## 2019-2022 ACTION PLAN OUTCOMES

## **GOAL I: IDENTIFY:**

Seek to identify and intentionally engage with those without homes in the community to understand their barriers and goals, then connect them to housing.

<u>TARGET</u>	<u>STRATEGY</u>	<u>OUTCOME</u>	<b>ACCOUNTABILITY</b>	<u>TIMELINE</u>
System Alignment	Examine opportunities with local funding to expand flexibility in paying for services that respond to community, stakeholder and population input listed in this survey.	Flexible Funding household support is incorporated into housing program reimbursement/guidelines.	County/COV	End 2019 & Annua
System Alignment	Increase the outreach effort related to the annual Point in Time Count.	Provide a formal volunteer engagement and training series to increase community involvement with the Point in Time Count.	CFTH	Annual
System Alignment	Continue to work with partners to streamline data collection and data sharing efforts	<ol> <li>Create a data sharing agreement with at least one system of care partner.</li> <li>Identify common people who are high utilizers of services to collaboratively address housing needs.</li> </ol>	CFTH/Data Partners	End 2019
System Alignment	All funders of HCRS program require programs to follow a coordinated and systemic approach.	<ol> <li>Funders require: HMIS data entry, use of coordinated entry (Housing Solutions Center)         Engagement in the Continuum of Care and annual Point in Time Count.</li> <li>HCRS funded programs addresses and positively effects system-level performance measures identified in the Clark County Homeless Action Plan.</li> </ol>	COV/County/Other funders	Annual
System Alignment	Prioritize people who are unsheltered for HCRS programs.	Increase the percent of people who are unsheltered and entering HCRS interim and permanent housing programs by 10%. (2017 Baseline: 70%)	Outreach Teams/CFTH/County	Annual
Outreach & Engagement	Increase the number of skilled and well-trained mobile outreach staff available to engage with those who are unsheltered.	<ol> <li>Number of HCRC Outreach staff increases to 14.         (2017 Baseline: Six)     </li> <li>Develop collaborative outreach approaches to effectively track, target and ensure engagement with people who are chronically homeless and/or most vulnerable. The Outreach Collaborative meeting absorbs new staff/teams and meets regularly.</li> <li>Increase the number of households permanently housed by Outreach teams by 10% each year. (2017 Baseline 25%)</li> <li>Increase the number of peers providing outreach in the community to at least one per agency.</li> <li>Diversify the skills sets of outreach teams, by creating additional PACT-like or FACT-like teams dedicated to serving people who are unsheltered and unengaged with behavioral health.</li> </ol>	CoC/CFTH/County/COV/Other Funders	1) End 2022 2) Annual 3) Annual 4) End 2020
Outreach & Engagement	Increase the number of outreach staff trained to conduct the community's objective housing assessment.	80% of outreach staff are trained and conducting housing assessments each year. (2017 Baseline: 40%)	CFTH/Outreach Agencies	Annual
Outreach & Engagement	Align outreach staff more closely with community partners to address their needs related to homelessness.	One outreach staff member is identified as a liaison for specific law enforcement entities, the library and other engaged entities.	Outreach Agencies/Partner Agencies/CoC	End 2019
Outreach & Engagement	Increase the scope of outreach staff to allow them to work in tandem with Supportive Housing programs, to stabilize households.	<ol> <li>1) Funders adjust contracting/grants and fund accordingly to effectively allow outreach staff to help transition supportive housing households from the street to home.</li> <li>2) Outreach teams funded by the HCRS have a primary focus on targeted outcomes related to reducing housing barriers and housing those who are most vulnerable.</li> </ol>	County/COV/CoC	All Annual

Outreach & Engagement	Utilize by Names Lists to more effectively identify the community needs and identify housing for those with the highest needs.	Formalize the Veterans By Name List process and surrounding efforts to identify all Veterans who are sheltered and unsheltered.	CFTH/Partner Agencies/CoC/Funders	Annual
Outreach & Engagement	Create additional basic need options providing access to shower, storage, laundry, restrooms, vaccines to all.	<ol> <li>Provide ongoing operational funding to the Grand Blvd. Day Center.</li> <li>Sustain food options available to people experiencing homelessness.</li> <li>Explore, provide technical assistance support and fund strategies to address the identified basic needs of those who are unsheltered.</li> <li>Increase access to basic need options across the County utilizing community and faith-based resources that already exist.</li> <li>Increase the number of sanctioned parking options available at night for people living in their cars to 60.         <ul> <li>(2018 Baseline: 36)</li> </ul> </li> </ol>	COV/County/Other Funders/CFTH	All Annual
nergency Shelter	Provide safe, interim housing for households to move out of crisis and reduce barrier to housing.	<ol> <li>Increase the number of emergency shelter beds available throughout the community by 50. Prioritize single women, couples, families and/or DV survivors.         (Baseline: 180 beds)</li> <li>All publicly funded shelters are low-barrier, focus on alleviating housing barriers for households to quickly move them to permanent housing and flexible in the populations they serve.</li> <li>Provide basic needs for those residing in the facility, including food, showers, laundry and storage.</li> <li>Increase motel vouchers for people with high needs who cannot go into shelter.</li> </ol>	County/City	1) 2022 2) Annual 3) Annual

## **GOAL 2: ASSIST:**

Once a household has been identified, their homelessness or housing instability is resolved in an efficient manner with the least intensive supports.

Focus on those who are most vulnerable.

<u>TARGET</u>	<u>STRATEGY</u>	<u>OUTCOME</u>	<b>ACCOUNTABILITY</b>	TIMELINE
People who are Chronically Homeless	Reduce the number people and families who are chronically homeless in the community.	<ol> <li>Convene a Housing First workgroup to strengthen the system efforts to serve those who are most vulnerable and provide programs to fidelity.</li> <li>Prioritize interim housing beds for people who are chronically homeless and entered in a housing program.</li> <li>Work collaboratively with other systems of care to create additional supportive housing beds that prioritize people with high needs.</li> <li>Number of people who are chronically homeless decreases by 25% (2017 Baseline: 115 Individuals &amp; 8 Families)</li> <li>Increase in Housing First Supportive Housing capacity in the community by 30% (2018 Baseline: 152 program spots)</li> <li>Decrease the number of negative exits from Supportive Housing to non-permanent housing by 3%. (2017 Baseline: 8%)</li> <li>Explore a by name list for people who are chronically homeless, ensuring cross-system partnerships, data and engagement.</li> <li>Increase the number of site based supportive housing units available to people who are chronically homeless by 50. (2018 Baseline: 30 units)</li> </ol>	County/CFTH/VHA/Systems of Care	1) End 2019 2) End 2019 3) End 2021 4) End 2021 5) End 2022 6) Annual 7) End 2022 8) End 2022
Veterans	End Veteran Homelessness in Clark County.	<ol> <li>Conduct a 100-day Veteran Challenge utilizing community and provider ideas and input and make other system efficacy improvements to end homelessness for Veterans.</li> <li>Increase number of VASH vouchers available in the community. (2018 Baseline: 44)</li> <li>Develop targeted homeless prevention approaches for Veterans in collaboration with community partners.</li> <li>Create targeted Diversion and Rapid Re-housing program for Veterans to move eligible households from the Veteran By Name List to stable housing.</li> <li>Reduce the number of Veteran households on the VBNL by 50% (2018 Baseline: 300 households)</li> </ol>	County/ COV/CFTH/VA/VHA Veteran serving agencies	All End of 2020
Youth (12-24)	Create a comprehensive continuum of youth (ages 18-24) services to reduce the number of youth experiencing homelessness.	<ol> <li>1) Create five dedicated youth (ages 18-24) low-barrier transitional housing beds to meet the immediate needs of youth without homes. (2018 Baseline: 0 beds)</li> <li>2) Increase HCRS access points that are tailored for youth as a part of the coordinated entry and assessment. (Baseline: HSC and outreach only)</li> <li>3) Develop 20 additional supportive transitional housing options appropriate for youth. (2018 Baseline: 58 program spots)</li> <li>4) Develop and support a youth action board to move forward system development and oversight of youth priorities.</li> <li>5) Create and sustain a Youth by Name List to begin addressing Youth homelessness among those who are sheltered and unsheltered.</li> <li>6) Create or identify a youth advisory group to create and provide feedback regarding the Youth by Name List.</li> </ol>	County/Youth serving agencies/CFTH	1) End 2021 2) End 2019 3) End 2021 4) End 2020 5) End 2021 6) Annual 7) End 2019 8) End 2021

		<ul> <li>7) Reduce number of unaccompanied youth 18-24) experiencing homelessness in Clark County. (2018 Baseline: 98 (OSPI Homeless School Liaison Data) or 11 (PIT Count))</li> <li>8) Explore a Host Homes program to serve unaccompanied youth under age 18.</li> </ul>		
Families	Work with partner entities to more effectively identify families who are literally homeless and assess for best fit program assistance.	Create formal partnership with Department of Social and Health Services, WorkSource and other entities that serve families at risk-of homelessness to establish a formalized referral agreement.	СҒТН	Annual
Domestic Violence, Sexual Assault, Stalking Survivors	Increase HCRS capacity to meet the emergency shelter needs and unique housing needs of survivors.	<ol> <li>Increase emergency shelter capacity by providing motel vouchers specifically for DV (et al.) survivors.</li> <li>Provide annual training to housing program providers regarding the unique needs or survivors.</li> <li>Create 10 Transitional Housing beds/units specifically for survivors to meet their immediate needs. (2018 Baseline: 0 beds)</li> </ol>	County/CFTH/YWCA	1) 2020 2) Annual 3) 2022
Targeted Prevention	Provide Targeted Prevention using a systemic approach to focus on households most likely to become homeless	<ol> <li>Prevention funders require an evidence-based targeted prevention and systemic approach to effect the HCRS. Prevention funding be as flexible as possible, allowing full move-in costs and utilities in order to effectively stabilize households.</li> <li>Develop a baseline and reduce the number of households served through Prevention that enter the HCRS within two years.</li> <li>The number of households who are newly homeless (last 2 years) within the HCRS developed the prevention of the preve</li></ol>	CFTH/CoC/County/COV	1) End 2019 2) End 2019 3) Annual
Diversion	Increase the HCRS ability to provide a Diversion First approach with all household types who are willing to engage in order to reduce household engage with the HCRS and length of time homeless.	<ol> <li>decreases by 10%. (2017 Baseline: 2117 Individuals)</li> <li>Double the number and broaden the population types supported with Diversion (2017 Baseline: 94 households, for families, seniors and people with disabilities.)</li> <li>Increase the capacity to provide Diversion coaching in the community through funding and training.</li> </ol>	CFTH/County	1) Annual 2) End 2020
Rapid Re-Housing	Continue to support and expand low-barrier best practice Rapid Rehousing in Clark County for all populations	<ol> <li>Increase number of program spots in low-barrier Rapid Re-housing program spots by 80 (2018 Baseline: 141 program spots)</li> <li>Increase the number of Rapid Re-housing households that exit to a permanent housing destination. (2017 Baseline: 80%)</li> <li>Reduce the number of households exiting Rapid Re-housing to a permanent destination who return to homelessness within two years (2017 Baseline: 10%)</li> <li>Decrease the average number of days households remain homeless after program entry. (2017 Baseline: 74 days)</li> </ol>	County/COV/Other Funders	1) Annual 2) Annual 3) Annual 4) Annual
Supported Housing	Increase evidence-based supportive housing interventions that efficiently move people experiencing homelessness into permanent homes	<ol> <li>Increase Housing First supportive housing options for families and individuals who are not chronically homeless by 100%.         (2018 Baseline: 22 units Families &amp; 11 Individuals)     </li> <li>Reduce the average number of days supportive housing programs take to housing a household. (2017 Baseline: 95 days)</li> <li>Increase the number of supportive housing programs utilizing HMIS to collect holistic data (2018 Baseline: 105 users)</li> <li>Work collaboratively with agencies providing 1115 Medicaid Waiver Supportive Housing to connect people utilizing the HCRS with housing options and increase HCRS capacity.</li> </ol>	CFTH and all partners using HMIS	All Annual

## **GOAL 3: RESOLVE**

Once a household is stabilized in housing, they are connected with safety net services, remain stable and do not become homeless again.

ARGET	<u>STRATEGY</u>	OUTCOME	<b>ACCOUNTABILITY</b>	<u>TIMELINE</u>
Supportive Housing, Rapid Re-housing, Diversion	Provide resources, tools and education to prepare households to remain stable in their housing.	<ol> <li>Increase the number of Rent Well classes offered in the community. Create and offer a single class to share pieces of the Rent Well curriculum with housing programs.</li> <li>Provide training and curriculum to housing program staff on debt negotiation, budgeting and other life skills in order to offer to program clients.</li> <li>Provide Assertive Engagement training to program staff.</li> </ol>	County/CFTH	1) Annual 2)Annual 3)End 2020
Targeted Prevention	Provide Targeted Prevention using a systemic approach to focus on households most likely to become homeless	<ol> <li>Prevention funders require an evidence-based targeted prevention and systemic approach to affect the HCRS. Prevention funding be as flexible as possible, allowing full move-in costs and utilities in order to effectively stabilize households.</li> <li>Develop a baseline and reduce the number of households served through Prevention that enter the HCRS within two years.</li> <li>Provide targeted prevention and diversion (particularly outside of the City of Vancouver to balance the Affordable Housing Prevention funding).         <ul> <li>(2018 Baseline: 240 additional households in City of Vancouver)</li> </ul> </li> <li>The number of households who are newly homeless (last 2 years) within the HCRS decreases by 10%. (2017 Baseline: 2117 Individuals)</li> </ol>	CFTH/CoC/County/COV	1) End 2019 2) End 2019 3) Annual 4) Annual
System Alignment	Advocate for greater resources and collaborative opportunities within the HCRS and in other systems of care that intersect with people exiting homelessness, who are low-income or simply are struggling.	<ol> <li>Engage local governments and service providers to solicit ideas on interventions and policy changes that would reduce the number of people becoming homeless</li> <li>CoC adopts works to develop and adopt an annual policy agenda</li> <li>Actively support efforts to increase the availability of and greater access to safe and affordable rental unit</li> <li>Facilitate a voter registration drive in partnership with advocates, affordable housing projects and housing programs.</li> </ol>	СҒТН	All Annual
System Alignment	Create opportunities for landlord education, conversation and partnership.	<ol> <li>Develop and implement system-wide landlord recruitment and retention initiative, in tandem with system providers, partners, including staffing, marketing and outreach activities.</li> <li>Create a marketing campaign to share information about the statewide Landlord Mitigation Program.</li> </ol>	CFTH/CoC/County/COV	1)End 2020 2)End 2020
System Alignment	Work with local government, county officials, mayors and tribal organization to maintain a policy focus on alleviating homelessness locally.	Council for the Homeless policy agenda is created to target HCRS components and affordable housing.	CFTH	Annual
System Alignment	Learn from the expertise of people with lived homeless experience.	<ol> <li>Increase the number of people and scope of individuals/entities involved in the CoC Leadership, Steering Committee and associated groups, workgroups and task groups.</li> <li>Formally seek feedback from people with lived experience when seeking to make CoC changes.</li> <li>Create peer/community health worker positions within the HCRS and among the various programs. (2018 Baseline: Zero)</li> </ol>	CFTH	1) End 2019 2) Annual 3) End 2022
System Alignment	Develop and provide ongoing community trainings and education series regarding the causes of homelessness, resources available and	Create an ongoing community educational series focused on topics related to homelessness, policy and advocacy.	CFTH/County	All Annual

	opportunities for active involvement.	2) Implement trauma-informed and equity principles and other emerging practice		
		approaches into staff trainings and the focus on the HCRS.		
		3) Progress policy action items identified in the plan and beyond.		
System Alignment	Create a HCRS that is engaging and moving all people experiencing homelessness to safe, stable housing in partnership with systems of care and community resources.	<ol> <li>Institute standardized HCRS cultural competency trainings (equity).</li> <li>Create and sustain culturally conscientious expectations of programs and their environments to ensure those disproportionately affected by homelessness, including people who are LGBTQ+, people of color and people with disabilities are entering safe and aware environment.</li> <li>Create HCRS affirmative hiring and retention practices to further diversify system staff, including language skills, at all levels and in all programming types to better reflect populations served.</li> <li>Use HMIS data to examine current HCRS programs to ensure equitable access and use is occurring</li> <li>Create or include HCRS representation on a Discharge planning workgroup to formally establish discharge routes to housing for people exiting to homelessness and strengthen partnerships with systems of care.</li> <li>Funders create a dedicated fund to support match needed to leverage additional significant HCRS funds new to the community.</li> <li>Provide training and technical assistance to progress the HCRS toward Federal and State performance measurements.</li> <li>Conduct an equity assessment of the HCRS.</li> </ol>	CFTH/County	1) Annual 2) Annual 3) End 2020 4) Annual 5) End 2019 6) End 2021 7) Annual 8) End 2020
System Alignment	Increase knowledge of landlords and tenants regarding landlord- tenant laws and available resources to support tenancy.	<ol> <li>Increase tenant access to legal advocates, conflict mediators and self-help support.</li> <li>Create a marketing campaign to share information about the Landlord Mitigation Fund, housing program strengths and resources to help pay rent.</li> </ol>	County	1)County/CFTH 2)CFTH
System Alignment	Support and promote shared housing options focused on serving people who are without homes.	Explore how to create shared housing options for people experiencing homelessness.	CFTH	1) End 2020
System Alignment	Increase HCRS transparency and information sharing.	Create an annual report specifying the strategic progress toward outcomes in the Plan.	County/CFTH	Annual
Emergency Shelter	Prevent individuals from being discharged from systems of care to homelessness.	Increase the number of medical respite beds available in the community by ten. (2018 Baseline: Three)	County, Discharge Partners	End 2023
System Alignment	Create an innovative ideas incubator task force comprised of atypical players in the HCRS.	<ol> <li>Identify 1-2 permanent housing projects that will allow people/couples/families to exit homelessness.</li> <li>Identify funding non-HCRS funding.</li> <li>Pursue project.</li> </ol>	CFTH/County/COV	1) Convene by end of 2019