FORGING AHEAD TOWARDS PREVENTING AND ENDING HOMELESSNESS

An Update to Contra Costa’s 2004 Strategic Plan

Contra Costa Interagency Council on Homelessness

October 2014
TABLE OF CONTENTS

Letter from CCICH Chair Teri House 3
Acronyms 4
Development of the 2014 Strategic Plan Update 5
How to Use This Plan 7
Outcomes and Achievements of 2004 Strategic Plan 8
The Current Landscape of Homelessness in Contra Costa 10
Guiding Principle 12
Goal 1: Permanent Housing 13
Goal 2: Prevention 17
Strategy 1: Coordinated Assessment 19
Strategy 2: Performance Standards 21
Strategy 3: Communication 23
Forging Ahead: A Call to Action 24
Acknowledgements 25
Appendix A: Annual Action Plan Template 26
Appendix B: Outreach Tools 28
Dear friends,

This year, you all have demonstrated your commitment to preventing and ending homelessness in the communities of Contra Costa County by actively participating in our 2014 Strategic Plan Update process. I would like to thank each of you for supporting the efforts of the Council on Homelessness, the Strategic Plan Ad Hoc Committee, and Homeless Program staff to renew our 2004 Ten Year Plan with the latest data, best practices, and community feedback.

Our 2004 plan, Ending Homelessness in Ten Years: A County-Wide Plan for the Communities of Contra Costa County, has served us well in uniting as a Continuum of Care to develop a county-wide response to homelessness. In that time, we’ve seen the Housing First approach take hold in CoCs across the nation, promoted by the U.S. Interagency Council on Homelessness, the Department of Housing and Urban Development, and the National Alliance to End Homelessness, among others.

Our 2014 Strategic Plan Update, Forging Ahead Towards Preventing and Ending Homelessness, reaffirms our commitment to the Housing First approach by establishing this Guiding Principle, the key theme emerging from our update process:

*Homelessness is first a housing issue, and necessary supports and services are critical to help people remain housed. Our system must be nimble and flexible enough to respond through the shared responsibility, accountability, and transparency of the community.*

Using our 2004 plan as a foundation, Forging Ahead identifies and describes two goals and three strategies for the implementation of this Guiding Principle:

- Goal 1: Permanent Housing
- Goal 2: Prevention
- Strategy 1: Coordinated Assessment
- Strategy 2: Performance Standards
- Strategy 3: Communication

Read on to learn the details of each of these goals and strategies.

Thank you to all of our key community stakeholders for contributing your thoughts and time to Forging Ahead. The Council on Homelessness looks forward to continuing the conversation we’ve been having this year as we begin the work of implementing the goals and strategies of this Strategic Plan Update.

Sincerely,

Teri House
Chair, Contra Costa Interagency Council on Homelessness
## ACRONYMS

<table>
<thead>
<tr>
<th>ACRONYM</th>
<th>DEFINITION</th>
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<tbody>
<tr>
<td>AHAR</td>
<td>Annual Homeless Assessment Report</td>
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<td>APR</td>
<td>Annual Performance Report (for HUD homeless programs)</td>
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<tr>
<td>CDBG</td>
<td>Community Development Block Grant (CPD program – federal)</td>
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<td>CSBG</td>
<td>Community Services Block Grant</td>
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<tr>
<td>Continuum of Care</td>
<td>Continuum of Care approach to assistance to the homeless</td>
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<td>CoC</td>
<td>Federal grant program stressing permanent solutions to homelessness</td>
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<tr>
<td>Con Plan</td>
<td>Consolidated Plan, a locally developed plan for housing assistance and urban development under CDBG and other CPD programs</td>
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<td>CPD</td>
<td>Community Planning and Development (HUD Office)</td>
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<td>ESG</td>
<td>Emergency Solutions Grant (CPD – federal program)</td>
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<td>FMR</td>
<td>Fair Market Rent (maximum rent for Section 8 rental assistance/CoC grants)</td>
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<td>HCD</td>
<td>Housing and Community Development (State office)</td>
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<td>HEARTH</td>
<td>Homeless Emergency and Rapid Transition to Housing (HEARTH) Act of 2009</td>
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<td>HPRP</td>
<td>Homeless Prevention and Rapid Re-Housing</td>
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<td>HMIS</td>
<td>Homeless Management Information System</td>
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<td>HOME</td>
<td>Home Investment Partnerships (CPD program)</td>
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<td>HOPWA</td>
<td>Housing Opportunities for Persons with AIDS (CPD program)</td>
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<td>HUD</td>
<td>U.S. Department of Housing and Urban Development (federal)</td>
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<td>Mental Health Services Act</td>
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<td>NOFA</td>
<td>Notice of Funding Availability</td>
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<td>PHA</td>
<td>Public Housing Authority</td>
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<td>SAMHSA</td>
<td>Substance Abuse &amp; Mental Health Services Administration</td>
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<td>SNAP'S</td>
<td>Office of Special Needs Assistance Program (HUD office overseeing CoC)</td>
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<td>SOAR</td>
<td>SSI/SSDI Outreach, Access, and Recovery (SSI/SSDI Application program)</td>
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<td>SRO</td>
<td>Single-Room Occupancy housing units</td>
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<td>SSA</td>
<td>Social Security Administration</td>
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<td>SSDI</td>
<td>Social Security Disability Income</td>
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<td>SSI</td>
<td>Supplemental Security Income</td>
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<td>TA</td>
<td>Technical Assistance</td>
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<td>TANF</td>
<td>Temporary Assistance to Needy Families</td>
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<tr>
<td>TAY</td>
<td>Transition Age Youth (usually ages 16-24)</td>
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<tr>
<td>VA</td>
<td>Veterans Affairs (U.S. Department of)</td>
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<td>VASH</td>
<td>Veterans Affairs Supportive Housing</td>
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Forging Ahead Towards Preventing and Ending Homelessness is the result of a community process to renew our vision for homeless housing and services in Contra Costa County. In late 2013, the Contra Costa Interagency Council on Homelessness (CCICH) Executive Committee began to develop a process to update our 2004 plan, Ending Homelessness in Ten Years: A County-Wide Plan for the Communities of Contra Costa County.

The 2004 plan articulated five reasons why Contra Costa developed its original ten-year plan:

- Because after almost 20 years of work responding to homelessness in this community, the nonprofit housing and service agencies, the County Departments delivering health care, social services and housing, and the cities know without a doubt that **it is necessary to end this extreme and devastating form of poverty**.

- Because all of us also understand that **the costs of doing nothing or too little are too high**.

- Because reaching the goal of truly ending homelessness in our County requires **a new way of doing things and a new degree of collaboration** involving all sectors of the community.

- Because having a concrete plan for ending homelessness positions this community to **take maximum advantage of federal resources for homelessness**.

- Because a **Plan provides the framework for aligning all efforts throughout the community**, and a starting point to work together on determining how we will carry out this system-wide change.

These reasons continue to hold true for the development of **Forging Ahead**, with two additions:

- Because the **landscape of homelessness in Contra Costa has changed** over the past decade.

- Because **new evidence-based practices and approaches** can enhance our original framework.

This section describes the process undertaken in 2014 to update the 2004 plan, including the significant outreach efforts that took place to ensure that the voices of all stakeholders in Contra Costa—service providers, consumers, advocates, government agencies, and the community at large—were included in the process.

### 2014 STRATEGIC PLAN UPDATE PROCESS

**Forging Ahead** has been developed through the following process:
The 2014 Strategic Plan Update process has focused on five key modules:

- Permanent Housing
- Prevention
- Coordinated Assessment
- Performance Standards
- Communication

Guided by the CCICH Executive Committee, the 2014 Strategic Plan Update process has included monthly meetings of a Strategic Plan Ad Hoc Committee, supplemented by outreach to key stakeholder groups through interviews, surveys, and focus groups. The process has followed this timeline from March – October 2014:

**OVERVIEW OF OUTREACH EFFORTS**

The 2014 Strategic Plan Update process has focused on extensive community outreach to four key stakeholder groups: executive leadership, program staff, consumers, and targeted community groups.

- **Strategic Plan Ad Hoc Committee**: Monthly meetings with homeless service providers from throughout the Continuum of Care (CoC) focusing on five key modules: housing; coordinated intake and assessment; prevention, services, and other supports; performance measures; and communication.

- **Focus Groups**: Small focus groups with consumers and key leadership, including AB 109, hospitals and health clinics, HUD programs, and service providers to discuss issues related to the five key modules.

- **Key Stakeholder Interviews**: One-on-one interviews with community-based organizations and government officials representing schools, veteran services, the faith-based community, victims of domestic violence, behavioral health, physical health, libraries, flood control, and other services.

- **Con Plan Survey**: A survey of needs for the development of the 2015-2020 Contra Costa Consortium Consolidated Plan, which included questions on homelessness in partnership with the CoC.

A list of involved stakeholders who contributed to the 2014 Strategic Plan Update process is included in the Acknowledgements section of this plan.
Forging Ahead Towards Preventing and Ending Homelessness is meant to be a part of a set of living documents that capture the goals and strategies of the Contra Costa Continuum of Care.

This plan is not a standalone document, but rather should be read along side the current year’s Annual Action Plan (see template in Appendix A), which will guide the work of the Contra Costa Continuum of Care and inform the decisions of the CCICH Executive Committee, providing an annual framework for the implementation of the concepts contained in this plan.

Together, Forging Ahead and the Annual Action Plan will set benchmarks and action steps to track progress on our permanent housing and prevention goals in support of our Guiding Principle.

AN OVERVIEW OF FORGING AHEAD

- **Outcomes and Achievements of 2004 Strategic Plan:** reviews the priorities of our 2004 plan, and highlights key outcomes and achievements from the past ten years
- **The Current Landscape of Homelessness in Contra Costa:** provides an analysis of homelessness demographics and trends in Contra Costa based on the most recent, complete data available
- **Guiding Principle:** describes the overall vision for preventing and ending homelessness in Contra Costa
- **Goal 1: Permanent Housing:** information on the Housing First approach, barriers to housing, public housing authorities, key subpopulations, and moving on strategies as related to our permanent housing goal of decreasing the length of time people experience homelessness
- **Goal 2: Prevention:** identifies key principles of prevention, early identification and education strategies, and intervention types (prevention, diversion, and retention) to meet our prevention goal of decreasing the percentage of people who become homeless
- **Strategy 1: Coordinated Assessment:** an overview of the key principles of Contra Costa’s coordinated assessment strategy, proposed access model, and standardized assessment tool
- **Strategy 2: Performance Standards:** a summary of performance measures being used locally and nationally to track our progress, and standards of practice to support our goals
- **Strategy 3: Communication:** identifies technological opportunities to disseminate our message to the community and expand upon key partnerships
OUTCOMES AND ACHIEVEMENTS OF 2004 STRATEGIC PLAN

Over the past ten years since the release of our 2004 strategic plan, the Contra Costa Continuum of Care has worked hard to improve access to housing and services for individuals and families experiencing homelessness in our county. This section reviews the priorities of our 2004 plan, and highlights key outcomes and achievements from the past ten years.

The 2004 plan outlines five Plan Priorities to end homelessness in Contra Costa County:

1. Help homeless people (re-)gain housing as soon as possible
2. Provide integrated, wraparound services to facilitate long-term residential stability
3. Help people to access employment that pays a “housing wage”
4. Conduct outreach to link chronically homeless people with housing, treatment, and services
5. Prevent homelessness from occurring in the first place

In the past ten years, significant progress has been made, including the following key achievements:

- **A 40% increase in HUD CoC Program federal funding**, to $10,522,601 in FY2013
- The implementation of a **Homeless Management Information System** (HMIS) to track client information and outcomes throughout the homeless response system, with
  - Standardized intake and exit forms
  - An **86% bed coverage rate**, and
  - Participation by 117 programs in 22 agencies
- **Development of robust discharge planning policies** for persons exiting institutions such as mental health facilities, foster care, hospitals, prisons and jails.
- **Improved coordination with related systems of care** such as Veterans Affairs and Emergency Solutions Grants
- **Expansion of variety of housing and services provided**, including:
  - Outreach
  - Prevention
  - Rapid Rehousing

TOTAL SERVED OVER TIME

![Graph showing the total served over time from 2008 to 2013]
• Increases in the number of individuals and families served by the Continuum of Care (CoC), including:
  - A 38% increase in the total number of persons served from 2008 to 2013
  - Increases in housing and services provided

Note: The increased in number of consumers served over time is likely a reflection of greater collaboration with partners in HMIS and not an indication that there was an increase in the number of homeless individuals in the county.

Note: these are not unduplicated numbers; individuals may have utilized more than one of these homeless CoC programs in the given year.
THE CURRENT LANDSCAPE OF HOMELESSNESS IN CONTRA COSTA

Forging Ahead reframes our goals and strategies based on the latest information available. The current landscape of homelessness in Contra Costa is as follows for fiscal year 2013-2014, the most recent, complete data available for analysis during the 2014 Strategic Plan Update process.

LANDSCAPE OF HOMELESSNESS IN CONTRA COSTA: FY 2013 – 2014

SNAPSHOT OF WHO IS EXPERIENCING HOMELESSNESS*

- 6,601 individuals in 6,140 households
- 35% are newly homeless
- 23% of homeless households include children
- 37% are children or Transition Age Youth (TAY)
- 11% are veterans

IMPORTANT CHARACTERISTICS

- 37% are chronically homeless
- 36% have a mental health disability
- 29% have a medical/health condition
- 25% have alcohol abuse issues
- 28% have drug abuse issues

WHAT WE KNOW ABOUT OUR POPULATION

Thanks to the expansive participation in our HMIS by service providers throughout the CoC, we know a lot about the population we are serving. These are some of the key takeaways:

- **There are many youth in the system**
  - More Transitional Age Youth (TAY) served over time
  - Families are increasingly unable to support TAY

- **Mental health and substance use affects a significant portion of the population**

- **The number of newly homeless and families is decreasing** over time
  - Reflects efforts in prevention and rapid rehousing with stimulus funds
  - Signs of economic recovery

- **Migration of encampments from West to East County**
  - Strategies to support homeless population vary city to city

- **We still have a shortage of shelter beds and permanent housing**
  - Housing remains unaffordable for low and extremely low income households

* This includes formerly homeless individuals who may be utilizing support service programs to maintain housing.
While the total numbers of the subpopulations we are serving have increased, there were varying shifts from 2008 to present when the recession hit in 2009, and when stimulus funding became available under the American Recovery and Reinvestment Act of 2009 (ARRA).
“I just never pictured myself homeless. No one thinks about it until they’re here. Once you’re there, you’re homeless with everyone else in the world.”

- Consumer Focus Group Participant

We know what it takes to end homelessness: housing.

Contra Costa agrees that, at its core, homelessness is first a housing issue, and that necessary supports and services are critical to help people remain housed. With the right resources in place, we can forge ahead towards preventing and ending homelessness.

To accomplish this, we have developed the following Guiding Principle, which captures our overall vision for preventing and ending homelessness in Contra Costa County.

**Guiding Principle**

*Homelessness is first a housing issue, and necessary supports and services are critical to help people remain housed. Our system must be nimble and flexible enough to respond through the shared responsibility, accountability, and transparency of the community.*

The two goals and three strategies that follow were developed and refined through the 2014 Strategic Plan Update process to identify the tools that Contra Costa will use to further this Guiding Principle.

Following the release of *Forging Ahead*, the CCICH Executive Committee will guide the development of annual benchmarks and action steps, providing a framework for the work of the Contra Costa Continuum of Care, including systems change decisions about funding, priorities, and identified needs.
GOAL 1: PERMANENT HOUSING

“We need more than affordable housing—we need housing that is affordable.”

- Homeless Service Provider Focus Group Participant

In alignment with the Housing First approach articulated in the Guiding Principle, we have identified Permanent Housing as a primary goal of Forging Ahead.

Permanent Housing Goal:
Decrease the length of time people experience homelessness.

A Question of Capacity

To decrease the length of time people experience homelessness, we need additional housing stock. An analysis of Contra Costa’s shelters and housing based on the numbers reported in the 2013 Housing Inventory Chart shows the following housing inventory:

- 410 emergency shelter beds
- 648 transitional housing beds
- 867 permanent supportive housing units

However, 1,925 beds will not support the 3,798 individuals who were experiencing homelessness on a single night in January 2013, including 1,350 individuals living unsheltered.

Accordingly, our Permanent Housing Goal emphasizes the Housing First approach, as well as addressing barriers to housing, promoting key partnerships, serving key subpopulations, and exploring effective program models. The following strategies and priorities were identified to supplement the guidance in our Ten Year Plan.

The Housing First Approach: Providing Housing as Quickly as Possible

Our 2004 plan emphasized the Housing First approach, which has gained considerable momentum and national attention in the past 10 years. A key feature of Opening Doors, the United States Interagency Council on Homelessness 2010 Federal Strategic Plan to Prevent and End Homelessness, Housing First:

- Minimizes barriers to housing access or preconditions of housing readiness, sobriety, or engagement in treatment;
- Assists participants to move into permanent housing quickly;
- Provides the intensive supportive services needed to help residents achieve and maintain housing stability and improvements in their overall conditions; and
- Seeks to “screen in” rather than “screen out” and end homelessness for people with the greatest barriers to housing success.

2004 PLAN IN FOCUS

“National research as well as local experience demonstrate that a Housing First approach of getting people into housing as quickly as possible and then providing the support and services they need to maintain it leads to long-term stability and enhanced self-sufficiency.”
In alignment with the Housing First approach, and building upon the concepts in our 2004 Plan (see box at right), we have identified the following **principles to support our Permanent Housing Goal**:

- Homelessness is first and foremost a housing problem and should be treated as such.
- Housing is a right to which all are entitled regardless of need.
- Everyone is “housing ready” with the appropriate level of support to prepare for housing—the onus on the provider, not the client.
- Transparency and flexibility in project eligibility are key.
- The most appropriate housing model may change over the course of a person’s lifecycle.

### Barriers to Housing: Overcoming Entry & Housing Attainment Barriers

A 2013 survey of homeless service providers in Contra Costa showed that income (employment, benefits, or both) and the capacity for self-care are the two biggest potential “screen out” factors for programs. In addition, common basic eligibility criteria include homeless status, a mental health diagnosis, chronic homeless status, and household type (e.g., families with children). **Reducing these barriers to entry into our continuum of housing and services** will enable us to reduce the length of time people experience homelessness.

**Persons experiencing homelessness “do not have sufficient funds to even get into low-income housing. Those who have funds for rent, don’t have funds for the high deposits. Section 8 is filled up everywhere.”**

- Homeless Service Provider Interview

In addition to financial barriers to housing, homeless persons also face other barriers such as eviction histories, poor or no credit, criminal records, limited rental histories, poor landlord references, and discrimination. This often means that homeless households cannot pass standard tenant screening criteria, and therefore find themselves at a competitive disadvantage relative to other low-income tenants in Contra Costa’s tight rental markets.

To address these barriers to private market housing, and thereby reduce the length of time people experience homelessness, **strategies for recruiting private market landlords** will include the development of marketing tools, addressing financial barriers by utilizing mainstream and non-traditional funding sources for move-in costs, offering landlord incentives and protections, providing temporary rental assistance, and limited targeting permanent housing resources to clients with the highest barriers to entry and housing attainment.

### Public Housing Authorities: Key Partnership for Housing Assistance

Another key strategy for reducing the length of time people experience homelessness is to promote partnerships with Public Housing Authorities, including the Housing Authority of Contra Costa County, the Housing Authority of the City of Pittsburg, and the Richmond Housing Authority.
Waitlist management was another issue identified, which will be addressed in the Coordinated Assessment strategy later in this plan.

An analysis of available housing stock owned by the housing authorities that may be sitting vacant throughout Contra Costa County may help to address the housing capacity issue identified above.

**Key Subpopulations: Chronic Homelessness, Veterans, Families and Youth**

The following population-specific strategies have been identified for the key subpopulations of persons experiencing chronic homelessness, veterans, and youth and families.

“It is really hard to solve chronic homelessness. Once that becomes an intergenerational thing, it becomes so much harder to break that down. Thinking about children with single homeless parents, it is really hard to break the cycle. There has been a surge in young adults. That has me very worried.”

- Multifaith Action Coalition Housing & Shelter Subcommittee Focus Group

<table>
<thead>
<tr>
<th>KEY SUBPOPULATIONS</th>
<th>PERMANENT HOUSING STRATEGIES</th>
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| CHRONIC HOMELESSNESS     | • Increase the number of CoC Program-funded permanent supportive housing beds that are dedicated to persons experiencing chronic homelessness  
                           • Prioritize non-dedicated permanent supportive housing beds for use by persons experiencing chronic homelessness                                                                                   |
| VETERANS                 | • Work with Public Housing Authorities and VA Medical Centers to prioritize VA eligible chronically homeless veterans for HUD-VASH and other VA programs (medical services, SSVF)  
                           • Identify and prioritize HUD-funded programs for veterans that are ineligible for VA services                                                                                                                              |
| FAMILIES AND YOUTH       | • Strategically connect families to short- or long-term rental assistance (including rapid rehousing) or affordable housing, benefits, and community-based supports  
                           • Improve the youth Point-in-Time Count to collect better data about minors and Transition Age Youth (TAY)  
                           • Strengthen partnerships with schools, the child welfare system, the juvenile justice system, and runaway and homeless youth providers to promote a youth-informed system of care |
Moving On Strategies for Permanent Supportive Housing

In light of the limited availability of permanent supportive housing (PSH) units, a key strategy to reduce the length of time people experience homelessness to facilitate the ability of persons in PSH units who have stabilized to graduate to other housing with less intensive services and housing supports. This frees up PSH units for new clients in need of intensive services, by helping clients to identify a new subsidy for housing, locate new housing, and pay for the cost of moving.

Homeless service providers identified the offering of alternate resources as a critical component of this strategy, to combat the barrier to graduation of a perceived loss of PSH benefits and a general reluctance to leave staff, friends, neighborhood, and community. Incentives to pursue self-sufficiency coupled with the offering of alumni groups and other supports will combat these barriers.

Forging Ahead: Permanent Housing Goal in Practice

Following the release of Forging Ahead, the Contra Costa Continuum of Care will work with key stakeholders to develop annual benchmarks and action steps to work on the Permanent Housing goal of decreasing the length of time that persons experience homelessness in Contra Costa County. Benchmarks will be measurable and tracked through the Performance Standards strategy described later in this plan. Action steps will build upon the strategies identified in this plan.
GOAL 2: PREVENTION

“We’ve been studying the issue and listening to various reports from the County and other agencies. It’s become clear that it makes financial sense to focus our efforts on preventing homelessness in the first place.”

- Interview with Interfaith Council of Contra Costa County

As articulated in our 2004 plan, to promote the most effective use of limited resources and reduce the number of people experiencing the trauma and dislocation of homelessness, Prevention is a primary goal of Forging Ahead.

**Prevention Goal:**
Decrease the percentage of people who become homeless.

**Principles of Prevention**

There are a number of best practices and community examples for preventing homelessness that Contra Costa can implement and expand, as supported by the following key principles:

- **Crisis resolution**: any situation that could result in homelessness is a crisis, and must be addressed rapidly and with an emphasis on personal safety.

- **Client choice, respect, and empowerment**: prevention services should help clients to regain a sense of control in spite of the crisis they are experiencing.

- **Provide the appropriate level of assistance needed possible for wellness and recovery**: provide essential services in alignment with the goal of decreasing the percentage of people who become homeless.

- **Maximize community resources**: provide a baseline of support through connections to mainstream resources.

- **The right resources to the right people at the right time**: the earlier the intervention, the lower the cost of assistance.

**Early Identification and Education Strategies**

- Develop a **prevention flyer** that is included in paperwork when clients sign leases that provides information on available prevention assistance.

- **Coordinate with utility companies** to notify clients of available prevention assistance when they get behind on their utility bills.

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**2004 PLAN IN FOCUS**

- **Expand existing prevention services**, including emergency rental assistance, case management, housing search assistance, legal assistance, landlord mediation, money management and credit counseling.

- **Improve early identification and intervention efforts** by mainstream health and social service agencies who are often in touch with households at-risk.

- **Enhance discharge planning efforts** so that people leaving the criminal justice system, foster care, hospitals, mental health programs and drug and alcohol treatment programs are not released into homelessness.
### Intervention Types

Under our Prevention goal are three related interventions: prevention, diversion, and retention. The achievement of the Forging Ahead goal of decreasing the percentage of people who become homeless requires the use of all three interventions, depending on the situation of the person in crisis.

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<tr>
<th>INTERVENTION</th>
<th>SERVICES &amp; SUPPORTS (IN ALL INTERVENTIONS)</th>
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<tbody>
<tr>
<td>PREVENTION</td>
<td>• Rental Assistance (short- or medium-term)</td>
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<td>• Financial Assistance</td>
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<td>o Rental Application Fees</td>
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<td>o Security Deposits</td>
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<td>o Last Month’s Rent</td>
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<td>o Rental/Utility Arrears</td>
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<td>o Moving Costs</td>
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<td>o Car Repair</td>
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<td>o Critical Family Needs</td>
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<td>DIVERION</td>
<td>• Services</td>
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<td>o Housing Search and Placement</td>
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<td>o Housing Stability Case Management</td>
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<td>o Conflict Resolution / Mediation</td>
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<td>o Legal Services (including fair housing</td>
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<td>o Public Assistance Programs</td>
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<td>RETENTION</td>
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Forging Ahead: Prevention Goal in Practice

Following the release of Forging Ahead, the Contra Costa Continuum of Care will develop annual benchmarks and action steps to work on the Prevention goal of decreasing the length of time that persons experience homelessness in Contra Costa County. Benchmarks will be measurable and tracked through the Performance Standards strategy described later in this plan. Action steps will build upon the strategies identified in this plan, including engagement with the major public and private systems in which persons experiencing homelessness interact when lacking other alternatives.

2004 PLAN IN FOCUS

“Not only is prevention the most humane approach, it also is the most cost-effective way to help those on the verge of losing their housing. The indignity and marginalization that comes with the fall into homelessness is deeply damaging, and exacerbates any other problems. As a result, the service costs necessary to help people back into housing and to address the damages caused by the experience of homelessness are much higher than the costs of simply preventing its occurrence.”
In support of the two goals of Forgiving Ahead—permanent housing and prevention—the Strategic Plan Update process has also identified three supporting strategies: coordinated assessment, performance standards, and communication. The Continuum of Care began coordinated assessment planning in 2014, kicking off a three-phase process of planning, piloting and evaluation, and full implementation.

Coordinated Assessment Strategy:
*Implement a coordinated assessment system to streamline access to housing and services while addressing barriers, getting the right resources to the right people at the right time.*

Coordinated Assessment Under the HEARTH Act

Coordinated assessment is a requirement of the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009 for all CoC and ESG programs. The CoC Interim Rule defines it as:

“A centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals.

A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.” (Sec. 578.3)

While coordinated assessment is a requirement for the CoC, in Contra Costa it is an opportunity to initiate systems change thinking about our homeless response system, shifting from an ad hoc access and assessment process that takes place program by program, to a standardized access and assessment process for all clients with a coordinated referral process that includes prevention, housing, and supportive services.

Contra Costa has identified the following key principles for its coordinated assessment system:

- **Quality Assurance**: the coordinated assessment system must have a mechanism for ongoing, regular quality assurance to ensure consistency in tools, standards, and staff trainings.

- **Access** should be easy, fast, and have immediate engagement.

- **Interdependency**: the coordinated assessment system will promote interdependency
  - **Between programs**, by promoting trust about assessments, referrals, and warm handoffs, and
  - **Between programs and clients**, as clients are connected to the right intervention with choice.
• **Streamline the process** for clients and front line staff by reducing the number of times clients are asked the same questions throughout the system of care.

• **Address Barriers**: promotion of the Housing First approach, connecting the clients with the highest level of acuity to the most intensive housing and service interventions.

> “In terms of coordinated assessment, we always say we don’t have capacity but what we really don’t have is coordination. The services exist—we just don’t have an effective way of delivering all those services to one client when they’re needed, through access and receipt of proper services.”

> - Homeless Service Provider Focus Group Participant

**PROPOSED ACCESS MODEL: MULTI-SITE COORDINATED WITH PHONE & OUTREACH**

- Multi-site physical locations that are natural service hubs for walk-in assessment and referral
- Virtual, telephone-based system that is complimentary with current system
- Phone system to triage and funnel people to multi-site centers at natural locations in the county
- Outreach component for persons not accessing system via phone or physical sites

**Standardized Assessment Tool**

The assessment phase of coordinated assessment is used to gather information to determine the best immediate next step for a person experiencing homelessness, or who is at risk of become homeless. Using a standardized assessment tool will allow Contra Costa to make better referrals by connecting clients to the right interventions, and will inform systems change conversations by providing a better understanding of the needs of our clients.

**Forging Ahead: Coordinated Assessment in Practice**

Coordinated assessment is a critical strategy to meet both Forging Ahead goals of Permanent Housing and Prevention, as the system will guide access to these interventions for all clients in our system of care. Annual action planning will include steps to carry out the Continuum of Care’s three-phase process of planning, piloting and evaluation, and full implementation.
Strategy 2: Performance Standards

Performance measurement is a “data sharing opportunity between systems that don’t interact.”

- Homeless Service Provider Focus Group Participant

The development of standards of practice and performance measures will allow Contra Costa to ensure that clients are being served using the most effective practices and are receiving the best possible experience. This strategy also promotes the strategic use of limited resources, and supports the Housing First approach.

Performance Standards Strategy:
Integrate evaluation and performance measures with the implementation of evidence-based programs and practices.

Performance Measurement

Performance measurement is a process that systematically evaluates whether your efforts are making an impact on the clients you are serving or the program you are targeting.

Performance measures can be used by the Contra Costa Continuum of Care to inform a variety of tasks, including CoC Program competition project scoring, determining how federal, state, and local funds should be utilized, and creating a responsive system that provides support to underperformers (although, not a punitive process), and promotes efficiency by analyzing and responding to gaps in housing and service interventions offered in the system.

Performance measures in Contra Costa will promote these principles:

- Foster a sense of shared responsibility
- Foster a sense of shared accountability
- Promote cooperation and collaboration
- Set targets that:
  - Focus on real change
  - Are meaningful (relevant to the desired impact)
  - Are measurable
  - Are realistic (adaptable & flexible)
  - Are regularly assessed

Standards of Practice

In addition to measuring performance, the strategic goals of Forging Ahead also require the implementation of unified standards of practice and care, including cultural competency. Fidelity to the Housing First approach and other evidence-based practices promoted throughout the CoC should be documented and tracked.
Forging Ahead: Performance Standards in Practice

The Contra Costa Continuum of Care has already begun the work of developing performance measures in compliance with the HEARTH Act. Performance indicators have been identified, requiring the following next steps: setting performance targets by project type, measuring and reporting performance on a regular basis, and making improvements by developing action steps based on the outcomes reported.

Outcomes:

- Obtain permanent housing
- Maintain/retain permanent housing
- Exiting to streets or shelters
- Exiting to interim or transitional housing
- Exiting with earned income (employment)
- Of those adults entering with no income, number exiting with stable income
- Returns to homelessness (of those discharged to permanent housing last year)

Efficiency / Process Measures:

- Occupancy
- Exits to known destinations
- Time from entry to permanent housing for those obtaining permanent housing

These performance indicators will be updated annually to measure and reflect the benchmarks and action steps developed to implement Forging Ahead.

In particular, outcomes will be evaluated on an annual basis for the two goals of Forging Ahead:

- **Permanent Housing Goal**: Decrease the length of time people experience homelessness.
- **Prevention Goal**: Decrease the percentage of people who become homeless.
Effective communication, both internally (among homeless service providers within the CoC) and externally (to funders and the community at large), is a critical strategy to support our work in Forging Ahead around permanent housing and prevention. Harnessing technological opportunities to disseminate our message, our communication strategy is described in four parts below.

**Communication Strategy:**

*Develop the most effective platforms, such as websites, email, videos, and social media, to provide access, support advocacy, and connect the community about homelessness and available resources.*

**Forging Ahead: Communication in Practice**

1. **Develop Our Platform**
   - Redesign a new, distinct website for the Contra Costa Continuum of Care that is user friendly on all formats and across all devices
   - Explore social media tools for greater voice and marketing reach
   - Explore resources that connect to target audiences

2. **Improve Branding and Marketing**
   - Establish a brand to promote awareness of the activities of the Contra Costa Continuum of Care
   - Map out key constituencies for targeted outreach

3. **Craft Our Message**
   - Create videos to educate community about homelessness
   - Regularly publish consistent messages to the community about needs and opportunities

4. **Reports and Analytics**
   - Track effectiveness of communication platforms
   - Report out regularly on established performance measures

---

**2004 PLAN IN FOCUS**

Public education and fundraising campaigns “will be designed to convey the core message that action is needed now, as the longer a person is homeless, the more likely they are to become chronically homeless and the more costly it will be for the community to provide assistance.”

---

“Can you help to create a community of services that work together and create synergy around shared goals?”

- Contra Costa County Consortium Survey
With the conclusion of our 2014 strategic plan update process, **Forging Ahead** provides us with a launching point for implementation of our goals and strategies to prevent and end homelessness in Contra Costa.

**Forging Ahead Together**

As we stated in our original 2004 plan, and reaffirm in this plan, **the costs of doing nothing or too little are too high**. **Forging Ahead** is a call to action for all of the key stakeholders in our community— an integrated, cross-sector, interdepartmental response to homelessness is necessary to prevent and end homelessness in Contra Costa.

The strategic partnerships identified at right are key to accomplishing all of the goals and strategies of **Forging Ahead**. Numerous systems and sectors touch the lives of persons experiencing homelessness in Contra Costa, and we must work together at the highest possible level of collaboration to have a meaningful, measurable, and cost-effective impact on housing and service delivery.

**A Call to Action**

To coordinate our community response to homelessness in Contra Costa, we will use **Forging Ahead** as guide to build partnerships, promote evidence-based practices and approaches, and think strategically about the limited resources in our community. Progress on this work will be tracked through the Annual Action Plan, through which we will set benchmarks and action steps to track progress on our permanent housing and prevention goals in support of our Guiding Principle:

*Homelessness is first a housing issue, and necessary supports and services are critical to help people remain housed. Our system must be nimble and flexible enough to respond through the shared responsibility, accountability, and transparency of the community.*

Implementation of **Forging Ahead** will be guided by the CCICH Executive Committee, in collaboration with the full membership of the Contra Costa Continuum of Care. To learn more about the Contra Costa Interagency Council on Homelessness and get involved, visit:

ACKNOWLEDGEMENTS

Forging Ahead Towards Preventing and Ending Homelessness is the result of the efforts of dozens of key community stakeholders dedicated to the guiding principle, goals, and strategies described in this strategic plan update. Thank you to our Strategic Plan Ad Hoc Committee (30 representatives from 14 agencies), focus group participants (58 consumers and 20 representatives from 13 service provider agencies), interviewees (14 representatives from 12 agencies), survey respondents (over 600 community members), and other contributors to this plan, including:

- Anka Behavioral Health, Inc.
- Antioch Chamber of Commerce
- Antioch Police Department
- Bay Area Legal Aid
- Berkeley Food and Housing Project
- Concord Police Department
- Contra Costa Child Care Council
- Contra Costa County Board of Supervisors
- Contra Costa County Employment and Human Services Department
- Contra Costa County Library
- Contra Costa County Office of Education
- Contra Costa County Public Works
- Contra Costa County Flood Control and Water Conservation District
- Contra Costa Health Services Behavioral Health
- Contra Costa Homeless Outreach
- Contra Costa Interagency Council on Homelessness
- Contra Costa Interfaith Housing
- Department of Veterans Affairs
- East and Central County Health Access Action Team
- ECHO Housing
- EPIC Healthy Choices
- Family Justice Center
- First Place for Youth
- Greater Richmond Interfaith Housing
- Health Care for the Homeless
- Housing Authority of Contra Costa County
- Human Services Alliance
- Interfaith Council of Contra Costa County
- John Muir Health
- Kaiser Permanente
- La Clinica de La Raza
- Living Room Conversations
- Loaves and Fishes
- Local Integrated Networks of Care
- Monument Crisis Center
- Mount Diablo Unified School District
- Multifaith ACTION Coalition
- New Horizons Career Development Center
- Office for Consumer Empowerment
- Planned Parenthood
- Rainbow Community Center of Contra Costa
- Resources for Community Development
- Rubicon Programs
- SHELTER, Inc.
- STAND! for Families Free of Violence
- St. Vincent de Paul
- Sutter Health
- The Stride Center
- Trinity Center
- West County Adult Day Care / Alzheimer’s Respite Center
- Winter Nights Shelter
- 58 Consumer Focus Group Participants
- Over 600 Consolidated Plan Survey Respondents
The Contra Costa Continuum of Care will complete an Annual Action Plan each year to determine the objectives and benchmarks related to each of the goals and strategies of Forging Ahead. This Annual Action Plan will guide the work of the CoC and inform the decisions of the CCICH Executive Committee and the Contra Costa Continuum of Care, providing an annual framework for the implementation of the concepts contained in this plan.

Sample objectives have been included for some strategies below to demonstrate how the Annual Action Plan will be filled in for 2015; additional objectives, as well as associated benchmarks, will be determined by the Contra Costa Continuum of Care each fall/winter in to guide our work in the new year.

### FORGING AHEAD ANNUAL ACTION PLAN FOR 2015

**Guiding Principle:** Homelessness is *first* a housing issue, and necessary supports and services are critical to help people remain housed. Our system must be nimble and flexible enough to respond through the shared responsibility, accountability, and transparency of the community.

#### PERMANENT HOUSING GOAL:
Decrease the average length of time people experience homelessness by _____% by December 2015.

<table>
<thead>
<tr>
<th>STRATEGY</th>
<th>OBJECTIVE</th>
<th>BENCHMARK</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PERFORMANCE STANDARDS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>At least X% of those in emergency shelter who gain PH will do so within 60 days</td>
<td>Benchmark 1</td>
</tr>
<tr>
<td>2.</td>
<td>At least X% of those unsheltered who gain PH will do so within 6 months</td>
<td>Benchmark 2</td>
</tr>
<tr>
<td>3.</td>
<td>At least X% of those who gain PH will do so within 6 months</td>
<td>Benchmark 3</td>
</tr>
<tr>
<td><strong>COORDINATED ASSESSMENT</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>X% of homeless service providers will use common assessment tool by 2015.</td>
<td>Benchmark 1</td>
</tr>
<tr>
<td>2.</td>
<td>Objective 2</td>
<td>Benchmark 2</td>
</tr>
<tr>
<td>3.</td>
<td>Objective 3</td>
<td>Benchmark 3</td>
</tr>
<tr>
<td><strong>COMMUNICATION</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.</td>
<td>Objective 1</td>
<td>Benchmark 1</td>
</tr>
<tr>
<td>2.</td>
<td>Objective 2</td>
<td>Benchmark 2</td>
</tr>
<tr>
<td>3.</td>
<td>Objective 3</td>
<td>Benchmark 3</td>
</tr>
</tbody>
</table>
## PREVENTION GOAL:
 Decrease the percentage of people who become homeless by ____% by December 2015.

<table>
<thead>
<tr>
<th>STRATEGY</th>
<th>OBJECTIVE</th>
<th>BENCHMARK</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PERFORMANCE STANDARDS</strong></td>
<td>1. Objective 1</td>
<td>• Benchmark 1</td>
</tr>
<tr>
<td></td>
<td>2. Objective 2</td>
<td>• Benchmark 2</td>
</tr>
<tr>
<td></td>
<td>3. Objective 3</td>
<td>• Benchmark 3</td>
</tr>
<tr>
<td><strong>COORDINATED ASSESSMENT</strong></td>
<td>1. X% of homeless prevention service providers will use common assessment tool by 2015.</td>
<td>• Benchmark 1</td>
</tr>
<tr>
<td></td>
<td>2. Objective 2</td>
<td>• Benchmark 2</td>
</tr>
<tr>
<td></td>
<td>3. Objective 3</td>
<td>• Benchmark 3</td>
</tr>
<tr>
<td><strong>COMMUNICATION</strong></td>
<td>1. Objective 1</td>
<td>• Benchmark 1</td>
</tr>
<tr>
<td></td>
<td>2. Objective 2</td>
<td>• Benchmark 2</td>
</tr>
<tr>
<td></td>
<td>3. Objective 3</td>
<td>• Benchmark 3</td>
</tr>
</tbody>
</table>
APPENDIX B: OUTREACH TOOLS

As described in the section Development of the 2014 Strategic Plan Update, Forging Ahead incorporates the collected feedback of a large number of community stakeholders, which included:

- Consumer Focus Groups (58 consumers)
- Service Provider Focus Groups (20 representatives from 13 service provider agencies)
- Key Stakeholder Interviewees (14 representatives from 12 agencies)
- Consolidated Plan Survey (over 600 community members)

This appendix contains the various outreach tools used to collect the feedback in these venues:

- Consumer Focus Group Questions 29
- Service Provider Focus Group Questions 31
- Key Stakeholder Interview Questions 33
- Consolidated Plan Survey Questions on Homelessness 34
Consumer Focus Group Guide

Thank you for meeting with us today to talk about Contra Costa County’s Homeless Continuum of Care (CoC). We are in the process of updating our Strategic Plan and are seeking insights from multiple stakeholders including service providers, community leaders, and consumers. As a consumer, you likely have thoughts about how to prevent homelessness and how to intervene once a person becomes homeless. We want to integrate your experiences and knowledge into the update plan and future improvements.

Your participation in this focus group/interview is voluntary. The staff at the shelter or any other services will not know your answers and any responses you provide will not impact your services here. You may skip any questions that are asked.

Do you have any questions before we get started?

Description of focus group or interview participants (based on observation):

1.  
2.  
3.  
4.  
5.  
6.  
7.  
8.  

First I’d like to learn more about each of you and your backgrounds.

• Where are you from originally?
• What city do you consider “home?”
• Do you have family members

Now I would like to ask questions about your personal experiences with homeless.

• How do you define “homelessness?”
• At what age did you first experience homelessness?
• In your opinion, what leads to homelessness?
Please tell me about services you have received while homeless (either in the past or currently). If unclear, identify whether the services they listed are from Homeless Services, from other homeless providers, other programs in BHS, and whether services were rendered in other counties.

In your experience, how easy it is to gain access to emergency services?
How does one learn about these services?
What are some of the barriers?

In your experience, how easy is it to gain access to support services (such as employment assistance, benefits assistance,)

In your experience, how easy is it to gain access to long-term housing services (such as affordable housing, supportive housing, etc.)?
How does one learn about these services?
What are some of the barriers?

What should the County and other local service providers consider when developing future programming for preventing homelessness or serving those that are already homeless?

What are “next steps” for each of you?
What housing goals do you have and what will it take to get there?
What services will you use?

Thank you for your input.
CoC Strategic Plan Update Service Provider Focus Group

Thank you for meeting with us today to talk about Contra Costa County’s Homeless Continuum of Care (CoC). We are in the process of updating our Strategic Plan and are seeking insights from multiple stakeholders including service providers, community leaders, and consumers. As a service provider, you are integral to the success of the CoC and likely have your own lessons learned, challenges, and recommendations that will build our efforts in the future.

Your participation in this focus group/interview is voluntary. You may skip any questions that are asked. Additionally, all of the information shared today will be reported on an aggregate level; your organization and personal information will not be connected to your responses. All of the focus group and interview data will be reported confidentially and will be available to any member of the CoC.

You may contact us after the focus group with any follow up or questions.

**SECTION ONE: Organization and personal involvement in CoC**

1. Please tell me about (name of Organization)’s involvement in the Continuum of Care. Follow-up, if necessary, with:
   - How many years has (Organization) been involved with the CoC?
   - How long have you personally been involved with the CoC?
   - What is (Organization)’s role within the CoC?
   - What services does (Organization) provide (mark items in the chart below)?
   - What ages are served? Families?

<table>
<thead>
<tr>
<th>Services</th>
<th>Organization Name: __________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Short-term/transitional housing</td>
<td>Date: ____________________</td>
</tr>
<tr>
<td>Referrals to short-term/transition housing</td>
<td>Interviewer name: __________________________</td>
</tr>
<tr>
<td>Permanent Supportive Housing</td>
<td></td>
</tr>
<tr>
<td>Referrals to Permanent Supportive Housing</td>
<td></td>
</tr>
<tr>
<td>Mental health counseling and case management</td>
<td></td>
</tr>
<tr>
<td>Mental health referrals</td>
<td></td>
</tr>
<tr>
<td>Substance abuse treatment</td>
<td></td>
</tr>
<tr>
<td>Substance abuse treatment referrals</td>
<td></td>
</tr>
<tr>
<td>Case management (assessment and referral) and</td>
<td></td>
</tr>
<tr>
<td>develop case plan</td>
<td></td>
</tr>
<tr>
<td>Life skills education and training</td>
<td></td>
</tr>
<tr>
<td>Financial assistance</td>
<td></td>
</tr>
<tr>
<td>Benefits assistance</td>
<td></td>
</tr>
<tr>
<td>Financial counseling and money management</td>
<td></td>
</tr>
<tr>
<td>Drop-in (showers, meals, mail box, laundry)</td>
<td></td>
</tr>
<tr>
<td>Medical/healthcare</td>
<td></td>
</tr>
<tr>
<td>Food donations</td>
<td></td>
</tr>
<tr>
<td>Clothing and other resources donations</td>
<td></td>
</tr>
<tr>
<td>Other: ________________</td>
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</tbody>
</table>

Continuum of Care Strategic Plan Update
SECTION TWO: Perspectives on serving homeless community
1. In your opinion, what are the two greatest challenges with serving homeless population?
2. What do you, personally, think are the primary initiatives or priorities communities should focus on in an effort to reduce homelessness?
3. What are your thoughts on the Housing First philosophy in which placement into housing occurs before or in conjunction with other service provision?

SECTION THREE: CoC goals and objectives
1. How does the Housing First philosophy align with the CoC goals?
2. How has the CoC met its objectives over the last five years?
3. In what ways has the CoC helped (Organization) meet its objectives and provide services?
4. How have partner agencies in the CoC supported (Organization)’s efforts?

SECTION FOUR: Challenges with CoC and serving homeless
1. What are (Organization)’s biggest challenges with serving homeless?
2. What are some of the reasons for those challenges?
3. Can CoC address or ameliorate some of those challenges?
4. Please give examples of how you could see greater collaboration with partners in the CoC.

SECTION FIVE: Data
1. How have you used the data collected and analyzed by the CoC?
   - Reporting to funders
   - Demonstrate need or impact for grants
   - Learn about program impacts
   - Other: ____________________________
   - Learn about CoC activities
   - Learn about CoC impacts and outcomes
   - Understanding community needs
   - Other: ____________________________
2. What other data would be useful for your organization?
3. What are some of the challenges with data collection at your site?

SECTION SIX: Training and support
1. What training needs does (Organization) have?
   a. Program development
   b. Grant seeking
   c. Budgeting
   d. Data collection
   e. Using data

SECTION SEVEN: Additional Comments
1. Are there any additional comments you’d like to contribute to the Strategic Plan Update?

Thank you for your input.
KEY STAKEHOLDER INTERVIEW QUESTIONS

CONTRA COSTA INTERAGENCY COUNCIL ON HOMELESSNESS (CCICH)

STRATEGIC PLAN INTERVIEW TEMPLATE

Name(s):
Affiliation:
Interviewed by:
Date, Time:

1. What do you consider to be the key gaps in housing? What is needed to address these gaps – expanded capacity, new program approaches, changes in policies or operations?

2. What do you consider to be the key gaps in services? What is needed to address these gaps – outreach, drop in day facilities, life skills training, job training, AOD treatment, MH care, physical health care, prevention, education, childcare, legal, hunger-related, landlord/tenant counseling?

3. What are the most significant barriers to homeless persons accessing housing and services – transportation, don’t know who to call, eligibility for program is too narrow, capacity/lack of resources, no services in the local community?

4. Are there particular sub-populations that are under-served and need more outreach or targeted programs?

5. How do you view your agency’s/organization’s role in supporting local interventions and solutions to homelessness in Contra Costa?

6. How can the CoC better communicate and collaborate with key stakeholders like you in order to support increased effectiveness in the homeless system of care?

7. Anything else that you would like to mention that would make the system and programs in Contra Costa County more effective at preventing and ending homelessness?
Now we are going to talk about some of those groups of people, and the types of services that they may need. Let’s begin with **services for people who are homeless or at imminent risk of homelessness.**

Contra Costa County receives nearly $10 million annually in federal funding through HUD’s Homeless Assistance Programs including Emergency Solutions Grant and Continuum of Care programs. These funds support local interventions and solutions to homelessness such as emergency shelter, transitional, and permanent supportive housing.

**10. Do you see a significant need for housing and services for homeless individuals in your community? Check 1. □ Yes □ No**

Comments: ______________________________________________________

**11. What kind of housing do you think would be helpful to address the needs of homeless persons? Check all that apply**

□ More emergency shelters for men
□ More emergency shelters for women
□ More emergency shelters for families
□ More emergency shelters for unaccompanied youth
□ More transitional housing for victims of domestic violence
□ More transitional housing for transition age youth
□ More transitional housing for persons re-entering the community from institutions
□ More transitional housing for persons completing drug treatment programs
□ More permanent supportive housing for homeless persons
□ Housing that is affordable for homeless persons
□ Board and Care facilities
□ Other
□ Other
12. Which three kinds of housing for homeless individuals/families do you feel are the most important?  1=Most Important

1. __________________________________________ Comments:________________________
2. __________________________________________ ______________________________
3. __________________________________________ ______________________________

13. What kind of services do you think would be helpful to address the needs of homeless persons?  
Check all that apply

- More outreach for people living on the streets and in encampments
- More multi-service drop-in day facilities and programs
- Life skills training for homeless persons
- Job training for homeless persons
- Alcohol and drug addiction treatment for homeless persons
- Mental health care for homeless persons
- Physical health care for homeless persons
- Prevention services (e.g. rental assistance & services for persons needing short-term support)
- Education services
- Childcare services
- Legal services
- Hunger-related services
- Landlord/Tenant counseling
- Money Management
- Other: ________________________________

14. Which three Homeless Services do you feel are the most important?  1=Most Important

1. __________________________________________ Comments:________________________
2. __________________________________________ ______________________________
3. __________________________________________ ______________________________

15. What are the barriers to homeless persons accessing housing and services?  Check all that apply

- Transportation
- Don’t know who to call
- Eligibility for program is too narrow
- Capacity/lack of resources
- No services in my community
- Other: ________________________________

16. Which three barriers above are the biggest impediments to accessing housing and services?  
1=Biggest Impediment

1. __________________________________________ Comments:________________________
2. __________________________________________ ______________________________
3. __________________________________________ ______________________________

Thank you for your comments about homeless services. If you would like to know more about efforts in Contra Costa County to serve homeless persons, please visit the County Homeless Program’s website at http://cchealth.org/homeless