



# California Interagency Council on Homelessness

## Homeless Housing, Assistance and Prevention Round 4 Application

### Application Information

**Application Due Date: 11/29/2022**

This Cognito platform is the submission portal for the Cal ICH HHAP-4 Application. You will be required to upload a full copy of the HHAP-4 Data Tables Template and enter information into the portal from specific parts of the HHAP-4 Local Homelessness Action Plan and Application Template as outlined below.

Please review the following HHAP-4 resources prior to beginning this application:

- [Homeless Housing, Assistance, and Prevention Program Statute](#)
- [HHAP-4 Local Homelessness Action Plan & Application Template](#) and
- [HHAP-4 Data Tables](#)

### Application Submission for HHAP-4 Funding

Using the [HHAP-4 Local Homelessness Action Plan & Application Template](#) as a guide, applicants must provide the following information in the applicable form section (see below) to submit a complete application for HHAP-4 funding:

1. **Part I: Landscape Analysis of Needs, Demographics, And Funding:** the information required in this section will be provided in Tables 1, 2, and 3 of the HHAP-4 Data Tables file uploaded in the *Document Upload* section.
2. **Part II: Outcome Goals and Strategies for Achieving Those Goals:** the information required in this section will be provided in Tables 4 and 5 of the HHAP-4 Data Tables file uploaded in the *Document Upload* section, **AND** copy and pasted into the fields in the *Outcome Goals and Strategies* section of this application form.
3. **Part III: Narrative Responses:** the information required in this section will be provided by entering the responses to the narrative questions within the *Narrative Responses* section of this application form. Applicants are **NOT** required to upload a separate document with the responses to these narrative questions, though applicants may do so if they wish. The responses entered into this

Cognito form will be considered the official responses to the required narrative questions.

4. **Part IV: HHAP-4 Funding Plans and Strategic Intent Narrative:** the information required in this section will be provided in Tables 6 and 7 (as applicable), of the HHAP-4 Data Tables file uploaded in the *Document Upload* section, **AND** copy and pasted into the fields in the *Funding Plan Strategic Intent* section of this application form.
5. **Evidence of meeting the requirement to agendize the application at a meeting of the governing board** will be provided as a file upload in the *Document Upload* section.

## **How to Navigate this Form**

This application form is divided into **seven sections**. The actions you must take within each section are described below.

- **Applicant Information:** In this section, indicate (1) whether you will be submitting an individual or joint application, (2) list the eligible applicant jurisdiction(s), and (3) provide information about the Administrative Entity.
- **Document Upload:** In this section, upload (1) the completed HHAP-4 Data Tables as an Excel file, (2) evidence of meeting the requirement to agendize the application at a regular meeting of the governing board where public comments may be received, and (3) any other supporting documentation you may wish to provide to support your application.
- **Part I. Landscape Analysis:** In this section, answer the questions confirming that Tables 1, 2, and 3 have been completed and included in the HHAP-4 Data Tables file uploaded in the previous section.
- **Part II. Outcome Goals and Strategies:** In this section, copy and paste your responses from Tables 4 and 5 of the completed HHAP-4 Data Tables.
- **Part III. Narrative:** In this section, enter your responses from Part III of the HHAP-4 Local Homelessness Action Plan & Application Template.
- **Part IV. HHAP-4 Funding Plan Strategic Intent Narrative:** In this section, enter your responses from Tables 6 and 7 of the completed HHAP-4 Data Tables file, and answer the narrative questions.
- **Certification:** In this section, certify that the information is accurate and submit the application.

Prior to the submission deadline, you can save your progress in this application and come back to it later by clicking the save button. This will provide you with a link to the saved application, and there will be an option to email that link to the email address(es) of your choosing.

After submitting the application, you will not be able to make changes to your responses unless directed by Cal ICH staff.

**I have reviewed the HHAP-4 statute, FAQs, and application template documents**

Yes

**I am a representative from an eligible CoC, Large City, and/or County**

Yes

## Applicant Information

List the eligible applicant(s) submitting this application for HHAP-4 funding below and check the corresponding box to indicate whether the applicant(s) is/are applying individually or jointly.

### Eligible Applicant(s) and Individual or Joint Designation

Joint

This application represents the joint application for HHAP-4 funding on behalf of the following eligible applicant jurisdictions:

## Joint Applicants Selection

### Eligible Jurisdiction 1

#### Eligible Applicant Name

Santa Cruz County

### Eligible Jurisdiction 2

#### Eligible Applicant Name

CA-508 Watsonville/Santa Cruz City & County CoC

*Click + Add Eligible Jurisdiction above to add additional joint applicants as needed.*

## Administrative Entity Information

Funds awarded based on this application will be administered by the following Administrative Entity:

### Administrative Entity

Santa Cruz County

### Contact Person

SHERYL NORTEYE

### Title

Senior Human Services Analyst

### Contact Person Phone Number

(831) 454-7329

### Contact Person Email

sheryl.norteye@santacruzcounty.us

### \*Agreement to Participate in HDIS and HMIS

By submitting this application, we agree to participate in a statewide Homeless Data Integration System, and to enter individuals served by this funding into the local Homeless Management Information System, in accordance with local protocols.

## Document Upload

Upload the completed [HHAP-4 Data Tables](#) (in .xlsx format), evidence of meeting the requirement to agendize the application at a regular meeting of the governing body where public comments may be received (such as a Board agenda or meeting minutes), and any other supporting documentation.

### **HHAP-4 Data Tables**

Revised - Santa Cruz County and CoC Data Tables HHAP-4.xlsx

### **Governing Body Meeting Agenda or Minutes**

Housing for Health Partnership Policy Board Dec 14 Board meeting minutes.docx

### **Optional Supporting Documents**

## **Part I. Landscape Analysis of Needs, Demographics, and Funding**

**Table 1 is fully completed and included in the HHAP-4 Data Tables file uploaded in the previous section.**

Yes

**Table 2 is fully completed and included in the HHAP-4 Data Tables file uploaded in the previous section.**

Yes

**Table 3 is fully completed and included in the HHAP-4 Data Tables file uploaded in the previous section.**

Yes

## Part II. Outcome Goals and Strategies for Achieving Those Goals

Copy and paste your responses to Tables 4 and 5 from the [HHAP-4 Data Tables](#) into the form below. All outcome goals are for the period between July 1, 2022 and June 30, 2025.

### Table 4: Outcome Goals

**Name of CoC**

CA-508 Watsonville/Santa Cruz City & County CoC

#### 1a. Reducing the number of persons experiencing homelessness.

**Goal Statement**

By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show 2873 total people accessing services who are experiencing homelessness annually, representing 261 more people and a 10% increase from the baseline.

**Goal Narrative**

Given increased street outreach capacity through one-time grants, an anticipated increase in the number of households losing housing due to pandemic-related impacts, and a continuing tight housing market, we anticipate an increase in the # of people served over the next three years.

<b>Baseline Data</b>	<b>Change in # of People</b>	<b>Change as % of Baseline</b>	<b>Target Annual Estimate of # of people accessing services who are experiencing homelessness</b>
2,612	261	10%	2,873

**Decrease/Increase in # of People**

Increase

**Optional Comments**

N/A

### Describe Your Related Goals for Underserved Populations and Populations Disproportionately Impacted by Homelessness

**Describe any underserved and/or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:**

2022 PIT data shows an increase in the number of people experiencing homelessness among particular subgroups. These include veterans, individuals with behavioral health conditions, and individuals with HIV/AIDS. Given expansions in street outreach capacity, we anticipate more contact with unhoused veterans through outreach programs. We are working closely with our local Medi-Cal managed care plan, Central California Alliance for Health, to expand temporary housing capacity, housing navigation, and tenancy-sustaining services over the next three years for people experiencing homelessness with significant health conditions. We anticipate seeing an increase in documented program enrollments and services for these populations.

**Describe the trackable data goal(s) related to this Outcome Goal:**

Increase enrollments of those with health conditions in CalAIM temporary housing and community support services by 50 people to improve documented program enrollments and services for these underserved

populations.

## 1b. Reducing the number of persons experiencing homelessness on a daily basis

### Goal Statement

By the end of the performance period, data for the CA-508 Watsonville/Santa Cruz City & County CoC will show 1685 total people experiencing unsheltered homelessness daily, representing 89 fewer people and a 5% reduction from the baseline.

### Goal Narrative

Given the availability of one-time resources from CalAIM, HHAP, and other state sources, we anticipate an expansion in outreach and services capacity as well as movement toward year-round low-barrier navigation center programming. These increased efforts should contribute to reductions in unsheltered homelessness unless the number of individuals losing housing increases at a higher rate than prior trends

Baseline Data	Change in # of People	Change as % of Baseline	Target Daily Estimate of # of people experiencing unsheltered homelessness
1,774	-159	-9%	1,615

### Decrease/Increase in # of People

Decrease

### Optional Comments

N/A

## Describe Your Related Goals for Underserved Populations and Populations Disproportionately Impacted by Homelessness

**Describe any underserved and/or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:**

2022 PIT count data for the County shows an estimated 65% increase from 2019 in the number of unsheltered Blacks/African Americans in the County. Other HMIS data sets also show lower levels of access to services and housing resources among this population. Over the next three years, the community should focus attention on ensuring equitable and culturally affirming access to services and housing resources for this population.

### **Describe the trackable data goal(s) related to this Outcome Goal:**

Please note that we intend to follow the principle of “nothing for us without us” therefore we will in partnership with BIPOC people with lived experience of homelessness, develop a Lived Experience Advisory Board that will make governance, policy, funding, programmatic, and service delivery recommendations to eliminate homelessness system racial and social disparities. Our trackable data to ensure accountability to this goal includes the following outputs: 1. Standing up the Lived Experience Advisory Board 2. Recruitment of at least 5-7 members 3. The group develops strategies to reduce the number of African Americans experiencing homelessness.

## 2. Reducing the number of persons who become newly homeless.

## 2. Reducing the number of persons who become newly

## homeless.

### Goal Statement

By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show 956 total people become newly homeless each year, representing 106 fewer people and a 10% reduction from the baseline.

### Goal Narrative

The County will be investing nearly \$1M in homelessness and eviction prevention resources in FY22-23 with an intention of reducing the number of households losing housing and entering homelessness. The ending of COVID-related eviction protections in a county identified as "high-risk" for housing instability in a UC Berkeley Turner Center for Housing Innovation report raises concerns about higher rates of evictions, displacement, and homelessness. We're projecting a slight decrease in the # of new people becoming homeless for the first time due to these competing forces.

Baseline Data	Change in # of People	Change as % of Baseline	Target Annual Estimate of # of people who become newly homeless each year
1,062	-106	-10%	956

### Decrease/Increase in # of People

Decrease

### Optional Comments

N/A

## Describe Your Related Goals for Underserved Populations and Populations Disproportionately Impacted by Homelessness

**Describe any underserved and/or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:**

Comparing data from the 2019 and 2022 count shows the greatest increase (more than 50%) in homelessness among certain subpopulations including those with behavioral health conditions, HIV/AIDS, and Black/African Americans. Further information is needed to understand ways in which the community could prevent these populations from becoming homeless. One area for focus is deepening collaborations with health and behavioral health system providers to ensure appropriate institutional discharges, follow-up services, and linkages with housing-focused supportive services. CalAIM partnerships over the next three years will be critical for improving prevention efforts among these populations.

**Describe the trackable data goal(s) related to this Outcome Goal:**

Develop local HMIS measures by disaggregating data of subpopulations including those with behavioral health conditions, HIV/AIDS, and Black/African Americans by race and health to track causes more closely on households experiencing homelessness for the first time. We are looking for a 2% decrease in the number of persons who become homeless for the first time.

**3. Increasing the number of people exiting homelessness into permanent housing.**

**3. Increasing the number of people exiting homelessness into permanent housing.**



**Goal Statement**

By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show 737 total people exiting homelessness into permanent housing annually, representing 96 more people and a 15% increase from the baseline

**Goal Narrative**

Expanded resources, planned permanent supportive housing projects through Project Homekey, and a systemwide focus on improved housing outcomes should result in increases in the number of people exiting homelessness to permanent housing. These efforts will be tempered by deepening affordability and rental vacancy challenges in the County as rental costs continue to increase with low rental unit supply.

<b>Baseline Data</b>	<b>Change in # of People</b>	<b>Change as % of Baseline</b>	<b>Target Annual Estimate of # of people exiting homelessness into permanent housing</b>
641	96	15%	737

**Decrease/Increase in # of People**  
Increase

**Optional Comments**  
N/A

**Describe Your Related Goals for Underserved Populations and Populations Disproportionately Impacted by Homelessness**

**Describe any underserved and/or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:**

According to HDIS data, exit percentages from homelessness to permanent housing are greater for white, Hispanic/latinx groups compared to other racial/ethnic groups. According to 2021 HDIS data, 38.3% of exits to permanent housing were among white, Hispanic/latinx groups and they represented 31.4% of those served. Whites, non-Hispanic/non-Latinx groups, represented 35.6% of exits to permanent housing and 44% of the population served. Blacks/American Americans and Multiple Race groups showed lower percentages of exits to permanent housing when compared to the % of the population served among these groups.

**Describe the trackable data goal(s) related to this Outcome Goal:**

Goal over the next 3 years will be to learn why returns to homelessness and Permanent Housing exits are better for White, Hispanic/Latinx and to make improvements with the white/non-Hispanic group. We aim to close this gap by at least 1% point for three groups: white, non-Hispanic; black/AA; multiple races.

**4. Reducing the length of time persons remain homeless.**

**4. Reducing the length of time persons remain homeless.**

**Goal Statement**

By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show 149 days as the average length of time that persons are enrolled in street outreach, emergency shelter, transitional housing, Safehaven projects and time prior to move-in for persons enrolled in rapid rehousing and permanent housing programs annually, representing 26 fewer people and a 15% reduction from the baseline.

**Goal Narrative**

The prior three years of HDIS data indicate a gradual increase in the # of cumulative days homeless. We plan to work toward decreasing this trend through expanding outreach and incentives for private landlords to partner with existing RRH and PSH programs and by making changes to shelter standards and operational resources

<b>Baseline Data</b>	<b>Change in # of Days</b>	<b>Change as % of Baseline</b>	<b>Target Average length of time (in # of days) persons enrolled in street outreach, emergency shelter, transitional housing, safehaven projects and time prior to move-in for persons enrolled in rapid rehousing and permanent housing programs</b>
175	-26	-15%	149

**Decrease/Increase in # of Days**  
Decrease

**Optional Comments**  
N/A

**Describe Your Related Goals for Underserved Populations and Populations Disproportionately Impacted by Homelessness**

**Describe any underserved and/or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:**

According to the HDIS data, 10.5% of all people with a move-in to permanent housing from rapid rehousing were people of multiple races. It further showed Black/African Americans represented 2.6% of these move-ins from rapid rehousing. The data also shows the median number of days between enrollments in rapid rehousing and permanent supportive housing programs and time to move in among Black/African Americans and Multiple races is 36 days and 104 days respectively. Over the next three years, the community would like to see greater consistency among these lengths of time for move-in dates for people of multiple races and Black/African Americans.

**Describe the trackable data goal(s) related to this Outcome Goal:**

Reduce the percentage of Black/African Americans and people of multiple races who move in from Rapid Rehousing to Permanent housing by 5%.

**5. Reducing the number of persons who return to homelessness within two years after exiting homelessness to permanent housing.**

**5. Reducing the number of persons who return to homelessness within two years after exiting homelessness to permanent housing.**

**Goal Statement**

By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County

CoC will show 4% of people return to homelessness within 2 years after having exited homelessness to permanent housing, representing 0 fewer people and 0% reduction from the baseline.

**Goal Narrative**

Working over the next three years to provide housing/tenancy sustaining services for those exiting to permanent housing will be a priority over the next three years, particularly for those with behavioral health conditions.

Baseline Data	Change in % of People	Change as % of Baseline	Target % of people who return to homelessness within 2 years after having exited homelessness to permanent housing
4%	0%	0%	4%

**Decrease/Increase in # of People**

Decrease

**Optional Comments**

N/A

**Describe Your Related Goals for Underserved Populations and Populations Disproportionately Impacted by Homelessness**

**Describe any underserved and/or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:**

HDIS baseline data over the past three years shows a 25% higher rate of returns to homelessness among those with behavioral health conditions, particularly those with substance use disorders. Working toward reducing the risk of relapse and housing loss will be an important area of focus over the next three years.

**Describe the trackable data goal(s) related to this Outcome Goal:**

Reduce returns to homelessness among those with behavioral health conditions, particularly those with substance use disorders by 5%. The aim is to get to 20% or lower.

**6. Increasing successful placements from street outreach.**

**6. Increasing successful placements from street outreach.**

**Goal Statement**

By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show 50 total people served in street outreach projects exit to emergency shelters, safe havens, transitional housing, or permanent housing destinations annually, representing 50 more people and a 100% increase from the baseline.

**Goal Narrative**

Historically, the community has not operated sustained street outreach projects that utilize HMIS data for tracking their efforts. One-time funding has been secured by the County Behavioral Health Department to expand street outreach for those struggling with behavioral health issues and the Housing for Health Division also secured one-time funding for outreach to unincorporated areas of the County. In addition, the County has invested in the development and utilization of an outreach module within its HMIS system over the next three years.

Baseline Data	Change in # of People	Change as % of Baseline	Target Annual # of people served in street outreach projects who exit to
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0

50

100%

emergency shelter, safe haven,  
transitional housing, or permanent  
housing destinations.  
50

**Decrease/Increase in # of People**

Increase

**Optional Comments**

N/A

## **Describe Your Related Goals for Underserved Populations and Populations Disproportionately Impacted by Homelessness**

**Describe any underserved and/or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:**

2022 PIT count data indicate significant increases in the # of unsheltered individuals struggling with behavioral health conditions, HIV/AIDS, and veterans. Over the next three years, we hope to see increased street outreach enrollments among these groups and linkage of these groups to pathways to permanent housing.

**Describe the trackable data goal(s) related to this Outcome Goal:**

Program outreach enrollment among unsheltered priority groups via demographic data; see an increase of 50 people transitioning from street outreach to a housing pathway.

## **Table 5: Strategies to Achieve Outcome Goals**

### **Strategy 1**

**Type of Strategy**

Increasing investments into, or otherwise scaling up, specific interventions or program types

**Description**

Increased efforts in eviction and homelessness prevention investments

**Timeframe**

June 2022 - June 2025

**Entities with Lead Responsibilities**

Housing for Health Division; Emergency Rental Assistance Local Partner Network Providers

**Measurable Targets**

# of households assisted to secure prevention funding; # that receive tenancy sustaining services; racial/ethnic groups receiving assistance

**Performance Measure(s) to Be Impacted (Check all that apply)**

1. Reducing the number of persons experiencing homelessness.
2. Reducing the number of persons who become homeless for the first time.
5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.
7. Focused on equity goals related to underserved populations and populations disproportionately

impacted by homelessness.

## Strategy 2

### Type of Strategy

Strategic uses of other sources of funding

### Description

Permanent supportive housing expansions through Project Homekey applications and projects and real estate partnership incentives.

### Timeframe

Present - June 2025

### Entities with Lead Responsibilities

Housing for Health Division, Housing Authority

### Measurable Targets

Increase # of build permanent supportive housing units (Homekey + other funding); increased utilization of dedicated Housing Authority vouchers in private market; access to PSH for those with behavioral health conditions, HIV/AIDS, and other chronic health conditions

### Performance Measure(s) to Be Impacted (Check all that apply)

1. Reducing the number of persons experiencing homelessness.
3. Increasing the number of people exiting homelessness into permanent housing.
4. Reducing the length of time persons remain homeless.
7. Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness.

## Strategy 3

### Type of Strategy

Strengthening systemic efforts and processes, such as coordinated entry and assessment processes, landlord engagement efforts, housing navigation strategies, and other systemic improvements

### Description

Low barrier housing navigation center program development and improvement countywide through the enhanced Coordinated Entry process, increased engagements with Landlords/Landlord incentive program, and other housing problem efforts.

### Timeframe

Present - June 2025

### Entities with Lead Responsibilities

Housing for Health Division, local/city partners, Central California Alliance for Health

### Measurable Targets

Increase baseline capacity from pre-COVID period; improved income, benefit, and housing outcomes among programs; # of referrals of unsheltered to shelter; race/ethnicity review of access to and outcomes from programs; reduced lengths of stay

**Performance Measure(s) to Be Impacted (Check all that apply)**

1. Reducing the number of persons experiencing homelessness.
3. Increasing the number of people exiting homelessness into permanent housing.
4. Reducing the length of time persons remain homeless.
6. Increasing successful placements from street outreach
7. Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness.

**Strategy 4****Type of Strategy**

Reaching underserved and historically marginalized communities and populations

**Description**

Expanding and improving street outreach teams countywide and developing and implementing a communications strategy and tools for underserved communities. The Street outreach teams will provide culturally sensitive services to historically marginalized populations and communication tools will better reach those communities.

**Timeframe**

Present - June 2025

**Entities with Lead Responsibilities**

Housing for Health Division, Behavioral Health Department, city partners

**Measurable Targets**

# enrolled in street outreach programs, exits from street outreach to housing programs, demographics of those contacted by street outreach programs

**Performance Measure(s) to Be Impacted (Check all that apply)**

1. Reducing the number of persons experiencing homelessness.
2. Reducing the number of persons who become homeless for the first time.
3. Increasing the number of people exiting homelessness into permanent housing.
4. Reducing the length of time persons remain homeless.
5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.
6. Increasing successful placements from street outreach
7. Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness.

**Strategy 5****Type of Strategy**

Building the capacity of homelessness response system to utilize resources, implement best practices, and/or achieve outcomes

**Description**

Centralized housing problem-solving and rehousing fund and making the Coordinated Entry system more housing focused.

**Timeframe**

July 2022 - June 2025

**Entities with Lead Responsibilities**

Housing for Health Division, CBO fund manager

**Measurable Targets**

# served, # exiting to permanent housing, racial/ethnic data on access and outcomes; 3 and 6 months follow-up after assistance

**Performance Measure(s) to Be Impacted (Check all that apply)**

1. Reducing the number of persons experiencing homelessness.
3. Increasing the number of people exiting homelessness into permanent housing.
4. Reducing the length of time persons remain homeless.
7. Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness.

*Click + Add Strategy above to add additional strategies as needed.*

## Part III. Narrative Responses

Copy and paste your responses to Part III. Narrative Responses from the [HHAP-4 Local Homelessness Action Plan & Application Template](#) into the form below.

### Question 1

**[50220.8(b)(3)(D)]** My jurisdiction (e.g., City, County, CoC) collaborated with other overlapping jurisdictions to develop the strategies and goals related to HHAP-4

**Q1**

Yes

### Question 2

**[50220.8(b)(3)(D)]** My jurisdiction (e.g., City, County, CoC) consulted with each of the following entities to determine how HHAP-4 funds would be used:

**Public agencies (governmental entities)**

Yes

**Private sector partners (philanthropy, local businesses, CBOs, etc.)**

Yes

**Service providers (direct service providers, outreach, shelter providers, etc.)**

Yes

**Local governing boards**

Yes

**People with lived experience**

Yes

**Other**

No

**a. Please describe your most notable coordination and collaborative processes with these entities.**

The Watsonville/Santa Cruz City & County CoC holds biannual CoC community meetings to solicit and consider opinions from interested persons and organizations, including affordable housing developers, homeless assistance providers, County and City elected representatives and agencies, faith groups, neighborhood groups, health care providers, business representatives, education providers, persons with lived experience of homelessness, and more. Additionally, the CoC requests for input and feedback are communicated via the Housing for Health Partnership website, Facebook, direct outreach by CoC staff, CoC committee and working group meetings, and the CoC list serve, which includes more than 200 interested agencies or persons. Key County staff are part of the CoC Board which is the center of coordination and collaboration between the County, Cities, and other stakeholders. Also, the CoC Board meetings are open to the public for comments under each agenda item which includes how HHAP 4 funds will be utilized. Regular updates are provided by CoC staff at meetings of the County Board of Supervisors and City Councils, during which the members of the public can comment on CoC items. Public input has



positively impacted a broad array of issues, including CoC governance, Cares Act funding priorities, CoC rating criteria, CES redesign, and HMIS restructuring.

### Question 3

**[50220.8(b)(3)(B) and 50220.8(b)(3)(E)]** My jurisdiction (e.g., City, County, CoC) is partnering or plans to use any round of HHAP funding to increase partnership with:

**People with lived experience**

Yes

**Is this partnership formal or informal?**

Formal partnering

**Is this partnership current or planned?**

Planned

**Do HHAP Funds Support This Partnership?**

Yes

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**Social services (CalFresh, Medi-cal, CalWORKs, SSI, VA Benefits, etc.)**

Yes

**Is this partnership formal or informal?**

Formal partnering

**Is this partnership current or planned?**

Current

**Do HHAP Funds Support This Partnership?**

No

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**Justice entities**

Yes

**Is this partnership formal or informal?**

Formal partnering

**Is this partnership current or planned?**

Planned

**Do HHAP Funds Support This Partnership?**

No

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**Workforce system**

Yes

**Is this partnership formal or informal?**

Formal partnering

**Is this partnership current or planned?**

Planned

**Do HHAP Funds Support This Partnership?**

No

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**Services for older adults**

Yes

**Is this partnership formal or informal?**

Formal partnering

**Is this partnership current or planned?**

Current

**Do HHAP Funds Support This Partnership?**

No

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**Services for people with disabilities**

Yes

**Is this partnership formal or informal?**

Formal partnering

**Is this partnership current or planned?**

Current

**Do HHAP Funds Support This Partnership?**

No

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**Child welfare system**

Yes

**Is this partnership formal or informal?**

Formal partnering

**Is this partnership current or planned?**

Current

**Do HHAP Funds Support This Partnership?**

No

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**Education system**

Yes

**Is this partnership formal or informal?**

Formal partnering

**Is this partnership current or planned?**

Current

**Do HHAP Funds Support This Partnership?**

No

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**Local Homeless Coordinated Entry System**

Yes

**Is this partnership formal or informal?**

Formal partnering

**Is this partnership current or planned?**

Current

**Do HHAP Funds Support This Partnership?**

Yes

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**Other (please specify)**

Yes

**Is this partnership formal or informal?**

Formal partnering

**Is this partnership current or planned?**

Current

**Do HHAP Funds Support This Partnership?**

Yes

**Other response**

Housing Authority partnership.

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**a. Please describe your most notable partnership with these groups (e.g. MOUs, shared funding, data sharing agreements, service coordination, etc.)**

Two very notable formal partnerships that will receive HHAP-4 funding are those with the Smart Path to Housing and Health coordinated entry system (CES) and the Rehousing Wave.

Smart Path CES:

The Smart Path CES was authorized by the CoC and developed through the former Smart Path steering committee. This was a comprehensive planning process conducted through the collaborative effort of the County of Santa Cruz, the Homeless Action Partnership (predecessor to the Housing for Health Partnership), the Housing Authority of the County of Santa Cruz, Smart Solutions to Homelessness, Housing Matters, the United Way of Santa Cruz County, and multiple partner agencies. Financial sponsors include Dignity Health, the Central California Alliance for Health, the County Human Services Department (HSD), the federal Department of Housing and Urban Development (HUD), and the Packard Foundation. Launched in early 2018, Smart Path CES was formalized through an agreement between the partner agencies and written CES Policies and Procedures. The current lead agency is the Housing for Health (H4H) Division of HSD, our BitFocus Clarity HMIS provides the technology backbone, and most of our housing and services agencies are participating in Smart Path CES as agencies providing assessments and referrals and/or agencies receiving referrals for their housing programs.

Smart Path CES uses an “any door” access strategy to cover the entire CoC geography. Normally, persons experiencing homelessness can complete the Smart Path assessment by calling 2-1-1 or visiting any of these “Access Points”: Santa Cruz area - Homeless Services Center (HSC), Mental Health Client Action Network (MHCAN), Santa Cruz Public Library – Downtown, and Veteran Resource Center (VRC); Watsonville area - Families in Transition (FIT), and Salvation Army Day Center; Encompass Community

Services Youth Program, although since the pandemic all assessments have been remote. HSD employs H4H Housing Connectors to provide assessment services at meal sites, shelters, encampments, outreach sites, or wherever needed. Smart Path uses a standardized assessment process, currently being replaced in part to eliminate racial bias. Assessments are only conducted by staff who have completed the Smart Path training. Prior to completing the assessment, staff has discussions with the client regarding diversion/housing problem-solving opportunities. If no diversion opportunity is available, the client is invited to complete the assessment. In-person assessments must be in a private setting. Assessment information is entered into HMIS if the client agrees and signs the HMIS release of information. At the end of the assessment, staff provides the client with resource information and referrals to meet immediate needs, such as for emergency shelters.

The Housing for Health Partnership (H4HP) policy board and operations committee (successor to the Smart Path steering committee) are currently conducting a major transformation of the Smart Path CES to eliminate racial/ethnic biases inherent in the previous assessment tool (VI/SPDAT), to reduce the length of the housing queue and speed up immediate resources and support for clients, and to better link CES with our local managed care billing process. For more details, please see the response to question 7.v below.

#### Rehousing Wave:

The Rehousing Wave was developed to help people who have received shelter, food, and critical services during the pandemic through federal and state funding. It is a formal collaboration between the County's H4H Division, Housing Matters, Abode Services, the Community Action Board, the Santa Cruz County Veterans Memorial Building Board of Trustees, and the Housing Authority of the County of Santa Cruz. Community members, including local property owners and managers, have played vital roles in this effort. Key efforts of the Rehousing Wave have included:

- Housing for Health Navigation Teams - in which Abode Services, Housing Matters, and County H4H have provided case management plus rental assistance
- Real Estate Partnership Program – in which Abode Services has provided financial incentives for landlords and services for tenants
- Flexible Housing Problem Solving Fund – in which CAB Inc. has provided participants funds flexibly as needed to achieve housing
- Mainstream and Emergency Housing Vouchers – in which the Housing Authority has provided permanent rental subsidies
- Monetary and Item Donations – provided by the Vets Hall Board of Trustees to support people moving into housing.

Since launching program operations in May 2021, the three Rehousing Wave teams have served over 323 people and 145 have obtained permanent housing as of the end of June 2022. Nearly all active participants enrolled in these programs have secured housing subsidy vouchers. The lack of available private rental market owners and property managers willing to rent to participants remains the primary barrier to helping participants secure permanent homes within Santa Cruz County.

## Question 4

**[50220.8(b)(3)(B) and 50220.8(b)(3)(E)]** My jurisdiction (e.g., City, County, CoC) is strengthening its partnership, strategies, and resources across:

**Managed care plans and resources (such as the Housing and Homelessness Incentive Program [HHIP])**

Yes

**Physical and behavioral health care systems and resources**

Yes

### **Public health system and resources**

Yes

#### **a. Please describe your most notable coordination, planning, and/or sharing of data/information that is occurring within these partnerships.**

The CoC and agencies collaborate with County Health Services Agency (HSA) and Santa Cruz Community Health Centers to assist homeless people to access community health, mental health, and substance use services. HSA's Homeless Persons Health Project (HPHP) is a Healthcare for the Homeless-funded project providing mobile outreach, its own clinic on a homeless campus, medical care, behavioral care, and benefits advocacy. The Health Improvement Partnership includes CoC agencies in a range of care coordination (e.g., behavioral health network) and data projects (e.g., Datashare Santa Cruz). The CoC is working with Central California Alliance for Health to link providers to California Advancing and Innovating Medi-Cal (CalAIM) resources for enhanced case management and in-lieu services, as well as to enroll agencies' clients in Medicaid. Dignity Health has collaborated with the CoC and providers on a capital grant for new PSH (Harvey West Studios) and recuperative care programs. By layering funding resources together, Central California Alliance for Health and the CoC hope to have a more significant and lasting impact on the community

## **Question 5**

**[50220.8(b)(3)(F)]** Please select what actions your jurisdiction will take to ensure racial/ethnic/gender groups that are overrepresented among residents experiencing homelessness have equitable access to housing and services:

**[50220.8(b)(3)(F)]** Please select what actions your jurisdiction will take to ensure racial/ethnic/gender groups that are overrepresented among residents experiencing homelessness have equitable access to housing and services:

Disaggregating administrative data for use in decision making processes

Modifying procurement processes

Ensuring those with lived experience have a role in program design, strategy development, and oversight

Developing workgroups and hosting training related to advancing equity

#### **a. Please describe the most notable specific actions the jurisdiction will take regarding equity for racial/ethnic/gender groups.**

As the next step in our CoC restructuring process, the CoC is establishing a new Lived Experience Advisory Board (LEAB) and revitalizing the Youth Advisory Board (YAB) that was recommended in the governance portion of our three-year strategic plan and included in our updated CoC Governance Charter. The County Human Services Department in collaboration with the CoC is investing county general funds in a leadership development program for people with histories of homelessness. Housing Matters, a key CoC service provider, is coordinating this effort. Individuals trained and supported through this effort are likely contributors and participants in the CoC lived experience working groups. The CoC also will continue work with Applied Survey Research (ASR), the firm that supports the implementation of the local point-in-time (PIT) count. The PIT count includes recruiting and training people with lived experience to serve as temporary employees for the count. In upcoming years, the CoC plans to work with ASR to hire and train people with lived experience to support the evaluation of our local CES. These initiatives will ensure to lift the voices of underrepresented racial/ethnic/gender groups to contribute to programmatic and policy recommendations in the CoC process. It will also chart a process of transparency and equitable access to housing and housing services.

## Question 6

**[50220.8(b)(3)(G)]** My jurisdiction (e.g., City, County, CoC) has specific strategies to prevent exits to homelessness from **institutional settings** in partnership with the following mainstream systems:

### **Physical and behavioral health care systems and managed care plan organizations**

Yes, formal partnering  
Yes, leveraging funding

### **Public health system**

Yes, formal partnering  
Yes, leveraging funding

### **Criminal legal system and system for supporting re-entry from incarceration**

Yes, informal partnering

### **Child welfare system**

Yes, formal partnering  
Yes, leveraging funding

### **Affordable housing funders and providers**

Yes, formal partnering  
Yes, leveraging funding

### **Income support programs**

Yes, formal partnering  
Yes, leveraging funding

### **Education system**

Yes, formal partnering  
Yes, leveraging funding

### **Workforce and employment systems**

Yes, informal partnering

### **Other (please specify)**

No

### **a. Please describe the most notable specific actions the jurisdiction will take to prevent exits to homelessness from institutional settings**

Discharge planning is a key strategy for preventing homelessness by instigating changes within institutions that regularly discharge people directly to homelessness. The following summarizes notable examples in the areas of healthcare and foster care:

Healthcare: The County Homeless Persons' Health Project (HHP) leads the implementation of policies and protocols for homeless people leaving hospital care. Hospital discharge planners contact HHP when a homeless person is hospitalized. HHP nurses and caseworkers visit and coordinate with hospitals (and 6 community clinics) to ensure homeless people receive case management and housing resources upon

discharge. For Medi-Cal individuals discharged from a hospital stay, the first step is often a recuperative care program referral to the 12-bed Coral St. recuperative care unit. HPHP also works with the following providers, among others to help clients obtain permanent housing: Housing Authority, Encompass, South County Housing Collaborative, Santa Cruz AIDS Project, and Abode Services. The Central California Alliance for Health (Alliance) is an active partner with the County and CoC in supporting the implementation of CalAIM enhanced care management and community support programs. The Alliance is funding recuperative care and post-hospitalization temporary housing capacity to support safe discharges for individuals from emergency departments and inpatient units. The County is partnering with the Alliance to support expanded temporary and permanent housing capacity for Alliance members, as well as helping the Alliance to expand enhanced care management and housing-related community supports within the County.

Foster Care: CoC members assisted the County of Santa Cruz Families and Children's Services to develop policies and protocols to prevent emancipated youth from becoming homeless. At 15, youth are eligible for a variety of transition age youth (TAY) programs operated under County contract by Encompass Community Services (ECS), a CoC agency. The Independent Living Program (ILP) assists current and former foster and probation placement youth aged 15-21 to develop independent living skills and achieve personal, educational, and vocational goals to successfully transition into adulthood. The TAY Drop-In Center assists current and former foster, probation placement, and homeless youth ages 15-24 in building the skills, self-esteem, and support system necessary to make a successful transition to independent living in the community. The Transitional Voucher Program (TVP) is a collaboration with the Santa Cruz Housing Authority, which provides Section 8 Housing Choice Vouchers to a small number of participants, ages 18-24, in ILP. The Section 8 Housing Choice Voucher allows ILP participants to secure private housing in the community and receive federal assistance in paying their rent for up to 36 months. Transitional Housing Plus (THP Plus) is a supportive housing program that serves former foster and probation youth between the ages of 18-24. The Housing Authority also makes available Family Unification Program (FUP) housing vouchers for eligible youth

## Question 7

**[50220.8(b)(3)(H)]** Specific and quantifiable **systems improvements** that the applicant will take to improve the delivery of housing and services to people experiencing homelessness or at risk of homelessness, including, but not limited to, the following:

**(I) Capacity building and workforce development for service providers within the jurisdiction, including removing barriers to contracting with culturally specific service providers and building the capacity of providers to administer culturally specific services.**

The Housing for Health Division (H4H) of the County of Santa Cruz Human Services Department serves as the Continuum of Care (CoC) lead for our area. The Human Services Department also manages the local Workforce Development Board (WDB). H4H and WDB have several workforce development activities planned in the upcoming years. The WDB supports the Suenos Program collaborative with the Santa Cruz County Office of Education. The Program supports teenagers and young adults (ages 16 to 24) to develop workplace skills that will prepare them to enter and thrive in the labor market. H4H staff will help connect young people with lived experience of homelessness to opportunities provided through this program and help cultivate internship opportunities within H4H system service provider organizations. The Suenos program prioritizes outreach to communities of color and other underrepresented groups for program participation.

The WDB also is partnering with the Santa Cruz County Health Improvement Partnership (HIP) to cultivate workforce development pathways in the healthcare sector. This includes helping providers fill critical positions needed to support the implementation of California Advancing and Innovating Medi-Cal (CalAIM) housing-related community support services. Our local Medi-Cal managed care plan, the Central California Alliance for Health, participates in these efforts. These activities center around supporting local providers with diversifying their workforce and filling critical vacancies. State and federal funding available



through CalAIM, including the Homeless Housing Incentive Program (HHIP), supports provider capacity development in culturally informed practices and workforce recruitment and retention.

The Human Services Department participates in an ongoing staff and leadership development effort focused on reducing racial, ethnic, and cultural disparities in our departmental efforts. This work focuses on the psychological, emotional, and relational barriers to creating more responsive and inclusive systems and programs. This work is complemented by a countywide effort with the Annie E. Casey Foundation to develop cross-departmental goals focused on reducing disparities in county-supported programs and services. The Foundation's work focuses on developing results-based accountability goals and metrics related to reducing disparities. One example of this work was the creation of a Project Homekey metric focused on tracking the number of Hispanic/Latinx households that secured permanent housing.

H4H is supporting the implementation of strength-based care management, an evidenced-based practice, with key service providers within our region. H4H has a contract with the California Institute of Behavioral Health Solutions (CIBHS) to support this work over a three-year period. This consultation includes core practice training, ongoing provider coaching and consultation, practice fidelity reviews, and leadership planning sessions. A core tenet of this practice is providing services in alignment with a participant's cultural experiences, strengths, and community assets.

H4H plans to establish a Housing for Health vendor pool to streamline and simplify the process of contracting for services related to addressing homelessness. The vendor pool process establishes a low-barrier method for organizations to "pre-qualify" as a potential vendor for Housing for Health-funded services and consultation. When funds become available for contracting, H4H can solicit interest among pre-qualified vendors. This approach will allow H4H to diversify the range of providers eligible to receive H4H funding.

## **(II) Strengthening the data quality of the recipient's Homeless Management Information System.**

The local Housing for Health Partnership (H4HP) Continuum of Care operations committee has developed and the H4HP policy board has recently approved updated homeless management information system (HMIS) policies and procedures. These policies includes a heightened emphasis on data quality by focusing on improvements to the completeness of data for each participant, timeliness of the entry of data into HMIS after collection from the participant, and consistency and accuracy of the data entered into HMIS.

The standards and process for improving data quality are the subject of the new Data Quality Improvement and Process and Plan (Data Quality Plan). While the plan aims for 100% data completeness, the completeness standards are set at 0% for missing or null responses and no more than 5% "don't know," "refused," or "other" responses applicable to all required HMIS required universal and program-level data elements. The accuracy standards require that that all data recorded in HMIS matches information in the participant record, and that at least 5% of active participant records be audited monthly for accuracy. Consistency standards require that all data entry staff have the same understanding about what each data element means, and that training, materials, and definitions are available to all staff. Data entry timelessness standards for data entry for most program types are set at within two days of participant intake and exit, although exit timing can vary for programs without clear exit data.

The Data Quality Plan sets forth a continuous data quality monitoring process that improves the CoC's ability to have valid and accurate data, while setting expectations for all those involved in collecting and reviewing data. For example, agencies have the primary responsibility for entering data and using data quality reports for verifying, and correcting data. The CoC's HMIS Administrator, BitFocus, has the responsibility for supporting agencies in correctly entering data and addressing any issues by providing trainings, workflow documents, data quality reports with information on how to correct errors; and working with and providing technical assistance to agencies to identify and resolve specific data quality issues. The CoC, has the responsibility to review data quality dashboards with providers on a monthly basis during

HMIS Provider Working Group meetings.

A critical role for the continuous data quality monitoring process is ensure that data is prepared, cleaned, and ready to produce accurate and complete reports for various funders and for CoC systems improvements. These include tend to follow and annual cycle that includes CoC APRs (annually), HUD annual competition reports (Fall), point-in-time (PIT) count (January), Housing Inventory Chart (January), System Performance Measures (February/March), LSA reports (October – December), and State of California annual funding reports.

**(III) Increasing capacity for pooling and aligning housing and services funding from existing, mainstream, and new funding.**

One of the core functions of the two-year old Housing for Health (H4H) Division is to help increase capacity for pooling and aligning housing and services funding from existing, mainstream, and new funding sources. H4H staff performs core functions of the CoC – HMIS lead, CoC collaborative applicant, and the coordinated entry lead entity. Having these core functions under one administrative body streamlines opportunities for pooling and aligning funding sources. For example, H4H coordinated the transfer of two existing HUD Youth Homelessness Demonstration Program (YHDP) grants to a new provider. The new provider will also be receiving Homeless, Housing Assistance and Prevention (HHAP) funding as part of a planned Project Homekey Round 3 application to create a new transitional housing program for youth.

H4H continues to partner with the Central California Alliance for Health (the Alliance) on efforts to implement housing-related components of CalAIM. H4H and the Alliance developed a collaborative Housing and Homelessness Incentive Program (HHIP) plan to strategically invest one-time funds in mutually agreed upon local priorities, including, supporting lived experienced advisory groups and processes. H4H and the Alliance continue to explore ways to support community service provider capacity development opportunities that bring housing providers into health care work and vice versa. H4H is helping current ESG-CV and HHAP funding recipients with the process of becoming CalAIM housing service providers.

As a Division within the County Human Services Department, H4H has additional opportunities for greater funding expansion and alignment. California Department of Social Services housing and homelessness funding sources are managed by H4H. These grants include the CalWorks Housing Support Program (HSP), Bringing Families Home (BFH), Transitional Housing Program (THP), Housing Disability Advocacy Program (HDAP), and Home Safe. Having these funding sources managed by H4H creates opportunities for greater funding alignment. For example, HDAP-targeted strategic investment funds will be utilized to support one or more Project Homekey Round 3 proposals. HDAP funding is being used to expand SSI advocacy capacity to those not already enrolled in General Assistance or CalWorks. HomeSafe funding is supporting the hiring of an H4H social worker and the braiding of centralized flexible housing assistance funding. BFH funding supports services and rehousing funding for families eligible for Family Unification Program (FUP) vouchers from the Housing Authority. Since H4H is embedded within a large, existing county department with funding leveraging capacity, H4H receives local government and matching funds that support staffing, administrative, and data management expenses for the Division.

H4H works closely with staff from the County Health Services Agency on a variety of projects. For example, H4H supported Behavioral Health Department funding proposals to expand street outreach to individuals struggling with behavioral health conditions. The work of these newly funded outreach teams is being paired with other H4H funding sources including Encampment Response Funds and HHAP dollars. H4H and Behavioral Health are also collaborating on funding No Place Like Home (NPLH) supportive housing developments.

The Housing Authority of the County of Santa Cruz is another key funding partner for H4H. H4H and Housing Authority staff meet monthly for planning and operational coordination of over 1100 project and tenant-based vouchers dedicated to households at-risk of or currently experiencing homelessness. The

entities collaborated on the utilization of Emergency Housing Vouchers (EHVs) by braiding together ESG-CV, Project Roomkey, and HHAP funding to fund housing navigation and tenancy-sustaining services as well as landlord incentives. HHAP funding is being used to continue some of the successful landlord incentive efforts.

H4H also partners with all the cities in the County to braid together funding to support emergency shelter operations and other activities. The local jurisdictions plan to explore ways to increase their individual contributions to address gaps in countywide shelter capacity. The County has conceptually committed to matching increased contributions from the City jurisdictions. The City of Santa Cruz and H4H have worked together to develop shared investment plans for a one-time \$14M city allocation of state funding to address homelessness. Some of these dollars are being used to develop long-term capital and facility plans for enhanced housing and supportive services programming.

H4H remains committed to securing, pooling, and aligning funding resources to build a more effective and systematic approach to preventing and ending homelessness within the County.

#### **(IV) Improving homeless point-in-time counts.**

The Santa Cruz County CoC has a very robust process for ensuring the most accurate possible point-in-time (PIT) count using HUD-recommended practices and definitions. This includes:

- General street/unsheltered “blitz” count
- General sheltered count
- Targeted youth and young adult unsheltered count
- Targeted County Office of Education count of students and their families
- In-person surveys of more than 300 unsheltered and sheltered persons (demographics, experiences, service needs, characteristics).

To improve the process, this past year the local Housing for Health Partnership (H4HP) policy board moved from a biennial to an annual PIT count. An annual PIT count will provide more accurate, timely, up-to-date information on the current homeless population and trends over time. In addition, in 2022 the CoC and its PIT count consultants, Applied Survey Research (ASR), made some methodological improvements to the blitz count and in-person surveys. Very significantly, a change was made in the use of GPS-enabled smartphones in data collection, using an ESRI Survey 123 application developed and customized by ASR to conform to HUD data collection requirements and as a tool to verify the compliance with the COVID-19 safety precautions established by the planning team. Also, improvements were made in pre-planning efforts to deploy count teams virtually, wherever possible, thereby avoiding the need for centralized deployment centers where COVID-19 transmission risks would be greater.

Outreach organizations, program staff, county, and city staff along with selected community members were able to select areas for enumeration from an interactive GIS planning map tool that enabled planning for complete coverage of the county geography with prioritization of high-density homeless routes to outreach staff and personnel with direct service experience.

As for the 2022 youth and young adult count, involvement of youth and young adults experiencing homelessness as guides paid \$20 per hour was a key to success since they had specialized knowledge about when and where homeless youth congregate.

Finally, the sheltered count benefited from increasingly close cooperation between ASR and BitFocus, the HMIS Administrator. Most sheltered (emergency shelter and transitional housing) data came directly from HMIS data for these programs, while a web-based system was used for the few shelter programs that do not enter participant data into HMIS.

Based upon our long experience with the above process and improvements made every year, we are

confident that PIT count is and will remain an accurate representation of homelessness in Santa Cruz County.

**(V) Improving coordinated entry systems to strengthen coordinated entry systems to eliminate racial bias, to create a youth-specific coordinated entry system or youth-specific coordinated entry access points, or to improve the coordinated entry assessment tool to ensure that it contemplates the specific needs of youth experiencing homelessness.**

The local Housing for Health Partnership (H4HP) Continuum of Care operations committee and policy board are currently working on a major transformation of the existing coordinated entry system. The current system, known as Smart Path, utilizes the VI-SPDAT as its assessment tool. Several research papers have highlighted the disparate racial impacts associated with using this tool. The tool and Smart Path process also created a local culture that emphasized completing assessments for “scoring and waiting” rather than providing immediate resources and support to people experiencing homelessness. The Smart Path community queue contains a long list of households that have completed a VI-SPDAT but have no ongoing connection with a designated provider. As a result, when housing opportunities arise in the coordinated entry system, it’s often difficult to find and connect with individuals in the community queue.

The proposed new coordinated entry process includes changes to address some of the issues with the current Smart Path design. A local Housing Needs Assessment (HNA) was developed to replace the VI-SPDAT as our coordinated entry assessment tool. The HNA is designed to collect housing needs, barriers, and asset information over a series of conversations with households experiencing homelessness. The HNA was designed in collaboration with our local managed care plan to capture the housing-related information necessary to bill for CalAIM housing-related services. Youth service providers were included in the design and review process of the HNA. Nearly all the information gathered can be used to develop actionable plans to reduce barriers and increase assets in support of securing permanent housing. Data collected in the HNA will inform the development of Housing Action Plans (HAP). The HNA and HAP are being incorporated into our local HMIS system.

Once an HNA is completed in HMIS, the data system will score the assessment based on a locally developed scoring approach that can be adjusted over time if data indicates the current scoring methodology contributes to systematic disparities. In the new proposed coordinated entry process, only a subset of individuals that complete the HNA will be added to the community queue based on the availability of resources for a given population. The intention is to size the community queue so that at least half of the households in the queue are likely to receive a referral to a permanent housing resource within the next 12 months. The size of the queue and score cutoffs will be adjusted over time to reflect the availability of resources and system flow data.

Specifically designated community connectors will receive training in the coordinated entry process, HNA, HAP, and housing problem-solving. Organizations and staff serving in community connector roles will need to meet certain minimum standards established by the CoC. Some community connectors will be directly funded by H4H. For example, H4H funding will support some youth-specific connectors. Other community connectors will be funded from other sources and will be selected based on their capacity and commitment to follow up with households experiencing homelessness. Community connectors will have access to a countywide flexible housing problem-solving fund to help households secure housing if viable options can be identified. For example, a household might need travel funding to return to housing with family or friends or funding for a security deposit.

Community Connectors will participate in regular monthly training, support, and networking meetings that will include resource sharing, care coordination planning, and ongoing training. H4H staff will seek out opportunities to partner with specific community partners to monitor for equitable access to the coordinated entry process and resources. H4H anticipates finalization and implementation of the proposed new coordinated entry process in the late spring of 2023.

## Question 8

**\*Responses to these questions are for informational purposes only.**

What **information, guidance, technical assistance, training, and/or alignment of resources and programs** should Cal ICH and other State Agencies prioritize to support jurisdictions in progressing towards their Outcome Goals, Goals for Underserved Populations and Populations Disproportionately Impacted by Homelessness, and/or would otherwise help strengthen local partnerships, coordination, planning, and progress toward preventing and ending homelessness?

### **Information, Guidance, and Technical Assistance**

Technical assistance related to goal setting (generally)

Technical assistance related to goal setting in underserved/disproportionately impacted populations

Technical assistance related to achieving outcome goals

Trainings on topics of equity

### **Alignment of Resources and Programs**

In the space below, please describe what Cal ICH and other State Agencies should prioritize related to alignment of resources and programs, strengthening partnerships and collaborations, or any other ways that State can support communities' progress:

#### **Untitled**

We appreciate the development of Cal ICH and its expanding role in coordinating efforts across state agencies and with local cities, counties, CoCs, and tribal groups. Some ideas for consideration include:

(1) Greater stability and consistency in state funding coming from fewer state agencies could reduce administrative burdens and improve outcomes statewide.

(2) Focusing efforts on creating a statewide medium- or long-term rental assistance program that builds off the documented successes of the LA county flexible housing subsidy pool.

(3) Establishing greater transparency and consistency statewide on the cost of particular interventions in order to help set realistic expectations based on the resources provided, e.g., how much does it cost to operate one shelter bed per year?

(4) Expanding the number of users that can access the HDIS data repository would help more staff engage in outcome-focused program and contract efforts.

(5) Using HDIS data to identify programs statewide achieving positive "outlier" outcomes and sharing learnings from these efforts with other jurisdictions.

(6) Creating formal statewide policy documents or guidance on the key roles that cities, counties, CoCs, and tribal groups should play in addressing homelessness. The federal government relies on the CoC to be the primary coordinating body for most federal funding tied to addressing homelessness. The state approach is not currently aligned with the federal government.

(7) Healthcare services and resources are being divided between county entities and managed care plans that create additional challenges in coordinating care and resources for people experiencing or at risk of homelessness. Consolidating and clarifying responsibilities would be helpful and including county leaders in statewide meetings on CalAIM implementation.

(8) Supporting in-person and virtual statewide conferences and convenings among key staff and partners working to address homelessness in California.

# Part IV. Funding Plan Strategic Intent Narrative

## Question 1

### Eligible Use 1

#### Eligible Use Category Intended to be Supported with HHAP-4

2. Operating subsidies

**Approximate % of TOTAL HHAP-4 ALLOCATION to be used on this Eligible Use(%)**

70.00%

**Approximate % of TOTAL HHAP-4 ALLOCATION to be used under this Eligible Use as part of the Youth Set Aside? (%)**

27.00%

#### Activities to be Supported with HHAP-4

Funding to support low-barrier housing navigation center operations + youth transitional housing

#### How is this a strategic use of HHAP-4 resources that will address needs and gaps within the homelessness response system?

The County of Santa Cruz established a goal of 600 temporary housing (shelter and transitional housing) units in its "Housing for a Healthy Santa Cruz" framework for addressing homelessness. During the pandemic, the County had over 1,000 beds available. This number has fallen below 400 due to losses in state and federal funding, lower levels of private donations, and the loss of some shelter locations. This funding is critical to helping our community move closer to its temporary housing capacity goals.

#### How were these decisions to invest HHAP-4 into these activities informed by the planned uses of other state, local, and/or federal funding sources (as documented in the Landscape Analysis in Part I)?

Very few other federal, state, and local funding sources provide enough funding to cover the operational costs associated with temporary housing. Local jurisdictions (city and county) also contribute to covering some of these costs. Additional dollars are needed to achieve local capacity goals.

### Eligible Use 2

#### Eligible Use Category Intended to be Supported with HHAP-4

3. Street outreach

**Approximate % of TOTAL HHAP-4 ALLOCATION to be used on this Eligible Use(%)**

4.00%

**Approximate % of TOTAL HHAP-4 ALLOCATION to be used under this Eligible Use as part of the Youth Set Aside? (%)**

0.00%

#### Activities to be Supported with HHAP-4

Funds to sustain outreach efforts in unincorporated areas

#### How is this a strategic use of HHAP-4 resources that will address needs and gaps within the homelessness response system?

The County has established goals for the creation of geographically-based proactive street outreach teams. There is currently some capacity within the cities of Santa Cruz and Watsonville but no capacity for covering unincorporated areas of the County. These funds help close the funding gap for these outreach services.

**How were these decisions to invest HHAP-4 into these activities informed by the planned uses of other state, local, and/or federal funding sources (as documented in the Landscape Analysis in Part I)?**

The County has secured one-time CDBG funding from the state for outreach services in unincorporated areas of the County and is actively pursuing funding for these services through CalAIM HHIP resource in partnership with our local Medi-Cal managed care plan

### **Eligible Use 3**

**Eligible Use Category Intended to be Supported with HHAP-4**

5. Systems support

**Approximate % of TOTAL HHAP-4 ALLOCATION to be used on this Eligible Use(%)**

13.00%

**Approximate % of TOTAL HHAP-4 ALLOCATION to be used under this Eligible Use as part of the Youth Set Aside? (%)**

0.00%

**Activities to be Supported with HHAP-4**

Real estate partnership contract and incentives for private landlord participation in permanent supportive housing projects

**How is this a strategic use of HHAP-4 resources that will address needs and gaps within the homelessness response system?**

These funds are needed to continue a landlord incentive and partnership program started with one-time pandemic-related funding. These incentives and supports have helped our providers secure rental units in one of the tightest and most expensive rental markets in the country. The County Housing Authority is in the top 10 housing authorities statewide in our utilization of Emergency Housing Vouchers (EHVs) in part because of these resources. Sustaining these efforts is critical for maintaining trusted partnerships with the Housing Authority and rental property owners and managers.

**How were these decisions to invest HHAP-4 into these activities informed by the planned uses of other state, local, and/or federal funding sources (as documented in the Landscape Analysis in Part I)?**

The County is using some local general funds and potentially CalAIM HHIP funds to also support these activities.

### **Eligible Use 4**

**Eligible Use Category Intended to be Supported with HHAP-4**

7. Prevention and diversion

**Approximate % of TOTAL HHAP-4 ALLOCATION to be used on this Eligible Use(%)**

9.00%

**Approximate % of TOTAL HHAP-4 ALLOCATION to be used under this Eligible Use as part of the Youth Set Aside? (%)**

0.00%

**Activities to be Supported with HHAP-4**

Flexible, centralized rehousing/housing problem solving fund for community

**How is this a strategic use of HHAP-4 resources that will address needs and gaps within the homelessness response system?**

Centralized, flexible one-time funding to meet housing-related needs is a critical resource identified in our community. Sustaining and expanding the amount of funding in this category can help our community prevent homelessness and support housing problem-solving/diversion work as part of our updated coordinated entry system.

**How were these decisions to invest HHAP-4 into these activities informed by the planned uses of other state, local, and/or federal funding sources (as documented in the Landscape Analysis in Part I)?**

The County is using multiple funding sources to support the centralized flexible housing assistance fund including local general funds, Home Safe, HUD CoC, and other dollars.

**Eligible Use 5**

**Eligible Use Category Intended to be Supported with HHAP-4**

9. Shelter improvements to lower barriers and increase privacy

**Approximate % of TOTAL HHAP-4 ALLOCATION to be used on this Eligible Use(%)**  
4.00%

**Approximate % of TOTAL HHAP-4 ALLOCATION to be used under this Eligible Use as part of the Youth Set Aside? (%)**  
2.00%

**Activities to be Supported with HHAP-4**

Funding to support low-barrier housing navigation center operations

**How is this a strategic use of HHAP-4 resources that will address needs and gaps within the homelessness response system?**

Funding is needed to support shelter improvements that reduce barriers to entry. Several existing shelter locations in the County need funding to increase privacy and reduce barriers to partners, pets, and possessions entering shelter spaces. The County is also pursuing new potential locations for shelter given the shortage of capacity compared with the need and targeted number of beds

**How were these decisions to invest HHAP-4 into these activities informed by the planned uses of other state, local, and/or federal funding sources (as documented in the Landscape Analysis in Part I)?**

The County will be using a mix of general funds, whole-person care housing funds, and CalAIM HHIP funds to reduce shelter barriers.

**Table 7. Demonstrated Need**

**# of available shelter beds**  
352

**# of people experiencing unsheltered homelessness in the homeless point-in-time count**  
1,774



**Shelter vacancy rate  
(%) in the summer  
months**  
10.00%

**Shelter vacancy rate  
(%) in the winter  
months**  
5.00%

**% of exits from  
emergency shelters to  
permanent housing  
solutions**  
26.10%

**Describe plan to connect residents to permanent housing.**

One of the goals of the Santa Cruz County Housing for Health Partnership is to increase the number of residents that exit shelters to permanent housing. Our staff is working on several ways to help improve these outcomes, including (1) Changing shelter contracts to include enough funding for housing navigation services; (2) Increasing access to a flexible source of one-time funds to help with housing transition expenses; (3) Starting a Housing for Health connector learning community to share practices that help with housing exits; and (4) Using data more frequently to analyze positive trends in certain programs so we can learn from them and spread the knowledge to others.

\*\* period used for % of exits from emergency shelters to permanent housing solutions is 07/1/2021-06/30/2022

## Question 2

Please describe how the planned investments of HHAP-4 resources and implementation of the activities to be supported will:

**Help drive progress toward achievement of the Outcome Goals and Goals for Underserved Populations and Populations Disproportionately Impacted by Homelessness (as identified in Part II above):**

We are strengthening case management and services to get more people housed including populations disproportionately impacted by homelessness. We are adding new resources including real estate incentives, adding housing problem-solving to our Coordinated Entry System which further improves housing outcomes. and we are strengthening the connection between street outreach and CoC programs and underserved communities. we are achieving youth outcomes by adding critically needed transitional housing programs. we are making some needed facilities improvements to low-barrier transitional housing shelters that will make the programs more effective.

**Help address racial inequities and other inequities in the jurisdiction's homelessness response system:**

We will fund stipends for members of the Lived Experience Advisory Board (LEAB) and other related costs. The LEAB will be providing the CoC and County with programmatic and policy recommendations on how best to channel HHAP 4 funds to address the racial/gender/ethnic inequities that exist in our homelessness response system.

**Be aligned with health and behavioral health care strategies and resources, including resources of local Medi-Cal managed care plans:**

Housing for Health (H4H) Division of the County of Santa Cruz Human Services Department serves as the

Continuum of Care (CoC) lead for our area and continues to partner with the Central California Alliance for Health (the Alliance) on efforts to implement housing-related components of CalAIM. H4H and the Alliance developed a collaborative Housing and Homelessness Incentive Program (HHIP) plan to strategically invest one-time funds in mutually agreed upon local priorities, including, supporting lived experienced advisory groups and processes. H4H is helping current ESG-CV and HHAP funding recipients with the process of becoming CalAIM housing service providers. H4H and the Alliance continue to explore ways to support community service provider capacity development opportunities that bring housing providers into health care work and vice versa.

**Support increased exits to permanent housing among people experiencing homelessness:**

Case managers and housing navigators in low-barrier interim shelters will help clients develop and carry out housing plans. The landlord partnership will help increase the number of permanent housing units to be immediately available for persons experiencing homelessness. The housing problem-solving fund will remove individualized barriers to housing access, e.g., providing flexible funding to an individual who needs to pay a security deposit to get housing.

# Certification

I certify that all information included in this Application is true and accurate to the best of my knowledge.

Yes

Table 1. Landscape Analysis of Needs and Demographics		
	People Experiencing Homelessness	Source and Date Timeframe of Data
<b>Population and Living Situations</b>		
<b>TOTAL # OF PEOPLE EXPERIENCING HOMELESSNESS</b>	2,299	2022 Santa Cruz County PIT Count Data
# of People Who are <b>Sheltered</b> (ES, TH, SH)	525	""
# of People Who are <b>Unsheltered</b>	1,774	""
<b>Household Composition</b>		
# of Households <b>without Children</b>	1,908	""
# of Households with <b>At Least 1 Adult &amp; 1 Child</b>	50	""
# of Households with <b>Only Children</b>	0	""
<b>Sub-Populations and Other Characteristics</b>		
# of Adults Who are Experiencing <b>Chronic Homelessness</b>	921	""
# of Adults Who are Experiencing <b>Significant Mental Illness</b>	818	""
# of Adults Who are Experiencing <b>Substance Abuse</b> Disorders	1,073	""
# of Adults Who are <b>Veterans</b>	351	""
# of Adults with <b>HIV/AIDS</b>	159	""
# of Adults Who are <b>Survivors of Domestic Violence</b>	86	""
# of <b>Unaccompanied Youth (under 25)</b>	222	""
# of <b>Parenting Youth (under 25)</b>	6	""
# of People Who are <b>Children of Parenting Youth</b>	4	""
<b>Gender Demographics</b>		
# of <b>Women/Girls</b>	741	""
# of <b>Men/Boys</b>	1,526	""
# of People Who are <b>Transgender</b>	11	""
# of People Who are <b>Gender Non-Conforming</b>	21	""
<b>Ethnicity and Race Demographics</b>		
# of People Who are <b>Hispanic/Latino</b>	896	""
# of People Who are <b>Non-Hispanic/Non-Latino</b>	1403	""
# of People Who are <b>Black or African American</b>	270	""
# of People Who are <b>Asian</b>	23	""
# of People Who are <b>American Indian or Alaska Native</b>	79	""
# of People Who are <b>Native Hawaiian or Other Pacific Islander</b>	11	""
# of People Who are <b>White</b>	1700	""
# of People Who are <b>Multiple Races</b>	216	""

*\*If data is not available, please input N/A in the cell and explain why the data is not available below:*

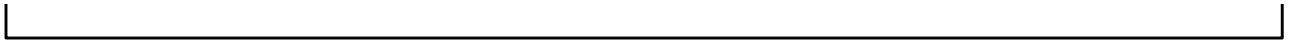


Table 2. Landscape Analysis of People Being Served

	Permanent Supportive Housing (PSH)	Rapid Rehousing (RRH)	Transitional Housing (TH)	Interim Housing or Emergency Shelter (IH / ES)	Diversions Services and Assistance (DIV)	Homelessness Prevention Services & Assistance (HP)	Outreach and Engagement Services (O/R)	Other: [Identify]	Source(s) and Timeframe of Data
<b>Household Composition</b>									
# of Households without Children	165	244	49	1537	1996	91	191	230	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of Households with At Least 1 Adult & 1 Child	6	227	32	109	98	143	0	0	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of Households with Only Children	0	0	0	6	36	2	9	1	HDIS CY 2020 People Served Data (Accessed 5-16-22)
<b>Sub-Populations and Other Characteristics</b>									
# of Adults Who are Experiencing Chronic Homelessness	131	124	27	540	499	0	46	51	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of Adults Who are Experiencing Significant Mental Illness	125	98	30	341	409	20	53	79	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of Adults Who are Experiencing Substance Abuse Disorders	93	59	13	249	184	3	27	47	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of Adults Who are Veterans	5	122	0	126	123	37	10	18	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of Adults with HIV/AIDS	2	2	0	4	15	0	1	0	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of Adults Who are Survivors of Domestic Violence	70	198	35	294	692	22	41	66	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of Unaccompanied Youth (under 25)	17	17	11	110	249	71	62	22	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of Parenting Youth (under 25)	10	49	5	9	26	53	0	0	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of People Who are Children of Parenting Youth	0	0	0	4	0	0	0	0	2022 Santa Cruz County Preliminary PIT Count Data
<b>Gender Demographics</b>									
# of Women/Girls	70	499	94	712	980	387	72	88	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of Men/Boys	115	454	69	1151	1363	309	116	145	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of People Who are Transgender	1	1	0	10	15	0	3	0	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of People Who are Gender Non-Conforming	0	3	0	1	11	0	1	0	HDIS CY 2020 People Served Data (Accessed 5-16-22)
<b>Ethnicity and Race Demographics</b>									
# of People Who are Hispanic/Latino	32	511	110	716	630	518	88	80	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of People Who are Non-Hispanic/Non-Latino	152	442	52	1061	1683	173	98	148	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of People Who are Black or African American	7	38	1	103	146	16	11	13	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of People Who are Asian	0	3	0	14	20	2	1	3	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of People Who are American Indian or Alaska Native	12	39	7	75	93	12	7	10	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of People Who are Native Hawaiian or Other Pacific Islander	1	16	1	20	21	4	3	2	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of People Who are White	144	794	143	1377	1857	465	132	179	HDIS CY 2020 People Served Data (Accessed 5-16-22)
# of People Who are Multiple Races	21	42	9	77	169	108	7	17	HDIS CY 2020 People Served Data (Accessed 5-16-22)

*\*\*If data is not available, please input N/A in the cell and explain why the data is not available below:*

Table 3. Landscape Analysis of State, Federal and Local Funding

Funding Program <i>(choose from drop down options)</i>	Fiscal Year <i>(see col. 10 if not apply)</i>	Total Amount Invested into Homelessness Interventions	# of Vouchers <i>(if applicable)</i>	Funding Source*	Intervention Types Supported with Funding <i>(select all that apply)</i>	Brief Description of Programming and Services Provided	Populations Served <i>(please x the appropriate population[s])</i>
Homekey (via HCD)	FY 2022-2023	\$ 15,200,000.00	62 vouchers	State Agency	Permanent Supportive and Service-Enriched Housing	Vets Village, Park Avenue and 801 River Street Homekey Award Announcements in 2022	<b>ALL PEOPLE EXPERIENCING HOMELESSNESS</b> <input checked="" type="checkbox"/> People Exp Chronic Homelessness <input checked="" type="checkbox"/> Veterans <input type="checkbox"/> People Exp Severe Mental Illness <input type="checkbox"/> People Exp HIV/ AIDS <input type="checkbox"/> Children of Parenting Youth <input type="checkbox"/> People Exp Substance Abuse Disorders <input type="checkbox"/> Unaccompanied Youth <input type="checkbox"/> Other <i>(please enter here)</i>
	FY 2023-2024	\$ 4,125,000.00					
	FY 2024-2025	\$ -					
Emergency Rental Assistance (ERA) - via Treasury	FY 2021-2022	\$ 13,801,039.00	n/a	Federal Agency	Diversion and Homelessness Prevention	Emergency Rental Assistance Funding (Housing Is Key) - shows state and county max. funds available	<b>ALL PEOPLE EXPERIENCING HOMELESSNESS</b> <input type="checkbox"/> People Exp Chronic Homelessness <input checked="" type="checkbox"/> Veterans <input type="checkbox"/> Parenting Youth <input type="checkbox"/> People Exp Severe Mental Illness <input type="checkbox"/> People Exp HIV/ AIDS <input type="checkbox"/> Children of Parenting Youth <input type="checkbox"/> People Exp Substance Abuse Disorders <input type="checkbox"/> Unaccompanied Youth <input checked="" type="checkbox"/> Other <i>(Housed at-risk due to COVID)</i>
	FY 2022-2023	\$ 13,619,717.00	n/a		Systems Support Activities		
					Administrative Activities		
Emergency Solutions Grants - CV (ESG-CV) - via HCD	FY 2021-2022	\$ 4,181,916.00	n/a	Federal Agency	Rental Assistance/Rapid Rehousing	Focus of funds on rehousing wave to help those exiting COVID shelters to exit to permanent homes	<b>ALL PEOPLE EXPERIENCING HOMELESSNESS</b> <input type="checkbox"/> People Exp Chronic Homelessness <input checked="" type="checkbox"/> Veterans <input type="checkbox"/> Parenting Youth <input type="checkbox"/> People Exp Severe Mental Illness <input type="checkbox"/> People Exp HIV/ AIDS <input type="checkbox"/> Children of Parenting Youth <input type="checkbox"/> People Exp Substance Abuse Disorders <input type="checkbox"/> Unaccompanied Youth <input checked="" type="checkbox"/> Other <i>(65 and older/COVID high risk)</i>
	FY 2022-2023	\$ 5,820,094.00	n/a		Interim Housing/Congregate/Non-Congregate Shelter		
					Outreach and Engagement		
Community Development Block Grant (CDBG) - via HCD	FY 2022-2023	\$ 100,000.00	n/a	Federal Agency	Permanent Supportive and Service-Enriched Housing	Planned extension of non-congregate shelter beyond FEMA authorization	<b>ALL PEOPLE EXPERIENCING HOMELESSNESS</b> <input type="checkbox"/> People Exp Chronic Homelessness <input checked="" type="checkbox"/> Veterans <input type="checkbox"/> Parenting Youth <input type="checkbox"/> People Exp Severe Mental Illness <input type="checkbox"/> People Exp HIV/ AIDS <input type="checkbox"/> Children of Parenting Youth <input type="checkbox"/> People Exp Substance Abuse Disorders <input type="checkbox"/> Unaccompanied Youth <input checked="" type="checkbox"/> Other <i>(CalAIM eligible and prioritized health risk)</i>
	FY 2023-2024	\$ 400,000.00	n/a		Outreach and Engagement		
Community Development Block Grant - CV (CDBG-CV) - via HCD	FY 2022-2023	\$ 1,063,781.60	n/a	Federal Agency	Interim Housing/Congregate/Non-Congregate Shelter	Street outreach in unincorporated areas	<b>ALL PEOPLE EXPERIENCING HOMELESSNESS</b> <input checked="" type="checkbox"/> People Exp Chronic Homelessness <input type="checkbox"/> Veterans <input type="checkbox"/> Parenting Youth <input type="checkbox"/> People Exp Severe Mental Illness <input type="checkbox"/> People Exp HIV/ AIDS <input type="checkbox"/> Children of Parenting Youth <input type="checkbox"/> People Exp Substance Abuse Disorders <input type="checkbox"/> Unaccompanied Youth <input type="checkbox"/> Other <i>(please enter here)</i>
	FY 2023-2024	\$ 265,945.40	n/a				
No Place Like Home (NPLH) - via HCD	FY 2021-2022	\$ 5,378,524.00	n/a	State Agency	Permanent Supportive and Service-Enriched Housing	Permanent supportive housing - Eden Housing projects - Miles Lane, Freedom Blvd; MidPen housing project - 17th/Capitola	<b>ALL PEOPLE EXPERIENCING HOMELESSNESS</b> <input checked="" type="checkbox"/> People Exp Chronic Homelessness <input type="checkbox"/> Veterans <input type="checkbox"/> Parenting Youth <input type="checkbox"/> People Exp Severe Mental Illness <input type="checkbox"/> People Exp HIV/ AIDS <input type="checkbox"/> Children of Parenting Youth <input type="checkbox"/> People Exp Substance Abuse Disorders <input type="checkbox"/> Unaccompanied Youth <input type="checkbox"/> Other <i>(please enter here)</i>
	FY 2022-2023	\$ 13,177,895.00	n/a				
	FY 2023-2024	\$ 9,087,141.00					
Homeless Housing, Assistance and Prevention Program (HHAP) - via Cal ICH  including HHAP 3	FY 2021-2022	\$ 3,302,473.00	n/a	State Agency	Systems Support Activities	3 rounds of funding; multiple uses; primary focus on low-barrier housing navigation center operators and JAY transitional housing project	<b>ALL PEOPLE EXPERIENCING HOMELESSNESS</b> <input checked="" type="checkbox"/> People Exp Chronic Homelessness <input type="checkbox"/> Veterans <input type="checkbox"/> Parenting Youth <input type="checkbox"/> People Exp Severe Mental Illness <input type="checkbox"/> People Exp HIV/ AIDS <input type="checkbox"/> Children of Parenting Youth <input type="checkbox"/> People Exp Substance Abuse Disorders <input type="checkbox"/> Unaccompanied Youth <input type="checkbox"/> Other <i>(please enter here)</i>
	FY 2022-2023	\$ 3,500,000.00	n/a		Administrative Activities		
	FY 2023-2024	\$ 3,500,000.00	n/a		Interim Housing/Congregate/Non-Congregate Shelter		
	FY 2024-2025	\$ 3,174,605.00			Rental Assistance/Rapid Rehousing		
Encampment Resolution Funding - via Cal ICH	FY 2022-2023	\$ 1,303,753.00	n/a	State Agency	Interim Housing/Congregate/Non-Congregate Shelter	Housing Pathways scholarships and housing navigation/tenancy sustaining services for those living in an encampment in City of Santa Cruz	<b>ALL PEOPLE EXPERIENCING HOMELESSNESS</b> <input type="checkbox"/> People Exp Chronic Homelessness <input checked="" type="checkbox"/> Veterans <input type="checkbox"/> Parenting Youth <input type="checkbox"/> People Exp Severe Mental Illness <input type="checkbox"/> People Exp HIV/ AIDS <input type="checkbox"/> Children of Parenting Youth <input type="checkbox"/> People Exp Substance Abuse Disorders <input type="checkbox"/> Unaccompanied Youth <input checked="" type="checkbox"/> Other <i>(those in specific encampment)</i>
	FY 2023-2024	\$ 1,066,707.00			Permanent Supportive and Service-Enriched Housing		
Project Roomkey and Rehousing - via CDSS  Includes multiple rounds	FY 2021-2022	\$ 812,337.00		State Agency	Interim Housing/Congregate/Non-Congregate Shelter	Used to support extensions of Project Roomkey sites and Rehousing Wave Programs	<b>ALL PEOPLE EXPERIENCING HOMELESSNESS</b> <input type="checkbox"/> People Exp Chronic Homelessness <input checked="" type="checkbox"/> Veterans <input type="checkbox"/> Parenting Youth <input type="checkbox"/> People Exp Severe Mental Illness <input type="checkbox"/> People Exp HIV/ AIDS <input type="checkbox"/> Children of Parenting Youth <input type="checkbox"/> People Exp Substance Abuse Disorders <input type="checkbox"/> Unaccompanied Youth <input checked="" type="checkbox"/> Other <i>(65 and older/COVID high risk)</i>
	FY 2022-2023	\$ 526,099.00			Permanent Supportive and Service-Enriched Housing		
	FY 2023-2024	\$ 3,234,477.00					
FEMA Public Assistance Program Category B - via FEMA	FY 2021-2022	\$ 36,000,000.00	n/a		Interim Housing/Congregate/Non-Congregate Shelter	Estimated FEMA claim for...	<b>ALL PEOPLE EXPERIENCING HOMELESSNESS</b> <input type="checkbox"/> People Exp Chronic Homelessness <input checked="" type="checkbox"/> Veterans <input type="checkbox"/> Parenting Youth
			n/a				

				Federal Agency			ESTIMATED FEMA GRANT for non-congregate shelter programming since beginning of pandemic		ALL PEOPLE EXPERIENCING HOMELESSNESS	People Exp Severe Mental Illness	People Exp HIV/ AIDS	Children of Parenting Youth	
										People Exp Substance Abuse Disorders	Unaccompanied Youth	Other (65 and older/COVID high risk/COVID+ and COVID exposed)	
CalWORKs Housing Support Program (HSP) - via CDSS	FY 2022-2023	\$ 2,150,056.00	n/a	State Agency	Rental Assistance/Rapid Rehousing		Rapid rehousing program for CalWORKs recipients		ALL PEOPLE EXPERIENCING HOMELESSNESS	TARGETED POPULATIONS (please "x" all that apply)			
	FY 2023-2024	\$ 2,150,056.00	n/a							People Exp Chronic Homelessness	Veterans	Parenting Youth	
										People Exp Severe Mental Illness	People Exp HIV/ AIDS	Children of Parenting Youth	
										People Exp Substance Abuse Disorders	Unaccompanied Youth	Other ((CalWORKs families)	
Housing and Disability Advocacy Program (HDAP) - via CDSS	FY 2022-2023	\$ 2,213,577.00	n/a	State Agency	Systems Support Activities		Rapid rehousing for disabled individuals not receiving social security, social security advocacy, permanent supportive housing investment fund		ALL PEOPLE EXPERIENCING HOMELESSNESS	TARGETED POPULATIONS (please "x" all that apply)			
	FY 2023-2024	\$ 2,213,577.00	n/a							People Exp Chronic Homelessness	Veterans	Parenting Youth	
										People Exp Severe Mental Illness	People Exp HIV/ AIDS	Children of Parenting Youth	
										People Exp Substance Abuse Disorders	Unaccompanied Youth	Other (disabled, not receiving social security, homeless)	
Home Safe - via CDSS	FY 2022-2023	\$ 392,083.00	n/a	State Agency	Diversion and Homelessness Prevention		Homelessness prevention and rehousing services and financial assistance for seniors and people with disabilities referred to APS		ALL PEOPLE EXPERIENCING HOMELESSNESS	TARGETED POPULATIONS (please "x" all that apply)			
	FY 2023-2024	\$ 500,000.00	n/a							People Exp Chronic Homelessness	Veterans	Parenting Youth	
										People Exp Severe Mental Illness	People Exp HIV/ AIDS	Children of Parenting Youth	
										People Exp Substance Abuse Disorders	Unaccompanied Youth	Other (APS clients at-risk of or experiencing homelessness)	
Bringing Families Home (BFH) - via CDSS	FY 2022-2023	\$ 1,585,609.00	n/a	State Agency	Systems Support Activities		Rapid rehousing program for child welfare involved families experiencing homelessness		ALL PEOPLE EXPERIENCING HOMELESSNESS	TARGETED POPULATIONS (please "x" all that apply)			
			n/a							People Exp Chronic Homelessness	Veterans	Parenting Youth	
			n/a							People Exp Severe Mental Illness	People Exp HIV/ AIDS	Children of Parenting Youth	
										People Exp Substance Abuse Disorders	Unaccompanied Youth	Other (child welfare involved families experiencing homelessness)	
Continuum of Care Program (CoC) - via HUD	FY 2022-2023	\$ 5,207,237.00		Federal Agency	Systems Support Activities	Permanent Supportive and Service-Enriched Housing	Core funding from HUD for range of activities related to helping people experiencing homelessness	X	ALL PEOPLE EXPERIENCING HOMELESSNESS	TARGETED POPULATIONS (please "x" all that apply)			
										People Exp Chronic Homelessness	Veterans	Parenting Youth	
						Administrative Activities				Diversion and Homelessness Prevention	People Exp Severe Mental Illness	People Exp HIV/ AIDS	Children of Parenting Youth
						Interim Housing/Congregate/Non-Congregate Shelter				Outreach and Engagement	People Exp Substance Abuse Disorders	Unaccompanied Youth	Other (please enter here)
					Rental Assistance/Rapid Rehousing								
Emergency Housing Vouchers (EHVs) - via HUD	FY 2022-2023	\$ 6,994,000.00	269 vouchers	Federal Agency	Systems Support Activities		One-time dedicated housing assistance vouchers locally targeted to households experiencing homelessness (269 vouchers); ESTIMATED ANNUAL BUDGET SHOWN		ALL PEOPLE EXPERIENCING HOMELESSNESS	TARGETED POPULATIONS (please "x" all that apply)			
	FY 2023-2024	\$ 6,994,000.00								People Exp Chronic Homelessness	Veterans	Parenting Youth	
	FY 2024-2025	\$ 6,994,000.00								People Exp Severe Mental Illness	People Exp HIV/ AIDS	Children of Parenting Youth	
										Permanent Supportive and Service-Enriched Housing		People Exp Substance Abuse Disorders	Unaccompanied Youth
											X		
Supportive Services for Veteran Families Program (SSVF) - via VA	FY 2022-2023	\$ 523,702.00	n/a	Federal Agency	Rental Assistance/Rapid Rehousing		Rapid rehousing program for homeless veterans; showing minimum amount of funding available for one year		ALL PEOPLE EXPERIENCING HOMELESSNESS	TARGETED POPULATIONS (please "x" all that apply)			
										People Exp Chronic Homelessness	X	Veterans	Parenting Youth
										Diversion and Homelessness Prevention	People Exp Severe Mental Illness	People Exp HIV/ AIDS	Children of Parenting Youth
										People Exp Substance Abuse Disorders	Unaccompanied Youth	Other (please enter here)	
Local General Fund	FY 2021-2022	\$ 3,006,343.00	n/a	Local Agency	Systems Support Activities	Diversion and Homelessness Prevention	City and county funding primarily used for supporting service-enriched shelter operational costs	X	ALL PEOPLE EXPERIENCING HOMELESSNESS	TARGETED POPULATIONS (please "x" all that apply)			
	FY 2022-2023	\$ 3,006,343.00	n/a							People Exp Chronic Homelessness	Veterans	Parenting Youth	
	FY 2023-2024	\$ 3,006,343.00								People Exp Severe Mental Illness	People Exp HIV/ AIDS	Children of Parenting Youth	
	FY 2024-2025	\$ 3,006,343.00								Outreach and Engagement	People Exp Substance Abuse Disorders	Unaccompanied Youth	Other (please enter here)
Other (enter funding source under dotted line)	FY 2021-2022	\$ 41,126.00	n/a	Federal Agency	Outreach and Engagement		Outreach and housing navigation for homeless individuals with a serious mental illness		ALL PEOPLE EXPERIENCING HOMELESSNESS	TARGETED POPULATIONS (please "x" all that apply)			
	FY 2022-2023	\$ 41,126.00								People Exp Chronic Homelessness	Veterans	Parenting Youth	
	FY 2023-2024	\$ 41,126.00								People Exp Severe Mental Illness	People Exp HIV/ AIDS	Children of Parenting Youth	
								X					



SAMHSA PATH	FY 2024-2025	\$ 41,126.00							People Exp <b>Substance Abuse Disorders</b>	Unaccompanied Youth	Other (please enter here)
Other (enter funding source under dotted line)	FY 2021-2022	\$ 2,878,599.00	n/a	Federal Agency	Systems Support Activities	Health services for people experiencing homelessness and low-income community members	X	ALL PEOPLE EXPERIENCING HOMELESSNESS	TARGETED POPULATIONS (please 'x' all that apply)		
	FY 2022-2023	\$ 2,878,599.00			People Exp <b>Chronic Homelessness</b>				Veterans	Parenting Youth	
	FY 2023-2024	\$ 2,878,599.00			People Exp <b>Severe Mental Illness</b>				People Exp <b>HIV/ AIDS</b>	Children of Parenting Youth	
HRSA HCH grants	FY 2024-2025	\$ 2,878,599.00			People Exp <b>Substance Abuse Disorders</b>				Unaccompanied Youth	Other (please enter here)	

\* NOTE: Private funder(s) option here could include philanthropy, resources from managed care plans organizations, corporate funders, or other private sources of funding

**Table 4. Outcome Goals**

<b>Outcome Goal #1a: Reducing the number of persons experiencing homelessness.</b>			
<b>Goal Statement:</b> By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show <b>2873</b> total people accessing services who are experiencing homelessness annually, representing <b>261 more</b> people and a <b>10% increase</b> from the baseline.			
<i>*Please be sure to copy and paste the goal statement from this application template to Cognito, and only update the fields in [brackets].</i>			
<b>Goal Narrative:</b> Given increased street outreach capacity through one-time grants, an anticipated increase in the number of households losing housing due to pandemic related impacts and a continuing tight housing market, we anticipate an increase in the # of people served over the next three years.			
Baseline Data: Annual estimate of number of people accessing services who are experiencing homelessness	Outcome Goals July 1, 2022 - June 30, 2025		
	Change in # of People	Change as % of Baseline	Target Annual Estimate of # of people accessing services who are experiencing homelessness
2612	261	Increase of 10%	2873
<b>Describe any underserved and/ or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:</b>		<b>Describe the trackable data goal(s) related to this Outcome Goal:</b>	
2022 PIT data shows an increase in the number of people experiencing homelessness among particular subgroups. These include veterans, individuals with behavioral health conditions, and individuals with HIV/AIDS. Given expansions in street outreach capacity we anticipate more contact with unsheltered veterans through outreach programs. We are working closely with our local Medi-Cal managed care plan, Central California Alliance for Health, to expand temporary housing capacity, housing navigation, and tenancy sustaining services over the next three years for people experience homelessness with significant health conditions. We anticipate seeing an increase in documented program enrollments and services for these populations.		Note: Meeting the trackable data goals for the underserved populations is not required for eligibility for Bonus Funds.  Increase enrollments of those with health conditions in CalAIM temporary housing and community support services by 50 people to improve documented program enrollments and services for these underserved populations.	

<b>Outcome Goal #1b. Reducing the number of persons experiencing homelessness on a daily basis.</b>			
<b>Goal Statement:</b> By the end of the performance period, data for the CA-508 Watsonville/Santa Cruz City & County CoC will show <b>1615</b> total people experiencing unsheltered homelessness daily, representing <b>159 fewer</b> people and a <b>9% reduction</b> from the baseline.			
<i>*Please be sure to copy and paste the goal statement from this application template to Cognito, only updating the fields in [brackets].</i>			
<b>Goal Narrative:</b> Given the availability of one-time resources from CalAIM, HHAP, and other state sources, we anticipate expansion in outreach and services capacity as well as movement toward year-round low barrier navigation center programming. These increased efforts should contribute to reductions in unsheltered homelessness unless the number of individuals losing			
Baseline Data: Daily Estimate of # of people experiencing unsheltered homelessness	Outcome Goals July 1, 2022 - June 30, 2025		
	Change in # of People	Change as % of Baseline	Target Daily Estimate of # of people experiencing unsheltered homelessness
1774	-159	-9%	1615
<b>Describe any underserved and/ or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:</b>		<b>Describe the trackable data goal(s) related to this Outcome Goal:</b>	
2022 PIT count data for the County shows an estimated 65% increase from 2019 in the number of unsheltered Blacks/African Americans in the County. Other HGIS data sets also show lower levels of access to services and housing resources among this population. Over the next three years, the community should focus attention on ensuring equitable and culturally affirming access to services and housing resources for this population.		Note: Meeting the trackable data goals for the underserved populations is not required for eligibility for Bonus Funds.  please note that we intend to follow the principle of "nothing for us without us" therefore we will in partnership with BIPOC people with lived experience of homelessness, develop a Lived Experience Advisory Board that will make governance, policy, funding, programmatic, and service delivery recommendations to eliminate homelessness system racial and social disparities. Our trackable data to ensure accountability to this goal includes the following outputs: 1. Standing up the Lived Experience Advisory Board 2. Recruitment of at least 5-7 members 3. The group develops strategies to reduce the	

<b>Outcome Goal #2. Reducing the number of persons who become newly homeless.</b>			
<b>Goal Statement:</b> By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show <b>956</b> total people become newly homeless each year, representing <b>106 fewer</b> people and a <b>10% reduction</b> from the baseline.			
<i>*Please be sure to copy and paste the goal statement from this application template to Cognito, only updating the fields in [brackets].</i>			
<b>Goal Narrative:</b> The County will be investing nearly \$1M in homelessness and eviction prevention resources in FY22-23 with an intention of reducing the number of households losing housing and entering homelessness. The ending of COVID-related eviction protections in a county identified as "high-risk" for housing instability in a UC Berkeley Turner Center for Housing Innovation report raises concerns about higher rates of evictions, displacement, and homelessness. We're projecting a slight decrease in the # of new people becoming homeless for the first time due to these competing forces.			
Baseline Data: Annual Estimate of # of people who become newly homeless each year	Outcome Goals July 1, 2022 - June 30, 2025		
	Change in # of People	Change as % of Baseline	Target Annual Estimate of # of people who become newly homeless each year
1062	-106	-10%	956
<b>Describe Your Related Goals for</b>		<b>Describe the trackable data goal(s) related to this Outcome Goal:</b>	
Describe any underserved and/ or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:		Note: Meeting the trackable data goals for the underserved populations is not required for eligibility for Bonus Funds.	

Comparing data from the 2019 and 2022 count shows the greatest increase (more than 50%) in homelessness among certain subpopulations including those with behavioral health conditions, HIV/AIDS, and Black/African Americans. Further information is needed to understand ways in which the community could prevent these populations from becoming homeless. One area for focus is deepening collaborations with health and behavioral health system providers to ensure appropriate institutional discharges, follow-up services, and linkages with housing-focused supportive services. CoAIM partnerships over the next three years will be critical for improving prevention efforts among these populations.

Develop local HMIS measures by disaggregating data of subpopulations including those with behavioral health conditions, HIV/AIDS, and Black/African Americans by race and health to track causes more closely on households experiencing homelessness for the first time. We are looking for a 2% decrease in numbers of persons who become homeless for the first time.

**Outcome Goal #3. Increasing the number of people exiting homelessness into permanent housing.**

**Goal Statement:**

By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show 737 total people exiting homelessness into permanent housing annually, representing 96 more people and a 15% increase from the baseline.

*\*Please be sure to copy and paste the goal statement from this application template to Cognito, only updating the fields in [brackets].*

**Goal Narrative:**

Expanded resources, planned permanent supportive housing projects through Project Homekey, and a systemwide focus on improved housing outcomes should result in increases in the number of people exiting homelessness to permanent housing. These efforts will be tempered by deepening affordability and rental vacancy challenges in the County as

Baseline Data: Annual Estimate of # of people exiting homelessness into permanent housing	Outcome Goals July 1, 2022 - June 30, 2025		
	Change in # of People	Change as % of Baseline	Target Annual Estimate of # of people exiting homelessness into permanent housing
641	96	15%	737

**Describe Your Related Goals for**

**Describe any underserved and/ or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:**

According to HDIS data, exit percentages from homelessness to permanent housing are greater for white, hispanic/latinx groups compared to other racial/ethnic groups. According to 2021 HDIS data, 38.3% of exits to permanent housing were among white, hispanic/latinx groups and they represented 31.4% of those served. Whites, non-hispanic/non-latinx groups, represented 35.6% of exits to permanent housing and 44% of the population served. Blacks/American Americans and Multiple Race groups showed lower percentages of exits to permanent housing when compared to the % of population served among these groups.

**Describe the trackable data goal(s) related to this Outcome Goal:**

*Note: Meeting the trackable data goals for the underserved populations is not required for eligibility for Bonus Funds.*

Goal over the next 3 years will be to learn why returns to homelessness and Permanent Housing exits are better for White, Hispanic/Latinx and to make improvements with the white/non-hispanic group. We aim to close this gap by at least 1% point for three groups: white, non-hispanic; black/AA; multiple race

**Outcome Goal #4. Reducing the length of time persons remain homeless.**

**Goal Statement:**

By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show 149 days as the average length of time that persons are enrolled in street outreach, emergency shelter, transitional housing, safehaven projects and time prior to move-in for persons enrolled in rapid rehousing and permanent housing programs annually, representing 26 fewer people and a 15% reduction from the baseline.

*\*Please be sure to copy and paste the goal statement from this application template to Cognito, only updating the fields in [brackets].*

**Goal Narrative:**

The prior three years of HDIS data indicate a gradual increase in the # of cumulative days homeless. We plan to work toward decreasing this trend through expanding outreach and incentives for private landlords to partner with existing RRH and PSH programs and with making changes to shelter standards and operational resources.

Baseline Data: Average length of time (in # of days) persons enrolled in street outreach, emergency shelter, transitional housing, safehaven projects and time prior to move-in for persons enrolled in rapid rehousing and permanent housing programs	Outcome Goals July 1, 2022 - June 30, 2025		
	Change in # of Days	Change as % of Baseline	Target Average length of time (in # of days) persons enrolled in street outreach, emergency shelter, transitional housing, safehaven projects and time prior to move-in for persons enrolled in rapid rehousing and permanent housing programs
175	-26	-15%	149

**Describe Your Related Goals for**

**Describe any underserved and/ or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:**

According to the HDIS data, 10.5% of all people with a move-in to permanent housing from rapid rehousing were people of multiple races. It further showed Black/African Americans represented 2.6% of these move-ins from rapid rehousing. The data also shows the median number of days between enrollments in rapid rehousing and permanent supportive housing programs and time to move in among Black/African Americans and Multiple races is 36 days and 104 days respectively. Over the next three years, the community would like to see greater consistency among these lengths of time for move-in dates for people of multiple races and Black/African Americans.

**Describe the trackable data goal(s) related to this Outcome Goal:**

*Note: Meeting the trackable data goals for the underserved populations is not required for eligibility for Bonus Funds.*

Reduce the % of Black/African Americans and people of multiple races who move-in from Rapid Rehousing to Permanent housing by 5%.

**Outcome Goal #5. Reducing the number of persons who return to homelessness within two years after exiting homelessness to permanent housing.**

**Goal Statement:**

By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show 4% of people return to homelessness within 2 years after having exited homelessness to permanent housing, representing 0 fewer people and a 0% reduction from the baseline.

*\*Please be sure to copy and paste the goal statement from this application template to Cognito, only updating the fields in [brackets].*

**Goal Narrative:**

Working over the next three years to provide housing/tenancy sustaining services for those exiting to permanent housing will be a priority over the next three years, particularly for those with behavioral health conditions.

% of people who return to homelessness within 2 years after having exited homelessness to permanent housing	Outcome Goals July 1, 2022 - June 30, 2025		
	Change in % of People	Change as % of Baseline	Target % of people who return to homelessness within 2 years after having exited homelessness to permanent housing

4%	0	0%	4%
<b>Describe Your Related Goals for</b>			
<b>Describe any underserved and/ or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:</b>		<b>Describe the trackable data goal(s) related to this Outcome Goal:</b>	
<p>HDIS baseline data over the past three years shows a 25% higher rates of returns to homelessness among those with behavioral health conditions particularly those with substance use disorders. Working toward reducing the risk of relapse and housing loss will be an important area of focus over the next three years.</p>		<p><i>Note: Meeting the trackable data goals for the underserved populations is not required for eligibility for Bonus Funds.</i></p> <p>Reduce returns to homelessness among those with a behavioral health conditions particularly those with substance use disorders by 5%. The aim is to get to 20% or lower.</p>	

**Outcome Goal #6. Increasing successful placements from street outreach.**

**Goal Statement:**  
 By the end of the performance period, HDIS data for the CA-508 Watsonville/Santa Cruz City & County CoC will show 50 total people served in street outreach projects exit to emergency shelter, safe haven, transitional housing, or permanent housing destinations annually, representing 50 more people and a 100% increase from the baseline.

*\*Please be sure to copy and paste the goal statement from this application template to Cognito, only updating the fields in [brackets].*

**Goal Narrative:**  
 Historically, the community has not operated sustained street outreach projects that utilize HMIS data for tracking their efforts. One-time funding has been secured by the County Behavioral Health Department to expand street outreach for those struggling with behavioral health issues and the Housing for Health Division also secured one-time funding for

Baseline Data: Annual # of people served in street outreach projects who exit to emergency shelter, safe haven, transitional housing, or permanent housing destinations.	Outcome Goals July 1, 2022 - June 30, 2025		
	Change in # of People	Change as % of Baseline	Target Annual Estimate of # of people served in street outreach projects who exit to emergency shelter, safe haven, transitional housing, or permanent housing destinations.
0	50	100%	50

<b>Describe Your Related Goals for</b>			
<b>Describe any underserved and/ or disproportionately impacted population(s) that your community will especially focus on related to this Outcome Goal and how this focus has been informed by data in your landscape assessment:</b>		<b>Describe the trackable data goal(s) related to this Outcome Goal:</b>	
<p>2022 PIT count data indicates significant increases in the # of unsheltered individuals struggling with behavioral health conditions, HIV/AIDS, and veterans. Over the next three years, we hope to see increased street outreach enrollments among these groups and linkage of these groups to pathways to permanent housing.</p>		<p><i>Note: Meeting the trackable data goals for the underserved populations is not required for eligibility for Bonus Funds.</i></p> <p>Program outreach enrollment among unsheltered priority groups via demographic data; see an increase of 50 people transitioning from street outreach to a housing pathway.</p>	

**Table 5. Strategies to Achieve Outcome Goals**

Strategy	Performance Measure to Be Impacted (Check all that apply)
Increasing investments into, or otherwise scaling up, specific interventions or program types	<input checked="" type="checkbox"/> 1. Reducing the number of persons experiencing homelessness.
<b>Description</b>	
Increased efforts in Eviction and homelessness prevention investments	<input checked="" type="checkbox"/> 2. Reducing the number of persons who become homeless for the first time.  <input type="checkbox"/> 3. Increasing the number of people exiting homelessness into permanent housing.
<b>Timeframe</b>	
June 2022 - June 2025	<input type="checkbox"/> 4. Reducing the length of time persons remain homeless.
<b>Entities with Lead Responsibilities</b>	
Housing for Health Division; Emergency Rental Assistance Local Partner Network Providers	<input checked="" type="checkbox"/> 5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.
<b>Measurable Targets</b>	<input type="checkbox"/> 5. Increasing successful placements from street outreach.
# of households assisted to secure prevention funding; # that receive tenancy sustaining services; racial/ethnic groups receiving assistance	<input checked="" type="checkbox"/> focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness.

Strategy	Performance Measure to Be Impacted (Check all that apply)
Strategic uses of other sources of funding	<input checked="" type="checkbox"/> 1. Reducing the number of persons experiencing homelessness.
<b>Description</b>	
Permanent supportive housing expansions through Project Homekey applications and projects and real estate partnership incentives	<input type="checkbox"/> 2. Reducing the number of persons who become homeless for the first time.  <input checked="" type="checkbox"/> 3. Increasing the number of people exiting homelessness into permanent housing.
<b>Timeframe</b>	
Present - June 2025	<input checked="" type="checkbox"/> 4. Reducing the length of time persons remain homeless.
<b>Entities with Lead Responsibilities</b>	
Housing for Health Division, Housing Authority	<input type="checkbox"/> 5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.
<b>Measurable Targets</b>	—

<p>Increase # of build permanent supportive housing units (Homekey + other funding); increased utilization of dedicated Housing Authority vouchers in private market; access to PSH for those with behavioral health conditions, HIV/AIDS, and other chronic health conditions</p>	<p><input type="checkbox"/> 6. Increasing successful placements from street outreach.</p> <p><input checked="" type="checkbox"/> Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness.</p>
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Strategy	Performance Measure to Be Impacted (Check all that apply)
<p><b>Strengthening systemic efforts and processes, such as coordinated entry and assessment processes, landlord engagement efforts, housing navigation strategies, and other systemic improvements</b></p>	<p><input checked="" type="checkbox"/> 1. Reducing the number of persons experiencing homelessness.</p> <p><input type="checkbox"/> 2. Reducing the number of persons who become homeless for the first time.</p> <p><input checked="" type="checkbox"/> 3. Increasing the number of people exiting homelessness into permanent housing.</p> <p><input checked="" type="checkbox"/> 4. Reducing the length of time persons remain homeless.</p> <p><input type="checkbox"/> 5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.</p> <p><input checked="" type="checkbox"/> 6. Increasing successful placements from street outreach.</p> <p><input checked="" type="checkbox"/> Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness.</p>
<p><b>Description</b></p>	
<p>Expand low-barrier housing navigation center capacity, improve the countywide coordinated entry process including expansion of housing problem solving efforts, increase engagement with property owners/managers through real estate partnership/landlord incentives and services</p>	
<p><b>Timeframe</b></p>	
<p>Present - June 2025</p>	
<p><b>Entities with Lead Responsibilities</b></p>	
<p>Housing for Health Division, local/city partners, Central California Alliance for</p>	
<p><b>Measurable Targets</b></p>	
<p>Increase baseline capacity from pre-COVID period; improved income, benefit, and housing outcomes among programs; # of referrals of unsheltered to shelter; race/ethnicity review of access to and outcomes from programs; reduced lengths of stay</p>	

Strategy	Performance Measure to Be Impacted (Check all that apply)
<p><b>Reaching underserved and historically marginalized communities and populations</b></p>	<p><input checked="" type="checkbox"/> 1. Reducing the number of persons experiencing homelessness.</p> <p><input checked="" type="checkbox"/> 2. Reducing the number of persons who become homeless for the first time.</p> <p><input checked="" type="checkbox"/> 3. Increasing the number of people exiting homelessness into permanent housing.</p> <p><input checked="" type="checkbox"/> 4. Reducing the length of time persons remain homeless.</p> <p><input checked="" type="checkbox"/> 5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.</p>
<p><b>Description</b></p>	
<p>Expanding and improving street outreach teams countywide and developing and implementing a communications strategy and tools for underserved communities. The Street outreach teams will provide culturally sensitive services to historically marginalized populations and communication tools will better reach those communities.</p>	
<p><b>Timeframe</b></p>	
<p>Present - June 2025</p>	
<p><b>Entities with Lead Responsibilities</b></p>	
<p>Housing for Health Division, Behavioral Health Department, city partner</p>	

<b>Measurable Targets</b>	<input checked="" type="checkbox"/> 6. Increasing successful placements from street outreach.
# enrolled in street outreach programs, exits from street outreach to housing programs, demographics of those contacted by street outreach programs	<input checked="" type="checkbox"/> Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness.

Strategy	Performance Measure to Be Impacted (Check all that apply)
<b>Building the capacity of homelessness response system to utilize resources, implement best practices, and/or achieve outcomes</b>	
<b>Description</b>	<input checked="" type="checkbox"/> 1. Reducing the number of persons experiencing homelessness.
Centralized housing problem-solving and rehousing fund and making the Coordinated Entry system more housing focused.	<input type="checkbox"/> 2. Reducing the number of persons who become homeless for the first time.
<b>Timeframe</b>	<input checked="" type="checkbox"/> 3. Increasing the number of people exiting homelessness into permanent housing.
July 2022 - June 2025	<input checked="" type="checkbox"/> 4. Reducing the length of time persons remain homeless.
<b>Entities with Lead Responsibilities</b>	<input type="checkbox"/> 5. Reducing the number of persons who return to homelessness after exiting homelessness to permanent housing.
Housing for Health Division, CBO fund manager	<input type="checkbox"/> 6. Increasing successful placements from street outreach.
<b>Measurable Targets</b>	<input checked="" type="checkbox"/> Focused on equity goals related to underserved populations and populations disproportionately impacted by homelessness.
# served, # exiting to permanent housing, racial/ethnic data on access and outcomes; 3 and 6 month follow-up after assistance	

Table 6. Funding Plan on Strategic Intent

Expense Category intended to be Supported with HHAP 4	Approximate % of TOTAL HHAP 4 ALLOCATION to be used on this Expense Use (%)	Approximate % of TOTAL HHAP 4 ALLOCATION to be used under this Expense Use as part of the Youth Set Aside? (%)	Activities to be Supported with HHAP 4	How is this a strategic use of HHAP 4 resources that will address needs and gaps within the homelessness response system?	How were these decisions to invest HHAP 4 into these activities informed by the planned uses of other state, local, and/or federal funding sources (as documented in the Landscape Analysis Narrative)?
1. Rapid rehousing	0%	0%	N/A	N/A	N/A
2. Operating subsidies	70%	27%	Funding to support low-barrier housing navigation center operations + youth transitional housing	The County of Santa Cruz established a goal of 400 temporary housing (shelter and transitional housing) units in its "Housing for a Healthy Santa Cruz" framework for addressing homelessness. During the pandemic, the County had over 1,000 beds available. This number has fallen below 400 due to losses in state and federal funding, lower levels of private donations, and the loss of some shelter locations. This funding is critical to helping our community move closer to its temporary housing capacity goals.	Very few other federal, state, and local funding sources provide enough funding to cover the operational costs associated with temporary housing. Local jurisdictions (city and county) also contribute to covering some of these costs. Additional dollars are needed to achieve local capacity goals.
3. Street outreach	4%	0%	Funds to sustain outreach efforts in unincorporated areas	The County has established goals for the creation of geographically-based proactive street outreach teams. There is currently some capacity within the cities of Santa Cruz and Watsonville but no capacity for covering unincorporated areas of the County. These funds help close the funding gap for these outreach services.	The County has secured one-time CDHG funding from the state for outreach services in unincorporated areas of the County and is actively pursuing funding for these services through CalAIM HHP resource in partnership with our local Medi-Cal managed care plan.
4. Services coordination	0%	0%	N/A	N/A	N/A
5. Systems support	13%	0%	Real estate partnership contract and incentives for private landlord participation in permanent supportive housing projects	These funds are needed to continue a landlord incentive and partnership program started with one-time pandemic related funding. These incentives and supports have helped our providers secure rental units in one of the tightest and most expensive rental markets in the county. The County Housing Authority is in the top 10 of housing authorities statewide in our utilization of Emergency Housing Vouchers (EHVs) in part because of these resources. Sustaining these efforts is critical for maintaining trusted partnerships with the Housing Authority and rental property owners and managers.	The County is using some local general funds and potentially CalAIM HHP funds to also support these activities.
6. Delivery of permanent housing	0%	0%	N/A	N/A	N/A
7. Prevention and diversion	9%	0%	Flexible, centralized rehousing/housing problem solving fund for community	Centralized, flexible one-time funding to meet housing-related needs is a critical resource identified in our community. Sustaining and expanding the amount of funding in this category can help our community prevent homelessness and support housing problem solving/diversion work as part of our updated coordinated entry system.	The County is using multiple funding sources to support the centralized flexible housing assistance fund including local general funds, Home Safe, HUD CAC, and other dollars.
8. Interim sheltering (new and existing)	0%	0%	N/A	N/A	N/A
9. Shelter improvements to lower barriers and increase privacy	4%	2%	Funding to support low-barrier housing navigation center operations	Funding is needed to support shelter improvements that reduce barriers to entry. Several existing shelter locations in the County need funding to increase privacy and reduce barriers to partners, pets, and possessions entering shelter spaces. The County is also pursuing new potential locations for shelter given the shortage of capacity compared with the need and targeted number of beds.	The County will be using a mix of general funds, whole person care housing funds, and CalAIM HHP funds to reduce shelter barriers.
10. Administrative (up to 7%)	0%	0%	N/A	N/A	N/A
<b>Total:</b>	<b>100%</b>	<b>29%</b>			



**Table 7. Demonstrated Need**

**Complete ONLY if you selected Interim Housing/Congregate/Non-Congregate Shelter as an activity on the Funding Plans tab.**

<b>Demonstrated Need</b>	
# of available shelter beds	[352]
# of people experiencing unsheltered homelessness in the homeless point-in-time count	[1774]
Shelter vacancy rate (%) in the summer months	[10%]
Shelter vacancy rate (%) in the winter months	[ 5%]
% of exits from emergency shelters to permanent housing solutions	[26.1%]
<b>Describe plan to connect residents to permanent housing.</b>	
<p>One of the goals of the Santa Cruz County Housing for Health Partnership is to increase the number of residents that exit shelter to permanent housing. Our staff is working on several ways to help improve these outcomes, including: (1) Changing shelter contracts to include enough funding for housing navigation services; (2) Increasing access to a flexible source of one-time funds to help with housing transition expenses; (3) Starting a Housing for Health connector learning community to share practices that help with housing exits; and (4) Using data more frequently to analyze positive trends in certain programs so we can learn from them and spread the knowledge to others.</p>	

\*\* period used for % of exits from emergency shelters to permanent housing solutions is 07/1/2021-06/30/2022