COMMUNITY PLAN TO END HOMELESSNESS IN SANTA CLARA COUNTY

2015-2020
ABOUT THIS PLAN

This plan exists to create a community-wide roadmap to ending homelessness for the next five years. This plan will guide governmental actors, nonprofits, and other community members as they make decisions about funding, programs, priorities, and needs. This plan was created in April-August 2014 after and through a series of community summits related to specific homeless populations and homeless issues in Santa Clara County, including summits related to:

- Youth
- Families
- Veterans
- North County
- South County
- Environmental advocates

- Discharging institutions (health care, mental health, corrections)
- Nonprofit board members
- Disruptive thinking about housing

An implementation body will use this plan as a guide to create an annual community action plan that will provide the "how" to this plan's "what." In 2014, the annual action plan has been heavily informed by the information provided by community members at the summits.
OUR VISION: No one lives outside.

It can happen to anyone: a job loss; a medical condition; missing a rent payment; falling behind and finding that you have nothing to fall back on. There are many ways someone can become homeless and only one way to really solve it. Homelessness doesn’t end when we clear out an encampment or when we hand out blankets. Homelessness ends when everyone has a home.

In our community, a public-private partnership has been formed and already started removing traditional institutional barriers, creating new ways to provide accessible and affordable housing and defying convention in finding homes for many people, but there is still more to be done. It is time for our successes to be brought to scale.

Silicon Valley doesn’t give up when there’s a challenge. We solve it.

Over the last decade, Santa Clara County has gradually organized around a community-wide effort to address homelessness. In 2003, the City of San Jose completed a Homeless Strategy designed to eliminate chronic homelessness by focusing on prevention, rapid rehousing, wraparound services and proactive efforts. That led to Santa Clara County’s 2005 Ten Year Plan to End Homelessness, and the 2008 Blue Ribbon Commission culminating in the establishment of Destination: Home as the public-private partnership vehicle to implement these strategies, resulting in a 2011 campaign geared towards ending chronic homelessness. Time and results have taught us that of the strategies laid out in 2003, access to housing is what works.

We can end homelessness. We know how. Move people into homes and align the support services they need to be successful and the cycle of homelessness stops.

Over the last two years, our coordinated effort proved that a Housing First model works in Santa Clara County. It demonstrated what national experts have known for years: it’s cheaper to permanently house someone than to continually care for them while they live on the street. Lasting inter-agency partnerships have been forged and a new table of local leadership emerged to tackle our toughest barriers. With the momentum of this short term campaign, a singular question presented itself, “How many people should we leave on the streets?” The immediate and definitive answer our leaders delivered was, “None.”

Ten years of progress has brought Santa Clara County to this point in time. We have new collaborative cross sector partnerships. We have a track record of success with a new housing system. We have new tools to engage both public and private sector funders. The public is demanding a real solution to homelessness and we are dedicated to delivering one. It’s time to reimagine homes and rebuild lives. We can end homelessness. This is how we start.

The Destination: Home Leadership Board:

Chris Block
Jan Bernstein Chargin
Louis Chicoine
Leslye Corsiglia
Frederick J. Ferrer
Shannon Giovacchini
Eleanor Clement Glass
Beau Goldie
Gary Graves
Katherine Harasz
John A. Sobrato
Ben Spero
Ted Wang
HOW CHANGE WILL HAPPEN:

1. DISRUPT SYSTEMS
   Develop disruptive strategies and innovative prototypes that transform the systems related to housing homeless people.

2. BUILD THE SOLUTION
   Secure the right amount of funding needed to provide housing and services to those who are homeless and those at risk of homelessness.

3. SERVE THE PERSON
   Adopt an approach that recognizes the need for client-centered strategies with different responses for different levels of need and different groups, targeting resources to the specific individual or household.

OUR TARGETS:

CHRONICALLY HOMELESS:
2,518 Will Be Housed

VETERANS:
718 Will Be Housed
In the 2013 PIT count, 718 veterans were homeless.

CHILDREN, YOUTH, AND FAMILIES:
>2,333 Will Be Housed
In the 2013 PIT count, 1,266 unaccompanied youth under the age of 25 were identified, of which 164 (13%) were under 18. Also, there were 1,067 homeless individuals living in 349 families with at least one child under 18.

In the 2013 Santa Clara County Point In Time (PIT) count, there were 2518 chronically homeless people, not including veterans.

One  represents 100 people
# DISRUPT SYSTEMS

**ACT FAST. STOP MANAGING AND START ENDING HOMELESSNESS.**

<table>
<thead>
<tr>
<th>WHAT WE ARE DOING</th>
<th>HOW WE WILL DO IT</th>
<th>2015</th>
<th>2020</th>
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<tbody>
<tr>
<td><strong>TRANSFORM THE WAY GOVERNMENT RESPONDS TO HOMELESSNESS</strong></td>
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<tr>
<td>Rethink how government organizes to respond to homelessness</td>
<td>Independent, siloed responses from each government system, each focused on one piece of the puzzle (e.g., health care, income)</td>
<td>Regionally coordinated resources and funding with all systems accountable for moving people into housing</td>
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<tr>
<td>Ensure people leaving systems do not become homeless</td>
<td>Some homeless people leave systems (corrections, hospitals, mental health, foster care) without a next step in place</td>
<td>At discharge, all individuals have a plan for permanent housing and none are discharged to the streets</td>
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<tr>
<td>Increase access to benefits for people who are homeless or at risk of homelessness</td>
<td>In 2013, 35% of homeless people received no government benefits</td>
<td>Homeless and at-risk individuals access all income and service benefits for which they are eligible</td>
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<td><strong>INCREASE AWARENESS</strong></td>
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<tr>
<td>Increase awareness</td>
<td>People in the private sector and community often see homelessness as an intractable and remote problem</td>
<td>Community members will understand their role in responding to homelessness and know it is solvable</td>
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<tr>
<td>Increase and align private resources</td>
<td>Overall, private funding is unpredictable and working towards diverse goals</td>
<td>There is a coordinated funding strategy across the community, increasing funding, working towards the same goals, and relying on best practices</td>
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<tr>
<td>Provide opportunities for the business sector to address homelessness</td>
<td>Businesses, often unintentionally, create barriers to ending homelessness</td>
<td>Businesses are partners in housing and employing people who are homeless</td>
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<tr>
<td>Collaborate with community organizations</td>
<td>Some community groups target their resources to short-term responses</td>
<td>Informed community groups partner with other sectors to support efforts that end homelessness</td>
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<tr>
<td>Engage with the environmental community to reduce the environmental impacts of homelessness</td>
<td>Unsheltered homelessness negatively impacts the environment and waterways and reduces the value of a community resource</td>
<td>This community has restored the environment, providing employment/housing opportunities for those formerly living in encampments</td>
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### DISRUPT SYSTEMS

**The Best Homeless System of Care**

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<td>Coordinate housing and services to connect each individual with the right housing solution</td>
<td>Homeless people may call many providers and sit on several waiting lists before they get housed and many families become homeless when it could be avoided</td>
<td>People who are homeless or at risk of homelessness get connected directly to the right resource for them</td>
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<tr>
<td>Respond to system barriers and service gaps by making the best use of existing assets</td>
<td>There are many homeless programs and responses in this community, but no great way of knowing what works best, with lots of people still living outside</td>
<td>Community-wide, outcome-based decisions about the best programs and structures to meet community needs are made and implemented</td>
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<tr>
<td>Partner across public and private sectors to improve systemic coordination</td>
<td>The private and public sectors operate independently, resulting in a patchwork of funding, priorities, and outcomes</td>
<td>Private sector and public sector funding is mutually supportive, creating a system of care that’s internally consistent</td>
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<td>Increase provider capacity</td>
<td>Homeless providers want to end homelessness, but may not have the resources to do that</td>
<td>All homeless providers have sufficient resources to successfully implement programs that end homelessness</td>
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*Housing First* centers on providing people experiencing homelessness with housing as quickly as possible - and then providing services needed to maintain their housing. This approach has the benefit of being consistent with what most people experiencing homelessness want and seek help to achieve.
## BUILD THE SOLUTION

SCALE THE RESOURCES TO MEET THE NEED.

### WHAT WE ARE DOING

CREATE NEW HOMES AND OPPORTUNITIES FOR HOMELESS MEN, WOMEN, AND CHILDREN

### HOW WE WILL DO IT

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<td><strong>CREATE 6,000 HOUSING OPPORTUNITIES</strong></td>
<td>There are approximately 6,000 people in our three target populations who do not have homes</td>
<td>People who are homeless have 6,000 more housing opportunities available to them</td>
</tr>
<tr>
<td><strong>Fund supportive services for the new housing opportunities</strong></td>
<td>People who are homeless, even if they have housing, often cannot maintain it without case management, health care, and financial services</td>
<td>Each of the 6,000 new tenants has access to the services that will allow him or her to maintain housing</td>
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### UNIQUE APPROACHES TO UNIQUE POPULATIONS

- **Converted Motels**
- **Tiny Houses**
- **Permanent Supportive Housing**
- **Affordable Homes**
## COMMUNITY PLAN TO END HOMELESSNESS

### 3 SERVE THE PERSON

GIVE PEOPLE WHAT THEY NEED, NOT WHAT WE HAVE. MORE EFFECTIVE, MORE EFFICIENT, MORE HUMANE.

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<td><strong>DIFFERENT RESPONSES FOR DIFFERENT LEVELS OF NEED</strong></td>
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<td>Provide permanent supportive housing to end chronic homelessness</td>
<td>Many disabled people who have lived outside, sometimes for years, need housing that responds to their conditions</td>
<td>Chronically homeless people can access permanent supportive housing with intensive case management and wrap-around services</td>
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</tr>
<tr>
<td>Expand rapid rehousing resources to respond to episodic homelessness</td>
<td>Some people in our community experience repeated bouts of homelessness and are not able to stabilize with the resources available to them</td>
<td>Households with barriers to housing can access a temporary housing subsidy and step down services that are structured to end homelessness for that household for good</td>
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<tr>
<td>Prevent homelessness before it happens</td>
<td>There are not enough resources available to help people avoid homelessness, or avoid homelessness again</td>
<td>Households at risk of homelessness have access to homeless prevention resources: housing stability services, emergency rental assistance, financial literacy, &amp; landlord/tenant assistance and employment assistance and employment support services: child care, transportation, job training &amp; placement</td>
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64% of 2013 survey respondents reported a unique challenge.

### UNIQUE CHALLENGES

- **Mental illness**
- **Substance abuse**
- **Chronic physical illness**
- **Physical disability**
- **Developmental disability**

*Mental illness includes PTSD, depression, and other mental illnesses including bipolar and schizophrenia. Note: Multiple response question, numbers will not total to 100%.

3 SERVE THE PERSON

WHAT WE ARE DOING
Create bridges and supports for populations who struggle to function within the homeless system of care

HOW WE WILL DO IT
Certain populations have specific barriers to accessing the resources available to them to end their homelessness:
- Veterans
- Persons living with HIV/AIDS
- Persons with serious mental illness
- People with disabilities

2015

2020

Resources support all homeless subpopulations to access housing and make best use of their specific benefits, employment, housing opportunities, and access to food and healthcare

UNIQUE APPROACHES FOR UNIQUE POPULATIONS

Structure housing and services to meet the needs of young people experiencing homelessness

Youth, children, and families are failed by several systems of care when they become homeless, and young people are underserved by a homeless system designed to meet adult needs

Systems of care work together to support housing and services that meet the needs of families, children, and youth, including robust prevention programs

Make resources available in all parts of the County

North & South County do not have many housing options, nor adequate access to county services, and transportation is limited

Housing and services are available to people living in North & South County, in their communities

WHAT MIGHT HAVE PREVENTED RESPONDENTS’ HOMELESSNESS

34% Rent/Mortgage Assistance
24% Mental Health Services
21% Alcohol/Drug Counseling

42% Employment Assistance

OBSTACLES TO SECURING PERMANENT HOUSING

No job/income 54%
No money for moving costs 30%
Bad credit 21%
No housing availability 18%

THANK YOU!

Each summit was attended by a variety of stakeholders that donated their time to ensure that this plan includes input from the full community.

PLANNING PARTNERS INCLUDED:

Abode Services
ACT for Mental Health
Audubon Society
Bill Wilson Center
California Water Boards
Office of Supervisor Dave Cortese
California Youth Connection
Catholic Charities of Santa Clara County
City of Gilroy
City of Milpitas
City of Morgan Hill
City of San Jose
City of Sunnyvale
The Commonwealth Club
Community Solutions
Community Technology Alliance
Community Working Group
The David & Lucille Packard Foundation
Destination: Home
Downtown Streets Team
Family Supportive Housing, Inc.
Gilroy Compassion Center
Goodwill of Silicon Valley
Office of Assemblyman Rich Gordon
Greenbelt Alliance
The Health Trust
HomeAid Northern California
HomeFirst
Hospital Council of Northern California
Housing Authority of the County of Santa Clara
Housing Trust Silicon Valley
InnVision Shelter Network
Kaiser Permanente
Law Foundation of Silicon Valley
Purissima Hills Water District
Restore Coyote Creek
St. Joseph’s Family Center
St. Mary Parish Gilroy
San Jose State University
Santa Clara Adult Education
Santa Clara County Office of Reentry Services
Santa Clara County Creeks Coalition
Santa Clara Valley Medical Center
Santa Clara Valley Water District
Office of Supervisor Joe Simitian
The County of Santa Clara
Second Harvest Food Bank
Silicon Valley Children’s Fund
Silicon Valley Community Foundation
Silicon Valley Community Partnership
Sobrato Philanthropies
South County Collaborative
Stanford Hospital
Sunnyvale Community Services
Swords to Plowshares
United Way Silicon Valley
Valley Homeless Healthcare Program
Veterans Administration, Palo Alto Healthcare System
Water and Power Law Group PC
West Valley Community Services
Taking this plan forward, THE 2014 IMPLEMENTATION GROUP INCLUDES:

Alison Brunner, Law Foundation of Silicon Valley
Beth Leary, Family Supportive Housing
Chris Elias, Santa Clara Valley Water District
Eileen Richardson, Downtown Streets Team and Community Technology Alliance
Elise Cutini, Silicon Valley Children’s Fund
Ellen Clear, The David and Lucile Packard Foundation
Erin Gilbert, Charles and Helen Schwab Foundation
Erin O’Brien, Community Solutions
Frederick J. Ferrer, The Health Trust
Javier Aguirre, Santa Clara County Office of Reentry Services
Jeff Ruster, City of San Jose Work2Future
Jennifer Loving, Destination: Home
Jenny Niklaus, HomeFirst
Julie Gantenbein, Water & Power Law Group PC
Karae Lisle, InnVision Shelter Network
Kate Severin, Department of Veterans Affairs
Katherine Harasz, Housing Authority of the County of Santa Clara
Kevin Zwick, Housing Trust Silicon Valley
Ky Le, County of Santa Clara
Leslye Corsiglia, City of San Jose
Louis Chicoine, Abode Services
Michael Fallon, San Jose State University
Michael Fox, Goodwill Industries
Poncho Guevara, Sacred Heart Community Services
Rick Williams, Sobrato Family Foundation
Roberta Rosenthal, Department of Veterans Affairs
Sara Doorley, Valley Healthcare for the Homeless
Shiloh Ballard, Silicon Valley Leadership Group
Sparky Harlan, Bill Wilson Center

Our gratitude to each of you for your work and dedication to ending homelessness together.