Recommendations for Building

Capacity in the Redding/Shasta County

Homeless System of Care

Strengthening the Shasta County Homeless Response System

November 2015

Prepared by:

HomeBase
Advancing Solutions to Homelessness

Contents

HomeBase
Advancing Solutions to Homelessness

<div style="border:1px solid #3a5fa0; padding:10px;">

Introduction

</div>

This analysis of Redding/Shasta County's homeless system of care was developed in June to August 2015 to support local stakeholders in deepening the community's strategic response to homelessness. The report includes an analysis of the current homeless response, with an emphasis on key opportunities to meaningfully and sustainably reduce the impact of homelessness on the County. By harnessing existing strengths and building capacity to implement proven strategies tailored to local needs, Redding/Shasta County can make meaningful progress toward the ultimate goal of ending homelessness.

Background

Shasta County is a largely rural region of approximately 179,804[1] residents. Bisected by Interstate-5, the County includes portions of the Shasta, Lassen, and Trinity National Forests, and Lassen Volcanic National Park, and is bordered by rural counties on every side (Siskiyou, Modoc, Trinity, Lassen, Tehama, and Plumas). Over half the Shasta County population resides in the county seat of Redding[2], a growing urban center that comprises the largest California city north of Sacramento.

Shasta County was hard hit by the 2008-09 economic downturn, reaching an unemployment rate as high as 16.8% in 2010 (as compared with a California average of 12.2%).[3] The County continues to struggle with higher-than-average unemployment, a significant aging population, and high rates of poverty, with a per capita income 20% lower than the state average and 17.5% of the County population living below the poverty level.[4] Comprehensive Housing Affordability Strategy (CHAS) data indicates that 85% of very low-income renters spend more than 50% of their income on housing, with 77% of low- and very low-income renter households residing in substandard housing.

Despite economic challenges, Redding/Shasta County has tremendous strengths that can support a robust response to poverty and homelessness. While much work remains to be done, a tapestry of dedicated and engaged service providers, a passionate faith-based community, and a culture of generosity facilitate many of the region's most vulnerable persons to achieve greater stability and engage as productive members of the Redding/Shasta County community.

---

[1] 2014 population estimate from U.S. Census Bureau: State and County QuickFacts, available at http://quickfacts.census.gov/qfd/states/06/06089.html.

[2] In 2013, Redding comprised 91,119 residents per the 2013 population estimate from U.S> Census Bureau: State and County QuickFacts, available at http://quickfacts.census.gov/qfd/states/06/0659920.html.

[3] Report of the State of California Employment Development Department, available at: http://www.labormarketinfo.edd.ca.gov/ (last accessed on August 14, 2015.

[4] 2014 population estimate from U.S. Census Bureau: State and County QuickFacts, available at http://quickfacts.census.gov/qfd/states/06/06089.html.

HomeBase
Advancing Solutions to Homelessness

Methodology

This report analyzes the current practices of the Redding/Shasta homeless response system and Continuum of Care (CoC) to identify opportunities for increasing capacity and strengthening the County's response to homelessness. It is intended to be read in conjunction with the accompanying evaluation, *Shasta County Homeless Management Information System (HMIS) Review*, providing recommendations to enhance Redding/Shasta County's homeless system data management.

Preparation of this report involved intensive outreach to diverse local stakeholders and analysis of local and nationwide source materials to develop an environmental review and recommendations based on national best practices and the experience of other communities similarly situated to Redding/Shasta County. Sources supporting development of this report include:

Stakeholder Interviews. HomeBase conducted telephone and in-person interviews with a wide variety of stakeholders, all of whom were very generous with their time and feedback:[5]

- ❖ City of Redding, Housing and Community Development
- ❖ Good News Rescue Mission (GNRM)
- ❖ Northern Valley Catholic Social Service (NVCSS)
- ❖ One Safe Place
- ❖ People of Progress
- ❖ Redding City Council
- ❖ Redding Police Department
- ❖ Redding Resource Center

- ❖ Redding Veterans Resource Center
- ❖ City of Redding & Shasta County Continuum of Care Council
- ❖ Shasta County Health and Human Services Agency (HHSA)
- ❖ Shasta County Housing & Community Action Program
- ❖ Shasta County 2-1-1
- ❖ Shasta Community Health Center

In addition to one-on-one interviews, this report is based on feedback from nearly 60 stakeholders provided during a Stakeholder Workshop on July 16, 2015, as well as several additional interviews conducted by Symmetric Solutions for preparation of the accompanying HMIS evaluation.

Best practice research. The recommendations in this report are grounded in best and emerging practices, as well as HomeBase's experience working with diverse communities in California and across the country. While practices from other regions can be extremely useful in identifying strategies, they must be viewed through a lens that accounts for the uniqueness of each community. The recommendations in this report are therefore tailored specifically to our analysis of the Redding/Shasta County environment.

---

[5] While the breadth of Shasta County's stakeholder community made it an impossibility to connect with all of the region's stakeholders, this report includes responses from a diverse cross-section of the community. Further outreach will be a key component of any additional strategic planning efforts.

HomeBase
Advancing Solutions to Homelessness

Regulatory requirements. The Continuum of Care Interim Rule, implementing the requirements of the 2009 HEARTH Act, provides a framework for CoC administration and community collaboration around homelessness. This report uses the HEARTH Act, its accompanying regulations and related policy guidance, and *Opening Doors: the Federal Strategic Plan to Prevent and End Homelessness* as a foundation for analysis, to identify gaps and opportunities to improve outcomes and compliance in the Redding/Shasta County CoC and homeless system of care more broadly.

Local documents. This report also reflects analysis of various city/county materials and reports, including:

- ❖ 2013 CoC NOFA Application and HUD Debrief Summary[6]
- ❖ Continuum of Care agendas and meeting minutes from 2014-15
- ❖ Continuum of Care monthly updates
- ❖ Point-in-Time and Housing Inventory Count data reported to HUD
- ❖ 2015-2019 Draft Consolidated Plan (City of Redding)
- ❖ Selected Board of Supervisors meeting minutes
- ❖ County MHSA Program and Expenditure Plan (FY 2014/15-16/17)
- ❖ Media Reports

As set forth in greater detail below, the homeless response system as a whole does not currently maintain performance and outcome data that could be effectively evaluated for purposes of this report; development of reliable systems for analyzing quantitative information across programs will be an important step in the development and implementation of a longer-term strategy.

Summary of Findings and Recommendations

The Redding/Shasta County community faces complex challenges around homelessness, with a large and diverse population of homeless individuals and families – some who are visibly homeless and many who are not. The last several months have evidenced deepening public concern and increasing recognition that homelessness is an issue that impacts everyone in the community and that strategically addressing this issue is to the benefit of all.

While certain services already exist, the resources allocated to addressing the growing homeless challenge are dramatically inconsistent with the investment that must be made if the community is to turn the tide on homelessness and its impact. The recent public dialogue, coupled with Redding/Shasta County's dedicated service sector, affords a unique opportunity to engage in meaningful, system-wide solutions that can truly make a difference.

---

[6] HUD's 2014 NOFA did not require a CoC-level application and therefore 2013 is the most recent application and debrief.

The recommendations in this report harness and build upon the community's existing strengths: diverse community leaders invested in finding and implementing solutions, a dedicated and often highly-collaborative service sector, and strong public motivation to address the way in which homelessness is affecting the Redding/Shasta County community.

This report highlights concrete opportunities to leverage these strengths and establish the sustainable pillars of an effective homeless response system:

- Focusing resources on the most strategic and effective approaches to reducing homelessness

- Drawing more resources into the system and ensuring their most efficient use for a persisting transformation

- Facilitating community-wide engagement and buy-in to a common vision around the goal of reducing homelessness and its impact on the community

- Building strong leadership to sustain focus on those strategic initiatives that will have the greatest impact on homelessness and to leverage ongoing community coordination

- Establishing and maintaining a system for measuring and monitoring impact, making modifications to improve outcomes, and tailoring the solutions to the problem

Overview of the Hearth Act and Opening Doors

The HEARTH Act

The Continuum of Care (CoC) planning process was established in 1995 to provide greater coordination in responding to the needs of homeless persons. The Homeless Emergency Assistance and Rapid Transition to Housing Act of 2009 (HEARTH Act) modified the CoC system and directed HUD to establish a regulatory framework to implement the Act. These regulations, effective in an interim form on August 30, 2012, address the establishment, operation, and grant application process and eligibility requirements for the CoC program. It is not clear from HUD when a final version of the regulations will be complete and all CoC obligations discussed in this Report are based on the requirements of the Interim Rule.

The HEARTH Act requirements support the CoC in driving the community's homeless response to make meaningful progress toward the ultimate goal of ending homelessness. HEARTH encourages communities to allocate resources based on data-driven decisions and to set and monitor performance/outcome goals for individual programs and the system as a whole. In the same vein, CoC governance requirements support transparency and greater community-wide inclusion in the dialogue around homelessness.

The CoC serves four enumerated purposes under the HEARTH Act:

- Promoting communitywide commitment to the goal of ending homelessness

- Providing funding to quickly rehouse homeless individuals and families, while minimizing the trauma and dislocation caused by homelessness

- Promoting access to and utilization of mainstream programs by homeless individuals and families

- Optimizing self-sufficiency among individuals and families experiencing homelessness

The CoC has three primary duties:

- Operating the Continuum of Care, with activities including meetings, membership, structure, performance targets and outcomes measurement, centralized intake processes, and priorities for providing assistance

- Designating an HMIS for the Continuum of Care

- Planning for the implementation of a housing and service system across the geographic area that meets the needs of the homeless population and other planning efforts

The HEARTH Act implementing regulations (the CoC Interim Rule) provide detailed guidelines and requirements for CoC organization and administration, which have been further informed by subsequent interpretational briefs issued by HUD. As the Interim Rule came into effect only as recently as August 30, 2012, many communities are still in the process of adopting systems to comply with the regulations. While non-compliance in certain respects does not necessarily implicate an immediate loss of funding, the structure articulated in the regulations can help the CoC in better accomplishing the goal of more effectively reducing – and eventually ending – local homelessness.

Opening Doors: The Federal Strategic Plan to Prevent and End Homelessness

In 2010, the US Interagency Council on Homelessness released *Opening Doors*, a plan designed to address homelessness through partnerships between federal agencies, including HUD, the Department of Veterans Affairs, Health and Human Services, and the Department of Labor. *Opening Doors* and its annual updates set ambitious goals for our work to end homelessness, such as:

- End veteran homelessness by the end of 2015

- End chronic homelessness by 2017

- End family and youth homelessness by 2020

HomeBase
Advancing Solutions to Homelessness

Since its release, *Opening Doors* has influenced the allocation of HUD and other federal spending, driven HUD policy, spawned planning initiatives, including Zero: 2016, and given direction to CoC planning efforts.

HUD evaluates funding applications, including for the CoC Program Competition, in part on how they advance the goals set forth in *Opening Doors*, using data in decision-making and performance management to more effectively prevent and move towards ending homelessness. HUD's key priorities include:

- *Strategic Resource Allocation.* Using performance and outcome data to best use the resources available to end homelessness within the community.

    o Comprehensive review of projects, maximizing use of mainstream resources, partnerships with other stakeholders, and review of transitional housing in light of research showing it is generally more expensive and no more effective than other housing models.

- *Ending Chronic Homelessness.* Increasing unit availability for chronically homeless households through project reallocation and prioritization for program access.

- *Ending Family Homelessness.* Adjusting the homeless service system to ensure families can easily access rapid rehousing and other housing assistance tailored to their needs, and ensuring projects address safety needs of those fleeing domestic violence.

- *Ending Youth Homelessness.* Understanding the unique needs of homeless youth and encouraging participation in the CoC by youth-serving organizations.

- *Ending Veteran Homelessness.* Prioritizing veterans for services and coordinating closely with local veteran-serving organizations.

- *Using a Housing First Approach.* Prioritizing rapid placement and stabilization without service participation requirements or preconditions.

Redding/Shasta County Homeless Response System

Redding/Shasta County includes a diverse array of programs and services intended to support the county's low-income residents, including homeless people. This landscape reflects extraordinary enthusiasm and generous investment of many community members to help individuals and families come out of homelessness.

The response system nevertheless faces tremendous resource constraints and is inadequate to meet the community's need in effectively reducing homelessness. In addition, while there is considerable collaboration and program-by-program partnering, the response system as a whole is fractious and in need of a centralized vision and enhanced coordination.

HomeBase
Advancing Solutions to Homelessness

The past years have seen significant media attention and increased community awareness and engagement in a dialogue around homelessness. Many stakeholders expressed concern at the extent of public criticism and misunderstanding of the homeless service system generally, and the Redding/Shasta County CoC Council in particular, reflected by the media and public comment. While it appears that the dialogue around homelessness, and efforts to reduce homelessness, has more recently increased in positivity, news reports and interviewee feedback suggest that much work remains to be done to engage the Redding/Shasta County community at large.

The analysis and recommendations of the Redding/Shasta County homeless response system is set forth below in three sections:

- Community Planning and Coordination

- Resources and Community Engagement

- CoC Structure and Community Leadership

Each section includes an analysis of the current system in Redding/Shasta County, a discussion of suggested practices, and recommendations for building a stronger system of care, with the goal of developing a long-term, sustainable, and comprehensive response to homelessness.

Section 1: Community Planning and Coordination

"I don't think there is a real uniform vision around the issue. And maybe that's what we all need. Everyone to come together and figure out, this is what we can do, and make sure the message gets out to everyone."

An effective homeless system of care requires strong programs and coordination across the community – from homeless service providers to mainstream systems to elected officials and the general public. While most, if not all, communities are challenged in developing resources adequate to eliminate homelessness, Redding/Shasta County is especially constrained given the extent of homelessness and the dearth of dedicated resources in relation to the robust and integrated response necessary to address this challenge.[7] The need to effectively leverage and prioritize resources and maximize program outcomes is therefore particularly crucial.

Community Planning

Community planning accomplishes myriad goals, supporting the efficient allocation of resources to key priorities, increasing access to new resources, and reducing waste arising from

---

[7] While there is not good data measuring the number of individuals who experience homelessness in a given year in Shasta County, Shasta Community Health Center reports working with approximately 3,000 unduplicated homeless patients annually. The community may wish to engage in a more in-depth analysis of data available from public agencies and local non-profits to enhance strategic planning efforts.

disjointed and unleveraged efforts. While the CoC and agencies funded through HUD's CoC program are required to engage in certain planning activities, a community-wide strategic planning process can secure the breadth of buy-in necessary to drive a unified, system-wide vision to reduce homelessness.

THE REDDING/SHASTA COUNTY LANDSCAPE

Planning

Many of the stakeholders who provided feedback for purposes of this report and through the July 16 stakeholder workshop process felt the community should prioritize development of a strategic plan and unified vision for the community. In particular, they felt a planning process would:

- Provide a template for coordinated strategies to reduce homelessness in Redding/Shasta County over the long term

- Optimize existing and under-accessed resources

- Create a unified front to address challenges and surmount conflicts, stakeholder spinoff and fractionalization

- Establish a platform for engaging the greater public in a positive dialogue and commitment to addressing homelessness

Certain limited-scope planning processes addressing homelessness already take place in Redding/Shasta County. While these do not meet the community's needs in terms of long-term, system-wide planning, they can help inform a more robust, community process.

Annual CoC Application. To receive CoC program funds from HUD, CoCs must develop an application in response to an annual Notice of Funding Availability (NOFA). While the application requires certain forward-looking information around performance objectives and housing inventory growth, the focus is largely on CoC-funded programs, which comprise a small minority – four projects operated by only two agencies – of the Redding/Shasta County homeless service system's programs and services.

Annual CoC Gaps Analysis. The HEARTH Act requires CoCs to conduct an annual gaps analysis of the homeless needs and services available within the CoC's geographic area. An interview with the CoC coordinator[8] indicated that the CoC typically conducts a gaps

---

[8] The CoC Coordinator was not under contract at the time of the interview.

analysis each year; however, no analysis took place in 2014 due to a lapse in the CoC Coordinator contract.[9]

Consolidated Plan. The City of Redding submitted to HUD a Consolidated Plan (Con Plan) for the years 2015-2019, which was approved by the City Council on June 16, 2015. Con Plan development included public meetings, workshops and other public feedback processes, and involved input and collaboration by the CoC. The City's Housing Division is a member of the CoC and representatives regularly attend CoC meetings.

Confusion was expressed by both CoC members and non-members regarding the extent to which the CoC has a strategic plan and the CoC's responsibility for leading the community-wide response to homelessness. To date, the CoC has held a narrow role, focused largely on the procurement and administration of approximately $375,000 in CoC program funding from HUD. In this role, the CoC has not engaged in comprehensive community planning efforts; to the extent planning takes place, it is largely tailored to the four CoC projects. While some CoC members believed the CoC had some form of strategic plan, no CoC member interviewed had any actual knowledge of the contents of any plan.

While the CoC can, and in many communities does, hold a more central role in community-wide planning and coordination, such an obligation would require a transformation in CoC resources, structure and expectations.[10]

Coordination

The Redding/Shasta County provider community reflects an impressive degree of coordination, leveraging and information sharing with a multitude of formal and informal partnerships between key programs and agencies. A culture of collaboration and strong local leadership at the agency level drives many diverse initiatives, such as:

Homeless to Housing – Community Care Fund. An effort is underway by key stakeholders to facilitate local churches in developing a flexible community fund to address housing barriers (e.g., deposits, utilities) that will support households in more quickly coming out of homelessness. Stakeholders are also working with the faith community to develop a program recruiting and training community members to provide housing navigation and case management-type support.

---

[9] Despite multiple requests, HomeBase was unable to obtain a copy of the 2013 gaps analysis for review. The difficulty in obtaining materials was likely attributable in part to the fact that the CoC Coordinator position was unfilled for much of the duration of this report's drafting.

[10] The proposed coordinator contract for FY2015-16 includes responsibilities, such as to "Maintain and update the annual and long-range strategies of the CoC to address the issues of homelessness . . . include in the CoC strategies detailed action plans and steps to address the most pressing needs of the homeless and the identification of potential housing providers to address those needs." However, these expectations are likely inconsistent with the resources allocated to the position.

Outreach Programs. Teams comprised of staff from non-profit providers, HHSA, and law enforcement provide outreach services and collect information from homeless persons in encampments. An HHSA case management program, launched May 2015, successfully housed over a dozen homeless individuals in its initial four months of operation. This program has already established a symbiotic relationship with many local providers to streamline service provision. Outreach services are funded in part through Projects for Assistance in Transition from Homelessness (PATH) funding from the federal Substance Abuse and Mental Health Service Administration (SAMHSA) and Intergovernmental Transfer (IGT) funds (associated with participation in Medi-Cal Managed Care).

Mainstream Collaboration. HHSA and the Shasta Community Health Center (SCHC) are both active pillars in the homeless response system. SCHC provides outreach and primary care to approximately 3,000 unduplicated homeless persons per year with programs including the Hope Van, a mobile medical unit. Collaboration with providers such as Good News Rescue Mission supports SCHC in reaching more clients.

HHSA similarly leverages resources such as Mental Health Services Act (MHSA) dollars and Medi-Cal to prevent and reduce homelessness. Initiatives include a joint venture with the City of Redding and local non-profits to increase supportive housing inventory, a Crisis Residential and Recovery Center, homelessness prevention for individuals discharging from mental health institutions, and Board and Care Patches to assist individuals with serious persistent mental illness to find and retain housing and support. The CalWORKS Family Stabilization (FaSt) Program includes a housing assistance component to assist eligible families, such as those who are homeless or at risk of becoming homeless with rental assistance, temporary shelter expenses, rental application fees, utility fees, and rental deposits.

Most interviewees demonstrated a strong commitment to building partnerships, resulting in cross-referrals, leveraged services as providers join forces, and a culture of cooperation, mutual support and follow through. Several noted that many providers were quick to return phone calls, to provide education and assistance, and to assist one another in helping individual clients. The warmth, energy, and diverse participation at the July 16 Stakeholder Workshop underscores the willingness of many in the community to work together to achieve solutions.

> "There's no agreement regarding what we should be doing collectively to address homelessness. So every player is doing something on their own."

At the same time, there is limited cohesion around larger strategic objectives or the path to identify and attain these objectives. Stakeholder interviews and the July 16 Workshop demonstrated a strong desire for greater unity of vision, including a more collective approach to identifying system-level priorities and a more unified front to drive understanding and support for the homeless service system in the public at large. Accomplishing these goals requires a collaborative and inclusive forum, sanctioned by the system's key stakeholders, that

can overcome fractionalization, re-engage those who have disconnected from the conversation and bring together independent initiatives into a single, streamlined effort grounded in priorities that have been identified by the community as a whole.

Moreover, while the collaboration already taking place in the Redding/Shasta County community is remarkable, it is occurring on an agency-by-agency basis that does not fully leverage the capacity of the system as a whole, stakeholders outside the homeless system, less-central programs that are not key players, or engagement of the surrounding region at the county or inter-county levels. Stronger leadership and a collectively-accepted "center of gravity" would support the homeless response system in engaging greater community-wide buy-in and fostering greater collaboration both within and external to the homeless system.

PRACTICES FOR OPTIMIZING PLANNING AND COLLABORATION

Critical Success Factors

Interviews by the National Alliance to End Homelessness (NAEH) of representatives from four high-performing rural communities suggest five factors essential to the success of those systems in making progress toward ending homelessness.

1. An identified Glue Person that maintains both a high level understanding and detailed perspective of the CoC and its activities.
2. A Champion for ending homelessness that has the trust and respect of community members, as well as the skills to build relationships inside and outside the homeless system.
3. A high level of stakeholder involvement and leadership in the strategic planning process.
4. Implementation strategies that reinforce inclusion, coordination, and collaboration across public and private homeless system agencies and programs.
5. A willingness to think outside of the box to achieve key goals within the homeless assistance system.

Community Strategic Planning

Communities both small and large benefit from engagement in an effective community-wide strategic planning process. While the process requires an initial investment of resources, including stakeholder time, it typically pays dividends in long-term benefits to better access and leverage resources, streamline processes, and develop positive community-wide engagement around homelessness.

> *Mariposa County.* In 2014-15, Mariposa County, a small county of under 20,000 residents, developed a nine-prong strategic plan, adopted by the county's Board of Supervisors on June 9, 2015. Designed through a series of strategic planning sessions and a community town hall, the Mariposa plan identifies strategies and action steps to address the community's key priorities, including building a community framework to address homelessness, increasing housing opportunities through temporary rental assistance and

HomeBase
Advancing Solutions to Homelessness

long term supportive housing, development of a sustainable homeless prevention support system, and evaluation of community progress, among other priorities.

The plan has streamlined resource development and prioritization of evidence-based objectives that support long-term goals of eliminating homelessness. At the same time, the planning process fostered intensive community dialogue and education that meaningfully transformed the community's conversation and understanding of homelessness.

Santa Clara County. In 2012-14, the Santa Clara County community engaged in a series of planning efforts to align the County, the cities, and community stakeholders (including environmental advocates, faith-based groups, and philanthropy) behind a unified vision to end homelessness locally. The purpose of developing a community plan was to leverage all current efforts in moving the needle on homelessness in the community. Stakeholders, including Public Housing Authorities, landlords, and temporary housing providers, are uniting to focus on creating 6,000 permanent housing opportunities for people who are chronically homeless, veterans, or children and youth. Local philanthropy is targeting funding on the key elements of the community plan and stakeholders meet regularly to track and measure implementation of plan objectives and address challenges.

Each of these plans accomplishes the following:

- Identifies community needs based on accurate data about the local homeless population

- Specifies a balance of programs and services grounded in community realities and that will be most effective in meeting community needs

- Integrates and leverages mainstream resources

- Establishes a system for ongoing evaluation of program performance

- Drives community-wide participation and engagement

- Provides an implementation process that monitors success in achieving strategic plan objectives and keeps responsible parties on track

While there are lessons to be learned from each community's experience in plan development and implementation, the planning process and priorities should be deeply community-driven, reflective of local culture and local needs.

Leadership to Support Implementation

Effective strategic plan implementation is dependent on a center of gravity to drive accountability and continued commitment and focus on the community's priorities. Larger communities such as Sacramento and Santa Clara have invested resources in non-profit and public-private entities – Sacramento Steps Forward and Destination:Home, respectively – that

have been highly successful in coordinating strategic initiatives. These communities and the steps they have taken to respond effectively to homelessness are instructive and can, in many cases, be adapted to smaller communities like Shasta County.

Additionally, the experiences of rural communities demonstrate certain fundamental ingredients to ensuring strategic plan implementation stays on track:

Glue Person. Leadership around homelessness – or the Glue Person – is often, though not always, the same individual who manages the administrative and business affairs of the Continuum, including the annual CoC application. That individual is responsible for maintaining relationships with all key stakeholders, creating a shared sense of accountability, facilitating a forum for information sharing, and researching and disseminating information about new and promising practices. The leadership of the Glue Person is central to inclusion, coordination and collaboration strategies.

Champion. Successful rural communities often also have a second individual – the Champion – who works in conjunction with the Glue Person and other CoC leadership to move the work forward, influencing cultural shifts, and supporting communication of system goals and activities to the broader community in a sensitive and accessible manner. This person is typically a faith-based or community leader that has the respect of the community both inside and outside the homeless system.

Strong Collaboration. Clallam County, a rural community in Washington State, has successfully achieved a 40% reduction in homelessness since 2004 due to collective action, use of data, strategic partnerships, and commitment to accountability. In particular, their success is attributable to their strong collaborative structure, comprised of a provider network that subsequently became their CoC, which has successfully driven highly effective county-wide initiatives like increasing permanent supportive housing by 150 units.

RECOMMENDATIONS

Recommendation One: Build capacity in the CoC as a hub for collective action to drive unity and system-level buy-in by deepening the role of the executive committee and modifying CoC operating structure and expectations (discussed in Section Three).

Recommendation Two: Conduct a community-wide strategic planning process that:

- ✓ Establishes a plan for developing effective centralized or coordinated leadership
- ✓ Engages stakeholders at all levels of the community
- ✓ Is grounded in a real and data-driven understanding of the community needs and resources
- ✓ Is realistic given the Redding/Shasta Community's strengths and limitations
- ✓ Focuses on evidence-based program models
- ✓ Establishes a process for implementation and ongoing monitoring

✓ Focuses on both short and intermediate term goals, with emphasis on sustainability and maximizing outcomes in reducing homelessness

Recommendation Three: Develop data systems as recommended in accompanying HMIS evaluation to inform current realities and ongoing monitoring.

Recommendation Four: Identify and foster a source of unifying leadership, including a strong Glue Person, to support the community in a more coordinated and visionary homeless response.

Homeless Services and Supports

An effective homeless service system relies on:

- Targeting resources to sustaining the right mix of programs

- Utilizing the most effective interventions based on best and promising practices

- Reflecting a robust understanding of community needs

While the appropriate balance of programs varies by the community's particular needs, it typically comprises three elements of:

- Outreach, engagement, and assessment;

- Shelter, housing and supportive services; and

- Prevention strategies.

A variety of evidence-based strategies exists for each of these program types, with demonstrated effectiveness in reducing homelessness.

PRACTICES FOR OPTIMIZING THE HOMELESS SERVICE CONTINUUM

While the type and quantity of programs in a particular community should be grounded in data that reflects community needs, certain programs and practices have been found especially effective in reducing homelessness and system costs in communities across the country.

Permanent Supportive Housing (PSH)

Many homeless persons experience multiple barriers to successful independent living and require long-term support to remain stably housed. PSH provides housing to homeless people with disabilities with attached supportive services that are flexible to meet changing client needs. This housing model is appropriate for households who would otherwise remain on the streets, but for that level of support.

While housing with attached services sounds expensive, because many of the persons appropriate for supportive housing are high users of other public systems, permanent supportive housing can actually save communities money.

- A permanent supportive housing program in King County, Washington, demonstrated an average cost savings of $2,449 per person per month after accounting for housing program costs.

- A rural program in Maine demonstrated a 32% reduction in service cost by providing permanent supportive housing to people with disabilities, reducing costs of mental health services by 57%, emergency room by 14%, ambulance by 32% and incarceration by 95%.

- A program in Rhode Island demonstrated a reduction in annual costs from $31,617 to $22,778 per person after housing.

Rapid Rehousing (RRH)

For households needing less intensive assistance, flexible rental assistance paired with temporary support services is a cost-effective model to stabilize households and return them to self-sufficiency. Services are tailored to individual needs and resource availability and are often as brief as 3 months though they can extend as long as 24 months.

- A 2014 US Department of Veterans Affairs study found that approximately 84% of single veterans and 90% of veterans in families did not experience subsequent episodes of homelessness in the year after receiving RRH. The study found no significant relationship between income level at program entry and the likelihood of experiencing subsequent homeless episodes, indicating that households of all income levels may be successfully served with rapid rehousing assistance.

- In Connecticut, 82% of singles and 95% of families remained stably housed three years after receiving rapid rehousing assistance.

- A 2015 study indicated that 90% of families participating in the Rapid Rehousing for Homeless Families Demonstration did not return to homelessness after one year.

- In 2012, a report averaging data from seven CoCs showed that an average of only 4% of families exiting rapid rehousing returned to homelessness, as compared with 9% of families exiting transitional housing and 11% of families exiting shelter.

Housing First

HUD encourages communities to adopt a Housing First approach, the prioritization of rapid placement and stabilization in permanent housing by eliminating service participation requirements or preconditions such as sobriety or minimum income thresholds. Under a Housing First model, program participation is client-driven, with client-centered and culturally competent service delivery. By minimizing barriers to entry, Housing First supports households in quickly exiting homelessness to gain a foundation from which they can address their issues and attain long-term stability.

Using Data to Drive Decision-Making around Housing Inventory

Communities have various approaches to identifying the appropriate mix of housing and program-types. Many of these approaches are driven by HMIS or some other centralized means of collecting and utilizing data.

> *Santa Clara County.* In Santa Clara County, a local funder sponsored a Homeless Service Facility Asset Study to assess how well existing facilities are addressing the needs of homeless households and identifying opportunities to repurpose assets to match resources and needs. This study looks closely at data around cost, utilization, and need to align funding around the most cost-effective interventions that will do the most to move the needle on homelessness. While such a comprehensive study is likely inappropriate for Redding/Shasta County, aspects of the Santa Clara approach are relevant to any community seeking to understand and effectively utilize homelessness resources.

> *Contra Costa County.* Contra Costa is leveraging its coordinated entry process to better understand the needs of the homeless population as a whole. County providers use the VI-SPDAT assessment instrument as their tool for measuring vulnerability and to match and prioritize clients to the appropriate level of support. Analysis of this database of VI-SPDAT scores clarifies the volume of need for different types of housing interventions and services.

System-level monitoring and evaluation ensures the system as a whole is making strides on key objectives in ending homelessness. HUD measures system effectiveness through Performance Measures, those metrics HUD considers especially relevant in assessing a community's progress, including:

- Length of time persons remain homeless

- Extent to which persons who exit homelessness to permanent housing return to homelessness

- Overall number of homeless persons

- Employment and income growth for homeless persons

- Number of persons who become homeless for the first time

- Number of placements into shelter or permanent housing from street outreach

- Rates of persons existing shelters and transitional housing to permanent housing

While only CoC-funded programs are required to report this data, the HUD Performance Measures offer a structure for meaningfully monitoring a community's system- and program-level impact on the ultimate goal of reducing homelessness.

HomeBase
Advancing Solutions to Homelessness

THE REDDING/SHASTA COUNTY LANDSCAPE

The Redding/Shasta County community has many programs and services administered by several dozen non-profits and other community entities that strive to support low-income and homeless persons. As many stakeholders observed, Shasta County is a very giving community that seeks to help persons in need. At the same time, the community could benefit from a more strategic approach to resource allocation, better aligning limited resources to those programs and services that have been demonstrated to significantly reduce homelessness in communities similar to Redding/Shasta County.

At this time, no analysis has been conducted to fully understand the community's needs around homelessness or the full spectrum of programs and resources currently in existence. The fragmentation of individual providers and lack of cross-system data makes it difficult to develop a complete picture of the existing homeless response or how resources are distributed.

Housing

While there is insufficient data to fully identify system gaps, a review of the existing housing and population data provided to HUD affords some preliminary observations.

Each year, the CoC is required to conduct a Housing Inventory Count (HIC) of provider beds dedicated to serve persons who meet the HUD definition of homelessness.[11] The results of the total counts for certain housing types can be found in Table 1.1 below.

Table 1.1: Housing Inventory Count 2011-2014[12]				
	Permanent Supportive Housing Beds[13]	Rapid Re-Housing Beds	Transitional Housing Beds	Emergency Shelter Beds
2014	34	0	393	192
2013	34	0	372	128
2012	34	0	372	128
2011	44	0	312	138

[11] HUD defines "literally homeless" as persons who are sleeping in places not meant for human habitation, sleeping in an emergency shelter, or using a motel voucher. This definition excludes people who are doubled up, couch surfing, or otherwise precariously or poorly housed.

[12] The HIC does not capture the Rapid Rehousing administered through HHSA's CalWORKs FaSt Program. In FY2014-15, this program housed 54 families.

[13] The HIC does not include supportive housing provided through the Veterans Affairs Supportive Housing (VASH) program, which is serving 55 households in FY 2015-16.

HomeBase
Advancing Solutions to Homelessness

A detailed review of 2014 data further indicated:

- 224 total beds for households with children, comprised of 158 transitional housing beds and 66 emergency shelter beds

- No permanent supportive housing available for households with children

- All permanent supportive housing beds dedicated for chronic homeless; no transitional housing or emergency shelter dedicated for chronic homeless

- No child-only beds

- 45 beds reserved for veterans (all transitional housing)

- Housing programs are largely operated by faith-based providers and most are outside the HUD CoC program

> *Who was unsheltered during the 2015 PIT Count?*
>
> - 223 chronically homeless persons
> - 19 homeless persons in families
> - 173 persons with severe mentally illness
> - 48 veterans
> - 33 victims of domestic violence

Each year, the CoC is also required to conduct a Point-In-Time (PIT) Count of people who are homeless on a single day during the last ten days of January, with a count of sheltered persons occurring annually and unsheltered persons biennially. The most recent unsheltered PIT Count took place on January 28, 2015; prior to 2015, the most recent unsheltered counts took place in 2013 and 2011.

	Total Homeless	Chronically Homeless	Homeless Individuals	Homeless People in Families	Veterans
Table 1.2: Sheltered/Unsheltered Point-In-Time Count 2015, 2013, 2011					
2015	559	298	504	55	87
2013	851	199	631	220	203
2011	527	93	403	124	46

Several interviewees voiced a lack of confidence in 2015 PIT Count data due to various factors. Some felt that planning did not take place sufficiently in advance, while others felt that most PIT Count volunteers were experienced participants who did not need much preparation. Others noted that recent sweeps of homeless encampments just prior to the Count made it difficult to track where homeless persons were congregating. While PIT Counts are typically underrepresentative, it appears that the 2015 Shasta County PIT demonstrates a significant

HomeBase
Advancing Solutions to Homelessness

undercount. Efforts to establish a PIT Count workgroup are underway to coordinate the methodology in 2016.

Analysis of System Gaps

Ideally, the composition of housing and program-types would match the community need, reflecting demographics of the homeless population and subpopulations and the barriers facing these individuals. At this time, there is insufficient data to draw any definitive conclusions respecting the appropriate mix of housing and services or to fully identify system gaps. Among other data, the community would benefit from more accurate information relating to the numbers of homeless persons and subpopulations and the causes and barriers to emerging from homelessness for those groups. The accompanying HMIS evaluation provides recommendations around systems of data collection and analysis that can help address this gap.

> "We lack really good information on this population. We don't have good information or consensus around what the information says."

While more data is essential to fully understanding community needs, existing information and stakeholder feedback suggests certain preliminary conclusions.

First, the limited inventory of permanent housing options is starkly inconsistent with the degree of need. With 223 of 298 chronically homeless persons unsheltered during the 2015 PIT, more permanent supportive housing is crucial to reducing Redding/Shasta County's rates of homelessness. In addition, many communities find that rapid rehousing can be an efficient and cost-effective approach to moving people out of homelessness. At this time, Redding/Shasta County has very few resources allocated to rapid rehousing, with none reported as part of the HIC, though some limited scale rapid rehousing does exist, largely targeting veterans with children. Rapid rehousing has been shown to be by far the lowest cost crisis intervention for homeless households that do not require permanent supportive housing; at the same time studies indicate it is at least as effective as other approaches.

Second, the volume of transitional housing is large for a community of Redding/Shasta County's size. While transitional housing can be a valuable intervention for certain sub-populations, research has shown it is not a cost-effective option for most homeless people, relative to other interventions and housing types. Further, the 2014 PIT and HIC counts suggested transitional housing inventory may be underutilized, reporting only 347 persons sheltered in 393 transitional housing beds.[14] HUD is encouraging CoCs to consider reducing transitional housing inventory to focus greater resources on permanent supportive and/or rapid rehousing.

Third, the community faces gaps in serving particular sub-groups such as childless adults with mild-to-moderate mental illness or substance use disorder who are not eligible for SSI and

---

[14] The HIC data from 2015 was not yet available at the time of this report's development.

youth in need of housing and services. Better quantifying these gaps and targeting interventions accordingly is critical to efficient resource allocation.

Fourth, many key services, including housing, are largely concentrated in a few agencies. In particular, the Good News Rescue Mission is an important central hub for many of the region's homeless services and emergency shelter. Further diversification of providers is important to ensuring that the continuum of need is met, that the system has sufficient capacity and number of engaged players to maintain sustainability over time, and to ensure that homeless persons can receive services free of barriers that may accompany individual programs.

Fifth, many of the stakeholders interviewed for this report expressed a similar understanding of program need, identifying as priorities:

- Intensive case management that can support individuals in retaining housing

- Housing navigation assistance

- Low barrier housing with supports

- Increased resources to identify and disseminate research and best practices

- Respondents were divided around the need for expansion of community outreach efforts and the need for increased affordable housing stock

Finally, while insufficient to meet the considerable need, the community is making important progress in expanding critical inventory, including development of a 55-unit affordable housing project initiative funded through low-income tax credits, HOME and MHSA funds, and other resources. Nineteen beds will be dedicated to individuals with mental health needs. Similarly, many interviewees were particularly positive about the work being done by the HHSA homeless case manager and advocated expansion of this program, coupled with access to housing.

> **Transitional Housing and The Family Options Study:**
>
> The Family Options Study, published by HUD on July 8, 2015, demonstrates that families offered transitional housing did not fare better than families engaged in other programs. Moreover, the cost of serving them was significantly higher than other program types such as rapid rehousing.

RECOMMENDATIONS

Recommendation One: Review effectiveness and costs associated with current housing and work with funders and providers to realign resources to better achieve community priorities in reducing homelessness, emphasizing expansion of permanent supportive and rapid rehousing coupled with case management support.

Recommendation Two: Promote use of evidence-based practices in existing programs through trainings and technical assistance coordinated through the CoC.

Section 2: Resources and Community Engagement

"We haven't broadened our appeal to the wider community about why this is important. That there are real solutions. We need to translate those solutions into our community, get support from elected leadership, establish a plan that makes sense for our community and find ways to show our progress."

A majority of interviewees identified retention of existing resources and development of new resources as a central priority in building the capacity of Redding/Shasta County's homeless system of care. The recent dialogue around homelessness presents an ideal opportunity for developing a longer-term vision to cultivate local support and more efficiently identify, solicit and leverage resources.

Building Resources

While the Redding/Shasta County community accomplishes an impressive array of service provision with limited funds, the needs of the homeless service system far outstrip the resources available. Identification of untapped or underutilized funding can support investment in key prioritizes, including service expansion and enhanced systems to coordinate implementation of longer-term planning.

THE REDDING/SHASTA COUNTY LANDSCAPE

HUD Continuum of Care Funding

Each year, HUD's Office of Special Needs Assistance Programs issues an annual notice of funding availability (NOFA). Our review indicates that this application and accompanying requirements dominate the current allocation of CoC time and resources.

Each CoC has a maximum award amount for which it is eligible, determined by a combination of factors, including the Preliminary Pro Rata Need (PPRN) designated by HUD using the CDBG formula, the CoC's annual renewal demand, and certain additional eligible amounts for particular enumerated costs. As a result, the annual amount a CoC may apply for is constrained. Moreover, most funds must be matched with funds or in-kind contributions from other sources. In 2015, the CoC will be eligible to apply for approximately $375,000, excluding CoC planning and bonus projects, the availability of which is contingent on each year's NOFA.

In 2014, the Redding/Shasta County CoC Council received a total award of $373,349, which it administers to four programs:

- $355,526 to Northern Valley Catholic Social Service (NVCSS) to administer 3 permanent supportive housing projects

- $17,823 to Faithworks Community Coalition to support a transitional housing project

HUD issued the NOFA for 2015 awards on September 17, 2015. CoCs have the option to reallocate funding from existing projects, in whole or in part, to new projects. The types of new projects to which CoCs can allocate funds are typically limited by HUD; for example, in the 2015 application, CoCs can reallocate to new PSH serving chronically homeless persons, rapid rehousing serving persons coming directly from the streeets or shelters or fleeing domestic violence, projects for dedicated HMIS or support service only for coordinated entry systems. CoCs undertake reallocation when existing projects demonstrate poor performance or are not a high priority service for the CoC.

Strategic Investment to End Homelessness

The community is already leveraging various funding sources to target initiatives addressing homelessness. Examples include:

The Community Development Block Grant (CDBG) Program. CDBG funds development of viable communities by providing decent housing and a suitable living environment, and by expanding economic opportunities, principally for low- and moderate-income persons. In 2014, the City of Redding received an award of $727,555 in CDBG funds from HUD. Of that award, $20,000 was allocated to support the CoC coordinator position. Shasta County received an award of $300,000 from the California Department of Housing and Community Development (HCD), allocated to support local businesses in employing very low-income persons.

CDBG monies also support the Faithworks transitional housing program, the One SAFE Place emergency shelter program for victims of domestic and sexual abuse, emergency food assistance programs, detox and recovery center programs, youth mentoring, microenterprise initatives, and ADA compliance improvements for restrooms in the Shasta Historical Society and MLK Park, among other projects.

HOME Investment Partnerships Program. HOME funds support activities, including building, buying and/or rehabilitating housing for low-income persons. In 2014, the City of Redding received an award of $241,324 from HUD. HOME funding is allocated to a construction/acquisition/rehabilitation program that provides low-interest and deferred loans and grants to increase affordable housing stock, and project delivery costs and administration for housing rehabilitation and affordable housing development activities. Shasta County receives HOME funding from HCD, with an anticipated $600,000 in FY2015-16 expenditures supporting tenant based rental assistance (TBRA) serving 100-200 households.

Mental Health Services Act (MHSA). MHSA funds support various initiatives that reduce and prevent homelessness, including the development of permanent supportive housing inventory for persons with mental illness, and patch funding to cover costs of care for individuals whose SSI benefits are insufficient to fully cover their housing in a Board and Care facility in Shasta Lake.

HomeBase
Advancing Solutions to Homelessness

Community Services Block Grants (CSBG). CSBG is a federal program that flows from the U.S. Department of Health and Human Services to the California Department of Consumer Services and Development and is awarded to California counties. The draft California 2016-17 State Plan provides for an estimated allocation of $280,883/year to the Shasta County Community Action Agency. In FY2015-16, Shasta County is allocating $60,000 in CSBG funding to administer Veterans Affairs Supportive Housing (VASH) and tenant based rental assistance programs, and $45,000 for social workers to provide housing navigation support to utilize vouchers, locating, securing and moving into permanent affordable housing.

Housing Choice Voucher (HCV) Program. The HCV program, also known as Section 8, supports very low-income families in affording housing in the private market. Participants are free to choose a residence that meets the requirements of the program, rather than being limited to units in particular projects, and a housing subsidy is paid to the landlord directly by the participating public housing agency administering the voucher. Both Shasta County and the City of Redding housing authorities administer HCV programs. Challenges around engaging landlords make it more difficult for new housing choice voucher clients to secure affordable housing. Approximately one-third of the clients that are tentatively issued a housing choice voucher by the Redding Housing Authority do not secure an affordable housing unit within the time allotted. Contributing factors include poor rental history, poor credit history and decisions to seek housing alternatives with fewer restrictions.

OPPORTUNITIES FOR RESOURCE DEVELOPMENT

Several interviewees described a sense of resignation on the part of other providers and community members regarding the limited availability of additional resources to support strengthening the homeless response. While resources are indeed scarce, accessing certain under-utilized resources and realigning existing resources to be more effective would meaningfully reduce homelessness in Redding/Shasta County and, importantly, create a sustainable long-term system for developing further resources over time.

CoC Planning Funds. Certain types of funds, such as for CoC planning and bonus projects, can exceed the maximum award amount. The amount for which a CoC can apply varies by year, for example, in the 2015 NOFA, a CoC may apply for planning costs up to 3% of its Final Pro Rata Need or $11,369.22 in Redding/Shasta County.[15] The CoC is not currently receiving CoC planning monies. To obtain Planning Funds, the Collaborative Applicant (Shasta County Community Action) must submit a Project Application for CoC Planning.

CoC Bonus Funds. In the 2014 NOFA, each CoC was permitted to submit one bonus project for permanent supportive housing serving chronically homeless individuals and families, with bonus project awards to 25 applicants. CoCs could request a maximum award

---

[15] This analysis was conducted prior to the release of information indicating that the Redding/Shasta CoC included additional neighboring counties in its registration, which increased the Bonus and Planning Funds for which the CoC may be eligible to $134,777 and $26,955 respectively.

of 15% of their final pro rata need, provided they would agree to certain requirements including participating in a coordinated entry system which had to be implemented prior to execution of the grant agreement. While this is not a large amount initially, since the amount of a prior year's award typically informs subsequent awards, bonus funding is an important way to significantly grow CoC capacity over time.

Emergency Solutions Grant (ESG). The Emergency Solutions Grant program is federal funding administered through the California Department of Housing and Community Development (HCD). Based on an interview with the CoC Coordinator, projects have previously applied twice but have been rejected on the grounds of lack of an adequate HMIS system. HCD is currently re-designing the ESG program, in part to increase consistency with HEARTH requirements and to facilitate investment in impactful activities that further key performance goals.

Local Foundations and Private Support. Local foundations such as The McConnell Foundation, Shasta Regional Community Foundation, and Sierra Health Foundation can be key partners in funding homeless reduction. In the longer term, a marketing campaign can tap into local public and private community support. An enhanced system for collecting and evaluating data to demonstrate system gaps and program success, as discussed in the accompanying HMIS evaluation, will support the sustainability of local engagement. Thinking outside the box, and engaging non-traditional partners such as business leaders and schools is an effective approach utilized by some of the country's highest performing rural communities.

> **Home Not Found: The Cost of Homelessness in Silicon Valley**
>
> A 2015 report quantified the significant economic burden of homelessness on mainstream systems in Santa Clara County, revealing that the County spent an average of $520 million a year on its homeless population, largely associated with costs of health care and incarceration. Nearly half of all costs were attributable to the top 5% of homeless system users. Studies show that these costs are greatly alleviated when households move off the streets and into permanent housing.

Mainstream Systems of Care. Because of the cost burden of homelessness on local systems of care – hospitals, emergency rooms, ambulance services – mainstream systems can be valuable partners in bringing resources into the homeless response. In Sacramento, for example, WellSpace Health and Sutter Medical Center have established a program (T3, for Triage, Transport, Treat) to reduce rates of emergency department use for needs that do not require urgent care, facilitating better connections to primary care and behavioral health services, and increasing access to permanent supportive housing, including supporting expansion of PSH resources. Successful engagement of mainstream systems requires data demonstrating burden and potential cost savings.

California's 1115 Medi-Cal Renewal Waiver. If approved by the Centers for Medicare and Medicaid Services (CMS), the Waiver will create increased opportunities to fund support

services such as case management through Medi-Cal. These services can be paired with housing to improve success in housing retention and to leverage housing dollars, as funds currently going to support services can be invested instead in housing.

Maintain Existing CoC Funding. While the CoC has been successful in maintaining its CoC program funding over time, long-term retention of these resources will require increased vigilance and investment by the CoC to come into compliance with HUD requirements around implementation of CoC Interim Rule provisions such as coordinated entry. A review of the most recent NOFA submission indicates opportunities for improvement for the application development and review.

For example, Redding/Shasta County's FY 2013 application received 0 of 5 available points for "leverage," a category that measures the extent to which the assistance provided is supplemented with resources from other public and private sources, including mainstream programs. It is clear that providers are in fact engaging in leveraging activities that could have received points under the application if documentation were collected.

RECOMMENDATIONS

Recommendation One: Apply for additional federal funds where available, including ESG and CoC Bonus Project and Planning dollars.

Recommendation Two: Increase CoC capacity to guide the community in pursuing funding beyond HUD CoC Program funding, including through public engagement.

Recommendation Three: Build CoC capacity to support programs in enhancing performance, optimize CoC application in response to HUD's annual NOFA, and establish a plan for compliance with HUD requirements such as coordinated entry.

Recommendation Four: Establish systems that will facilitate long-term resource development and allocation, including enhanced data systems to track program outcomes and monitor success. *See* the accompanying HMIS evaluation.

Community Engagement

A positive dialogue around homelessness, and education regarding potential solutions, can lead to increased dedication of local resources to build a more effective system of care. Engagement of key stakeholders bolsters the response itself, encouraging coordination of priorities, developing synergy with mainstream systems, fostering landlord partnerships, and preempting potential "Not In My Back Yard" (NIMBY) issues that can undermine important strategies.

THE REDDING/SHASTA COUNTY LANDSCAPE

While much work remains to be done to fully educate and engage the greater Redding/Shasta County community, many steps have already been taken to transform the public dialogue

around homelessness. The homeless service system and the CoC have faced considerable public indictment and misunderstanding in past months. An increase in positive press and greater engagement and education of public stakeholders has supported development of a more informed understanding around homelessness in Redding/Shasta County and its solutions.

The Good News Rescue Mission has been particularly effective in transforming its public image, as well as public reception of homeless services more generally. GNRM's tactics include outreach and relationship development with media outlets such as the Channel 7 news and *Record Searchlight*, law enforcement and other keystones of community messaging. GNRM also conducts substantial public outreach both by bringing the public to its campus – including during an open house to celebrate its 50th anniversary – and via social media venues such as YouTube to broadcast its message and respond candidly to concerns. In addition, an innovative program that supports Mission homeless guests in providing volunteer services in the community has generated greater recognition that homeless persons can be contributing members of the community.

The CoC also participates in some public outreach efforts, including the National Annual Homeless Memorial and a presentation to the Rotary Club. The June 2015 meeting of the CoC included a discussion of how to increase CoC presence in the community; however, the CoC faces significant challenges around implementation of these strategies due to a lack of resources dedicated to supporting leadership capacity that could drive effective community engagement.

Many interviewees felt that Redding City Council and Shasta County Board of Supervisors members could be doing more to take a leadership position and public stand in support of addressing homelessness. Challenges around engaging landlords contribute to substantial underutilization of housing choice vouchers administered by the City of Redding Housing Authority. Moreover, many homeless service providers continue to experience community confusion and hostility that undermines an effective homeless response.

PUBLIC OUTREACH AND ENGAGEMENT STRATEGIES

Develop uniform messaging. Providers and other stakeholders can engage in a collaborative process to identify messages relevant to the community that include responses to criticism and concerns around homelessness and services. Common approaches include:

- Facilitating greater understanding of why people become homeless and the diversity of the homeless population, including the less-visible homeless.

- Communicating that there are solutions to homelessness and these solutions typically result in overall cost savings for a community, in addition to meaningfully improving quality of life for some of the community's most vulnerable.

- Putting a face on the problem and solution by supporting homeless and formerly homeless individuals in sharing their stories of challenge and success.

- Explaining how providing services is not "enabling" but instead supports individuals and families in stabilizing so they can return to productivity.

Using the CoC. The CoC can be an effective platform to increase community participation by increasing the diversity of meeting participation and using events such as the annual PIT Count as a media opportunity.

Engage elected officials. Adoption of a strategic plan by elected bodies is a meaningful achievement and gives the strategic plan and homeless response greater weight in the community. Constituent outreach, identification of individuals who can act as champions, and engagement of elected officials in the strategic planning process can build support for the plan.

Establishing a system. Establish a system for public outreach and engagement, including requisite leadership, to leverage public forums including media and community groups such as business associations.

Landlord engagement. Landlords are sometimes reluctant to rent to homeless or formerly homeless individuals, which can lead to prolonged homelessness as households struggle to find a landlord to accept their application. Many strategies exist to engage landlords as allies in the campaign to end homelessness.

RECOMMENDATIONS

Recommendation One: Address factionalism to foster a united front, mutual support and consistent public messaging.

Recommendation Two: Develop an outreach plan that includes messaging tailored to the Redding/Shasta County community and a process for implementation.

Section 3: CoC Structure and Community Leadership

"The CoC is set up to meet mandates. We'd like it to be something bigger than that. We'd like it to be a collaborative that could work on homelessness."

While the CoC Interim Rule delineates several structural requirements with which all CoCs must comply, CoCs vary considerably in their design and day-to-day operations depending on resources, community composition, and other factors. The following section makes recommendations for increasing the City of Redding and Shasta County Homeless CoC Council's overall effectiveness in accomplishing HEARTH Act goals and supporting the Redding/Shasta County community in reducing homelessness.

CoC Meetings and Membership

During the July 16 stakeholder meeting, many participants expressed desire for a stronger CoC that could take a greater role as a leader in the Redding/Shasta County homeless response.

HomeBase
Advancing Solutions to Homelessness

While many participants called for investment in increased resources to develop the CoC coordinator position, modifications to CoC structure and operations can help deepen the CoC's community role in the interim.

THE REDDING/SHASTA COUNTY LANDSCAPE

Many of the stakeholders interviewed for this report felt that there was substantial confusion and misunderstanding respecting the CoC and its role and identified a need for community education regarding what the CoC is, what it could be, and what it would take to get there.

The focus of the Redding/Shasta County CoC Council to date has largely been in soliciting HUD CoC funding through the annual NOFA competition and maintaining this funding by taking steps to comply with HUD requirements as set forth in the Interim Rule. As such, the CoC is leanly resourced, with a part-time (16 hour/week) coordinator and a volunteer committees. CoC capacity is further compromised by a lack of continuity in the CoC coordinator contract, which has led to several months of vacancy in the position.[16]

Meetings are largely focused around networking between agencies, updates relating to compliance with HUD requirements and specific initiatives such as the PIT Count and Project Homeless Connect, recently renamed Project Healthy Community. More recently, the June 2015 meeting included a discussion around development of CoC capacity and structure, but such meetings appear to be rare. Several interviewees found the meetings helpful in bringing people together and learning about other programs and felt the meetings included a networking component that serves an important purpose.

> **Quick Facts about the Redding/Shasta County CoC:**
>
> - Comprises approximately 45-50 member agencies
> - General membership meetings held on a monthly basis
> - Attendance in 2014-15 ranged from 15 to 25 participants
> - Participants include housing, legal services, and shelter providers, City and County Housing Authorities, entities serving Veterans, the 2-1-1 system, various branches of the County Health and Human Services Agency (HHSA), and others

Several interviewees also stated an interest in using CoC meetings differently. While many key agencies participate regularly in the CoC, the representatives often are not the agency's higher-level decision makers. Certain interviewees stated that they used to attend the CoC meetings but now send lower-level staff, as they did not feel the meetings were an optimal use of their time.

---

[16] In 2015, for example, the CoC coordinator position was vacant from June 30 during the course of an RFP process, with the selected coordinator announced in early August. As a result, the July CoC meeting was cancelled and there was no CoC coordinator to participate in the community stakeholder processes as discussed in Appendix B. The prior CoC Coordinator was willing to be interviewed for the development of this report and did participate in a personal capacity in certain of the community stakeholder workshop sessions.

The CoC also faces a number of challenges. HUD requirements are intensive and not always straightforward or transparent. The annual CoC program application is time consuming and demanding. The CoC program funds only two providers in Redding/Shasta County, with all the other CoC members participating on an entirely voluntary basis.

The CoC is presently experiencing a period of growth and self-reflection, with an increasingly engaged Executive Committee interested in taking on a greater leadership role in establishing the CoC as a unifying force and center of gravity in the community's response to homelessness.

BUILDING LEADERSHIP AND UNITY IN THE HOMELESS RESPONSE

CoC Executive Committee/Board

An effective CoC Executive Committee/Board can lead development of CoC vision, guiding the coordinator in implementing strategies to achieve the CoC's long-term goals. Under the CoC Interim Rule, the CoC Executive Committee must have:

- A written process for board selection that is reviewed, updated and approved by the CoC at least once every 5 years

- Membership representative of the relevant organizations and of projects serving homeless populations, including at least one homeless or formerly homeless individual

- A code of conduct and recusal process

Particularly effective Executive Committees tend to share the following characteristics:

- Powerful membership that brings the perspective, and potential resources of other systems of care. In Santa Clara, for example, the board includes the County Chief Operating Officer and leadership of local foundations, which generates buy-in and financial support

- Board members are informed on key issues and honed into strategic goals

- Focus is on driving outcomes that reduce homelessness with a willingness to leave behind the status quo

- Members regularly ask difficult questions, taking notice of where the CoC is losing traction, and pushing for strategic movement forward

CoC Coordinator

Redding/Shasta County's CoC Coordinator is a part-time position through a contractor agreement with Shasta County. Several interviewees noted concerns with this structure as the contract is subject to lapse with the position unfilled (or filled retroactively), which leaves a vacuum of staffing for the CoC. Among other obligations, the Coordinator is responsible for the

CoC and subcommittee meetings, ensuring CoC compliance with HUD regulations, and coordinating the annual NOFA application process.

In a given community, the optimal CoC staffing structure is highly contingent on context and resources. While a part-time coordinator is common to many less-resourced regions, investing resources in that position can make sense where the expectation is that the coordinator will take on a high-level policy and coordination role in the community. Communities will sometimes bifurcate the roles, with separate individuals responsible for CoC administration and driving policy and strategic activities.

County contractor. The use of a county contractor as CoC coordinator is often found in many smaller communities. Such a structure is typically more cost-effective, though it may also be disadvantaged by other challenges, including a lack of authority to engage stakeholders.

County staff. Some communities use county staff to coordinate the CoC, which can be useful for ensuring continuity of the position and for engaging county-level stakeholders, though it can also present challenges around ensuring engagement by key cities within the county and can result in bureaucratic limitations.

Non-profit. CoCs may also be operated out of a non-profit. This can be an advantage in maintaining the CoC's independence from political issues at the city/county level, but may make it difficult to sustain government ownership of issues around homelessness and can be problematic in a competitive non-profit environment.

CoC Meetings

The structure of CoC meetings should be goal-oriented and targeted toward system and CoC capacity-building, with a focus on expanding diversity of CoC participation and strengthening the system as a whole. Limited time should be spent discussing HUD-related business or initiatives that do not impact the greater CoC community or may be better addressed via sub-committees. Such a structure will support the CoC in accomplishing more and serve to attract more diverse CoC membership with increased attendance by agency decision-makers and key stakeholders.

Meeting strategies include:

- Designating the first meeting of the calendar year as a goal-setting meeting to identify the priorities for that year and celebrate the accomplishments of the year prior, with a plan for designating subsequent meetings to accomplish the goals.

- Holding meet and greets after meetings and/or designate one of the annual meetings as a networking meeting and invite non-CoC members to attend. These approaches allow for networking while avoiding a structure where agency report-backs become a

HomeBase
Advancing Solutions to Homelessness

primary CoC agenda item. Some CoCs hold separate networking events so the full meetings can focus on the community plan and big picture.

- Identify relevant topics and invite non-CoC participating stakeholders such as the school district to present.

- Provide trainings that can help build community-wide support and develop connections with mainstream systems – e.g., to hospital intake or HHSA staff regarding working with the homeless population and resources available.

- Provide best practices trainings on topics such as housing first and special meetings for providers to share knowledge and information regarding challenges, strategies, resources and successes.

- Designate time for reviewing outcomes and discussing barriers and a plan for moving forward.

- Consider involving the Board in developing and/or approving the plan for general membership meetings and identify the categories of CoC business that belong more appropriately before the Board, rather than the general membership. In some communities, for example, the Board manages much of the business relating to HUD compliance and the NOFA application process.

- Identifying a ratio of full-membership to board-only meetings appropriate for community resources. For example, in some communities the board meets monthly while the general membership gathers only bi-monthly.

RECOMMENDATIONS

Recommendation One: Build out the Executive Committee to take a leadership role in guiding CoC vision and expectations to have a community-wide impact.

Recommendation Two: Change CoC meeting structure to focus on diversifying membership and accomplishing strategic objectives that will build capacity in the homeless response system as a whole.

Recommendation Three: Use the strategic planning process to solidify a common understanding of the CoC's role in leading or contributing to the community-wide homeless response.

CoC Governance

HUD imposes substantial requirements on the CoC, set forth in the CoC Program Interim Rule, the regulations implementing the HEARTH Act. Compliance with these requirements is tied to eligibility and competitiveness for CoC program funding. At the same time, many of these requirements do not reflect an expectation by HUD that the CoC be in immediate compliance,

HomeBase
Advancing Solutions to Homelessness

but rather that the CoC establish a process to achieve compliance over time. An effective CoC will balance resources invested in HEARTH Act compliance with a greater mission to support a community-wide response to homelessness.

THE REDDING/SHASTA COUNTY LANDSCAPE

Consistent with most leanly-resourced communities, the Redding/Shasta CoC can take steps to better align its governance and structure with HUD requirements. Priority should be placed on those initiatives that can further support the CoC in its public engagement efforts and capacity development.

- Ensure Executive Committee/Board compliance as an accompanying process to Executive Committee development, adding a homeless or formerly homeless person to the Committee, and ensuring an appropriate recusal process.

- Establish a process for achieving a coordinated entry system.

- Conduct a public process to solicit new membership from across the County, and regularly publish meeting times/dates/locations, agendas and meeting minutes on the CoC website. The Redding/Shasta County CoC has a website, which contains information including meeting minutes from months prior to April 2011 and the 2012 CoC funding application, but does not contain recent materials or announcements of upcoming meetings.

- As part of the discussion to modify the CoC's organization and mission, consider updating the CoC's governance charter to reflect changes.[17]

- Conduct an annual gaps analysis each year. The analysis was skipped in 2014 due to lack of continuity in the CoC coordinator contract.

See Appendix C for a checklist of select HUD requirements.

RECOMMENDATIONS

Recommendation One: Identify strategic opportunities and a process for enhancing compliance with HUD CoC Program Interim Rule requirements over time.

---

[17] We were unable to obtain a copy of the current governance charter for review and incorporation into this report; the CoC coordinator position was unfilled for most of the duration of this report's drafting and we were not able to timely obtain all of the materials requested.

Appendix A: Summary of Report Recommendations

Community Planning

Recommendation One: Build capacity in the CoC as a hub for collective action to drive unity and system-level buy-in by deepening the role of the executive committee and modifying CoC operating structure and expectations (discussed in Section Three).

Recommendation Two: Conduct a community-wide strategic planning process that:

- ✓ Establishes a plan for developing effective centralized or coordinated leadership
- ✓ Engages stakeholders at all levels of the community
- ✓ Is grounded in a real and data-driven understanding of the community needs and resources
- ✓ Is realistic given the Redding/Shasta Community's strengths and limitations
- ✓ Focuses on evidence-based program models
- ✓ Establishes a process for implementation and ongoing monitoring
- ✓ Focuses on both short and intermediate term goals, with emphasis on sustainability and maximizing outcomes in reducing homelessness in line with measurable benchmarks

Recommendation Three: Develop data systems as recommended in accompanying HMIS evaluation to enhance understanding of the current landscape and support ongoing monitoring.

Recommendation Four: Identify and foster a source of unifying leadership to support the community in a more coordinated and visionary homeless response.

Homeless Services and Supports

Recommendation One: Review effectiveness and costs associated with current housing and work with funders and providers to realign resources to better achieve community priorities in reducing homelessness, emphasizing expansion of permanent supportive and rapid rehousing coupled with case management support.

Recommendation Two: Promote use of evidence-based practices in existing programs through trainings and technical assistance coordinated through the CoC.

Building Resources

Recommendation One: Apply for additional federal funds where available, including ESG and CoC Bonus Project and Planning dollars.

Recommendation Two: Increase CoC capacity to guide the community in pursuing funding beyond HUD CoC Program funding, including through public engagement.

HomeBase
Advancing Solutions to Homelessness

Recommendation Three: Build CoC capacity to support programs in enhancing performance, optimize CoC application in response to HUD's annual NOFA, and establish a plan for compliance with HUD requirements such as coordinated entry.

Recommendation Four: Establish systems that will facilitate long-term resource development and allocation, including enhanced data systems to track program outcomes and monitor success. *See* the accompanying HMIS evaluation.

Community Engagement

Recommendation One: Address factionalism to foster a united front, mutual support and consistent public messaging.

Recommendation Two: Develop an outreach plan that includes messaging tailored to the Redding/Shasta County community and a process for implementation.

CoC Meetings and Membership

Recommendation One: Build out the Executive Committee to take a leadership role in guiding CoC vision and expectations to have a community-wide impact.

Recommendation Two: Change CoC meeting structure to focus on diversifying membership and accomplishing strategic objectives that will build capacity in the homeless response system as a whole.

Recommendation Three: Use the strategic planning process to solidify a common understanding of the CoC's role in leading or contributing to the community-wide homeless response.

CoC Governance

Recommendation One: Identify strategic opportunities and a process for enhancing compliance with HUD CoC Program Interim Rule requirements over time.

Appendix B: July 16 Community Alignment Session

On July 16, 2015, nearly 60 diverse members of the Redding/Shasta County community gathered to discuss gaps and opportunities for strengthening the homeless system of care.

Participants included:

- ❖ Elected Representatives
- ❖ Law Enforcement
- ❖ Service Providers
- ❖ Housing Authority
- ❖ Health and Human Services

- ❖ Journalists
- ❖ Property Managers
- ❖ Health Care/Community Clinics
- ❖ Public Library
- ❖ Public Schools

HomeBase
Advancing Solutions to Homelessness

- ❖ Faith Community
- ❖ Business Community

- ❖ 2-1-1
- ❖ County Residents

Stakeholders participated in active dialogue, breakout discussions, and prioritization exercises to begin identifying community priorities and next steps around addressing homelessness.

Breakout groups were invited to discuss five topics: Leadership and Coordination; Building Resources; Public Image and Community Involvement; Housing and Service Gaps; Data and Information Management.

Common themes and points of near-consensus cut across each breakout session, regardless of the topic:

- ❖ In particular, community members spoke of the need for unification of approach and vision across the community, with strong leadership that could drive the development, implementation, and community-wide buy-in to a central, cohesive plan.

- ❖ Interrelatedly, the majority felt that increased resources and a sense of sustainability and accountability would promote participation and engagement by key stakeholders, and help transform the community perception of homelessness and the local homeless response system.

The community prioritization process identified several top priorities and additional steps. In particular:

Community Priorities and Next Steps: Top Priorities

- ✓ Develop a strategic plan and structure for community coordination

- ✓ Strengthen the CoC by identifying resources that could support at least one full-time CoC coordinator; build the CoC Steering Committee into an executive leadership structure, "like a board of directors"

- ✓ Explore additional funding opportunities that could fund key priorities (e.g., funding case management and other services with Medi-Cal), relevant foundations; figure out who should be responsible for applying

- ✓ Support the CoC in developing and maintaining stronger collaborative relationships with government agencies, non-profit, faith communities, homeless consumers; deepen involvement of elected officials at city and county levels

- ✓ Research best practices of approaches to data collection, tracking and monitoring that are implemented by other communities most similar to our needs

✓ Develop a marketing campaign to educate the community about the homeless population, homeless providers, current status of collaborative effort, increasing positive image

Additional Steps to Strengthen the Homeless Response

Resources

✓ Identify resources not currently being accessed or not being accessed fully (e.g., does it make sense to apply for CoC planning funds? Improve coordination with Community Action Agency re CSBG funding? Apply for CalWORKS housing support?)

✓ Map existing resources to create synergies and reduce duplication

✓ Work with Housing Authorities to improve access to housing vouchers for homeless

✓ Build targeted resources by encouraging faith communities to contribute to coordinated initiatives.

✓ Establish a one-stop entry to system, such as 2-1-1

Housing & Services

✓ More case management!!

o Develop individualized plans for homeless/at-risk to ensure needs are clear and met

✓ Bring back one-stop centers

✓ Landlord Support, such as:

o Landlord collaborative to set example and support those at-risk for homelessness

o Develop funding pool to provide financial incentives for landlords to rent to homeless people

✓ Build a network of volunteers to assist with system navigation

✓ Invest in SOAR program; apply for SOAR TA funds

✓ Establish an effective assessment system to determine appropriate level of care

✓ Incorporate prevention into the conversation

Public Image

✓ Media campaign, including regular reports on successes in addressing homelessness

HomeBase
Advancing Solutions to Homelessness

✓ More resources for educating staff and community

✓ Use data to improve public awareness

✓ Use social media to educate and promote positive image of homeless services

✓ Share strategic plan and include recommendations that show cost-benefits of solutions

✓ Engage key subgroups such as business leaders, elderly, and long-time residents

✓ Establish a committee to focus on marketing and public image

Coordination

✓ Involve homeless consumers as a voice in developing the solution

✓ Facilitate better communication with homeless services network, including the services that are available, changes to existing services, community outreach programs

✓ Use data for coordination

- Establish user-friendly data systems, facilitate consistent data intake

- Identify outcomes for success and use data to monitor outcomes

- Understand the current snapshot of the problem ("we need to understand the reasons why people are homeless")

- Understand existing resources

✓ Develop a common understanding of the problem we are trying to solve and prioritize problem solving and how resources are used

✓ Build systems of better coordination between programs

✓ Improve coordination between the city and county, and other cities besides Redding

✓ Ensure law enforcement has the right/appropriate role

✓ Support Shasta in working with other counties

✓ Change the structure of the CoC to do more

APPENDIX C: Checklist of Selected Interim Rule Requirements

The Interim Rule enumerates a variety of structural requirements for CoC operations, including:

☐ Membership that includes all relevant organizations that exist in the CoCs geographic area:

HomeBase
Advancing Solutions to Homelessness

- o Nonprofit homeless assistance providers

- o Victim service providers

- o Faith-based organizations

- o Governments

- o Businesses

- o Advocates

- o Public housing agencies

- o School districts

- o Social service providers

- o Mental health agencies

- o Hospitals

- o Universities

- o Affordable housing developers

- o Law enforcement

- o Organizations that serve veterans

- o Homeless and formerly homeless individuals

- o Other relevant organizations

☐ A governance charter that includes the following characteristics:

- o All policies and procedures necessary to comply with certain Interim Rule requirements, including the requirements identified in this list

- o All policies and procedures to comply with HMIS requirements

- o Code of conduct and recusal process for the board

- o A process for annual updating

☐ A board to act on behalf of the CoC that includes the following characteristics:

- o Must comply with conflict-of-interest requirements

- o Be representative of the relevant organizations and of projects serving homeless subpopulations

- o Include at least one homeless or formerly homeless individual

- o There must be a written process for board selection that is reviewed, updated and approved by the CoC at least every 5 years

□ Publication of the CoC agenda prior to the meeting and minimum standards for inviting new members to join the CoC, with a public `means of extending the invitation at least annually within the COC's geographic area

□ Written policies and procedures that document a means of:

- o Establishing performance targets for projects, appropriate for each population and program type

- o Monitoring performance of CoC recipients and subrecipients and evaluating outcomes

- o Taking action against poor performance

□ Written standards for providing CoC assistance including policies and procedures for:

- o Evaluating eligibility for assistance

- o Prioritizing who will receive assistance

- o Determining the level of support participants will receive

□ Protocols to guide operation of a coordinated assessment system, including a specific protocol for addressing the needs of victims of domestic violence