Update of the Napa Plan to End Homelessness

Napa Continuum of Care

December 2018

Final Version for Distribution

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I. Executive Summary

Starting in 2015, the City and County of Napa (Napa) launched a multi-year process to review and transform the region's homelessness crisis response system to more effectively address the needs of persons experiencing homelessness. Part of this effort included an in-depth analysis of the homelessness system which resulted in the development of a detailed *Recommendations Report* which has driven the region's homeless system redesign over the last several years. The following report - *Update to the Napa Plan to End Homelessness* (referred to as the "*Homeless Plan Update*") is being created to revise the previous *Ten Year Plan to End Homelessness in Napa* by incorporating the goals and strategies from the *Recommendations Report*, in addition to community plan requirements under the No Place Like Home (NPLH) Program.

Throughout the *Homeless Plan Update* process, three guiding principles have been adopted with the primary goal of making homelessness a rare, brief and non-recurring experience in Napa. The guiding principles include:

1. **Shifting from program approach to system approach**. This work includes working towards breaking programmatic silos and aligning resources in the homeless system. Napa will use alignment strategies and data across programs to generate system-wide goals to ensure that limited resources are used effectively and that consistent performance measures and policies are used to track the progress towards common system-wide goals.
2. **The system-wide implementation of a Housing First Approach**. Stakeholders throughout the system agreed to implement Housing First strategies for all programs that focus on supporting persons experiencing homelessness to move into permanent housing as quickly as possible. Napa will work to ensure a community-wide Housing First approach that includes the following:
    - The application processes for housing programs are short, and tenants are housed quickly in units of their choosing;
    - The eligibility criteria for all homeless programs meet the minimum requirements of funder(s) or landlords without additional criteria imposed;
    - Sobriety is not an entrance requirement;
    - Medication compliance is not an entrance requirement;
    - Agreement to participate in services is not an entrance requirement; and
    - There is no minimum income requirement.
3. **Data will be used to improve the system**. Napa stakeholders will use data-driven practices to continuously refine processes and make improvements throughout the homeless system. Napa will build on the existing Homeless Management Information System (HMIS) structure and focus on creating a robust performance measurement system for each strategy set out below. This will help the community to focus on a simple and clear set of outcome measures, regularly assess progress on those measures, and strive for accountability throughout this process. This approach will help to achieve outcomes and will help align the activities and incentives of providers and other stakeholders in the homeless system.

Furthermore, four primary strategies have been adopted to establish attainable goals, outcome measures and timelines to develop a systematic response that ensures homelessness is prevented whenever possible, or is otherwise a rare, brief and non-recurring experience in the region. Crucial strategies include the following:

1. Creating better access to the homeless system for persons experiencing homelessness who are the most vulnerable;
2. Prioritizing and aligning resources in the system to ensure limited resources are used effectively;
3. Increasing exits from the homeless system to permanent housing; and
4. Working to integrate efforts of the homeless system with other mainstream systems like health, criminal justice and child welfare systems.

The City and County of Napa have made great progress in recent years towards achieving the strategies listed above. As a result, Napa has the capacity to achieve significant impact for persons experiencing homelessness by increasing the quality and coordination of services, and expanding permanent housing opportunities. If systems transformation efforts continue and if community resources expand, Napa has the real possibility of significantly reducing homelessness in the region.

II.   Introduction, Overview and Background

A. Homeless System Transformation Efforts To-Date – Defining the Process

Phase I: Developing Initial Systems Analysis and Recommendations Report

In 2016, the City and County of Napa embarked on an effort to address the region's homelessness and supportive housing crisis. This led to joint initiatives to gather community stakeholder feedback and complete a comprehensive analysis of the region's homelessness crisis response system. This analysis led to the development of data-driven recommendations for innovative and strategies to transform the City and County of Napa's homeless system. With the help of national experts at the Corporation for Supportive Housing (CSH) and the National Alliance to End Homelessness (NAEH), the City and County of Napa undertook the following activities to retool its system-wide response to homelessness:

- **Convened Community Stakeholders**: Met with representatives across the social service, public health, behavioral health, probation/criminal justice, housing and philanthropy sectors to explore key issues and opportunities in the community, and to gather input on resources managed by each sector;
- **Completed a Homeless System Data Analysis**: Conducted an analysis of Napa's homeless system using HMIS data and Annual Performance Reports (APR). CSH mapped the inflow and outflow from the homeless system's housing programs, which created a snapshot of trends and gaps in system entries, movement, and exits. CSH reviewed homeless Point-in-Time (PIT) count data from 2014 to 2016 to identify further insights regarding needs of the homeless population and demographic information. NAEH similarly analyzed emergency shelter system data to identify opportunities for improved shelter operations.
- **Completed a Resource Map**: Gathered data from community stakeholders, conducted research and reviewed the budgets for the County and each of the cities in Napa County to catalog federal, state and local funding resources available for housing and services to support homeless individuals and families and other vulnerable populations.

This analysis of the Napa Homeless System led to the development of the *Recommendations Report*[1] which was drafted by CSH and NAEH in concert with key community stakeholders. The Report encouraged the City and County of Napa to shift from a program approach to a systematic approach where resources are better leveraged, coordinated and aligned across silos and sectors to ensure homelessness in the region is prevented whenever possible or is otherwise a rare, brief and non-recurring experience. The City and County are committed to ensuring that homeless housing and services do not operate as a set of independent and uncoordinated programs, instead they will be coordinated across organizations and programs – working towards common system-wide goals.

The City and County of Napa are also prioritizing a Housing First approach that emphasizes rapid exits from homelessness to permanent housing, building housing capacity, ensuring that investments and decision-making are driven by data, and identifying new funding opportunities.

Furthermore, the City and County of Napa formalized their agreement to continue working together through its *Cooperative Joint Powers Homeless Services Agreement*. The development and execution of this joint agreement asserts, in writing, that both parties have agreed that ending homelessness in Napa is a priority that cannot be achieved without full participation by both jurisdictions as well as other key stakeholders.

Phase II: Updating Homeless Systems Analysis, Recommendations Report & Napa Plan to End Homelessness

As of fall 2018, many of the recommendations in the *Recommendations Report* have been achieved or are in the process of being implemented. For the *Update of the Napa Plan to End Homelessness (referred to as the Homeless Plan Update)*, the Napa Continuum of Care and the City and County of Napa worked with CSH and NAEH to revise the Homeless Systems Data Analysis and Resource Map with data from fiscal years 2017-2018 to reveal any new trends in the development of the

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[1] https://www.countyofnapa.org/DocumentCenter/View/242/NAEH-CSH-Napa-City-and-County-Final-Recommendations-Report-PDF?bidId

homelessness crisis response system that will inform implementation moving forward. Along with the updated analysis and map, Phase II of the effort included a review of the progress made to-date from the *Recommendations Report* and the Napa Continuum of Care and the City and County of Napa's implementation steps to reach full systems transformation.

The City and County of Napa and key stakeholders have adopted evidence-based strategies to transform the homeless system to efficiently and effectively prevent homelessness whenever possible or make homelessness a rare, brief and non-recurring experience across Napa Valley. Implementation goals and timelines have been included in revised strategies set forth in Napa's *Homeless Plan Update*.

The *Homeless Plan Update* has been developed by the Napa Continuum of Care and the City and County of Napa during the summer and fall of 2018 as part of a collaborative process that included the following stakeholders:

- County representatives with expertise from public health, behavioral health, probation/criminal justice, social services, and housing departments;
- Local Continuum of Care;
- Jurisdictions within the County, including cities and towns
- Housing and homeless service providers, including those with experience providing housing and services to those who are chronically homeless;
- County health plans and other health care providers, including those implementing pilots or other programs that allow the County to use Medi-Cal or other non-Mental Health Service Act (MHSA) funding;
- Public housing authority; and
- Representatives of family caregivers of persons living with serious mental illness.

Specific stakeholders who play a significant role in the region's efforts to prevent and end homelessness were invited to participate in the development of the *Napa Homeless Plan Update*. These stakeholders are listed below:

- City and County Departments
    - Napa County Health and Human Services Agency
        - Alcohol and Drug Services Division - Public Agency
        - Child Welfare Services - Public Agency
        - Comprehensive Services for Older Adults - Public Agency
        - Mental Health Division - Public Agency
            - Full Service Partnerships - Outreach/Engagement, Support Services, and Housing for Adults with Serious Mental Illness and Children and Transition Age Youth with Serious Emotional Disturbance
        - Public Health Division - Public Agency
        - Self Sufficiency Services Division - Public Agency
    - Criminal Justice
        - City of Napa Police Department - Public Agency
        - Napa County Department of Corrections - Public Agency
        - Napa County Sheriff - Public Agency
        - Napa County Probation - Public Agency
    - Food Providers
        - Napa Valley Food Bank - Nonprofit Agency
        - Salvation Army - Meal Assistance Program
        - The Table - Meal Services at First Presbyterian Church

- - Employment Services
    - Napa Valley Workforce Investment Board (WIB)
  - Housing
    - Napa County Housing & Intergovernmental Affairs Division – Public Agency
    - City of Napa Housing Division – Public Agency
    - Housing Authority of the City of Napa – Public Agency
- Local homeless Continuum of Care
  - Napa Continuum of Care
- Jurisdictions within Napa County, including the following cities and towns
  - American Canyon
  - City of Napa
  - Calistoga
  - St. Helena
  - Yountville
- Housing and homeless service providers
  - Abode Services - Shelter, Outreach & Homeless Housing and Services Provider
  - Burbank Housing - Affordable Housing Developer & Operator
  - CARE Network - Homeless Outreach & Care Coordination Arm of Queen of the Valley Hospital
  - Catholic Charities - Shelter & Services Provider
  - Fair Housing Napa Valley - Housing Advocacy Services Organization
  - Napa Valley Community Housing - Affordable Housing Developer & Operator
  - Napa Veterans Resource Center - Services for Homeless Veterans
  - Nurturing Empowerment Worth Safety (NEWS) Domestic Violence & Sexual Abuse Services
  - San Francisco Chronicle Season of Sharing Fund – Funder of Short-Term, Critical Assistance
  - Satellite Affordable Housing Associates - Affordable Housing Developer & Operator
  - U.S. Department of Veterans Administration
  - VOICES Youth Center - Transition Age Youth Services Provider
- County health plans and other health care providers
  - Behavioral Health
    - Buckelew Programs – Mental Health Provider
    - Mentis, Napa's Center for Mental Health Services
    - Progress Foundation – Mental Health Agency & Residential Treatment
  - Kaiser Permanente Napa Medical Offices
  - Live Healthy Napa County - Public/Private Partnership to Increase Health and Quality of Life
  - OLE Health - Federally Qualified Health Center
  - Partnership HealthPlan of California - Medi-Cal Managed Care Plan for Napa County
  - Queen of the Valley Medical Center, St. Joseph Health System
  - St. Helena Hospital, Adventist Health System
- Representatives of family caregivers of persons living with serious mental illness
  - Napa County Mental Health Board

The Napa Continuum of Care shared the community review version of the *Homeless Plan Update* with stakeholders at the following in-person meetings:

- Continuum of Care meeting at the Napa County Health and Human Services Agency - South Campus on October 4, 2018, and

- Community meeting at the Napa County Comprehensive Services for Older Adults location on October 5, 2018.

Additionally, the Napa Continuum of Care shared the community review version of the *Homeless Plan Update* on its publicly accessible website during a 30-day review period, from October 4, 2018 to November 5, 2018. Stakeholders were invited to review and provide input on the document through an online survey.

The Napa Continuum of Care and the City and County of Napa actively outreached to stakeholders to ensure that they had an opportunity to review and provide input on the *Homeless Plan Update* – reinforcing the community's efforts to oversee a collaborative process. Stakeholders were given the opportunity to provide feedback on the plan through both in-person meetings and the online survey. Targeted outreach was conducted to collect feedback from each stakeholder group identified in the NPLH program guidelines, including representatives of family caregivers of people living with serious mental illness, county representatives, and jurisdictions within the county.

The Napa Continuum of Care and the City and the County of Napa will be responsible for the ongoing monitoring of the *Homeless Plan Update* and will develop annual action plans to achieve its primary goal of making homelessness a rare, brief and non-recurring experience. As evidenced by the Cooperative Agreement between the City and County of Napa, the jurisdictions are committed to the implementation and support of the strategies and goals of this document.

The timeline for the development of the plan is described in the table below. The final version of the *Homeless Plan Update* and subsequent action plans will be will be readily available to the community and posted on the Napa Continuum of Care's website.

Napa Homeless Plan Update – Timeline for Collaborative Process	
Collection of Community Stakeholder Feedback	**Date**
Presentation and discussion with invited stakeholders involved with the following groups: County representatives with expertise from public health, behavioral health, probation/criminal justice, social services, and housing departments; Local Continuum of Care; Jurisdictions within the County, including cities and towns; Housing and homeless service providers, including those with experience providing housing and services to those who are chronically homeless; County health plans and other health care providers, including those implementing pilots or other programs that allow the County to use Medi-Cal or other non-Mental Health Service Act (MHSA) funding; Public housing authority; and Representatives of family caregivers of persons living with serious mental illness.	October 4, 2018 - 2:30pm to 5:00pm Continuum of Care Meeting Building A – Willow Conference Room Napa County Health and Human Services - South Campus 2751 Napa Valley Corporate Drive Napa, CA
Presentation and discussion with invited stakeholders involved with the following groups: County representatives with expertise from public health, behavioral health, probation/criminal justice, social services, and housing departments; Local Continuum of Care; Jurisdictions within the County, including cities and towns; Housing and homeless service providers, including those with experience providing housing and services to those who are chronically homeless; County health plans and other health care providers, including those implementing pilots or other programs that allow the County to use Medi-Cal or	October 5, 2018 - 10:00am to 12:00pm Community Stakeholder Meeting Silver Lupine Conference Room Napa County Health and Human Services – Comprehensive Services for Older Adults 650 Imperial Way Napa, CA

other non-Mental Health Service Act (MHSA) funding; Public housing authority; and Representatives of family caregivers of persons living with serious mental illness.	
Napa Homeless Plan Update posted on Napa Continuum of Care website for community review and feedback for 30-day comment period	October 4, 2018 to November 5, 2018
Incorporation of Community Stakeholder Feedback into *Homeless Plan Update*	
Incorporate community feedback and complete *Update of Napa Plan to End Homelessness* - Final Draft	November 2018
Finalize *Homeless Plan Update*	
Distribute Final Version of *Homeless Plan Update* online to be available to the community	December 2018

Phase III: Implementation of Homeless Plan Update – Strategies

Following the update of the Homeless Systems Analysis, *Recommendations Report* and the completion of the community stakeholder process, the City and County of Napa and the Napa Continuum of Care are committed to working together to implement the *Homeless Plan Update*. Four primary strategies will be used in the implementation of the plan including:

1) Creating better access to the homeless system for persons experiencing homelessness who are the most vulnerable;

2) Prioritizing and aligning resources in the system to ensure limited resources are used effectively;

3) Increasing exits from the homeless system to permanent housing; and

4) Working to integrate efforts of the homeless system with other mainstream systems like health, criminal justice and child welfare systems.

Additional details of implementation activities can be found in the strategies section of the *Homeless Plan Update* below.

B. Defining the Need

Homelessness in Napa – Updated Systems Analysis 2018

In January 2018, 322 persons experiencing homelessness were counted in Napa during the annual Point-in-Time (PIT) count. Of these, 168 persons were sheltered, 154 persons were unsheltered. The region's homeless population is largely comprised of persons who have lived in Napa for long periods of time, with over 45% of respondents reporting that they have lived in the area for 10 or more years. In fact, 109 respondents are reported to have lived in the area for over 20 years. Furthermore, the Napa Continuum of Care reports in the *2018 PIT Count Summary Report*[2] that the following sub-populations are represented:

- o **Chronically homeless**: 158 persons met the Department of Housing and Urban Development's (HUD) definition of Chronically Homelessness (92 unsheltered and 66 sheltered). The number of chronically homeless persons increased by 18% from 134 persons in 2017 to 158 persons in 2018, with a 74% increase in unsheltered individuals classified as chronically homeless (from 53 persons to 92 persons).
- o **Homeless Adults without Children**: In 2018, 114 single adults met the HUD definition of homeless.

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[2] https://www.countyofnapa.org/DocumentCenter/View/8998/2018-Continuum-of-Care-NOFA-Summary---Napa-PDF

- **Youth**: The number of unsheltered unaccompanied homeless youth decreased significantly from 16 persons in 2017 to five persons in 2018. The count of sheltered persons in youth-headed households (including unaccompanied youth and parenting youth and their families) increased slightly from nine persons in 2017 to 11 persons in 2018.
- **Veterans**: The number of sheltered homeless veterans increased from eight persons in 2017 to 13 persons in 2018, while the count of unsheltered veterans increased marginally from nine persons in 2017 to 10 persons in 2018.

According to PIT data analyzed by HomeBase, it was found that there is a significant population of high-need vulnerable individuals in the County of Napa. PIT data from Calendar Years 2011 to 2018 show increases in the percentage (with the exception of dips in 2014 and 2016) of those in the homeless system who are chronically homeless and have a severe mental illness or experience with substance abuse. The number of chronically homeless persons increased by 18% from 134 persons in 2017 to 158 persons in 2018. This is likely a result of Napa's efforts to move to a low-barrier shelter model and the increase of chronically homeless, highly vulnerable people who were surveyed by the Point-in-Time count as a result. Annual data indicated high percentages of mental illness (45% in 2017 and 39% in 2018), and substance abuse (48% in 2017 and 45% in 2018). This indicates that the number of highly vulnerable individuals in the homeless system constitute a significant proportion of the overall homeless population.

Table 1

CONDITIONS WHICH HAVE PREVENTED RESPONDENTS FROM MAINTAINING WORK OR HOUSING

Condition	Percentage
Alcohol abuse	36%
Mental illness	34%
Substance use	31%
Health problems or medical conditions	24%
Physical disability	21%
Post-Traumatic Stress Disorder	14%
Chronic physical illness	12%
Developmental disability	4%
Traumatic brain injury	4%
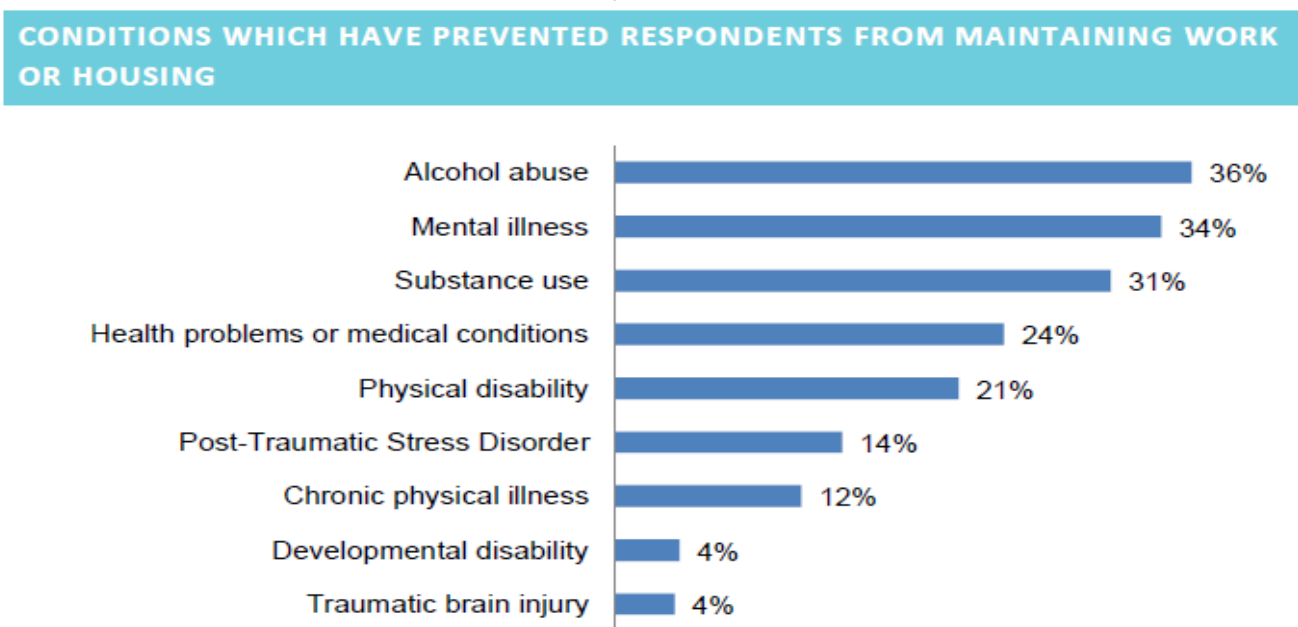
from HomeBase - Napa Continuum of Care 2018 PIT Count Summary

Table 2

SUBPOPULATIONS

Subpopulation	Emergency Shelter	Transitional Housing	Unsheltered
Chronically homeless persons	66		92
Adults with substance use disorder	46	4	96
Adults with serious mental illness	55	4	67
Adult survivors of domestic violence	18	7	10
Experienced foster care	13		22
Veterans	13		10
Adults with HIV/AIDS	1		

■ Emergency Shelter ■ Transitional Housing ■ Unsheltered
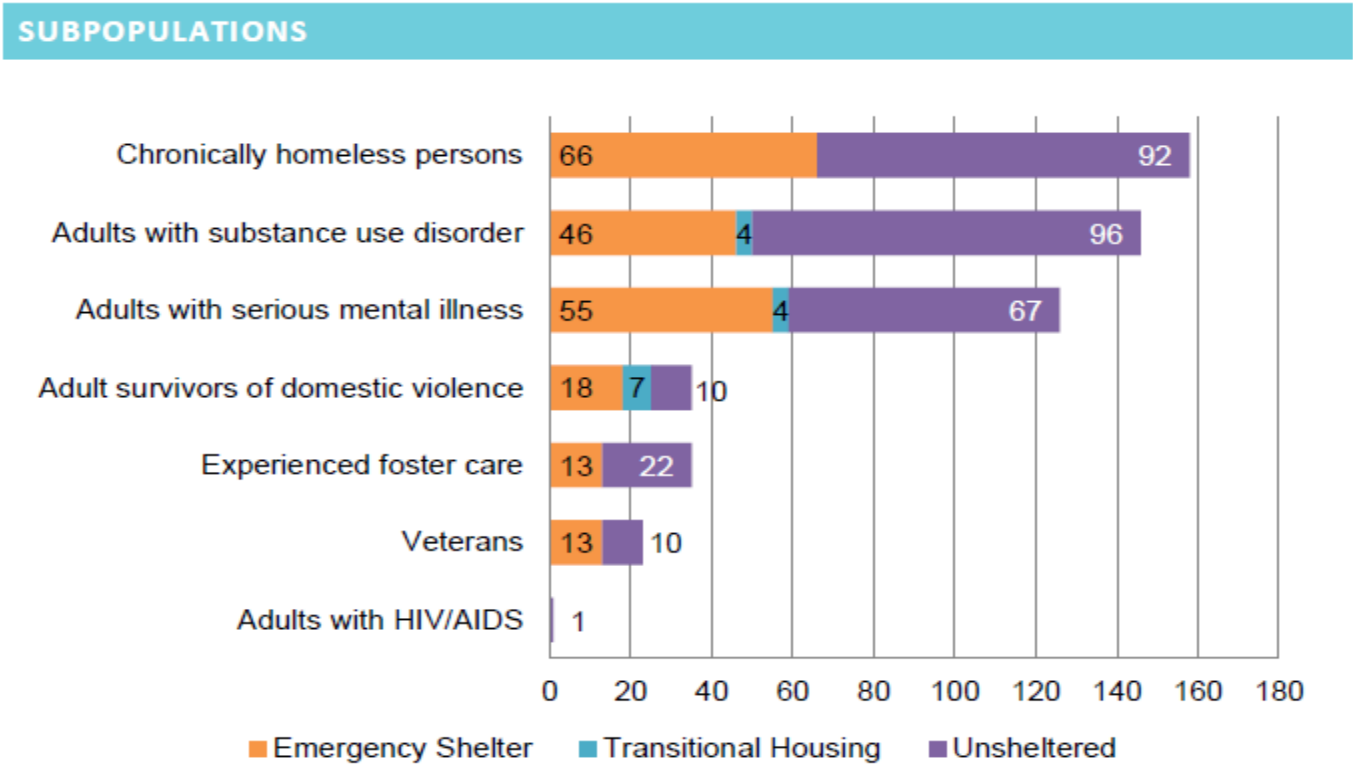
from HomeBase - Napa Continuum of Care 2018 PIT Count Summary

Napa County Health and Human Services Agency's Mental Health Division reports that in fiscal year 2017-18, the County Mental Health Plan served a total of 2,809 unduplicated individuals including adults with serious mental illness (SMI) and children with severe emotional disturbance (SED). In the *Napa County Mental Health Services Act Three Year Plan FY 2017-2018 to FY 2019-2020*, the County details its investments into a range of activities, including Prevention and Early Intervention and Community Services and Supports (such as Full Service Partnership programs that serve the SMI/SED population).

During the County's survey of mental health consumers and community members in the spring of 2017, the two highest community mental health priorities were: 1) housing for individuals with serious mental illness, and 2) mental health treatment for individuals who are homeless, have chronic mental illness, and frequent contact with law enforcement, courts and emergency services. This needs data highlights great opportunities for the homeless system to partner with the mental health system to expand supportive housing opportunities for homeless individuals with serious mental illness who require stable housing and services to prevent individuals from cycling through the crisis health care and criminal justice systems.

Furthermore, the Napa Continuum of Care is working to identify and address the specific needs of additional homeless subpopulations. Recently, Napa hosted its second Youth Summit which brought together many partners in this system of care to identify resources as well as needs and gaps in the system to address youth homelessness in the county. Youth who have experienced homelessness provided valuable feedback on what is needed in the community, including: housing targeted to youth, better cross-referrals to existing resources, broader eligibility requirements, additional youth targeted services, and greater system coordination. A similar summit is planned to address the needs among older adults experiencing

homelessness. These convenings create opportunities for key stakeholders to come together to identify strategies and goals to address the needs of the region's subpopulations. Key strategies and goals can be incorporated into the *Homeless Plan Update's* annual action plans.

Housing Inventory

The most noticeable change to Napa's Housing Inventory Chart (HIC) over the last several years was the expansion of Napa's Rapid Re-Housing (RRH) inventory. Napa County's CalWORKS Rapid Re-Housing (RRH) program launched in 2017 with 12 additional slots, and the CoC-funded Home to Stay Program has grown with 34 additional slots. Additionally, the County Health and Human Services Agency opened two RRH programs and NEWS opened up a RRH program as well. This is a significant increase in RRH housing placements over previous years. In 2018, the most notable changes in the shelter program include the closing of Napa County's family shelter, Samaritan House (33 beds) and the opening of Catholic Charities' Nightingale, a non-medical homeless respite facility (11 beds).

2018 Housing Inventory in Napa						
	Emergency Shelter – Year Round	Emergency Shelter – Overflow	Emergency Shelter – Seasonal	Supportive Housing	Rapid Re-Housing	Transitional Housing
Slots/Units	85	12	50	57	38	66

According to Napa's HMIS data and the analysis completed by CSH in 2018[3] (Table 3 below), a large percentage of people entering the emergency shelter system are literally homeless and come from places not meant for human habitation (66%). Compared to the systems analysis completed in 2015[4], the number of persons entering the shelter system who were literally homeless increased by 50%. This change is notable and indicates that Napa's progress towards moving to a low-barrier, Housing First shelter system has been effective in targeting persons living on the streets who have the greatest needs. Interestingly, 19% of persons who enter the shelter system arrive from institutions, including psychiatric facilities (4), detox (16), hospital (56), jail (8), and nursing homes (1). This presents the opportunity for Napa's homeless system to undertake enhanced partnerships with the healthcare system, particularly hospitals, to ensure that these institutional settings are discharging their clients into stable housing situations.

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[3] Napa Community Homeless System Map 2018 - Exhibit A
[4] https://www.countyofnapa.org/DocumentCenter/View/242/NAEH-CSH-Napa-City-and-County-Final-Recommendations-Report-PDF?bidId

Table 3

System Map: Emergency Shelter

Prior Residence

Destinations of 416 exits:

66% Literally Homeless

34% Other

Emergency Shelter

Homeless — 69%

Unknown — 7%

Permanent — 24%

Top Prior Residences:
55% Place Not Meant for Habitation (Literally Homeless)
19% Institutions (Other)
11% Emergency Shelter

Top Destinations:
53% Place Not Meant for Habitation (Homeless)
22% Rental Housing (Permanent)
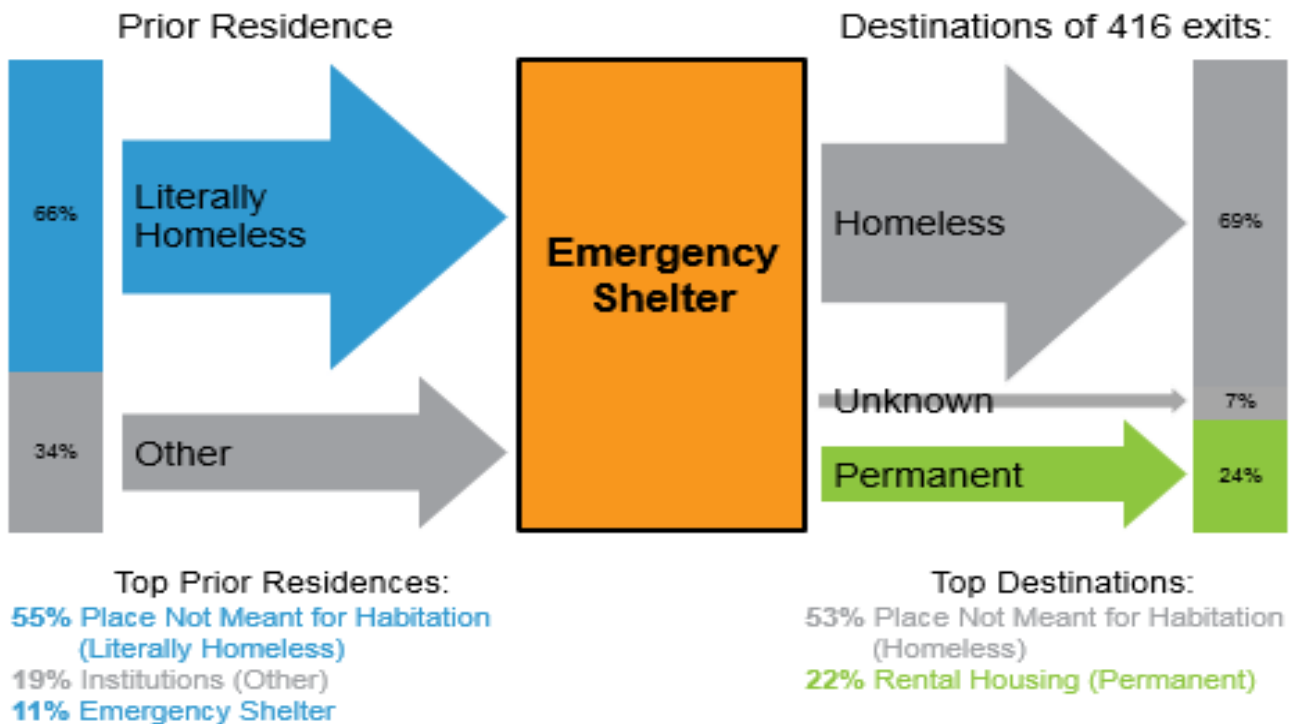
* From CSH – Homeless Systems Map 2018

Additionally, of those leaving the shelter system, 24% of people are exiting to permanent housing destinations. This indicates that the increased package of services provided at the shelter has been effective in connecting homeless person with permanent housing. The data also shows that a large percentage of persons exiting the shelter system are cycling in and out of homelessness, with 69% of shelter stayers returning to homelessness. This figure highlights the pressing need for additional permanent housing options – including RRH and SH – in the City and County of Napa.

The City and County of Napa have committed significant resources towards the effort to prevent and end homelessness in the region. However, there is not enough available permanent housing inventory to meet the demand for supportive housing and rapid re-housing among homeless individuals and families. A 2018 analysis shows that an additional 367 units of Supportive Housing (SH), Rapid Re-Housing (RRH), other permanent housing, and diversion slots are needed to meet the needs of persons experiencing homelessness in Napa.

The housing market in Napa has historically been very tight. However, after the devastating wildfires in 2017, the housing stock declined resulting in higher housing costs and extremely low vacancy rates. Landlords have limited incentives to offer housing to low-income, very low-income, and extremely low-income households, including Section 8/Housing Choice

Voucher participants. The cost of living in Napa is extremely high, and most low-income residents are paying up to 50% of their income on rent[5]. The vacancy rate for multifamily rental properties is only 1%[6] meaning that landlords can be very selective of tenants when a unit becomes available. The Housing Authority of the City of Napa administers landlord engagement strategies – including the Section 8 Risk Mitigation and Incentive Program – and states that it is very difficult to convince landlords to prioritize Section 8/Housing Choice Voucher tenants. The Section 8 Risk Mitigation and Incentive Program serves a limited number of households, 15 households in 2018 expanding to 30 households in 2019.

Table 4

Units/Slots Needed to Address Homelessness in Napa				
	Supportive Housing	**RRH/OPH**	**Diversion**	**Totals**
Individual Households	(243)	(270)	(56)	**(569)**
Family Households	(2)	(10)	(4)	**(16)**
Totals	**(245)**	**(280)**	**(60)**	**(585)**

*From CSH – 2018 Systems Map and Projections Presentation

There are just under 60 SH beds in Napa, and recent analysis shows that an additional 195 units of SH are needed to address the need of persons experiencing homelessness in the community.

As seen in Table 6 below, CSH found that the vast majority of persons who move into Supportive Housing are able to remain stably housed, thereby ending their long period of homelessness. In fact, systems-level data indicates that few persons return to homelessness after moving into SH. In terms of exits from SH, approximately 60% of SH tenants remain stably housed, whether as tenants of rental housing or by moving into permanent housing with family or friends. Forty percent (40%) of SH exits represent tenants who have passed away while housed. Although unfortunate, they were able to die within the comfort of their own unit as opposed to the streets of Napa. This data is not highly unusual for SH performance outcomes, and indicates that the Napa homeless system has been relatively successful in identifying some of the most vulnerable persons for supportive housing. When reviewing systems-level entrance data for supportive housing, CSH found 45% of persons who move into SH in Napa come from literal homelessness (shelter and places not meant for human habitation). The remaining 55% of SH tenants come from other living situations, with 25% likely "at risk" of homelessness and coming from stays with family or friends. Napa should use this systems-level information to focus on targeting SH units to those persons who are the most vulnerable and experiencing literal homelessness. Prevention/diversion resources may be used to target persons who are "at risk" of homelessness and staying with family or friends.

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[5] Housing Authority of the City of Napa's Five-Year Plan
[6] City of Napa Vacancy Rate Survey 2018

Table 5

System Map: Permanent Supportive Housing

Prior Residence

45% Literally Homeless

55% Other

Permanent Supportive Housing

Destinations of 5 exits:
(not shown in the system map)

Deceased — 40%

Permanent — 60%

Top Prior Residences:
25% Staying with Family/Friends (Other)
25% Emergency Shelter
20% Place Not Meant for Habitation (Literally Homeless)

Top Destinations:
40% Rental Housing (Permanent)
40% Deceased (Other)
20% Permanent Stay with Family/Friends

From CSH – Homeless Systems Map 2018

Beginning in 2017, Napa has been able to expand the number of RRH slots in the region, thereby increasing the number of permanent housing placements for homeless persons. In fact, 86% of persons exiting from RRH programs in Napa move to permanent housing. This systems-level data indicates that Napa's strategy of increasing RRH slots has proven to be an effective one, leading to outstanding outcomes for housing stability. However, while the overall results from Napa's RRH expansion have been excellent, current data suggests that an additional 143 slots of RRH are needed to meet the needs of persons experiencing homelessness in the region.

Table 6

System Map: Rapid Re-Housing

Prior Residence

- 56% Literally Homeless → Rapid Re-Housing
- 44% Other → Rapid Re-Housing

Rapid Re-Housing

Destinations of 98 exits:
(not shown in the system map)

- Homeless → 10%
- Unknown → 4%
- Permanent → 86%

Top Prior Residences:
33% Emergency Shelter
24% Rental Housing (Other)
23% Place Not Meant for Habitation (Literally Homeless)

Top Destinations:
79% Rental Housing (Permanent)
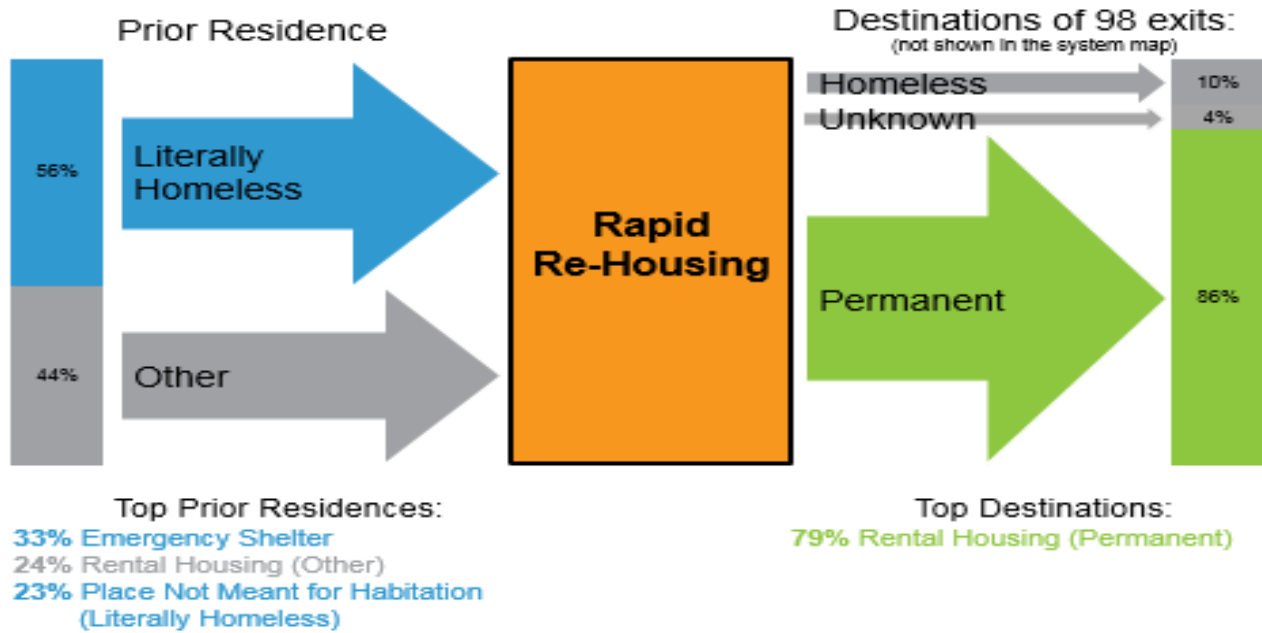
From CSH – Homeless Systems Map 2018

City and County of Napa Homeless Policy Landscape

A systematic approach to ending homelessness requires a comprehensive and robust homelessness crisis response system that includes a variety of interventions created to meet the needs of persons experiencing homelessness in the community. It also requires the review of policies and laws that may criminalize homelessness. The National Coalition for the Homeless defines the criminalization of homelessness as "measures that prohibit life-sustaining activities such as sleeping/camping, sitting, and/or asking for money or other resources in public. These ordinances include criminal penalties for violations of these acts.[7]"

To limit the criminalization of activities associated with homelessness, Napa's homeless system has been partnering with local police and Sheriff Departments and the court system. Napa's outreach teams work in partnership with the Napa Police Department to make referrals to housing and services available in the homeless system when appropriate. Additionally, Napa County has operated a Mental Health Court program which consists of representatives from law enforcement, probation, district attorney's and public defender's offices, Department of Corrections, and the Health and Human Services Agency. The "problem-solving" Mental Health Court has been successful to providing treatment and support to persons experiencing homelessness who have a mental illness and who are involved with the criminal justice system. The Napa Police Department (NPD) is seen as a statewide leader and subject matter expert in community policing models for collaboration and partnerships with outreach efforts and persons experiencing homelessness in the region. In fact, NPD has helped to design the training videos for Police Officer Standards and Training (POST) in Policing & Homelessness as well as behavioral health topics that are used across the State. In order to ensure all officer use best practices in community policing, all new NPD officers meet the outreach team immediately after starting and complete ride along days to learn the homeless system.

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[7] http://nationalhomeless.org/issues/civil-rights/

Guiding Principles for Napa's Homeless Plan Update

Throughout this *Homeless Plan Update* process, the transformation of Napa's Homelessness Crisis Response System will focus on how persons experiencing homelessness will "flow" through the system with rapid connection to permanent housing. Starting with the "front door," or how persons access or enter the homeless system, it is important to follow homeless individuals and families while they are served by the homeless system and then ultimately placed into permanent housing or otherwise exit the system. This systematic approach and vision will allow for improved access and transparency, and increased housing placements for persons experiencing homelessness.

A set of guiding principles will be used throughout the Homeless Plan Update including:

1. **Shift from program approach to system approach to ending homelessness**. Breaking programmatic silos and aligning resources in a coordinated effort to end homelessness has been a key principle in creating a dynamic homelessness crisis response system in Napa. Using alignment strategies and data sharing across programs, Napa has established system-wide goals to ensure that limited resources are used effectively and that consistent performance measures are used to track progress. The City and County of Napa hired a Homeless Services Coordinator in 2016 to expand their organizational staff capacity to address the housing needs of the most vulnerable people. This position is overseen by the County Health and Human Services Agency and will assist Napa to manage all systems change efforts.

2. **Adoption of Housing First Approach**. Napa stakeholders agree that a Housing First approach has been well proven to end chronic homelessness and leads to better access to housing, increased housing retention, lower returns to homelessness, and reductions in the use of crisis services. Stakeholders throughout the system have agreed to implement Housing First strategies for all homeless populations – focusing their efforts on moving people quickly into permanent housing from settings such as the streets or shelters, without any preconditions of treatment acceptance or compliance. Napa will work to ensure that the community-wide Housing First approach includes the following:

   - That there is a short application process for all housing programs, and that tenants are housed quickly in a unit of their choosing.
   - That the eligibility criteria for all homeless programs meet the minimum requirements of funder(s) or landlords without additional criteria imposed.
   - That sobriety is not an entrance requirement.
   - That medication compliance is not an entrance requirement.
   - That an agreement to participate in services is not an entrance requirement.
   - That there is no minimum income requirement.

3. **Use data to improve the system.** Napa has implemented data-driven practices to continuously refine processes and make improvements throughout the homeless system. Napa will build on the existing HMIS structure and focus its efforts on creating a robust performance measurement system for each strategy set out below. This will help the community to focus on a simple and clear set of outcome measures, regularly assess progress on those measures, and strive for accountability throughout this process. This will help the region achieve outcomes, and will help align the incentives for and the activities of providers and other stakeholders.

Overarching Strategies for Implementation Phase

The implementation phase (Phase III) of Napa's *Homeless Plan Update* includes four overarching strategies:

1. **Provide Better Access to the System for the Most Vulnerable**: Redesign and fund the homeless emergency shelter and homelessness crisis response system to better align with Housing First principles and national best practices. Remove barriers and streamline access to shelter and permanent housing options for the most vulnerable people experiencing homelessness. Safely divert more people from homelessness when there is an appropriate alternative to help them to resolve housing crises before they enter shelter or other parts of the homeless system.

2. **Prioritize Resources within the System**: Create and implement an expanded coordinated entry system (CES) to standardize the matching of housing and service resources to people experiencing a housing crisis in order to maximize positive housing outcomes and ensure equity and transparency in the homelessness crisis response system. Target housing resources to "right size" interventions based on household need and ensure the most vulnerable households are prioritized. Divert people from homelessness to safe and appropriate housing whenever possible. Napa will fully incorporate NPLH funded supportive housing units into CES.

3. **Scaling Resources to Increase Exits to Permanent Housing**: Work collaboratively with Napa County Affordable Housing and City of Napa Housing departments to build housing capacity through the alignment of both funding and policy to create a diverse pipeline of housing resources including rapid re-housing, supportive housing and scattered-site housing for additional permanent housing placements for persons experiencing homelessness. Use a progressive engagement approach in which all persons who enter the homeless system are assessed and limited resources are targeted based on client need. Provide a light touch or prevention/diversion strategies for those who require fewer resources to exit the homeless system, while intensive resources like supportive housing (including units funded through NPLH) will be provided to the most vulnerable or those who will have the most difficultly exiting homelessness on their own.

4. **Mainstream Systems Integration**: Integrate the homeless system with mainstream health, behavioral health and social services systems as well as mainstream low-income affordable housing. This will also include creating connections to criminal justice and other systems to ensure that those being discharged from jail or other institutional settings do not become homeless. Integration can occur at the front-line level with staff coordinating across agencies to coordination at the funder level, with the existing Funder's Collaborative. The Funder's Collaborative could guide future efforts to integrate funding for services and housing for people experiencing homelessness.

Strategy 1 – Better Access to the System for the Most Vulnerable

1.1   Build Outreach Capacity & Engage Persons Experiencing Unsheltered Homelessness

Discussion

Outreach efforts play a critical role in creating a homelessness crisis response system that quickly identifies persons experiencing homelessness who are sleeping on the streets or in a place unfit for human habitation and who have the greatest need. Through outreach efforts, vulnerable individuals can have their basic needs addressed and be swiftly navigated to the front door of the homeless system. Robust outreach programs lead to greater integration between the homeless system and mainstream systems including the criminal justice systems through coordination with local police departments and health systems through partnerships with emergency responders.

Progress to Date

The Whole Person Care Pilot has enabled Napa to increase street outreach efforts and coordinate care with behavioral health services for persons experiencing homelessness. In the summer of 2017 Napa selected a new Shelter Operator, Abode Services, which oversees outreach efforts in partnership with the City of Napa Police Department and County Mental Health Services. The Outreach Team works throughout the county on a regular basis. County Mental Health services provides behavioral health staffing at the drop-in center and mental health assessments are completed with participants referred by the Abode Services Outreach Team. In keeping with national best practices, a team approach is used for outreach and includes a Coordinator, Mental Health Outreach Workers, Peer Outreach Workers and four Housing Navigators. A 24-hours a day, seven day a week message line has been established and the Outreach Coordinator deploys outreach staff to clients in need during operating hours. The increase in outreach capacity in Napa has increased contact with unsheltered persons experiencing homelessness, helped increase shelter placements for the most vulnerable, accelerated assessment times, ensured swift access to shelter service, coordinated entry sites, and ultimately increased the number of placements into permanent housing.

Opportunities, Future Work & Goals

While expanded outreach efforts have begun, Napa is working toward the development of program outcome metrics to evaluate these activities. Napa will work with Abode Services to finalize mutually-designed metrics that align with system outcomes priorities. The team will then establish program policies, procedures and goals. The team can begin with data currently being tracked through Whole Person Care (Mobile Engagement, percentage of participants with active services plans, and number of service encounters per month). The team will consider outcome metrics that include: increasing number of permanent housing placements; increasing the number of behavioral health assessments; decreasing time from engagement to referral; and increasing engagement with undocumented and Spanish speaking populations.

1.1 Outreach – Goals
1. Focus outreach efforts on regularly engaging people experiencing unsheltered homelessness across the entire County of Napa to connect them to the coordinated entry system and its housing and services resources.
2. Continue to work with shelter operator to develop specific outreach program policies, procedures and outcome metrics.

1.2 Divert people from the homelessness crisis response system whenever possible, safe, and appropriate.

Discussion

Reducing entries into homelessness is one of the stated goals of the federal HEARTH Act, and creating screening and diversion resources are an effective way to achieve this. Shelter diversion works by helping individuals and families seeking shelter find alternative housing options (such as staying with friends or family members). Diverting households, then, means fewer households will be entering the homeless system. Diversion can be attached to flexible financial resources and/or case management or mediation services. Diversion may require shelter case managers, coordinated entry staff or outreach teams be skilled at problem-solving and mediating with landlords and family members, and diversion activities may require the availability of flexible financial assistance, such as access to Season of Sharing funds, for emergency situations.

Napa's 2017 data indicated that approximately 19% of people entering shelters were coming from housed situations. Diversion screening would identify people who are seeking emergency shelter but whose current housing situation is still a safe and viable option, and, with a little assistance, would keep them in housing and not bring them into the shelter system. By finding other housing options for some households, Napa can ensure that shelter beds are reserved for those households that literally have nowhere else to go. Successful diversion, therefore, can ease the demand for shelter beds and reduce the need for waitlists and overflow shelter beds.

Progress to Date

Recognizing the importance of developing a strong diversion program, Napa is currently working with NAEH to develop and implement a diversion assessment tool. NAEH will help Napa create a diversion program plan and policies and procedures. The goal will be for the outreach team and shelter staff to screen and safely divert people who may be better served remaining in their current housing situation.

Opportunities, Future Work & Goals

Newly established diversion efforts should be connected to outreach, shelter and CES systems to be fully integrated into the homeless system. Once new diversion screening tool and program polices are developed, Napa should work to identify additional diversion resources through new funding sources and focus on provider education to build skills and capacity.

1.2 Diversion – Goals
1. Fully implement diversion program throughout the homeless system by developing, adopting and using diversion screening tool; and by developing guidelines for diversion program.
2. Increase diversion resources by identifying new funding opportunities.
3. Develop and document diversion program referral flow between providers.
4. Set data tracking workflow and outcome metrics. Update HMIS data base as needed with new workflow.
5. Train providers on diversion referrals/resources/process, and diversion problem solving skills.

1.3 Re-design Napa's emergency shelters to be part of the "front-door" to a low-barrier and housing-focused homelessness crisis response system.

Discussion

Emergency shelters are a critical component of an effective homelessness crisis response system because people experiencing a housing crisis need to have access to a safe and decent place to stay for a brief period of time while they are in the process of being re-housed. To be a system that truly implements the Housing First approach throughout all interventions, anyone experiencing a housing crisis should be able to enter shelter without pre-requisites, and shelter services should be focused entirely on re-connecting people to housing as quickly as possible.

Progress to Date

In July 2016, the National Alliance to End Homelessness delivered recommendations for improving the Napa emergency shelter and crisis response system. In addition to written recommendations, the Alliance provided direct and remote technical assistance to the City and County and homeless service providers from July 2016 to June 2017 to implement these recommendations. The technical assistance included training on effective emergency shelter and rapid re-housing practices to providers and community stakeholders, developing and executing a Request for Proposals (RFP) for emergency shelter operations that aligned with the new low-barrier and housing-focused approach to shelter practices, and launching a 100-day Housing Challenge to help emergency shelter and rapid re-housing providers work together to quickly exit people from shelters to permanent housing. Through the RFP process, a new operator, Abode Services, was procured.

The NAEH 2016 report recommended that Napa's shelters align their practices to be more low-barrier and housing-focused in order to serve people who are more vulnerable and require support to access permanent housing. The report found that the existing primary shelters for individuals and families in Napa had restrictive eligibility criteria that made it difficult for households with substance use issues, mental health disorders, or other challenges to access shelter. To enter or remain in shelter, participants had to be tested for drugs and alcohol. Participants also had to adhere to certain program rules to remain in shelter. Since the recommendations were released, shelters have implemented low-barrier access and shelter guidelines and have eliminated overly restrictive rules and entry requirements that are not necessary for safety.

The report also found that the average length of stay in shelters was much longer than the national goal of 30 days and should be reduced. NAEH recommended re-focusing shelter services and supports to be more focused on helping households exit to permanent housing quickly. Since these recommendations were released, the shelters have scaled up housing location and search assistance. The domestic violence shelter has also focused more of its activities on building its capacity to exit people to permanent housing, and the domestic violence shelter has also experimented with helping households find shared housing and roommate options to decrease housing costs.

To shorten lengths of stay in shelter, the report recommended that providers build their capacity to provide improved rapid re-housing services and that the system should scale up permanent housing resources such as rapid re-housing and Supportive Housing to provide resources for people to exit shelter. Since the report was published, the shelter and rapid re-housing providers participated in a six-month rapid re-housing capacity building effort and participated in a 100-day Housing Challenge. The providers, including the Napa Police Department Homeless Outreach Team, accomplished their goal by housing 75 households in 100-days, which was a significant increase in the number of households housed in that same period of time earlier in the year. The providers were also able to house more households with the same amount of resources by improving their RRH practices and changing their program policies to align with national best practices.

The system improvements described above resulted in improved outcomes, as reflected in the region's data. As indicated in the homeless assessment section, the 2017 PIT data showed a 42% increase in sheltered chronically homeless individuals, which means the shelter system is making great progress in implementing Housing First strategies and lowering barriers to entry of emergency shelters for people who are more vulnerable and previously not entering shelter because of restrictive shelter policies. Additionally, the 2017 Housing Inventory Chart (HIC)

showed an increase in the number of RRH units through both the CalWORKs and Home to Stay programs.

Opportunities for Future Work & Goals

The implementation of the recommendations was planned to be phased as changes to the larger system came online. As of the summer of 2018, low-barrier policies have been developed and implemented. This policy shift has proven to be successful at reaching highly vulnerable persons in Napa. This is reflected in the increased number of chronically homeless persons served by the shelter since new polices have been implemented. While great progress has been made, more work remains to be completed even as additional recommendations continue to be implemented. As discussed elsewhere in this document, the coordinated entry and diversion processes must be implemented to scale to improve the ease with which very vulnerable households access shelter. The majority of single adults and families (69%[8]) are exiting shelter back to homelessness, reflecting the pressing need for additional housing resources – including prevention/diversion, rapid re-housing and supportive housing – to exit shelter successfully. Finally, Napa is doing a great job currently with sheltering highly vulnerable single adults but should evaluate the need for creating sheltering options for particular sub-populations like seniors, young persons or families.

1.3 Re-design Front Door – Goals
1. Create low-barrier shelter system that is focused on permanent housing placements and reduces the number of exits to homelessness.
2. Regularly review written and verbal shelter rules to ensure that access is maximized for unsheltered populations.
3. Increase South Napa Shelter capacity.
4. Increase shelter utilization.
5. Increase placements to permanent housing.
6. Prioritize shelter beds through CES.
7. Ensure shelter population is representative of the broader homeless population and targets sub-populations as needed.

Strategy 2 – Prioritize Resources within the System

2.1 Fully Implement Coordinated Entry System (CES).

Discussion

Coordinated entry systems (CES) are designed to create a more seamless way for people experiencing a housing crisis to access appropriate housing and services. Coordinated entry requires a standardized, community-wide assessment tool(s) and process, participation by all housing providers within a community, and coordination to quickly connect households to housing and services once assessed. HUD requires that communities implement CES to receive federal funding under the HEARTH Act. In a well-coordinated system, there should be established criteria for prioritizing the most vulnerable for shelter and other housing programs. Making this shift from a program approach to a system approach will more efficiently match people with the programs that can best serve their needs. This system approach will also make it easier for people to access services.

Progress to Date

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[8] Napa Community Homeless System Map 2018 - Exhibit A

Napa's shelters and other housing programs have historically operated independently from each other. Over the last few years, Napa has made significant progress in integrating the shelter and housing programs into the larger homelessness crisis response system through the use of Coordinated Entry. The Napa County Continuum of Care (CoC) has formed a coordinated entry system which coordinates the intake, assessment, and referral process within the Continuum of Care (CoC) and efficiently expands the system's ability to deliver the appropriate resources to individuals and families who are experiencing homelessness.

Stakeholders have selected the Vulnerably Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) to assess both individual's and families' housing needs when they enter the homeless system based on vulnerability. The use of this assessment tool allows Napa to prioritize limited resources to those most in need. The VI-SPDAT for both individuals and families has been added to the Homeless Management Information System (HMIS), which helps to streamline the assessment process and data collection. The use of the VI-SPDAT has proven to be a valuable tool and should be expanded throughout the homeless system. Furthermore, designated coordinated entry "hubs" or access points have been finalized and are staffed by assessment workers who are trained in triage, assessment, and eligibility of existing programs. Napa's CES will include all CoC and NPLH supportive housing units.

In the summer of 2017, formal CES policies and procedures were developed and approved by the CoC board. Policies and procedures are used to guide the evaluation of an individual or family's eligibility for assistance, and to guide the determination and prioritization of how eligible individuals and families will be referred to the full range of housing and services, including prevention/diversion, shelter, rapid re-housing and supportive housing resources. In addition, Napa's CES policies and procedures include specific policies to ensure persons of every "race, color, citizenship, national origin, ancestry, religion, sex, age, familial status, disability, actual or perceived sexual orientation, gender identity or expression, marital status, source of income, genetic information, status as a survivor of domestic violence, or other reasons prohibited by law" are ensured equitable access to its resources and that the assessment and referral process comply with federal and state civil rights laws during every phase of the process. Furthermore, in 2018, the Napa CoC launched a by-name case conferencing process to coordinate care for highly vulnerable persons in the coordinated entry system. In addition, a CES/CoC planning committee was launched to oversee the implementation and revision of new CES policies and procedures.

Opportunities, Future Work & Goals

After the full implementation of CES, Napa should spend time on the development of a CES Communications Initiative to ensure all community partners and members of the public are aware of the system: what resources are available to persons experiencing homelessness, and how to access CES. Napa should develop and publish public materials and work with partners to distribute the information widely. In addition, Napa should work towards incorporating all homeless housing resources into CES, including shelter beds and non-CoC funded housing. Napa should strive for continuous improvement of CES by regularly reviewing data to ensure all homeless sub-populations are adequately represented and adjustments are made to marketing/outreach if sub-populations are found to be under-represented.

2.1 Fully Implement Coordinated Entry System – Goals
1. Develop and launch CES Communications Initiative
2. Fully incorporate all homeless housing resources into CES, including shelter beds, non-CoC funded resources and NPLH-funded supportive housing units.
3. Ensure all homeless sub-populations are adequately represented in CES.
4. Develop and track annual housing goals and reporting metrics for CES.

2.2 Develop the system's capacity to rapidly connect homeless households to permanent housing

Discussion

To shorten the length of time that people spend in shelters and increase exits to permanent housing, it is critical to create a range of permanent housing interventions so that people may return to housing quickly and not get stuck in shelter. In other words, shelter should not be a destination but instead provide "throughput" to permanent housing, which translates to creating rapid re-housing and Supportive Housing capacity to match the region's need. People experiencing chronic homelessness are best served by permanent supportive housing. Because a majority of people experiencing homelessness need rental assistance and basic move-in costs, rapid re-housing is also a powerful tool for ending the homelessness of many single adults, families, and youth. Rapid re-housing provides short-to-medium term rental assistance in private housing units with appropriate support services to help people sustain housing.

Progress to Date

To keep the homelessness crisis response system in Napa focused on permanent housing placements, in 2016 and 2017 the community embarked on a challenge to house 75 households in 100-days. With cross agency collaboration, Napa achieved this goal and has been working together to keep the momentum on creating permanent housing placements. Additionally, the community recently began landlord outreach and engagement efforts, alongside the release of the Housing Authority of the City of Napa's Section 8 Landlord Mitigation and Incentive Program. This program provides incentives to landlords who rent to voucher holders who are homeless or at-risk of homelessness. The program assists landlords with covering the costs of damage incurred by program participants. Landlord engagement efforts will expand the pool of available housing units, and ultimately support an increase in placements into permanent housing. Additionally, the Veterans Housing Workgroup in Napa meets monthly and uses a by-name-list to focus on housing homeless Veterans. This group is comprised of Veteran Administration (VA) staff that serve as case managers, housing navigators and care coordinators. The group uses a case conferencing format as well as HMIS data to identify Veterans in need of housing by name and has been successful in connecting homeless veterans to housing in Napa.

A recent analysis shows that an additional 70 units of rapid re-housing have been created which has led to an increased number of permanent housing placements. In 2018, Napa expanded access to RRH resources with new grant funding from the healthcare sector (Queen of the Valley Medical Center/St. Joseph Health and Partnership HealthPlan), in addition to a State Emergency Solutions Grant and NEWS Rapid Re-Housing grant. Additional Supportive Housing units have recently been added to the region with the new development at Valley View Senior Homes and the addition of new Veterans Affairs Supportive Housing (VASH) vouchers and mainstream/non-elderly disabled (NED) vouchers to the homeless system.

Opportunities, Future Work & Goals

The community should consider which resources can be reallocated to rapid re-housing and Supportive Housing and strategize how to use existing resources more effectively. Programs in Napa could be greatly enhanced to house more individuals and families by connecting rapid re-housing programs to the new Outreach Team and providing additional housing identification, financial assistance, and case management services. Additionally, by removing restrictions to program entry that currently exist, hiring housing specialists to engage landlords and locate housing for participants, and shifting case management practices to focus on obtaining and sustaining housing, Napa's rapid re-housing programs should continue to have better outcomes. Although housing people experiencing homelessness in Napa is a daunting challenge since Napa has such a low rental vacancy rate and high housing rental costs, many other communities with similarly tight housing markets have experienced success with using these best practices for rapid re-housing strategies.

2.2 Increase Permanent Housing Placements - Goals
1. Increase the number of RRH resources.
2. Increase the number of SH resources.
3. Initiate future RRH & SH CoC Housing Challenges.

4. Households who are enrolled in rapid re-housing are moved into a permanent housing placement within 30 days.
5. Increase percentage of households that exit rapid re-housing exit to permanent housing.
6. Increase percentage of households who exit rapid re-housing do not return to the homelessness system within 12 months.

2.3 Develop data dashboards to track progress on system flow improvements and outcomes

Discussion

Napa appears to have reliable data from its HMIS system. Most community shelter and housing programs are using the software and are inputting useful community data. Building the capacity to easily track system flow and outcomes can only strengthen Napa's homeless system data capabilities, and would be a great snapshot for data sharing across systems. This would also be a great tool for any large-scale community initiatives to keep track of data, outcomes, needs, and impact with multiple partners.

A robust performance measurement structure will help the homeless system including emergency shelters, rapid re-housing and supportive housing operate more effectively. A simple and clear set of outcome measures, regular assessment of progress on those measures, and some accountability to achieve outcomes will help align the activities and incentives of providers and other stakeholders.

Progress to Date

Currently the County of Napa is working on the development of data dashboards that will help in tracking progress system-wide. Napa will collect system-wide data from the Continuum of Care and will incorporate emergency shelter flow and outcomes data to support TA work by NAEH. Dashboard data will be used to spotlight real-time data related to coordinated entry, system entrance and exits, and can be expanded to include data points related to any community initiatives such as the flexible housing subsidy pool or the collaborative funding structure.

In order to meet reporting requirements for NPLH-funded supportive housing created under the new state program, Napa County and its housing sponsors will collect performance data from property managers, service providers and the Continuum of Care. All data points listed in Section 214 of the NPLH program guidelines will be collected in the data dashboards or HMIS. The following data reporting practices will be adopted by only NPLH-funded supportive housing projects:

- No later than 90-days after the end of each project's fiscal year, the sponsor shall submit an independent audit prepared by a certified public accountant for each NPLH-funded supportive housing project, in accordance with requirements noted in each project's regulatory agreement and the State Department of Housing and Community Development's current audit requirements.
- For all NPLH-funded supportive housing underwritten by the Department of Housing and Community Development, sponsors shall submit annual compliance reports similar to reports submitted to the State under its Multifamily Housing Program Regulations
- Annually, by September 30th, the County shall work with each project's property manager and lead service provider to gather data to be submitted to the State Department of Housing and Community Development including all items listed in Section 214 item (e) of the NPLH program guidelines.

Opportunities, Future Work & Goals

Napa should use newly developed dashboards to continuously update and refine programs to better support persons experiencing homelessness. Napa should review the *Homeless Plan Update* annually and set annual goals for each strategy.

2.3 Data Dashboard Development – Goals
1. Finalize data dashboards and integrate data tracking into current systems.
2. Develop and propose to CoC system-wide CoC goals.
3. Prepare systems map annually and compare to previous years.
4. Annual, review *Homeless Plan Update* strategies and set annual goals for each strategy.

Strategy 3 – Scaling Resources to Increase Exits to Permanent Housing

3.1 Sustain & Oversee Napa Funders' Collaborative

Discussion and Progress to Date

Building on Napa's long history of collaboration, Napa leaders convened the first Napa Funders' Collaborative in the summer of 2016. The Napa Funders' Collaborative brings together public and private stakeholders committed to preventing and ending homelessness in Napa by catalyzing systems change, establishing and measuring shared goals, and jointly funding key strategies.

At the time of its creation, membership to the Napa Funders' Collaborative included but was not limited to leaders from the following key organizations:

- County Departments: Health and Human Services Agency (HHSA), Sheriff's Department, Probation Department, Housing & Intergovernmental Affairs Division
- City/Town Departments: City of Napa, Housing Authority of the City of Napa, City of Napa Police Department
- Hospitals/Federally Qualified Health Centers (FQHCs): Queen of Valley Medical Center, OLE Health
- Napa Foundations: Napa Community Foundation, Napa Valley Vintners, Peter and Vernice Gasser Foundation
- Managed Care Organizations (MCOs): Partnership HealthPlan

Though members were encouraged to pool resources, a funding commitment was not required for membership. Potential grantees have been invited to specific meetings and/or sub-committees, but they are generally not a part of the membership due to potential conflicts of interest.

The Napa Funders' Collaborative is a semi-formal group that has made decisions through consensus. Members identify and adopt policy and funding priorities; establish metrics of success and review progress; review and score proposals; and serve as champions for the group's shared goals. Collectively, the group oversees the implementation of the Napa Flexible Housing Pool. Currently the group meets as needed.

Opportunities, Future Work & Goals

To move the work of the Funders Collaborative forward, partners should identify a lead agency to assist in overseeing the group. The lead agency should be responsible for maintaining stakeholder involvement and recruiting additional members to the collaborative. In addition, the collaborative should work together to establish goals, system performance metrics and a five-year funding strategy

3.1 Sustain & Oversee Napa Funders Collaborative - Goals

1. Identify lead agency to oversee Funders Collaborative operations, program design and implementation.
2. Develop Funders Collaborative mission statement and vision.
3. Maintain stakeholder engagement and recruit new membership.
4. Establish goals & systems performance metrics.
5. Develop five-year funding strategy aligned with group objectives.
6. Monitor activities and progress against group objectives.

3.2 Oversee the implementation of the Napa Flexible Housing Funding Pool (Flex Pool) and Landlord Risk Mitigation Pool

Discussion & Progress to Date

The Napa Funders' Collaborative oversaw the launch and operation of Napa's first-ever Flexible Housing Funding Pool (Flex Pool) in 2017. This is a new mechanism to pool funds and resources from multiple sources and match them, using a Housing First approach, to create permanent housing opportunities for homeless individuals and families. The Flex Pool is meant to increase housing resources and leverage public and private investment to expand supportive housing and rapid re-housing opportunities in Napa. The Flex Pool will support expansion of both scattered-site and site-based housing.

The Flex Pool operator – Abode Services – was selected through a competitive RFP in December of 2016. The Flex Pool operator will create and maintain a housing inventory and match household demand to the supply of housing. The Flex Pool Operator will increase housing opportunities via landlord outreach and engagement; dedicate rental assistance, services funding, or other resources to new and/or existing housing projects; and provide (directly or through sub-contract) wrap-around services tailored to the needs of the household.

Additionally, a portion of the funds in the Flex Pool will be used for the development of the Landlord Risk Mitigation Pool which will also be overseen by the Flex Pool Operator. The Risk Mitigation Pool is another type of pooled funding strategy to mitigate various kinds of risk to landlords, lenders, investors, etc. The Landlord Risk Mitigation Pool's purpose is to mitigate the risk of unit damage and missed rent payments – reasons landlords often cite when not renting to "risky" tenants, including tenants with histories of homelessness and physical and behavioral health issues. The purpose of this pool is to offer a funding guarantee to cover damages, missed rental payments, and/or rental deposits, in order to incentivize landlords to accept tenants who may pose specific risks, thereby increasing the supply of affordable housing.

Most stakeholders acknowledge that Napa has a significant shortage of affordable rental units for households of varying income levels, particularly those with extremely low-incomes. Additionally, many tenants in need of Section 8/Housing Choice Vouchers find a wait list that is currently closed with approximately three times the number on the waiting list as available vouchers. Furthermore, those who secure vouchers often have trouble finding a landlord who will rent to them and participate in the program, especially in Napa's extremely competitive rental market with a low 1% vacancy rate. The Housing Authority of the City of Napa launched the Section 8 Risk Mitigation and Incentive Program serving up to 15 households in 2018, and expanding to 30 households in 2019. The program has been successful in expanding housing opportunities for vulnerable populations.

Opportunities, Future Work & Goals

Following the selection of the Flex Pool and Risk Mitigation Pool operator and the development of policies and procedures for the use of the funds, Napa should work towards fully launching the Flex Pool in the community. This includes building public awareness of the pooled resources and how to access them. Napa should work to map

available resources and work towards creating polices for the deployment of these funds. Through this process, Napa should ensure that the pooled funds prioritize the most vulnerable using CES.

Another key piece of work moving forward will be to encourage and increase engagement of private landlords to actively participate in the Section 8 Housing Choice Voucher program through the Risk Mitigation Pool. Napa, should continue to create opportunities for the ongoing engagement of landlords and develop policies for the Risk Mitigation Pool that are attractive to private landlord and encourage these parties to lease units to persons with histories of homelessness and long-term physical and behavioral health issues. Napa should also work towards increasing funding in both the Flex Pool and the Risk Mitigation Pool with the goal of increasing placements into permanent housing for persons experiencing homelessness.

3.2 Oversee Flex and Risk Mitigation Pool - Goal
1. Launch, oversee and fully implement Flex Pool and Risk Mitigation Pool.
2. Increase Flex Pool funding with the goal of increasing permanent housing placements.
3. Monitor and Execute Flex Pool and Risk Mitigation Pool Operator Agreements.
4. Build public awareness ensuring providers and the public are aware of the Flex Pool and Risk Mitigation Pool resources and how to access them.
5. Map available resources in the Flex Pool and develop strategy policies for the deployment of funds.

3.3 Create a managed pipeline of supportive housing.

Discussion

Increasing the supply of supportive housing for homeless individuals and families in Napa is key, as demand for this type of housing outweighs the available supply. This will involve building more supportive housing, particularly if the region's vacancy rate remains so low. Finding enough funding to build supportive housing is challenging, particularly in communities like Napa where land is expensive and construction costs are high. Some Napa housing developments that have included supportive housing units have received Low Income Housing Tax Credits (LIHTCs), though there are only a couple of affordable housing projects have been awarded 9% credits (the more valuable of the tax credit program). Securing tax credits for future supportive housing communities will be key to ensuring long-term sustainability for these projects.

Opportunities, Future Work & Goals

Napa should create a small working group of key stakeholders to serve as the Supportive Housing Pipeline Oversight Committee that will meet regularly to discuss new and existing opportunities and implement No Place Like Home funding requirements. This work group will oversee supportive housing projects to fruition and establish standardized metrics of success and quality when local funds are used. The goal of the group will be to identify and prioritize supportive housing development opportunities on a communitywide, strategic basis rather than responding to opportunities ad hoc.

3.3 Create a managed pipeline of SH - Goals
1. Create a managed pipeline of supportive housing to generate permanent housing exits for the most vulnerable homeless individuals and families.
2. Convene Stakeholders and form Supportive Housing Pipeline Oversight Committee.
3. Develop five year SH development goals using unit needs projections.

Strategy 4 - Mainstream Systems Integration

4.1 Formalize partnerships with Mainstream Health Systems including primary care, mental health and substance abuse providers.

Discussion

Persons experiencing homelessness oftentimes have co-occurring chronic physical health, behavioral health and substance use issues. The development of a strong, responsive homelessness crisis response system requires deep partnerships with mainstream health systems. Living on the streets impacts a person's ability to receive preventative care, manage chronic health conditions and significantly impacts a person's overall health outcomes. Oftentimes, persons experiencing homelessness only interact with mainstream health systems during frequent visits to emergency departments which increase the cost burdens for the overall community.

The National Health Care for the Homeless Council explains that: "homelessness and ill health have been locked in an on-going cycle of cause and effect, spiraling constantly downward."

- Poor health puts one at risk for homelessness. Half of all personal bankruptcies in the U.S. are caused by health problems, too often and too quickly leading to eviction and homelessness. Dispossessed people often land with friends or family at first, but their living arrangements are tenuous, and break down particularly quickly for those with mental health or substance abuse problems.
- Homelessness puts one at risk for poor health. Exposure to infection, to the elements, and to the violence of the streets is common. Lack of control over nutrition or personal hygiene or sleep demeans and debilitates homeless people. Risky survival behaviors are the currency of the streets. The psychological toll is as dire as the physical.
- Furthermore, homelessness complicates efforts to treat illnesses and injuries. Neither health care financing nor the structure of the health care delivery system is attuned to the particular needs of homeless people.
- The health outcomes are disastrous: homeless people suffer all illnesses at three to six times the rates experienced by others, have higher death rates, and have dramatically lower life expectancy.[9]

The State of California has made great strides in recognizing the importance of integrating the homeless system with mainstream health systems through programs like the Whole Person Care Pilots and the No Place Like Home Program. The California Department of Health Care Services states:

"The overarching goal of the Whole Person Care (WPC) Pilots is the coordination of health, behavioral health, and social services, as applicable, in a patient-centered manner with the goals of improved beneficiary health and wellbeing through more efficient and effective use of resources. WPC Pilots will provide an option to a county, a city and county, a health or hospital authority, or a consortium of any of the above entities serving a county or region consisting of more than one county, or a health authority, to receive support to integrate care for a particularly vulnerable group of Medi-Cal beneficiaries who have been identified as high users of multiple systems and continue to have poor health outcomes. Through collaborative leadership and systematic coordination among public and private entities, WPC Pilot entities will identify target populations, share data between systems, coordinate care real time, and evaluate individual and population progress – all with the goal of providing comprehensive coordinated care for the beneficiary resulting in better health outcomes[10].

Progress to Date

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[9] http://www.nhchc.org/wp-content/uploads/2011/10/Housing-is-Health-Care.pdf
[10] http://www.dhcs.ca.gov/services/Pages/WholePersonCarePilots.aspx

Napa County's Health and Human Services Agency was successful in applying for and securing Whole Person Care Pilot funding to support an integrated systems approach to prioritize and serve the community's most vulnerable and costly users of the crisis healthcare system. Additionally, the City and County of Napa are working closely with Partnership HealthPlan and Providence/St. Joseph Health to secure healthcare resources to serve homeless individuals and families who are frequent healthcare users to reduce their costs to the healthcare and homeless systems.

In addition, WPC funding has helped to develop the Health Collaborative that coordinates hospital and health case management in the county. This monthly convening brings together WPC partners to enhance care coordination through case conferencing for vulnerable patients who touch both the health care and homeless systems. As a result, the homeless system is collaborating more closely with local hospitals, joint care plans and managed care organizations for case conferencing and referrals. Sharing information between partners has been made easier with the development of a WPC Release of Information and all partners continue to work together towards developing a technology platform that will allow for electronic data sharing for case management/care coordination.

Opportunities, Future Work & Goals

As the work of the Health Collaborative progresses, Napa will continue to collaborate with both the Mental Health and Substance Use systems to further enhance case management/care coordination from multiple mainstream systems. Napa partners will continue to work towards finalizing the data sharing pathway with the hospital and FQHC. Moving forward, the group will work towards identifying the best venue for managing care coordination for WPC clients and integrating health discussions into all homeless case conferencing. Napa should work towards connecting health partners to supportive housing projects in the development pipeline to assist with health program design and discus potential partnership and funding opportunities for expanding supportive housing for the most vulnerable.

4.1 Formalize Partnerships with Mainstream Heath Systems- Goals
1. Finalize data sharing pathways with hospital (Queen of the Valley Medical Center).   2. Develop integrated care coordination program with QVMC's CARE Network.   3. Document referral pathways and processes for integrated care coordination with QVMC's CARE Network.   4. Invite CARE Network to existing client case conferencing venues.   5. Monitor care coordination from case conferencing meetings.   6. Connect health partners to supportive housing projects in pipeline: program design, funding opportunities, etc.

4.2 Formalize partnerships with Criminal Justice System targeting persons who are exiting jails and prisons into homelessness

Discussion

CSH has found that annually more than 650,000 people are released from prisons and more than seven million individuals are released from jails in the United States. Many persons with mental health and substance use issues cycle between homelessness and incarceration for months or years at great public expense and with tragic human outcomes. Across the country:

- 26% of people in jail report that they were homeless in the year prior to incarceration.
- At least 16% of people in jail and prison suffer from mental illness.
- 80% of people in jail and prison have a history of substance use.

- Individuals who do not have stable housing are seven times more likely to violate parole[11].

There is a small but significant subset of people—often referred to as "frequent flyers" —who are typically homeless, transient, and have complex health and behavioral health issues. They cycle in and out of incarceration, homeless shelters, psychiatric hospitals, detox and drug treatment programs, and other emergency service systems at immense public expense and with poor outcomes.

Experts observe that, of all the issues facing these individuals, none is more immediate — or arguably more important — than the need to secure stable housing. Without access to safe and affordable housing, people re-entering the community from jail or prison have little or no chance at success; and without stable housing the success of other supports like employment services, mentoring, and substance abuse counseling is extremely limited.

Supportive housing has been documented to reduce criminal justice involvement for homeless people with severe mental illnesses, reducing jail and prison incarceration rates.

Progress to Date

Napa has increased coordination with the Napa Police Department (NPD) by connecting newly developed outreach teams to the Police Department's outreach team. NPD and outreach teams work closely together to connect persons experiencing homelessness to resources including shelter

Additionally, since 2009, Napa County has operated a Mental Health Court program which consists of representatives from law enforcement agencies, probation, the district attorney's and public defender's offices, Department of Corrections, and the Health and Human Services Agency. This "problem-solving" court provides treatment and monitoring for adult offenders who have a serious mental illness that has directly contributed to their involvement with the criminal justice system. Napa's Mental Health Court has been helpful in assisting persons experiencing homelessness who suffer from mental illness and are involved with the criminal justice systems access additional care.

Opportunities, Future Work & Goals

In the coming years, the Napa homelessness crisis response system will work to build on these partnerships and enhance collaboration with the criminal justice system by: exploring opportunities for data sharing between the homeless system and criminal justice system; bringing services for persons with criminal justice involvement to the shelter systems; and working to develop jail in-reach strategies for persons experiencing homelessness. Additionally, the future of the work includes exploring supportive housing programs that target frequent users of the criminal justice systems and enhancing data sharing capabilities between these systems.

4.2 Criminal Justice Systems Integration – Goals
1. Develop data sharing agreement between homeless and criminal justice system.
2. Use data to create supportive housing programs targeting frequent users of criminal justice system.
3. Participate in county taskforce to create cross-sector integrated client intake/assessments.
4. Bring services targeting criminal justice system population to shelter.
5. Work with police department outreach to provide jail in-reach for homeless clients.

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[11] http://www.csh.org/csh-solutions/serving-vulnerable-populations/re-entry-populations/

4.3 Develop Housing Opportunities for homeless families involved with the Child Welfare System through greater collaboration with local Human Services Departments

Discussion

According to the U.S. Department of Housing and Urban Development's 2015 Annual Homeless Assessment Report, 206,286 people in families, including 127,787 children under the age of 18, were homeless on a single night in 2015. For some of these families, lack of adequate housing contributed to the decision to open a child welfare case, placing children in out-of-home care, or delaying reunification of children with parents. Reports indicate 50% of children in foster care were homeless or unstably housed[12]. Strengthening collaboration between the child welfare system and homeless systems at the federal, state and local levels assists with the integration of services and ultimately improves family stability.

Napa should encourage local implementation of supportive housing services that integrate community services for housing and other critical services for this population, including customized case management services for children and their parents, as well as trauma informed interventions and evidence-based mental health services through partnerships to access additional services through community-based service providers. The federal government expects these supportive housing initiatives targeted to homeless families will result in reductions in child maltreatment, child removals, foster care placements and overall child welfare system involvement[13].

Progress to Date & Opportunities, Future Work & Goals

Napa is currently in the preliminary stages of connecting homeless housing and services for homeless families involved with the Child Welfare System (CWS). CWS has been invited to attend CoC meetings with the homeless system. Recently, a Youth Summit was held with Napa providers. At the Summit, providers developed a set of strategies to serve youth involved with the child welfare system. A number of these strategies related to homeless housing and services for child welfare involved youth can be adopted by the homeless system as the partnership with CWS progresses.

4.3 Collaboration with Human Services Departments for Child Welfare Involved Families - Goals
1. Increase housing opportunities for child welfare involved families.
2. Use housing strategies identified in the Youth Summit to ensure consistency between systems.

Conclusion

Napa's Homeless Plan Update summarizes the goals and strategies the region will undertake to make homelessness a rare, brief and non-recurring experience. In recent years, the City and County of Napa have made significant progress towards achieving this overall goal. As a result, Napa has the opportunity to achieve great impact for persons experiencing homelessness by increasing the quality and coordination of services, and expanding permanent housing opportunities. If

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[12] http://1rooffamilies.org/overview/

[13] http://www.csh.org/csh-solutions/serving-vulnerable-populations/families/child-welfare-and-supportive-housing-resource-center/partnerships-to-demonstrate-the-effectiveness-of-supportive-housing-for-families-with-child-welfare-involvement/

systems transformation efforts continue and if community resources also expand, Napa has the real possibility of reducing homelessness in the region.

- **Napa can dramatically reduce chronic homelessness.** Although Napa has a relatively high percentage of chronically homeless individuals, and that percentage has increased over time, the actual number of people is not staggering – 158 persons (according to 2018 PIT count). Napa has added SH units and RRH slots to its inventory. Although the current supply does not meet the demand, new projects in Napa's housing pipeline have been designed to prioritize this population. Government and other funders have established a preference for serving long-term homeless individuals and families.

- **Napa can lead systems-level change in the region.** The City and County of Napa are leading efforts to create systems-level response to homelessness, and private funders have shifted their interest to support larger-scale solutions at the systems level. Tapping mainstream resources, particularly on the healthcare front, has expanded the system's overall response.

- **Napa can expand resources to meet the needs of persons experiencing homelessness.** Napa has accomplished significant progress to date and continues to make great strides over time. Key accomplishment from the last few years have assisted the system to meet the needs of persons experiencing homelessness, including the following:

  - The Funders' Collaborative was established to align resources throughout the homeless system and increase capacity for the addition of permanent housing solutions.
  - Additional staff capacity has been added to help with systems coordination and outreach efforts.
  - A Flex Pool and Risk Mitigation Pool and Shelter Operator was selected through a competitive process.
  - Frequent user initiative was launched using the WPC Pilot.
  - The Shelter System re-design has been completed and is implementing Housing First practices which has led to a significant increase in shelter utilization by the chronically homeless population.
  - Napa now has a greater focus on performance based contracting and greater focus on data/outcomes across the system.
  - The Coordinated Entry System has selected a standard assessment tool and has moved to full systems implementation.
  - Housing First practices have been implemented throughout the homeless system's services and housing programs – from the shelter system, rapid re-housing and SH programs.
  - Rapid Re-housing programs have been expanded and are helping to rapidly connect homeless households to permanent housing.
  - Diversion strategies are being implemented in the shelter systems and are helping to reduce the number of overall entries into the homeless system.
  - Napa has developed plans to take full advantage of No Place Like Home funding.
  - The community is leveraging Medi-Cal funding for services using the WPC Pilot.

As seen above, Napa is making significant progress to end homelessness for its most vulnerable residents.

Community Homeless System Map

HOMELESS & NEAR HOMELESS

Emergency Shelter (entering)

%	(#)	Destination
55%	(248)	Place Not Meant for Habitation
19%	(85)	Hospital/Psych/Jail/Foster Care/Detox
11%	(49)	Emergency Shelter
6%	(26)	Staying with Family/Friends
4%	(19)	Rental Housing, no subsidy
2%	(11)	Safe Haven
1%	(3)	Don't Know/Refused
1%	(3)	Rental Housing, with subsidy
0%	(2)	Hotel/Motel
0%	(1)	Transitional Housing
0%	(1)	Information Missing
0%	(0)	Other
0%	(0)	Permanent Supportive Housing
0%	(0)	Owned by Client

66% Literally Homeless
34% Other

Emergency Shelter

416 exited in 2017

Year-round Beds
Overflow Bed(s)
Seasonal Bed(s)

122 people (PIT) 2018

Among Leavers:
54% LOS < 30 days
40% LOS 1 - 6 mo
6% LOS > 6 mo

Emergency Shelter exit to: 76%

%	(#)	Destination
53%	(221)	Place Not Meant for Habitation
5%	(22)	Hospital/Psych/Jail/Foster Care/Detox
5%	(20)	Temporarily Staying with Family/Friends
5%	(19)	exit back to Emergency Shelter
4%	(17)	Don't Know/Refused
3%	(11)	Information Missing
1%	(3)	Transitional Housing
0%	(2)	Other
0%	(1)	Safe Haven
0%	()	Hotel/Motel

exit to: 65%

%	(#)	Destination
35%	(9)	Temporarily Staying with Family/Friends
12%	(3)	Hospital/Psych/Jail/Foster Care/Detox
8%	(2)	Other
8%	(2)	Information Missing
4%	(1)	Emergency Shelter
0%	()	Don't Know/Refused
0%	()	Hotel/Motel
0%	()	exit back to Transitional Housing
0%	()	Safe Haven
0%	()	Place Not Meant for Habitation

Transitional Housing (entering)

%	(#)	Destination
30%	(12)	Staying with Family/Friends
28%	(11)	Emergency Shelter
10%	(4)	Hospital/Psych/Jail/Foster Care/Detox
10%	(4)	Transitional Housing
8%	(3)	Place Not Meant for Habitation
8%	(3)	Safe Haven
3%	(1)	Rental Housing, no subsidy
3%	(1)	Hotel/Motel
3%	(1)	Information Missing
0%	()	Rental Housing, with subsidy
0%	()	Other
0%	()	Don't Know/Refused
0%	()	Owned by Client
0%	()	Permanent Supportive Housing

35% Literally Homeless
65% Other

Transitional Housing

26 exited in 2017

Year-round Beds

46 people (PIT): 2018

Among Leavers:
38% LOS < 6 months
27% LOS 6 mo - 1 yr
35% LOS > 1 yr

exit to: 24%

%	(#)	Destination
12%	(48)	Rental by Client, No Subsidy
10%	(40)	Rental by Client, Subsidy
3%	(11)	Permanently living with family/friends
0%	(1)	Exit to PSH
0%	()	Owned by Client

exit to: 35%

%	(#)	Destination
19%	(5)	Rental by Client, Subsidy
8%	(2)	Permanently living with family/friends
4%	(1)	Rental by Client, No Subsidy
4%	(1)	Exit to PSH
0%	()	Owned by Client

HOMELESS & UNKNO

Homelessness

69%	From ES
50%	From TH

Unknown Destinations

7%	From ES
15%	From TH

PERMANENT HOUSING

Rapid Re-Housing

Entering From:

%	(#)	Source
33%	(38)	Emergency Shelter
24%	(28)	Rental Housing
23%	(26)	Place Not Meant for Hab.
6%	(7)	Staying with family/friends
4%	(5)	Owned by Client, no subsidy
3%	(4)	Transitional Housing
86%		Exits to PH

Permanent Supportive Housing

5 exited in 2017

Entering From:

%	(#)	Source
25%	(11)	Staying with Family/Friends
25%	(11)	Emergency Shelter
20%	(9)	Place Not Meant for Hab.
14%	(6)	Transitional Housing
7%	(3)	Hospital/Psych/Jail/Etc.
5%	(2)	Rental by Client