



Staff Report

TO: Honorable Mayor and Members of the Town Council
FROM: Sean Rabé, Town Manager
DATE: May 10, 2022
RE: Placer Regional Homelessness Response Emerging Strategies Presentation

Recommendation

Hear presentation by MIG on the Placer County Regional Homelessness Task Force and provide comments to the consultant.

Issue Statement and Discussion

Last year, Placer County initiated the Placer Regional Homelessness Task Force to review current efforts regarding homelessness in South Placer. The focus of the project is to undertake a process to develop a regional strategic plan for homelessness. The project began with a series of research and stakeholder engagement activities to help identify gaps, issues, and opportunities, and to create a set of potential strategies to address homelessness in South Placer.

Additionally, the process involved a series of meetings with two working groups. The Ad Hoc Group that was comprised of two elected officials (Mayor Jenny Knisley and Mayor Pro Tem Danny Cartwright) from each city in South Placer and the Regional Working Group that consisted of staff from the same cities and selected organizations that work with the homeless community. I sat on the Working Group.

The two groups worked independently until a final meeting when the strategies developed, based on the discussions during these meetings, were presented to the Ad Hoc Group for their consideration.

Strategies for consideration arose from an issues and opportunities analysis and best practices research done in the first few months of the project, as well as from discussions among the stakeholders and Regional Working Group members. The resulting Placer Regional Homelessness Response Emerging Strategies Phase One Report (Attachment A) will be presented tonight by the consultant.

The consultant is now meeting with the City and Town Councils of the cities in South Placer to present the draft report and gain input and layout the proposed next phase of the project. Once the meetings have concluded, the consultant will present the draft report, including the insights and perspectives gained from the meetings with the City and Town Councils, to the Placer County Board of Supervisors for their direction regarding Phase 2 of the project.

The consultant will present the report and will be prepared to respond to any questions you may have.

CEQA Requirements

There are no CEQA implications associated with the recommended action.

Financial and/or Policy Implications

None at this time.

Attachments

- A. Placer Regional Homelessness Response Emerging Strategies Phase One Report



PLACER REGIONAL
HOMELESSNESS RESPONSE
EMERGING STRATEGIES

PHASE ONE REPORT

PLACER REGIONAL HOMELESSNESS RESPONSE EMERGING STRATEGIES

Phase One Report, March 2022

PREPARED BY



PREFACE

This document was prepared with the assistance of many people who care about those experiencing homelessness, and the impacts homelessness has on our community. We would like to acknowledge the professionals, volunteers and others who provided quantitative and qualitative data to inform this report of homelessness in mid and south Placer County.

A list of strategies to advance to the next phase of planning is presented in Section IV. The strategies listed in this document represent a base of ideas for additional analysis and testing, implementation considerations, and community and stakeholder input; they do not represent endorsement of the group of elected officials who took part in this process.

A next step will be to present these strategies to the public and listen and respond to their ideas and concerns. Doing so will better help process participants to develop a feasible set of solutions to help Placer to maintain the lowest rate of homelessness in Northern California.

Last, even though this first phase was intended to surface overall strategies rather than any specific proposal, participants consistently wondered how The Gathering Inn's Campus of Hope concept was connected to it. Participants were repeatedly reassured that this process was designed to identify a homeless solutions continuum framework and possible strategies, as opposed to specific initiatives or projects. At the time of this writing, no specific Campus of Hope proposal has been brought before the full Board of Supervisors.

County Staff

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I. Executive Summary

Placer County experiences the lowest rate of homelessness in northern California, the fourth-lowest rate of homelessness in the state overall, and the lowest rate of unsheltered homeless in the state. At the same time homelessness and blight have become more visible due to a variety of factors including judicial rulings and the COVID pandemic, which has created a number of issues from economic stress to health concerns. Addressing homelessness requires a coordinated and steady effort by multiple partners from municipal jurisdictions, the Continuum of Care, community-based organizations, the local business and faith communities, service providers, and County departments over an extended period of time. To expedite progress and address deep-rooted challenges, Placer County and the six cities and town in the region are taking a systemic and practical approach to plan, coordinate, integrate, and fully leverage shared action across sectors and geographies within the mid and south Placer region.

Figure 1: Homelessness among California Continuum of Care areas

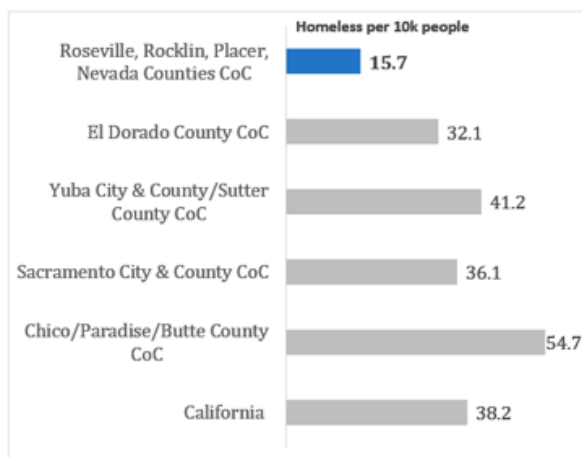
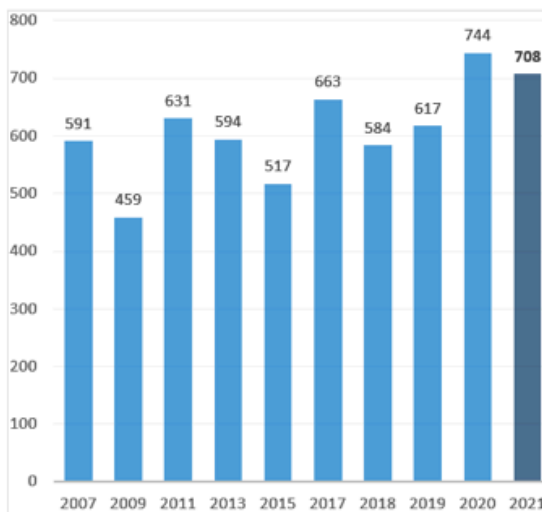


Figure 2: Placer Point-in-Time Count Homeless Population



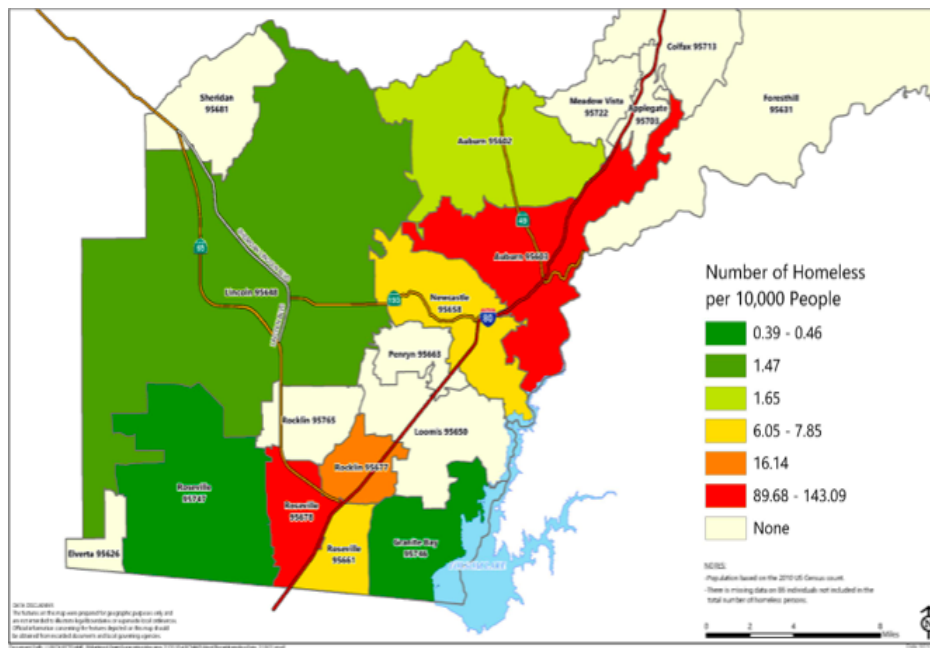
Source: Placer County Health and Human Services, Adult System of Care

The Placer Regional Homelessness Response project was initiated in July 2021, six years since the last assessment. The process to develop a regional strategic response to homelessness began with a series of research and stakeholder engagement activities to help identify gaps,

issues and opportunities, and to create a set of potential strategies to address these. Over the course of five months, the project team accomplished the following:

- Placer County homelessness response system review and inventory of services
- Best practices research
- Consultations with the regional Continuum of Care, the Placer Law Enforcement Agencies (PLEA), individuals with lived experience of homelessness, service providers, and the local Office of Education, etc.
- Mapping of key amenities for a preliminary housing location analysis
- Dialogue among key public agency staff and elected officials, including law enforcement and health care providers
- Convening public safety and legal counsel across the region to discuss potential and aligned responses to the Martin v. Boise decision.

Figure 3: Number of Homeless per 10,000 people (2021)



Strategies for consideration arose from the issues and opportunities analysis and best practices research done in the first few months of the project, as well as from discussions among the stakeholders and Regional Working Group¹ members. These ideas were brought

¹ The **Regional Working Group** was comprised of representatives from each of the jurisdictions, the local Continuum of Care, along with regional funders

to the Ad Hoc Group² for deliberation. **Support for many of the strategies was contingent on additional analysis, implementation considerations, and community and stakeholder input, which will be the focus in the next phase of this work.**

Overall Outcome: Maintain the lowest rate of homelessness in Northern California.

Prevention

*Making the experience of homelessness RARE through strategies that address the root causes of homelessness in addition to financial assistance and case management support that prevents individuals and families from ever becoming homeless.**

Many prevention strategies (rental assistance, eviction prevention, counseling) are well underway in Placer County, yet sheltering in particular is an important backstop to prevent people from ending up on the streets.

1A. Continue to explore need for emergency shelter in south Placer outside of residential neighborhoods with on-site services or proximate access to services.

(Members of the Ad Hoc Group expressed **mixed support** for this strategy but were generally **open to further exploration**.)

1B. Renew conditional use permit for North Auburn emergency shelter. (Members of the Ad Hoc Group were **largely in favor** of this strategy, with many deferring to the North Auburn community for its approval.)

1C. Explore Safe Park and/or Safe Camp locations. (Most members of the Ad Hoc Group were **strongly opposed** to this strategy.)

Crisis Response

Making the experience of homelessness as BRIEF as possible through culturally specific programs³ and services that create pathways out of homelessness and into permanent housing.

2A. Expand partnerships between law enforcement and social services for outreach and response. (Members of the Ad Hoc Group were **highly supportive of** this strategy, pointing to its current success.)

2B. Explore the potential of a Sobering Center (short-term respite and urgent care center for people experiencing intoxication or mental health crises) with appropriate services and support. (Members of the Ad Hoc Group expressed **cautious support** for this strategy and were **interested in further exploration**.)

² The **Ad Hoc Group** was created as a representative body of elected officials from the Board of Supervisors and the City Councils of each municipality in the region.

³ Culturally Specific programming adapts to the cultures and needs of the individuals and communities served.

Housing and Supportive Services

Making the experience of homelessness NON-RECURRING through permanent housing and by advocating for additional affordable housing opportunities.

3A. Explore the possibility of growing the amount of supportive interim housing by converting hotels/motels into interim housing informed by siting criteria. (Members of the Ad Hoc Group were **mostly in favor** of this strategy and were **open to further exploration**.)

3B. Resume focus on additional permanent supportive and/or affordable housing and distribute across the region. (Members of the Ad Hoc Group expressed **mixed support** for this strategy but were generally **open to further exploration**.)

3C. Adopt Placer County regional housing siting criteria and apply them consistently. (Members of the Ad Hoc Group were **largely in favor** of this strategy.)

3D. Explore creative solutions for point-to-point transportation. (Members of the Ad Hoc Group expressed **mixed support** for this strategy but were generally **open to further exploration**.)

System Integration and Coordination

Promote and sustain a sense of shared responsibility and clarity of roles.

4A. Evaluate and strengthen Coordinated Entry/211. (The Ad Hoc Group did not discuss this strategy yet did not express reservations in prior meetings.)

4B. Implement regionally-compatible ordinances and law enforcement practices. (The Ad Hoc Group did not discuss this strategy but expressed support in prior meetings.)

4C. Designate an interjurisdictional task force to provide stewardship of, and advocacy for, the Strategic Action Plan. (The Ad Hoc Group did not discuss this strategy yet did not express reservations to it in prior meetings.)

Community Engagement

Increase public awareness regarding homelessness and possible response strategies.

5A. Create regionally-coordinated, public information around homelessness. (Members of the Ad Hoc Group were **largely in favor** of this strategy.)

Next Steps

With this report's discussion of the benefits and concerns related to these potential desired outcomes and strategies – the first phase of this process draws to a close. In the next few months, many of the stakeholders who have been involved will be invited to continue their participation, as we translate the strategies into specific initiatives. In addition, there will be a broader community dialogue, including presentations to the decision-making bodies in each of the jurisdictions, as well as town-hall-style conversations in both south and mid-Placer with residents and businesses across the region. And throughout this process, there will continue to

be opportunities to get feedback on the plan from people who are currently or previously served by our continuum of care.

Ultimately, Placer’s Regional Homelessness Response will identify those strategies and actions that can be pursued in the near-term, including who will be engaged in their implementation, where the funding will come from and in what timeframe there can be measurable progress. It is hoped that all of this will be guided by a shared vision, operating principles, mutually desired outcomes and a commitment to working together to achieve results.

II. Introduction and Overview

Placer County experiences the lowest rate of homelessness in northern California, the fourth-lowest rate of homelessness in the state overall, and the lowest rate of unsheltered homeless in the state.⁴ Over the past five years the region has increased its capacity of beds and services, resulting in a reduction in the rate of chronic homelessness.

At the same time homelessness and blight have become more visible due to a variety of factors including the COVID pandemic, which has created a number of issues from economic stress to health concerns. There have been strains on the local shelters as currently configured, and recent court rulings (*Martin v. Boise*⁵, in particular) have established the right to camp when insufficient bed options are available. Additionally, some of the unhoused who interface with law enforcement decline services and regularly use costly resources in the health care and criminal justice system. Specifically, they opt for camping or parking on public lands rather than seeking traditional housing and/or shelter.

Addressing homelessness requires a coordinated and steady effort by multiple partners from municipal jurisdictions, the Continuum of Care, community-based organizations, the local business and faith communities, service providers, and County departments over an extended period of time. To expedite progress and address deep-rooted challenges, Placer County and the six cities and town in the region are taking a systemic and practical approach to plan, coordinate, integrate, and fully leverage shared action across sectors and geographies within the mid and south Placer region.

The Placer Regional Homelessness Response project was initiated in July 2021, six years since the last assessment. It was kicked off by a regional summit that brought together service providers, elected officials, community leaders and agency stakeholders with an interest in addressing the many complex issues of homelessness, including the visible nature of unsheltered homelessness and its impacts as well as community concerns about the siting of homeless housing.

The process to develop a regional approach for homelessness began with a series of research and stakeholder engagement activities to help identify gaps, issues and opportunities, and to create a set of potential strategies to address these. To assist in this first phase, the region established three consultative groups:

- The **Steering Group** provided process oversight and guidance. The **Regional Working Group** – comprised of representatives from each of the jurisdictions, the local

⁴ *National Alliance to End Homelessness, 2020 Edition*

⁵ 2018 decision in which the Ninth Circuit held that the Eighth Amendment prohibits the imposition of criminal penalties on unsheltered homeless persons for sitting, sleeping or lying outside on public property. *Martin* prohibits jurisdictions from enforcing camping ordinances when the number of homeless individuals in a jurisdiction exceeds the number of available shelter beds.

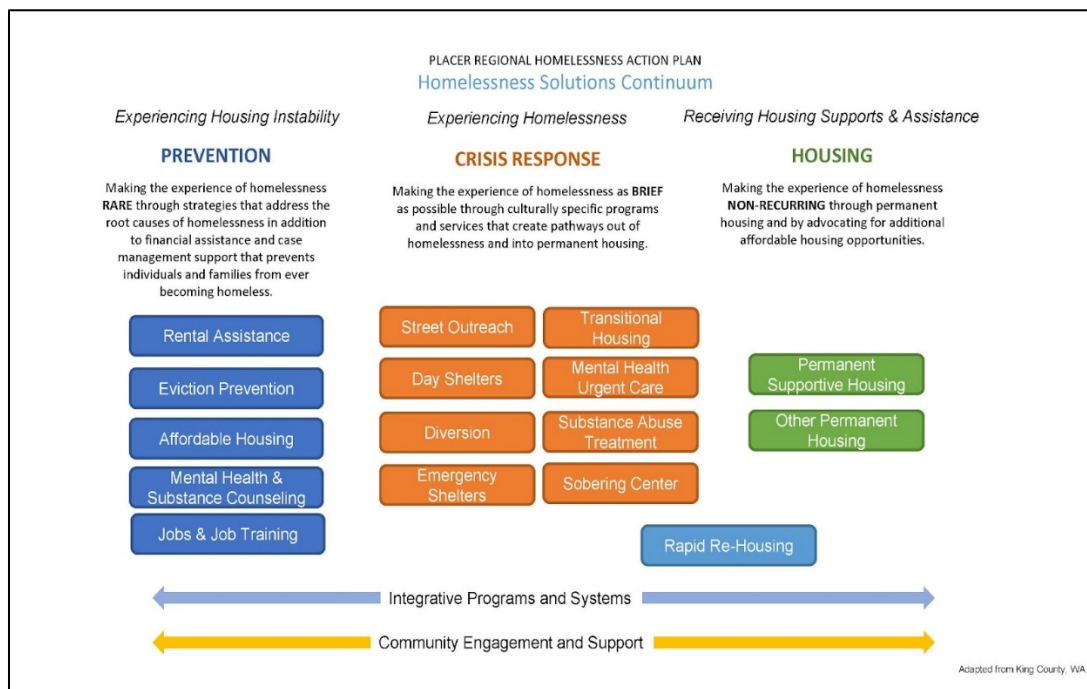
Continuum of Care, along with regional funders, -- discussed the needs and opportunities, and helped to define the draft strategies from the perspective of front line staff and/or technical experts.

- The **Ad Hoc Group** was created as a representative body of elected officials from the Board of Supervisors and the City Councils of each municipality in the region. These members provided feedback and direction regarding the draft strategies.

(Membership lists of each of these groups is provided in Appendix A.)

The project team proposed a framework to help describe the impact areas of this strategic response process. This continuum model was adapted from King County (Seattle) and was used to organize the system review and the strategy development process. As shown in the diagram below, the five impact areas are:

- Prevention
- Crisis Response
- Housing (and Supportive Services)
- Integrative Programs and Systems
- Community Engagement and Support



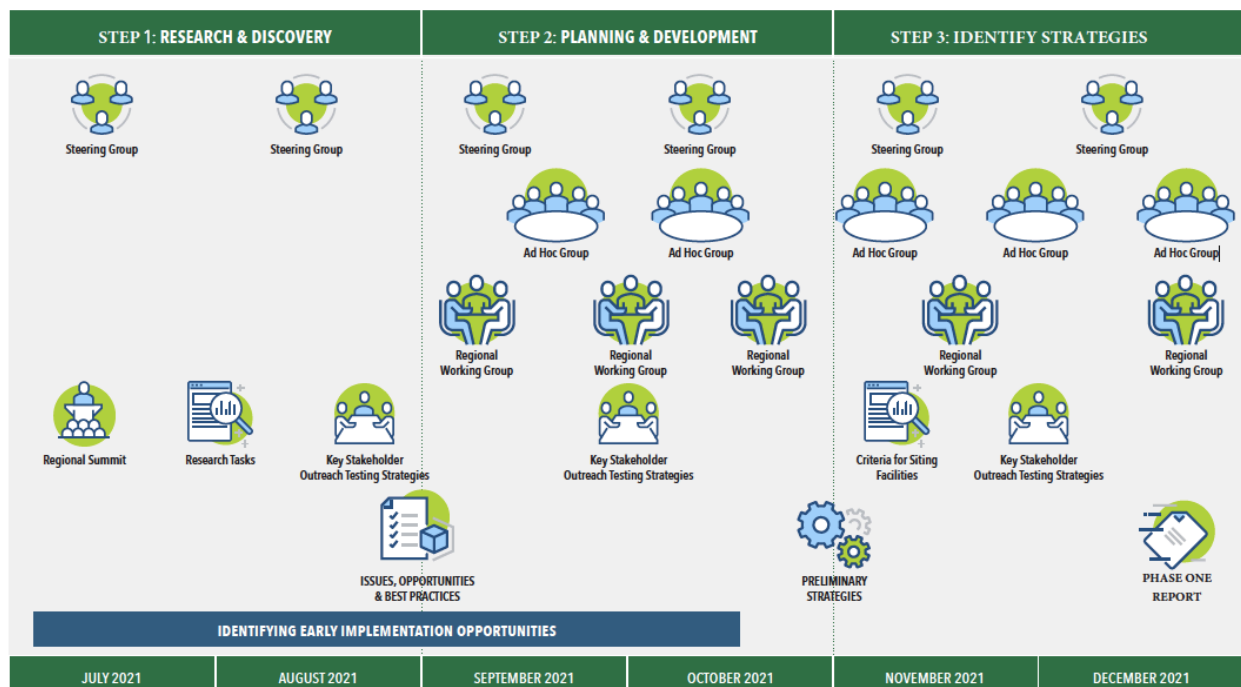
Over the course of five months, the project team accomplished the following:

- Placer County homelessness response system review and inventory of services
- Best practices research

- Consultations with the regional Continuum of Care, the Placer Law Enforcement Agencies (PLEA), individuals with lived experience of homelessness, service providers, and the local Office of Education, etc.
- Mapping of key amenities for a preliminary housing location analysis
- Dialogue among key public agency staff and elected officials, including law enforcement and health care providers
- Convening public safety and legal counsel across the region to discuss potential and aligned responses to the Martin v. Boise decision
- Identification and discussion of potential strategies across the five impact areas

Placer County Government and Incorporated City Partners
HOMELESSNESS SERVICES PLANNING PROJECT

January 20, 2022



There were many issues and opportunities that emerged from the research and discussion. Some of the most significant findings included:

- Cross-service teams are an effective means for bringing solutions to the people who need them.
- There is a need to focus on the chronically homeless and on those who refuse services; and there is a desire to focus on those with clear ties to Placer.
- The region would benefit from a coordinated response to enforcement based on accountability with compassion.
- In order to both meet housing demand and support the ability of first responders to enforce public ordinances, there is a need to expand the housing options at all points on the spectrum – emergency, interim and permanent supportive.

- There is a need to provide more options for people who do not meet current entrance requirements for sheltering and other services.
- To promote coordination in locating housing it would be useful to get cross-jurisdictional agreement on a set of guiding criteria.
- The development of any Regional Homelessness Action Plan must involve conversations with residents and businesses – about the unhoused members of their communities and the programs, services and facilities that are in place, and how they operate – and to understand community concerns and goals.

These themes led to the development of potential strategies that were discussed and evaluated by the stakeholder groups. The list of proposed strategies advancing to the next phase of planning is presented in Section IV. It is important to note that not all strategies received consensus support from the Ad Hoc Group. **The initial focus of the next phase of the process will be to listen and respond to community concerns and goals regarding homelessness, so that elected officials across the region can make the decisions necessary to take action that will help Placer to maintain the lowest rate of homelessness in northern California.**

III. Guiding Framework

The following foundational elements (Desired Outcomes, Vision and Guiding Principles) were presented and discussed at various times throughout the process. While needing additional collaborative revision, these elements will eventually represent a shared approach to addressing homelessness in the region, as embraced by residents, businesses and local officials.

Draft Desired Outcomes

Based on research and conversations with stakeholders, the process participants propose an initial set of measurable outcomes for the region’s homelessness response, organized along the five impact areas. The priority actions developed in this phase, combined with those identified in later phases, will have significant impact in these areas, as Placer moves to a more coordinated and effective system of facilities, programs, services and supports. A key step in the Phase 2 will be linking these outcome statements to data sources and developing a plan to track systematically.

Overall Outcome:

Maintain the lowest rate of homelessness in Northern California.

Prevention / Crisis Response

1. Decreased number of people becoming homeless for the first time
2. Increased number of Veterans connected with resources they are entitled to
3. More timely progression from assessment to referral to placement for individuals experiencing homelessness (E.g.: Assessment within 48 hours; referral within 72 hours; placement within 7 days)
4. Bed/placement/service provided for all those striving to advance out of homelessness, regardless of their sobriety, mental health, or criminal record

Housing and Supportive Services

1. Increased number of people transitioning from emergency placements to permanent homes
2. Decreased number experiencing unsheltered homelessness
3. Increased number of placements for people experiencing domestic violence, human trafficking, and sexual assault

System Integration and Coordination

1. Consistent understanding and application of Martin v. Boise across the county
2. Integrated response among front-line/first responders (law and fire) on ordinances related to camping/parking

3. Regular communication and collaboration between the local elected officials, law enforcement agencies, county office of education, the Continuum of Care and other partners to implement the strategic action plan

Community Engagement and Support

1. Progress toward addressing homelessness as described by key influencers and policymakers
2. Increased number of articles, editorials and/or survey results indicating support or a sense of shared responsibility for implementing homelessness solutions
3. Increased involvement in employment and training programs by local employers
4. Increased landlord participation in housing vouchers

The following draft statements were presented to the Ad Hoc group, following expressed support from the RWG. The Ad Hoc group did not reach consensus on these elements, preferring to gather feedback from their constituents prior to formally adopting any final vision statements or guiding principles.

Draft Vision Statement

“We in Placer County seek to make homelessness rare, brief and non-recurring by supporting our unhoused community members in a coordinated system of care as they work towards self-sustaining futures.”

Draft Guiding Principles

- A. We work to influence the behaviors and environments that can lead people down the path of homelessness, improving people’s dignity and safety, while keeping people off the streets.
- B. Solutions and services need to be data-driven and human-centered, based on each particular context, as we recognize that not all situations are alike.
- C. We are committed to compassion with accountability: our success will depend on the integration of new housing solutions, supportive services and compatible approaches to enforcement.
- D. By providing additional housing options, we can help provide safety and order for our whole community in addition to meeting the needs of our neighbors who are unhoused.
- E. We create and implement solutions with a commitment to shared responsibility, while respecting the autonomy of each jurisdiction and the need for flexibility and tailoring of approaches.

IV. Draft Strategies for Future Discussion

Strategies developed for consideration arose from the issues and opportunities analysis and best practices research done in the first few months of the project, as well as from discussions among the stakeholders and Regional Working Group members. These ideas were brought to the Ad Hoc Group for deliberation. Support for many of the strategies was contingent on additional analysis, implementation considerations, and community and stakeholder input.

In the section below, the draft strategies are presented within each of the five impact areas. There is a background narrative describing the strategy, including benefits and concerns often articulated about it, and in some cases where this strategy has been implemented and with what results. There is also a summary of the Ad Hoc Group's comments related to each strategy, focused on the level of support expressed.

Prevention

Making the experience of homelessness RARE through strategies that address the root causes of homelessness in addition to financial assistance and case management support that prevents individuals and families from ever becoming homeless.⁶

1A. Continue to explore need for emergency shelter in south Placer outside of residential neighborhoods with on-site services or proximate access to services.

Members of the Ad Hoc Group expressed **mixed support** for this strategy but were generally **open to further exploration**.

Background

The only shelter model in south Placer is nomadic, meaning it moves from location to location. Yet, the highest concentration of unsheltered individuals occurs in south Placer zip codes. A new emergency shelter in this area would place temporary housing closer to where the majority of homeless people are currently located. It could be established with the same operational parameters as the mid-Placer shelter, or it could include more expansive inclusion criteria consistent with a lower barrier shelter. The following paragraphs describe the low-barrier approach to emergency shelter.

Cities of all sizes throughout the country regularly turn away homeless individuals and families from emergency shelter beds because of requirements or rules of shelters that determine who can enter. These barriers can operate to keep cause unsheltered people to remain on the street.

⁶ Some of these strategies (rental assistance, eviction prevention, counseling) are well underway, yet sheltering in particular is an important backstop to prevent folks from ending up on the streets.

Eligibility Criteria that people must meet to receive shelter can include:

- sobriety (on-site breathalyzers and drug screens);
- strict curfews;
- admission dependent on chapel or class attendance;
- mandatory program participation;
- background checks;
- income requirements and verification;
- criminal records;
- credit checks; and
- required labor participation.

Remaining on the streets leaves homeless people at increased risk of exposure, violence and theft. Some communities have decided to implement low-barrier or “come as you are” shelters. Although many low-barrier shelters have different criteria to make shelter beds and services more accessible, some have chosen to create a shelter policy to prohibit the possession and use of drugs, alcohol and weapons in its facilities. There is often also an expectation that guests obey the law and behave in a manner that is respectful, non-threatening and not overly disruptive. For the most part, all rules are stripped down to health and safety considerations.

Benefits

Low-barrier shelters will allow people to gain access to safe housing who would otherwise remain on the streets or camping on public lands. People who have the highest needs can often lose shelter beds due to non-compliance issues. On a policy level, although not having a low barrier shelter isn’t non-compliant on its face, the existence of low-barrier beds may well allow the county to remain in compliance with the 2018 ruling in *Martin v. City of Boise* which prohibited law enforcement from criminalizing “behavior consistent with the eighth amendment when no sleeping space is practically available in any shelter.”

Concerns

Some argue that a low barrier shelter might not feel safe and welcoming to those who are in recovery. Additionally, it may be harder to enforce expectations around respectful behavior, especially actions that result in violence or theft. It might be challenging to re-train staff to have a shared understanding about which behaviors are a safety issue and which behaviors are a behavior management issue. Finally, low barrier shelters may experience community resistance due to perceptions of lack of safety, particularly if they allow 24/7 access to enter and exit the premises.

Potential Funding opportunities

- Emergency Solutions Grant (HUD)
- <https://www.bezosdayonefund.org/day1familiesfund>

1B. Renew conditional use permit for North Auburn emergency shelter.

Members of the Ad Hoc Group were **largely in favor** of this strategy, with many deferring to the North Auburn community for its approval.

Background

The Gathering Inn-Mid Placer is a 100-bed emergency housing and services program located at the Placer County Government Center in North Auburn. The Mid Placer shelter accommodates Placer County residents 18 years or older, who must be clean and sober and have no history of sexual related crimes. It is monitored 24/7 by at least three staff at any given time. Four full-time Case Managers work with guests to identify and work through barriers to housing, such as the need for increased income or access to continued education. Case Managers provide follow-up support for up to one year in an effort to reduce recidivism to homelessness.

Mid Placer provides basic needs such as a safe and secure campus, necessities such as clean clothing and bedding, shower facilities, and 3 meals per day. They also offer life skills courses, drug and alcohol recovery meetings, and additional groups intended to help individual development and support the move from homelessness to housing.

Benefits

The shelter's current location is on County-owned property and is close to a number of County-sponsored services. It is also easier to continue the operations of a shelter that is already in operation than to begin an entirely new project. The existing emergency shelter has been part of the collection of strategies that have combined to help Placer County maintain the lowest rate of unsheltered homelessness in California.

Concerns

A conditional use permit is needed because a homeless shelter is not a permitted use under the site's commercial zoning. Some community members have expressed concern about negative impacts to the neighborhoods, emphasizing the site's proximity to schools. Although many agree that the internal management of the Mid Placer shelter has improved over the last several years, the increase of people camping out around the Placer County Government Center in and around the beginning of the COVID-19 pandemic has resulted in a corresponding increase in community complaints, most notably that the government center feels unsafe and unsanitary.

1C. Explore Safe Park and/or Safe Camp locations

Most members of the Ad Hoc Group were strongly opposed to this strategy but a small number would entertain limited **exploration, particularly if requested by community members.**

Background

The first Safe Parking pilot was launched in Santa Barbara in 2004, when a counseling center partnered with city officials and faith leaders to open up parking lots each night for homeless families living out in their vehicles and to connect them to a continuum of care and housing. In the past, some safe parking lots that were too large or poorly run did not have positive outcomes. However, as expertise grew, safe parking lots have been successful, especially when specific protocols are followed (as to number of vehicles, security, neighborhood engagement, etc.). Safe Parking Programs utilize existing public or privately owned parking infrastructure to provide vehicle residents with a safe, reliable, and legal place to park. Lots can be for RVs, exclude RVs, or include both RVs and other vehicles. Some safe parking lots are very large and others are quite small (less than 10 vehicles). Over time, providers have learned that smaller lots with case management and security are more optimal than other choices.

In Santa Barbara, a driver's license, vehicle registration, and vehicle insurance are required to enroll in the shelter component of the program. In addition, they also offer rapid rehousing services and other housing assistance services to community members through the program, having transitioned nearly 1,000 program participants into permanent housing since 2004. They operate the Safe Parking Program in cooperation with numerous local churches, governmental and nonprofit agencies, and businesses, and their program has served as a model for dozens of communities throughout the country. They have created a Safe Parking Program Manual that is a guide created for other communities seeking to begin their own program to assist the vehicular homeless. The manual outlines best practices, challenges, tips, and "pearls of wisdom." There is also an extensive three-day training program.

Another Safe Park Program in Boulder, CO identified the following best practices:

- Robust community engagement;
- Location in a parking lot of a faith-based venue with nonprofit management;
- Safe parking for about eight to ten (8-10) vehicles;
- Transitional housing plan for each person with case management ;
- Onsite security;
- No RV's (for this pilot);
- Cost free for parking participants;
- Specific minimum amenities;
- Anticipated outcome of at least 75% residents achieving stabilized housing within two years;
- Focus on particular population of unhoused individuals (with vehicles) that currently aren't eligible, aren't able to reside in shelters, or don't fare well in shelters – i.e. older adults, couples, small families, single parents, people with specific medical conditions that make group situations difficult, or people with support animals;

- Complements Housing First strategies

Benefits

A person's vehicle can represent a personal refuge: the last remaining link to a sense of privacy, stability, and personal autonomy. Adequate shelters are also commonly inaccessible to vehicle residents because there is no place to leave the vehicle. For many, their vehicle is their home. Unfortunately, many parking restrictions effectively banish vehicle residents from parking in many locations. Often, vehicle residents are unable to pay for citations, which then evolve into criminal infractions. Other laws commonly allow for the impoundment of a vehicular home, forcing vehicle residents to endure even greater trauma on the street. And, contrary to the beliefs of critics, there is no data to suggest that safe parking incentivizes homelessness. Rather, safe parking catches individuals using vehicles before they slip into abject homelessness. In fact, data indicates a high rate of safe parking participants transitioning into stable housing with a rate of 65-70% that may be higher than most shelter rates.⁷

Other potential positive impacts of a Safe Park include the following:

- Can reduce fire hazards and poor water quality conditions.
- Unsafe structures, open flames, and the proliferation of trash can be regulated.
- Protects parks and greenspaces from improper use
- Provides monitored area for people who cannot/will not access shelter and/or will not abandon vehicles
- Protects neighborhoods with limited parking
- Provides a new shelter model without any financial commitment from City/County
- Makes visible a previously invisible population and connects them with services
- Increases the safety of parking lot participants and neighborhoods
- Increases opportunity for successful transition to affordable housing because people are able to get a good night's sleep and maintain personal hygiene vital to successful employment
- Demonstrates solid success in transitioning unhoused individuals into permanent housing with case management/supportive services. Safe parking program provides connecting links to available services.
- Provides a gap service that complements a Housing First approach with no additional City financial commitment.

Concerns

In locations that already have initiated Safe Park Programs, opponents often report that safety is their primary concern. The biggest bone of contention is background checks, as critics argue

⁷ <https://bouldercolorado.gov/media/4171/download?inline>

that all participants should be subject to criminal background checks before they can join in the safe lot program as anything less would jeopardize the safety of nearby residents. Neighboring residents aren't worried about whether the person has a record of misdemeanors or property crimes; they are primarily interested in knowing whether the participant is a violent felon or a sex offender. Communities also frequently voice worries about operational challenges, as comprehensive background checks could potentially be expensive and time-consuming to conduct. Other critics claim that it's not the people admitted into the Safe Parking Program who concern them; it's those who are turned away and end up making neighborhood streets their home.

Crisis Response

Making the experience of homelessness as BRIEF as possible through culturally specific programs and services that create pathways out of homelessness and into permanent housing.

2A. Expand partnerships between law enforcement and social services for outreach and response

Members of the Ad Hoc Group were **highly supportive of** this strategy, pointing to its current success.

Background

In Placer County, the Homeless Liaison Team is coordinated by the Placer County Sheriff's Office, Probation, and Health & Human Services. The Team is assigned to different areas throughout the County, where they work with HHS and The Gathering Inn to help find shelter and provide resources for the homeless. The City of Roseville Police Dept. Social Services Unit (SSU) also works with a Social Worker to locate and secure services available to homeless individuals, including identifying shelters to provide services and referrals to identify mental health services and finding family connections to attempt reunification. Expansion of this partnership would provide more resources for mobile assessment and mobile services, such as the renovated bookmobile, that will also include a mobile court.

Benefits

A pre-booking diversion program directs those arrested for low-level drug and other offenses away from prosecution and incarceration and toward intensive, trauma-informed case management and support, often including counseling, housing, and drug treatment. These types of programs provide law enforcement and other related agencies with an option outside of the formal criminal justice system in response to those dealing with substance abuse and mental health issues, homelessness, and extreme poverty. The presence of a trained practitioner or social worker can greatly increase the engagement outcomes in contrast to what is possible with law enforcement alone.

Concerns

Any additional programs would incur more costs, for both training and ongoing implementation. Additionally, much of the staff time spent in this popular model is not billable to health insurance and/or other state and federal funding sources that fund most behavioral health and social services. Inter-agency partnerships might also incur complications with respect to decision making authority and communications.

2B. Explore the potential of a Sobering Center (short-term respite and urgent care center for people experiencing intoxication or mental health crises) with appropriate services and support.

Members of the Ad Hoc Group expressed **cautious support** for this strategy and were **interested in further exploration**.

Background

A sobering center is a short-term care facility that operates 24 hours a day, seven days a week, to allow individuals who are intoxicated and nonviolent to safely recover from the debilitating effects of alcohol or drugs. Sobering centers are designed to be short term, as they have lengths of stay ranging from four to just under 24 hours, which makes them separate and distinct from two other kinds of alcohol-related care facilities: detoxification centers, which support individuals in the gradual and complete cessation of alcohol consumption over a period of days, and sober living houses, which provide a group residential setting for those in recovery and abstinent from drugs and alcohol.

While at the sobering center, clients are monitored regularly for negative effects of intoxication, including alcohol poisoning and drug overdose. A primary goal of sobering centers is to help connect clients to other community services providing care for substance use, mental health, or stabilization. Sobering programs provide safe environments and critical access to a range of community health services for at-risk populations, while relieving pressure on both the emergency medical system and law enforcement by diverting rapidly growing numbers of intoxicated adults from emergency rooms and jail.

Benefits

The role of a sobering center in helping provide care for those with comorbid homelessness and substance use, therefore, cannot be overstated. Practical, onsite interventions to improve quality of life can include shower and hygiene facilities, clean clothing, delousing care and medication, laundry, food, and oral rehydration. Care coordination services may include peer navigation, case management, and referrals to shelter or housing.

Best Practices:

- A compassionate, streamlined service model which minimizes barriers such as paperwork, eligibility requirements, and complex intake processes.

- Around-the-clock staffing and services that allow sobering centers to provide an immediate response to individuals in crisis while facilitating timely communication with other service and referral partners.
- The ability to be flexible and pivot to meet the specific needs of individuals as well as the community at large has been cited as important for sobering centers.

Concerns

Sobering centers can bring up a worldview conflict surrounding the root cause of addiction, especially in regards to how to best care for a person who is publicly intoxicated or under the influence. Some argue that placement in a jail cell is a more appropriate response, as managing people under the influence of unknown substances takes a lot of resources and can be dangerous. Critics of Sobering Centers argue that they are places without financial or legal consequences which potentially enable problematic or illegal behavior. Others worry that most Sobering Center patients won't pursue additional help either from a treatment or rehabilitation program, resulting in costly expenditure without long-lasting results.

Potential Funding sources:

- Medi-Cal
- Proposition 47
- No Zip Code Left Behind
- Proposition 63 (the Mental Health Services Act)
- Edward Byrne Memorial Justice Assistance Grant

Source: <https://www.chcf.org/wp-content/uploads/2021/07/SoberingCentersExplainedInnovativeSolutionAcuteIntoxication.pdf>

Housing and Supportive Services

Making the experience of homelessness NON-RECURRING through permanent housing and by advocating for additional affordable housing opportunities.

3A. Explore the possibility of growing the amount of supportive interim housing by converting hotels/motels into interim housing informed by siting criteria.

Members of the Ad Hoc Group were **mostly in favor** of this strategy and were **open to further exploration**.

Background

Though it takes many forms, transitional housing or supportive interim housing broadly refers to temporary housing for different segments of the homeless population or those experiencing a crisis. Certain types of transitional housing might focus on different populations, such as those experiencing domestic violence, mental health challenges, suffering from drug addiction, or experiencing temporary homelessness. Transitional housing

intends to equip people with the tools, structure, and support they need to re-enter permanent housing and be successful in their futures.

While specific lengths of stays at transitional housing facilities vary, they are intended to be temporary solutions that can help people transition from homelessness or another crisis into permanent housing. Lengths of stays at transitional housing facilities range from a couple of weeks to a few years.

Currently, Project Homekey provides an opportunity for state, regional, and local public entities to develop a broad range of transitional/interim and/or permanent housing types, including but not limited to hotels, motels, hostels, single- family homes and multifamily apartments, adult residential facilities, and manufactured housing, and converting commercial properties and other existing buildings.

Benefits

Transitional housing is intended to bridge the gap from a crisis — such as abuse or homelessness — into permanent housing. Typically, transitional housing is more private than other emergency homeless shelters. Transitional housing’s goal is to offer a safe space in which people can process their trauma, work on the issues that led to their homelessness, and build a supportive network that will help them in the future.

Project Homekey is an innovative way to repurpose existing buildings and expand the supply of affordable housing needed to bring people indoors and provide the necessary services to help solve their homelessness. A key benefit of this program is that it doesn’t require building entirely new facilities. An additional positive aspect of this strategy is that there is ample state and federal funding available to support it.

Concerns

One key concern is that the funding is not guaranteed. The county will have to apply for the funding. The Project Homekey Round 2 Notice of Funding Availability (NOFA) was released on September 9, 2021, and the Project Homekey Round 2 Application was made available in late September 2021. Completed applications will be accepted on a rolling basis until funds are exhausted or May 2, 2022, whichever comes first. Additional concerns are community resistance to the siting of the interim housing location

3B. Resume focus on additional permanent supportive and/or affordable housing and distribute across the region.

Members of the Ad Hoc Group expressed **mixed support** for this strategy but were generally **open to further exploration**.

Background

Of those currently staying in an emergency shelter, about 50% are ready for a housing option immediately.⁸ On any given day there are between 125 to 150 people in an emergency shelter, meaning between 63 and 75 are ready for an immediate housing option.⁹ Of those who are unsheltered, about 25% are ready for a housing option.¹⁰ During the 2021 homeless count, 328 people were designated as unsheltered, meaning about 80 would be ready for a non-shared permanent supportive housing option. A successful Homekey award should put a sizable dent in this number.

Currently Placer County has scattered Permanent Supportive Housing (PSH) and affordable housing sites which has been successfully maintained for 20 years. No permanent supportive housing (PSH) has been purchased in over a year. The community will need to resume such purchases or risk regressing on some of the outcomes identified through this process, such as maintaining the lowest rate of homelessness in Northern California. The question of where to locate any new housing sites remains one of the biggest questions to answer, although it appears that there is the highest level of support for placing any new PSH out of residential neighborhoods (either in rural areas or near homeless resources).

Placer County, similar to the state as a whole, has had an ongoing affordable housing shortage. Nearly 40% of all households are housing cost burdened in unincorporated Placer County. Permanent Supportive Housing (PSH) clients can make use of a voucher to subsidize their housing. Typically, residents must pay between 30 and 50% of their income and/or must qualify for a voucher or subsidy either through: mental health status, disability, income level, and/or involvement in a program that offers vouchers based on veteran status, family status/income, etc.

In 2020-21, 246 people resided in permanent supportive housing units in 2020-21, a 6% increase over the previous fiscal year. Placer County Housing coordinators helped 53 people move into permanent supportive housing, a 12% decrease over the previous fiscal year. These declines were likely due to a combination of workforce challenges and reduced housing availability brought on by the eviction moratorium.

Benefits

In addition to reducing the bottleneck in the Continuum of Care in which people who are ready for housing are not able to find any vacancies, increasing the supply of permanent supportive and affordable housing may prevent Placer County from facing harsher penalties from the State's new policies aimed at cities who fail to meet their development targets.

⁸ Data source: Placer County Adult System of Care, 2021

⁹ Ibid

¹⁰ Data Source: Placer County Adult System of Care, 2021

Concerns

Housing developments are costly, both in time and financial resources. There are additional potential barriers in terms of prohibitive zoning regulations and community opposition, especially the permanent supportive housing is sited in residential neighborhoods and includes single men rather than families.

3C. Adopt Placer County regional housing siting criteria and apply them consistently.

Members of the Ad Hoc Group were **largely in favor** of this strategy.

Background

Opposition to housing developments tends to revolve around similar arguments including increased crime, decreased property values, greater infrastructure strain and compromising the character of the neighborhood. When there is a perception that proponents of a housing project are dismissive of concerns or withholding information, this can intensify opposition and create feelings of mistrust. Therefore, it is important for projects to listen and be responsive to community concerns. One of the key ways that Placer County can address potential concerns with respect to housing projects is to adopt regionally consistent housing siting criteria and share those criteria with residents and community members.

Benefits

Local opposition to the siting of homeless housing and services often creates costly obstacles to the provision of more housing and services for homeless people. It is important to adopt a regionally consistent approach to the development of housing siting criteria to foster community acceptance, allowing developers/sponsors of homeless and housing services to obtain funding and land-use approvals with fewer delays and reduced development costs. The regionally consistent criteria must respond to the legitimate concerns of the local community, while supporting the needs of both current and prospective residents. If each city uses different criteria, it will create challenges in the framing and implementation of an effective regional communications strategy.

Concerns

Each city in the county, regardless of how close in location, has a unique culture with particular needs, and there is a potential that the emphasis on regional coordination will not allow for the nuance necessary for each jurisdictional context. Care will need to be taken to make sure that cities do not feel that their autonomy and responsibility to advocate for their own residents is threatened or overlooked in the efforts to create a shared regional approach.

3D. Explore creative solutions for point-to-point transportation.

Members of the Ad Hoc Group expressed **mixed support** for this strategy but were generally **open to further exploration**.

Background

Some of the unhoused people in Placer County have reported that it can take up to an entire day to travel to and from appointments or to the grocery store, due to transportation limitations. Point to Point transportation would allow more flexibility in siting new housing locations while still guaranteeing people can access necessary goods and services. Existing programs in other cities¹¹ provide clients rides to places such as medical appointments, labs, pharmacies, the DMV, the post office and other locations.

Benefits

Mobility gives people independence. Point to point transportation is particularly helpful for those individuals who are physically or cognitively unable to ride public transportation. Additionally, these types of programs make sure that even those who are isolated, don't have a vehicle or can't access a computer can still get their needs met.

Concerns

The biggest issue with this type of program is the cost and coordination of operations. There is also concern that it would be redundant to provide this kind of service, and it might be better to support the public transit that already exists rather than starting new programs.

System Integration and Coordination

Promote and sustain a sense of shared responsibility and clarity of roles.

4A. Evaluate and strengthen Coordinated Entry/211.

The Ad Hoc Group did not discuss this strategy yet did not express reservations in prior meetings.

Background

The Coordinated Entry System (CES) is an assessment process designed to quickly identify, assess, refer, and connect people in crisis to housing and assistance no matter where they initially ask for help. It is a shared tool that is used by homeless programs working collaboratively within a community to match people experiencing homelessness to the most appropriate housing and services. The U.S. Department of Housing and Urban Development requires all projects funded under Continuums of Care (CoC) to utilize CES. CES integrates Housing First, Harm Reduction, and Trauma Informed Care approaches into its housing and

¹¹ See examples in Filling the Gap: Volunteer Transportation Programs (https://www.sacog.org/sites/main/files/file-attachments/filling_the_gap_-_a_guide_to_volunteer_transportation_programs.pdf?1573582397)

supportive services. In Placer County, the Homeless Management Information System provides a coordinated platform for multiple agencies to assess and serve unhoused people. All 30 participating agencies can be found here.

Benefits

CES is meant to help people move through the system faster by reducing the amount of time they spend moving from one program to another before finding the right match. It can also reduce homelessness by offering prevention and diversion services upfront when that is the most appropriate solution, rather than entering the homelessness system. Like all programs, Placer County's Coordinated Entry program would benefit from periodic process and outcome evaluation in order to make continuous modifications and improvements.

Concerns

One substantial concern is the lack of clarity of who should take on the evaluation of the CES, as well as questions around where additional funding to undertake the process will be sourced.

4B. Implement regionally-compatible ordinances and law enforcement practices.

The Ad Hoc Group did not discuss this strategy but expressed support in prior meetings.

Background

There are different approaches to defining and enforcing camping and sit/lie/sleep ordinances across the region. These differences can create a situation in which unhoused individuals will gravitate to the community with the most lenient restrictions. The recent *Martin v. Boise* legislation created some judicial opinion about the legality of no-camping ordinances; but it also left many questions unanswered.

Benefits

Having a consistent, or at least coordinated, approach to these no-camping ordinances will allow Placer County to respond uniformly to the parameters of the *Martin v. Boise* decision. It will also make sure that each city is better able to leverage their existing resources in partnership with neighboring cities.

Concerns

Similar to the conversation around a regional approach to adopting housing siting criteria, each city in the county, regardless of how close in location, has a unique culture with particular needs and there is a potential that the emphasis on regional coordination will not allow for the nuance necessary for each jurisdictional context. Care will need to be taken to make sure that cities do not feel that their autonomy and responsibility to advocate for their own residents is threatened or overlooked in the efforts to create a shared regional approach.

4C. Designate an interjurisdictional task force to provide stewardship of, and advocacy for, the Strategic Action Plan.

The Ad Hoc Group did not discuss this strategy yet did not express reservations to it in prior meetings.

Background

A plan is only good if it is successfully implemented. After a path forward is agreed upon, the stakeholders must also delegate the implementation roles responsibilities for each component of the strategic action items.

Benefits

Everyone will benefit if there is clarity and accountability with respect to making sure that the actions are followed through in a timely and efficient manner.

Concerns

The follow through on the plan will take additional time and resources, both for ongoing meetings and for potential new roles or added workloads for existing positions. There is also concern that the people tasked with moving the plan forward might not have the authorizing authority or funding access needed to make key decisions, especially with mandates that exist across different jurisdictions and dependent on multiple funding sources.

Community Engagement

Increase public awareness, understanding and support regarding homelessness and the response strategies.

5A. Create regionally-coordinated, public information around homelessness.

Members of the Ad Hoc Group were **largely in favor** of this strategy.

Background

How we talk about addressing homelessness in our communities matters. But while researchers and practitioners have been developing significant evidence around what works programmatically and systemically, we often don't employ the most effective ways to talk about the work in order to inform individuals and communities about our efforts. That means we need all our communication to clearly broadcast **why** we do what we do—to talk openly about how actions align with our proposed outcomes.

Additionally, the people we are trying to engage in this work need to see themselves in the stories in order for them to understand and connect with their own roles. Stories need to be told about what addressing homelessness has meant to landlords, small business owners, and police officers, along with the many other champions and potential champions in our communities. Most people don't understand how a variety of federal, state, and local policies affect housing stability and homelessness. As a result, some may overestimate the connection between individual choices and homelessness or that there is nothing public agencies can do to prevent and end homelessness. In order to inform the community, regional stakeholders should develop a unified communications so that we can be sure that everyone has access to the same information and facts.

Benefits

To build momentum for change, it is necessary to connect all the dots of how our policy decisions affect individuals in ways that might push them into homelessness or make it difficult for them to exit homelessness. And we need to describe what would happen if those policy decisions changed. For example, when growing communities create new jobs, but housing development fails to keep up with the demand, lower-wage workers and retirees get priced out of the market, often with no place to go. For our neighborhoods to be vibrant, prosperous places where all people can thrive, we must make sure that local land use policies allow the supply of housing to keep up with demand. This intentional, collective approach can respond to community concerns or hone our strategic actions.

Concerns

An overly slick or uncomplicated public relations campaign can have the opposite effect of that which was intended, leading community members to feel insulted, ignored or manipulated. It is important that all communications remain honest and straightforward while resisting the temptation to simplify the issue or gloss over any controversial points. An additional concern might be that each city will want to have their own communication style and approach.

V. Next Steps

With this report's discussion of the benefits and concerns related to these potential desired outcomes and strategies – the first phase of this process draws to a close. In the next few months, many of the stakeholders who have been involved will be invited to continue their participation as we translate the strategies into specific initiatives. In addition, there will be a broader community dialogue, including presentations to the decision-making bodies in each of the jurisdictions, as well as two town-hall-style conversations in both south and mid-Placer with residents and businesses across the region. And throughout this process, there will continue to be opportunities to get feedback on the emerging strategies from people who are currently or previously served by our continuum of care.

Ultimately, Placer's Regional Homelessness Response will identify those strategies and actions that can be pursued in the near-term, including who will be engaged in their implementation, where the funding will come from and in what timeframe there can be measurable progress. It is hoped that all of this will be guided by a shared vision, operating principles, mutually desired outcomes and a commitment to working together to achieve those outcomes.

Communities across the U.S. are struggling with how to address the multi-faceted issues that contribute to homelessness; and Placer shares many of those struggles. But the region also has a robust and vital network of social services, health care and law enforcement programs to meet these challenges. And there are significant and time-sensitive funding programs to support many of the strategies. Clearly, this is a time of great need and great opportunity. In pursuing a strategic homelessness response, Placer will be positioned to strengthen its homelessness response and make a difference in the lives of many mid- and south-Placer residents.

VI. Appendices

Appendix A: Rosters of Stakeholder Groups Convened in Phase One of the Regional Homelessness Response Process

Appendix B: Summary of Existing Conditions

Appendix C: Preliminary Mapping of Homelessness Services and Resources

Appendix D: Preliminary Mapping of Housing Locations Near Priority Amenities

Appendix A: Rosters of Stakeholder Groups Convened in Phase One of the Regional Homelessness Response Process

Steering Group Members

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Todd	Leopold	Placer County	County Executive Officer
Shayne	Wright	Placer Co Sheriff's Office	Captain
Robert	Oldham	Homeless Resource Council of the Sierras	Health and Human Services Director, Interim Health Officer, Chief Psychiatrist
Amy	Ellis	HRCS	HHS Adult System of Care Deputy Director
Scott	Thurmond	HRCS	Continuum of Care Coordinator
Suzanne	Acrell	HRCS	Housing Analyst
Aldo	Pineschi	Independent	Consultant
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Brian	Heller de Leon	Kaiser Permanente	Public Affairs Director
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Mark	Wolinski	Roseville	Government Relations Administrator
Troy	Bergstrom	Roseville	Police Chief
Aly	Zimmermann	Rocklin	City Manager
Trent	Jewell	Rocklin	Police Captain
Kristine	Mollenkopf	Lincoln	City Attorney
Matt	Alves	Lincoln	Police Chief
John	Donlevy, Jr.	Auburn	City Manager
Ryan	Kinnan	Auburn	Police Chief
Sean	Rabé	Loomis	Town Manager
Wes	Heathcock	Colfax	City Manager
Bekki	Riggan	Placer County	Deputy County Executive Officer
Raúl	Martínez	Placer County	Health and Human Services Assistant Director

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Bruce	Houdeshelt	Roseville	Vice Mayor
Jill	Gayaldo	Rocklin	Mayor
Bill	Halldin	Rocklin	Vice Mayor
Alyssa	Silhi	Lincoln	Mayor
Paul	Joiner	Lincoln	Council Member
Matt	Spokely	Auburn	Mayor
Daniel	Berlant	Auburn	Council Member
Jennifer	Knisley	Loomis	Mayor Pro Tempore
Danny	Cartwright	Loomis	Council Member
Marnie	Mendoza	Colfax	Council Member
Trinity	Burruss	Colfax	Mayor Pro Tem

Appendix B: Summary of Existing Conditions

In the first two months of the process, the project team conducted a review of the current system of services and resources in the mid- and south-Placer region, along with a survey of best practices with respect to homelessness response around California and the nation. The results of those studies were presented in the Existing Conditions Report (MIG, September 2021, available upon request). The following is an executive summary of that report.

A Snapshot of Homelessness in Placer County

Based on the latest data (2020), Placer County experiences the lowest rate of homelessness in northern California, the fourth-lowest rate of homelessness in the state, and the lowest rate of unsheltered homeless in the state. Since the report prepared by Dr. Robert Marbut in 2015¹² that documented his study of homelessness in Placer County, the region has increased its capacity of beds and services, which has helped bring down the chronic rate of homelessness. At the same time homelessness and blight have become more visible due to a variety of factors including the COVID pandemic, which has created a number of issues from economic stress to health concerns. There have been strains on our shelters as currently configured, and recent court rulings have established the right to camp when insufficient bed options are available. Additionally, there are a small group of individuals who decline services and who regularly use resources in our criminal justice and healthcare system.

Key pieces of supportive data include:

From the Roseville Point in Time survey 2020

- **73%** lived in Placer County for over a year before becoming homeless

From the most current HMIS¹³ data (July 1, 2020 to June 30, 2021)

- **1,168 individuals** actively homeless
- **29.3%** were experiencing chronic homelessness¹⁴
- **70.7%** were experiencing non-chronic homelessness.
- Of the total, **590 or 51%** of those actively homeless reported having a disability.
- **78** people were returning to homelessness from permanent housing.

¹² 'Homeless Needs Assessment and Action Plan for Placer County' by Marbut Consulting: Robert G. Marbut Jr., Ph.D. and Shaun Lee, MSW, MBA, March 30, 2015

¹³ A Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness. HMIS draws from a by-name list of people experiencing homelessness in the Placer community. HMIS and the by-name list represent several different sources that can help paint a picture of homelessness and, like any source, come with caveats. For instance, while the by-name list strives for real-time information there may be more current information around housing obtainment that might not be updated. Moreover, it is common for people to go in and out of suitable housing, and those periods of suitable housing may not be captured in HMIS.

¹⁴ Chronic Homelessness is defined as having a disability and living in a shelter, safe haven, or place not meant for human habitation for twelve continuous months or for four separate occasions in the last three years.

- **223** people had reconnected with HMIS after a period of being inactive or non-responsive to services.
- **446** individuals were housed into permanent supportive housing or a permanent destination.

The distribution of permanent supportive housing units across Placer County shows a higher concentration in Roseville and Auburn. Currently, the inventory of Placer County beds spans the spectrum from emergency housing to long-term permanent housing.

Best Practices and Current Services in Placer County

The “best practice” model for identifying effective approaches has proven successful through rigorous scientific research in other fields and can be adapted and applied to the context of addressing homelessness. The full report includes a brief overview of the current best practice strategies currently being used to address homelessness, as well as appendix with an inventory of Existing Efforts in Placer County.

Issues and Opportunities

This project examined and assessed the County’s status of homelessness response in five impact categories and developed an initial list of issues and potential opportunities within each, with the issues more briefly summarized here:

Prevention: *Addressing the factors and root causes that lead to homelessness, including domestic violence, job loss/unemployment, foster care emancipation, health crises, substance abuse/addiction or other behavioral health challenges.*

There are many resources that seek to prevent individuals and families from losing their homes -- financial assistance, job training and placement programs, family support and social services, including drug treatment and mental health counseling. With the COVID-19 pandemic disrupting the economy more individuals and families found themselves in financial hardship, even with extended unemployment benefits, direct payments and moratorium on housing evictions.

Crisis Response *(including outreach, engagement, intake, assessment and referral): Meeting people where they are and assessing their needs; identifying and connecting to appropriate resources and systems.*

Law enforcement personnel often have the most contact with the chronically homeless population, providing an important point of contact for the latest information and referral. It is of critical importance that there are enough points of contact with unhoused individuals and that personnel are trained and equipped for interfacing with these individuals, including having access to the services and supports available to meet their needs.

Housing and Supportive Services: *Providing shelter and housing -- from emergency shelter to transitional to permanent supportive housing -- and services to stabilize and support (i.e., recovery, mental health, medical, job training, food and clothing, financial assistance, case management).*

In our interviews with shelter residents, they noted that the chronic issues of mental health and substance abuse are key factors that prevented individuals from sustaining shelter and the means for supporting themselves. Among those interviewed were law enforcement personnel, including some who expressed frustration with homeless people who they report as unmotivated to change their situation. Some believe that the incentives (or the system) may not always encourage chronically homeless individuals to make use of shelter or housing options. Interviewees agreed that those who have lifted themselves out of homelessness have had to be tireless self-advocates.

Integrative Programs and Systems: *Knitting together the services, programs, and resources into a single system of support; sharing information to avoid duplication, increase impact, and leverage funding opportunities.*

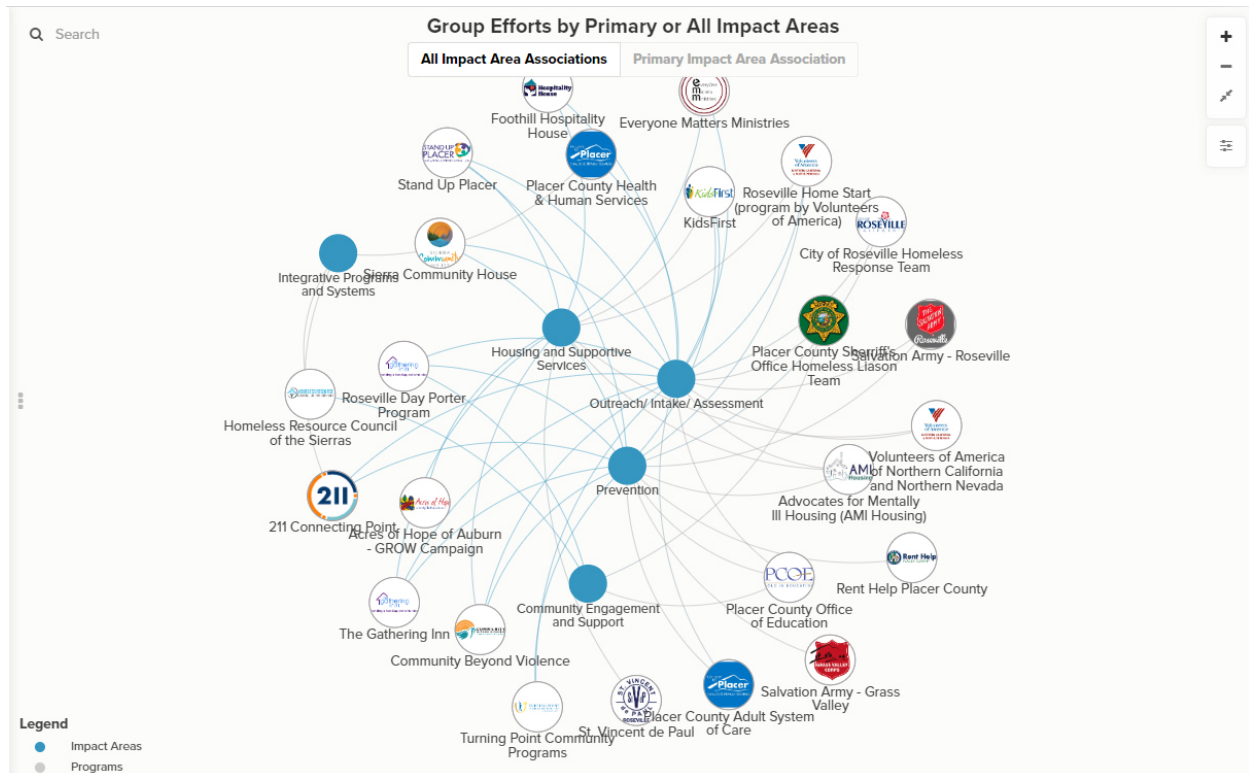
The Homeless Resource Council of the Sierras, as the U.S. Department of Housing and Urban Development (HUD)-designated Continuum of Care consortium for Nevada and Placer Counties, is charged with promoting regional coordination in homelessness services. They meet monthly and report on activities from the health and human services, education, and housing perspectives. There is an opportunity for enhancing coordination across the region by providing more visibility and more direct interface with decisionmakers and other partners.

Community Engagement:

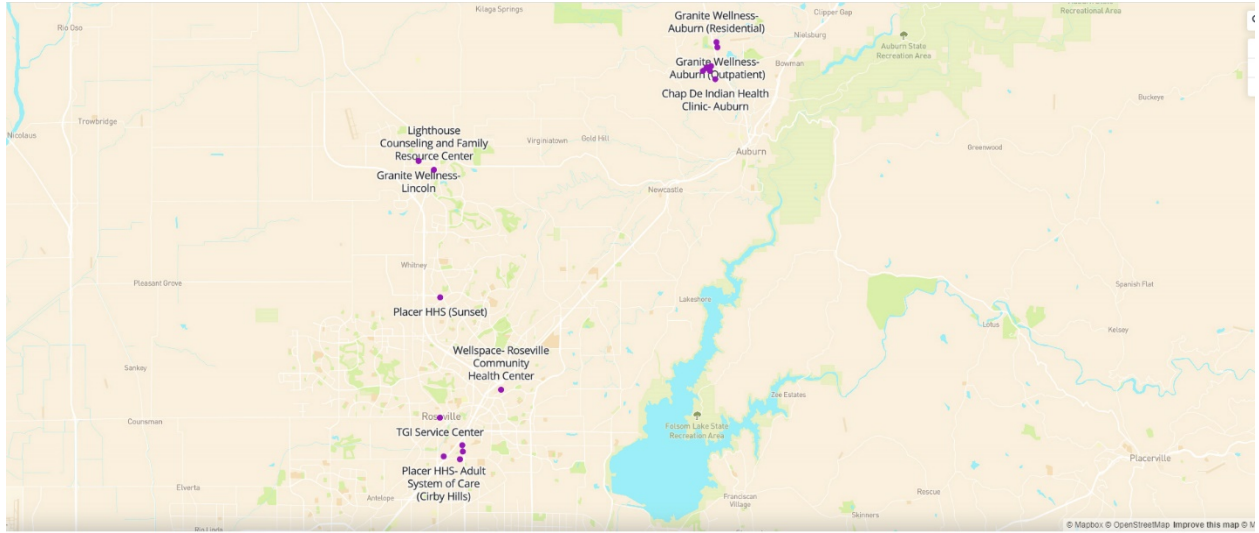
Many Placer County residents are sympathetic to the homeless population, yet express concern about housing and service options that are located within residential neighborhoods. There have been some widely publicized examples of community resistance fueled by a perceived lack of transparency in siting homeless services and facilities. There is a need to increase engagement and education of landlords to prevent evictions and improve tenant-landlord relationships over time, as well as communication efforts that invite community members to engage on homelessness issues and solutions.

Appendix C: Preliminary Mapping of Homelessness Services and Resources

MIG created a database of local programs and resources connected to homelessness response and used that to populate a geolocation map and network map. These tools are dynamic and can be used to illustrate and support coordination and service referrals.



<https://kumu.io/MIG/placer-county-homelessness-solution#service-locations>



Placer County Service Locations
migcom

Design your own maps with Mapbox Studio [Sign up](#)

https://api.mapbox.com/styles/v1/migcom/ckvb4um1g0aip14pax2m0z9u5.html?title=view&access_token=pk.eyJ1ljoibWlnY29tliwiYSI6ImNrUllYc3MifQ.isgDkadcGHvdQKkSC1ohfQ&zoomwheel=true&fresh=true#10.58/38.8324/-121.1525

Appendix D: Preliminary Mapping of Housing Locations Near Priority Amenities

