
- Community Standards. The RTFH’s recently adopted Community Standards outline operational requirements and performance measures for shelters and transitional housing that are based on a “housing first” orientation and aligned with best practices.
- HUD CoC Funding Re-Allocation. Through the annual U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) funding process, the RTFH has been assessing the performance of existing transitional housing programs and has begun the process of re-allocating funds from those that are less effective at helping clients move rapidly into permanent housing. Re-allocated CoC funds are being used to create new rapid rehousing and permanent supportive housing.
- The VA-funded Grant and Per Diem Programs (GPD) programs, which provide more than 400 units of transitional housing to homeless Veterans, are being re-structured to align with new federal models, including Bridge Housing.
- New Access Centers. At the direction of Mayor Kevin Faulconer, The City of San Diego issued a Request for Statements of Qualification (RFSQ) in order to solicit feedback from service providers on the development of a facility where individuals can access core services and begin the process of securing permanent housing. The feedback the City received is being used to develop a Request for Proposals RFP which is expected to be released in Fall of 2017

What Is Needed:

Emergency shelters largely do not view themselves as part of an overall system, and the wide range of funding sources make it difficult to align all to a common set of operational and performance standards. Compared to other communities of comparable size, San Diego continues to invest in a large inventory

of transitional housing, even though this model has generally been proven to be ineffective in relation to its high costs and long lengths of stay. Critical needed changes the RTFH has identified include:

- Adoption and implementation of the Community Standards for shelters and interim housing. RTFH has developed a set of operational standards that will start to transition the existing shelter and interim housing programs to a housing-focused model. However, at present, the RTFH can only mandate that CoC-funded programs must adopt these standards. Developing a strategy to engage and work with non-CoC funded programs around the standards will be a key next step.
- Technical assistance to existing shelter and interim housing providers to implement the standards. Most providers in the community have expressed a willingness and, in some cases, eagerness to become more housing-oriented, but most also need technical assistance to make the transition. The toolkit developed by SDHC is a good starting place, but more intensive and individualized agency technical assistance will likely be needed.
- Continuing assessment and re-tooling of transitional housing: The inventory of transitional housing needs to be assessed on an ongoing basis to identify which programs are helping clients secure housing in a cost-effective way. Lower performing programs need to be re-tooled as shelter or interim housing, or re-allocated to create new rapid rehousing or permanent housing.
- Integration of shelters into Coordinated Entry: To ensure that the shelter and interim housing inventory is used most effectively from a system perspective, beds need to be prioritized for people who are unsheltered, while those who are experiencing housing instability are diverted from the system. To better manage shelter access, the shelter system needs to be integrated into Coordinated Entry.
- Connecting shelters to housing exits: Currently, most shelters operate independently from the broader housing system, and clients often cycle from the street to shelter and back to the street. To help providers become more effective at helping clients exit to permanent housing, San Diego will need to expand the inventory of rapid rehousing (see below) and establish stronger connections between shelters and rapid rehousing resources.

D System Exits: Housing Interventions

Housing is the only solution to homelessness. In a Homeless Crisis Response System, there are a variety of pathways into housing. Everyone is assumed to be “housing ready,” and people are matched to a housing intervention based on need – what is the least amount of assistance but for which they would remain homeless? Those with severe behavioral health disabilities and who have the longest histories of homelessness will require permanent supportive housing. But for many, particularly those experiencing homelessness for the first time or who have lower barriers to housing, a short-term subsidy or even no-cost problem solving approach can resolve their crisis.

The Homeless Crisis Response System will offer a range of interventions matched to need – listed below from lowest to highest intensity:

- *Housing problem solving*: Also known as “diversion,” providing information, mediation, advocacy, and problem-solving to help people “self-resolve” their housing crisis without financial assistance;
- *“Light touch” rapid rehousing (RRH)*: Limited financial assistance (such as rental deposit and first month’s rent), plus some assistance with housing location and landlord negotiation;
- *“Regular” rapid rehousing*: Short- to medium-term rental subsidy (3 to 12 months); housing-focused case management; housing location and landlord negotiation;
- *Rapid rehousing with Critical Time Intervention (CTI)*: Medium-term rental assistance with intensive services tapering off as the household stabilizes. This approach can target people who are chronically homeless, who then transition to regular affordable housing after the CTI period; and
- *Permanent supportive housing (PSH)*: Long-term rental subsidies or permanently subsidized units paired with intensive service for those with highest needs.

Also critical, though not necessarily a component of the Homeless Crisis Response System, is the expansion of the affordable housing inventory. Creating more units affordable at all income levels expands supply and frees up options for those with the lowest incomes. Creating units specifically targeted to people who are extremely low-income (30 percent of Area Median Income [AMI] and below) is critical for those with the lowest incomes (particularly people living on Supplemental Security Income) and for whom intensive services are not needed. According to the National Low Income Housing Coalition’s 2017 report *The Gap: A Shortage of Affordable Homes*, the number of units needed that are affordable to people at and below 30 percent of AMI in the San Diego Metropolitan Area is 86,542 units.¹ While meeting this need in full would likely also resolve homelessness in the region, achieving this housing production goal is much further out of reach than optimizing the homeless system.

What Is In Place

The San Diego region has a growing supply of permanent supportive housing. The 2017 Housing Inventory Count (HIC) recorded 2,511 total beds. The rapid rehousing inventory is much smaller in comparison, at only 706 total beds. Beds dedicated to Veterans represent more than 50 percent of the total inventory of permanent supportive housing and rapid rehousing, leaving relatively few beds of either type for the majority of the homeless population. The Veterans beds consist mostly of SSVF (rapid rehousing) and Veterans Affairs Supportive Housing voucher (permanent supportive housing) units.

Program Type	Family Beds	Adult-Only Beds	Child-Only Beds	Total Beds	Veteran Beds*	Youth Beds (up to age 24)*
Rapid Re-Housing	441	265	0	706	424	0
Permanent Supportive Housing	924	1,587	0	2,511	1,865	16

¹ http://nlihc.org/sites/default/files/Gap-Report_2017_interactive.pdf.

Other Permanent Housing	373	274	0	647	116	8
Safe Havens	0	42	0	42	1	0
Total	1,738	2,168	0	3,906	2,406	24

*Veteran and youth beds are included in the Total Beds column.

**Data does not include beds under development.

In recent years, the San Diego region has begun to invest greater resources in housing for people experiencing homelessness, and has launched a number of significant pilots and initiatives designed to expand access to housing for people who are homeless using a “housing first” approach.

- HOUSING FIRST – SAN DIEGO.** The San Diego Housing Commission’s (SDHC) homelessness action plan, launched on November 12, 2014, is rooted in the “housing first” model. In the first three years of this plan, SDHC directed more than \$64 million toward the creation of 523 permanent supportive housing units. In addition, SDHC has committed more than 1,800 federal rental housing vouchers to provide rental assistance to homeless San Diegans. SDHC also administers much of the community’s rapid rehousing inventory, which includes 25 SDHC-owned units dedicated to addressing homelessness through HOUSING FIRST – SAN DIEGO. The next phase of HOUSING FIRST – SAN DIEGO includes additional funds for the creation or preservation of 500 permanent housing units, as well as expanded rapid rehousing resources.
- Health and Human Services Agency (HHS) Efforts.** The San Diego County Health and Human Services Agency (HHS) has recently launched a number of permanent housing initiatives. Project One for All (POFA) pairs mental health treatment with housing vouchers from each of the housing authorities throughout the region to create permanent supportive housing (PSH) opportunities for people with a serious mental illness and experiencing homelessness. The initial goal is to provide housing and services for 1,250 people. This project has already housed about 375 individuals to date. Coming online soon will be the Whole Person Wellness pilot, funded through the State’s new Medi-Cal waiver program providing intensive case management and navigation assistance to individuals who are high utilizers of multiple systems, including helping them access housing. The County also has invested \$43 million to develop PSH for people with a serious mental illness through Mental Health Services Act funding. A planned addition coming in 2018 will be a Drug Medi-Cal Waiver pilot targeting people who are homeless with substance use disorders. The County has also launched a variety of other housing programs for people being served through the safety net system, such as rapid rehousing for people receiving CalWORKs, and a new rapid rehousing program for families involved in the Child Welfare System. Other County efforts are described in Appendix C.
- Landlord engagement and recruitment.** Homeless system providers and funders are growing to understand the critical need for outreach and engagement with landlords to identify and make available units for homeless people, particularly those who have secured a rental subsidy and need to locate a unit. The San Diego Housing Commission (SDHC) and the County Housing and Community Development Services (HCDS) have both implemented extensive landlord engagement and recruitment efforts that have been extremely successful in helping to enlist landlords to permanently house Veterans experiencing homelessness regardless of discharge

status. The County's program has expanded to recruit landlords to permanently house people with a serious mental illness, and SDHC's program will expand to assist all populations experiencing homelessness on July 1, 2017.

- SDHC Moving On Program. Much of the existing inventory of permanent supportive housing is occupied by individuals who were once homeless and in need of intensive services but have now stabilized and no longer need this high intensity intervention. However, since most have only Supplementary Security Income (SSI), they continue to need a deep rental subsidy. SDHC is piloting a "Moving On" program offering 25 of these tenants the opportunity to transition to regular Moving To Work (MTW) rent subsidies with mental health treatment provided by HHSA. This program will serve up to 50 people by the end of the third year of implementation.
- Affordable housing development. Though not directly part of the homeless system, efforts to expand affordable housing supply throughout the region are also part of the solution to homelessness. Nonprofit developers and cities are the main drivers of production, with the City of San Diego taking the lead on many larger initiatives. One focus of the newly seated City Council Select Committee on Homelessness will be strategies to increase affordable housing supply, including a review of public lands for affordable housing development opportunities, creating a community land trust, pursuing an adaptive reuse ordinance, and encouraging the development of second dwelling units, micro-units, and tiny homes. The County is also developing an affordable housing strategy and recently announced a significant investment in the development of additional permanent supportive housing units.

What Is Needed:

- Expanded supply of permanent supportive housing. For a community of its size and with the size of the homeless population, San Diego has a relatively small inventory of permanent supportive housing, particularly for the non-Veteran population. While new initiatives are starting to increase this inventory, more will be needed to fully address the need for housing of people experiencing chronic homelessness. Additionally, much of the inventory being added uses funding streams for services that are very targeted towards particular populations of people experiencing homelessness – such as Project One for All which can only serve people with serious mental illness, or Whole Person Wellness which can only serve high utilizers of other systems. Adding units that have more flexible eligibility requirements will be critical for the system to serve all the chronically homeless people who could be successfully housed with permanent supportive housing.
- Refined targeting of permanent supportive housing and connection to Coordinated Entry. Community leadership, staff, and key stakeholders and partners have developed innovative and high-quality permanent supportive housing programs. To fully achieve the objective of becoming a system, these strong programs will need to make some shifts to become fully part of a greater whole. As noted in the section on system access, the existing coordinated entry system needs to be refined to more effectively engage, prioritize, and house people with the longest histories of homelessness and greatest service needs. To accomplish this goal, the access

process for permanent supportive housing must be refined so that chronically homeless people identified and prioritized through coordinated entry can more efficiently access these units. Improved connections between coordinated entry and all permanent supportive housing programs will be needed, and entry criteria and processes streamlined, so that the existing permanent supportive housing programs can more effectively and quickly serve people with serious disabilities who are living outside.

- Expanded rapid rehousing inventory. While San Diego's permanent supportive housing inventory is relatively small in relation to the need, the rapid rehousing inventory is even more limited. As with permanent supportive housing, much of the inventory is restricted to Veterans. There is little to house the rest of the homeless population. Bringing rapid rehousing to scale and offering a range of intensity (light touch, regular, paired with CTI) will be crucial to meeting the needs of the vast majority of people experiencing homelessness – most of whom are not chronically homeless. Rapid rehousing programs also should align to best practices and RTFH's adopted Community Standards, including employing a progressive engagement approach (so that people do not receive more assistance than they need to end their homelessness) and minimal barriers to participation.
- Expanded housing problem-solving throughout the system. As noted above under system access, the San Diego homeless system is only beginning to integrate diversion and housing problem-solving into its work. To make faster progress on reducing homelessness, this activity needs to be understood and practiced throughout the system, so that each time a homeless individual or family touches the system, they are immediately engaged in a problem-solving conversation about housing. In the current system, most of the contacts with people experiencing homelessness are oriented around services and treatment.
- Scale Up the SDHC Moving On Program. The current Moving On program is promising and a best practice. It is also small and will only free up a small number of permanent supportive housing units. As this pilot rolls out, its effectiveness will be assessed and lessons learned will be built upon to increase the number of people who can transition to affordable housing and expand capacity in permanent supportive housing for those currently living outside.

E. System Infrastructure – Data, Evaluation, Training, Capacity Building

A robust system infrastructure is needed to support system change. In this area, San Diego has many very strong components to build on.

What Is In Place:

- Homeless Management Information System. The RTFH has dedicated significant efforts to building a robust Homeless Management Information System (HMIS) that integrates high-quality data from participating providers. After a long and challenging process, the RTFH is poised to complete the opening of the HMIS system for data sharing, including executing data sharing authorization agreements. Opening the HMIS will be critical for the success of

Coordinated Entry in particular and to improve coordination among homeless system programs in general.

- We All Count. San Diego is one of only a handful of communities with a year-round, fully-staffed annual Point-in-Time Count effort. Conducting the Point-in-Time count every year, rather than just at the HUD-required two-year intervals, provides the community with critical information to track trends in the homeless population.
- Data analysis and system dashboards. In collaboration with San Diego State University, the RTFH has developed a framework to analyze and present system level data documenting client pathways through the homeless system for all the major population groups (adults, families, youth, Veterans and chronically homeless people).
- Policies, Standards and Performance Targets. RTFH has adopted Community Standards that provide consistent operational requirements and performance expectations for all program types. At the May 2017 Governance Board meeting, RTFH staff were directed to work with funders to integrate these standards into contracts with homeless providers, including a requirement to participate in Coordinated Entry.
- Training and technical assistance. San Diego has been fortunate to receive technical assistance from a number of national experts to assist with a range of system planning efforts, including Abt Associates, Community Solutions, the Corporation for Supportive Housing, LeSar Development Consultants, OrgCode, and others. San Diego's chapter of Funders Together to End Homelessness (FTEH) has also dedicated significant resources to system change and infrastructure initiatives, including support for the annual Point-in-Time Count, the RTFH/RCCC merger, provider trainings, and learning summits.

What Is Needed:

- Expanded participation in HMIS. Currently, there are many non-CoC/Emergency Solutions Grant (ESG) funded programs that do not enter data into HMIS. Expanding participation will be critical so that data about all the interventions in the community can be considered in the analysis of system and project performance and be included in the overall system transformation plan.
- Expanded data analysis with a focus on system performance and right-sizing. The RTFH needs to take the next step to expand its data analysis capacity, with a focus on conducting performance assessment and pinpointing system strengths and weaknesses. Using HMIS data for predictive modeling and determining what scale of interventions are needed to create a "right-sized" system with an appropriate housing solution for each homeless person is a critical next step.
- Provider training, technical assistance, and capacity building to support system change and culture change. Building upon much of the training and capacity building work already underway, the RTFH will need to proactively work with the entire community of stakeholders, and particularly housing and service providers, to understand data-informed homeless system

planning and their role in making the shift from programs to system. Providers have indicated they are ready and willing to take this journey, but need information and support. Opportunities for two-way dialogue, such as listening sessions and learning collaboratives will be critical for building the system’s capacity to be more data-driven, housing-focused, and person-centered.

VI. Action Steps: The Next 12 Months

In Fiscal Year 2017-2018, the RTFH will spearhead a Phase Two planning process to develop a detailed, multiyear implementation plan for a Homeless Crisis Response System. However, this does not mean system and program development work will come to a stop. The many initiatives already underway will continue to roll out, while the current inventory of programs will continue to operate. However, RTFH is dedicated to ensuring that these efforts are aligned with this Strategic Framework to make the greatest possible impact on homelessness. Below is an outline of high-priority action steps for the next 12 months to guide movement forward while RTHF simultaneously develops its more comprehensive implementation plan.

System Component	Action Steps for FY 2017-2018	Responsible Entity
Leadership, Governance, Funding	Convene public and private system funders – inventory funding streams and identify immediate opportunities for alignment (adopting housing-focused policy, joint Requests for Proposals, common standards, agreement to prioritize chronically homeless people, etc.)	RTFH Board of Directors
	Evaluate models for creating a more coordinated regional funding strategy – such as a Funder Collaborative (this could build upon existing efforts)	RTFH, FTEH
	Launch engagement and education effort with smaller cities and unincorporated County areas. Present Strategic Framework as a starting point for discussion.	RTFH Ad Hoc Committee for the Community Plan and Committee on Intergovernmental Relations
System Access: Outreach, Coordinated Entry and Diversion	Convene Coordinated Entry System re-design working group. Top priority design issues: <ul style="list-style-type: none"> • Refine prioritization policy so that people with longest histories of unsheltered homelessness and highest service needs are fast-tracked for housing. • Identify process and policy to create a shorter and more up-to-date list of currently homeless people who are prioritized for a rapid rehousing or permanent supportive housing unit. • Identify steps to better integrate outreach, Coordinated Entry and permanent supportive housing to more quickly move top priority 	RTFH to coordinate with representatives from street outreach and Permanent Supportive Housing providers (including HHSA)

System Component	Action Steps for FY 2017-2018	Responsible Entity
	unsheltered chronically homeless people into housing. Simplify work flow to reduce paperwork and other barriers and shorten waiting times.	
	Convene all the existing outreach teams for a summit to discuss what they see as their role and brainstorm immediate ways they can start being more housing-focused; identify what training or other resources they need to employ a housing-focused response.	RTFH
	Convene a learning summit on housing problem-solving and diversion for all providers in the system.	RTFH
Emergency Responses: Shelter, Transitional and Interim Housing	Work with public and private funders to integrate RTFH Community Standards into all funding agreements and contracts. Convene providers (individually or in groups) to identify what technical assistance they need to align to the standards.	RTFH
	Use 2017 CoC Notice of Funding Availability process to continue assessing performance of transitional housing and re-allocate funds from low performers as needed.	RTFH
	Require Coordinated Entry participation as a condition of CoC funding in 2017 for all program types, and set a date for these programs to begin accepting Coordinated Entry referrals.	RTFH
System Exits: Housing Interventions	Convene workgroup to refine targeting and access process for major permanent supportive housing initiatives to maximize use of these resources for chronically homeless individuals with longest histories of being unsheltered. (See above under Coordinated Entry)	RTFH, HHSA, Permanent Supportive Housing providers
	Approach business community for investment in large scale rapid rehousing initiative. Funding could be scaled to make a major impact on size of family homeless population and a measurable impact on single adult homelessness. San Francisco's Heading Home initiative can be a model (multimillion dollar investment by tech sector; managed by Department of Homelessness and Supportive Housing).	RTFH Chair and Vice Chair; Executive Committee
System Infrastructure: Data, Evaluation, Training, Capacity Building	Invest in data analysis needed by system leadership to inform planning and investment decisions. Including: project-level and system-level performance analysis, cost effectiveness, typology of single adult and family homelessness, predictive modeling and right-sizing analysis to determine what mix of housing interventions are needed to effectively end homelessness in the region.	Focus Strategies
	Convene and facilitate ongoing provider learning collaborative for two-way communication about system	Focus Strategies to facilitate.

System Component	Action Steps for FY 2017-2018	Responsible Entity
	change and culture change as San Diego’s homeless system become more data-driven, housing-focused, and person-centered. Offer opportunity to providers to share concerns and training needs; provide information and engage in problem solving.	

VII. Conclusion

While the work detailed above lays out an ambitious agenda, these items are simply the most pressing starting points. It can be tempting to look for quick solutions to a visibly growing problem, but seeing reductions in the number of people experiencing homelessness will require investing in system changes that will actually solve the problem. Building a major system of care that serves people with complex needs using both public and private dollars is a highly complex and challenging task. Leadership and funders will need to shift how they do business and system stakeholders will need to learn a new language and set of skills. This Strategic Framework lays out a path to begin aligning an array of programs and initiatives into a cohesive, streamlined system. The Implementation Plan that will come next will include measurable objectives and carefully calibrated action steps designed to achieve the greatest possible reduction in homelessness given available resources. Success year-over-year will be measured by changes in the size of the homeless population and performance of the system compared to established targets. This work is difficult – and also extremely important. Diligently working toward these changes will have an enormous impact on the lives of people experiencing homelessness and will significantly improve overall community well-being.

Appendix A Summary of Available Data

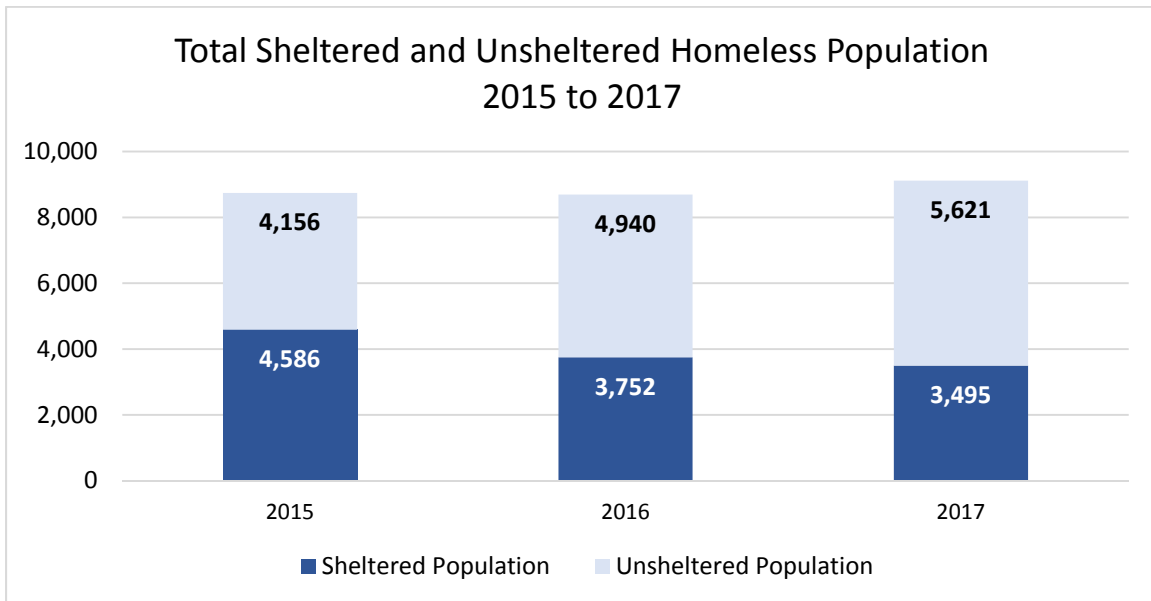
During Phase I of our work for the Regional Task Force on the Homeless (RTFH), Focus Strategies conducted a preliminary review of available data related to the state of homelessness in San Diego County. This document provides some basic information on San Diego’s homeless population dynamics and housing inventory available for people experiencing homelessness, as well as local homelessness in relation to national trends.

The second phase of work will include a deep set of analyses of the region’s homeless population, the performance of existing programs, and detail the interventions needed at the scale at which they are needed to begin turning to curve on rising homelessness in San Diego County. That data and analyses will be provided toward the end of Phase II.

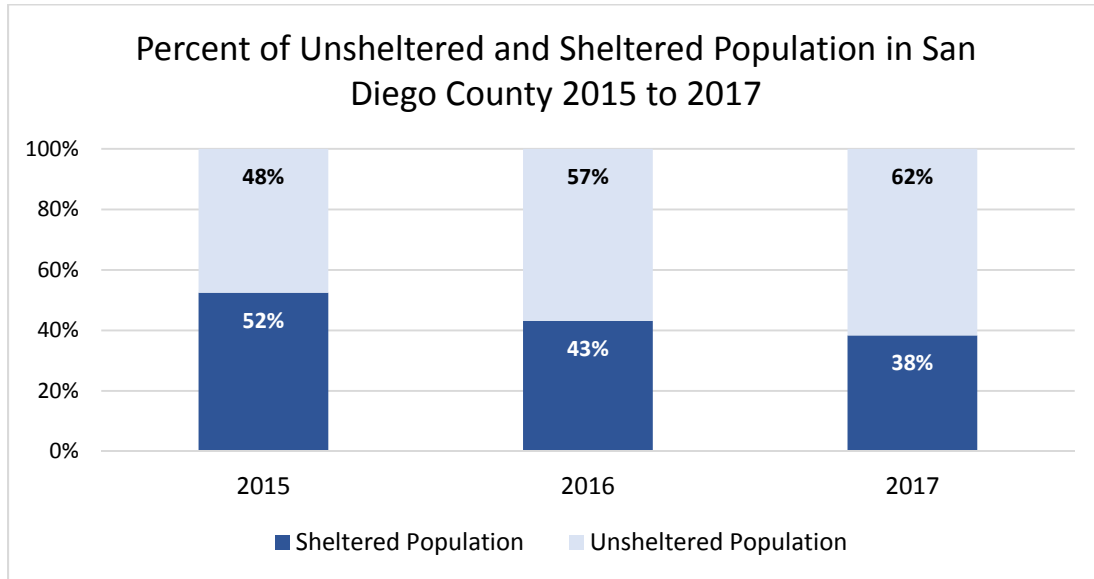
State of Homelessness in San Diego County

The City and County of San Diego ranks as the fourth largest homeless population in the United States – only preceded by New York City; the City/County of Los Angeles; and Seattle/King County, Washington – based on Point In Time (PIT) Count data reported by the Department of Housing and Urban Development (HUD). In 2017, 9,116 people were homeless on any given night in San Diego County – of which 62% (3,495) were unsheltered (living outside, in a car or tent, or other unsheltered locations). These findings represent a 5% increase in overall homelessness and a 13.8% increase in unsheltered homelessness between 2016 and 2017.

The following graph shows San Diego County’s total number of people experiencing homelessness, as well as the distribution of people who were sheltered and unsheltered from 2015 to 2017.



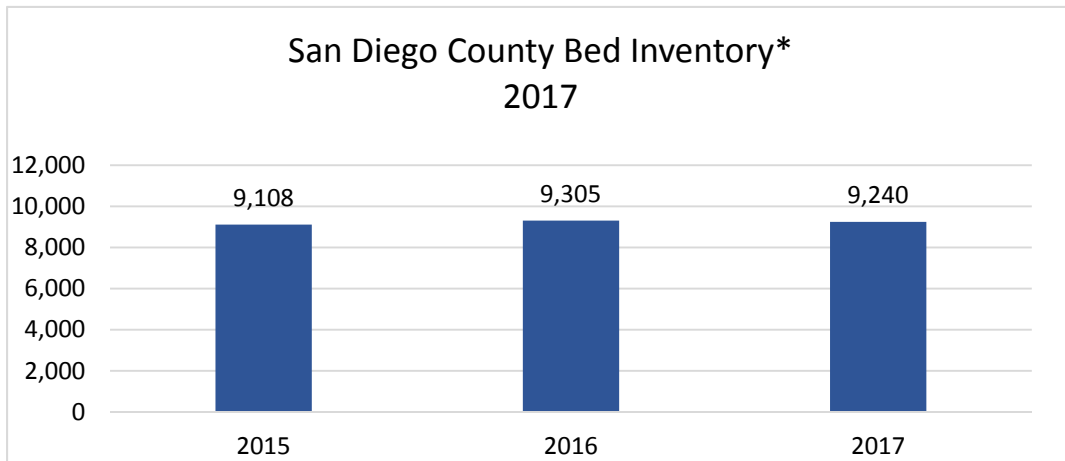
The next chart shows the percentages of people who were sheltered and unsheltered within the overall homeless population during the years 2015 to 2017.



Housing Inventory in San Diego County

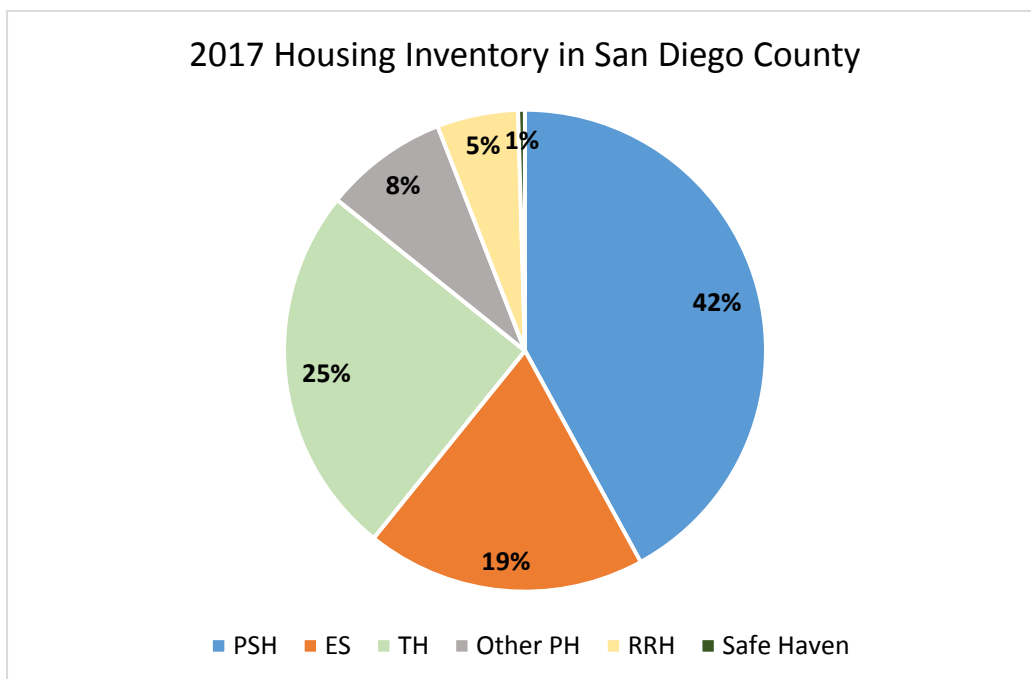
The 2017 We All Count Annual Report, San Diego County’s PIT count report, also provides an overview of the County’s inventory of housing interventions to people experiencing homelessness. The Housing Inventory Count (HIC) reports the existing quantity of the beds and units for this population across both temporary interventions (i.e. emergency shelter, transitional housing) and permanent housing solutions (i.e. permanent supportive housing, rapid rehousing); as well as the inventory needed to serve all people experiencing homelessness in San Diego County, based on information from the County’s Homeless Information Management System (HMIS) database.

Currently, San Diego County has 9,240 total beds across all intervention types for people experiencing homelessness, a slight decrease from last year’s total 9,305 beds.



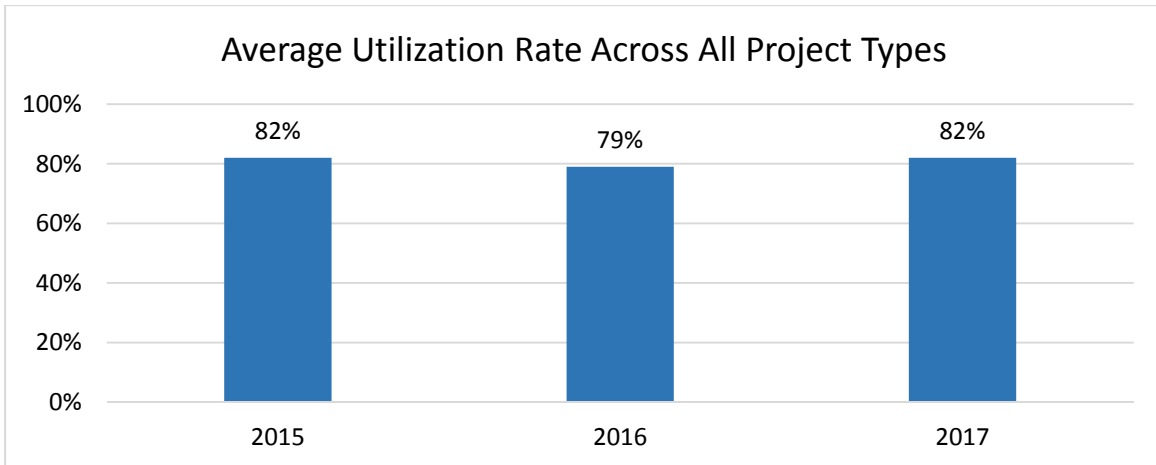
**Includes emergency shelter, safe haven, transitional housing, permanent supportive housing, rapid re-housing, and other permanent housing*

The following chart shows the percent distribution of bed inventory by intervention type.



In addition, the 2017 PIT count report shows that San Diego County had an 90% utilization rate across all emergency shelter; 87% utilization rate for PSH; 82% for transitional housing; 32% for other permanent housing; and 100% for RRH and safe havens during 2017.

The following chart provides utilization rates across all project types from 2015 to 2017.



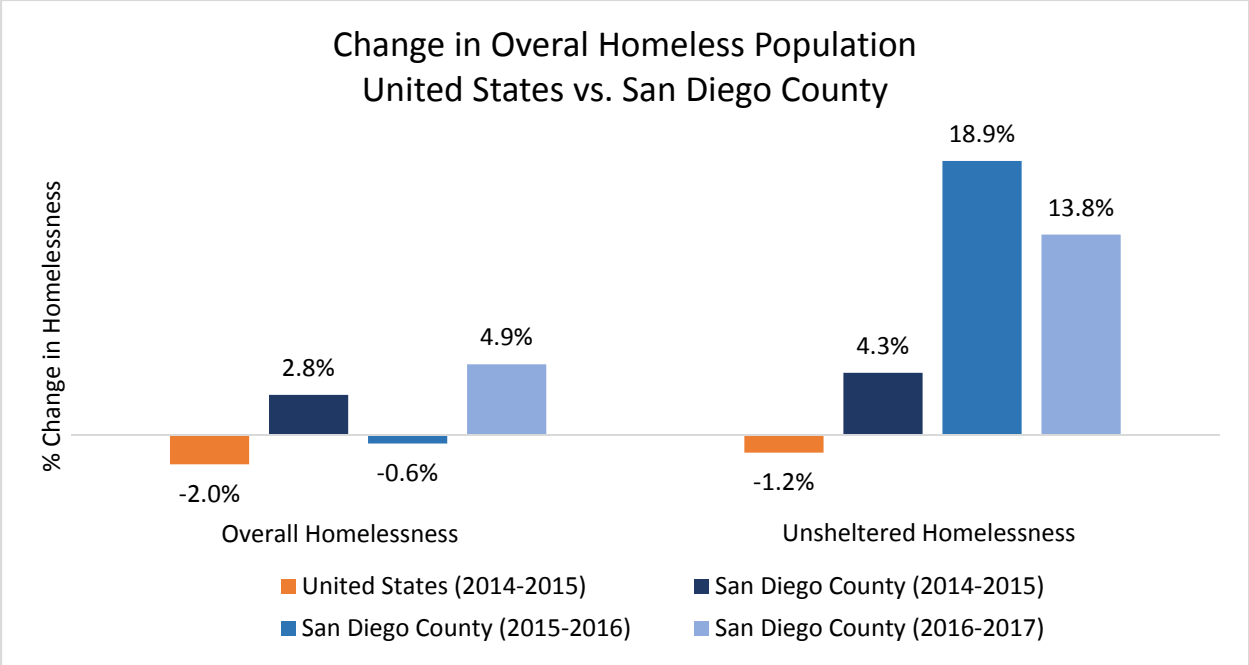
Changes in Homelessness as Compared to the Nation

The section presents fluctuations in homelessness year to year between 2014 and 2017 in San Diego County compared to national trends in homelessness as reported by the National Alliance to End Homelessness (NAEH) in their *The State of Homelessness in America 2016* report.² As homelessness has declined nationally, falling 2% from 2014 to 2015, RTFH's We All Count reports from 2014 and 2015 show a 2.8% increase in homelessness in San Diego County. Homelessness fell slightly (almost 1%) between 2015 and 2016, but rose significantly (4.9%) from 2016 to 2017. Similarly, as the unsheltered population has decreased 1.2% nationally, San Diego County's unsheltered population rose nearly 4.3% from 2014 to 2015, and continued to rise significantly over the following two years.

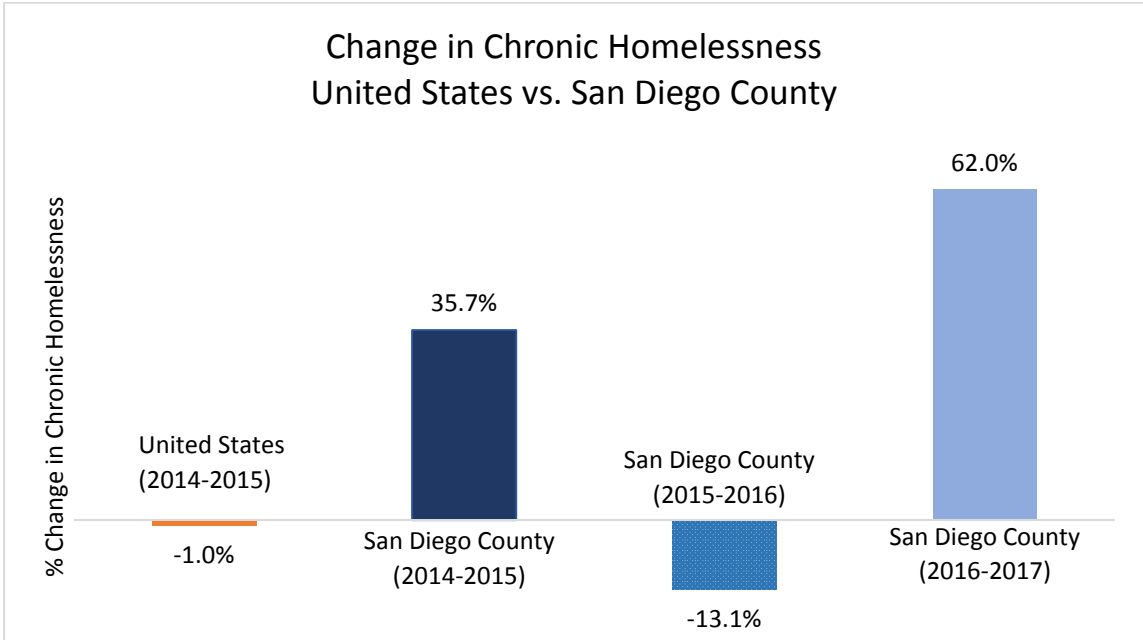
Many, but not all, large communities on the West Coast have experienced similar increases in homelessness, as housing markets continue to tighten and the cost of living surges. Even in communities where homelessness has not increased significantly, homelessness is becoming an increasingly visible issue, with many communities witnessing an increase in encampments and other hand built structures.

The following chart shows these trends in both unsheltered and overall homelessness on both a national and County level. NAEH's most recent *The State of Homelessness in America 2016* report reflects PIT data from 2014 to 2015 for the United States; changes in homelessness in San Diego came from PIT data from RTFH's 2014 to 2017 We All Count reports. While more current national data is not yet available, San Diego continues to show increases in both areas.

² NAEH's *The State of Homelessness in America 2016* report, <http://endhomelessness.org/wp-content/uploads/2016/10/2016-soh.pdf>

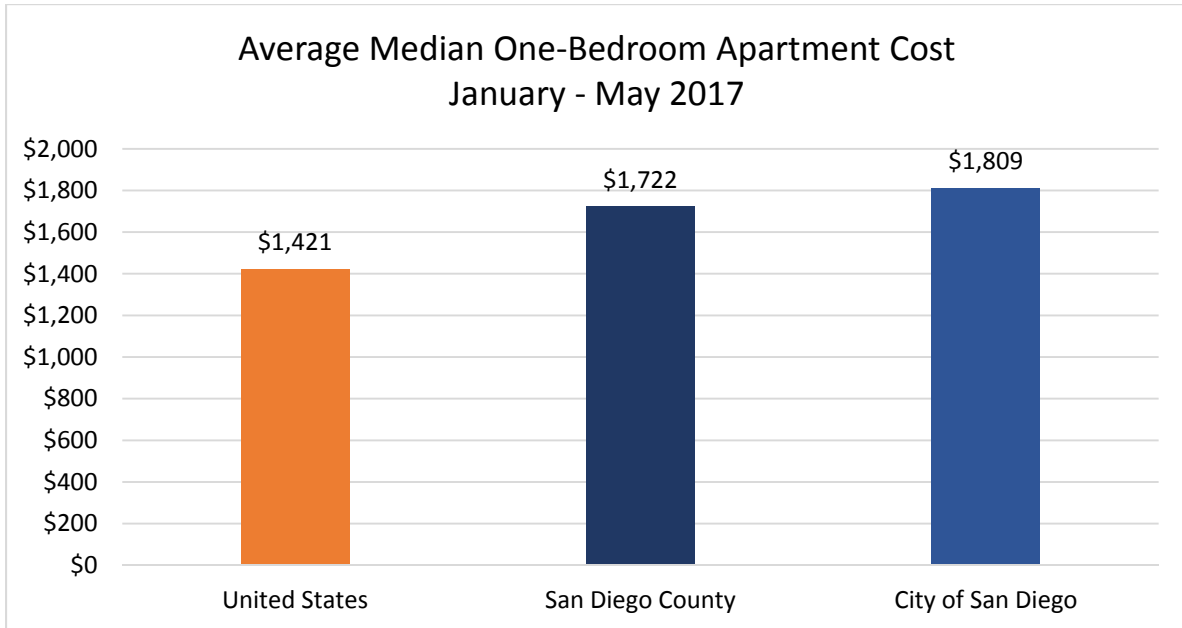


Additionally, San Diego saw significant increases in its chronic homeless population in recent years. While chronic homelessness fell 1% between 2014 to 2015 nationally, the County’s chronic homeless population rose a staggering 35.7% between the same years. In the following years, San Diego County’s chronic homeless population dropped 13.1% from 2015 to 2016 and then rose once again 62% from 2016 to 2017. The following graph displays these dynamics.



San Diego Housing Market

Stakeholders interviewed for this Strategic Framework noted the County's high cost of living and ever-tightening housing market. In fact, a May 2017 study by real estate company Zumper³ found that San Diego, the eighth largest metropolitan area in the United States, is also the 12th most expensive city for renters. While the national average median cost for a one-bedroom apartment was approximately \$1,420 between January and May 2017, the average median cost for a one-bedroom was about \$1,720 in San Diego County and \$1,800 in the City of San Diego – according to data⁴ published by Zillow, an online real estate database.



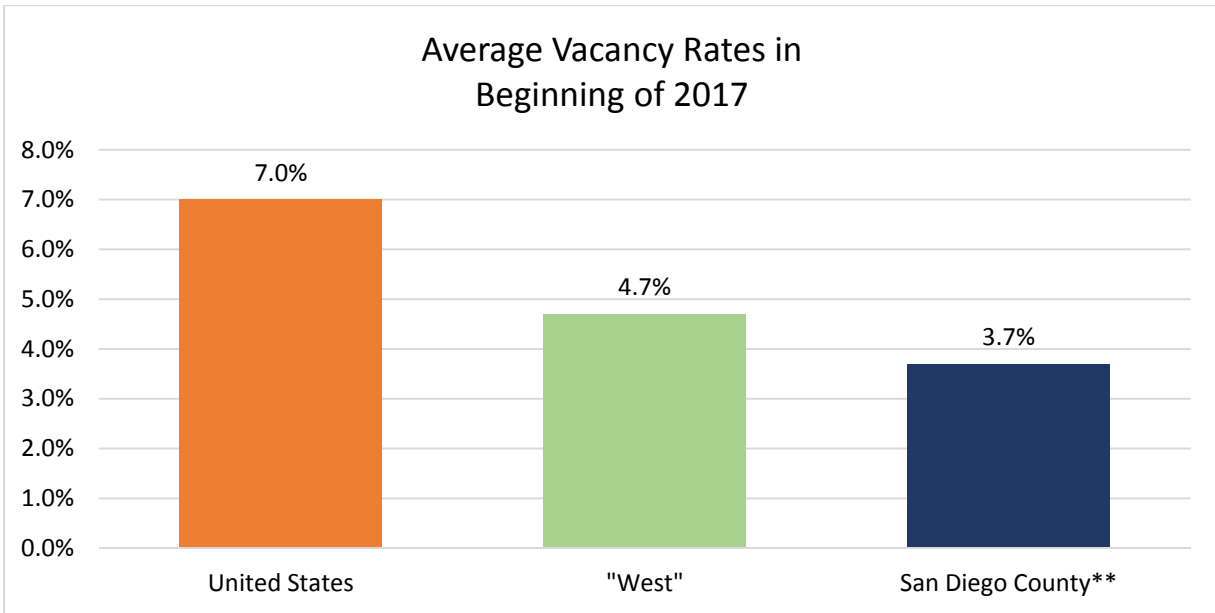
In addition to a costly rental market, San Diego County had a vacancy rate of 3.7% for all rental units during the first quarter of 2017 – down from 5.4% from the same time last year (2016).⁵ The United States Census Bureau⁶ reported a significantly higher national average vacancy rate of 7%, and slightly higher 4.7% vacancy rate for states in the “West.”

³ <http://www.sandiegouniontribune.com/business/real-estate/sd-fi-san-diego-renters-20170502-story.html>

⁴ Zillow national rental data, <https://www.zillow.com/research/data/#rental-data>

⁵ <http://www.kpbs.org/news/2017/jun/26/san-diego-apartment-vacancy-rate-plunges/>

⁶ <https://www.census.gov/housing/hvs/data/rates.html>



****Data from the San Diego County Apartment Association**

Within the large geographical expanse of San Diego County, the central “city” area reported the lowest vacancy rates (3.3%), with East and South County matching the overall County average of 3.7%. North County had the least tight rental market at a 5.1% vacancy rate.

The following table provides a breakdown of vacancy rates for each part of the County – the City, East County, North County, and South County.

Area of San Diego County	Average Vacancy Rate – Q1 2017
City of San Diego	3.3%
East County	3.7%
North County	5.1%
South County	3.7%
All of San Diego County	3.7%

San Diego has high rents and low vacancy rates which means successfully addressing homelessness is more challenging. There are communities across the nation facing similarly tight and expensive housing markets that have reduced homelessness through strategic action tailored to the needs of the population experiencing homelessness locally. Phase II of San Diego’s Community Plan will analyze data to show the types and scale of the investments that are needed, and make recommendations about how best to achieve those improvements and efficiencies to achieve reductions in homelessness.

Appendix B List of System Documents Reviewed

RTFH Documents

1. 2015 We All Count Results, RTFH
2. 2017 We All Count Results, RTFH
3. 2017 Housing Inventory Count (HIC)
4. 2017 Point in Time Count (PIT) – as submitted in HDX
5. 2017 NOFA Scoring Tool Development Q&A, RTFH – *March 27, 2017*.
6. 2016 Scoring Criteria Feedback Q&A, RTFH – *September 2016*.
7. 2016 San Diego CoC Application, RFTH – *September 2016*.
8. 2016 Project Listings for CoC Priority Listings, RTFH – *September 2016*.
9. Executive Summary 2016 Continuum of Care Program NOFA, RTFH – *July 2016*.
10. 2016 NOFA Summary and Highlights, RTFH – *July 2016*.
11. FY17 RTFH Amended and Restated Bylaws Draft, RTFH, *January 5, 2017*
12. FY17 RTFH Governance Charter Draft, RTFH, *January 5, 2017*
13. Regional Task Force to Homeless Community Standards, *May 2017*

Housing First – San Diego (SDHC)

14. Housing First – San Diego SDHC’s Homelessness Action Plan 2014-2017, San Diego Housing Commission.
15. Housing First San Diego News Release: Award Development Funds, San Diego Housing Commission – *2014*.
16. Housing First San Diego News Release: Commit up to 1,500 Federal Rental Housing Vouchers, San Diego Housing Commission – *2014*.
17. Housing First San Diego News Release: Renovate Hotel Churchill, San Diego Housing Commission – *2014*.
18. Housing First San Diego News Release: Dedicate SDHC-Owned Housing Units – 25 for Homeless San Diegans, San Diego Housing Commission.
19. Housing First San Diego News Release: San Diego Housing Commission and SDSU launch unprecedented partnership to provide housing for students who have been impacted by homelessness, San Diego Housing Commission – *December 2015*.
20. The 1,000 Homeless Veterans Initiative of Housing First, Report to the City Council and The Housing Authority of the City of San Diego, San Diego Housing Commission – *February 2016*.
21. Housing First San Diego News Release: Housing our Heroes – Landlord Benefits Fact Sheet, San Diego Housing Commission.
22. NOFA Request for Applications – 1,000 Homeless Veterans Initiative, San Diego Housing Commission – *March 2, 2016*.
23. Interim Housing Toolkit, A Guide to Operate an Effective Program, San Diego Housing Commission, *May 2017*.

City of San Diego Consolidated Plan, Action Plans, CAPER

24. Fiscal Year 2015-2019 Consolidated Plan and Fiscal Year 2015 Action Plan, The City of San Diego.
25. City Fiscal Year 2018 Draft Annual Action Plan, including Attachment B: Grantee Unique Appendices, The City of San Diego – *March 2017*.

26. Consolidated Annual Performance and Evaluation Report (CAPER) FY2016, including attachments and Supplements, The City of San Diego.

Fair Housing

27. San Diego County Regional Analysis of Impediments to Fair Housing Choice 2, San Diego Regional Alliance for Fair Housing – *May 2015*.

City Council Meeting on Homelessness

28. Updates on Regional Efforts to Reduce Homelessness, SDHC, City of San Diego, San Diego County – *March 20, 2017*.
29. Update on City's Efforts to Reduce Homelessness Presentation, City of San Diego – *March 20, 2017*.
30. Ending Homelessness: County Partnerships Presentation, County of San Diego – *March 20, 2017*.
31. Downtown Partnership Homeless Count Graphic, San Diego Downtown Partnership – *March 20, 2017*.
32. Amikas Presentation to City Council, Amikas Housing Solutions – *March 20, 2017*.
33. CSH Letter to City Council, Corporation for Supportive Housing (CSH) – *March 20, 2017*.
34. Notice of Motion and Motion to Declare San Diego Municipal Code 86.0137(f) Unconstitutional, Colleen Cusack – *March 20, 2017*.
35. Complementary Homeless Strategies for the City of San Diego Memo to the Mayor's Office, Councilmember Christopher Ward – *March 20, 2017*.
36. Request for Statement of Qualifications Number 10084926-17-F – Support Services Assessment Centers.
37. Report to the City Council and the Housing authority of the City of San Diego – The 1,000 Homeless Veterans Initiative HOUSING FIRST – SAN DIEGO, the San Diego Housing Commission's three-year Homelessness Action Plan (014-17), SDHC, February 9, 2016.

Moving to Work Annual Plans and Reports

38. FY2018 Moving to Work Annual Plan, San Diego Housing Commission – *April 15, 2017*.
39. FY 2016 Moving to Work Report Draft to HUD, San Diego Housing Commission – *September 27, 2016*.

County of San Diego Behavioral Health Services

40. Whole Person Wellness PowerPoint, County of San Diego HHSA.
41. Five Year Behavioral Health Strategic Housing Plan, County of San Diego HHSA.
42. Project One for All Referral Process; County of San Diego

North County

43. Winter Shelter Report 2015-2016, RTFH – *August 2016*.
44. Section 8 Existing Housing Allowances Voucher Payment Standards, City of Oceanside – *October 1, 2016*.

East County

45. Article: "East County creates task force to deal with homeless," Union Tribune – *November 18, 2016*.

46. Article: "Groups meet to find solutions to East County homelessness," Union Tribune – *January 24, 2017*.
47. East County Regional Homeless Task Force, Strategic Plan for 2017-2018, The Chamber San Diego east County.
48. East County Homeless Task Force Request for the City of El Cajon 2017-2018, East County Homeless Task Force.

Other Documents

49. Proposed Fiscal Year 2016 Affordable Housing Fund Annual Plan, San Diego Housing Commission – *March 16, 2015*.
50. 2015-2016 Fiscal Year Annual Report and Highlights, San Diego Housing Commission – *October 31, 2016*.
51. Repayment Agreement By and Between The Redevelopment Agency of the City of San Diego and the City of San Diego, The Redevelopment Agency of the City of San Diego and the City of San Diego – *June 30, 2010*.
52. TOT Ballot Measure Maximizing the Awareness, Monica Ball, UPLIFT.
53. Organizational Assessment-Final Report for the San Diego RTFH, RTFH, Org Code Consulting, *June 1, 2017*.

Appendix C System Inventory

This appendix presents a summary of existing efforts to address homelessness throughout the San Diego Region. It captures the major system components currently in place or in the planning phase, but is not intended to be fully encyclopedic of every program or project that addresses homelessness; nor does it capture the broader work on affordable housing taking place in the region.

1. Homeless System Planning and Funding Entities

There are many existing entities that are working to develop and implement plans and initiatives to address homeless, including some that are county-wide and others with more local (city or regional) focus. The table below summarizes the main planning efforts currently ongoing in the community.

Planning/Funding Entities and Initiatives	Geographic Coverage	Brief Description
Regional Task Force on the Homeless (RTFH)	Countywide	Recently merged with RCCC. Currently oversees development of this Community Plan, CoC funding and polices governing CoC funded programs, data gathering and analysis, coordinated entry. (See sections below for additional details)
San Diego City Council Select Committee on Homelessness	City of San Diego	Formed in June 2017 to develop coordinated City policy on the issue of homelessness. Select Committee consists of 4 City Council Members: Georgette Gomez, Lorie Zapf, Chris Cate, and Chris Ward (chairman).
City and County of San Diego Leadership Collaborative	Countywide	On a regular basis, principals and senior staff from the City, SDHC, and County meet to discuss programs and policies related to homelessness.
San Diego Housing Commission (SDHC) – HOUSING FIRST - SAN DIEGO Action Plan	City of San Diego	SHDC’s homeless action plan for 2014 to 2020. Key initiatives include: investment of SDHC funds to create PSH and RRH; landlord outreach and engagement (Housing our Heroes). (See sections below for additional details.)
County of San Diego Integrative Services Advisory Committee	Countywide	Guides implementation of the County’s integrated work on housing, health, and social services, with a focus on Medi-Cal beneficiaries who are homeless and high users of multiple systems.
County of San Diego HHSA Five Year Behavioral Health Strategic Housing Plan	Countywide	The County’s Behavioral Health Services (BHS), with TA from the Corporation for Supportive Housing (CSH), has developed a five-year plan to maximize housing options for BHS clients, many of whom experience homelessness. The plan includes a significant focus on strategies to expand the community’s supply of permanent supportive housing, as well as other interventions.

Planning/Funding Entities and Initiatives	Geographic Coverage	Brief Description
Funder’s Together to End Homelessness	Countywide	The San Diego chapter of Funders Together to End Homelessness was formed in 2013 and brings together private foundations to pool funding for investments to address homelessness, with a particular focus on system change efforts.
San Diego Business Collaborative	Countywide; focus on Downtown San Diego	A group of business owners and leaders have been meeting regularly to discuss strategies for addressing homelessness in the region, and particularly in the Downtown core.
Alliance for Regional Solutions	North County	Collaborative created in 2006 to coordinate response to homelessness among North County communities. Brings together representatives from cities, non-profits, business community and other stakeholders.
East County Regional Homeless Task Force	East County	In 2016, East County San Diego business owners, civic leaders and law enforcement officials created a task force to develop regional approach to homelessness in East County. The Task Force is coordinated by the East County Chamber of Commerce.
El Cajon Collaborative, Homeless Services Work Group	El Cajon	Develops initiatives and projects to address homelessness in the City of El Cajon, in coordination with the local Chamber of Commerce.
Encinitas Advisory Committee on Homelessness	City of Encinitas	Advises the City on its response to homelessness in Encinitas. Instrumental in creating a pilot project to find permanent housing for 25 homeless veterans and develop a model to continue service.
South Bay Homeless Advocacy Coalition	South County	South Bay Homeless Advocacy Coalition meets as needed for information sharing and problem solving around homeless services and resources in the South County.
Downtown San Diego Fellowship of Churches & Ministries	Downtown San Diego	Faith-based and civic organizations collaborating to have a positive impact on downtown San Diego; with a focus on planning to address homelessness.
Built for Zero	Countywide	Coordinated by RTFH, Built for Zero is San Diego’s implementation of a national change effort to end veteran and chronic homelessness.
San Diego Re-Entry Roundtable	Countywide	A group of multi-disciplinary stakeholders working to develop strategies to promote the safe and successful return of offenders to the community. A key focus is preventing homelessness among the re-entry population.

2. System Access: Coordinated Entry and Homeless Outreach

The San Diego region has a number of different initiatives in place to assist homeless people to access needed services, shelter and housing. The RTFH coordinates the regional Coordinated Entry System (CES) for the San Diego Continuum of Care (CoC). A number of different entities provide a range of outreach activities as well as information and referral services.

Project	Geographic Coverage	Brief Description
RTFH Coordinated Entry System – Phase One	Countywide	Phase One of the CES integrates rapid re-housing and permanent supportive housing programs receiving CoC funding and some other PSH projects. Assessments are conducted using a “no wrong door” approach and housing navigation services are offered throughout the County.
RTFH Coordinated Entry System – Phase Two	Countywide	In Phase Two, the RTFH will integrate CoC funded transitional housing, ESG funded shelters, and other programs and projects. Key goals of Phase Two are to integrate non-CoC/ESG funded projects and to expand the availability of navigation services.
Homeless Outreach Teams	City of San Diego, City of Chula Vista, City of Oceanside	Several cities in the community have invested in Homeless Outreach Teams. The City of San Diego team includes police officers and County eligibility workers to engage homeless individuals and make connections to needed services.
Psychiatric Emergency Response Team (PERT)	Countywide	A mobile clinical team operated by the County HHS. Conducts outreach and engagement with homeless individuals with mental illness.
Serial Inebriate Program (SIP)	City of San Diego	The Serial Inebriates Program (SIP) conducts outreach and engagement with chronically homeless people with chronic alcohol addictions, providing linkages to case management treatment and housing.
Project One for All (POFA)	Countywide	POFA program has a mobile outreach component (see below under housing section for more on POFA)
People Assisting the Homeless (PATH)	Downtown San Diego	PATH San Diego's Connections Housing is a partnership which brings a variety of agencies together under one roof to meet the many needs of the downtown homeless population.
Downtown San Diego Partnership – Clean & Safe Program	Downtown San Diego	Provides safety and maintenance services in the downtown area, including some outreach to homeless people, making connections to services.
SDHC – Outreach Pilot	Countywide	In FY17-18 SHDC will provide funding to RTFH to launch a pilot project to develop a plan for a coordinated regional homeless outreach strategy.

Project	Geographic Coverage	Brief Description
Community Information Exchange	Countywide	The Community Information Exchange (CIE) is operated by 2-1-1 San Diego with the goal of facilitating care coordination for individuals accessing social and health services in the community. The CIE allows for data sharing across providers, so staff has access to valuable data around health, housing status, and other client data to inform service planning decisions.

3. Emergency Response: Shelter and Interim Housing

A. Bed Inventory: Emergency Shelter and Transitional Housing

Each year the RTFH compiles the annual Housing Inventory Count (HIC), a listing of all beds and units in programs serving homeless people. The HIC must be submitted annually to HUD in order to receive CoC funding. The beds listed in the HIC must be dedicated to serving only people experiencing homelessness, so it does not necessarily include all the programs in the community that might serve this population. However, it is a good source of data on the existing inventory of units.

The 2017 HIC lists two categories of emergency or time limited beds: emergency shelter and transitional housing (units allowing stays of up to 24 months). The table below summarizes the inventory of shelter and transitional housing for different population types in 2017.

Program Type	Family Beds	Adult-Only Beds	Child-Only Beds	Total Beds	Veteran Beds	Youth Beds (up to age 24)
Emergency Shelter	646	665	18	1,329	10	0
Transitional Housing	978	1,328	0	2,306	450	307
Total	1,624	1,993	18	3,635	460	307

*Veteran and youth beds are included in the total beds column.

**Seasonal beds are not included in this table

As shown in the table, San Diego has 3,660 total beds in these program types. This includes 41 separate shelter programs, 70 transitional housing programs and 3 Safe Havens. These programs are operated by about 30 different providers, including: Alpha Project, Bread of Life, Casa de Amparo, Catholic Charities, Center for Community Solutions, Community Resource Center, Crisis House, Doors of Change, Generate Hope, Home Start Inc., Interfaith Community Services, Interfaith Shelter Network of San Diego County, Mental Health System, North County Lifeline, North County Serenity House, North County Solutions for Change, Operation Hope, PATH San Diego at Connections Housing, Salvation Army, San Diego Housing Commission, San Diego Rescue Mission, San Diego Youth Services, Serving Seniors, South Bay Community Services, St. Vincent DePaul Village, Townspeople, Veterans Village of San Diego, Volunteers of America, Women’s Resource Center, and YWCA.

B. New Programs and Initiatives

Several new projects and initiatives are in the planning process to improve the operation of the shelter system and pilot new models for shelter and interim housing.

Project	Geographic Coverage	Brief Description
Interim Housing Toolkit	Countywide	SDHC and LeSar Development Consultants have developed an Interim Housing Toolkit for our community that offers a range of practical strategies and policies for shelters and transitional housing to become more housing-focused.
ShelterPoint Planning and Implementation Collaborative	Countywide	Mayor Faulconer, as part of his efforts to reduce homelessness is working to create real-time shelter vacancy updates within HMIS. A coordination team has been formed with staff from the City, 2-1-1 San Diego, RTFH, and SDHC to design and implement the program.
Access Centers	City of San Diego	The City of San Diego has issued a Request for Statements of Qualification (RFSQ) in order to solicit feedback from service providers on the development of a facility where individuals can access core services and begin the process of securing permanent housing.
Recovery and Wellness Center	North County	Interfaith Community Services is launching a Recovery & Wellness Center to provide medical detox, sobering, in-patient & out-patient AOD recovery, and recuperative care for homeless individuals. Interfaith is working to identify a location in North County, and pilot this model to then be replicated elsewhere.

4: System Exits: Permanent Housing Interventions

a. Bed Inventory: Rapid Re-Housing, Permanent Supportive Housing, Other Permanent Housing and Safe Havens

The 2017 HIC lists four types of permanent housing interventions serving people experiencing homelessness: rapid re-housing (short to medium term rent subsidies with time limited services); permanent supportive housing (long-term subsidies with intensive services); other permanent housing (long terms subsidies with less intensive services) and safe havens (permanent supportive housing with minimal service requirements). The table below summarizes the inventory of these types of units in 2017, by population type.

Program Type	Family Beds	Adult-Only Beds	Child-Only Beds	Total Beds	Veteran Beds*	Youth Beds (up to age 24)*
Rapid Re-Housing	441	265	0	706	424	0
Permanent Supportive Housing	924	1,587	0	2,511	1,865	16
Other Permanent Housing	373	274	0	647	116	8
Safe Havens	0	42	0	42	1	0
Total	1,738	2,168	0	3,906	2,406	24

*Veteran and youth beds are included in the total beds column.

**Data does not include beds under development.

As shown in the table, San Diego has 4,412 total beds in these program types. The HIC lists 23 rapid re-housing programs, 62 permanent supportive housing programs, 21 other permanent housing programs and three Safe Havens. These are operated by about 20 different providers, including: Alpha Project, Catholic Charities, City of Oceanside, Community Housing Works, Community Research Foundation, County of San Diego, Episcopal Community Services, Father Joe’s Villages, Home Start Inc., Housing Authority of the County of San Diego, Interfaith Community Services, Mental Health System, North County Solutions for Change, PATH San Diego at Connections Housing, San Diego Housing Commission, South Bay Community Services, St. Vincent DePaul Village, Townspeople, Veteran Community Services, Veterans Village of San Diego, and Volunteers of America.

b. New Programs and Initiatives

A number of new projects have recently launched or are in the planning process. These new initiatives are expanding the supply of housing for people experiencing homelessness and piloting new models.

Project	Geographic Coverage	Brief Description
HOUSING FIRST – SAN DIEGO. FY 2017-2018 Action Plan.	City of San Diego	The next phase of HOUSING FIRST – SAN DIEGO, beginning in July 2017, includes additional funds for the creation or preservation of 500 permanent housing units, as well as expanded rapid rehousing resources.
Project One for All (POFA)	Countywide	Project One for All is an extensive effort by the County of San Diego and its partners to provide permanent supportive housing with intensive wraparound services to homeless individuals with serious mental illness. Housing resources are provided by SDHC and CHCD. It is designed to serve 1,250 chronically homeless individuals and to date has housed 375 in permanent or interim housing.
Whole Person Wellness	Countywide	Whole Person Wellness coordinates housing, health, behavioral health, and social services in a patient-centered manner to improve health and wellbeing through efficient

		and effective use of resources. San Diego’s target population is Medi-Cal beneficiaries who are homeless and are high users of multiple systems.
Drug Med-iCal Waiver Program	Countywide	The Drug Medi-Cal waiver would expand the number of substance use disorder services that can be reimbursed through Drug Medi-Cal, including services that could be delivered in supportive housing. DHCS requires counties to opt-in to this program, and San Diego County is currently developing a plan and will bring forward a recommendation for whether to opt-in to the Drug Medi-Cal waiver.
Bringing Families Together (BFH)	Countywide	A potential new project to be implemented by the County of San Diego Child Welfare Services using a new source of State Funding to provide housing navigation and Rapid Rehousing for child-welfare involved families where homelessness is a barrier to reunification. The County expects to learn soon whether funding has been awarded.
Landlord Engagement Efforts	Countywide	Efforts to expand landlord engagement and recruiting are taking place throughout the County, including SHDC’s expansion of the Housing Our Heroes model to serve all populations. The County of San Diego CHCD also operates a landlord incentive and engagement program for its VASH participants. The City of Oceanside has created a landlord incentive and engagement program for VASH residents
Father Joe’s Villages Five Year Plan	City of San Diego	At a Special Meeting of the San Diego City Council on March 20, 2017, Father Joe’s Villages announced a plan to create an additional 2,000 units of affordable housing for the homeless over the next 5-years.

Appendix D
Stakeholder Interview Summary
by Focus Strategies on behalf of Regional Task Force on the Homeless

As part of the information gathering to produce this Strategic Framework for a System to Effectively End Homelessness in San Diego County, Focus Strategies was commissioned to conduct 45 interviews with a variety of community stakeholders including: local elected officials and their staff; City and County agency staff; RTFH leadership and staff; individuals representing non-profit and faith-based provider organizations; advocates; business leaders and other business community members; former and current San Diego technical assistance providers; funders; and other community stakeholder who have been involved with efforts to reduce homelessness in San Diego County. The purpose of these interviews was to solicit feedback about the current state of homelessness locally, as well as strengths and challenges of the current homeless response system; and opportunities that can be leveraged to create a more coordinated regional system. We also asked for perspectives about the upcoming Implementation Planning (Phase Two). This appendix summarizes what we heard from stakeholders on these topics. A list of people who were interviewed is provided in Appendix F.

I. General Topics

A. System Leadership, Governance, Collaboration

Leadership

Political Will Under New Leadership: Throughout our interviews with community stakeholders, we heard that the leadership and community of San Diego County has historically lacked the political will needed to bring about systems change and truly turn the tide on homelessness locally. Recently, however, several elected officials and other community leaders in San Diego have stepped up and started a more open, public dialogue around the issue, stressing the need for local change. Notably, County Supervisor Ron Roberts and City Councilmember Chris Ward have been tapped to serve as the Chair and Vice-Chair, respectively, of the RTFH Governance Board. Councilman Ward is also chairing the recently seated City of San Diego City Council Select Committee on Homelessness. San Diego Mayor Kevin Faulconer has also brought homelessness to the forefront by publicly supporting initiatives aimed at reducing homelessness, such as the San Diego Housing Commission’s Housing Our Heroes Campaign.

Stakeholders noted recent attention to homelessness by local leadership, as well as an overall increase in political will, which stakeholders identified as necessary ingredients to effectively address homelessness in the San Diego region. Several stakeholders expressed that the new leadership of the RTFH Board has been a significant change in the level of local influence and commitment to reducing homelessness. Many hope that the joint City/County leadership will effectively unite community efforts to reduce homelessness and build upon emerging interest from other elected officials throughout the County. “This level of leadership convening around the issue is elevating the conversation and creating more space for action,” one stakeholder said. Stakeholders also noted that the Mayor, City, and County have historically taken a very hands-off approach to addressing homelessness, despite the homeless population continually growing over the past several years. Some feel this approach is beginning to shift as leadership becomes more engaged in the issue.

San Diego Housing Commission: Many stakeholders noted that the City recently shifting a majority of homeless efforts and initiatives to the San Diego Housing Commission (SDHC), the City’s public housing

authority, has been a positive change. Many applauded SDHC's public commitment to reducing homelessness and the creation of new units for people experiencing homelessness through HOUSING FIRST – SAN DIEGO.

Appetite for Immediate Action: Throughout our interviews, we heard that leaders and the general community in San Diego are hungry for immediate action and immediate solutions to the issue of increasing homelessness in San Diego County. Leadership have proposed several short-term solutions to the issue, including tiny home villages; “tent cities” or safe zones for people experiencing homelessness to camp without legal repercussions; and a City intake center to help transition people out of homelessness. As one stakeholder put it, there is “a strong feeling of urgency, but this is an urgency to act fast.” Leadership expressed frustration about the reality of the time that is needed for real change to occur, which will mean shifting existing resources, scaling up new interventions, and creating an effective system. “[Elected leadership] wants to stay the course for best practices and proven models, but they’re under a lot of pressure,” said one stakeholder. “They want to be able to show progress. A lot of constituents don’t care about giving people housing and civil liberties – they just want homeless people to be gone.”

Stakeholders also noted that this desire for quick action and immediate solutions exists amongst business leaders, who feel that local government has not effectively responded to the issue and want to actively take part in solutions. While business leaders are eager for significant action to be taken immediately, many other stakeholders are in favor of permanent solutions.

Coordination and Lack of Implementation: Stakeholders also expressed that despite recent improvements in coordination amongst local leadership and the agencies they oversee, there is still a long way to go. People said that to increase coordination and overall community alignment, leadership must maintain shared sense of accountability and commitment to one unified vision and plan for reducing homelessness locally. Stakeholders noted that RTFH needs to be the umbrella agency that unites all parties and moves everyone in a single direction.

Additionally, stakeholders identified an overall discontinuity in the various efforts put forth to reduce homelessness. One stakeholder said that although there are a variety of boards and committees that convene regularly and develop numerous plans and initiatives, there seems to be a lack of local follow-through and implementation from system leadership. Others felt that there are too many people trying to lead the effort on reducing homelessness, which has prevented any effective systemwide change – “there are too many cooks in the kitchen, we need just one leader.”

B. System Culture

Coordination and Systems Planning: As mentioned in the previous section, many feel that San Diego has come a long way in terms of agencies working together collaboratively and coordinating efforts, however, there is still much more coordination needed to achieve a functional, effective homeless crisis response system. As one stakeholder said and many others echoed, the community does not have a “culture of togetherness” and agencies’ efforts tend to be very siloed. Although many stakeholders articulated commitment to becoming a system and not being siloed, when asked about what they are willing to do differently, many indicated strong commitment to their specific agency and its efforts. “It’s hard to get people to put their agendas down – for many, it’s very personal,” one stakeholder said. Additionally, agencies that are willing to engage in collaboration and coordinate efforts with others tend to do so only on a project-by-project level and lack a broader, systemwide perspective. Stakeholders

also noted that the County is geographically very large, which often makes coordination difficult. Some feel the primary focus is on Downtown, excluding other parts of the County where homelessness is also an issue.

Another concern raised primarily by providers was that the CoC plans to eliminate a large stock of transitional housing without completing necessary planning or projecting the impact of these decisions. Providers feel there has not been strong “transition planning” to account for the lag time between eliminating transitional housing and creating new permanent housing units. Some pointed to eliminating transitional housing as a reason for increasing homelessness in recent years.

Housing Focus: During the interviews, several stakeholders expressed that many of San Diego’s largest provider agencies have made significant strides towards a Housing First-oriented approach to addressing homelessness. However, some agencies still have room to grow to truly be housing-focused and person-centered. Many provider agencies still are focused on treatment and recovery, and maintain a belief that people need services to help them become “housing-ready.” It was also apparent during our interviews that providers’ understanding of Housing First and how it is implemented on a project-level tends to vary between agencies – for example, some seem to believe that Housing First equates to increasing the supply of permanent supportive housing in the community.

Culture of Safety: Some stakeholders noted that the CoC, the City, and the County tend to be very risk-averse, which has resulted in an unwillingness to make any major changes in their approach to reducing homelessness. One person described the region as “reactive to what HUD wants,” rather than proactively working to implement best practices and proven models. While agencies regularly implement short-term initiatives and pilot programs, some feel the community’s appetite for lasting, long-term change has been suppressed by their fear of risk.

Providers/CoC Relations: Several providers within the community feel blamed by the CoC and general public for the community’s increasing homeless population. Long-standing “legacy providers” who failed to meet performance benchmarks set by the CoC feel they are expected to “get out of the way while new providers came in.” “The hope was that new providers would [perform] better, but that didn’t happen,” one provider noted. Some pointed to local media coverage that paints providers as the reason for limited progress. “Articles generally carry quotes disparaging providers – that’s the dynamic and it’s been painful,” one stakeholder noted.

In addition to feeling blamed for the state of homelessness, some feel that the CoC uses threats to cut provider funding as a way to incentivize progress, rather than attempting to find common ground and helping provider agencies reach targets. “Obviously, we need to hit our numbers, but there needs to be a middle ground too,” one stakeholder said. “It’s all about the semantics of how [the CoC] approaches the agencies – they shouldn’t be saying, ‘[Providers] are screwing up,’ but instead, ‘You are operating on old rules – You are not bad, you just need to change.’”

Additionally, some providers expressed anger and frustration over how recent changes have been implemented at the CoC-level without provider input. Providers expressed mixed feelings about the CoC moving towards performance-based contracting and monitoring, and many did not feel they were consulted prior to the CoC making such shifts. Although most providers believe that a performance-based system is a positive change, they also expressed that the CoC is not allowing adequate time for changes to be made and data quality to be refined. Others believe that community-wide forums and input sessions hosted by RTFH do not translate to the CoC truly listening to or considering provider

input. Generally, people felt these meetings have served as a platform for RTFH to share information and tell people about upcoming changes. “Some of the committees [comprised of providers] do more specific work, but that work doesn’t seem to translate up,” one person also noted.

Providers commonly said that RTFH leadership has taken a firm stance on transitional housing (TH) with very little room for flexibility. Several mentioned that although HUD sees a place for TH within the system, the CoC does not seem to share this view. Because of this attitude towards TH and providers’ belief that this approach has not been executed strategically (mentioned in the previous section), many providers seemed to be resentful towards the CoC on this issue.

C. Expectations/Concerns about Community Planning Process

Skepticism Around Another Plan: During our interviews, we heard some skepticism from stakeholders about developing yet another community plan. “It’s often stated that there have been about 6 plans to end homelessness in San Diego and at the end of each one, there were more homeless people than when [the plan] started,” one stakeholder said. In the past, these plans have outlined strategies for reducing homelessness, yet leadership has generally lacked the follow-through and commitment to implement the strategies. As a result, stakeholders said “there is a lot of fatigue around these efforts” and many community members are reluctant to believe that another plan to end homelessness will bring about real change – especially one with a five-year timeline. Many stakeholders feel action must be taken immediately and five years is too long to wait for change.

Stakeholders said that systems change efforts in the past failed to incorporate the input of the provider community and providers hope that during this planning process, the “providers will be more of a partner and perceived less as a barrier.” Some providers feel they have lost the ability to have any input into the RTFH’s planning processes and other decision making, noting that opportunities for coming together as an entire provider community are too few (i.e. RTFH’s Full Membership Meetings only occur twice annually). Others noted that they are unsure of the community’s appetite for change and warned that it may take more time than desired to make real shifts in thinking and approach (i.e. adopting Housing First). “When you come in to make change, don’t judge [the system] on the new paradigm when we’re still in the old paradigm.”

Optimism Around Plan: On the other hand, some stakeholders are excited about this community plan and planning process. Some said they were glad that RTFH is bringing in “outsiders” (Focus Strategies) who can provide a “neutral” analysis of San Diego County’s homeless response system. Many said they are looking forward to seeing what can be done to reduce homelessness locally. “We welcome a plan, so that, as a provider community, we can know where we are going, identify available resources, and know of any gaps,” one provider said. Another stakeholder noted that the “Regional Task Force is best group to make this plan” because they “have the most political sway.”

Resistance to the Idea of “Ending Homelessness”: Some stakeholders expressed a general distaste amongst providers, the business community, and other community members for the idea of “ending homelessness” in San Diego County. Some feel this phrase has become cliché, empty, and unrealistic – and warned to be careful not to “overpromise ending homelessness” because this concept does not feel credible anymore to many members of the community. Many said they preferred the idea of “reducing homelessness” or improving the situation, while one stakeholder said the business community refers to reaching functional zero as becoming “best in class” as a city.

Communication and Involvement: Multiple stakeholders indicated they are looking forward to increased communication and community engagement efforts from RTFH through this planning process. Members from all segments of the community (business community, providers, public officials) are eager to know how to best be involved and do something now. Stakeholders said the RTFH needs “a clear plan, but more importantly, clear benchmarks.” “This seems like a big mountain to climb, so there needs to be measurable goals,” said one provider. “It’s up to the Task Force [RTFH] to communicate and make progress visible.”

Other Concerns and Needs: During our interviews, several stakeholders said that they worry about San Diego’s current housing market and said the RTFH will need to determine strategies for navigating this obstacle better. Others said they were unsure about whether members from the business community will buy-in to the planning process and Housing First, as they are seeking a more immediate fix to homelessness.

Stakeholders also noted that the plan “absolutely has to incorporate all 18 municipalities and have service providers on board” for it to be successful. To pull together existing efforts in other parts of the County (i.e. East, North, and South County), “the plan and RTFH need to be able to acknowledge that other cities’ and organizations’ work is good and valuable, but that their work needs to be a part of larger system effort to reduce homelessness,” one stakeholder said.

II. System Components

A. Coordinated Entry

Community Opinion and Provider Participation: In general, we heard mixed opinions about Coordinated Entry (CE) in San Diego County – some believe the system is working well and just needs more resources, while others feel it is simply not functioning as it should. We heard from many that Coordinated Entry is still in its infancy and needs further refinement and community buy-in.

While several large, well-known providers are participating in CE, there are still many providers who have chosen not to participate and/or are resistant to doing so. Stakeholders (primarily providers) said that while staff are attempting to use CE and entering data into HMIS, some don’t have faith in the system and feel they could do a better job housing people on their own. Additionally, some noted that large community projects, such as Project One for All, VASH and SSVF are not yet fully connected to CE, so the CoC is unable to refer people who are homeless and meet program eligibility requirements into crucial programs. Another issue the CoC has faced is defining CE participation, especially with providers who do not receive HUD CoC funds or other public funding. Stakeholders also said that several key players, such as the VA, public benefits administrators, and County Behavioral Health, should be at the table, but are not or not fully, which has ultimately limited the reach of CE.

Side Doors: While many providers either currently take clients from CE or plan to soon, many are still acting as side doors to the system by housing people outside of the CE process and not entering these clients into HMIS. Some providers who receive funding from RTFH noted that contracts tend to have “insane [client] parameters and end up ruling a lot of people [experiencing homelessness] out based on residency and income.” Subsequently, “[provider staff] end up demoralized and decide to find people by themselves,” which creates side doors to the system. Some providers feel the CE system is “broken” and have decided to work around it to house clients they perceive as most in-need. Some indicated that providers prefer to be side doors so that they can engage in “cherry picking.”

Screening/ VI-SPDAT: Throughout our interviews, we heard a few providers express concerns about the effectiveness of the CoC’s screening tool, the VI-SPDAT. Some feel that the tool is unable to accurately capture certain elements of vulnerability and does not match clients to interventions that are appropriate for their actual level of need or assist in determining whether clients meet eligibility criteria for specific programs. Some noted that the existing stock of permanent supportive housing largely uses service funding sources that are very restrictive in terms of who can be served (e.g. MHSA funds) and the VI-SPDAT does not provide the information needed to match clients to these programs.

Diversion: We also heard during our interviews that the existing CE system lacks a coordinated approach to diversion. Although some funding and system resources have gone towards creating diversion programming in San Diego, a few stakeholders said diversion efforts tend to be inconsistent between providers and need to be streamlined to achieve better outcomes. Several people were hopeful about SDHC’s plans to fund shelter diversion that utilizes a progressive engagement model and connects those who cannot be successfully diverted to other light-touch system resources (i.e. RRH).

Workflow Difficulties: Finally, providers expressed frustration over several parts of the CE system that could use improvement. For example, many providers said that with the current CE system, they often lose track of people between intake/assessment and housing navigation or placement. Several blamed this on CE’s inability to match and assign clients to project vacancies quickly enough. One provider also noted that the existing CE system is “completely manual” and more automation is needed in the matching and referral process.

B. Shelter and Interim Housing

Emergency Shelter: Locally, public conversation and media interest have focused on the perceived need for more emergency shelter beds in Downtown and throughout the County. During our interviews, we heard mixed opinions on the need for more shelter. Many believe there are not enough shelter beds within the community compared to the homeless population. Others see increasing shelter beds as a critical strategy and tool for moving people from the street to permanent housing (i.e. bridge housing). Throughout our interviews, stakeholders also spoke about the community’s need for a centralized, low-barrier intake or “navigation” center, that would provide comprehensive services and shelter beds while people find permanent housing solutions.

On the other hand, others were concerned that focusing on emergency shelter is merely a distraction from the community’s pressing need for a greater supply of permanent, affordable housing. We also heard that emergency shelters within the community need to lower their barriers to entry and shift their focus towards housing and away from treatment and sobriety.

Transitional Housing: As previously mentioned, many providers spoke to the effects of defunding transitional housing programs within the community in recent years. Many feel these changes were not completed in a calculated, strategic fashion – ultimately creating a major gap in available housing interventions. “It’s foolish to chainsaw our existing stock of transitional housing until we can develop a sufficient stock of affordable and permanent housing,” one provider said. Some even pointed to this decision by the CoC as a cause for increasing homelessness in San Diego. “Cutting transitional housing has led to more people on the streets because [the CoC] didn’t find a replacement for that transitional housing.”

C. Permanent Housing

Insufficient Affordable Housing: The community shares a universal recognition of the overall lack of affordable housing and need for more permanent housing units for people experiencing homelessness in San Diego. Many feel increasing the housing stock needs to be a central focus of the community's efforts to reduce homelessness. Many stakeholders also noted that a majority of the community's Single Room Occupancy (SRO) units have been demolished or converted to non-affordable housing in recent years – reducing the inventory of units available for people with the lowest incomes.

Permanent Supportive Housing: Generally, stakeholders supported increasing the community's supply of permanent supportive housing (PSH). Some said the CoC is less interested in creating new PSH units and very focused on recent efforts to develop new rapid rehousing programs. "Unfortunately, the CoC been pretty enamored with RRH," one stakeholder said. "[RRH] can be effective for some, but doesn't come with the certainty that PSH units have." Nevertheless, many are optimistic about community efforts to begin developing new PSH.

Furthermore, some believe that the level of need for PSH has been overemphasized, or is being promoted most adamantly by the advocates and providers who do not build or operate PSH. "People pushing PSH are not responsible for building it and do not have a concept of how much it takes to build and run it," one stakeholder noted.

Many stakeholders recognized and applauded the success of the SDHC in creating and funding several new PSH programs, such as Housing Our Heroes. There was a consensus, however, that community PSH efforts have primarily focused on serving Veterans and have inadequately considered other populations.

Rapid Rehousing: In recent years, the CoC has significantly shifted its focus on increasing number of rapid rehousing (RRH) programs within the community, and several publicly and privately-funded programs have opened. While providers who operate RRH have seen some success, other stakeholders questioned whether RRH as it currently exists can be effective in reducing homelessness. Some suggested increasing training around operating RRH programs, while others said the community's RRH programs may need to be brought into alignment so that they operate using similar policies and practices.

There is a general sense that while RRH may be an effective intervention, the community's housing market significantly limits the scale of these projects and complicates how providers operate RRH programs. Providers commonly spoke to struggling with a limited flow of vacant units and vouchers, compared to the number of people who need to be housed. One stakeholder noted that a few major providers including SDHC, Alpha Project, and Father Joe's have increased their landlord engagement efforts, however the system still has difficulty recruiting and maintaining landlords. Some community members are working on creating a flexible funding pool for landlord insurance and incentives to address this issue and reduce risk for landlords who choose to rent to people experiencing homelessness. Providers have struggled to identify a sufficient stock of affordable, safe units for their clients within the private market. "We've found that slumlords are willing to take vouchers, but no one else will," one provider said.

D. General System Gaps/Needs

Housing First: While we heard that some of the community’s main providers (Father Joe’s, Alpha Project, Interfaith Community Services) have adopted a Housing First approach and many are optimistic that smaller providers are soon to follow, stakeholders voiced mixed responses about the philosophy and its practices. Some providers were skeptical about how effective and/or appropriate it is for all populations. “Housing First is well intentioned, but shouldn’t be the only yard stick we use,” said one provider. Others expressed that they were on-board with the philosophy, but need time to adapt their program models to match Housing First principles. Meanwhile, some organizations are still grappling to understand exactly what Housing First does and does not mean; one provider said it can “sometimes feel like a free for all.”

Some stakeholders expressed concern over certain providers within the community who have vocally opposed Housing First. There are a few organizations that maintain a sizable supply of transitional housing and are committed to treatment-oriented approaches to serving people experiencing homelessness. These organizations have gained vocal support from local elected officials, including U.S. Congressman Darrell Issa, as well as some media coverage around their campaign for HUD to move away from Housing First as a core strategy.

Outreach: Several stakeholders we spoke to strongly believe that the community needs more outreach resources to reach the people who are hardest to engage and have lived outside the longest. Many believe current outreach efforts are fragmented in their approach and geographical scope. Currently, the community’s main outreach effort is the San Diego Police Department’s Homeless Outreach Team (HOT), which primarily targets Downtown, Pacific Beach, and Ocean Beach. HOT is viewed as treatment and enforcement-oriented, but not very housing-focused. Other providers who operate outreach programs all seem to hold a different idea of how it functions and what purpose it serves – we heard that some outreach programs within the community “wait for people [experiencing homelessness] to come to them,” rather than meeting them where they are. Stakeholders also feel that in addition to a general increase in outreach efforts and geographical reach, the CoC needs to connect more housing and shelter beds and resources to outreach and develop performance targets for these programs.

Prevention and Diversion: Throughout the interviews, we heard about the community’s gap in prevention and diversion services. Stakeholders commonly cited the need for more resources and funding to go towards increasing and refining prevention and diversion strategies that will keep people from falling into homelessness, with a specific need for family reunification and efforts targeted to people exiting the criminal justice system.

Provider/Community Participation and Accountability: Although some providers have been resistant to the CoC imposing performance targets and expectations, others felt the CoC needs to find better ways to hold providers accountable to meeting performance metrics. Some said that the CoC must develop strategies to get all providers from all parts of the County to the table and participating in the CoC, which some felt may require the help of County leadership. The City of San Diego and North County are seen as in alignment with RTFH’s efforts, while many East and South County community leaders and providers are perceived as not being at the table. Some noted that groups within these parts of the County (i.e. the City of Chula Vista, East County Regional Homeless Task Force) have engaged in their own plans and strategies to reduce homelessness locally. “The problem is that cities are very focused on their own population,” one stakeholder said. “There is a bias around keeping resources for themselves.”

Housing Navigation: Stakeholders generally agreed that the community lacks sufficient housing navigation services. Housing navigation that does exist was said to be under-staffed and seems to have difficulty providing expected functions (i.e. matching, locating people, getting clients “doc-ready”). While some providers have their own housing navigators, stakeholders agreed that there needs to be more community-based housing navigators under RTFH.

Moving On Programming: Some providers who have experience with PSH and other permanent housing programs said the community could benefit from a large-scale Moving On initiative to help stable PSH tenants who no longer need that level of services to “move on” to a private-market unit with rental assistance and other supportive services. This would free up existing PSH units and promote a more fluid flow of clients through the system. Some also mentioned that a significant amount of people with Section 8 vouchers move on from this level of assistance, creating space for the people most in need of rental assistance. SDHC will soon launch a small 25-person Moving On program.

Population Specific Resources: During our interviews, we heard stakeholders point out gaps in services and resources for certain segments of the homeless population. Areas that stakeholders felt could be improved included re-entry and realignment programming for former inmates; mental health services for people with behavioral health and substance abuse issues; and housing interventions that specifically target youth.

Faith-Based Programs and Resources: Some said that the CoC needs to better leverage the resources of the local faith community, engaging and bringing the faith community into alignment with the larger system working to end homelessness. Stakeholders said the faith community is a “hidden resource that [the CoC] hasn’t yet tapped into.”

III. System Infrastructure

A. Data and Evaluation

HMIS: Throughout the interviews, we heard stakeholders acknowledge that RTFH has recently undergone major changes in terms of data capacity and HMIS, while the greater community has come around completely in terms of sharing data and an open HMIS system. Although RTFH has taken steps to increase its data capacity and many programs in the County are now supporting data collection via HMIS, some feel HMIS does not produce the data points needed for the CoC and CE system to operate well. As a result, many providers enter their data into separate data systems specific to their agencies and staff spend their time double-entering data. Others recognized a need for increased resources and capacity to enable provider staff, especially those from smaller provider agencies, to do real-time data entry. Additionally, we heard that providers were generally in favor of RTFH’s new open HMIS system, however a few were concerned that moving to an open system may violate client privacy and hoped the RTFH will develop strategies to address this.

We also heard that some providers feel the HMIS system is not very user-friendly. One provider said, “It seems like we [the community] don’t have the resources to make [HMIS] what it needs to be – [HMIS software] needs to be intuitive and I don’t see why it’s not.”

RTFH Data Dashboards: Several community stakeholders pointed to the RTFH’s data dashboards as helpful tools for understanding homelessness in San Diego County. A few, however, suggested the dashboards could be improved by reporting how effective the system is in helping people end their

homelessness (i.e. how many people ended their homelessness on a monthly and/or yearly basis); how many people are new to the system; as well as where people exited to, how many returned to homelessness, and what their lengths of stay within programs was.

C. Provider Capacity; Capacity Building Needs

Increasing Housing Focus: We repeatedly heard that adopting a true Housing First approach has been challenging for providers. According to one stakeholder, many providers still operate under a “pull yourself up by your bootstraps” philosophy, while others have clung onto treatment-based, sobriety- and recovery-focused models that are designed to get clients “housing-ready.” Stakeholders expressed that providers need to be brought along and provided training to shift their ideology towards a greater housing focus. Some said this will take training providers on diversion, motivational interviewing, trauma-informed care, housing navigation, housing search and placement, and other components of Housing First. Providers need to understand that housing people is a difficult, yet possible undertaking.

HMIS: Providers said they need better training on the purpose of HMIS and how to use it, as well as greater staffing capacity to enter HMIS in real-time. As mentioned in the previous section “Data and Evaluation,” some providers currently do not enter data into HMIS, or do not use HMIS as their primary data system. The domestic violence (DV) provider system has remained outside of coordinated entry and HMIS, due to concerns about client confidentiality and safety.

Improved Performance Outcomes: During our interviews, we heard that many providers have not fully come onboard with or grasped the idea of meeting performance metrics. Some said this is because the non-profit infrastructure and capacity for meeting these targets simply doesn’t exist. Some suggested that the CoC needs to do a better job of helping these agencies along by providing training and other capacity building resources.

Change Management: We also heard that many providers are afraid of doing things differently and are unsure of what large-scale systemwide change will mean for their agency. On the other hand, other providers are eager – and in some case, desperate – for guidance and specific, immediately-implementable strategies to begin reducing homelessness.

D. Funding Opportunities

Private Funding: Finally, we heard from some stakeholders that they believe there are significant private funding opportunities within the community for homelessness if the CoC can show that they are implementing best practices and achieving real results. In particular, business community members who are big donors to homeless efforts want to find ways to be involved and put their dollars to the best use.

Public Funding: Stakeholders also noted that they believe the CoC could leverage considerable resources once all public agencies are brought into alignment. These public agencies include the City of San Diego and County, the region’s six public housing authorities, and the VA.

Appendix E
Community Meeting Input
By Focus Strategies on behalf of Regional Task Force on the Homeless

The RTFH and partner agencies hosted a number of community forums and meetings as part of the development of the Strategic Framework (Phase One of the Community Plan). At community meetings that occurred towards the beginning of the process, stakeholders were provided an introduction to the RTFH and Focus Strategies' approach to creating a Strategic Framework for effectively ending homelessness in San Diego County, as well as a general review of timelines and action steps involved with the process. Towards the end of the process, Focus Strategies presented an initial draft of the Strategic Framework and next steps for implementation, and offered an opportunity for community feedback and questions. A comprehensive list of these meetings, as well as their dates and locations is provided as Appendix F.

A diverse array of community stakeholders attended these meetings, representing the following sectors:

- Non-profit homeless housing and service providers
- Elected officials and staff from the County of San Diego
- Elected officials and staff from the City of San Diego and other cities in the region
- The Department of Veterans Affairs (VA)
- Public housing authorities
- University representatives
- Philanthropy
- Business community representatives, including large and small business owners
- Homeless advocates
- Community members
- People with lived experience of homelessness

Each community meeting provided an opportunity for stakeholders to provide input, ask questions, and express concerns related to both phases of the Community Plan: The Strategic Framework (Phase One) and the Implementation Plan (Phase Two, which will begin in July 2017). Participants also shared their views on the state of homelessness in San Diego County. We heard a diversity of feedback in response to RTFH and Focus Strategies' current work, which is summarized in the following sections.

Feedback Regarding Phase One: Strategic Framework

The following section summarizes the input we heard during these meetings related to the Strategic Framework (Phase I of the Focus Strategies' work):

- *Small business and community member engagement:* During the meetings, some stakeholders encouraged Focus Strategies to expand the stakeholder interviewee group to include specific sections of the community and its members (including residents and small business owners) who are "disparately impacted by chronic homelessness." "This impacts parents and their kids who want to use a park, small business owners who have to directly deal with [chronic homelessness]," one stakeholder said. "We need to help the people experiencing homelessness, but also need to direct our focus back on the people directly impacted by the issue."

- *Lack of Provider Buy-in:* At these meetings, some stakeholders expressed concern about the level of provider buy-in around the Strategic Framework and upcoming Implementation Plan (Phase Two). One stakeholder said that although provider agencies will generally fall in line with what “their funding sources require of them,” they may not philosophically be bought into Housing First and other best practices for reducing homelessness. Others were concerned about pushback from providers who are passionate about helping certain populations experiencing homelessness, and may be unwilling to depart from their core mission of exclusively serving these people.
- *Learning collaboratives:* An initial draft of the Strategic Framework, which was presented to a variety of community leaders and stakeholders on in June 2017, outlines Focus Strategies’ recommendation to host a series of learning collaboratives aimed at hearing the concerns of providers and other stakeholders, as well as bringing them up to speed on strategic planning work and industry best practices. Some stakeholders were concerned that creating new “learning collaboratives” may derail the work of a learning collaborative that already exists within the community. Focus Strategies plans to work with the RTFH to address this concern and, if possible, align the purpose and efforts of these groups.
- *Outreach:* Also following a presentation of the initial draft of the Strategic Framework, some stakeholders said that the Framework and Implementation Plan should call out the community’s need for more effective street outreach. “Outreach is miniscule in terms of what we need,” one stakeholder said. Other stakeholders felt that *increased* outreach may not be needed as much as a more tiered, strategic approach to outreach. Others mentioned the need for more skilled, housing-focused outreach workers and increased coordination amongst the agencies currently providing outreach services. “Currently, there is a mismatch in outreach,” one stakeholder said. “Many outreach providers are not very housing-focused and are more enforcement-focused, while behavioral health outreach is probably more in line with what is needed.”
- *Diversion and Light-touch Rapid Re-Housing:* Following initial presentations about the Strategic Framework, some stakeholders questioned whether concrete action items for implementing diversion and light-touch rapid re-housing (RRH) would be provided, which were both mentioned during the presentation as strategies to reduce homelessness in San Diego that could begin while the greater Implementation Plan is being developed. One stakeholder expressed that the community is eager to be given actionable steps towards reducing homelessness, but many feel that they are not sure “what to do or how to do it.”

In addition to a desire for specific strategies for implementing diversion and light-touch RRH, several stakeholders hoped the Strategic Framework would include near-term ways to begin addressing homelessness. Specifically, one stakeholder questioned whether the framework would outline the human and capital investment needed to implement strategies, such as RRH and diversion, while the broader Implementation Plan is developed.

Feedback Regarding the Implementation Plan (Phase Two)

The following sections summarize the input we heard during these meetings regarding the Implementation Plan component of the Community Plan (Phase II) that Focus Strategies will develop over the coming year (July 2017 through June 2018) for the RTFH:

- *Program Performance Targets and Measurement:* While many expressed the need to develop performance measures and monitor program performance, some stakeholders also voiced that providers will need to be supported to help them reach these targets. “We are asking providers to change their way of doing business,” one stakeholder said. “We need to help them along by providing assistance in the change management process and opportunities for capacity building. We need to level the playing field, or else we will end up with a system full of disparities.” Stakeholders also said that Focus Strategies, RTFH, and funders will need to consider how to address and adapt performance monitoring for programs serving special populations, such as domestic violence shelters, youth programs, and residential treatment programs.
- *Demographic/Subpopulation Analyses:* During community meetings where plans for the Implementation Plan were presented, stakeholders asked whether certain subpopulations within the homeless community (i.e. Veterans, individuals with mental illness and/or substance abuse, families, youth) would be evaluated separately or given special consideration during Focus Strategies’ SWAP analysis. Other stakeholders wondered whether the analysis would provide a demographic breakdown of people experiencing homelessness by program type throughout San Diego.

As mentioned previously, some were concerned that comparing programs “that serve people in different sides of the VI-SPDAT” would produce unfair or misrepresentative results. For example, one stakeholder worried that an emergency shelter that has been charged with serving high-needs, high-barrier households would be stacked against a shelter serving people who are likely able to self-resolve their homelessness. Some worried that as a result of comparing unlike programs and the populations they serve, those programs that serve higher needs populations would be unfairly defunded or otherwise penalized.

- *Misrepresentations of vulnerability in data:* While many stakeholders expressed the need for a more data-driven system in San Diego County, some were concerned that a strictly data-focused system leaves out some nuances triggered by human behavior and vulnerability. One stakeholder said that, for example, the VI-SPDAT scoring does not reflect that a household sleeping outdoors has a newborn baby and, therefore, a high-need household may not be appropriately prioritized. “I understand that we are trying to increase efficiency in an environment where both the economy and housing crisis are worsening, but we also need to be aware that vulnerability is a human thing and not a data thing. There are some things that numbers just don’t show.”
- *Scattered-site versus built unit comparison:* Some stakeholders questioned whether Focus Strategies’ analyses of San Diego’s homeless crisis response system would look at the effectiveness and efficiency of scatter-site versus built unit housing interventions, and make

recommendations regarding what models best suit the San Diego region.

- *Regional Focus:* Throughout the meetings, stakeholders provided the feedback that Focus Strategies and the RTFH must consider the entire region in its analysis and recommendations. Many community members feel that efforts and initiatives have primarily been focused on homelessness in the Downtown core, however homelessness is also a problem in other parts of the region, including North, East, and South County. Some noted that cities and other parts of the County outside of Downtown (for example, Chula Vista and other parts of South County) have begun developing and implementing their own regional plans to reduce homelessness; however, it is essential that regional efforts come together to affect the greatest change. “We need coordinated strategies to deploy across the region,” one stakeholder said.

Other Feedback and Concerns

- *Ending Homelessness:* Following several of Focus Strategies’ presentations on the Strategic Framework, we heard some distaste for the semantics and connotation of “ending homelessness.” Many providers and other community members do not believe that homelessness can ever be completely ended and therefore expressed a strong opposition to using this term. One stakeholder also noted, “People don’t connect with ‘ending homelessness’ because they aren’t seeing any progress – they want to see the [Point in Time] numbers going down.”
- *Community-wide Desire for Immediate Solutions:* Throughout the community meetings, stakeholders reiterated their desire for quick and immediate solutions to increasing homelessness in San Diego. For example, when informed about San Diego County’s need for significant increases in permanent supportive housing (PSH) supply, several stakeholders wondered what could be done in the interim for people who are chronically homeless or otherwise in need of PSH, while permanent units are being developed. Some expressed a desire to create a designated “tent city,” tiny home village, or other safe zone for such people to live, while others strongly feel the community needs additional emergency shelter beds. “How do you address 5600 people living on the street in a short period of time? This is one of the biggest challenges,” one stakeholder said.

Stakeholders said this growing sense of urgency and desire to identify and execute immediate strategies for addressing homelessness primarily exists among elected officials. Stakeholders also noted a growing sense of unrest and frustration among residents and business owners who regularly see and/or interact with people experiencing homelessness in their neighborhoods and business districts daily. While many articulated a strong commitment to implementing best practices and proven models for reducing homelessness, some stakeholders expressed an equally strong desire to implement strategies *immediately* and begin making progress on the issue as soon as possible. “The community’s sense of goodwill and understanding is going to expire when they don’t start seeing results,” one stakeholder noted.

- *Reasons for Homelessness in San Diego County:* Throughout the meetings, we heard a commonly held belief that other cities “export” homeless people to San Diego. Others said that

the recently initiated California Proposition 47, which reduced misdemeanor penalties for low-level criminal offenses, has led to increased homelessness in San Diego County.

- *High Cost of Living and Lack of Affordable Housing:* Focus Strategies' heard from a variety of stakeholders about the community's severe lack of affordable housing and ever-increasing cost of living in San Diego County. Many feel that this is a major obstacle to reducing homelessness and keeping people housed in the region.
- *Culture in San Diego:* During the meetings, stakeholders mentioned a "culture of safety" amongst elected officials and community leaders, which has resulted in limited ability to bring about systems change and a lack of competitiveness in the CoC application process. Some also said there is an "initiative culture" in San Diego County, in which local leaders push a plethora of initiatives and pilot programs. However, these initiatives often lack specificity and the ability to affect real change. Some suggested that although these initiatives appear to be effective, leaders often "come up with their own program outcomes" to create this image of success. Stakeholders said that elected officials and other community leaders need to begin working boldly towards true change, rather than continually developing "safe" pilot program and initiatives.
- *Need for Increased Capacity at RTFH:* We heard from stakeholders that for a strategic plan to successfully reduce homelessness in San Diego, the Regional Task Force on the Homeless (RTFH) must increase their organizational capacity. Some suggested a need for additional deputy-level and high-level staff to assist the new Executive Director. Key stakeholders also mentioned the need for more organized, streamlined processes throughout the organization. "The staffing needed to help usher systemwide change is currently not there, but it needs to be to implement this plan efficiently," one stakeholder noted.

Appendix F
List of Stakeholders Interviewed and Community Input Meetings

Stakeholders Interviewed			
Name	Title	Organization	Date of Interview
Alexiou, Dimitrios	President/CEO	Hospital Association of San Diego & Imperial Counties	May 30
Anglea, Greg	Executive Director	Interfaith Community Services and ARS Board President	April 17
Ball, Monica	Board Member	UPLIFT San Diego	May 26
Beason, Carole	Lieutenant	San Diego Police Department Homeless Outreach Team	June 16
Bower, Susan	Assistant Director	HHSA Integrative Services	MAY 24
Brown, Christine	Reentry Services Manager	San Diego Sheriff's Department	June 16
Carr, Jessyca	Social Service Coordinator	Salvation Army	June 6
Case, Mary	Executive Director	Crisis House	May 25
Chamberlain, Jessica	Chief, Social Work Service	VA San Diego Healthcare System	June 5
Davenport, Beth	Chief Operating Officer	The Center	May 25
Denhart, Amy	Director	Funders Together to End Homelessness San Diego	May 23
Diaz, Dolores	Executive Director	Regional Task Force on the Homeless	April 14
Estrella, David	Director	Integrative Services, HHSA County of San Diego	May 8
Faulconer, Kevin	Mayor of San Diego	City of San Diego	June 6
Franke, Cara	Program Coordinator, Healthcare for Homeless Veterans	VA San Diego Healthcare System	June 5
Gaspar, Kristin	County Supervisor, District 3	County of San Diego	June 8
Gentry, Rick	President & CEO	San Diego Housing Commission	June 9
Gioia, Stephanie	Senior Policy Advisory to Supervisor Ron Roberts	County Board of Supervisors, District 4	April 19
Herrera, Jonathan	Director of Public Safety & Neighborhood Services, Mayor Faulconer's Office	City of San Diego	June 5
Ison, Pamela	Chief of Policy for Councilmember Chris Ward	Third Council District, City of San Diego	April 21
Johnson, Herb	President & CEO	Rescue Mission	May 25
Kuntz, Kris	Senior Associate	LeSar Development Consultants	June 2
Lewis, Carol	Collaborative Coordinator	El Cajon Collaborative	June 26

Stakeholders Interviewed			
Name	Title	Organization	Date of Interview
Lund, Eric	President/CEO	East County Chamber of Commerce	June 1
Lyons, Gene	Community Volunteer		May 31
Macchione, Nick	HHSA Director	County of San Diego, HHSA	May 8
Maduli-Williams, Stephen	Community Development Manager	City of San Diego	June 2
McElroy, Bob	President & CEO	Alpha Project	June 5
Ohanian, John	President & CEO	2-1-1 San Diego	May 25
Palmer, Rebecca S.	Director of Programs	Community Resource Center	June 22
Peterman, Melissa	Vice President of Homeless Housing Innovations	San Diego Housing Commission	April 21
Reynolds, Sue	Executive Director	Community Housing Works	June 12
Roberts, Joel Jon	President & CEO	PATH	June 6
Roberts, Ron	County Supervisor, District 4	County of San Diego	May 8
Ruff, Simonne	Executive Director	San Diego CSH	June 22
Sasaki, Nancy	Executive Director	Alliance Healthcare Foundation	June 26
Seidler, Peter	Managing Partner and Founder	Seidler Equity Partners	May 23
Shea, Dan	Business Owner		May 23
Shilling, Chris	CES Project Coordinator	Regional Task Force on the Homeless	May 30
Simpson, Andre	Executive Vice President & Chief Operating Officer	Veterans Village of San Diego	June 6
Spangler, Jill	Associate,	Abt Associates	April 12
Steiner, Julie	Associate	Abt Associates	April 12
Theissen, Thomas	Former RTFH President	Regional Task Force on the Homeless	June 22
Thrush, Dorothy	Public Safety Group, Chief Administrative Office	County of San Diego	June 1
Vargas, Deacon Jim	President & CEO	Father Joe's Villages	June 13
Walters, Jon	Associate Director	Association for Community Housing Solutions (TACHS)	May 30
Ward, Chris	Councilmember, District 3	City of San Diego	May 22

List of Community Meetings		
Meeting Name/Group	Location	Meeting Date and Time
RTFH Ad Hoc Committee on the Community Plan	San Diego County Health Services Complex, 3851 Rosecrans Street, San Diego, CA 92110, Executive Conference Room	Thursday, Feb. 16 12:00 to 2:30
RTFH Ad Hoc Committee on the Community Plan	County Administration Center – 1600 Pacific Coast Highway	Thursday, May 18 1 pm to 3 pm
RTFH Governance Board Meeting	County Administration Center – 1600 Pacific Coast Highway	Thursday, May 18 3 pm to 5 pm
Community Input Meeting Hosted by Alliance for Regional Solutions	North County Lifeline - 200 Michigan Avenue, Vista, CA	Tuesday, May 23 10 am to 11:30 am
Community Input Meeting Hosted by RTFH	Regional Task Force on the Homeless (RTFH) Office – 4699 Murphy Canyon Road	Thursday, June 1 3 pm to 4 pm
RTFH Full Membership Meeting	County Administration Center – 1600 Pacific Coast Highway	Thursday, June 15 10 am to 12 pm
RTFH Ad Hoc Committee on the Community Plan	County Administration Center – 1600 Pacific Coast Highway	Thursday, June 15 1 pm to 3 pm
RTFH Governance Board Meeting	County Administration Center – 1600 Pacific Coast Highway	Thursday, June 15 3 pm to 5 pm
City Council Select Committee on Homelessness	City Administration Building – 202 C Street	Wednesday, June 21 2 pm to 5 pm