

**STRATEGIC PLAN TO ADDRESS HOMELESSNESS  
IN MENDOCINO COUNTY**

**Mendocino County Homeless Services Continuum of Care**

**March 2020 – DRAFT**

## ACKNOWLEDGEMENTS

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Que B. Anthnoy	Individual—formerly unsheltered
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Que B. Anthnoy	Individual representing people currently or formerly unsheltered
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Sage Wolf, Redwood Community Services	Shelter representative, North/Inland
Blythe Post, Mendocino County Office of Education	Organization serving the needs of children

## I. INTRODUCTION

The purpose of the Mendocino County Strategic Plan to Address Homelessness (“Plan”) is to share with the community a common agenda and plan of action to make homelessness RARE, BRIEF, and only ONE TIME. The Plan was developed by the Strategic Planning Committee of the Mendocino County Homeless Services Homeless Continuum of Care (MCHSCoC), a collaborative of over 31 public agencies and private non-profit organizations throughout the County that serve the unsheltered population. The Plan was reviewed by the MCHSCoC governing board and formally adopted on XXXMonth, XX, 2020. The following jurisdictions have also adopted this Plan: XXX, XXX, XXX.

This Plan also fulfills Federal and State requirements that local jurisdictions receiving funding from the U.S Department of Housing and Urban Development (HUD) have a community plan for addressing homelessness. Mendocino County’s CoC is the U.S Department of Housing and Urban Development (HUD) designated Homeless Continuum of Care for Mendocino County, with the County providing project monitoring and fiduciary oversight.<sup>1</sup>

This Plan is also seeks seeking to address the fragmentation that currently exists in the system, which diminishes the effectiveness of homelessness-related funding, service delivery, and system performance. The Plan recognizes that transforming our County’s homeless service system will also require close collaboration with community members and key stakeholders, elected officials, agency staff, service and housing providers, and people with lived experience of homelessness. Thus, the Plan includes two additional goals related to strengthening collaboration both between the CoC and the broader community and within the CoC governing body itself.

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<sup>1</sup> HUD requires that each Homeless Continuum of Care develop a plan that coordinates implementation of a housing and service system, conducts a Point-in-Time count of homeless persons, analyzes needs and provides strategies to address gaps in housing and services, provides information required to complete the Consolidated Plan(s), and plans for and evaluates performance of Emergency Solutions Grant (ESG) recipients. <https://www.hudexchange.info/coc/coc-program-law-regulations-and-notice/>

## II. HOMELESSNESS IN MENDOCINO COUNTY

Mendocino County covers 3,506 square miles of mostly mountainous terrain, making it the 15<sup>th</sup> largest among California's 58 counties—almost equal in geographic size to the states of Delaware and Rhode Island combined. The population of Mendocino County is 89,009.<sup>2</sup> Ukiah, the County Seat of Government, is the largest city in the County, with a population of 16,296. Fort Bragg, the primary population center on the coast, has a population of 7,478. Approximately 15% of Mendocino County residents reside in one of the County's four federally-designated Frontier Communities, which are communities with a population density of 6 or fewer people/square mile. Mendocino County's population is 66% White, 24% Hispanic, 6% Native American, and 4% bi-racial or other ethnicities and includes 10 Native American Indian rancherias. However, the ethnic profiles of Mendocino County's public schools—where, on average, 43% of students are Hispanic and 44% are White—illustrates the changing demographics of the County.

Mendocino County's scenic beauty contrasts sharply with a depressed economy and associated high levels of poverty. The median household income in Mendocino County is \$46,528, just 69% of the statewide median of \$67,169, and 16% of families live below the federal poverty level, compared to 11% of families Statewide (American Community Survey, February 2019 update). And, like the rest of California, Mendocino County has a shortage of rental units affordable and available to those most vulnerable to losing their housing—e.g., households with extremely low-incomes, which are those at or below the poverty guideline or 30% of their area median income. Many of these households are severely cost burdened, spending more than half of their income on housing. They are thus more likely than other renters to experience unstable housing situations like evictions. Not surprisingly, areas of high poverty and a high share of rentals are associated with higher rates of homelessness. Right now in California there are 22 units available and affordable for every 100 households with extremely low incomes (NY Times 1/14/2020).

While a number of factors heighten the risk of homelessness, **poverty, leading to the inability to pay for housing, is the single greatest risk factor for homelessness.**<sup>3</sup> These factors include being African American, a member of an immigrant community, a new mother, Native American, LGBTI, having a history of incarceration, mental health or substance use problems, adverse childhood experiences, social isolation, experiencing interpersonal violence, low wage work, chronic health problems, a prior history of homelessness, and spending >50% household income on rent. The association between poverty and homelessness holds true in Mendocino County where, according to the Homelessness Needs Assessment and Action Steps for Mendocino County prepared in March 2018 by Dr. Robert Marbut ("Homeless Assessment"),

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<sup>2</sup> California Department of Finance estimates for January 2019.

<sup>3</sup> Margot Kushel, MD., Professor of Medicine, UCSF, Center for Vulnerable Populations. Presentation at Kaiser Permanente, October 18, 2018.

the majority of the County's homeless (61%) were living in Mendocino County, a high-poverty county, when they became homeless.

Nationally, the demographics of homelessness are changing as the baby boomer generation ages. Whereas in the early 1990s, 11% of single adults experiencing homelessness were aged 50 and over, by 2003, this rate had increased to 37%. Currently, approximately half of single adults who are homeless nationally are aged 50 and older.<sup>4</sup> In Mendocino County, according to the Homeless Assessment, the median age for individuals experiencing homelessness is 46, which means that half of the homeless in Mendocino County are over 46 years of age—slightly younger median of 50 years of age. Nationally, approximately half of those who are homeless and aged 50 and older had their first ever experience of homelessness after the age of 50. In comparison, the median age an individual starts experiencing street-level homelessness in Mendocino County (or before moving to Mendocino County) is 41 years of age, again younger than the national median. The aging of the unsheltered population has critical policy implications because adults in their 50s and 60s who are homeless experience premature aging, having the health characteristics of people 20 years older.

### Counting Mendocino County's Homeless Population

[This explanation of the following point-in-time count is from the website of the National Alliance to End Homelessness (<https://endhomelessness.org/resource/what-is-a-point-in-time-count/>).]

The U.S. Department of Housing and Urban Development (HUD) requires that communities receiving federal funds from the McKinney-Vento Homeless Assistance Grants program conduct a count of all people experiencing homelessness in the last week of January annually. Electronic administrative records are used to enumerate people living on the streets and in emergency shelters and transitional housing. In an unsheltered counting effort, outreach workers and volunteers are organized to canvas Homeless Continuum of Care to enumerate the people who appear to be living in places not meant for human habitation.

During these point-in-time counts, communities are required to identify whether a person is an individual, a member of a family unit, or an unaccompanied youth under the age of 18 or age 18 to 24. In addition, communities must identify if a person is chronically homeless, indicating long-time or repeated homelessness, and the presence of a disability.

### Why do we Count?

Point-in-time counts are important because they establish the dimensions of the problem of homelessness and help policymakers and program administrators track progress toward the goal of ending homelessness. The first of these counts was conducted in January 2005. Although the counting methodology has changed several times since then, we nevertheless

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<sup>4</sup> Margot Kushel, MD., Homelessness in older adults: Causes, consequences, & prevention, September 27, 2018. UCSF Center for Vulnerable Populations.

have data for Mendocino County's CoC for the last 15 years. Collecting data on homelessness and tracking progress can inform public opinion, increase public awareness, and attract resources to address the problem.

HUD uses information from the local point-in-time counts, among other data sources, in the congressionally-mandated Annual Homeless Assessment Report to Congress (AHAR). This report is meant to inform Congress about the number of people experiencing homelessness in the U.S. and the effectiveness of HUD's programs and policies in decreasing those numbers.

On the local level, point-in-time counts help communities plan services and programs to appropriately address local needs, measure progress in decreasing homelessness, and identify strengths and gaps in a community's current homelessness assistance system.

The point-in-time counts are not without limitations. There is variation in count methodology year-to-year within and across communities. Unsheltered counts have more limitations than sheltered counts. Thus, there is more variation in the methodology used to arrive at unsheltered counts. Point-in-time counts are, however, the only annual measure that enumerates people experiencing unsheltered homelessness in addition to those who are sheltered. (The U.S. Census strives to include people who are unsheltered in its once per decade census count.) And, despite its flaws, the annual point-in-time counts result in the most reliable estimate of people experiencing homelessness that we have and from which progress can be measured.

#### Counting Youth

One gap that exists in these point-in-time counts is the coverage of unaccompanied youth (or those living separately from any family members) under the age of 25. Despite the fact that point-in-time counts are required to collect the number of unaccompanied youth under the age of 18, those numbers do not appear accurate, with many CoCs reporting that there are zero unaccompanied youth in their communities. Youth may be afraid or unwilling to enter individual shelters, and communities typically have scarce resources, beds, and units dedicated to youth. Moreover, unaccompanied youth are often not engaged with traditional homelessness assistance programs and congregate in different areas than older individuals experiencing homelessness. This means that, in most communities, the required count of sheltered youth is more likely a count of beds available to youth as opposed to the number of youth who need shelter. Without adequate coverage of homeless youth in point-in-time counts, there is a danger that they will continue to be underserved.

Children and youth living with their parent(s) in vehicles are also difficult to count accurately. For example, the point-in-time count attempts to count families who sleep in vehicles. But many families sleeping in vehicles do not park overnight where there are other people sleeping in vehicles because of safety concerns for children. Thus, many may be missed in the count. However, children and youth who are unsheltered but enrolled in school are counted by Mendocino County Office of Education's Foster and Homeless Youth Services (FHYS) program. The definition of homeless children and youth that FHYS uses is from the McKinney-Vento Homeless Assistance Act, which ensures educational rights and protections for children and

youth experiencing homelessness. Homeless children and youth are those who lack a fixed, regular, and adequate nighttime residence. This definition also includes:

- Children and youth who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason.
- Children who may be living in motels, hotels, trailer parks, shelters, or awaiting foster care placement.
- Children and youth who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings.
- Children and youth who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.
- Migratory children who qualify as homeless because they are children who are living in similar circumstances listed above.

According to FHYS, there were 1,058 children and youth in 2019 in Mendocino County who met the McKinney-Vento definition of homelessness. The highest rate of child and youth homelessness is in Round Valley where 41% of children and youth were homeless in 2019.

#### Mendocino County's Point in Time Counts

Following are results from Mendocino County's point-in-time counts for the past four years, with the exception of the count of homeless veterans, which includes a column for the point-in-time count from 2011. This table indicates a steep decline in the numbers of unsheltered veterans. This is a result of the Veterans Administration's commitment to applying Housing First principles to caring for homeless veterans.

#### TOTAL POPULATION PIT COUNT DATA

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count	<b>1242</b>	<b>1238</b>	<b>880</b>	<b>785</b>
Emergency Shelter Total	117	113	94	80
Safe Haven Total	0	0	0	0
Transitional Housing Total	75	47	63	167*
Total Sheltered Count	<b>192</b>	<b>160</b>	<b>157</b>	<b>247</b>
Total Unsheltered Count	<b>1050</b>	<b>1078</b>	<b>723</b>	<b>538</b>

\* FEMA HOUSING BROUGHT TO THE COUNTY FOLLOWING 2017 WILDFIRES ACCOUNTS FOR THE STEEP INCREASE IN TRANSITIONAL HOUSING UNITS.

#### CHRONICALLY HOMELESS PIT COUNTS

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of Chronically Homeless Persons	<b>177</b>	<b>97</b>	<b>96</b>	<b>123</b>
Sheltered Count of Chronically Homeless Persons	76	38	43	48
Unsheltered Count of Chronically Homeless Persons	101	59	53	75

### HOMELESS HOUSEHOLDS WITH CHILDREN PIT COUNTS

	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the Number of Homeless Households with Children	<b>35</b>	<b>22</b>	<b>14</b>	<b>39</b>
Sheltered Count of Homeless Households with Children	16	18	14	36
Unsheltered Count of Homeless Households with Children	19	4	0	3

### HOMELESS VETERANS PIT COUNTS

	2011	2016 PIT	2017 PIT	2018 PIT	2019 PIT
Total Sheltered and Unsheltered Count of the No. of Homeless Veterans	<b>92</b>	<b>19</b>	<b>24</b>	<b>12</b>	<b>16</b>
Sheltered Count of Homeless Veterans	18	5	11	6	7
Unsheltered Count of Homeless Veterans	74	14	13	6	9

Another estimate of the homeless population in Mendocino County comes from the Homeless Assessment of 2018. The Homeless Assessment does not claim to provide a definitive count of the homeless population countywide, as the PIT count does. Rather, Dr. Marbut focused his work in and around those cities of Ukiah, Fort Bragg, and Willits because most of the individuals experiencing homelessness in Mendocino County are geographically located within and near those areas.

### MENDOCINO COUNTY HOMELESS ASSESSMENT COUNTS

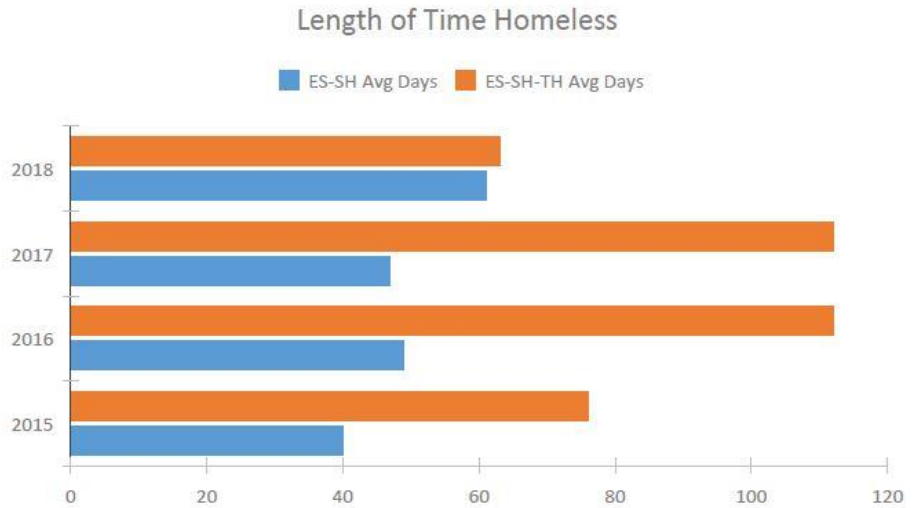
	Ukiah (including perimeter)	Willits	Fort Bragg (including perimeter)
Total Homeless in Programming	<b>198-225</b>	<b>20-26</b>	<b>96-160</b>
Individuals in 24/7 Homelessness Programming	106	n/a	49
Individuals Experiencing Street-Level Homelessness	92-119	n/a	47-64

### How Long are People Homeless?

According to the Homeless Assessment, on average, in 2018, 78% of people interviewed had been homeless for one or more years. Of those, just over half (51%) had been homeless 1-5 years, which is strikingly high and worthy of notice because the rate of successful recovery from homelessness starts dropping after one year, and then precipitously drops after two to three years (Marbut, p. 19). When the length of time one is living on the streets is shortened, people are safer and more people can use limited resources.



In terms of how effective homeless systems of care are at getting people into permanent housing situations, HUD measures how quickly people move into permanent housing situations after entering a homeless system of care. This performance measure is called *Length of Time Homeless* and is

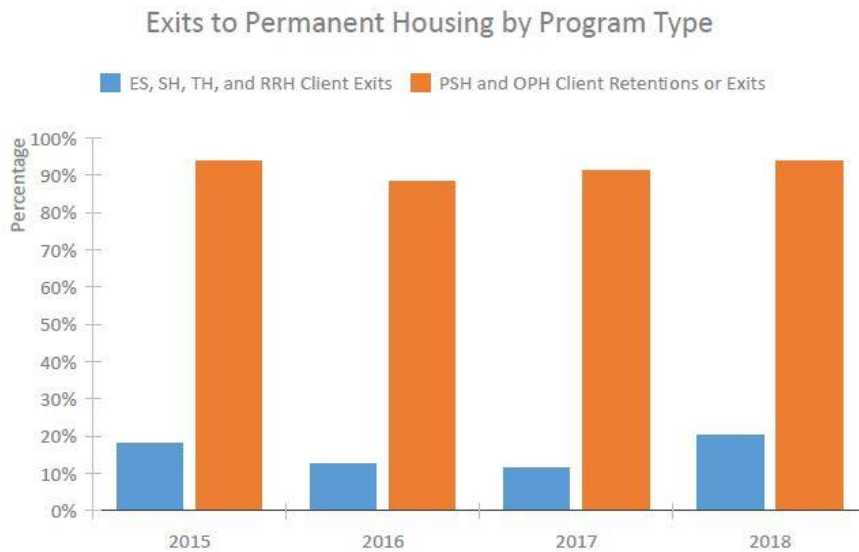


measured by calculating the average length of time people remain in emergency shelters (ES) or Safe Havens (SH, though there are none in Mendocino County) before moving on to permanent housing—the blue bar. HUD is also interested in measuring the average length of time people remain in emergency shelters, Safe Havens, and transitional housing before moving on to permanent housing—the orange bar. The HUD “length of time homeless” performance measure does not currently include the amount of time people spend living on the streets prior to entering the homeless system of care, but eventually street-level data will be included.

#### How Many People Are Getting Housed, and How Many Become Homeless Again?

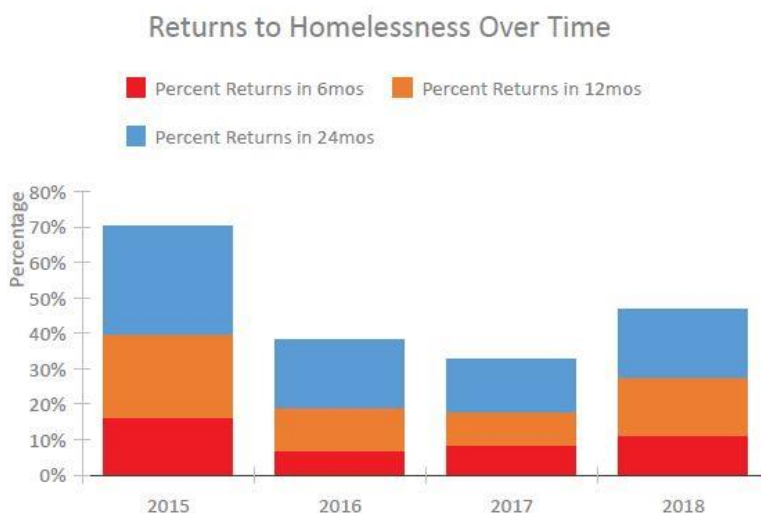
The adjacent graph, *Exits to Permanent Housing by Program Type*, conveys two distinct pieces of information. First,

the blue bar indicates that, in all years shown, no more than 20% of people who entered the homeless system exited to permanent housing. The data include people who entered into emergency shelters (ES), Safe Havens (SH, none of which exist in Mendocino County), transitional housing (TH), or received rapid re-housing funds.



The orange bar indicates that an average of 90% of those who were in permanent supportive housing (PSH) or other permanent housing (OPH) in each of the years shown retained their housing, a positive demonstration of stability for clients once in permanent housing.

The percentages of people who entered the homeless system of care, exited the homeless system of care, and then re-entered the system again—within six months, 12 months, and 24 months—from 2015 – 2018 are shown in the table below. This is a key measure of how effective Mendocino County’s homeless system of care is at reducing overall homelessness.



### III. THE RESOURCES AVAILABLE TO ADDRESS HOMELESSNESS IN MENDOCINO COUNTY

The resources available to address the unsheltered population of Mendocino County include housing and services. But it is important to understand that people access these resources within a **system of care [NAME!]**. All service providers that participate in the system of care have agreed to use a Coordinated Entry System (CES) to facilitate the coordination and management of resources that comprise the crisis response system in the County. The CES allows service providers to efficiently and effectively connect people to interventions that aim to rapidly resolve their housing crisis. And reciprocally, the CES connects the most vulnerable persons in the community to available housing and supportive services equitably. The following graphic depicts how people in Mendocino County who are unsheltered move through Mendocino County’s homeless system Continuum of Care [NAME!] and access housing and services.

# MENDOCINO COUNTY HOMELESS SERVICE SYSTEM

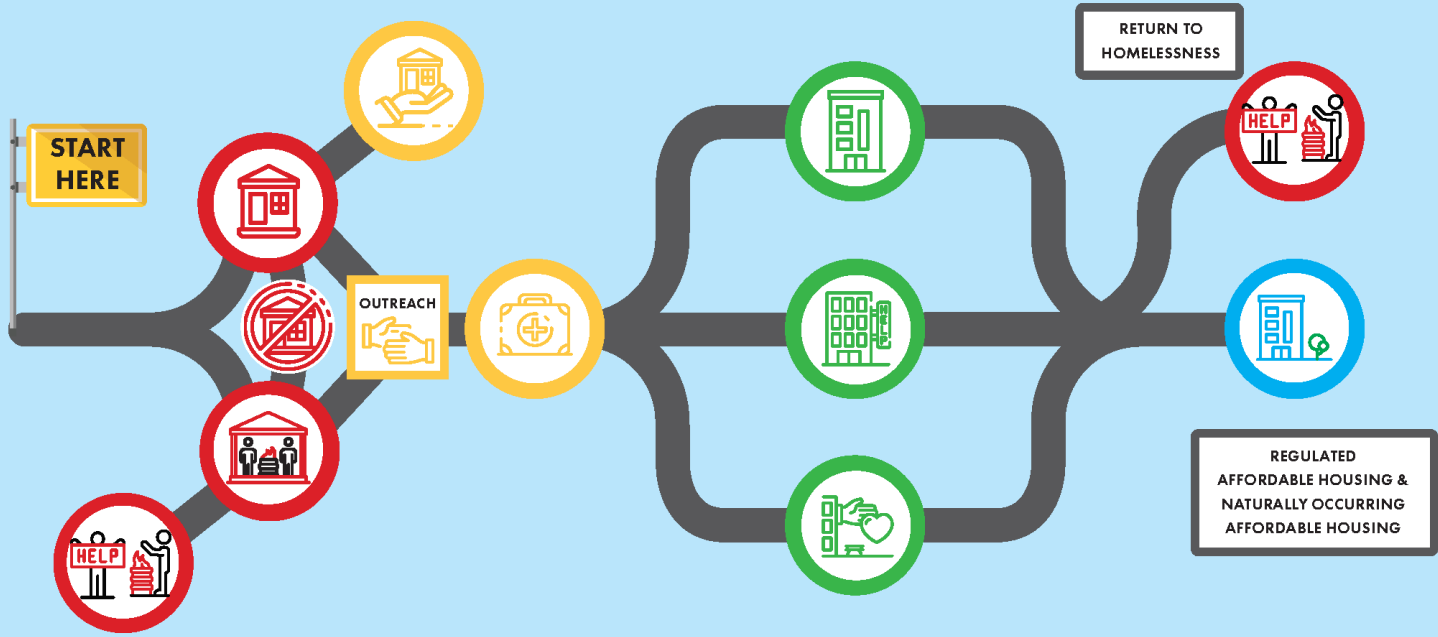
**LEGEND**

**Populations:**

- Family
- Individual
- Youth
- Veteran
- Domestic Violence Provider

**Housing Types:**

- Permanent Housing
- Transitional Housing
- Emergency Shelter
- Coordinated Entry



- DENIED SHELTER ENTRY OR EXITED
- ALTERNATIVE TO SHELTER OPTIONS
- EMERGENCY SHELTER  
50 year round beds

- COORDINATED ENTRY (CE) FRONT DOOR TRIAGE
- DIVERSION

- PERMANENT SUPPORTIVE HOUSING  
281 units
- RAPID RE-HOUSING  
20 Units
- TRANSITIONAL HOUSING  
226 Beds

The table that follows is an inventory of the homeless assistance resources—including both housing and supportive services—referenced in the graphic above that are available to the unsheltered population of Mendocino County. The table divides the resources into those available countywide and in the Ukiah, North County, and coast geographic regions.

## COUNTYWIDE RESOURCES

AGENCY/PROGRAM	SERVICE
<b>COMMUNITY DEVELOPMENT COMMISSION</b>	<ul style="list-style-type: none"> <li>• Rental subsidies (Permanent supportive housing)</li> <li>• HUD-VASH subsidies</li> <li>• Housing Choice Voucher Program</li> <li>• Project-based Voucher Program</li> <li>• Family Unification Program</li> <li>• Mainstream Voucher Program</li> </ul>
<b>LEGAL SERVICES OF NORTHERN CALIFORNIA</b>	<ul style="list-style-type: none"> <li>• Housing rights and public benefits issues</li> </ul>
<b>MENDOCINO COMMUNITY HEALTH CLINIC (TWO SITES: UKIAH, WILLITS)</b>	<ul style="list-style-type: none"> <li>• Medical services: Women’s health, Dental care, Mental health care, Substance abuse/opiate treatment services, and transportation services for the homeless in Ukiah</li> </ul>
<b>CONSOLIDATED TRIBAL HEALTH</b>	<ul style="list-style-type: none"> <li>• Medical services</li> </ul>
<b>MENDOCINO COUNTY AIDS/VIRAL HEPATITIS CARE &amp; PREVENTION NETWORK (MCAVHN)</b>	<ul style="list-style-type: none"> <li>• Case management</li> <li>• Client advocacy</li> <li>• Client loans and grants</li> <li>• Client social and informational events</li> <li>• Food vouchers</li> <li>• Harm reduction information and products</li> <li>• Coordinated entry front door</li> <li>• Syringe exchange</li> <li>• Transportation assistance</li> </ul>
<b>MENDOCINO COUNTY HEALTH AND HUMAN SERVICES, SOCIAL SERVICES BRANCH</b>	<ul style="list-style-type: none"> <li>• Public benefits, including general assistance</li> <li>• CalWorks Housing Assistance for families with children</li> <li>• CalFresh (food stamps)</li> <li>• Employment Services</li> <li>• CalWorks (AFDC/TANF)</li> <li>• Housing and Disabilities Assistance Program (very limited)</li> </ul>
<b>MENDOCINO COUNTY HEALTH AND HUMAN SERVICES, MENTAL HEALTH BRANCH</b>	<ul style="list-style-type: none"> <li>• Long-term case management</li> <li>• Facilitation of transitional and permanent supportive housing (very limited)</li> </ul>
<b>MENDOCINO COUNTY HEALTH AND HUMAN SERVICES, PUBLIC HEALTH BRANCH</b>	<ul style="list-style-type: none"> <li>• HIV/HCV testing, education, and counseling</li> <li>• TB testing</li> <li>• WIC clinic</li> <li>• Immunizations</li> </ul>
<b>MENDOCINO COUNTY HEALTH AND HUMAN SERVICES, PUBLIC HEALTH BRANCH, DIVISION OF SUBSTANCE USE DISORDER TREATMENT</b>	<ul style="list-style-type: none"> <li>• Substance abuse prevention, intervention, and treatment</li> <li>• Prenatal substance use treatment</li> <li>• Drug court services</li> <li>• Jail diversion work</li> <li>• Methamphetamine specific treatment</li> </ul>

<b>MENDOCINO COUNTY YOUTH PROJECT</b>	<ul style="list-style-type: none"> <li>• Mental health services for children/youth (0-21 years) and their families</li> <li>• Street outreach</li> <li>• Crisis intervention</li> <li>• Respite homes for homeless youth &lt;18 years</li> <li>• Transitional housing for homeless youth 18-21 years</li> </ul>
<b>PROJECT SANCTUARY (UKIAH, WILLITS, AND FORT BRAGG)</b>	<ul style="list-style-type: none"> <li>• Domestic violence safe house—men and women’s shelter (shelter provided to homeless women and children who are not victims of domestic violence if space available)</li> <li>• Support groups and one-to-one counseling</li> <li>• Paralegal assistance</li> <li>• Violence prevention education for all ages</li> <li>• Self-defense classes</li> <li>• Motel vouchers (available to men on a limited basis)</li> <li>• Transitional housing</li> </ul>
<b>NORTH COAST OPPORTUNITIES</b>	<ul style="list-style-type: none"> <li>• Rural Communities Child Care</li> <li>• Head Start</li> <li>• Nutrition Education</li> </ul>
<b>RURAL COMMUNITIES HOUSING DEVELOPMENT CORPORATION</b>	<ul style="list-style-type: none"> <li>• Sweat-equity housing for families</li> <li>• Subsidized housing for seniors and families</li> <li>• Permanent housing with support for people with Seriously Mentally Illness</li> </ul>

## UKIAH AREA RESOURCES

<b>AGENCY/PROGRAM</b>	<b>SERVICE</b>
<b>FORD STREET PROJECT</b>	<ul style="list-style-type: none"> <li>• Ukiah Food Bank</li> <li>• Transitional housing</li> <li>• Permanent housing</li> <li>• Sober living environment</li> <li>• Detoxification services</li> <li>• Substance use disorder education and treatment</li> <li>• Intensive outpatient treatment</li> <li>• Case management</li> <li>• Employment and training program</li> </ul>
<b>PLOWSHARES</b>	<ul style="list-style-type: none"> <li>• Hot lunches</li> <li>• Mail, phone messages, and information and referral services</li> </ul>
<b>REDWOOD COMMUNITY SERVICES</b>	<ul style="list-style-type: none"> <li>• Building Bridges winter shelter (48 beds)</li> <li>• Laundry and showers</li> <li>• Coordinated entry front door</li> <li>• Emergency Shelter</li> <li>• Case Management</li> <li>• Rapid Rehousing</li> </ul>

## NORTH COUNTY RESOURCES

<b>AGENCY/PROGRAM</b>	<b>SERVICE</b>
<b>WILLITS COMMUNITY SERVICES</b>	<ul style="list-style-type: none"> <li>• Emergency food and shelter</li> </ul>

	<ul style="list-style-type: none"> <li>• Food bank twice/month supplemental groceries</li> <li>• Client telephone access</li> <li>• Referral to other homeless services</li> <li>• Utility assistance</li> </ul>
<b>BROWN BAG LUNCH PROGRAM (WILLITS CITY PARK)</b>	<ul style="list-style-type: none"> <li>• Saturday lunch</li> </ul>
<b>HARVEST TABLE (ASSEMBLY OF GOD, LAYTONVILLE)</b>	<ul style="list-style-type: none"> <li>• Thursday dinner</li> </ul>
<b>WILLITS DAILY BREAD</b>	<ul style="list-style-type: none"> <li>• Hot meal four afternoons per week</li> </ul>
<b>COVELO FOOD PANTRY</b>	<ul style="list-style-type: none"> <li>• Once/month supplemental groceries</li> </ul>
<b>LEGGETT FOOD BANK</b>	<ul style="list-style-type: none"> <li>• Once/month supplemental groceries</li> </ul>

## COAST RESOURCES

AGENCY/PROGRAM	SERVICE
<b>MENDOCINO COAST HOSPITALITY CENTER</b>	<ul style="list-style-type: none"> <li>• Hospitality House (24-person shelter for families, men, and women)</li> <li>• Hospitality Center (Wellness programs for people with mental health challenges, homeless resources, and vocation programs)</li> <li>• Vocational jobs training program</li> <li>• Hospitality North (transitional housing (14 beds) for people with mental illness and/or people with children under 18 years of age; transitional housing (14 beds) at 101 Franklin St. for single adults)</li> <li>• Hospitality Clinic (Adult mental health services for those with MediCal)</li> <li>• Winter shelter (A revolving site shelter hosted by participating faith communities on the coast throughout the winter season. Light meal available.)</li> <li>• Coast Street Medicine (Screening for anyone homeless or threatened by homelessness for medical and mental health issues; health education, connection with primary care providers at Mendocino Coast Clinics; and basic health procedures)</li> </ul>
<b>MENDOCINO COAST CLINIC</b>	<ul style="list-style-type: none"> <li>• Primary and mental health care</li> </ul>
<b>GLEANINGS (OUR LADY OF GOOD COUNSEL CHURCH)</b>	<ul style="list-style-type: none"> <li>• Monday and Wednesday lunch</li> </ul>
<b>FIRST BAPTIST CHURCH</b>	<ul style="list-style-type: none"> <li>• Friday lunch</li> </ul>
<b>FORT BRAGG FOOD BANK (MENDOCINO FOOD AND NUTRITION)</b>	<ul style="list-style-type: none"> <li>• Assistance with food Monday, Wednesday, and Fridays</li> <li>• Emergency food</li> </ul>
<b>LIGHTHOUSE FOURSQUARE GOSPEL CHURCH</b>	<ul style="list-style-type: none"> <li>• Sunday Lunch</li> <li>• Tuesday and Thursday lunch</li> </ul>
<b>MENDOCINO PRESBYTERIAN CHURCH</b>	<ul style="list-style-type: none"> <li>• Tuesday brunch</li> <li>• Tuesday shower program</li> <li>• Dinner last Wednesday of the month</li> </ul>
<b>SAFE PASSAGE FAMILY RESOURCE CENTER</b>	<ul style="list-style-type: none"> <li>• Family services</li> <li>• Housing referrals</li> <li>• Family homeless prevention services and referrals to Mendocino Coast Hospitality Center</li> </ul>
<b>REDWOOD COAST SENIOR CENTER</b>	<ul style="list-style-type: none"> <li>• Meals to seniors who are not sheltered</li> <li>• Referrals to services</li> </ul>

The housing and supportive services available to the unsheltered population of Mendocino County are funded by local fundraising, volunteers, as well as competitive grants and allocations from the State and federal governments. The following table lists the funding that is currently coming into Mendocino County for homeless or homeless-related services.

The table is divided into two main sections. The first section lists grants (allocations and competitive grant awards) awarded to Mendocino County Health and Human Services Agency's (HHSA) three branches—Social Services (yellow), Public Health (blue), and Behavioral Health (green). The second section (beige) lists grants that have been allocated to Mendocino County's Homeless Continuum of Care from the U.S. Department of Housing and Urban Development (HUD) via the County. Funding received by Mendocino County HHSA and the MCHSCoC are allocated by the Boards established to oversee each entity. Prior to federal legislation that passed in 2016, local CoC's did not have the authority to determine how federal funds to serve the homeless are allocated, with the exception of the Emergency Solutions Grant. MCHSCoC is establishing policies and procedures to ensure the integrity and effective of the funding allocation process.

The purpose of this Strategic Plan is to use *all* the funds coming into the County to address homelessness (whether granted to the County, the CoC, or an individual organization or agency) as efficiently and effectively as possible through coordination, cooperation, and agreed-upon goals and strategies.

**NOTE: The funding awards listed in the following tables span multiple funding periods. Additionally, some funds come from time-limited grants while others are noncompetitive allocations. Thus, totaling the grant amounts to determine annual countywide funding to address homelessness would be misleading.**

# Housing Programs and Homeless Services

## County of Mendocino HHSa - Applicant and Provider of Funds



Funding Source		Recipient of Funds	FY 19-20 Funded	FY 20-21 Planned	Target Population and Services
Social Services (SS)	Mendocino County General Assistance	Mendocino Coast Hospitality Center	\$ 139,697	\$ 139,697	Shelter Services in Fort Bragg and Coastal Region
			\$ 66,516	\$ 66,516	Emergency Winter Shelter
		Redwood Community Services	\$ 152,000	\$ 152,000	Inland Shelter and Day Resource Center
		Plowshares Peace and Justice Center	\$ 5,000	\$ 5,000	Meals for individuals experiencing homelessness
		Willits Community Services	\$ 31,570	\$ 31,570	Screenings for homelessness related services, hotel vouchers and emergency winter shelter
		Willits Daily Bread	\$ 4,500	\$ 4,500	Meals for individuals experiencing homelessness
	CalWORKs Homeless Assistance Program	Mendocino County HHSa	\$ 141,835	\$ 214,008	Temporary Housing Assistance or deposits for Permanent Housing
	CalWORKs Housing Support Program	Mendocino County HHSa	\$ 221,920	\$ 249,360	Housing Subsidies for families enrolled in CalWORKs
		Redwood Community Services	\$ 121,080	\$ 121,080	Housing navigation expertise to develop and secure transitional and permanent housing solutions
	Adult Protective Services- Home Safe Program	Mendocino County HHSa	\$ 72,139	\$ 72,139	Housing support for vulnerable seniors
Housing and Disabilities Program - HDAP	Mendocino County HHSa	\$ 143,848	\$ 143,848	Housing support for individuals who have pending SSI benefits	
Partnership HealthPlan of California - Local Innovation Grants on Housing	Mendocino County HHSa with Rural Communities Housing Development Corporation (RCHDC)	\$ 580,900	\$ -	Capital investment for Phase I of Orr Creek Commons. (BOS approved MOU with RCHDC outlining expectations on Sep 10, 2019)	
	FIRST 5 Mendocino	\$ 17,250	\$ 20,254	Rapid Rehousing for families	
Homeless Housing, Assistance and Prevention Program (HHAP)	Mendocino County HHSa	\$ -	\$ 172,078	Operating subsidies and reserves, landlord incentives, outreach and coordination, prevention and shelter diversion to permanent	
		\$862,691.53 through Fiscal Year 24-25			
CA Governor's COVID-19 Emergency Funding	Mendocino County HHSa	\$ 140,748	\$ -	Emergency Funding to support efforts related to COVID-19 to serve persons experiencing homelessness	



# Housing Programs and Homeless Services

## County of Mendocino HHSa - Applicant and Provider of Funds



Funding Source		Recipient of Funds	FY 19-20 Funded	FY 20-21 Planned	Target Population and Services
Behavioral Health and Recovery Services (BHRS)	Finding Home, Grants for the Benefit of Homeless Individuals (SAMHSA GBHI)	Redwood Community Services	\$ 282,475	\$ 120,282	Intensive care management for individuals with co-occurring mental health and substance use disorders who are experiencing homelessness
		Mendocino Coast Hospitality Center	\$ 99,568	\$ 43,918	
		Ford Street Project	\$ 42,504	\$ 25,944	
	Mental Health Block Grant	Mendocino Coast Hospitality Center	\$ 67,239	\$ 67,239	Vocational services on the Coast for severely mentally ill clients experiencing homelessness
	Projects for Assistance in Transition from Homelessness (PATH)	Mendocino Coast Hospitality Center	\$ 18,202	\$ 18,202	Services for severely mentally ill clients who are residents of the Homeless Shelter or Transitional Housing Apartments
	No Place Like Home (CA Dept of Housing and Community Development)	Competitive Allocation: HHSa submitted joint application with RCHDC on Jan 7, 2020	\$ 3,373,963	\$ -	Capital investment for Phase II of Orr Creek Commons
		Awards to be issued by June 2020			
		Noncompetitive Allocation: Mendocino County HHSa	\$ 1,719,462	\$ -	Permanent supportive rental housing for people living with a serious mental illness who are homeless or at risk of homelessness
	Technical Assistance: Mendocino County HHSa		\$ 75,000	\$ -	Assistance in the coordination and implementation of local homelessness plans

# Housing Programs and Homeless Services

## County of Mendocino HHS - Applicant and Provider of Funds



Funding Source		Recipient of Funds	FY 19-20 Funded	FY 20-21 Planned	Target Population and Services	
Public Health (PH)	Whole Person Care (CA Department of Health Care Services)  *Whole Person Care Figures are for Calendar Year 2019 and Calendar Year 2020. Whole Person Care Funding will end on 12/31/20.	Adventist Health Ukiah Valley	\$ 172,800	\$ 50,000	Benefits individuals with severe mental illness in need of case management and housing support	
		Manzanita	\$ -	\$ 36,000		
		Mendocino Coast Clinics	\$ 80,000	\$ 70,000		
		Mendocino Coast Hospitality Center	\$ -	\$ 36,000		
		Mendocino Community Health Clinic	\$ 80,000	\$ 70,000		
		Mendocino County AIDS/Viral Hepatitis Network (MCAVHN)	\$ -	\$ 36,000		
		Redwood Community Services	\$ -	\$ 79,000		
		Redwood Quality Management Company and their subcontracting agencies	\$ 1,687,000	\$ 1,315,300		
	Homeless Mentally Ill Outreach and Treatment Program (HMIOT)	Mendocino County HHS WPC Pilot		\$ 50,000	TBD	HHS is piloting street level mobile outreach/engagement teams (for individuals) experiencing homelessness with local law enforcement
				\$ 340,446	\$ 340,446	Supports 4 HHS employees, 2.75 FTE total (.5 Project Director, 1 Coordinator, 1 Data Analyst, .25 Fiscal Analyst)
One-Time Housing Support Funds for WPC Pilots (Dept of Health Care Services)	Mendocino County HHS WPC Pilot		\$ 200,000	\$ -	Spent for Whole Person Care	
			One-time funds			
One-Time IGT Funding	Mendocino County HHS WPC Pilot		\$ 1,200,000	In Process: 2019-2025. RFP to be issued by June	Long-term and short-term housing supports for individuals who are mentally ill and homeless or at risk of homelessness	
One-Time IGT Funding	Mendocino County AIDS/Viral Hepatitis Network (MCAVHN)		\$ 150,000	\$ 150,000	Services following guidelines of the CA Dept of Public Health's Syringe exchange program, including syringe exchange, education and counseling, and linkage to other necessary services, including those provided through Whole Person Care	
	Manzanita		\$ 160,000	\$ 100,000	Services in connection with the SMI Wellness Centers in Ukiah and Willits, including housing navigation	
Potential Funding	California Access to Housing Act	Trailerbill for Statewide funding of \$750,000,000			Will allow for capital projects, transitional supports and housing, as well as prevention services.	
	CalWORKs HSP to Purchase Housing Structures	Statewide funding of \$1,500,000			Counties may apply for purchase of structures to be released to CW HSP eligible households, not to exceed \$24,999	

## Housing Programs and Homeless Services

### Mendocino County Homeless Services Continuum of Care (MCHSCoC)

Funding Source	Recipient of Funds	Amount	Funding Status	Length	Target Population and Services
2019 Emergency Solutions Grant (ESG) Noncompetitive BOS	Redwood Community Services	\$ 65,532	Awarded	2020-2021	Rapid Rehousing and HMIS
	Mendocino Coast Hospitality Center	\$ 65,532			
2019 Emergency Solutions Grant (ESG) Competitive BOS	Redwood Community Services	\$ 150,000	Awarded	2020-2021	Sheltering and HMIS
	Mendocino Coast Hospitality Center	\$ 69,824			Rapid Rehousing and HMIS
2018 Emergency Solutions Grant (ESG) Disaster Relief Funding	Redwood Community Services	\$ 78,751	Pending	2019-2020	Rapid rehousing, homeless prevention, street outreach, sheltering, HMIS
	Mendocino Coast Hospitality Center				
California Emergency Solutions and Housing Program (CESH)	City of Fort Bragg	\$ 11,724	Round 1 Allocation	2019-2021	Assistance for non-locals experiencing homelessness to return to their home cities
	Community Development Commission	\$ 123,520	Round 1 Allocation	2019-2021	Prevention and stabilization services for current clients who are in danger of losing their housing and/or subsidy
	Ford Street Project	\$ 583,871	Round 1 and 2 Allocation	2019-2021	Support for Unity Village Family Housing and Shelter Diversion Program
	Mendocino Coast Hospitality Center	\$ 148,285	Round 1 and 2 Allocation	2019-2020	Support for the Field Outreach and Critical Time Intervention initiatives
	Redwood Community Services	\$ 384,613	Round 1 and 2 Allocation	2019-2021	Expand inland winter shelter to provide year-round services; Rapid Rehousing
	HMIS and CES system funds	\$ 98,916	Round 1 Allocation	2019-2023	Support for HMIS system
	Mendocino County HHSA	\$ 71,141	Round 1 and 2 Allocation	2019-2023	Admin support at 5%
Homeless Emergency Aid Program (HEAP)	City of Fort Bragg	\$ 3,000,000	Contracted Dec 2019 - Jun 2021	2019-2021	Capital for The Plateau housing development in Ft Bragg
	Mendocino Coast Hospitality Center	\$ 36,740	Contracted Apr 2019 - Mar 2020	2019-2021	Capital for facility repair
	Mendocino County Office of Education	\$ 135,000	Contracted Apr 2019 - Jun 2021	2019-2021	Meals for students experiencing homelessness
	Project Sanctuary	\$ 132,720	Contracted Apr 2019 - Jun 2021	2019-2021	Capital for multi-shower and laundry facility for shelter families
	Redwood Community Services	\$ 621,788	Contracted Mar 2019 - Dec 2020	2019-2021	Capital for Day Center and Homeless Shelter in Ukiah
	Rural Communities Housing Development Corporation (RCHDC)	\$ 983,415	Planned Jun 2019 - Dec 2022	2019-2021	Capital investment for Phase II of Orr Creek Commons housing development in Ukiah
Homeless Management Information Systems (HMIS) HUD	Mendocino County HHSA	\$ 150,000	Awarded	2019-2021	System to assist in shelter and services for individuals, identifying who are homeless or at risk of homelessness
Continuum of Care Funding (CoC) - HUD	Community Development Commission	\$ 1,479,283	Awarded	2019-2021	Permanent Supportive Housing Rental Assistance for the Chronically Homeless
		\$ 93,312	Awarded	2019-2021	Coordination of Coordinated Entry System
	Mendocino County HHSA	\$ 47,107	Awarded	2019-2021	Admin and Monitoring Support for the CoC
Homeless Housing, Assistance and Prevention Program (HHAP)	Mendocino County Homeless Services Continuum of Care (MCHSCoC)	\$ 924,734	Awarded	2020-2025	Rental assistance/rapid rehousing, operating subsidies and reserves, landlord incentives, outreach and coordination (including employment), prevention and shelter diversion to permanent housing
CA Governor's COVID-19 Emergency Funding	Mendocino County Homeless Services Continuum of Care (MCHSCoC)	\$ 140,748	Awarded	2020-2021	Emergency Funding to support efforts related to COVID-19 to serve persons experiencing homelessness

## IV. GOALS, STRATEGIES, AND ACTION STEPS

The goals, strategies, action steps delineated in this section were derived over the course of approximately four months by the Strategic Planning Committee (STRATEGIC PLANNING COMMITTEE) of the CoC governing board. Many of the recommendations from the Homeless Assessment are included as strategies here. In addition, the STRATEGIC PLANNING COMMITTEE benefitted from technical assistance provided by the Technical Assistance Collaborative through a grant from the Department of Housing and Community Development to improve the delivery of homelessness programs. The STRATEGIC PLANNING COMMITTEE was inspired by the All Home collaborative of Kings County, Washington in deciding on its overarching goals.

### Goal 1: Making Homelessness Rare

Making homelessness rare will require addressing the [causes of homelessness](#), which are myriad and institutional. A [2013 national study](#) found that community rates of homelessness are driven by rent increases in the housing market, the availability of a strong safety net, economy, demographics, and influx of people moving to a region. Working together with community advocates, providers and partners the CoC aims to align efforts toward prevention, increasing affordable housing, and supporting the expansion of pre-adjudication programs and sentencing alternatives to make homelessness RARE in Mendocino County.

<b>Goal 1: Make homelessness rare</b>				
#	Strategy	Action Steps	Person/Org. Responsible	Timeframe
1.1	Source new housing opportunities of all types whenever possible.	1.1.1 Identify new funding for development of housing for homeless 1.1.2 Review current housing projects and identify possible areas of expansion 1.1.3 Partner with local housing developers to reserve/fund units for households experiencing homelessness 1.1.4 Collaborate with CA State Agencies to identify state-owned properties available for short-term and long-term housing interventions (CA Governor Executive Order N-23-20—attached)	1.1.1 CoC Board members 1.1.2 Shelter & Solutions Cmte  1.1.3 Applicable agencies  1.1.4 Health and Human Services and Local Jurisdictions	Ongoing
1.2	Identify and support programs within the County that provide effective homelessness prevention services.	1.2.1 Survey all homeless service providers regarding formal and informal homeless prevention services provided 1.2.2 Review long-term outcomes of previous homeless prevention efforts and establish performance measurement goals 1.2.3 CoC to identify and adopt most effective intervention models 1.2.4 Include above model in Homeless Prevention processes and procedures 1.2.5 Develop, approve, and implement MCHSCoC homeless prevention (HP) policy and procedures, including inclusion in Coordinated Entry system	1.2.1 HSA w/Strategic Planning Cmte (STRATEGIC PLANNING COMMITTEE) 1.2.2 HMIS/Performance Measurement Cmte 1.2.3 CoC Board 1.2.4 Coordinated Entry (CE)/Discharge Planning Cmte 1.2.5 CoC Board	2020
1.3	Identify and support programs within the County that provide effective homelessness diversion services.	1.3.1 Survey all homeless service providers regarding formal and informal homeless diversion services provided 1.3.2 Review long-term outcomes of previous homeless diversion efforts and establish performance measurement goals	1.3.1 HSA w/Strategic Planning Cmte (STRATEGIC PLANNING COMMITTEE)	2020

<b>Goal 1: Make homelessness rare</b>				
<b>#</b>	<b>Strategy</b>	<b>Action Steps</b>	<b>Person/Org. Responsible</b>	<b>Timeframe</b>
		1.3.3 CoC to identify and adopt most effective intervention models 1.3.4 Include above model in homeless diversion processes and procedures 1.3.5 Develop, approve, and implement MCHSCoC homeless diversion policy and procedures, including inclusion in Coordinated Entry system	1.3.2 HMIS/Performance Measurement (PM) Cmte 1.3.3 CoC Board 1.3.4 Coordinated Entry (CE)/Discharge Planning Cmte 1.3.5 CoC Board	
1.4	Promote expansion of meaningful mental health and substance abuse treatment options to address housing barriers.	1.4.1 Support a continuum of Dual Diagnosis (Behavioral Health/SUDT) services & treatment programs 1.4.2 Promote & prioritize successful support services that prevent homelessness due to relapse & recidivism risks for clients with behavioral health and/or Substance Use issues 1.4.3 Promote & support effective Anti-Stigma, Trauma-informed community information, trainings & educational programs 1.4.4 Establish behavioral health/SUDT treatment efficacy measures 1.4.5 Develop and cross train providers (county wide) in timely referral, warm handoff protocols and resources for behavioral health & SUDT services	1.4.1 CoC/HHSA & NGOs  1.4.2 CoC/HHSA & NGOs  1.4.3 CoC with HHSA/NGSs/Mendocino College  1.4.4 HHSA and CoC 1.4.5 CoC with HHSA (includes Administrative Service Organization(s), contractors, and subcontractors)	2021
1.5	Review and evaluate overall system volume needs on a regular basis for continuous program improvement.	1.5.1 Conduct the annual Point In Time (PIT) and Housing Inventory Count (HIC) 1.5.2 Identify and collect data from sources outside the PIT/HIC that could inform the evaluation of overall system volume needs 1.5.3 Review and analyze data from 2020 PIT and HIC, and gathered from other sources 1.5.4 Report on findings in annual Housing Inventory Report	1.5.1 PIT/HIC ad hoc committee  1.5.2 HHSA  1.5.3 PIC/HIC Cmte  1.5.4 PIC/HIC Cmte	Ongoing

**HOW WE WILL KNOW IT WORKED**

*We will see a 5% annual decrease in the total number of homeless as measured by HUD's Longitudinal Systems Analysis (LSA).*

## GOAL 2: Making Homelessness Brief and One-Time

To make homelessness brief and one-time, funding and programs must be aligned to support the strengths and address the needs of people experiencing homelessness. Shortening the length of time families and individuals are homeless reduces trauma and also creates capacity in the crisis response system for others in need. Ensuring that those who to move to permanent housing do not become homeless again and return to our crisis response system also increases capacity of crisis services to serve more individuals.

<b>Goal 2: Make homelessness brief and one-time</b>				
#	Strategy	Action Steps	Person/Org. Responsible	Timeframe
2.1	Identify the most effective homelessness programs within the County, particularly those that provide emergency, transitional, and permanent housing to individuals experiencing homelessness, and provide support to expand services.	2.1.1 Gather outcomes of annual Housing Inventory Report. 2.1.2 Establish performance measurement goals for all types of projects 2.1.3 Add minimum outcome thresholds to grant rating and ranking criteria (for a project to be eligible for funds) 2.1.4 Create project evaluation processes to hold projects accountable	2.1.1 HHSA 2.1.2 Rating and Ranking Ad Hoc 2.1.3 Rating and Ranking Ad Hoc 2.1.4 CoC Board and STRATEGIC PLANNING COMMITTEE	2022
2.2	Increase utilization of resources already available in the system.	2.2.1 Recruit and hire a Landlord-Tenant Navigator focused on centralizing recruitment and retention of landlords. (New Position) 2.2.2 Internal Barriers Review: Review Barriers to Entry and Mobilization Through the System—to reduce steps and length of time from system access to housing. 2.2.3 Analyze and evaluate rapid re-housing resources to maximize effectiveness. 2.2.4 Review the utilization of resources and maximize (e.g. are all available beds being used?) 2.2.5 Increase awareness of coordinated entry access points and procedures.	2.2.1 CoC Board and/or collaborative applicant to identify agency/org. 2.2.2: Coordinated Entry Cmte 2.2.3 Shelter and Solutions Cmte 2.2.4 Coordinated Entry and HMIS Cmtes 2.2.5 Coordinated Entry and Shelter and Solutions Cmtes	2021
2.3	Create quicker and seamless movement through the homelessness system for all individuals and families experiencing homelessness (e.g., operating at maximum capacity by increasing utilization of the overall system).	2.3.1 Hire a Coordinated Entry manager (new position) 2.3.2 By-name list case conferencing 2.3.3 Formalize Practices and Referrals 2.3.4 Ensure all appropriate programs are using the CES 2.3.5 Establish system-wide service eligibility and triage criteria for allocating resources (w/emergency protocols)	2.3.1 CoC Board and/or collaborative applicant to identify agency/org. 2.3.2. CEDP cmte 2.3.3. HMIS/PM & CEDP cmtes 2.3.4. CoC Board & CE 2.3.5 HMIS/PM & CEDP cmtes	2021
2.4	Develop and Implement a Homeless Outreach Team.	2.4.1 Establish collaboration between County, Cities and law enforcement agencies regarding HOTEams in each region. 2.4.2 Identify strategies required to engage different cohort groups of unhoused persons in the most effective manner for that cohort.	Action Steps will be facilitated by HHSA in collaboration with local jurisdictions, law enforcement, and CoC members.	2022

<b>Goal 2: Make homelessness brief and one-time</b>				
<b>#</b>	<b>Strategy</b>	<b>Action Steps</b>	<b>Person/Org. Responsible</b>	<b>Timeframe</b>
		<p>2.4.3. Consider implementing a Homeless Multi-Disciplinary Personnel Team to provide collaborative case conferencing about individual homeless individuals with complex needs.</p> <p>2.4.3 The CoC shall encourage service providers to participate in and facilitate inter-jurisdictional training around street outreach efforts.</p>		
2.5	Fully build out and robustly use HMIS.	<p>2.5.1 Develop training curriculum for new HMIS end users</p> <p>2.5.2 Create ongoing training for HMIS end users and organization administrators</p> <p>2.5.3 Increase HMIS bed coverage rate by engaging homeless housing providers that are not participating in HMIS.</p>	All Action Steps will be done by HHSA's HMIS lead	2020
2.6	Establish low barrier and no-barrier shelter(s)—with uniform eligibility criteria across agencies—for families with children.	<p>2.6.1 Identify and select model for family shelter(s).</p> <p>2.6.2 Identify agency willing to apply for funding to operate a family shelter.</p> <p>2.6.3 Identify building or location—including State surplus lands—for the shelter to function with highest access to community supports and services/day shelter or access to housing navigator assisting with permanent housing.</p> <p>2.6.4 Agencies working with families commit to HMIS and countywide case management system for referring families and triaging needs.</p> <p>2.6.5 Career and Technical Education and childcare programs aligned with shelter for access for parents into work programs. Collaborate with CALWORKS and align requirements.</p>	<p>2.6.1 Shelter Solutions Cmte</p> <p>2.6.2 Shelter Solutions Cmte</p> <p>2.6.3 Homeless Housing Assistance &amp; Prevention (HHAP) program ad hoc</p> <p>2.6.4 HHSA (HMIS lead)</p> <p>2.6.5 Organization operating family shelter</p>	2020

**HOW WE WILL KNOW IT WORKED**

*We will see a 5% annual decrease per year in the length of time that people are homeless as measured by HUD's LSA.*

### GOAL 3: Improve community and policy maker engagement around homelessness

<b>Goal 3: Improve community and policy maker engagement around homelessness</b>				
#	Strategy	Action Steps	Person/Org. Responsible	Timeframe
3.1	Gain buy-in and agreement for one overarching strategic plan—with action steps.	3.1.1 Engage leadership in underserved areas of the County’s jurisdiction. 3.1.2 Use data (worldwide/national) on promising and evidence based practices to highlight successful strategies that can be used in our communities. 3.1.3 Provide informational presentations to policy making bodies, community agencies, and public on purpose, process and importance of having a consistent and coordinated approach to addressing homelessness. 3.1.4 Seek endorsement of Strategic Plan from entities within various jurisdictions.	All Action Steps will be done by Strategic Planning Committee	2020
3.2	Improve strategic coordination between the CoC, the County and cities.	3.2.1 Set up regular meeting between CoC and the BOS Ad-Hoc Committee on Homelessness 3.2.2 On all regular CoC agendas, there shall be a standing item for jurisdictional updates related to homelessness. 3.2.3 Members of the CoC shall engage local jurisdictions early in the development of capital projects.	3.2.1 Strategic Planning Committee 3.2.2 Strategic Planning Committee 3.2.3 HHSA	2020
3.3	Develop a community understanding of the scope, scale, and structure of the homelessness problem and need to use common nomenclature to improve decision making.	3.3.1 Form an Outreach and Public Relations team to prepare and make public presentations. 3.3.2 Create a press release once per year on PIT count and other homeless data. 3.3.3 The CoC shall make annual presentations to the governing body of each jurisdiction once each year to report on strategic plan progress and upcoming initiatives/projects. 3.3.4 Talk to local media about what is being addressed, the CoC’s challenges and limitations, what the public can do to help.	All Action Steps will be done by Strategic Planning Committee.	2022
3.4	Increase engagement of persons experiencing homelessness in planning, implementation and decision making for the CoC.	3.4.1 Conduct focus groups with people experiencing homelessness regarding service provider training and education. 3.4.2 Follow up with provider trainings as identified in focus groups. 3.4.3 Establish encampment engagement protocols. 3.4.4 Develop and implement a process to compensate or incentivize people who are currently or formerly shelterless to participate in the governance of the County’s homeless system of care. 3.4.5 Establish a ‘Client Council.’	3.4.1 Strategic Planning Committee 3.4.2 Strategic Planning Committee 3.4.3 CoC Board and HHSA 3.4.4 Membership Committee 3.4.5 Membership Committee	Ongoing

#### HOW WE WILL KNOW IT WORKED

*We will see increased engagement of residents as measured by increased attendance at CoC board and committee meetings.*  
*We will see increased engagement and leadership of business and faith leaders increased attendance at and/or joining the CoC board.*  
*We will see homeless services expanded to the outlying regions of the County, such as the South Coast and North County, including Covelo.*



**GOAL 4: Improve the CoC's capacity to govern itself.**

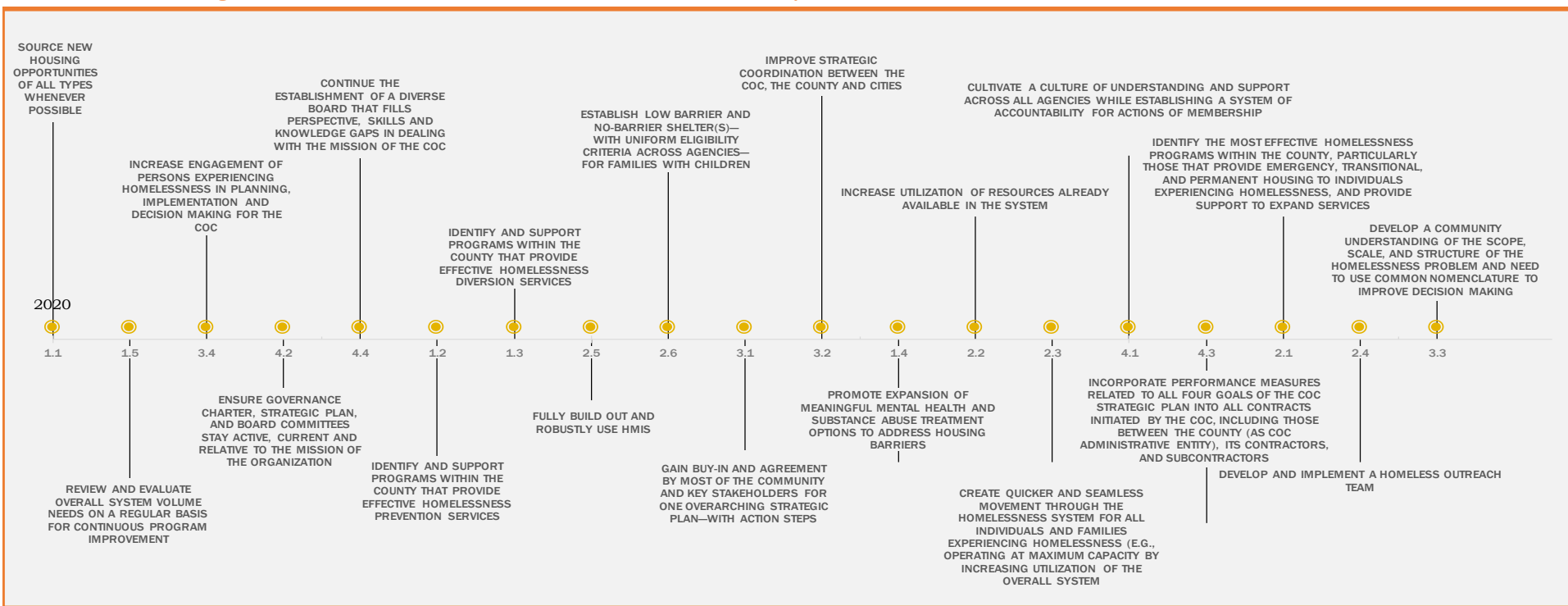
<b>Goal 4: Improve the CoC's capacity to govern itself</b>				
#	Strategy	Action Steps	Person/Org. Responsible	Timeframe
4.1	Cultivate a culture of understanding and support across all agencies while establishing a system of accountability for actions of membership.	4.1.1 Provide listening session with external and internal partners to identify and address the shortfalls of the current operations. 4.1.2 Establish an internal and external ethics policy with the ability to hold members accountable when policies are not followed. 4.1.3 Complete a presentation presenting what solutions each agency brings to help the CoC mission, to be used to educate other agencies and the public.	4.1.1 CoC Co-chairs and HHSA  4.1.2 HHSA  4.1.3 Membership Cmte	2021
4.2	Ensure governance charter, strategic plan, and board committees stay active, current and relative to the mission of the organization.	4.2.1 Increase monitoring activities, using the HUD provided CoC Monitoring Toolkit. 4.2.2 Develop check list of steps required annually to update or create new Strategic Plan and will be responsible for updating the plan on behalf of CoC Board. 4.2.3 Hold an annual CoC Day Away to revitalize CoC members' passion and dedication to homeless services. 4.2.4 Create and annually revise MCHSCoC Guide Book that includes: Mission and Vision Statements; Current Strategic Plan, Governance Charter and CoC Meeting Schedule; and list of current homeless services. 4.2.5 Define a review process that allows for review of the governance charter to make sure the charter stays current and relative to the issues at hand in relation to board seats.	4.4.1 HHSA  4.4.2 Strategic Planning Committee  4.4.3 CoC Board will host  4.4.4 CoC Membership Committee  4.2.5 Strategic Planning Committee	Ongoing
4.3	Incorporate performance measures related to all four goals of the Strategic Plan and all contracts initiated by the CoC, including those between the County (as CoC Administrative Entity), its Contractors, and Subcontractors.	4.3.1 Promote data-informed decisions and focus on system performance. 4.3.2 Agree on consistent contract language across all homeless service-related projects. 4.3.3 Use performance measures in contracts.	4.3.1 CoC Board 4.3.2 HHSA for County contracts & CoC Board for CoC contracts 4.3.3 HHSA and CoC	2021
4.4	Continue the establishment of a diverse board that fills perspective, skills and knowledge gaps in dealing with the mission of the CoC.	4.4.1 Conduct skills inventory for all board members to find the skills gap that may be needed by consultants or additional board seats. 4.4.2 CoC leadership will actively attend events to speak with leaders in the community to make sure that the local needs are being accomplished by the boards long term goals and objectives.	4.4.1 CoC Co-Chairs  4.4.3 CoC Co-Chairs	Ongoing

**HOW WE WILL KNOW IT WORKED**

*We will have effective and efficient governance at the CoC and within the homeless system infrastructure as measured by surveys conducted before and after listening sessions by whomever conducts listening session.*

*HHSA and CoC contracts all include measurable performance measures.*

## Timeline for Strategies to Address Homelessness in Mendocino County



DATE	STRATEGIES	POSITION
1.1	Source new housing opportunities of all types whenever possible	20
1.5	Review and evaluate overall system volume needs on a regular basis for continuous program improvement	-15
3.4	Increase engagement of persons experiencing homelessness in planning, implementation and decision making for the CoC	10
4.2	Ensure governance charter, strategic plan, and board committees stay active, current and relative to the mission of the organization	-10
4.4	Continue the establishment of a diverse board that fills perspective, skills and knowledge gaps in dealing with the mission of the COC	15
1.2	Identify and support programs within the County that provide effective homelessness prevention services	-10
1.3	Identify and support programs within the County that provide effective homelessness diversion services	5
2.5	Fully build out and robustly use HMIS	-5
2.6	Establish low barrier and no-barrier shelter(s)—with uniform eligibility criteria across agencies—for families with children	15
3.1	Gain buy-in and agreement by most of the community and key stakeholders for one overarching strategic plan—with action steps	-10
3.2	Improve strategic coordination between the CoC, the County and cities	20
1.4	Promote expansion of meaningful mental health and substance abuse treatment options to address housing barriers	-10
2.2	Increase utilization of resources already available in the system	10
2.3	Create quicker and seamless movement through the homelessness system for all individuals and families experiencing homelessness (e.g., operating at maximum capacity by increasing utilization of the overall system)	-10
4.1	Cultivate a culture of understanding and support across all agencies while establishing a system of accountability for actions of membership	15
4.3	Incorporate performance measures related to all four goals of the CoC Strategic Plan into all contracts initiated by the CoC, including those between the County (as CoC Administrative Entity), its Contractors, and Subcontractors	-15
2.1	Identify the most effective homelessness programs within the County, particularly those that provide emergency, transitional, and permanent housing to individuals experiencing homelessness, and provide support to expand services	10
2.4	Develop and Implement a Homeless Outreach Team	-10
3.3	Develop a community understanding of the scope, scale, and structure of the homelessness problem and need to use common nomenclature to improve decision making	5

EXECUTIVE DEPARTMENT  
STATE OF CALIFORNIA

EXECUTIVE ORDER N-23-20

**WHEREAS** California faces a severe housing crisis that has made housing unaffordable for too many Californians and, in turn, exacerbated the problem of homelessness; and

**WHEREAS** homelessness in California is not confined to urban corridors but is present in urban, suburban, and tribal and rural communities throughout the state; and

**WHEREAS** data released recently by the U.S. Department of Housing and Urban Development based on the 2019 Point-in-Time Count indicated that there were 151,278 individuals who were homeless in California, over 108,000 of whom were unsheltered, and that the homeless population has been steadily increasing; and

**WHEREAS** Californians driven into homelessness often develop significant health issues over time and, often experience significant morbidity and die sooner; and

**WHEREAS** it is estimated that a substantial proportion of individuals who are homeless experience chronic physical and mental health disorders, yet are not receiving regular and consistent medical or psychiatric care; and

**WHEREAS** California's homelessness crisis has put considerable stress on many public services including transportation, libraries, schools, health services and public safety, as well as created public health challenges; and

**WHEREAS** California's homelessness crisis has impacted certain business sectors throughout the state and is a top concern to many residents, businesses, communities, tribal governments, cities, and counties across the state; and

**WHEREAS** unauthorized encampments of people who are homeless are increasing in many areas of the state within the public right of way and near or on private or tribal property, resulting in traffic and fire hazards, crime, risk of injury and death, and other conditions detrimental to public health and safety, both for people who are homeless and people who are not; and

**WHEREAS** since 2018, almost 200 counties and cities have declared a shelter crisis, pursuant to Government Code section 8698 et seq.; and

**WHEREAS** over the past two years, the state has substantially increased its efforts to address street homelessness by providing more than \$2.7 billion in new funding, significantly increasing its support for safety net services, eliminating barriers to getting navigation centers and temporary housing built to allow homeless adults to receive services and stability in

order to find longer-term housing, enacting the most aggressive rent-gouging protections, launching a 100-Day Challenge Initiative to bring counties and cities together to more urgently address homelessness in their communities, and expediting funding allocations to local governments, including allocations to counties to reduce the number of families in the child welfare services system experiencing homelessness; and

**WHEREAS** solutions to homelessness require additional innovation, cooperation and urgency within the public sector, and among the public and private and tribal sectors; and

**WHEREAS** because reducing the population of homeless individuals in California is a matter of critical statewide importance, the state can and needs to do more to help local communities act with urgency to address street homelessness and the society-wide problems associated with the homelessness crisis.

**NOW, THEREFORE, I, GAVIN NEWSOM**, Governor of the State of California, by virtue of the power and authority vested in me by the Constitution and statutes of the State of California, do hereby issue this Order to reduce street homelessness, break down barriers to homeless individuals accessing health care and other critical services, and to increase housing options for those experiencing homelessness. This Order shall become effective immediately.

**IT IS HEREBY ORDERED THAT:**

1. All state agencies specifically referenced in this Order shall develop by no later than February 28, 2020 accountability metrics for state agencies and for local partners to assess the use of the state resources referenced in the following paragraphs and their impact on reducing street homelessness, breaking down barriers to homeless individuals accessing health care and other critical services, and increasing housing options for those experiencing homelessness. The metrics shall be published online and regularly updated. In carrying out this Order, state agencies shall consider the extent to which local partners regularly and publicly report data based on the local metrics.
2. The Department of Finance, pursuant to its authority under Government Code sections 11005, 11005.1, and 13306, shall immediately establish the California Access to Housing and Services Fund within the Department of Social Services, to receive future state appropriations, as well as donations from philanthropy and the private sector, and to provide much needed dollars for additional affordable housing units, providing rental and operating subsidies, and stabilizing board and care homes;
3. To rapidly increase housing options for those experiencing homelessness, the following actions shall occur by no later than January 31, 2020:

- a. The Department of General Services shall identify all properties from the digitized inventory of excess state land created by EO N-06-19 that can be used by local partners, including tribal governments, counties, cities, or non-profit agencies, on a short-term emergency basis to provide shelter for individuals who are homeless, so long as such usage will not delay affordable housing development on those properties.
  - b. The Department of General Services shall conduct an initial assessment of all state facilities to identify facilities that can be used by local partners on a short-term emergency basis to provide shelter for individuals who are homeless and in need of health and social services.
  - c. The Department of Transportation (Caltrans) shall develop and share a model lease template to allow counties and cities to use Caltrans property adjacent to highways or state roads in those jurisdictions on a short-term emergency basis to provide shelter for individuals who are homeless, building on recent partnerships with the cities of Los Angeles, San Jose, and San Francisco, and consistent with Streets & Highways Code section 104.30. Priority for future partnerships to make state land available to counties and cities for short-term emergency housing shall be given to jurisdictions where a shelter crisis declared pursuant to Government Code section 8698 et seq. is in effect.
  - d. The Office of Statewide Health Planning and Development shall work with local jurisdictions, tribal communities, and private entities to conduct an initial assessment of the appropriateness and availability of vacant and decommissioned hospitals and health care facilities for use by local partners on a short-term emergency basis to provide shelter for individuals who are homeless.
  - e. The Department of Food and Agriculture, in consultation with the Department of General Services, the Department of Housing and Community Development, the Department of Social Services, and the Office of Emergency Services, shall conduct an initial assessment of fairgrounds in or near jurisdictions where a shelter crisis is currently in effect, and, for those fairgrounds, determine the population capacity and space that would currently be available to local partners on a short-term emergency basis to provide shelter for individuals who are homeless.
4. The Department of General Services shall supply 100 travel trailers from the state fleet, and the Emergency Medical Services Authority shall supply complementary modular tent structures, to provide temporary emergency housing and the delivery of health and social services in communities across the state. The Department of General Services and the Emergency Medical Services Authority shall supply trailers and tents immediately and

end by September 30, 2020, unless the secretaries of the Government Operations Agency and the Health and Human Services Agency both concur on a case-by-case basis that the specific circumstances warrant the continued use of the trailers or tent structures. These trailers and tent structures shall only be used where the following criteria have been satisfied:

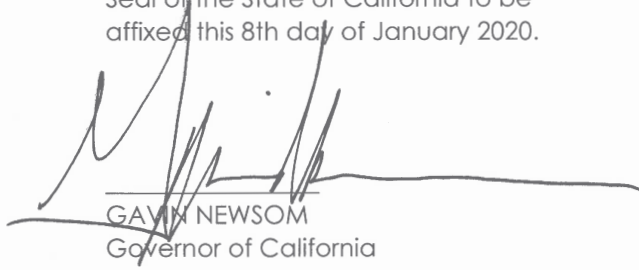
- a. A shelter crisis declared pursuant to Government Code section 8698 et seq. or its equivalent under the applicable laws governing the jurisdiction of a federally recognized tribe in California is in effect.
  - b. Local partners, including counties, cities, and non-profit agencies, have the capacity and resources to deploy, operate, secure, and maintain the trailers or tent structures.
  - c. Local partners make appropriate health, social, housing, and other appropriate services available to support the needs of individuals temporarily housed in the trailers or tent structures and transition them into permanent, safe and stable housing.
  - d. Local partners agree to regularly and publicly report data based on the accountability metrics referenced in paragraph 1.
5. To further assist local jurisdictions in addressing street homelessness, there shall be a multi-agency state strike team comprised of the Business, Consumer Services, and Housing Agency; the Government Operations Agency; the Health and Human Services Agency; the Labor and Workforce Development Agency; and the Transportation Agency. The strike team shall be coordinated by the Homeless Coordinating and Financing Council and provide technical assistance and targeted direct support to counties, cities, and public transit agencies seeking to bring individuals experiencing homelessness indoors and connect them with appropriate health, human, and social services and benefits.

**FURTHERMORE**, all counties, cities, public transit agencies, special districts, school districts, tribal governments, and non-governmental actors, including businesses, faith-based organizations, and other non-profit agencies, are requested to examine their own ability to provide shelter and house homeless individuals on a short-term emergency basis and coordinate with local authorities to provide shelter and house individuals.

**IT IS FURTHER ORDERED** that as soon as hereafter possible, this Order shall be filed with the Office of the Secretary of State and that widespread publicity and notice shall be given to this Order.

This Order is not intended to, and does not, create any rights or benefits, substantive or procedural, enforceable at law or in equity, against the State of California, its departments, agencies, or other entities, its officers or employees, or any other person.

**IN WITNESS WHEREOF** I have hereunto  
set my hand and caused the Great  
Seal of the State of California to be  
affixed this 8th day of January 2020.



\_\_\_\_\_  
GAVIN NEWSOM  
Governor of California

**ATTEST:**

\_\_\_\_\_  
ALEX PADILLA  
Secretary of State