

# **10 year Plan to End Homelessness – Columbia County**

**Community Action Team**

**December 2011**

# 10 Year Plan to End Homelessness

## Columbia County

December 2011

### Table of Contents

Introduction . . . . .	3
Immediate History and Start of Planning Process . . . . .	3
Charrette Process – September 2011. . . . .	4
Target Populations – Homelessness priorities – November 2011 Process . . . . .	5
Key Partners . . . . .	8
Type of Housing Needed . . . . .	9
Columbia County - Current Actions . . . . .	11
Recommendations. . . . .	14
Issue Area Action Items . . . . .	14
Discharge planning . . . . .	14
Systems of Care . . . . .	15
Housing Opportunities. . . . .	15
Keys to Housing . . . . .	16
Performance Measures – Political Will . . . . .	17
Emergency Response . . . . .	19
Recommendations for State Attention . . . . .	19
Employment and Income. . . . .	21
Coordinated Entry . . . . .	21
Conclusions. . . . .	22

# **10 Year Plan to End Homelessness**

## **Columbia County**

### **Introduction**

Community Action Team (CAT) respectfully submits this initial plan for the development of a 10 Year Plan to End Homelessness to the Board of Community Action Team, City and County leaders, members of the Columbia County Service Community and Oregon Housing and Community Services.

Community Action Team, as the Community Action Program (CAP) agency serving Columbia, Clatsop and Tillamook counties will take the lead with the development of the planning process for Columbia County. This plan is submitted to meet requirements for completion but work will continue in Columbia County with leaders, experts, homeless program staff and program participants to fine tune and adapt state level recommendations to the realities in Columbia County.

### **Immediate History and Start of the Planning Process**

In October 2011, eight professionals from Columbia County traveled to Redmond, Oregon to participate in a Charrette process sponsored by Oregon Housing and Community Services and led by the Corporation for Supportive Housing. Those individuals in combination with other Columbia County leaders, professionals, service providers and program participants will form a Homelessness Coalition. The Coalition will continue the work that began in Redmond. The people who attended the Charrette and their organizational affiliations include:

Jim Tierney – Community Action Team  
Barbara Wood – Community Action Team  
Keith Locke – St Helens City Counselor and Community Action Team Board Member  
Jan Kenna – Commission on Children and Families  
Lee Coleman – Department of Human Services, Child Welfare  
Linda Pritchett – Columbia County Mental Health  
Josh Luttrell – Columbia County Juvenile Department  
Walt Pesterfield – Columbia County Corrections

The Charrette Process, designed by state staff and steering committee members hoped to result in the completion of plans for the 18 rural counties in Oregon without completed plans. This report relies heavily on the results of the Charrette and the report: Final Framework for the Development of 10 Year Plans for Rural Oregon submitted by Corporation for Supportive Housing staff.

Limited funding was available to send representatives to the Charrette process in Redmond so individuals and agencies were asked to provide support for their representative to attend the planning process. We recognize the commitment and dedication demonstrated by people's willingness to expend scarce personal and institutional resources especially during trying economic times.

### **The Charrette Process – September 2011**

The Charrette Process brought together local and national experts on six issue areas over two full days of intense dialogue at the Redmond Oregon Expo Center. Each conversation occurred in a "fishbowl" setting with a group of experts sitting in a circle surrounded by outer circles of community stakeholders. For the first hour, the local and external experts engaged in a dialogue that encouraged thinking of new systemic and programmatic responses in the issue areas. Experts from diverse communities and organizations drew from their experiences and expertise to exchange views and craft suggestions for moving forward.

While the expert dialogue occurred, the rest of the Charrette participants observed the discussion without comment. Half way through, the conversation among the experts ended and CSH facilitated audience observations and feedback. During this time, the experts were not allowed to respond and community members were given ample opportunity to agree with or challenge the experts and to offer other suggestions on the issue areas. The purpose of this part of each session was to engage the community members in the discussion and benefit from their expertise and experiences.

The Charrette provides a fast-paced but thorough exploration of critical aspects of developing a plan and action steps. Experts shared solutions to common issues facing communities addressing system and service issues related to homelessness. The six issue areas were:

- Discharge Planning
- Systems of Care
- Housing Opportunities
- Keys to Housing
- Performance Measures/Political Will
- Emergency Response

Copious notes were collected and the Corporation for Supportive Housing staff developed a comprehensive initial list of suggestions for county activities for review and comment by steering committee members and all attendees in a webinar format. Changes were made and a final report was presented via a webinar to all interested participants. It is from this list of suggestions formulated by the Charrette participants and local and national experts that the initial Columbia County planning document arises.

### **Target Populations - Homelessness priorities – November 2011**

In November 2011, homelessness data from 2010 was discussed with the staff that work in the CAT Homelessness Services program with a goal to get their suggestions about housing needs. This section is based on a review of that data and the subsequent conversation with the staff.

In 2010 data collected at Community Action Team, there were a number of populations underserved by our homelessness programs. Table 1 indicates a count of all unduplicated individuals and households. The unserved category is those individuals for whom we were able to provide only an intake. Because of lack of resources or their lack of income or eligibility for any funding streams, they were turned away.

Table 1. All Homeless Clients at CAT in 2010

	Unserved		Served	
Undup people	1234	58.9%	861	41.1%
Undup households	551	60.5%	359	39.5%

One of the first priorities should be to provide additional affordable housing primarily in studios and 1 bedroom units. There is also a need for 2 and 3 bedroom units. Many of our single parent homes and 2 parent homes that are on TANF receive subsidies that provide insufficient income to place them in any fair market housing. In Table 2, our 2010 data indicates that there were 145 single parent female headed homes and 18 single parent male headed homes that we were unable to serve.

Table 2. Household Type

	Unserved		Served	
Single parent, female	145	27.7%	131	37.5%
Single parent, male	18	3.4%	13	1.5%
2 parent	87	16.6%	62	6%
Single person	184	35.1%	114	13.2%
2 adult, no kids	64	12.2%	29	8.3%
Other	26	5%	10	2.9%

In Table 3, we demonstrate that there were 206 individuals and 153 2-person homes that needed housing and we couldn't serve. If affordable studios and 1 bedrooms were available in the county, we would have much greater ability to solve homeless problems. Fewer larger units are needed because the data demonstrates that as household size grows to five or more, the number of unserved drops off significantly and only 30 households were not able to be served in 2010.

Table 3. Household Size

	Unserved		Served	
One	206	37.4%	128	35.7%
Two	153	27.8%	85	23.7%
Three	95	17.2%	72	20.1%
Four	67	12.2%	43	12.0%
Five	15	2.7%	16	4.5%
Six	11	2.0%	11	3.1%
Seven	4	.7%	3	.8%
Eight+	0		1	.3%

Table 4 provides information about the number of households with or without income sources. For most funding streams, a lack of any income would preclude service provision from any government sources but rather rely on unrestricted funds such as churches and other charitable donations. In 2010, there were 392 households with 1 or more sources of income that we were unable to serve. These data underscore the need for more affordable housing in Columbia County.

Table 4. Source of Household Income

	Unserved		Served	
1 or more sources	392	71.1%	313	87.2%
No income	159	28.9%	46	12.8%

The homelessness staff recommended housing tied to services be developed in St. Helens since that is where the majority of the services are currently provided. Secondly, they indicated that Scappoose is another area with a severe lack of affordable housing. Scappoose is more easily accessible by public transportation. It was recommended that other outlying areas focus on development of senior or veteran's housing. The staff indicated that most of the affordable housing complexes in Columbia County have very long waiting lists, perhaps up to 5 years. The Columbia Hills complex in St Helens was cited as a model worth replicating. It includes studio and 1-bedroom units which holds rent at 30% of income and allows pets.

Table 5 shows the served and unserved by age. These data highlight a few populations of interest. First, youth homelessness. The homeless staff indicate that the majority of those in the age 12-17 are homeless with a parent(s) but there are a few that are emancipated. The youth age 18-23 are primarily youth on their own. These 179 of youth unserved includes many youth aging out of foster care, kids with drug and alcohol issues, mental illness and other disabilities, criminal records, teen

pregnancy, gay/lesbian/transgendered youth and other problems. It is as of yet unclear which populations require issue-specific housing and which might be co-housed. In addition, Women’s Resource Center with 22 beds, will occasionally offer emergency shelter to individuals who are not domestic violence victims if their shelter’s capacity allows. The director reported that in 2010, they provided emergency shelter to 29 youth, age 18-23.

Table 5. Age

	Unserved		Served	
0-5	234	19.0%	167	19.4%
6-11	137	11.1%	125	14.5%
12-17	107	8.5%	101	11.7%
18-23	179	14.5%	75	8.7%
24-44	364	29.5%	261	30.3%
45-54	111	9.0%	59	6.9%
55-69	88	7.1%	63	7.3%
70+	14	1.1%	10	1.2%

The other population highlighted in this report is seniors. This chart indicates that 102 seniors were not served in 2010. The homelessness staff reported that there is an absence of senior housing in Columbia County. They indicated that units need to be ground floor and many modified to allow for wheel chairs, grab bars and roll in bathing facilities, not tubs. Again, the Rainier senior center has an adjacent senior housing facility with a 40-50 person waiting list. However, it was stated that the residents are very stable there and someone needs to die to create space for another resident in that facility. The staff indicated they could use many more units of affordable, accessible senior housing.

Table 6 shows data for disabled and veterans. The disabled count of 185 includes many forms of disabilities and the staff recognizes the need for permanent supportive housing to serve these individuals. They rely on Columbia County Mental Health to provide services to this population. In conversation with Linda Pritchett at the Charrette, she is interested in the development of small clustered sites of housing for particular types of mental/emotional disabilities. Further conversation is required to understand the full scope of their housing needs.

Homeless veterans are getting a lot of national attention at this time. In Columbia County in 2010, we were unable to serve 41 individuals. For the most part, the homeless staff indicated that they were unable to serve most of them because they were over income with their benefits. Still, we know there are a number of severely traumatized veterans living in camps in the forested areas of Columbia County. We should also work with NOHA to obtain VASH vouchers for use with veterans in Columbia County.

Table 6 Other Characteristics – Disability and Veterans

	Unserved		Served	
Disabled	185	15%	136	15.8%
Not disabled	1049	85%	725	84.2%

Veteran	41	3.3%	23	2.7%
Non Veteran	1192	96.7%	838	97.3%

The staff indicated the need for a warming center in Columbia County. We have started to talk with local churches and the Red Cross as agencies and locations that might have the capacity and willingness to take on that effort. One staff volunteered to initiate conversation with the Red Cross for this winter which is anticipated to be cold. There was consensus that this should not use our scarce client-based resources. They thought the Armory would be a potential location for a warming center.

They discussed the parking limitations provided by local law enforcement. There are no public areas in Columbia County where it is acceptable to park a car or an RV for an extended period of time. McCormick Park will allow people to park for up to 14 days if there is a plan in place for them to go somewhere later. Wal-Mart used to be OK but is cracking down. Some senior centers and CAT has allowed people to park in their parking lots for specific time periods and when the parking is part of a plan. The fairgrounds were suggested as another possible location.

### **Key Partners**

Improvement to this 10 year plan to end homelessness in Columbia County will require the involvement of individuals from across diverse systems who work collectively to develop a sustainable system of collaboration and coordination. Partners include:

- Housing Providers
  - Case Management
  - Affordable Housing Developers
- Corrections
  - Adult
  - Juvenile
- Law enforcement/courts
- Mental Health
  - Substance Abuse
  - Mental Illness, MR, DD
- Disability Services
  - Supportive Services
  - SSI and SSD benefit filing and recovery
- Veteran’s Affairs
  - Housing
  - Benefit filing and recovery
- Vocational Rehabilitation
- Job Training
- Domestic Violence
- Transportation



- Child Care
- Medical Services
  - Public Health
  - Links with hospitals
- Schools
- Youth Services
  - DHS – Self Sufficiency, Emancipation Services
  - Healthy Kids – Medical Plan
  - Education/Job Training

Many relationships are already strong and stable with long histories of working together on other initiatives. As a Community Action Program, CAT houses many important services in house including housing case management, affordable housing development, senior and disabled services, veteran’s affairs and we run a 3-county Head Start program providing child care. We provide pass through funding for the domestic violence shelter. We have successful shared programs with corrections with the barracks located adjacent to the jail. In addition, we have strong relationships with several community based service organization. We share cases with Columbia County Mental Health, Columbia County Community Corrections, Women’s Resource Center and share referrals with all other programs listed. The homelessness staff indicate we could create improved relations with Department of Human Services. To that end, we’ve scheduled lunches and trainings to facilitate improved relationships between both administrative and line staff of each agency. Further, we now attend the county’s MDT for child abuse and provide resource information as appropriate.

Focused attention on improved relationships with the schools would improve our ability to serve homeless youth. With no hospital in our county, linkages with local public health and private providers are essential yet thorny to accomplish. There is a need to improve coordination with local law enforcement and medical and mental health providers to address those clients who frequently cycle through the homeless system.

### **Type of Housing Needed**

Based on the implementation of the HEARTH legislation, research shows that individuals who are moved from homelessness into permanent housing as quickly as possible but in less than 30 days are more likely to remain housed. Funding dollars will be directed more to Homelessness Prevention and Rapid Refocusing and away from shelter and transitional housing. However, research recognizes that in rural areas, a wide array of housing alternatives may not be present. Staff will have to work with what is available. In 2011, the Homelessness staff at Community Action Team conducted a housing inventory chart which is reproduced below in Table 7.

**What we have:**

**Table 7 Year Round Beds/Units**

<b>Family Beds</b>	<b>Family Units</b>	<b>Individual Beds</b>	<b>Total Year-Round Beds</b>
<b>Emergency Shelter</b>			
12	6 (women only)	1	13
<b>Domestic Violence Shelter</b>			
22	5	22	22
<b>Transitional Housing</b>			
65	25	25	90
<b>Permanent Supportive Housing</b>			
0	0	10	10
<b>Safe Havens</b>			
0	0	0	0
<b>Warming Shelter</b>			
0	0	0	0

**Seasonal Beds**

<b>Total Seasonal Beds</b>	<b>Overflow Beds</b>
<b>Emergency Shelter</b>	
0	0
<b>Transitional Housing</b>	
0	0
<b>Permanent Supportive Housing</b>	
<b>Safe Havens</b>	

**What we need:**

The Homelessness staff of Community Action Team also prioritized the types of housing needed to meet the needs of unserved yet eligible individuals in Columbia County. We need:

- Units of Permanent Supportive Housing for mentally ill and developmentally disabled individuals. Collaboration with mental health service providers.
- Permanent Supportive Housing pods for specialized populations
  - People in Recovery from Substance Abuse

- Chronically Mentally Ill
- Barracks with corrections monitoring for people leaving jails and prisons. (currently have 12 for men and 8 for women – number seems sufficient for now).
- Emergency Shelter – for domestic violence survivors. (may have minimal capacity and we are researching the use of beds for female homeless youth).
- Emergency Shelter – for others?
- Model for youth transitioning out of foster care or homeless for other reasons
  - Support for families where youth are couch surfing
  - Group homes for homeless youth who have mental illness, substance abuse or criminal issues.
    - Oxford Houses?
    - Therapeutic Foster Homes
- Stable of Receptive Landlords
- Transitional Housing – what’s needed?
- HPRP
- Accessible Units

### **Columbia County - Current Actions**

Warming Center – As winter approaches, the homelessness staff have called together the churches in St. Helens and Scappoose to develop a warming center for the coldest and wettest nights.

Mental Health Clients – Linda Pritchett expressed a desire to develop supported housing for some of her mental health clients to experiment living off their medications in a controlled environment.

Real Estate Development – CAT staff are collaborating with real estate Christman Brothers Development. This project will preserve four affordable housing properties as affordable housing with 107 units in St. Helens. There are 2 other Scappoose properties which might also be rolled into one project-based rental assistance state application.

At risk Youth Homelessness – Bryan Ferrell, the judges and several others met on 11/17/11 to begin work on the development of a facility and program for at-risk youth who are involved in the treatment and legal system. Work remains to develop a cohesive and clear population but the Harkins House of Washington County is being looked at as a model. When the group comes back together, we will look more at program design, population, possible funding sources, plus have a visit from someone from Harkins House.

Youth Homelessness – In multiple conversations with individuals and attendance at the Commission on Children and Families, the following individuals have been identified as having interest in the problem of homeless youth or run programs that serve homeless youth.

Jeri Deady	St Helens Schools	503-366-7220	
Lisa Rawlings	St Helens Schools	503-366-7220	
Pam Ruddell	DHS – Self Sufficiency	503-397-1784 x 8371	
Mardi Erickson	Native American Youth and Family Center	503-522-5632	<a href="mailto:Mardi.erickson@gmail.com">Mardi.erickson@gmail.com</a>
Diana Nish	MTC Works	503-397-6495 x 202	<a href="mailto:Diana.nish@mtctrains.com">Diana.nish@mtctrains.com</a>
Eli Corbin	Sisters of the Road	503-569-0966	<a href="mailto:soulzkid@hotmail.com">soulzkid@hotmail.com</a>
Laurie Brownlow	St. Helens High school		<a href="mailto:lauriebr@sthelens.k12.or.us">lauriebr@sthelens.k12.or.us</a>
D.L. Laurie Kish	St. svs. Dir Rainier	503-556-3777 x261	
Debby Webster	Coord Svs. Rainier Clatskanie	503-556-3777 x 211	
Rachael Berry- Dane	CC Women’s Resource Ctr.	503-397-7110	<a href="mailto:rachaelbd@ccwrc.com">rachaelbd@ccwrc.com</a>
Lori Peterson	Public Health Foundation	503-397-4651	<a href="mailto:lpeterson@tphfcc.org">lpeterson@tphfcc.org</a>
Robin Loper	St Helens School District	503-366-7695	<a href="mailto:robinl@sthelens.k12.or.us">robinl@sthelens.k12.or.us</a>
Stacia Tyacke	Juvenile Dept	503-397-0275	<a href="mailto:Stacia.tyacke@co.columbia.or.us">Stacia.tyacke@co.columbia.or.us</a>
Bryan Farrell	Treatment Court Coordinator	503-397-2327 x 334	<a href="mailto:Bryan.M.FARRELL@ojd.state.or.us">Bryan.M.FARRELL@ojd.state.or.us</a>
Jan Kenna	Commission on Children and Families	503-397-7225	<a href="mailto:Jan.kenna@co.columbia.or.us">Jan.kenna@co.columbia.or.us</a>
Pat Ortiz	Healthy Kids	(503) 396-3834	<a href="mailto:patricia@osbhcn.org">patricia@osbhcn.org</a>
Martine Barnett	St Helens School District	503-396-8547	<a href="mailto:martinev@sthelens.k12.or.us">martinev@sthelens.k12.or.us</a>
Josh Luttrell	Juvenile Court Counselor	503-397-7256	<a href="mailto:luttrej@co.columbia.or.us">luttrej@co.columbia.or.us</a>
Keith Locke	St. Helens City Counselor	503-369-0575	<a href="mailto:keithl@st-helens.or.us">keithl@st-helens.or.us</a>
Walt Pesterfield	Col. Co. Community Corrections	503-397-6253	<a href="mailto:Walt.pesterfield@co.columbia.or.us">Walt.pesterfield@co.columbia.or.us</a>
Linda Pritchard	Col. Co. Mental Health	503-397-5211	<a href="mailto:Linda.p@ccma1.com">Linda.p@ccma1.com</a>
Lee Coleman	DHS	503-385-7022	<a href="mailto:lee.coleman@state.or.us">lee.coleman@state.or.us</a>
Jerry DeeDee	District Office, Special Ed.		
Ederlinda Clausen			
School based health centers			
Counselors at the			

Highschool			
Youth Transition Program			
Lori Brown			
Tracy Humbird			
Troy Monson			
Aaron Fongier			
Kari Marshall			
Margi Corpella	Middle School		
	Col. Co Ed. Campus – Alternative School		
Chris Hanson	St. Helens School District		
Ed Reece	Academic Counselor, Scappoose HS		
Seth Battles	Teens in Transition CCMH		
Bruce Loughlin	DHS Child Welfare supervisor	(503) 369-2798	bruce.lofland@state.or.us
Early Learners at schools			
Lisa Galoridi	Amani Center	503-366-4005	
Scappoose Rec. Center			
Lisa Heiner	St. Helens School Resource Officer		
Jeremy Howell	St. Helens School Resource Officer		
Tony Gainer	Scappoose School Resource Officer		
Noland Borders	Rainier School Resource Officer		
Judge Jenefer Grant	Judge		<a href="mailto:Jenefer.s.grant@ojd.state.or.us">Jenefer.s.grant@ojd.state.or.us</a>
Judge Ted Grove	Judge		<a href="mailto:Ted.e.grove@ojd.state.or.us">Ted.e.grove@ojd.state.or.us</a>

Veterans – CAT staff will be meeting with the director of the Housing Authority in our area to find out if we can access VASH vouchers to help veterans who are homeless with their housing needs.

Seniors and Home Repair – CAT staff are in the process of apply for a HAC grant to create a home repair program to help seniors age in place. CAT and the City of St. Helens has just been awarded \$200,000 to assist with small Senior Home Repairs.

## Recommendations

These recommendations are selected from those issues that arose during the six Fishbowl sessions held in Redmond in October 2011. Not all recommendations presented may be appropriate for all counties but those selected deserve attention for implementation in Columbia County's Homelessness Services Delivery System. When the formal planning process continues, these action items will be presented for consideration to the planning group. During the planning process, we will narrow this list to those items found to have the strongest community support. Implementation efforts will then begin.

### Issue Area Action Items

#### **1. Discharge Planning**

There are a number of systems which discharge individuals from institutions which deserve planning attention. Institutional discharge is most often a transition phase for the individuals involved. Efforts should be made to place individuals and families in the most permanent situation possible so as to keep people from becoming homeless and/or cycling back into those systems and institutions. Preventing expensive human, societal, and financial costs also support effective transition planning. The systems that should be involved in planning include: legal, medical, mental health, and child welfare. These action items are a few to consider for your area.

**1.1 Initiate dialogue across community based services and institutions involved in discharging individuals and families (medical, mental health, legal, child welfare, etc.) in conjunction with housing and homelessness services** to determine roles and responsibilities regarding discharge, re-entry, recidivism prevention and transition planning.

**1.2 Implement and direct resources available to support individuals and families transitioning from institutions.** Some examples include Measure 57 resources for people leaving corrections; Adult Mental Health Initiative (AMHI) for resources for people leaving mental health facilities, and OHCS resources for homeless households. Determine how these resources can leverage other funds/housing programs in the community to ensure housing placement and stability for re-entry.

**1.3 Take advantage of and create opportunities to develop programs and community facilities which would further housing opportunities for people coming out of institutional settings.** Expand the opportunities for housing for individuals transitioning from institutions through partnerships, co-location, housing rehabilitation, etc.

**1.4 Engage Hospitals** – Develop a transitions program to help people transition out of hospital settings. Initiate a process to develop respite and housing supports for people who are homeless and need a place to stay after receiving hospital care.

**1.5 Develop a Frequent User Project** to educate decision makers about the actual costs of serving frequent users who are cycling through corrections, hospitals, psychiatric beds and other institutions. Use this process to advocate for resources to be directed to improving system responses where possible.

## **2. Systems of Care**

Improvement in the systems of care requires efficient collaborations at both the policy/funding level as well as the program and service delivery level. Involving new partners to the table to plan for systems change, it is important to be transparent about how each agency or system will benefit from the partnership. We recognize that it will take time to build new working relationships and the trust to maintain commitment to partnership agreements as we develop new habits of working together.

**2.1 Create a local “Interagency Council”** that has diverse representation across services, housing, corrections, human services, employment and related agencies that touch homelessness to shape the ongoing collaboration needed to implement improvements in addressing homelessness.

**2.2 Include our local Housing Authorities** to discuss housing opportunities and to adjust policies that better serve homeless and vulnerable populations. Some local agencies may be able to take on HA duties to streamline workload for housing authorities to allow them to expand their reach and effectiveness.

**2.3 Develop pilot projects that resolve community issues, including shared funding streams. Use these projects to develop effective system of care which provides the needed continuum of services for local residents.**

## **3. Housing Opportunities**

Financial pressure from Federal, State, and Local agencies coupled with an ongoing recession necessitates communities to ensure that resources are used most effectively for the right populations. Communities should ensure their stock of beds and units for homeless people are best serving the populations they are meant to serve. Here are some approaches for doing so.

**3.1 Develop clear and consistent language** about transitional housing, permanent housing, permanent supportive housing, prevention, emergency responses, and rapid re-housing among all providers and advocates. Defining these approaches also means creating clear program models for each.

**3.2 Reach out to landlords of existing affordable housing stock** to place homeless and special needs people. Rent assistance and subsidy will go further and services may support other tenants in building with support from agency.

**3.3 Embody “flexibility with accountability” at all levels** to allow funders, providers, line staff and clients/tenants control over their appropriate level of decision making to be able to help solve the problem at hand.

**3.4 Target housing resources to the appropriate households.** For example, permanent supportive housing is an expensive intervention and therefore should be reserved for homeless people with special needs who require supportive services to remain stable in housing for the long- term.

**3.5 Reduce stays in emergency shelter and transitional housing** as much as possible and focus on lasting housing placement for homeless individuals and families.

**3.6 Educate service providers, landlords, and mainstream systems about Housing First models** and put them into practice where feasible (See information about Housing First under resources.)

**3.7 Consider shared housing models for appropriate** populations such as transition age youth (18-24), people in recovery (Oxford House model), domestic violence survivors and others.

**3.8 Take advantage of “bricks & sticks” opportunities.** Rural communities have the benefit of having more affordable property available. Target CDBG dollars to create new options for placement. Explore the opportunity to fund an effort that can increase the stock of housing available to homeless and extremely low-income households.

#### **4. Keys to Housing**

People who experience homelessness often have many barriers to accessing permanent housing. Whether it’s criminal background, poor rental history, lack of employment and income or other obstacles, in a tight rental market finding housing through non-profit or private market is difficult. These barriers require systemic interventions but in the meantime, people need housing now.



**4.1 Implement “Ready to Rent” classes.** Tailor them to specific populations such as youth or young adults or those with criminal backgrounds.

**4.2 Establish Rent Guarantee Fund** from local resources to leverage State Guarantee Fund to mitigate landlord risks for renting to tenants who have little or bad rental history.

**4.3 Educate landlords and property management companies** about housing homeless, special needs and vulnerable people, including peer dialogues among landlords who have housed riskier tenants with other landlords who may be interested.

**4.4 Create opportunities for low barrier housing** for people who need housing and services to support a transition to improved health and housing stability. After a successful participation in this low barrier housing where the individual demonstrates their success in paying the rent and maintaining the physical structure in good order, more traditional landlords will be ready to rent to them.

**4.5 Develop a social network site that links the community “givers” with those that need items.** Create a public portal where linkages can happen to provide furniture, clothes, household goods and services to those in need without the need for storage and intermediaries.

## **5. Performance Measures – Political Will**

To create a compelling case for elected officials and other funding sources, a clear case of successful outcomes needs to be presented. In this environment with dwindling resources, there is more competition for fewer dollars. It is no longer enough to just talk about the need. A more effective argument can be made by showing how well Columbia County is doing to end homelessness, including using data to make effective arguments about reducing costs in expensive emergency systems. Also, these measures define how well a community is doing by its people that are experiencing homelessness, which is the ultimate goal of these plans. These action items can help move forward on performance measures while also increasing political and community support for the issue.

**5.1 Use HEARTH Act metrics** as system-wide measurements to help define program outcomes and funding. Those are:

- Decrease Point-in-Time count
- Increase emergency shelter diversions
- Reduce length of time people are homeless
- Increase income of assisted households
- Increase permanent housing exits
- Reduce recidivism

**5.2 Analyze the existing reporting requirements** to determine what has to be reported versus what would be nice to know. Streamline reporting requirements to ask only necessary information needed to track key performance measures.

**5.3 Define consistent outcomes** and keep them as simple as possible. For example, if the system is going to track retention after housing placement, does it track after financial assistance ends, after service ends, after leaving a program, etc? Does it track at 6 months, 12 months, longer?

**5.4 Look at cost effectiveness** of programs within emergency shelter, transitional housing, supportive services, and permanent supportive housing categories. Consider their outcomes, population served, program design (as well as other variables) and understand the variation by programs.

**5.5 Provide resources for data analysis**, including training time and staffing.

**5.6 Develop a process to share outcomes** across and among providers in Columbia County through regular meetings (monthly, quarterly) to promote transparency and accountability among providers and funders. Use that process to promote a system of support for success in helping to end homelessness.

**5.7 Conduct a Service Based Count along with the Point-In-Time Count** to better estimate the number of people in rural regions that are experiencing homelessness and are also at risk.

**5.8 Share information with political and community leaders** to make the case for greater investment in ending and preventing homelessness.

**5.9 Combine data with people's stories and experiences.** Reports only provide part of the picture, narrative describing the knowledge of homeless and formerly homeless people as well as staff is integral to getting a fuller understanding of programs and systems outcomes.

**5.10 Report out to the community on progress toward implementation** on a regular basis. It helps hold the plan accountable, it keeps stakeholders informed, and providers see that all that data entry means something, in the end.

**5.11 Allow for mistakes.** Programs and systems undertaking changes to better serve and house homeless people will be taking risks that may result in some failures. Allowing for that will permit agencies to continue to try new approaches and learn from those mistakes.

## **6. Emergency Response**

Columbia County has practiced Housing First for longer than most urban centers because of lack of available options. However, it may be necessary to open warming centers during winter months.

**6.1 Learn from urban shelter** evolution and direct resources to emergency shelters only if necessary as they will pull resources and limit Columbia County's ability to pursue other more beneficial strategies.

**6.2 Create opportunities for diversion from shelter** as part of the shelter intake process. For example, could a client stay with a friend or family member if they could get a housing placement within a few weeks?

**6.3 Define Warming Stations** as an emergency response that uses existing resources such as churches or schools and does not direct housing resources to temporary solutions. Existing buildings will not need to be financed and constructed.

**6.4 Utilize volunteer support for emergency responses.** Spending a few hours with a volunteer who cares on a cold night can change someone's perspective and willingness to access benefits. Use volunteers for transportation, not just to fill the volunteer's time.

**6.5 Train volunteers.** Volunteers need to be prepared for urgent and emergency situations such as overdoses or trauma responses. Volunteers should also know when to call professionals when the situation is outside their knowledge level.

**6.6 Consider emergency responses to homelessness the same way they are considered after a natural disaster.** The faith community has a long standing reputation in this role.

**6.7 Use emergency response teams** or to respond to severe weather and shelter for homeless people. This may also be source for training dollars for volunteers.

### **Other Action Items Recommended**

## **7. Recommended For State Attention**

As a leader, funder, convener of plans to end homelessness, particularly in rural areas of Oregon, there are actions the State can take to ensure success throughout Oregon. In fact, if the State does not directly support local implementation, many of these local efforts will fail. Here are some recommendations for the State (primarily Oregon Housing and Community Services, but certainly other state agencies have a role, too) for success of these 10 year plans to end homelessness in rural areas.

- 7.1 Create a Funder's Group** made up of staff from Oregon Health Authority (OHA), Department of Human Services (DHS), Oregon Housing and Community Services (OHCS), Oregon Infrastructure Finance Authority (OIFA), the Veteran's Administration (VA), and Department of Corrections (DOC) to analyze how funding can be leveraged for homeless and special needs populations that are "served" by these agencies. Consider starting the membership with those who administer the funds so that they can conceptualize how the funds can be braided before bringing in decision-makers.
- 7.2 Analyze funding that could support Permanent Supportive Housing in rural communities** and create a common (and cheaper) application that streamlines the process for capital, operating and service funding where feasible.
- 7.3 Audit shelter and transitional housing stock** using data and local information to ensure that these beds and units are being used most effectively for the target populations.
- 7.4 Align and streamline state-funded homeless and rent assistance programs** to meet guidelines laid out in the HEARTH Act.
- 7.5 Expand and advertise the rent guarantee fund**, and also align it with HEARTH Act outcomes.
- 7.6 Be transparent about funding decisions** so that agencies can understand who was awarded and why.
- 7.7 Streamline funding applications and reporting**, especially for smaller grants.
- 7.8 Consider creating a set aside of capital dollars for rural communities** for development and rehab for supportive housing and housing that is affordable to formerly homeless people as they do not have the local leverage that urban centers do to make tax credits work for this type of housing. Also consider how to make the Consolidated Funding Cycle (CFC) more accessible to rural communities.
- 7.9 Offer technical support to communities implementing their plans** when possible and connect them to communities with plans that are underway to encourage peer learning.

**7.10 Provide support to staff that are supporting rural regions.** Coordinating across diverse regions of the state while ensuring communities have access to the same level of expertise and resources as afforded to urban and suburban centers requires staffing and attention.

**7.11 Respect local control decisions for development efforts.**

## **8. Employment and Income**

Employment is strongly linked to issues affecting individuals abilities to obtain and retain stable housing.

**8.1 Work collaboratively with local state supported employment programs** for people with mental illness and other disabilities as well as other local partnerships to help people get and keep jobs and stable income.

**8.2 Continue to link homelessness activities with Veteran’s Services** to help Veterans obtain services and benefits including employment services.

**8.3 Explore workforce investment and supported work programs to enhance skills, job development and the local economy** through carefully developed approach in Columbia County.

**8.4 Explore Goodwill** as a good resource for providing jobs and training for people with disabilities in many rural communities.

**8.5 Expand SOAR programs** (SSI, SSDI, Outreach ACCESS and Recovery) to increase capacity for people to obtain benefits (income and health insurance quickly).

## **9. Coordinated Entry**

Look at possible strategies for creation a one-door coordinated entry to homeless services in Columbia County.

**9.1 Research best practices on coordinated entry** to determine methods for targeting resources to homeless and at-risk individuals and families.

**9.2 Connect with 211** to see if establishing a linkage with 211 in your region is feasible.

## **Conclusion and Signatures**

This report attempts to collect information to date to help commence the planning process for the Columbia County 10 year plan to end homelessness planning process. With this data, it is hoped that the planning committee will have sufficient useful information to start to create a process documented in the written product.

May this document serve to minimize the skepticism inherent in this process and actually result in a worthwhile product that actually helps to reduce the magnitude of homelessness in Columbia County.