



COLLECTIVELY BUILDING: A COMMUNITY PLAN TO PREVENT AND END HOMELESSNESS IN EL DORADO

ACKNOWLEDGEMENTS

Collectively Building: A Community Plan to Prevent and End Homelessness in El Dorado was drafted through combining local data, gaps analyses, focus group and survey responses from individuals with lived experience of homelessness, and input from a broad variety of stakeholders throughout El Dorado County. Homebase, in partnership with the El Dorado Opportunity Knocks Continuum of Care (CoC) and all of its represented organizations would like to thank the members of the Steering Committee for their partnership and guidance throughout the process of developing this strategic plan. Special thanks to the many nonprofit housing and service providers; health care, faith-based, and other stakeholders; various city and county government staff and elected officials, and to the people experiencing homelessness or with recent lived expertise for sharing their invaluable stories and insight. This plan would not exist without your commitment. Please see additional Acknowledgments in Appendix A. Photo credit to Great Bicycle Rides in El Dorado County.



EXECUTIVE SUMMARY

Per the most recent Point-In-Time Count, approximately 600 people experience homelessness on a given night in El Dorado, and more than 900 people experience an episode of homelessness in a year. The number has increased in recent years, with nearly 80% identified as living unsheltered on the streets, in cars, or in encampments.¹ This is especially notable given that there are no permanent year-round low-barrier shelters in El Dorado except for those reserved for a specific subpopulation (i.e., youth or families). Other notable trends are that first time homelessness and returns to homelessness are increasing, as is the rate of chronic homelessness. The current crisis response system and available homeless housing cannot support the growing need.

Homelessness impacts everyone. This includes those who are directly experiencing homelessness, the many who are precariously housed, their housed neighbors, local businesses, first responders, hospital systems, community leaders, and other stakeholders. Across the United States, community-wide collaborations are the most effective strategy to impact homelessness. The benefit of a strategic plan that focuses on effective system-wide strategies is that it guides all partners and investments towards a single goal: preventing and ending homelessness in a community.

The Continuum of Care and local jurisdictions are taking steps to address homelessness through creative solutions. Through a public health crisis, wildfires, and severe weather, El Dorado Community providers have proven to be nimble in their approach to support homeless individuals and families. The success of Project Roomkey in quickly sheltering unhoused individuals, supporting them with wrap-around services and moving them into housing is one example of the community coming together and focusing resources to implement proven strategies to make a difference for individuals experiencing homelessness.

Over the past five years, the community has developed the infrastructure of the CoC, implemented a Coordinated Entry System (CES), has taken steps to transition its programs to a Housing First approach, and is increasing the capacity of local services providers. As a result, the County, the CoC and local providers are increasingly more successful in obtaining funding for homeless services. The strategic plan will help the community prioritize investments of these funds into strategies that target effective solutions and, in turn, make the community more competitive for future state and federal funds.

Strategic planning lays a strong foundation upon which the community can build. The strategic plan provides goals and strategies tailored to El Dorado based on community feedback and evidence-based best practices. El Dorado can make a difference in responding to homelessness with a collaborative effort engaging all sectors of the community, recognizing the humanity of the individuals and families impacted by the crisis, and focusing resources on strategies that have been proven to reduce homelessness.

¹ For more In-depth information, please see Homelessness in El Dorado section beginning on page 19.

KEY FACTS BY THE NUMBERS

613
people were counted during the 2019 biennial January homeless Point-In-Time count

18
total units of Permanent Supportive Housing available countywide in 2021 for individuals with intensive needs

78%
of the homeless population live unsheltered (streets, cars, encampments, etc.)

0
permanent low barrier, year-round shelter beds for the general population in El Dorado County

90%
of extremely low-income households in the county are severely cost burdened paying more than 50% of their income on rent

3.81%
is the vacancy rate (the proportion of rental inventory that is vacant for rent) in El Dorado

STRATEGIC PLAN VISION

All individuals and families in El Dorado County have equal access to community resources and safe and affordable housing.

STRATEGIC PLAN MISSION

To collaboratively identify and address social vulnerabilities, reduce inflow, increase prevention, and build a robust emergency response system to accomplish the functional end of homelessness in El Dorado.

The functional end of homelessness means that the number of people experiencing homelessness at any time does not exceed the community's ability to house that many people within a brief period of time.

STRATEGIC PLAN GUIDING PRINCIPLES



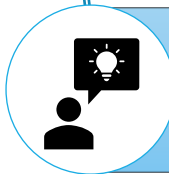
Promote Collaboration and Collective Action

The homeless system alone cannot solve the problem and no entity within that system can successfully prevent and reduce homelessness. Communication, collaboration, and community engagement are vital to the success of and support for the work of preventing and ending homelessness in El Dorado County.



Customize Solutions

Effective solutions must be based on the recognition of the unique needs and strengths of each individual experiencing homelessness and customizing the housing and services accordingly.



Include Lived Experience

People who are currently experiencing homelessness or who have lived experience are experts in the issue and have first-hand knowledge of what is needed to solve the problem. Persons with lived experience need to be invited to participate and incorporated at all levels of planning and decision making.



Maintain Transparency and Accountability

To drastically minimize homelessness in El Dorado, tough decisions will have to be made. Stakeholders will need to be honest, transparent, and accountable. Decisions need to be made in the best interest of those experiencing homelessness, while balancing the needs of the entire community.



Implement Housing First

An effective response to homelessness in El Dorado County requires that any housing opportunities, whether permanent, temporary or emergency, should embrace the evidence-based practice of Housing First - providing people experiencing homelessness with housing as quickly as possible and then providing the services needed to maintain their housing.

STRATEGIC PLAN GOALS



GOAL 1: STOP HOMELESSNESS BEFORE IT BEGINS

As the housing crisis in California deepens, more people are just one paycheck or financial crisis away from losing their housing. Often it only requires a small intervention to prevent them from becoming homeless —whether it is one-time financial resources to provide a security deposit, legal assistance to prevent eviction, or help learning to balance a budget. Preventing homelessness by supporting individuals and families before they become homeless is not only more humane, but also more cost-effective. Homelessness prevention can be a low-cost strategy that can be implemented immediately at any agency serving homeless clients.

Diversion protocols identify people and divert them from homelessness - back to stable housing options that they may not have been able to reach themselves. Diversion can help at risk households mediate interactions with a landlord, fund reliable transportation, reunify with family members or support systems, or brainstorm about other options. Additionally, working closely with partners from medical, law enforcement, and foster care systems create interagency referral networks that proactively prevent homelessness for people exiting these systems.

GOAL 2: INCREASE ACCESS TO HOUSING FOR ALL EL DORADO RESIDENTS

There is a severe shortage of affordable housing for all sub-populations in El Dorado. Permanent housing is the primary and most effective solution to ending homelessness. It brings security and safety, allowing individuals and families to focus their efforts on maintaining a job, getting their kids to school or childcare, and improving or preserving their health and well-being. Some people experiencing homelessness would benefit from permanent housing coupled with supportive services, such as independent living skills, job training, case management, and/or health and behavioral health services. Permanent Supportive Housing (PSH) allows people with higher needs to achieve housing stability and long-term self-sufficiency. When permanent housing is not available, households in crisis need a

continuum of other low-barrier emergency service options, such as navigation centers that combine housing focused shelter and co-located supportive services, safe parking options, roommate matching services, host homes, etc.

GOAL 3: INCREASE ACCESS TO HOMELESS EMERGENCY RESPONSE SERVICES

Per the 2019 Point-In-Time Count, nearly 80% of people experiencing homelessness in El Dorado County were living outside, indicating that addressing unsheltered homelessness is one of the community's highest needs. Partnerships across agencies, government entities, and service providers, as well as the support of the community, are paramount to increasing access to homeless emergency response services. The CoC, cities, the County, nonprofits, and other partners can work collectively to help those most in need get the services and support they require to exit homelessness by expanding access to safe, low-barrier temporary housing options countywide, increasing coordinated and countywide street and encampment outreach, developing more comprehensive supportive services available countywide, and improving transportation options to help people obtain and maintain stable housing. Within El Dorado County, there are populations at risk of or experiencing homelessness who require special attention. By understanding their special needs and directing services that allow professionals to focus and tailor their care, the community can ensure that the system is accessible to some of the most vulnerable members in El Dorado County.

GOAL 4: PARTNER ACROSS EL DORADO COUNTY TO BUILD COLLECTIVE SOLUTIONS

Deeper partnerships and greater engagement throughout the region will strengthen and build leadership and community support for solutions to address homelessness more effectively. The public and private systems created to help people in times of need are often patchwork, i.e. programs have different eligibility requirements, are run by different agencies, and often do not work as collaboratively as possible to address the entire set of needs that an individual or family may present. Improving collaboration, coordination, and leveraging investments across the many systems of care can help the community more effectively address homelessness, gather support for homeless solutions, and implement strategies more quickly and efficiently. Working together, engaging people with lived experience of homelessness, and focusing collectively on implementing the strategies will ensure the success of El Dorado in solving homelessness.

No one strategy or agency alone will achieve the goal of ending homelessness in El Dorado County. To be successful, the community needs a systematic and multi-faceted approach that engages the entire community – it requires investments from both the public and private sectors, dedicated resources with a focus on proven strategies, and collaboration and coordination across all sectors.

MEASURING PLAN SUCCESS

Below are the overall plan metrics to guide the plan and measure its success. There are also metrics within the strategic plan that relate to specific goals and strategies and will be more intermediate in nature.

HOMELESSNESS WILL BE RARE

- The total annual Point-in-Time count of people experiencing homelessness will decrease by 35% between 2022 and 2027.
- The annual Point-in-Time count of people experiencing unsheltered homelessness will decrease by 60% of the 2022 total count by 2027.
- El Dorado will reduce the number of individuals and families experiencing chronic homelessness by 50% by 2025.
- El Dorado will functionally end homelessness for Veterans by 2023.
- El Dorado will functionally end homelessness for families with children by 2027.
- El Dorado will functionally end homelessness for seniors by 2027.
- El Dorado will create 350 safe affordable permanent housing opportunities by 2027.

HOMELESSNESS WILL BE BRIEF

- The number of days people experiencing homelessness wait for housing placement from emergency shelter or transitional housing will decrease from 267 days to 180 days by 2025.
- The average length of time a person is homeless across the system of care will decrease from 855 days to 180 days by 2027.

HOMELESSNESS WILL BE NON-RECURRING

- The percentage of the rate of returns to homelessness will decrease from 42% to 15% by 2025.
- The percentage of people who are successfully placed in permanent housing from emergency shelter or other short-term housing will increase from 49.6% to 85% by 2027.

THE HOMELESS SYSTEM OF CARE WILL BE ACCESSIBLE TO ALL AREAS OF THE COUNTY, BY ALL RESIDENTS AT RISK OF OR CURRENTLY EXPERIENCING HOMELESSNESS

- The community will perform semi-annual analyses to evaluate and address disparities in access to housing and resources.
- The community will ensure safe access to housing and resources for people experiencing domestic violence, human trafficking, and sexual assault by 2024.

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INTRODUCTION

The decision to develop a Community Plan to Prevent and End Homelessness was collectively made by the CoC, its member organizations, and the local jurisdictions who realized a regional approach is critical to effecting immediate and long-term change to homelessness in the community. This regional plan represents an unprecedented and significant collaboration, bringing stakeholders together to align strategies, strengths, and resources in a way that will measurably reduce homelessness in El Dorado County.

ABOUT THIS PLAN

The purpose of developing a strategic plan was to identify specific, key changes needed to move the needle on homelessness in El Dorado and to build a roadmap for implementing those changes. Among the primary goals of the planning process were to:

- Establish achievable common goals that align with state and federal strategic plans relating to homelessness.
- Build and enhance partnerships.
- Guide all parties in a common direction.
- Determine funding needs and identify potential resources and strategies, and
- Develop overall and annual metrics to track progress.

This strategic plan was drafted in 2020-2021, following in depth research, community meetings and forums, focus groups, interviews, and surveys to identify and analyze the needs, perceptions, resources, barriers, and ideas relating to responding to homelessness throughout El Dorado. Throughout the research and development process, various working groups met to discuss community input and feedback; federal, state, and local priorities; research and best practices; and specific ideas to leverage the resources, expertise, and opportunities in El Dorado to create a customized and coordinated response to homelessness.

The title **“Collectively Building: A Community Plan to Prevent and End Homelessness in El Dorado”** is, above all, reflective of the collective action required not only to develop the plan, but to move the plan forward and build a continuum of housing and services for those who are precariously housed or unhoused. It will take a collective action between providers and agencies, jurisdictions, and individuals and families in the community, regardless of housing status.

Collectively Building is not a standalone document. It should be read alongside the annual implementation plans (see sample template in Appendix B), which will guide the work of stakeholders that comprise El Dorado County’s Homeless System of Care - the jurisdictions, El Dorado Opportunity Knocks (El Dorado County’s CoC), and others – to implement the strategies contained in this plan. An Implementation Planning Committee will use **Collectively Building** as a guide to create the annual

implementation plans that detail specific actions to be undertaken each year, as well as who will complete those actions, and how the implementation will be resourced.

WHY A STRATEGIC PLAN?

Strategic planning is an important process that builds consensus on goals, facilitates group prioritization of key actions, fosters creative and collaborative problem-solving, and provides a platform to consider resource needs and opportunities. Strategic plans are central to qualifying for the funding that sustains large portions of the homeless response system operating throughout El Dorado. Having an intentional, regional, collective plan for responding to homelessness will better position El Dorado, its jurisdictions, and stakeholders to pursue funding and other resources to build system capacity to respond to homelessness.

A well-developed strategic plan:

- Lays out a shared vision and commitment to effectively respond to homelessness.
- Establishes community goals and benchmarks to define success and ensure accountability, and
- Serves as a roadmap for reaching those goals.

Homelessness is a salient and growing concern for residents throughout El Dorado. Experience has demonstrated that current efforts alone will not prevent its growth or reduce its impact. The time has come for a coordinated, regional effort that focuses attention and resources on responding to homelessness throughout El Dorado and involves stakeholders at all levels. **Collectively Building** aims to align the priorities of residents, organizations, and all jurisdictions in El Dorado. **Collectively Building** has the added advantage of facilitating compliance with requirements and recommendations from crucial funders of El Dorado’s housing and service providers, including California and the federal government, as well as aligning with local strategic plans and Housing Elements.

STRATEGIC PLANNING PROCESS

The strategic planning process for the Community Plan to Prevent and End Homelessness included feedback gathered over 2020 – 2021 from a diverse range of El Dorado residents and stakeholders. To capture that feedback, outreach was conducted to many sectors including businesses, service providers, City and County staff, persons with lived experience of homelessness, neighbors, CoC members, law enforcement, and other community members. In addition, analysis of available data, research, and an evaluation of the local homeless system of care was included.

Activities that occurred during the strategic planning process include:



An in-depth review of existing reports and data about El Dorado County, including:

- The economic well-being of the community;
- The demographics of people experiencing homelessness; and
- Local plans, programs, efforts, and interventions already underway.



6 community presentations, including:

- Mission and visioning exercises;
- Goal and metrics setting;
- Gathering feedback regarding goals and strategies; and
- One presentation and facilitated discussion on each topic: Prevention and Diversion, Temporary Housing, and Permanent Housing solutions.



240+ completed online surveys available in 2 languages (English and Spanish) where community members, stakeholders, housing and service providers, and people with experience of homelessness answered questions about the local gaps and needs, priorities, challenges, and goals around preventing and ending homelessness.



15 stakeholder interviews with representatives from City and County staff, law enforcement officials, community-based organizations, service providers, and faith-based organizations.



2 focus groups with direct service providers and CoC stakeholders.
8 focus groups with people with lived experience of homelessness and poverty.



Planning Meetings with County Homeless and Housing staff and CoC Leadership 1-2 times monthly.



Steering Committee meetings to help guide the strategic planning process. Committee included representatives from nonprofit agencies, faith-based organizations, City and County agencies, business community, and people with lived experience of homelessness

QUANTITATIVE DATA

Because of the fluid nature of homelessness, data about people experiencing homelessness is never perfect. El Dorado County and the CoC are consistently working to improve data collection through the annual Point-In-Time count and the Homeless Management Information System (HMIS). The strategic plan relies on multiple sources of data using the best information available to understand the demographics of the El Dorado community, homeless population, and the needs and challenges faced by the community in addressing homelessness. The following data sources were used in the strategic planning process: Point-In-Time counts, Housing Inventory Counts, System Performance Measures, Homeless Management Information System, the Coordinated Entry System (CES) by-name list, and U.S. Census data.

U.S. Census: The U.S. Census Bureau conducts a demographic survey that measures income, poverty, education, health insurance coverage, housing quality, crime victimization, computer usage, and many other subjects. The U.S. Census data helps to understand the overall composition and conditions in each community.

Point-in-Time (PIT) count: Every year, El Dorado County conducts a Point-in-Time count² (PIT) of people experiencing homelessness on a single night in the last ten days of January³. There are two types of PIT counts performed each year: a sheltered count and an unsheltered count. The sheltered count accounts for people who are currently enrolled in temporary housing in either Emergency Shelter or Transitional Housing. The unsheltered count accounts for people who are literally homeless in other locations, such as vehicles, parks, abandoned buildings, or the streets. The sheltered count takes place every year, but the unsheltered count is only required every two years. An unsheltered PIT count would normally have been conducted in 2021; however, due to the COVID-19 pandemic, the count was postponed until 2022. This allowed additional time for planning in order to take precautions to protect those conducting the count and the individuals experiencing homelessness that would be observed and/or engaged with during the count. The PIT count provides helpful data on the size and characteristics of the homeless population over time. The PIT count helps communities understand the dimensions of homelessness, improve system efficiency, target scarce resources, and promote effective interventions to help eradicate the problem.

The number of people who experience homelessness in El Dorado County over the course of a year, however, is much higher than measured by the PIT count. This is because the **PIT count only measures the number of people who are homeless and participate in the count on a given day. It does not account for the many people who fall in and out of homelessness during the rest of the year.** PIT count

² The Point-in-Time count uses a definition of homelessness mandated by the U.S. Department of Housing and Urban Development (HUD). This definition counts people as homeless when they are living in a place not meant for human habitation (such as an encampment, tent, or vehicle), emergency shelters, or transitional housing. People who are doubled up (more than one household in a unit meant for a single household) or couch surfing are not counted as homeless under this definition.

³ Please note that in 2022, HUD has granted a special exemption allowing many counties, including El Dorado, to move the count to the last 10 days in February.

data is also limited in that it does not provide comprehensive information on the characteristics of the population experiencing homelessness compared to when an individual or household does an intake with the homeless system of care. Due to the limitations of PIT data, the strategic plan analysis is also informed by other data sources.

Housing Inventory Count (HIC): The HIC is conducted annually to collect information about how many units of housing in the region are active and reserved for people experiencing homelessness. This includes Emergency Shelter, Transitional Housing, Rapid Re-Housing, and Permanent Supportive Housing. To be included in the HIC count, the units must be reserved for people experiencing homelessness. In addition, to be included on the HIC, any Rapid Re-Housing units must have been actively in use by a particular client on the night of the count – subsidies that are available but are not currently being used to pay rental assistance on a particular apartment are not included in the count.

Homeless Management Information System (HMIS): HMIS is a countywide, shared database used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at imminent risk of homelessness. Each person participates in a variety of intake and assessment surveys when they first interact with the system or are referred to a new program. These intakes and assessments provide important information about each person and household. In addition, as a person starts working with a program, information about their progress and updated assessments are stored in HMIS as well.

“By-Name” List: The by-name list (BNL) is a complete and inclusive list of every person experiencing homelessness in El Dorado County who has been assessed/encountered by the homeless system of care. The BNL includes information collected and shared with the individual’s consent like their name, family composition, demographic information, history, health considerations, current housing situation, length of time homeless, service and housing needs, etc.

System Performance Measures (SPM)⁴: The SPM rely on the sheltered and unsheltered PIT count data reported to the Department of Housing and Urban Development (HUD) and on client-level outcome data collected in the HMIS to evaluate the performance of the CoC overall and include seven system-level data points: 1) the length of time individuals and families remain homeless, 2) the extent to which families and individuals who exit homelessness experience additional spells of homelessness, 3) the overall reduction in the number of homeless individuals and families, 4) jobs and income growth for homeless individuals and families, 5) the success at reducing the number of individuals and families who become homeless, 6) successful housing placement from street outreach, and 7) successful housing placement to or retention in a permanent housing destination. HUD and local CoCs use the SPM and similar benchmarks adopted locally as a competitive element in the annual CoC Program Competition to determine how to allocate limited funds. The SPMs also help CoCs to better understand how quickly homeless individuals and families in their area are assessed and housed, if they can stabilize in housing, and whether they maintain that housing or return to homelessness.

⁴ [System Performance Measures: An Introductory Guide to Understanding System-level Performance Measures.](#)

HISTORIC AND ECONOMIC CONTEXT OF EL DORADO

El Dorado is a largely rural county located east of Sacramento in Northern California spanning both slopes of the Sierra Nevada Mountain Range. The County is approximately 1,786 mi² divided into two primary areas – the Western Slope, and the Eastern Slope otherwise known as the Tahoe Basin. With a wide variety of landscapes including foothills, more than 570,000 acres of National Forest, ski resorts and beautiful South Lake Tahoe, El Dorado offers a wide range of outdoor activities year-round. As a result, the South Lake Tahoe area is especially impacted by tourism, which varies seasonally. The geographic divide also results in mountain terrain and harsh weather in the winter, limiting access or making it difficult to travel between the two slopes of the county for some parts of the year.

The area is also impacted by severe winter storms and wildfires. The 2021 Caldor fire destroyed 19.2% of the total area of the county by acreage and 782 single family residences. The homeless population in South Lake Tahoe also changes throughout the year based on the extreme shift in the weather and the availability of employment and housing.

El Dorado County is home to approximately 191,185 residents and over 74,000 households.⁵ The county is largely unincorporated, featuring only two cities – Placerville, with a population of 10,747 on the Western Slope and South Lake Tahoe in the Tahoe Basin with a population of 21,330. Much of the population lives in unincorporated areas of the Western Slope, with the east edge of the county bordering Sacramento County and its suburbs. Because of the differences between the slopes and between the more populated versus rural areas, there is significant variation throughout the county in terms of household income, poverty rate, rental rates, vacancy rates, and other factors.

Almost 89% of El Dorado County residents are White, with people identifying as Asian comprising 4.8% of the population, followed by 3.9% identifying as from two or more races.⁶ American Indian and Alaskan Natives (1.3%), Black and African Americans (1%), and Native Hawaiian and other Pacific Islanders (<1%) together comprise less than 5% of the population. More than 13% of El Dorado County identifies as Hispanic/Latino.⁷

According to the 2019 U.S. Census Bureau, 93% of individuals over age 25 are high school graduates,⁸ while 34% of El Dorado County have a Bachelor's degree.⁹ El Dorado's median household income

⁵ El Dorado County, California, U.S. Census Bureau.

⁶ [QuickFacts, El Dorado County, California, U.S. Census Bureau.](#)

⁷ [QuickFacts, El Dorado County, California, U.S. Census Bureau.](#)

⁸ [El Dorado County, California, U.S. Census Bureau \(2019 American Community Survey 1-Year Estimates\)](#)

⁹ [El Dorado County, California, U.S. Census Bureau.\(2019 American Community Survey 1-Year Estimates\)](#)

(\$87,059 in 2019) was higher than the median for the state of California (\$80,440).¹⁰ In 2019, 9.3% of County residents lived at or below the Federal Poverty Level (FPL).¹¹ (The FPL for a family of 4 in 2021 was \$26,500¹² and is \$27,750 in 2022.¹³)

In 2019, the median value of a home in El Dorado County was \$460,900.¹⁴ At the time, there were over 91,660 housing units, with 75.7% of them owner-occupied.¹⁵ Most of the 2019 housing units were two-bedroom or more; **only 6% of housing units were one bedroom.**¹⁶ Only 3.81% of housing units were vacant in El Dorado County in 2019.¹⁷ By 2020, the number of housing units increased by 2% (93,467).¹⁸ In 2019, the median gross rent in El Dorado County was \$1,308 per month.¹⁹ According to the California Housing Partnership, by 2021, the average rental income for El Dorado County was \$1,476 per month.²⁰

HOMELESSNESS IN EL DORADO

OVERVIEW

Homelessness in the region impacts everyone in the community. Despite programs and providers that are available in El Dorado, the number of people experiencing homelessness continues to be an issue. Each year, hundreds of El Dorado County residents – neighbors, friends, and co-workers, etc. – experience a crisis that results in loss of housing, and once housing is lost, it is increasingly difficult to regain economic security and housing stability.

¹⁰ [El Dorado County, California, U.S. Census Bureau. \(2019 American Community Survey 1-Year Estimates\)](#)

¹¹ [El Dorado County, California, U.S. Census Bureau. \(2019 American Community Survey 1-Year Estimates\)](#)

¹² [2021 Federal Poverty Levels, Office of the Assistant Secretary for Planning and Evaluation.](#)

¹³ [2022 Federal Poverty Levels, Office of the Assistant Secretary for Planning and Evaluation.](#)

¹⁴ [QuickFacts, El Dorado County, California, U.S. Census Bureau.](#)

¹⁵ [QuickFacts, El Dorado County, California, U.S. Census Bureau.](#)

¹⁶ [El Dorado County, California, U.S. Census Bureau. \(2019 American Community Survey 1-Year Estimates\)](#)

¹⁷ [Department of Numbers](#)

¹⁸ [El Dorado County, California, U.S. Census Bureau. \(2020 Decennial Census\)](#)

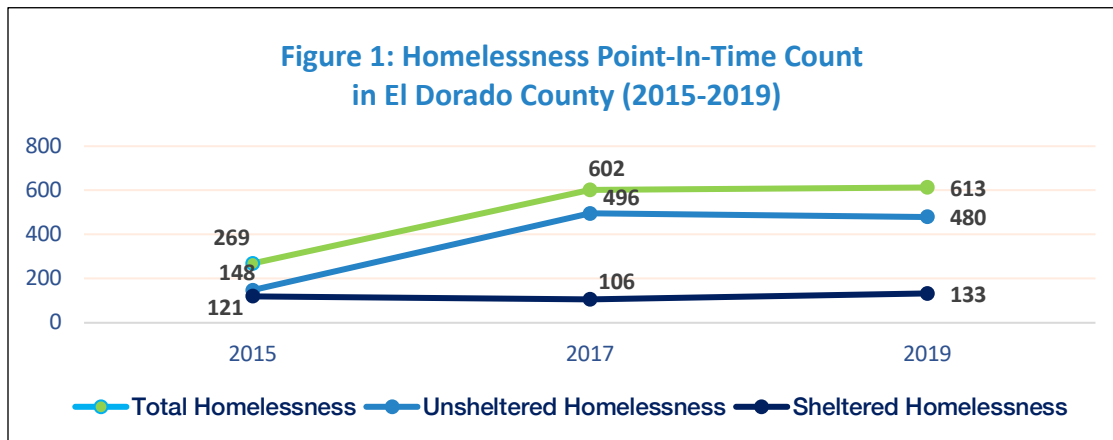
¹⁹ [El Dorado County, California, U.S. Census Bureau \(2019 American Community Survey 1-Year Estimates\)](#)

²⁰ [El Dorado County 2021, Affordable Housing Needs Report, California Health Partnership.](#)

To best address the increasing housing crisis and develop strategies to fit the unique needs of the region, it is vital to understand who are experiencing homelessness and to document the needs of this population. As discussed above, the El Dorado County CoC conducts a Point-In-Time (PIT) count²¹ on one night each year in January of the sheltered homeless population and every other year of the unsheltered homeless population. These counts provide a snapshot of the size and characteristics of the homeless population on a single day. The January PIT counts can be evaluated over time to determine trends in the characteristics of people experiencing homelessness. In addition, data gathered from the programs that serve people experiencing homelessness provide greater insight into the number of people served in a year and help determine the effectiveness of these programs. HMIS data from 2021, as well as the Coordinated Entry System’s by-name-list data, can provide further insights to supplement the PIT count.

HOW MANY PEOPLE ARE EXPERIENCING HOMELESSNESS IN EL DORADO?

During the last full January PIT count in 2019, volunteers identified 613 individuals experiencing homelessness in El Dorado County on the night of the count, with **480 (78%) of those people living unsheltered on the streets, in vehicles, or in encampments** (Figure 1).



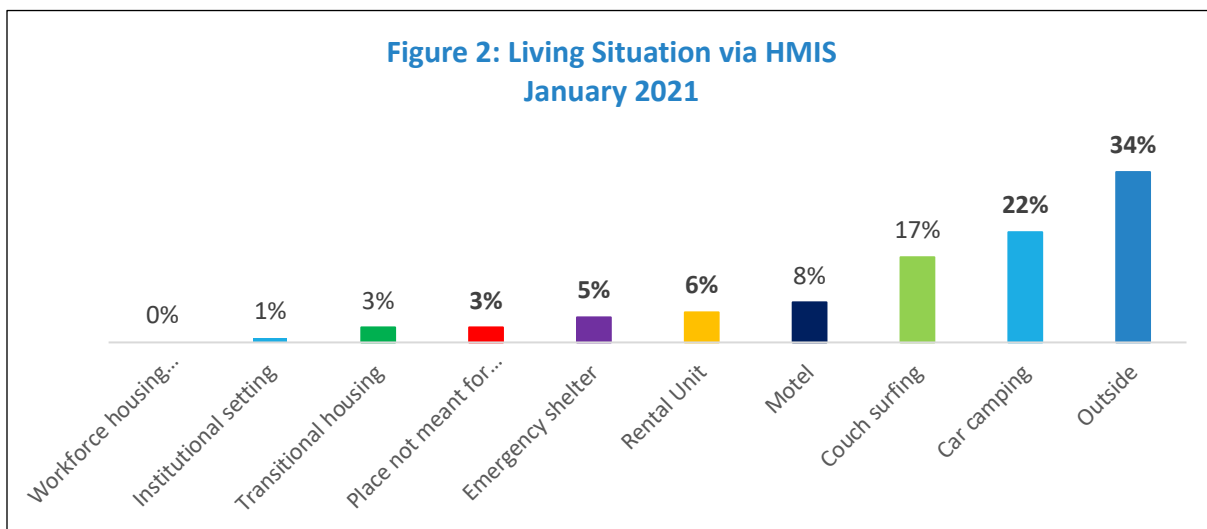
Source: Point-in-Time count, El Dorado County – 2015, 2017 and 2019.

From 2015 to 2019, PIT data indicates that the number of people experiencing homelessness **increased from 269 in 2015 to 613 by 2019**. However, it should be noted that significant variations in the way that the unsheltered PIT Count was conducted between 2015 and 2017 may have influenced the number of individuals counted. The methodology likely improved in 2017 making the larger number likely to be more accurate. The difference between 2017 and 2019 showed a slight increase in individuals experiencing homelessness (from 602 to 613 individuals). While the total population experiencing homelessness has dramatically increased in a short period of time, the number of people living unsheltered went down slightly before the COVID-19 pandemic due to a slight increase in sheltered

²¹ A count of sheltered individuals is performed every year in January. A count of unsheltered individuals is performed every other year.

options. Unsheltered PIT data is unavailable from 2020 or 2021 to identify the number of individuals experiencing homelessness; however, due to the lack of shelter, most individuals experiencing homelessness in El Dorado County **remain unsheltered**.

The Homeless Management Information System also tracks and documents individuals and families in need of assistance. In January 2021, the HMIS system had 919 active individuals in the homeless system of care. The current place of residence was known for 695 people. Of those, more than two-thirds (67%) were known to be living in their cars, outside, or another place not meant for human habitation. Another 17% in HMIS were couch surfing, 8% were living in a motel, and 1% were living in an institutional setting. Only 5% of those whose residence was known in HMIS were living in an emergency shelter. (See Figure 2).



El Dorado HMIS data Point-In-Time Jan 2021

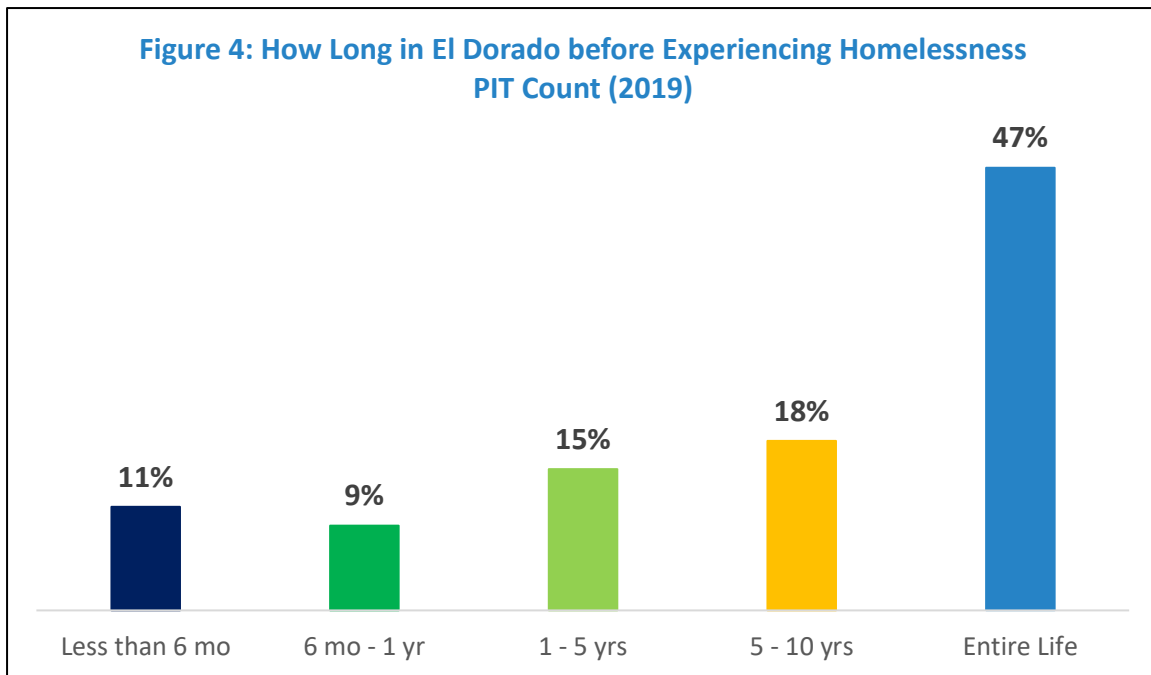
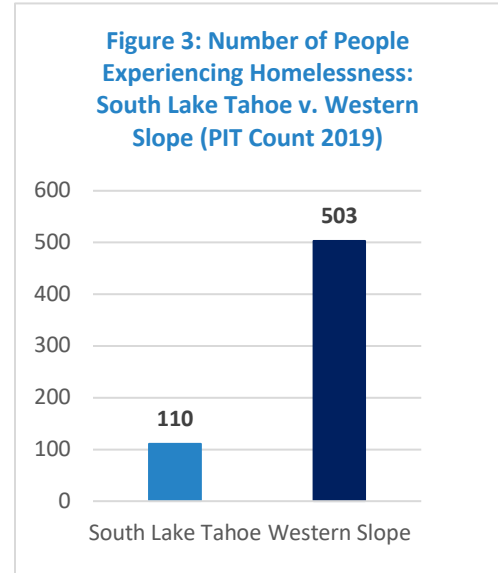
Most people experiencing homelessness in El Dorado County as measured in the PIT count are from the Western Slope region at 82%, compared to only 18% from the South Lake Tahoe Basin (Figure 3). For calendar year 2021, the by-name-list also had more individuals located in the Western Slope (56%) than in South Lake Tahoe area (44%), but not as disproportionate as the PIT count. The fact that the count is performed in January during a cold, often snowy time of year likely influences the number of households found in the South Lake Tahoe Basin. Additionally, because assessments are performed by the Front Door Coordinated Entry System, located in South Lake Tahoe, that may skew the data in terms of how many assessments are done across the two slopes.

Overall, the data indicates that there continues to be an unmet need for permanent housing and emergency shelter in El Dorado County.

WHO IS EXPERIENCING HOMELESSNESS IN EL DORADO COUNTY?

It is important to recognize that it is primarily long-time residents who make up the population experiencing homelessness in El Dorado. In the 2019 PIT, almost half of individuals (47%) had lived their entire lives in El Dorado County before experiencing homelessness, while 18% lived in El Dorado County for 5-10 years before experiencing homelessness. Fifteen percent (15%) lived in El Dorado County for 1-5 years before experiencing homelessness, and 9% lived in El Dorado County for 6 months or less before experiencing homelessness, and 11% lived in El Dorado County for less than 6 months before experiencing homelessness. (See Figure 4.)

2019 El Dorado County Homeless Point-In-Time Count & Survey



2019 El Dorado County Homeless Point-In-Time Count & Survey

AGE AND GENDER OF PEOPLE EXPERIENCING HOMELESSNESS

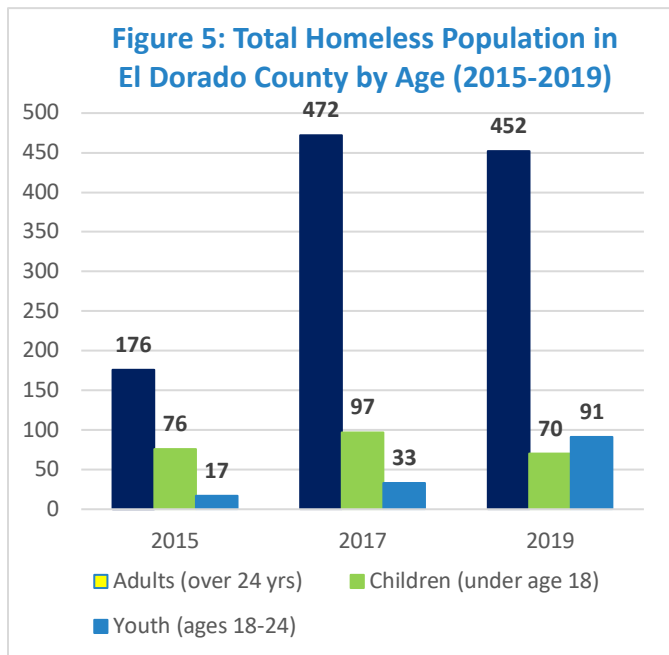
The total number of homeless individuals in El Dorado County has grown since 2015 with white adult males making up a significant portion of that population. However, while the number of adults has

decreased slightly since 2017, the number of unaccompanied youth has grown dramatically in the same period of time.

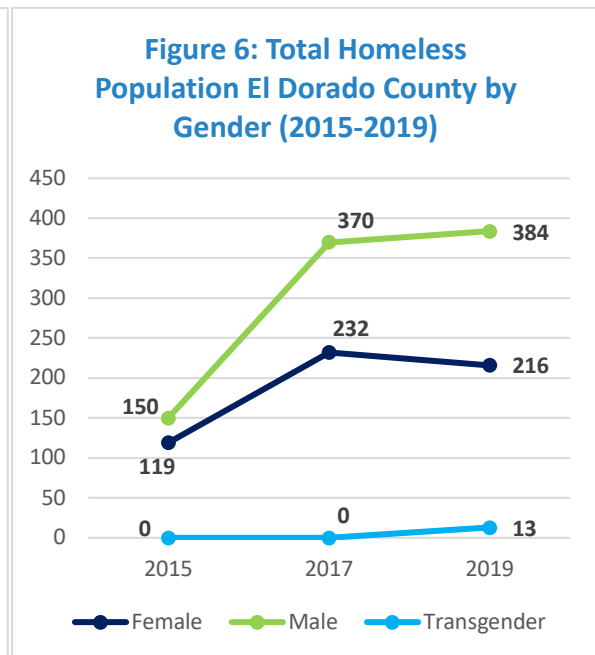
Age: While much of the homeless population are adults over 25 years old, the population of young adults experiencing homelessness has grown considerably since 2015. In 2015, there were only 17 people between the ages of 18 and 24 years old who were homeless. By 2017, the youth population had grown 94% (from 17 to 33 young adults). Two years later, that percent had grown 176% (from 33 to 91 young adults). **There has been a 435% increase in youth experiencing homelessness between 2015 and 2019.**

At the same time, the percent of children experiencing homelessness has gone down since 2015. While the number of homeless children increased 28% between 2015 and 2017 (from 76 to 97), by 2019 the number had gone back down, decreasing by 28% from 2017 (97 down to 70). The number of children homeless was almost the same in 2019 as it was in 2015 (Figure 5).

These figures do not include families who are “doubled up” with other family or friends as this is not defined as homeless for the HUD PIT count. However, the El Dorado County Office of Education also conducts annual counts that do include these figures. In 2019-20, 856 children and youth were experiencing homelessness and in 2020-21, that number was down to 753. School district representatives report that the reduction was likely impacted by the COVID pandemic and increased difficulty in tracking. The early count for 2021-22 indicates the number will have increased again, which is likely impacted by the Caldor fire.



2015, 2017, 2019 El Dorado County Homeless PIT



2015, 2017, 2019 El Dorado County Homeless PIT

Gender: The ratio for the gender of people experiencing homelessness has not changed much since 2015. While the population of both men and women experiencing homelessness went up between 2015

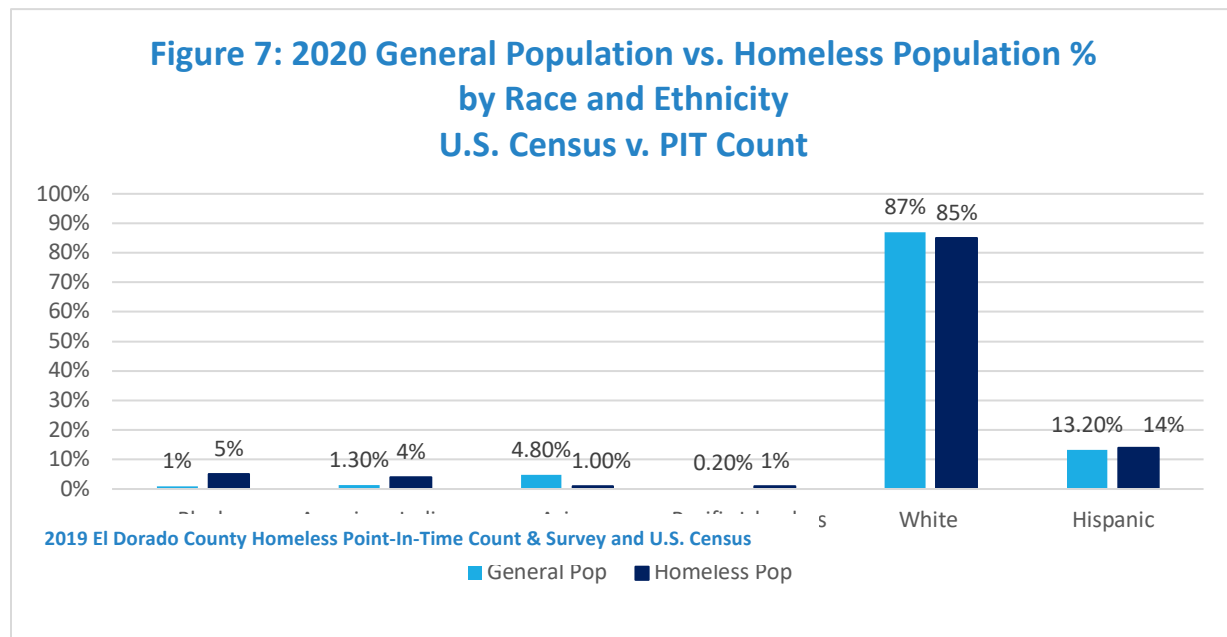
and 2017, by 2019, the number of women experiencing homelessness went down while the number of men continued to grow.

Of note is that in both 2015 and 2017, no one reported as transgender or gender non-conforming. By 2019, however, 13 people reported transgender (2%) when counted in the homeless population (Figure 6).

About 27% of the PIT count survey respondents indicated they were currently experiencing or fleeing domestic violence or partner abuse. That number is similar for the by-name-list for 2021, where 30% who answered the question about whether they were fleeing domestic violence indicated that they were. In HMIS in January 2021, however, the number of people who indicated that they were homeless because of domestic violence was 38%. This may indicate a rise in the incidence of domestic violence because of COVID-19 or may show that the HMIS data analysis is better able to determine the presence of domestic violence, as HMIS asks several questions that indicate risk that taken together are able to identify domestic violence more readily.

RACE AND ETHNICITY OF PEOPLE EXPERIENCING HOMELESSNESS²²

The number of people experiencing homelessness has grown rapidly across the entire population in El Dorado County. The majority of people who live in El Dorado County are White and so is the majority of people experiencing homelessness (Figure 7). That is not true for other races and ethnicities of people experiencing homelessness in the County. For example, while the general population of El Dorado County is only 1% Black and African American, however there are 5% of people Black and African American experiencing homelessness. Similarly, American Indian or Alaska Natives comprise only 1.3% of the general population but comprise 3% of the homeless population.



²² U.S. Census Bureau

Racial demographics in HMIS and the by-name-list are similar but not exactly the same as information identified in the PIT count. For example, the number of White people in HMIS was 89% and in the by-name-list it was 87%. Black or African American individuals comprise 4% of the population in both HMIS and the by-name list.

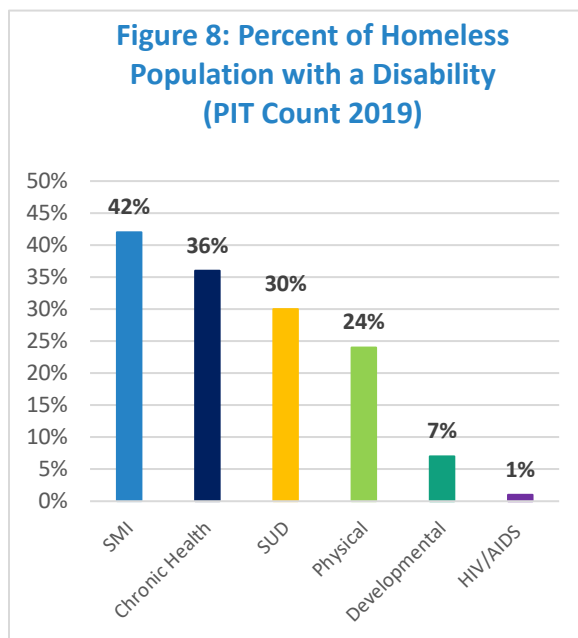
Two times as many American Indian or Alaska Natives are in the homeless system of care compared to the general population in the County. Additionally, American Indian or Alaskan Natives represent 8% of the high-needs clients²³ on the by-name list. For **Black and African American people, the percent of people in the homeless population is four to five times that of the general population.**

The 2021 U.S. Census found that 14% of the population in El Dorado County identified as Hispanic/Latino. The 2020 PIT counted **14% of the homeless population who identified as Hispanic/Latino.** The HMIS for January 2021 had 11% of people in the system who identified as Hispanic/Latino and throughout calendar 2021, the by-name-list had 8% of the population on the list who identified as Hispanic/Latino.

PEOPLE WITH DISABILITIES IN THE HOMELESS POPULATION

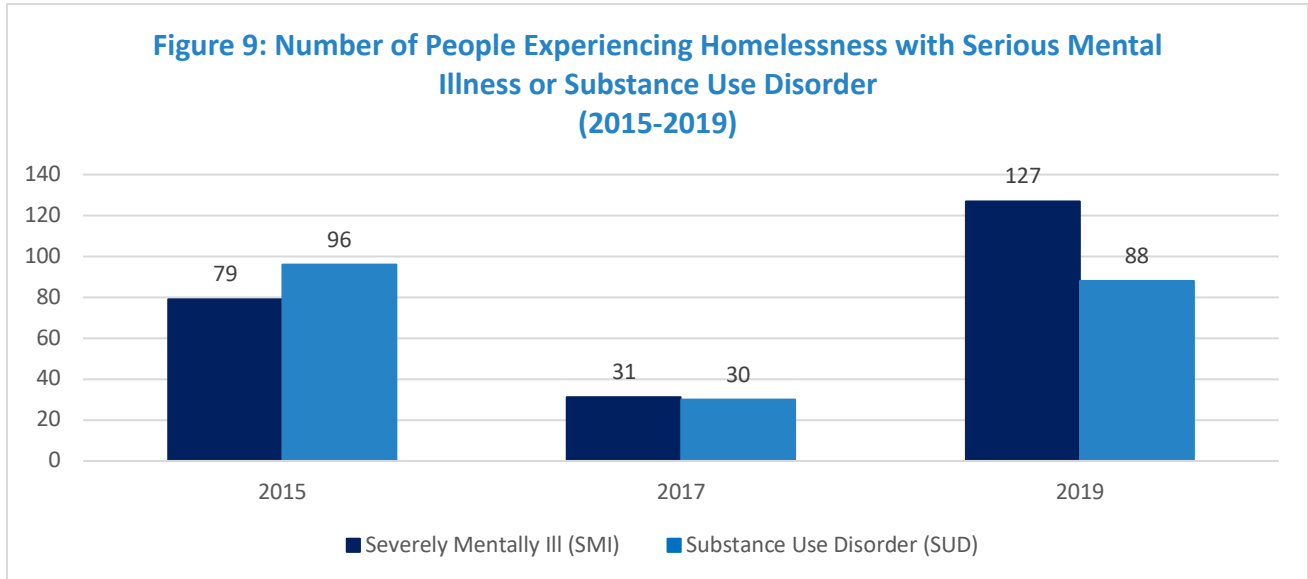
More than half of people experiencing homelessness in HMIS in January 2021 reported having one or more disabilities. On the by-name-list, 62% of individuals on the list reported having a disability.

In the 2019 PIT count, nearly 42% of individuals reported having a serious mental illness (SMI), 36% reported chronic health conditions, 30% reported substance abuse disorders (SUD), 24% reported having a physical disability, approximately 7% reported having a developmental disability, and 1% reported having an HIV/AIDS-related illness (Figure 8).



²³ High-needs are clients who score 10 or higher on the Vulnerability Index – Service Prioritization Decision Assessment Tool (VI-SPDAT) assessment tool used by the Coordinated Entry.

The growing number of people experiencing homelessness who have a disability is most apparent for those with a serious mental illness and/or a substance use disorder. While the number dropped for both populations between 2015 and 2017, the numbers skyrocketed between 2017 and 2019 (more than doubling), far surpassing the numbers from 2015 for people with a serious mental illness (Figure 9).



WHERE DO PEOPLE EXPERIENCING HOMELESSNESS STAY?

The vast majority (78%) of people experiencing homelessness in El Dorado County are living unsheltered on the street or another outdoor location, in a vehicle, in abandoned buildings, or encampments. Over one-third (37%) of respondents were in emergency shelters the night of the PIT count of 2019. Approximately 14% of survey respondents who were unsheltered reported living in a vehicle or boat, while 13% reported they were living in an outdoor encampment. Ten percent (10%) reported living in a park, 8% reported living on the street or sidewalk, 4% reported living in abandoned buildings, and another 4% were living under a bridge or underpass.

The rate of unsheltered homelessness has increased significantly since 2015 when 55% of people experiencing homelessness were unsheltered. While the number of people experiencing homelessness who are unsheltered has increased by 332 people since 2015, while the number of available emergency shelter beds has only increased by 54 (from 71 to 125) over the same period.

People who live unsheltered are more vulnerable than persons experiencing sheltered forms of homelessness due to exposure to risks such as weather or injury, lack of access to communication with medical or service providers, limited access to hygiene, and other complicating factors. Unsheltered persons are more likely to have poorer health, more symptoms of physical illness – including more severe symptoms of chronic health conditions, higher rates of chronic health conditions, and have less access to health care services. They are more likely to have behavioral health challenges and/or be involved in the criminal justice system. They are also more likely to experience premature death.

Many of those living without shelter are the community’s most vulnerable residents. Over 57% of homeless adults with disabilities who were on the by-name-list in 2021 were living unsheltered. As a result, many of those who most need treatment, care and support are living without shelter, often in remote locations or encampments, disconnected from services. Approximately 18% of individuals surveyed during the PIT count reported receiving disability benefits, while 78% did not. On the other hand, 66% self-identified a mental or physical disability and 46% said they were unable to work.

CAUSES OF HOMELESSNESS IN EL DORADO

In El Dorado County, as in much of California, homelessness and housing instability are closely tied to the region’s soaring housing costs and economic stagnation for low-income residents. Each year, residents – neighbors, friends, and co-workers – experience a crisis that may result in loss of housing. And once housing is lost, it is increasingly difficult for an individual or family to get back on track.

People become homeless for many reasons, and the precipitating set of circumstances for one household may not be the same as for another. However, there are common risk factors and conditions, including working with income insufficient to cover housing costs, or the ability to build a savings to cover a major expense or financial change such as job loss or reduction of hours. Persons with physical or behavioral health challenges may struggle to maintain consistent employment, and those on social security, or other fixed income such as seniors or those with disabilities have limited options for affordable housing.

INCOME AND HOUSING COST

As with other parts of California, the **cost of living in El Dorado is relatively high as compared to income**. The median household income in 2019 in El Dorado was \$87,059. However, 9.3% of El Dorado’s population (or approximately 17,780 individuals) were living below the federal poverty level in 2019.²⁴ For a family of four in 2019, that was monthly income of approximately \$2,146 per month.²⁵ At the same time, the average rent for 2019 in El Dorado was approximately \$1,308 (not accounting for unit size).²⁶ By 2021, the average asking monthly rent increased to \$1,476.²⁷ A household would need to earn \$28.38

²⁴ [El Dorado County, California, U.S. Census Bureau \(2019 American Community Survey 1-Year Estimates\)](#)

²⁵ [2019 Federal Poverty Levels, Office of the Assistant Secretary for Planning and Evaluation](#). For 2021 and 2022, those numbers are a bit higher: For 2021 monthly income at the federal poverty level for a family of four was \$2,280 (\$26,500 annually) and for 2022, monthly income for a family of four at the federal poverty level is \$2,312 (\$27,750 annually). See: [2021 Federal Poverty Levels, Office of the Assistant Secretary for Planning and Evaluation and 2022 Federal Poverty Levels, Office of the Assistant Secretary for Planning and Evaluation](#).

2019 Federal Poverty Guidelines, Office of the Assistant Secretary for Planning and Evaluation. Available at: <https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines>

²⁶ [El Dorado County, California, U.S. Census Bureau \(2019 American Community Survey 1-Year Estimates\)](#)

²⁷ [El Dorado County 2021, Affordable Housing Needs Report, California Health Partnership](#).

per hour – nearly twice the state minimum wage (or approximately \$59,000 per year) – in order to afford the average monthly rent in 2021.²⁸

According to HUD, “cost-burdened” households pay more than 30 percent of their income for housing and are at higher risk of housing instability. They have more trouble paying rent and covering other costs such as food, clothing, transportation, and medical care. Households that pay more than 50% of their income on housing are considered “severely cost burdened.”

Cost burden is the ratio of housing costs to household income. For renters, housing cost is gross rent (rent plus utilities). For owners, housing cost is “monthly owner costs,” which includes mortgage payment, utilities, association fees, insurance, and real estate taxes.

Households whose income is less than 30% of the area median income (for El Dorado in 2019, that would be less than \$26,118 annually or \$2,176 per month) are considered “extremely low-income” or ELI households. The California Housing Partnership estimated that 90% of El Dorado County ELI renters are severely cost burdened, paying more than 50% of their income toward housing costs.²⁹

Moreover, **renters face a higher “cost burden” from housing than homeowners and are at greater risk of losing their housing than homeowners.** In El Dorado, according to the most recent HUD Comprehensive Housing Affordability Strategy (CHAS) data,³⁰ **forty-one percent of renters spend 30% or more of their income on housing.** By contrast, 28% of *homeowners* spend 30% or more of their income on housing.³¹ **Communities where residents spend more than 30% of their income on rent can expect to see an increase in homelessness.**³²

At risk of homelessness is a status given to individuals and their families who have unstable housing and inadequate income and resources.

In addition to a high housing cost burden, there are three additional housing problems that indicate El Dorado individuals and families are at greater risk of losing their homes. First, many low-income families may have an apartment or home that does not have complete kitchen facilities. Second, they may have

²⁸El Dorado County 2021, Affordable Housing Needs Report, California Health Partnership.

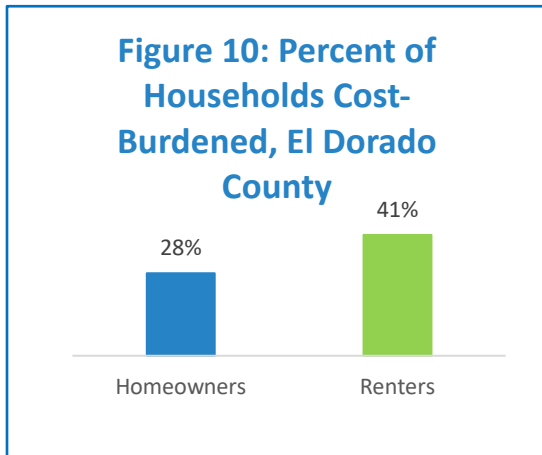
²⁹El Dorado County 2021, Affordable Housing Needs Report, California Health Partnership.

³⁰ 2013-2017 CHAS (Comprehensive Housing Affordability Strategy) data. Available at: https://www.huduser.gov/portal/datasets/cp.html#2006-2017_query

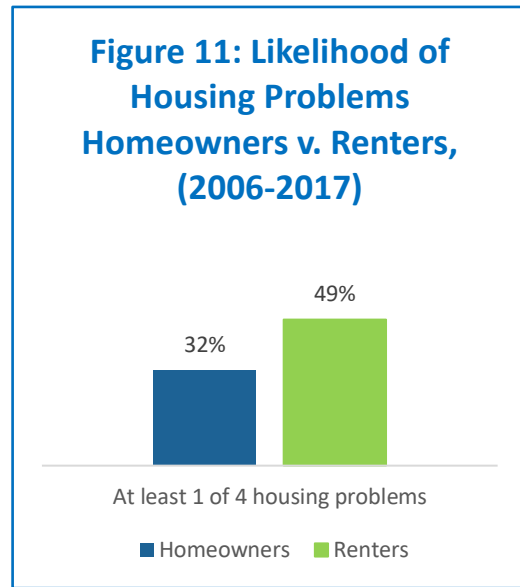
³¹ Each year, the U.S. Department of Housing and Urban Development (HUD) receives custom tabulations of American Community Survey (ACS) data from the U.S. Census Bureau. These data, known as the “CHAS” data (Comprehensive Housing Affordability Strategy), demonstrate the extent of housing problems and housing needs, particularly for low-income households. Available at: https://www.huduser.gov/portal/datasets/cp.html#2006-2017_query

³² Homelessness Rises Faster Where Rent Exceeds a Third of Income (Dec. 11, 2018). Available at: <https://www.zillow.com/research/homelessness-rent-affordability-22247/>

an apartment or home that does not have complete plumbing facilities. Third, they may live in a household that is overcrowded - often living with other families in the same household³³



Source: HUD Comprehensive Affordable Housing Strategy (CHAS) data, 2006-2017.



Source: HUD Comprehensive Affordable Housing Strategy (CHAS) data, 2006-2017.

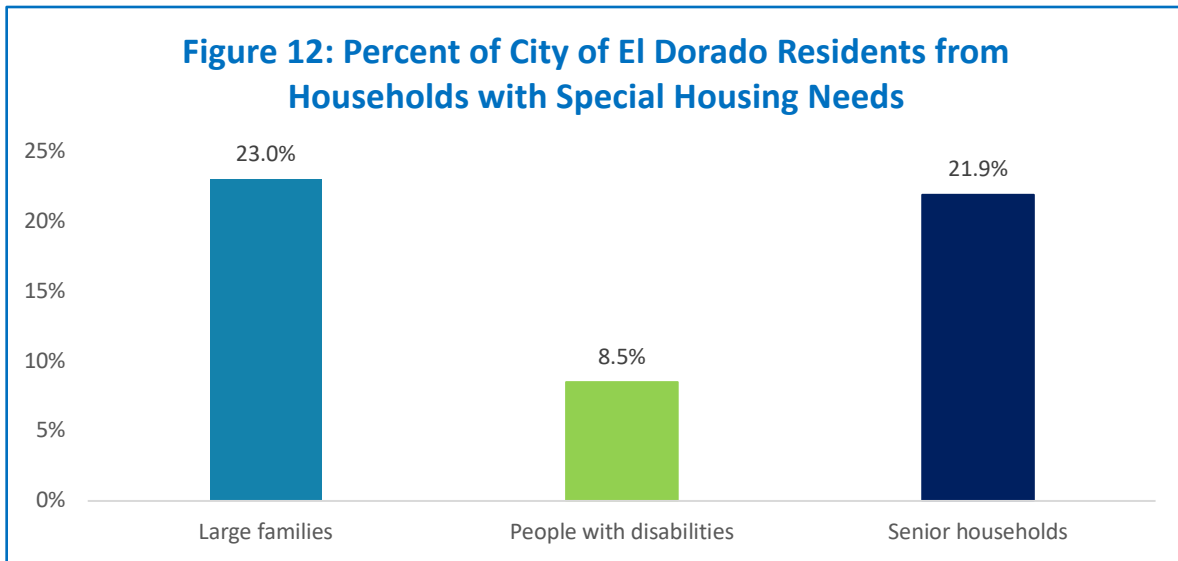
When adequate housing protects individuals and families from harmful exposures and provides them with a sense of privacy, security, and stability, it can make important contributions to health. In contrast, poor quality and inadequate housing contributes to health problems such as infectious and chronic diseases, injuries, and poor childhood development. The additional financial burden that may result from these housing problems, places these households at greater risk for becoming homeless. In El Dorado, **nearly half of renter households have one or more of the identified housing problems** whereas 30% of homeowners have one or more of the housing problems.

BARRIERS FOR HOUSEHOLDS WITH SPECIAL HOUSING NEEDS

Large families, people with disabilities, and seniors are some of the constituents in El Dorado who live in households that have special housing needs. Almost 1 in 10 of El Dorado’s residents have disabilities. More than 20% of El Dorado’s households include someone aged 65 or older. Almost one quarter of El Dorado’s households are comprised of large families, which are defined as 5 or more persons.³⁴

³³ 2013-2017 CHAS (Comprehensive Housing Affordability Strategy) data. Available at: https://www.huduser.gov/portal/datasets/cp.html#2006-2017_query

³⁴ American Community Survey, 2019 5-year estimates.



Source: American Community Survey 2019, 5-Year Estimate.

Persons with disabilities and/or seniors may have functional needs that require accommodations in housing. These accommodations are necessary for the individual’s ability to interact within their environment, such as larger doorways for accommodating wheelchairs or walkers, or additional lights to reduce the effects of visual impairment. Such rentals, however, are not as common, causing reduced access to safe affordable housing.

Large families often face significant difficulty in locating adequately sized, affordable housing. The California Department of Housing and Community Development has noted the added burdens on large families due to the limited supply of adequately sized units to accommodate larger households. Additionally, the increased costs of providing for larger families, including 3 or more children limits the available income to pay for rent and other expenses. Households with children have the added burden of ensuring there is no disruption to a child’s education.

These **households with special housing needs are even more vulnerable to housing instability and displacement.**

LACK OF AFFORDABLE HOUSING

As in many parts of California, El Dorado has a significant shortage of affordable housing. There are not enough multi-family housing units (apartments or housing with more than one unit), which are typically more affordable for low- and very low-income households than single-family housing (units for one household).

The availability of affordable housing in the area is insufficient to meet the needs of today’s market. Little housing for very low-income and low- income families has come on the market in recent years, with relatively few affordable homes in development. In December 2021, El Dorado County home prices were up 14.0% compared to the previous year, selling for a median price of \$615K.

Recent efforts to curb spread of COVID-19 have impacted many households. Businesses have closed or been unable to serve in person. At the same time, **many landlords were losing significant income when rents were not paid.** The State of California provided relief through an eviction moratorium through September 2021. Through a joint state and federal program, financial help was provided for tenants who owed rent that was not paid during the pandemic to help ensure landlords received payment and tenants remained stably housed.³⁵

EL DORADO COUNTY'S HOMELESS RESPONSE SYSTEM: OPPORTUNITIES AND CHALLENGES

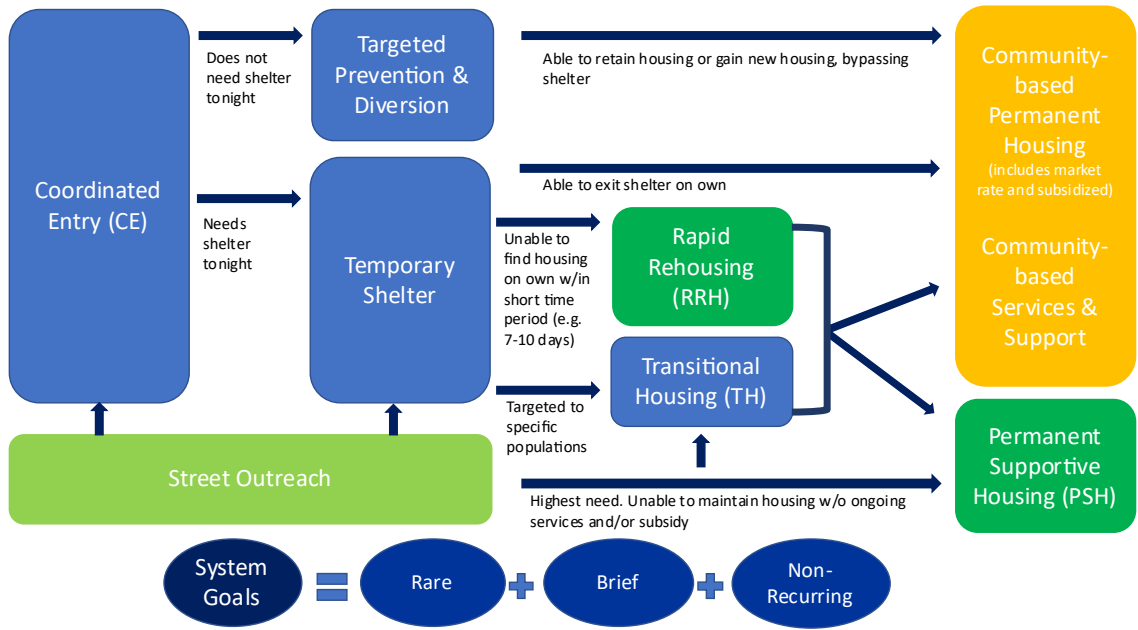
OVERVIEW

An effective homeless crisis response system quickly identifies and connects people who are experiencing or are at risk of homelessness to sheltering, rehousing assistance, and other services. It works because it aligns a community, its programs, and services around one common goal — to make homelessness rare, brief, and nonrecurring. The figure below illustrates how such a coordinated system can help people exit homelessness quickly.

³⁵ Lower-income tenants who qualify for a state rental aid program — those who earn 80% or less of the median income in their County and were financially affected by COVID-19 — would be protected from eviction for an additional six months. From October 2021 through March 2022, those residents would receive extra time to apply for rent relief if a property owner attempts to evict them.

HOMELESS CRISIS RESPONSE SYSTEM

General Components & Client Flow



Although El Dorado has worked to build a local homeless system of care, there are still many challenges and unmet needs in the community. **This section provides an overview of the resources available to homeless individuals in El Dorado County as well as the challenges and needs of the current system based on the feedback from the community survey responses, data analysis, stakeholder interviews/meetings, and the convening of focus groups.**

LEADERSHIP AND COORDINATION

Homelessness is a community-wide challenge that requires partnerships between numerous jurisdictions, agencies, and sectors. Investments in effective, centralized leadership to coordinate efforts and implement shared strategies, ensures that community resources are being used effectively to help make headway in addressing homelessness in the community.

CURRENT SYSTEM

The El Dorado Continuum of Care – El Dorado Opportunity Knocks (EDOK) – has established a strong foundation for coordinated partnerships between providers throughout the CoC area. The **El Dorado County Continuum of Care (CoC) provides centralized countywide leadership and coordination for the homeless system of care**, including through the designation of an Administrative Entity (Collaborative Applicant) to act as the legal entity on behalf of the CoC, an HMIS Lead to administer the HMIS System,

and a Coordinated Entry System (CES) Operator who is selected through the Administrative Entity for the CoC.

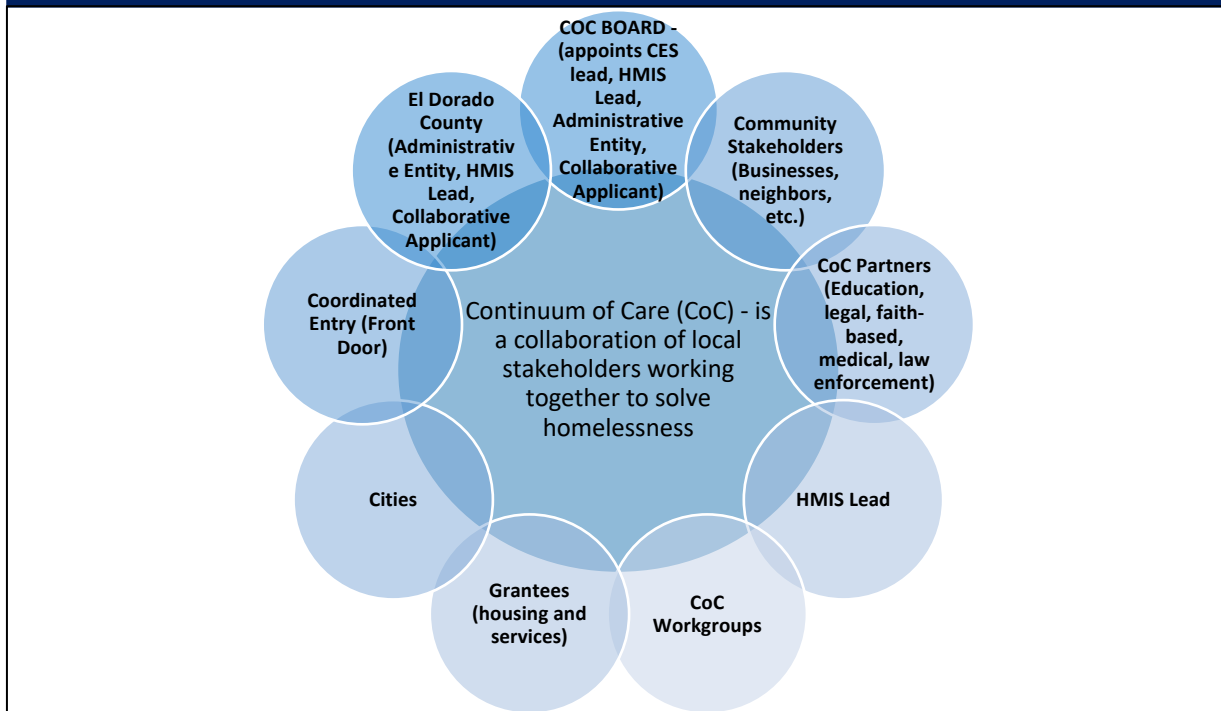
To further **encourage collaboration and build capacity of the local service providers**, the CoC conducts regular trainings about homelessness, Housing First, and best practices. The CoC also strives to bring transparency by providing regular reports on Coordinated Entry data, HMIS data management, and CoC funding and administration. The CoC also offers limited technical assistance with Homebase to providers who are interested in learning how to expand the capacity of their programs.

Continuums of Care (CoCs): The Department of Housing and Urban Development (HUD) has designated regions across the United States as Continuums of Care to receive federal funding and coordinate local responses. The El Dorado CoC is known as El Dorado Opportunity Knocks (EDOK) and shares the same geographic area as El Dorado County. EDOK is the backbone agency of the homeless system of care that works with local stakeholders, including the jurisdictions, to obtain federal funding, identify local priorities, and carry out the duties of a Continuum of Care, as determined by HUD.

The **El Dorado CoC Board** has 18 seats including representation from a broad array of organizations, including:

- Nonprofit homeless assistance providers – El Dorado Housing and Pathways Project
- Domestic Violence Agency – Live Violence Free
- Faith-based representative – Green Valley Community Church
- Government representatives (including Public Housing Authority) – El Dorado County HHSA, the City of Placerville’s Police Department, and the South Lake Tahoe Police Department
- Educational representative (school district, university, etc.) – El Dorado County Office of Education
- Mental health provider
- Health service provider – Barton Hospital
- Law enforcement representative – El Dorado County Sheriff’s Office
- Probation Department representative – El Dorado County Probation
- Representative of organization/entity serving Veterans – Volunteers of America Northern California and Northern Nevada
- Homeless and/or formerly homeless representatives – Tahoe Youth and Family Services and Job’s Shelters of the Sierra
- Business representative – US Bank
- Affordable housing development representative/property manager – Tahoe Prosperity Center
- Family and Children/Youth provider – New Morning Youth and Family Services
- Members at large – Only Kindness, Inc.

Continuum of Care



The CoC Board meets every other month. Board elections take place every year with the seats on the Board staggered so half the seats are open each year helping to ensure continuity. The election is publicized, and seats are open to all who are knowledgeable about and interested in working on issues of homelessness in El Dorado County, though some seats require specific experience or work with specific populations.

The CoC Board has an **Executive Committee** of five members: two Co-Chairs, a Vice Chair, a Secretary, and a Treasurer. The Executive Committee meets regularly to help lead the CoC in planning and implementing the strategies for responding to homelessness in El Dorado County. The Executive Committee members are elected annually.

The CoC has designated additional committees that meet, as needed, to accomplish certain tasks. Committees generally consist of some CoC Board members, CoC general members, and other volunteers. The El Dorado CoC currently has the following committees:

- **Coordinated Entry (CES) and Homeless Management Information System (HMIS) Committee**, which meets at least quarterly to support and improve Coordinated Entry processes, client referrals, and data management and collection.
- **Point-In-Time Committee**, which meets weekly from September to February to coordinate the annual Point-In-Time count.
- **Performance and Evaluation Committee**, which meets as needed to develop performance targets for the community providers and reviews the policies and scoring tools for the annual HUD CoC competition.

- **Governance Committee**, which meets biweekly when the CoC Governing Documents need to be updated.

EDOK has designated the El Dorado County Public Housing Authority (PHA) as the **Administrative Entity and HMIS** lead for the CoC. The HMIS lead agency is responsible for developing and monitoring the HMIS data quality, data privacy and security plan, ensuring that HMIS is administered in compliance with HUD regulations, ensuring consistent participation by CoC and Emergency Solutions Grant (ESG) recipients, and encouraging non-HUD funded providers to participate and maintain high quality data standards.

As an **Administrative Entity (AE)**, the PHA is responsible for the financial management of funds received by the CoC, including applying for state and federal grants, running local competitions for funding, and administering grants to local service providers. The AE also drafts and submits grant applications on behalf of the CoC to the State, receives grant awards from the State, develops and administers agreements with subgrantees on behalf of the CoC, and conducts ongoing project and system monitoring and state reporting. The AE is also responsible for regional coordination.

The El Dorado PHA also serves as the **Collaborative Applicant (CA)** for the CoC. On behalf of the CoC, the Collaborative Applicant collects and submits the CoC Registration, Consolidated Application and Project Priority Listing, and is the only entity eligible to apply for the CoC Planning Grant to carry out CoC strategic planning activities. The CA collects evidence of the use of planning grant funds. The CA collects and combines the required application information from all applicants for CoC competition, records and collects evidence that the CoC meets HUD requirements, including meeting agendas, minutes, the governance charter, policies and procedures and all required updates and notices.

Through expanded collaborations between the CoC and local jurisdictions, the community has been able to leverage new state and federal funding, including:

- **Over \$2 million in Homeless Housing, Assistance and Prevention (HHAP)** CoC and County funds.
- **Over \$3 million in No Place Like Home (NPLH)** funding in 2019 for housing for individuals who are homeless or at risk of homelessness and in need of mental health services.
- **Over \$750,000 in California Emergency Solutions and Housing (CESH)** funding in 2018-2019.
- **\$1.5 million in Homeless Emergency Aid Program (HEAP)** funds in 2019-2020.
- **Over \$270,000 in Emergency Solutions Grant (ESG)** and **\$1,153,000 in ESG Covid Relief Act (ESG CV)** funding in 2020-2021.

In total, **over \$17 million in state and federal funds** has been awarded to the CoC and El Dorado County toward homeless solutions between 2018 and 2021.

Utilizing this increased funding, the community has been able to

- **Assist 889 homeless households (1350 individuals) to exit homelessness** with approximately **80% exiting to permanent housing** destinations between 2018 and 2021.
- Serve **118 people in Project Roomkey**. 80% of persons served in Project Roomkey were 50 years of age or older. To date, of those that went through intake and remained in the program longer term, nearly 70% have exited homelessness. The program served 14 Veterans.

- **Create 70 permanent housing units** with the state **Homekey program** funding through the Tahoe Coalition for the Homeless.
- **70 Emergency Housing Vouchers** for homeless individuals in 2021, coordinated through the CoC and PHA.
- 5 Mainstream Vouchers for people with disabilities
- 30 HUD-VASH Vouchers for Veterans

The Coordinated Entry System (CES) for El Dorado’s CoC is the primary process for assessing a client’s severity of need and ensuring that they have equitable and timely access to available resources. The CES in El Dorado, now called **Front Door**, provides a single access point for all people seeking homeless services in El Dorado County. Front Door assesses each client for vulnerability and needs and provides referrals accordingly. Once a household is evaluated, they are added to the CoC’s By-Name List (BNL) which is the central list of individuals experiencing homelessness who have sought homeless assistance or housing from the CES.



Coordinated Entry: CES is a process developed to ensure that all people experiencing a housing crisis have fair and equal access and are quickly identified, assessed and prioritized for, referred, and connected to housing and assistance based on their strengths and needs. In El Dorado County, HMIS is used in conjunction with the CES to maximize accountability and organization.

CHALLENGES

COORDINATION BETWEEN GOVERNMENT ENTITIES, HOMELESS SERVICES AND OTHER PARTNERS

The vast majority of people who participated in the stakeholder process were passionate about addressing homelessness and finding solutions. Much work is happening across El Dorado County, however, community stakeholders overwhelmingly felt that there needs to be more coordination across the homeless system of care, government entities and other partners.

Community-wide survey respondents expressed the need for **better collaboration and coordination between various partners working to address homelessness**. When asked, respondents would like to see an increased presence from the County (70%), mental health clinics (54%), and state agencies (45%) in addressing homelessness. Stakeholders felt that more support from local government entities and elected officials, including enacting policies to eliminate barriers was needed to create solutions to homelessness in El Dorado.

Many expressed the desire to see more support for and coordination around homeless solutions between the County, cities, law enforcement and various government departments. For El Dorado County, it is not just support, but the need to coordinate the efforts in an effective manner. Having organizations and/or agencies instituting proposed solutions not in concert with other aspects of the homeless system of care may lead to further fragmentation in services and support in the community and will cost valuable time and resources.

“There could be better collaboration among existing programs. I am a service provider in an existing program and I do not have a clear understanding of what the Tahoe Coalition for the Homeless does and I don't understand the CoC.”

-Community-wide survey respondent

Community members also expressed the need for better communication and coordination among the service providers of El Dorado County who are engaged in the homeless system of care. Half of the community-wide survey respondents indicated that there was limited internal knowledge in their organization about the full range of services available in the community. Approximately 1/3 of respondents felt that insufficient outreach and a lack of coordinated messaging was a reason why some clients and providers are not aware of the services available. They indicated that they would like to see more communication between all providers, regularly and consistently. Many respondents indicated that additional funding or dedicated staff would help improve coordination and collaboration.

“All partners need to come to the table, including all Cities, and hospitals.”

-Community-wide survey respondent

Within the CoC there is a core group of organizations providing emergency shelter, housing, and supportive services. Many smaller organizations, however, are providing support and help to people experiencing homelessness, but are not necessarily a part of the comprehensive and cohesive larger system. They don't necessarily attend CoC meetings, may not be aware of other things happening to address homelessness, and may not be adequately communicating with the broader community about their own efforts.

“I think there should be a better way to access the right set of people, directed in teams that are skilled at the different groups of homeless people with similar needs. Sometimes, for example, the soup kitchen might be miles from the shelter and some homeless people have to walk in one day, several miles. Not only are they often very tired, as a result of being homeless, but their belongings they've been able to get to survive are often heavy. If they are capable of working and have been able to get adequate rest, they also have to figure out all the other problems of getting food, getting back to the shelter on time, after being on foot all day. If they have medical conditions in this process, it truly can become overwhelming and impossible day-to-day.”

-Lived expertise of homelessness survey respondent

PUBLIC OUTREACH AND EDUCATION ABOUT HOMELESSNESS

Through community meetings, focus groups, and surveys, participants shared a frustration with **a lack of information about the Continuum of Care and El Dorado County's response to homelessness and success of programs**. There was also concern about the enduring misperceptions in the general public about people experiencing homelessness.

About 30% of respondents agree or strongly agree that most people experiencing homelessness are living on the streets by choice. Yet, data shared above makes clear that many households are unable to afford housing. **About 95% of Extremely Low-Income households and 89% of Low-Income households in El Dorado County are cost burdened, which means they pay more than 30% towards housing costs**³⁶.

“Planning should include getting our successes in rapid rehousing and housing supports out to the community. PR that focuses on our good outcomes could help change voter/community response.”

-Community-wide survey respondent

Moreover, the hourly wage needed to afford the average rent in El Dorado County is approximately twice the state minimum wage.

People experiencing homelessness feel the misperceptions acutely. In focus groups, they shared that

“I see many parked in the ... parking lots overnight ... I have spoken to some of the individuals living in their vehicles, and all of them were working individuals who could not find affordable housing and were over the age of 55. They are usually in a lot for a couple nights then move to another, they continue to move around every couple nights. I haven't seen these individuals leave behind trash or vandalize the property. There are different types of individuals experiencing homelessness. We need different solutions not one-size fits all.”

Community-wide survey respondent

dignity and respect are of utmost importance to them. Participants expressed a belief that some in the County would prefer to ship them elsewhere. Others shared that they want people to know that homeless people are not all the same and there is no one-size fits all solution to homelessness. Survey respondents stated that general education to reduce stigma and fear and promote community concern and support for solutions was necessary.

Participants in the community meetings also felt that misperceptions about homelessness and homeless programs was a major contributor to the public reluctance to support programs and housing for homeless individuals. Participants felt that **more public education and outreach was necessary to break down the stereotypes of homelessness**, the reasons people become homeless and what it takes to find and keep stable housing. Participants expressed the need for better public education and a media campaign to help combat some of the misperceptions and garner support in the community.

³⁶ [El Dorado County 2021 Affordable Housing Needs Report](#).

PERMANENT HOUSING SOLUTIONS IN EL DORADO

Permanent housing programs, such as permanent supportive housing (PSH) and rapid rehousing (RRH), are well-established as some of the most cost-effective and successful strategies to address homelessness. These programs offer subsidized housing with some level of supportive services needed to retain that housing and attain long-term stability. Services can include case management, connections to employment and public benefits, and medical, mental health, and substance use treatment as well as transportation, childcare, and life skills. The programs tailor services to the unique needs of each household and can successfully support many El Dorado County residents each year to permanently exit homelessness and regain self-sufficiency.

Two vital pieces of a permanent housing solution are the availability of affordable housing and the engagement of landlords. Access to affordable housing is vital to enable individuals who have become homeless to regain housing. It also provides an essential base for ongoing stability, which in turn prevents future homelessness. **Landlords are invaluable partners in helping people exit homelessness and regain stability.** They also can benefit from subsidized rent programs because the programs provide a reliable source of rent, as well as a support system for both the landlord and the participant. Partnerships with the homeless system of care can provide staff to act as mediators to help support the participant to remain stably housed and help locate new tenants quickly for a landlord. Strong partnerships are needed as landlords are often reluctant to rent to people who were recently homeless because they have gaps in their rental history, credit issues, histories of past evictions, or other barriers.

CURRENT SYSTEM

In the current housing crisis, safe and affordable housing is out of reach for many El Dorado residents, especially those with the fewest resources, including older adults and individuals with a disabling condition. Once housing is lost, it is difficult to regain and there are almost no emergency shelter or intermediate housing options in the system. Creating housing for these priority populations requires significant funding and collaboration between the County, private housing developers, and a range of nonprofit, philanthropic, and community partners.

HOUSING OPTIONS

El Dorado County continues to struggle with a significant unsheltered population. In the 2019 January PIT count, **480 of El Dorado County's homeless residents (78%) were found to be unsheltered.**

The 2020 Housing Inventory Count (HIC) identified a total of **238 year-round beds** available in the community including Permanent Supportive Housing (PSH), Rapid Rehousing (RRH), Transitional Housing (TH), and Emergency Shelter (ES), with an additional **92 seasonal beds** (for a total of 330 beds). There are no beds dedicated to chronically homeless individuals.

Table 1: Bed Inventory for El Dorado County (2020)

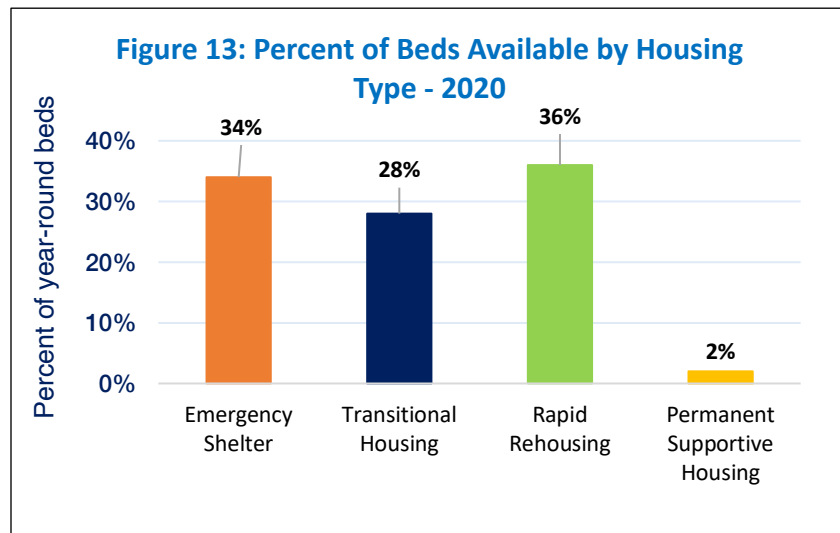
		Family Beds	Adult-Only Beds	Child-Only Beds	Total Year-Round Beds	Seasonal Beds	Veteran Beds	Youth Beds
TOTAL Emergency Shelter and Transitional Housing		104	32	12	148	92	0	0
	Emergency Shelter	70	0	12	82	92	0	0
	Transitional Housing	34	32	0	66	n/a	0	0
Total Permanent Housing		75	15	0	90	n/a	5	0
	Permanent Supportive Housing	0	5	0	5	n/a	5	0
	Rapid Rehousing	75	10	0	85	n/a	0	0
Grand Total		179	47	12	238	92	5	12

Only 2% of the beds (5 beds) available in 2020 were PSH beds. By 2021, the total number of PSH beds increased to 18 with 11 additional beds under the Mental Health Services Act (MHSA) program and 2 additional HUD-VASH vouchers reserved for Veterans.

Another 85 of the "beds"³⁷ (36%) represent Rapid Rehousing subsidies or rental assistance to support housing. The remaining 148 beds were available for temporary housing only: 66 transitional housing beds (28% of all year-round beds) and 82 emergency shelter beds (34% of all year-round beds), all of

³⁷ Rapid Rehousing "beds" are counted in terms of the numbers of subsidies being utilized at a given time.

which are dedicated to specific sub-populations, including domestic violence survivors, youth, and persons medically vulnerable to COVID-19 mostly older adults and those with severe disabilities



AFFORDABLE HOUSING

El Dorado County has a significant shortage of affordable housing. There are not enough multi-family housing units (apartments or housing with more than one unit), which are typically more affordable for low- and very low-income households than single-family housing (units for one household). Most housing units in El Dorado County (about 92%) are two-bedrooms or more and only 6% are one-bedroom units. This leaves very few housing opportunities for individuals who need and can only afford a smaller unit. Renters in El Dorado County must earn twice the state minimum wage (or approximately \$23.38) to afford the average monthly asking rent. Thus, even residents who work full-time are often unable to afford rent and need financial assistance to prevent an eviction.

El Dorado County has a number of multi-family housing developments in Cameron Park, Diamond Springs, El Dorado, El Dorado Hills, Placerville, Shingle Springs, and South Lake Tahoe. Approximately 20-30% of the units in these developments are supported by HUD or tax credit programs and therefore accept Housing Choice Vouchers or set rents below market. None of these developments have a homeless preference and do not offer supportive services for higher-need populations. Service providers and people with lived expertise of homelessness report that the waiting lists for these developments are long and many homeless clients do not qualify because of barriers related to employment or previous history of eviction or justice system involvement. None of these developments offer supportive services that may be required for residents with higher needs.

Housing Choice Vouchers (HCVs) can be a source of long-term housing subsidies for those who are on a fixed income or do not earn enough income to afford the area median rent. The amount of support an HCV provides fluctuates depending on the person's income. However, the El Dorado County HCV waiting

list has been closed since 2016. Homeless individuals and families do not have a priority for HCVs or any other housing authority programs.

Housing Choice Voucher (HCV) program is a federal program that assists very low-income families, the elderly, and the disabled to afford decent, safe, and sanitary housing in the private market. Participants are able to choose any housing that meets the program requirements. The housing subsidy is paid directly to the landlord by the local Public Housing Authority that administers the voucher program.

Emergency Housing Voucher (EHV) is similar to the Housing Choice Voucher program but specifically serves people who are experiencing homelessness or at risk of homelessness.

CHALLENGES

MORE PERMANENT SUPPORTIVE HOUSING & RAPID REHOUSING RESOURCES NEEDED

While the El Dorado community is working to help individuals and families find permanent housing solutions with limited funds, the available supportive housing resources are insufficient to meet the need.

- The community needs more housing resources, faster. For example, while the number of people experiencing homelessness who were unsheltered at a single point in time has more than doubled from 2015 to 2019 (148 to 480 people, respectively), the number of total PSH and RRH beds actually decreased (from 160 to 112 beds) during the same timeframe.
- Many opportunities exist in El Dorado to realign resources to more effectively address homelessness by focusing on solutions rather than treating symptoms and by coordinating resources between different partners. One example is using Medi-Cal to provide supportive services for Medi-Cal eligible clients.

Permanent housing programs are most effective when they are combined with:

1. Services that address barriers to accessing and retaining housing, including flexible housing funds, landlord engagement, and housing navigation;
2. Intensive supportive services after entering housing – especially for people with extremely high needs; and
3. A low-barrier Housing First approach.

AFFORDABLE HOUSING

Many people experiencing homelessness shared that one of the main challenges with obtaining and maintaining stable housing is the various housing-related costs: applying for an apartment, security deposit, utility deposits, and first and last month's rent, as well as ongoing monthly rent. In a survey of people experiencing homelessness, the most common response to the question, "what assistance would be most helpful to you" was "helping pay rent." At the same time, 62% of community-wide survey respondents indicated they would support a new short-term rental assistance program (with or without case management).

In El Dorado County in 2019, there were over 600 people experiencing homelessness. At the same time, the County had in place less than 100 permanent housing beds – only five PSH beds and eighty-five RRH beds. There are not enough permanent housing options currently available to meet the growing need in El Dorado County.

For renters in El Dorado County, there are insufficient affordable housing units available to meet the total need, meaning that renters are needing to pay a more than 30% of their income on rent to obtain and maintain

housing. In order to meet the needs of the community, El Dorado County would need to add an estimated 3,920 affordable housing units.³⁸ Lack of affordable housing is most impactful to lowest income families with about **90% of Extremely Low-Income (ELI) renters in El Dorado County paying more than half of their income on rent.**³⁹

When the community-at-large was asked, 93% of survey respondents believe there is a shortage of affordable housing in El Dorado County for people experiencing homelessness. Seventy-six percent feel

"Someone I know has a full-time job and can't even find a ROOM to rent from a homeowner that is affordable. I, myself, had to move out of El Dorado County for a time because I simply could not find a home that was even remotely affordable."

-Community-wide survey respondent

"Even with a decent full-time county job, I cannot afford a two-bedroom apartment for myself and my daughter, the county does not pay enough for me to keep up with the increased cost of living."

-Community-wide survey respondent

"I personally deal with a senior who is simply priced out of her home. She receives \$900 a month from Social Security. After medical, she does not have enough to pay her rent. There are many people like her. She shouldn't have to locate to another county because El Dorado County shirks its responsibility and hopes that people like her will just move. She is in her 80s and has mental health issues. No one is likely to hire her."

-Lived expertise of homelessness survey respondent

³⁸ El Dorado County 2021 Affordable Housing Needs Report, California Housing Partnership.

³⁹ El Dorado County 2021 Affordable Housing Needs Report, California Housing Partnership.

that there is a **severe shortage of the existing supply of housing** for people experiencing or at-risk of homelessness.

Over 86% of community-wide survey respondents shared that lack of affordable housing is the greatest barrier to finding housing for people experiencing homelessness. Focus group participants comprised of people experiencing homelessness also agreed that more affordable housing or rental assistance was needed to help find and keep housing. Most survey respondents with lived experience said that housing was difficult to find or keep for the following reasons: more than 2 out of 3 said they can't afford the rent, more than half said there are not enough affordable apartments or houses, and more than 1 in 4 said they can't afford their utilities.

“Affordable housing inventory is a crisis. As the moratorium ends, my family along with others I've been in contact with in the community have been given notice to vacate our homes we're renting within 30-60 days...There is NOWHERE for these families to go. Even with stable median-income, landlords are only accepting 3x's monthly income to be considered. There is NO inventory, even for those households in the median local income range.”

-Community-wide survey respondent

All stakeholders recognize there is a significant affordable housing shortage. Additionally, community-wide there is support for more permanent housing in El Dorado County. More than 2 out of 3 survey respondents strongly or somewhat agreed that they support funding new permanent supportive housing (e.g., long-term housing with supportive services for people with disabling conditions) in El Dorado County.

LANDLORD ENGAGEMENT

In El Dorado County, there are significant gaps with landlord engagement. In the community-wide survey, respondents shared that barriers related to landlords create many challenges for people experiencing homelessness to gain housing stability. **Close to half of survey respondents (48%) said that landlords are unwilling to accept people with challenging histories** (e.g. poor credit or criminal histories). Other barriers identified by survey respondents include landlords unwilling to rent to people just out of homelessness (22%) and **landlords unwilling to accept subsidies or rental assistance (20%)**.

“In January after returning from a Christmas break my landlord moved a family member in, she took ALL of my belongings to the dump. My rent was paid and she kept \$1,800 deposit. I had sustained a permanent place for a year and was told to file a civil suit. I'm homeless now, going on seven months.

-Lived expertise of homelessness survey respondent

Individuals experiencing homelessness shared that not only is it hard to find an affordable apartment, but it is hard to get a landlord to rent to them. In one focus group, people shared that they felt there was discrimination when it comes to landlords renting to them. Many focus group participants shared that they had experienced racism from landlords. One person shared that they felt discriminated against as early as the apartment application process.

Landlord Engagement

Many communities – even those in high cost rental markets – are highly successful in working with landlords and property managers to identify units for people exiting homelessness. Building relationships, including understanding and addressing landlords’ concerns, is key.

Several landlord engagement strategies have proven especially effective in engaging landlords and property managers as partners in addressing homelessness:

- ✓ **Access Through Outreach:** Develop a message and ensure it reaches landlords and property managers. Get the word out about the program in landlord and business association publications and at meetings and gatherings. Engage participating landlords to tell their stories of success with the program to their peers.
- ✓ **Develop Messaging:** While there are many advantages to participating in a housing program, landlords often have anxiety and concerns about renting to people who were recently homeless. Develop materials that help explain the advantages and the approaches the program takes to ensure the landlord’s property will be respected, the client will be supported, and rent will be paid.
- ✓ **Address Barriers for Individual Tenants:** Create a portfolio for the client, including letters of support from community members who know the client or information about the client’s background and the steps they have taken. Help with criminal record expungement and credit repair. Provide opportunities for the potential tenants to meet landlords one-on-one to create a personal connection.
- ✓ **Landlord Risk Mitigation:** Ensure landlords have somebody they can call if they have concerns and explain the risk mitigation fund that provides compensation if issues arise. When a client is not a good fit for a unit, programs should move quickly to prevent the need for an eviction proceeding.
- ✓ **Build Lasting Relationships with Landlords Over Time:** Support the landlord to have a positive experience with clients and continue building the relationship between the landlord and program over time. Landlords often appreciate the ability to fill vacant units quickly without the cost of advertising and having guaranteed monthly rent.

OTHER BARRIERS

In addition to the lack of affordable units and unwilling landlords, many individuals also face barriers to housing because they do not have sufficient government issued identification or other documents to show eligibility, may have been evicted in the past, may have poor credit history, and/or lack the resources needed to cover move-in costs (security deposit, utility costs, etc.).

“I'm a responsible adult. I won't be made to feel as though I don't matter. If I had an offer to have an affordable place to live, it wouldn't come with hoops, and loops to jump through on the will of another.”

-Lived expertise of homelessness survey respondent

For those individuals who continue to try to apply for affordable apartments, it usually involves paying a fee for every application form they complete even when they may be rejected because of their history.

TRANSPORTATION AND LIFE SKILLS TRAINING

While only 28% of community-wide survey respondents identified transportation as one of the top three priority supportive services needed, people experiencing homelessness shared that the challenges they have with transportation in El Dorado County often prevent them from getting to work or keeping employment thereby contributing to ongoing homelessness.

In focus groups, people said that it was hard to get transportation services to get to and from work. They shared that it was pricey to pay for local transportation and that there were limited public options for moving around the area on evenings and weekends. They also noted that they felt discriminated against when using public transportation; that they felt looked down upon and judged, both by other passengers and by the drivers. They seek better transportation services in the area to make it easier to retain employment and stable housing.

“Where I work, I take a bus for around 30 minutes, sometimes [I'm] late to work, I would ask the government to look for better transportation services.”

-Lived expertise of homelessness focus group participant

“People who live there do not have internet access and the bus does NOT go out there. We also have a lot of men with children that are experiencing homelessness.”

-Community-wide survey respondent

Community-wide, life skills training was also identified as one of the top supportive services needed to help clients regain stable housing and self-sufficiency.

CONNECTING PEOPLE TO TEMPORARY HOUSING-FOCUSED SERVICES

While housing is the solution to homelessness, trained, adequately staffed, and coordinated street outreach as well as low-barrier housing-focused emergency shelters are often the crucial first step in

building a relationship and trust with individuals experiencing homelessness as they can serve as a foundation for the future work of helping transition into stable housing.

Street and Encampment Outreach Teams should meet people where they are to provide connections to services. Many people with extensive histories of homelessness are disconnected from the network of services that could help them return to housing. They often have deep-seated trauma and negative experiences with the safety net system that may make them reluctant to engage with providers.

When outreach workers go to where people are living, over time they can build trust, better understand the circumstances that people are facing, and offer advice and support to help people move to more supportive environments. Outreach specialists use proven engagement techniques, such as Trauma-Informed Care, Critical Time Intervention, and Motivational Interviewing, to build relationships of trust and help people connect to services and support they need to find and keep housing. Outreach is more successful when the team includes workers from various disciplines – including medical and behavioral health staff, case workers, Coordinated Entry, and housing specialists – all working together to support and build relationships with unsheltered individuals.

Housing-focused crisis shelters (“emergency shelters”) or navigation centers are an important part of a community’s response to homelessness. While they help people stay safe from the dangers of living outside, they are also a valuable link to permanent housing, especially for people who have been homeless for an extended period and might be reluctant to engage in services.

The most effective shelters are low barrier and “housing-focused,” meaning that they accept people regardless of their circumstances and tailor their services to support the household with the goal of exiting to permanent housing. These programs have few or no pre-conditions for admittance (e.g., they do not require sobriety, identification, a certain income level, etc.). They remove barriers to entry by allowing some flexibility in their rules without compromising safety (e.g., they may be open 24/7, allow partners and pets, and offer storage for personal belongings). These programs work individually with each client to assess their barriers to housing and achieve housing stability. The programs typically do not require participation in services as a condition of stay, but instead work cooperatively with the household to create an action plan to help move them into housing at the pace that is determined by the client’s needs and circumstances.

CURRENT SYSTEM

STREET AND ENCAMPMENT OUTREACH

El Dorado County CoC has a system of providers dedicated to addressing homelessness. While resources are extremely limited and there is no year-round low-barrier shelter for the general population in the region, several programs help connect households experiencing homelessness to housing and other resources as quickly as possible. However, the existing programs can only meet a small portion of the need that exists in the county. Multi-disciplinary street outreach teams are an effective way to bring services to unsheltered populations and connect them to resources and housing from the street.

Currently, staff from the Front Door Coordinated Entry System, Law Enforcement, including from the El Dorado County Sheriff's Department (EDSO) & both local Police Departments, El Dorado County, and both local hospitals all have various outreach components. Additionally, some outreach is being done by smaller faith-based and community-based nonprofit organizations assisted by community volunteers. The EDSO has a specially trained Homeless Outreach Team that specifically focuses on homeless outreach in the unincorporated areas of the County. The South Lake Tahoe Police Department collaborated with South Tahoe Fire and Rescue, Barton Health, Cal-Tahoe JPA Ambulance, Tahoe Coalition for the Homeless, El Dorado County Behavioral Health Services, Clean Tahoe, Lake Tahoe Unified School District, Tahoe Youth and Family Services, and the Tahoe Transportation District to form an outreach program called the South Tahoe Area Collaborative Services (STACS). STACS employs a holistic and collaborative approach seeking to address the mental and physical health, substance use, and housing needs of those experiencing unsheltered homelessness as well as connections to a variety of other supportive services and mainstream benefits.

During the COVID-19 pandemic, outreach efforts were significantly increased to help reach individuals living in encampments to provide health information and sanitation supplies as well as to identify those eligible for Project Roomkey, the non-congregate shelters for individuals most vulnerable to COVID. Later outreach efforts offered information and vaccination options. Some of the COVID-specific outreach efforts have been reduced or suspended.

EMERGENCY SHELTERS AND WARMING CENTERS

Currently, there are no year-round low-barrier emergency shelter beds in El Dorado County for individuals who do not belong to a specific subpopulation. There are seasonal and population-specific shelter beds, including shelter for domestic violence survivors, unaccompanied youth, and families with children. El Dorado County Health and Human Services: CalWORKs Housing Assistance also provides 10 emergency housing assistance beds for families with children who qualify for CalWORKs. However, if you do not fit into one of those categories, then there are no shelter options for you. This is particularly remarkable in California. Only two Continuums of Care and 4 Counties in California have no general shelter available year-round. It should be noted that due to the COVID-19 pandemic, many of the population specific shelter providers had to close their doors or significantly reduce their bed capacity to comply with health guidelines and adjust to staffing shortages.

CHALLENGES

MULTI-DISCIPLINARY STREET OUTREACH

Survey respondents with lived experience of homelessness stated that it was difficult to find services or connect to resources because they did not know where to seek help or because service providers were at capacity and were not able to accept additional clients. Many expressed frustrations because it took a long time to find the services they needed. They shared that more street outreach was necessary to help

people learn about and access services. Once connected to services however, people with lived experience reported that services were excellent or very good.

LOW-BARRIER, HOUSING-FOCUSED EMERGENCY SHELTER/NAVIGATION CENTER

Across the board, stakeholders identified **emergency shelter as an immediate and dire need in El Dorado County**. Nearly 80% (approximately 480 individuals) of El Dorado homeless residents are unsheltered living in conditions not meant for human habitation. El Dorado County has approximately 125 total emergency shelter beds, which are reserved for special populations (e.g., domestic violence survivors, youth, families, people at risk or experiencing COVID-19), and offers some seasonal shelter beds.

People with lived experience of homelessness reported that some existing shelter programs impose restrictions that would make it impossible for them to utilize shelter beds, such as service requirements, sobriety, and prohibitions against rooming with pets or partners. As most of the homeless individuals in El Dorado County are adults without children (508 out of 613 in 2019), a general population shelter facility is needed to shelter those who do not fit into specific sub-population groups.

Stakeholders also overwhelmingly expressed the need for a service-rich, housing-focused year-round emergency shelter or navigation center where homeless individuals can connect to services and get help with finding and securing housing. A majority of respondents felt that the main barrier to creating a shelter program was the resistance from neighbors, elected officials and/or city/county governments.

“The resources are very limited, also getting the few resources available to homeless clients is difficult. Many times, it is hard for those experiencing homelessness to make it into an office or have access to a phone. There needs to be more services that are mobile for the clients.”

-Community-wide survey participant

“I think it’s inhumane that we have an animal shelter and not a human shelter, especially as we live in pretty extreme weather conditions.”

-Community-wide survey respondent

“We do NOT have a shelter or SUD's treatment facility for them. A family shelter would serve our community better than just a women & children shelter.”

-Community-wide survey respondent

Low-Barrier, Housing Focused Shelter/Navigation Centers

They help people connect long-term solutions to homelessness and address the barriers that keep them from becoming housed. The goal is to help people exit homelessness as rapidly as possible. Once housed, people can work on the underlying challenges that undermine stability. They typically offer:

- ✓ Admissions policies that screen-in (not screen out) households, and welcome pets, partners, and possessions.
- ✓ Minimal rules and restrictions that focus on safety and ability for people to come and go, with 24-hour operations. Rule violations that are addressed through case management and behavior modification, rather than termination of assistance.
- ✓ Client-centered services tailored to support a household's ability to exit homelessness (e.g., job training, benefits enrollment), including voluntary, intensive case management geared toward helping clients obtain and maintain permanent housing as quickly as possible through a housing action plan.
- ✓ Staff with cultural competencies who treat residents with respect and dignity and caseloads that are kept small enough for staff to spend adequate time with each client.
- ✓ Co-location of benefits eligibility workers, health care, Department of Public Health, and other services.

These are also sometimes paired with **encampment resolution programs**. These strategies leverage outreach teams to target encampments that are prioritized for resolution based on factors such as size/population of encampment, safety, health concerns, and fire risk. Typically, the team begins with an encampment census and then provides intensive engagement for encampment residents that offers each individual with a shelter bed, residential treatment, or other safe housing, and provides transportation as needed. The process can often take place over the course of three or more weeks, to ensure as many people as possible exit unsheltered homelessness before the encampment is resolved.

When implemented effectively, low-barrier, housing-focused shelters can:

- ✓ Reduce rates of unsheltered homelessness, including engagement of vulnerable or difficult-to-access populations who have not previously engaged.
- ✓ Reduce cost burdens of homelessness on emergency and first responder service systems, including jails, hospitals, ambulances, ERs, and fire response by reducing encampments and street homelessness, and supporting housing exits for high utilizers of public services.
- ✓ Increase rates of successful exits from homelessness to permanent housing, while reducing overall length of time homeless by building trusting relationships and targeting case management and other service provision on actionable housing plans.
- ✓ Ensure shelters are used as temporary stops on the way to housing.

COMPREHENSIVE SUPPORTIVE SERVICES

Nonprofits, community groups, and county agencies provide a variety of services that can help people to exit homelessness and stay housed for the long-term. Programs such as mental health treatment, employment and job training, health care, substance use recovery, and transportation can meaningfully help people attain greater stability.

Case management is a crucial supportive service for people experiencing, exiting, and at risk of homelessness because they help assess the individual needs and make the connection to the right services. For people who are currently homeless, housing-focused case management is a best practice that focuses on the specific challenges and barriers preventing people from regaining stable housing. While people experiencing homelessness often have complex needs, these are generally more effectively addressed after they are housed.

CURRENT SYSTEM

Many adults experiencing homelessness in El Dorado have a disability or significant impairment, including chronic physical impairments, mental illness, substance use disorder, or combinations of multiple conditions. While many were disabled prior to losing their housing, many others acquired their disability resulting from living on the streets or being without stable housing – an experience that is extremely dangerous and traumatic.

To return to housing successfully and for the long-term, people experiencing homelessness often require ongoing treatment and support – both before and after they are housed.

Currently, the individual service providers work to provide wraparound services for their client or connect them to other resources in the community. However, the availability of services is insufficient to meet the demands and one's ability to connect to services depends on the provider. There is no comprehensive referral system or sufficient resources to make sure that each client in need of services can access them.

CHALLENGES

In El Dorado County, supportive services are insufficient to meet the community's needs. More than 4 in 10 community-wide survey respondents indicated that one of the top three barriers that prevents people from accessing affordable housing is the lack of supportive services necessary for people to sustain housing (46%).

People with lived experience, service providers, and community-wide survey respondents all agree that more supportive services are needed in El Dorado County to help find and keep housing. A large majority of the community-wide survey respondents indicated that the **supportive services needed most in the region are mental health services (71%), substance use treatment (60%), case management (56%), and life skills training (47%).**

In focus groups, people with lived experience shared the desire to have services that help them meet their basic needs. They identified a wide range of services, which included: health care, mental and behavioral health, substance use treatment, job training and placement, transportation, case management, and legal services. Additionally, service providers who responded to the survey also stated that they were unable to meet the needs of the local homeless population because of limited staffing and insufficient funding.

MENTAL HEALTH AND SUBSTANCE USE SERVICES

Serious mental illness impacts at least 4 in 10 people in El Dorado’s homeless system of care. At the same time, more than 3 in 10 people in the homeless system of care have a substance use disorder.

The community of El Dorado recognizes that more is needed to support people with behavioral health issues. More than 70% of community-wide survey respondents identified that the supportive services needed most in the County are mental health services, while 60% identified the need for more substance use services in El Dorado County.

“Mental health care is not easy to access.”

-Lived expertise of homelessness focus group participant

“You have to wait 8 weeks to be screened [at a wellness health center] ... I don’t think anyone in a mental crisis should have to wait 8 weeks to get served.”

-Lived expertise of homelessness focus group participant

“[People] who struggle with mental health barriers and our homeless seniors are the individuals who most need strong, reliable wrap around services in our community. We don't have appropriate mental health services that truly care for these individuals.”

-Community-wide survey respondent

HEALTH CARE

One of the most common topics in the focus group convenings of people with lived experience of homelessness was access to health care. While the community-wide survey respondents did not prioritize medical care as a most needed supportive service, people with lived experience had much to share about the barriers that made it difficult to access health care. Some shared the challenges of accessing prescriptions without proper identification and no official mailing address, while others talked about long waiting lines and bureaucratic barriers that made it hard to access treatment. Others shared experiencing discrimination and mistreatment because of their housing status or race while seeking health care and social services.

CASE MANAGEMENT

More than half of the community-wide survey respondents identified case management as one of the top services most needed in El Dorado County.

“Each person who becomes homeless should have an advocate or case manager, who helps them access food, shelter, health care and job opportunities.”

-Community-wide survey respondent

Housing Focused Case Management

Case management is a crucial supportive service for people experiencing, exiting, and at risk of homelessness. For people who are currently homeless, Housing Focused Case Management is a best practice that focuses on the specific challenges and barriers keeping the family or individual from regaining housing. While people experiencing homelessness often have complex needs, these are generally more effectively addressed after they are housed.

Clients and case managers work together to develop and implement a dynamic “Housing Stability Plan” that is revised and refined over time. The process includes:

- ✓ **Assessing Barriers to Housing** – What are the specific barriers preventing this household from getting into permanent housing *right now*? What strengths and resources does the client have? Strengths can include, for example, a family or faith network, work experience, a powerful story, strong survival skills, etc.
- ✓ **Goal Setting & Action Planning** – What are the client’s housing goals and what steps will they take to achieve those goals? Using client-centered approaches that emphasize client choice, the case manager and client work together to develop a plan. The plan defines the role of the client and the role of the case manager, and the bite-sized steps each will take between frequent meetings.
- ✓ **Support Long-Term Housing Stability** – Housing-focused case management continues after the client has entered housing, to ensure they remain for the long-term. Case managers assist during move in, for example by helping the client to meet new neighbors. Some households need extensive support to address the underlying causes of their homelessness and attain stability over time, including, for example:
 - Treatment to address physical, mental or behavioral (e.g., substance use) issues
 - Job training and workforce development
 - Tenant education and support to ensure lease compliance
- ✓ **Best Practice Techniques** such as Motivational Interviewing and Trauma Informed Care are key to client engagement and participation in voluntary services.

HOMELESSNESS PREVENTION

Homelessness prevention services can be a very cost-effective intervention to help a family in crisis regain housing stability instead of entering homelessness. Often, an individual or family may need a one-time rental or utility payment, a short-term subsidy or help problem-solving to avoid homelessness.

Additionally, stronger partnerships between homeless service providers and other systems that may discharge clients into homelessness, such as hospitals, foster care system, criminal legal system, are needed to prevent homelessness for those exiting these institutions.

CURRENT SYSTEM

While a handful of organizations offer homelessness prevention services, sometimes coupled with funding, there are no consistent prevention and diversion strategies or protocols across all homeless service providers. Implementing uniform prevention and diversion strategies as well as centralizing diversion and prevention funding at the system entry points would go a long way in reducing the number of people who enter homelessness every year.

“There needs to be more of an emphasis on individuals who are transitioning from being in custody to being in the community if we want them to be successful. Probation in Placerville used to offer the Community Corrections program and having a similar offering in South Lake Tahoe is very needed.”

-Community-wide survey respondent

“I ... see many previously incarcerated persons from jail or prison not being able to secure housing.”

-Community-wide survey respondent

CHALLENGES

There is a clear gap in the prevention and diversion system in El Dorado County, as evidenced by the increasing number of individuals and families entering homelessness for the first time.

Across the set of tools used to gather stakeholder feedback – surveys, interviews, focus groups, and data analysis – there was strong consensus that **preventing homelessness** was an important goal for El Dorado County. The HMIS data also suggests that there is a need for stronger homelessness prevention services in El Dorado County.

Ninety-one percent of community-wide survey respondents strongly or somewhat agreed with the statement “I think many people in my community could be just one or two unforeseen circumstances away from being homeless.” In 2020, the CoC’s System Performance Measures (SPMs) showed that **71% (252 out of 357 people in HMIS), or 7 out of 10 people were experiencing homelessness for the first time.**⁴⁰ The percentage of first-time homeless has been consistently high in El Dorado County: 81% in 2015, 83% in 2017, 68% in 2019.

Additionally, among the population of homeless persons who had exited the homeless system of care in 2020, 28% were found to have returned to homelessness within six months and a full 38% had returned to homeless within 24 months of exit.⁴¹ This data indicates that an investment in prevention would do a great deal for El Dorado County.

Finally, there currently is no cohesive system for connecting those exiting institutions to services and housing options.

⁴⁰ El Dorado County CoC, CA-525, System Performance Measures (SPMs), SPM 3 and SPM 5. See HUD Table: <https://www.hudexchange.info/resource/5691/system-performance-measures-data-since-fy-2015/>

⁴¹ El Dorado County System Performance Measures (SPMs), HUD, 2020.

STRATEGIC PLAN

ROADMAP: GOALS, STRATEGIES, AND ACTION STEPS

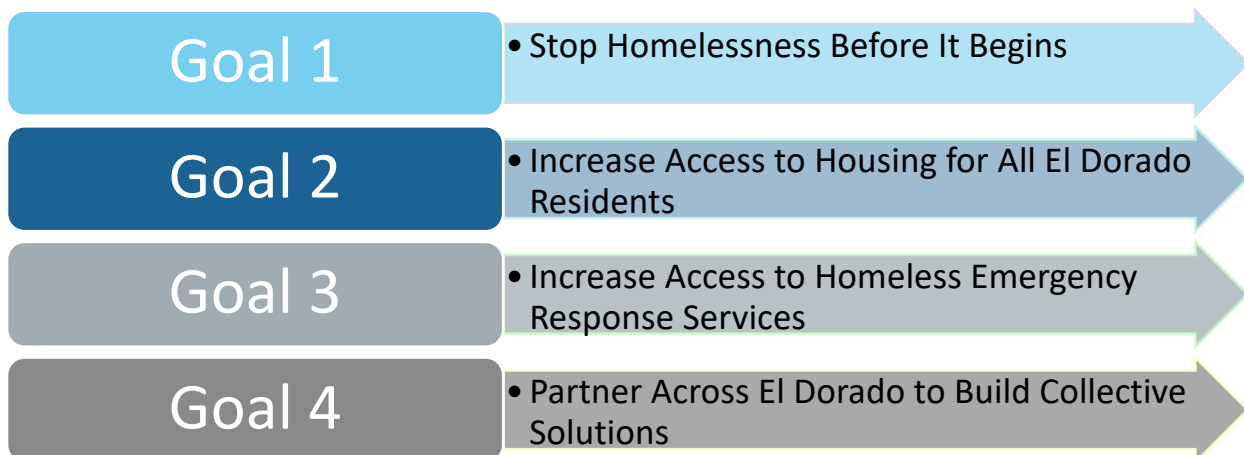
The following section is intended to provide a roadmap to guide current and future planning by the El Dorado region in its efforts to prevent and end homelessness.

Together the four overarching **Goals** address the key challenges and needs identified in the previous section.

Each goal has beneath it a set of **Strategies** to enable the community to achieve the goal. Under each strategy, the roadmap outlines a series of **Action Steps** that the community can undertake to move the strategy forward.

After each set of Strategies, there is a set of example **Metrics** that include a set of short-term (6 months to 1 year), medium-term (1 to 3 years) and longer-term (3 to 5 years) Metrics for each goal. The Metrics, while not exhaustive or prioritized, identify a number of specific and quantifiable ways the community can measure whether and when the goals have been met. Additional work on metrics will be done by the community as implementation begins.

After the Strategies, [Appendix B](#) is a Sample **Implementation Plan**, which provides more detail and specificity for implementing the strategies, including prioritization of the Action Steps. The success of this plan ultimately depends on the community's ability and willingness to collectively prioritize and coordinate in implementing the Action Steps of the plan.



GOAL 1: STOP HOMELESSNESS BEFORE IT BEGINS

STRATEGY 1.1: BOLSTER THE EMERGENCY RESPONSE SYSTEM

Action Steps:

<p>1.1.a</p>	<p>Coordinate with Emergency Response System providers</p> <ul style="list-style-type: none"> i. Identify which Emergency Response System (ERS) providers can be good partners in preventing and responding to homelessness ii. Train identified first responders on housing and homeless interventions to make sure they are aware of homelessness prevention services and Coordinated Entry System (CES) and know how to refer clients iii. Conduct ongoing meetings and trainings with ERS providers to maintain competency and consistency in collaborative relationships
<p>1.1.b</p>	<p>Coordinate with 2-1-1 service to help connect people to CES and homelessness prevention and diversion services, including rental assistance, eviction defense advocates, supportive services, and housing locator services.</p> <ul style="list-style-type: none"> i. Update the 2-1-1 Resource Guide with most current information about available prevention and housing-related services, including resources for subpopulations (transition age youth, people living with physical and mental disabilities, domestic violence survivors, etc.) ii. Create and implement plan for ongoing updates to the 2-1-1 Resource Guide and ensure an updated Resource Guide is available through a variety of mediums. iii. Promote utilizing 2-1-1 through the telephone, web, social media, and mobile applications. iv. Implement ongoing cross-training and collaboration between 2-1-1 and homeless services providers.

STRATEGY 1.2: INCREASE PREVENTION AND DIVERSION SERVICES IN EL DORADO

Action Steps:

1.2.a	Create and implement coordinated, system-wide prevention and diversion screening and problem-solving protocols to help people at high risk of homelessness remain housed.
1.2.b	<p>Ongoing education and training:</p> <ul style="list-style-type: none"> i. Train all providers on prevention and diversion screening and problem-solving protocols, problem solving techniques, motivational interviewing and include staff from all access and outreach teams in training opportunities. ii. Educate clients, providers and landlords on tenants’ rights, fair housing, and reasonable accommodations. Connect clients to legal services for eviction defense and mediation when necessary. If adequate services are not available, develop or fund additional legal services.
1.2.c	<p>Identify and allocate flexible funding and other resources for prevention and diversion and eviction prevention and designate agencies to disburse those funds to eligible clients.</p> <ul style="list-style-type: none"> i. Assess and inventory all available prevention resources countywide and strengthen coordination across partners to maximize efficient use of funding. ii. Make flexible funding and other prevention resources available for both one-time and short-term, recurring financial assistance to solve acute housing crises and emergencies to support homeless and at risk- households.
1.2.d	<p>Identify subpopulations in need of prevention services and align resources accordingly:</p> <ul style="list-style-type: none"> i. Analyze HMIS data for patterns among first-time homeless families and individuals and create a plan to address the most common reasons for first-time homelessness ii. Develop a process to work with the El Dorado County Office of Education McKinney-Vento Program Liaison to ensure early identification of families facing housing instability. iii. Collaborate with agencies and partners (e.g., local colleges, child welfare agencies) to identify transition age youth, including youth aging out of foster care who are experiencing or at-risk of homelessness. iv. Survey the housing needs of senior residents aging in place to ensure physical and mental well-being and housing stability. Consider funding options for those identified at risk of losing their housing where a small monthly subsidy would eliminate the risk.

STRATEGY 1.3: IMPROVE COORDINATION TO ENSURE INDIVIDUALS ARE NOT DISCHARGED INTO HOMELESSNESS

Action Steps:

<p>1.3.a</p>	<p>Coordinate discharge planning with the following systems: the criminal legal system, (including juvenile legal system), child welfare (including foster care), and hospital systems</p> <ul style="list-style-type: none"> i. Examine the processes that currently exist between the CES and the systems discharging individuals in need of housing and services. ii. Work with the HMIS Lead to ensure that HMIS can track discharge referrals. iii. Create new discharge protocols based on the collective work with the discharging systems. iv. Train and collaborate with the staff of discharging institutions and Front Door CES on the new discharge protocols. v. Meet regularly with discharging institutions and Front Door CES to evaluate processes and successes or challenges. vi. Conduct ongoing evaluations of the effectiveness of the system.
<p>1.3.b</p>	<p>Create additional resources and housing for people discharged from institutions:</p> <ul style="list-style-type: none"> i. Evaluate what resources exist for the populations served by the discharging institutions, including case management, educational resources, job training, life skills, housing, subsidies, etc. ii. Ensure that providers are aware of these resources; regularly update relevant resource guides. iii. Identify gaps in housing and resources for those discharged from institutions. iv. Identify and collectively help secure funding to fill the gaps in resources, including: <ul style="list-style-type: none"> a. Work with hospitals to increase medical respite beds for discharging and medically fragile individuals. b. Coordinate with the local Medi-Cal managed care plan/s to utilize resources through the new Medi-Cal CalAIM program that leverages Medi-Cal resources to address housing instability. c. Explore bridge housing approaches for youth aging out of the foster care system in multi-bedroom home shared housing and/or host homes approach as well as ensuring adequate crisis shelter opportunities exist for youth. d. Develop transitional housing opportunities to help stabilize households, including connections to employment and mainstream benefits, for individuals who are involved in the criminal legal system who are re-entering the community.

	e. Make connections to permanent housing opportunities with associated supportive services for the relevant populations.
1.3.c	Work collectively to ensure that programs can provide robust case management for discharged populations from discharge to housing placement and beyond until housing stability is achieved.

STRATEGY 1.4: STRENGTHEN THE SUPPORT SYSTEM AVAILABLE TO HELP RESIDENTS MAINTAIN HOUSING

Action Steps:

1.4.a	<p>Expand access to income, including employment and benefits, for people experiencing homelessness and recently homeless households.</p> <ul style="list-style-type: none"> i. Ensure all eligible program participants are enrolled in the public benefits for which they are eligible. ii. Expedite access to clinicians who can provide disability documentation, including by ensuring clinicians are trained to work with people experiencing homelessness. iii. Develop a program or partner with existing programs to help households in accessing entry level jobs, including training and opportunities for growth. iv. Create partnerships with private employers to create pathways to stable jobs for people exiting homelessness.
1.4.b	Create a multi-disciplinary team to provide intensive support and tailored interventions for at-risk households to prevent returns to homelessness.
1.4.c	Increase the availability and amount of flexible funds that support homeless and at-risk households through both one-time and short-term, recurring financial assistance to solve acute housing crises and emergencies.
1.4.d	Strengthen partnerships and coordination with mainstream agencies such as legal aid, credit repair services, public benefits advocacy and appeals (MediCal, CalFresh, CalWORKS, SSI/SSDI), workforce development, etc.

GOAL 1 EXAMPLE METRICS:

Short-Term 6 months to 1 year	Medium-Term 1 to 3 years	Longer-Term 3 to 5 years
<p>Metric 1.1: At least 2 Emergency Response System (ERS) partners have been identified and at least one training has occurred for local first responders.</p>	<p>Metric 1.2: A uniform prevention and diversion screening and problem-solving protocol is developed and is in use across the regions' agencies.</p> <p>Metric 1.3: Discharge planning collaboration has started with at least one cross-sector agency (e.g., criminal legal system, child welfare, and/or hospital systems).</p>	<p>Metric 1.4: System Performance Measures indicate that the CoC has decreased both first-time homelessness and returns to homelessness.</p>

GOAL 2: INCREASE ACCESS TO HOUSING FOR ALL EL DORADO RESIDENTS

STRATEGY 2.1: ASSESS AND USE AVAILABLE PUBLIC AND PRIVATE LAND FOR PERMANENT HOUSING

Action Steps:

<p>2.1.a</p>	<p>Establish a five-year County-wide Housing Development Pipeline that identifies an achievable path to establish new housing for unsheltered populations and other underserved populations.</p>
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	<ul style="list-style-type: none"> i. Establish a Housing Committee including developers, the Public Housing Authority, City and County Staff, and experienced service providers to develop and facilitate implementation of a County-wide Housing Development Pipeline. ii. Secure the commitment of each municipality to support development of a pro-rata portion of dedicated Permanent Supportive Housing (PSH) inventory by 2027. iii. Develop systems to increase local capacity to respond quickly to development opportunities and expand capital funding and resources available to meet the development goals. iv. Conduct and maintain an inventory of unused, underutilized, and available properties to determine what may be available for additional affordable housing in El Dorado. v. Identify the most suitable sites for rehabilitation or development of affordable permanent housing in El Dorado. vi. Assess housing sites' proximity to amenities to support affordable housing (e.g., transit, food, services). vii. Initiate planning to aggressively expedite development and offer incentives specifically for PSH.
2.1.b	Rehabilitate vacant or underutilized properties to create PSH.
2.1.c	<p>Evaluate the feasibility and next steps for immediate development of multi-family housing units, and in-law units, as well as non-traditional options such as repurposed motels/hotels and/or Accessory Dwelling Units (ADUs).</p> <ul style="list-style-type: none"> i. Ensure local zoning codes are reflective of changes in state laws and support development of "accessory" and "junior accessory" dwelling units and conduct a public outreach campaign to encourage homeowners to take advantage of these opportunities.
2.1.d	Consider the development of single-room occupancy (SROs) buildings , which provide non-congregate, small furnished single rooms within multi-tenant buildings for residents with low- or minimal income who may be transitioning out of long-term homelessness.
2.1.e	Explore master lease, lease to own, or create agreements with existing facilities in the community to create PSH.

STRATEGY 2.2: PROTECT AND EXPAND AFFORDABLE HOUSING THROUGH LOCAL POLICY

Action Steps:

2.2.a	<p>Evaluate current City and County policies to identify any rules or programs in place that inhibit development of affordable housing. Identify changes that would reverse the negative impacts of those policies.</p> <ul style="list-style-type: none"> i. As part of the local Housing Elements, identify and implement opportunities to streamline approvals for housing and service locations for formally and currently homeless households (e.g., year-round overnight shelter, community cabins, safe parking, and permanent supportive housing). ii. Revise City and/or County policies to expand and streamline, by-right, a wide variety of resources, services, and housing for people experiencing homelessness.
2.2.b	<p>Adopt City and County policies that require set asides for new development, dedicating a certain proportion or number of units within each new development for very low-income (VLI) and extremely low-income (ELI) households.</p>
2.2.c	<p>Develop “Moving On” policies within the Public Housing Authority that prioritize Housing Choice Vouchers for people in permanent supportive housing (PSH) to provide an affordable housing option and short-term services and resources that support program participants during and shortly after their transition to a greater level of independence. The Moving On program helps to keep limited supportive housing available for households who need intensive services.</p>
2.2.d	<p>Create local policies that incentivize absent landlords to sell or develop properties (e.g., residential vacancy tax or other similar efforts, including county-level approaches).</p>

STRATEGY 2.3 INCREASE ACCESS TO HOUSING THROUGH A COORDINATED LANDLORD ENGAGEMENT CAMPAIGN

Action Steps:

2.3.a	<p>Establish a county-wide collective landlord engagement strategy that includes year-round staffing support to help providers educate the public, recruit landlords, and engage in outreach to property managers and landlords with collective, consistent messaging.</p> <ul style="list-style-type: none"> i. Develop an outreach and communications campaign to educate landlords in understanding the benefits of partnership and risk mitigation approaches.
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	<ul style="list-style-type: none"> ii. Ensure all case managers are trained on landlord relationship development and retention, expand housing specialist positions, and train all agencies and staff on landlord engagement talking points. iii. Additional strategies may include recognition programs for repeat or successful landlords, landlord legal resources/classes, and presentations by participating landlords who have had positive experiences serving formerly homeless residents. iv. Partner with landlords who are already successfully working with local homeless housing agencies to create a mentorship program for new landlord partners.
2.3.b	<p>Establish a landlord risk mitigation and/or incentive fund that provides compensation to landlords to mitigate any damage caused by tenants and to incentivize renting to formerly homeless.</p> <ul style="list-style-type: none"> i. Engage private partners, such as foundations, service agencies and faith community, to contribute resources to the Landlord Mitigation and Flexible Housing Funds. ii. Bringing greater awareness of programs, highlighting successful efforts with landlords and sharing information about the cost-savings to the community and positive impact for people who exited homelessness. iii. Create financial incentives for landlords renting to voucher holders, including bonuses for new and/or returning landlords. iv. Create uniform landlord engagement and support protocols to ensure all landlords receive the same level of service regardless of where they connect to the system. v. Strengthen landlord engagement after households have exited homelessness to maintain positive long-term landlord relationships. vi. Evaluate the landlord support programs on an ongoing basis and gather landlord feedback on their experience to make improvements to the programs.
2.3.c	<p>Address barriers that make it difficult for tenants to obtain affordable housing by creating client portfolios that include letters of support from community members who know the client, information about the client’s background and the steps they have taken to improve their housing stability.</p> <ul style="list-style-type: none"> i. Provide people help with criminal record expungement, credit repair, and eviction expungement, if needed. ii. Provide opportunities for potential tenants to meet landlords one-on-one to create personal connections. iii. Use reasonable accommodation requests and other fair housing laws as a tool to help potential landlords understand the needs of the clients and open housing opportunities

STRATEGY 2.4: EXPAND THE FLEXIBILITY AND AVAILABILITY OF RESOURCES TO SUBSIDIZE AND OPERATE SUPPORTIVE HOUSING

Action Steps:

2.4.a	<p>Engage all stakeholders, including jurisdictions and the CoC, in maximizing opportunities for federal and state funding available for supportive housing through new and existing programs.</p> <ul style="list-style-type: none"> i. Evaluate uses of existing and new federal/state funding streams that could be invested in long term solutions to reduce the impacts of homelessness. ii. Ensure that the CoC, jurisdictions and agencies stay aware of new opportunities, communicate and plan to apply for funding. iii. Make sure local resources are available to match federal and state funding opportunities to leverage available resources. iv. Strengthen competitiveness for federal and state funding opportunities, including through the adoption of the strategic plan, by ensuring programs are implementing evidenced-based practices, and by tracking outcomes.
2.4.b	<p>Achieve mutual program goals and outcomes through the direction of mainstream supportive service resources toward ending homelessness, including Medi-Cal and Mental Health Services Act (MHSA) funding.</p> <ul style="list-style-type: none"> i. Conduct an analysis of funding streams that can be used for housing resources and supportive services to identify opportunities to enhance alignment – e.g., ensuring Medi-Cal is optimized (including new opportunities under CalAIM).
2.4.c	<p>Maximize the availability and use of housing vouchers and other housing subsidies that can be used to address homelessness to increase total resources available for supportive housing, including adopting a homeless preference for Public Housing Authority vouchers.</p>

STRATEGY 2.5: CREATE FLEXIBLE RESOURCES TO EXPEDITE A HOUSEHOLD’S ABILITY TO ATTAIN PERMANENT HOUSING

Action Steps:

2.5.a	<p>Develop a Flexible Housing Fund program to provide financial support to individuals and families with moving costs, addresses the limitations of housing subsidies to respond to rapidly rising housing costs, and tackle other financial barriers that can prevent people from successfully exiting homelessness.</p>
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2.5.b	Strengthen access to resources to support households with expungement (eviction and/or criminal records), credit assistance, and document readiness to ensure they can use available housing subsidies as quickly as possible.
2.5.c	Develop a shared housing program that can increase the housing available to single adults through 2- and 3-bedroom homes for individuals exiting homelessness by coordinating across programs.
2.5.d	Expand rental assistance programs to cover application fees and assistance with security deposits and move-in costs to help ensure vouchers are utilized equitably

GOAL 2 EXAMPLE METRICS

Short-Term 6 months to 1 year	Medium-Term 1 to 3 years	Longer-Term 3 to 5 years
<p>Metric 2.1: The Public Housing Authority has adopted a “Moving on” policy that prioritizes Housing Choice Vouchers for people transitioning from Permanent Supportive Housing (PSH) no later than December 31, 2022.</p> <p>Metric 2.3: A landlord engagement campaign is in place and providing support to landlords who rent to people transitioning from homelessness to permanent housing.</p> <p>Metric 2.2: Connection to the local CalAIM managed care plan has been initiated and planning how to maximize and leverage</p>	<p>Metric 2.4: A Flexible Housing Fund program is in place and distributing resources to eligible households.</p>	<p>Metric 2.5: At least 50 new PSH units exist throughout the county by January 2027.</p>

Medi-Cal resources has begun no later than July 31, 2022.		
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GOAL 3: INCREASE ACCESS TO HOMELESS EMERGENCY RESPONSE SERVICES

STRATEGY 3.1: EXPAND ACCESS TO SAFE, LOW-BARRIER TEMPORARY HOUSING OPTIONS COUNTYWIDE

Action Steps:

3.1.a	<p>Establish permanent year-round, low-barrier housing-focused navigation center(s) with countywide coverage and adequate capacity that use evidence-based practices to support households exiting homelessness, minimize barriers to prevent people from participating, and are open around the clock to provide resources, services, and connections to housing.</p> <ul style="list-style-type: none"> i. Provides housing-focused case management and supportive services, including connection to mainstream benefits. ii. Open 24 hours a day 7 days a week, with flexible entry and exit and inclusive policies around partners, pets, and storage of belongings.
3.1.b	<p>Design navigation center(s) with capacity to expand as needed to utilize extra capacity as a Warming and Cooling Center or Establish Warming/Cooling Center(s) for regular use to provide shelter and supportive services during inclement weather.</p> <ul style="list-style-type: none"> i. Identify site(s) and funding for use at least annually during the winter for Warming Center and during other inclement weather.
3.1.c	<p>Create safe parking zones/sites for individuals and families experiencing vehicular homelessness where they can park safely and connect to additional services, including medical help, housing navigation, benefits, employment, hygiene needs, etc.</p> <ul style="list-style-type: none"> i. Identify a site or sites for a safe parking program (i.e., faith-based, municipal, or commercial parking lot, campground, vacant lot, etc.). ii. Identify potential service partners and funding.

	<ul style="list-style-type: none"> iii. Begin with pilot program to demonstrate need and viability of program if needed with possible focus on subpopulation(s) (i.e., families or single adults).
3.1.d	<p>Evaluate approaches for increasing crisis shelter options for special populations.</p> <ul style="list-style-type: none"> i. Explore bridge housing approaches for youth, families, Veterans, and seniors based in a multi-bedroom home shared housing model. ii. Assess the need for additional emergency shelter options, including non-congregate shelter, for specific populations such as youth, individuals and families fleeing domestic violence, and other special sub-populations, such as persons with severe mental disabilities. iii. Prioritize new shelter development for underserved populations (i.e., individuals with long history of homelessness, medically fragile, etc.). iv. Assess the need for, and feasibility of, ongoing non-congregate shelter facilities, in consideration of the COVID-19 pandemic and other learned benefits of non-congregate spaces.
3.1.e	<p>Assess whether host homes program could work for specific populations to create new housing opportunities in El Dorado.</p> <ul style="list-style-type: none"> i. Assess viability of creating Pilot Program in El Dorado for adults based on youth program and successful programs in other communities. ii. Create collaboration to develop and implement Pilot Program.
3.1.f	<p>Incorporate tiny homes or pallet shelters as temporary housing solutions as a part of an overall continuum of housing solutions, which include permanent low-barrier housing-focused emergency shelters/navigation centers and adequate transitional housing.</p> <ul style="list-style-type: none"> i. Operated by a qualified and experienced operator. ii. Requires restrooms- including toilets and options for bathing, handwashing stations, and other sanitation services, garbage disposal, storage, co-location of qualified, trained service provider staff, and security. iii. Includes voluntary case management and supportive services onsite, including housing navigation, life skills training, mental health and substance use counseling and connection to mainstream benefits and employment services. <p><i>Must be temporary, low-barrier and housing focused.</i></p>
3.1.g	<p>Improve shelter system and day services.</p>

	<ul style="list-style-type: none"> i. Integrate behavioral health services (e.g., mental health, alcohol, and substance use services) into navigation center and major crisis shelters, provide more wrap around services than are currently readily accessible. ii. Ensure access to all shelter is full-time (24/7), year-round, and housing-focused (e.g., provides supportive services and case management to help people transition to permanent housing). iii. As contracts permit, require all existing and new temporary housing providers to commit to being low-barrier and adhere to Housing First principles to receive funding from the CoC or jurisdictions in El Dorado. <i>Note: This may already be included as a requirement from state or federal funding sources.)</i> iv. Provide optional wrap-around services and connections to key resources at all overnight and day shelters.
3.1.h	<p>Reduce existing barriers to entry and deepen housing-focused emphasis and programming at locations where people are experiencing homelessness regularly access.</p> <ul style="list-style-type: none"> i. Enact low-barrier admission policies for all shelters that screen-in rather than screen-out potential participants who face the greatest barriers to housing. ii. Enact minimal rules and restrictions that focus on behavioral expectations to help ensure client and staff safety – few rules, not “no rules.” iii. Provide accommodations that welcome partners, pets, and possessions so that people do not face a choice of housing or separation. iv. Ensure staff trained on housing-focused approaches and housing navigation are available at crisis shelters, day centers, transit centers and libraries, and workforce development one-stop locations. v. Establish a shared community-wide understanding across all homelessness service providers of best practices for implementing housing-focused approaches, including housing-focused case planning. <p>Continue strengthening coordination with mainstream (non-homeless dedicated) resources such as legal aid, credit repair services, public benefits advocacy and appeals, workforce development and community volunteers.</p>
3.1.i	<p>Consider and address potential impacts on the surrounding community of any temporary housing, including navigation center, safe parking, or pallet shelter. Engage with the community, conduct facilitated conversations, provide examples of successful similar projects supported by data, and address concerns whenever possible.</p>

STRATEGY 3.2: EXPAND COORDINATED COUNTYWIDE STREET AND ENCAMPMENT OUTREACH

Action Steps:

3.2.a	<p>Establish a mobile multi-disciplinary program to support health and wellness and provide connections to benefits and other resources to exit homelessness.</p> <ul style="list-style-type: none"> i. Create a coordinated, county-wide street and encampment outreach team that includes staff from a mix of different disciplines, including street medicine, social work, nursing, behavioral health, and housing navigation. ii. Create a mobile outreach van program that includes medical, behavioral health, and housing navigation services and can access people experiencing homelessness outside of urban areas as well as onsite for safe parking and other new programs. iii. Explore options for obtaining and outfitting the outreach van, including existing funding or a fundraising campaign allowing partners to sponsor the van. iv. Explore approaches for publicizing the work of the van, coordinating with local community groups and service providers, and creating a schedule to ensure regional coverage.
3.2.b	<p>Enhance support of existing outreach teams</p> <ul style="list-style-type: none"> i. Ensure outreach teams offer access to housing-focused case management, public benefits, and other critical housing-focused resources. ii. Ensure street outreach staff are engaged with and participating in Coordinated Entry (CE) and the Homeless Management Information System (HMIS). iii. Implement trainings on evidence-based best practices for outreach staff, including trauma-informed care, critical time intervention, motivational interviewing, and use of technology.
3.2.c	<p>Evaluate and Improve Street and Encampment Outreach</p> <ul style="list-style-type: none"> i. Evaluate street outreach quality and outcomes regularly to ensure effectiveness and lived experience feedback. <ul style="list-style-type: none"> a. Build in feedback opportunities for people with lived experience. b. Identify ways to improve the success of street outreach as measured by the number of homeless individuals being connected to the Coordinated Entry system, exiting homelessness to permanent housing and being connected to mainstream resources. ii. Evaluate the success and desirability of larger-scale outreach events

3.2.d	<p>Expand capacity of existing outreach</p> <ul style="list-style-type: none"> i. Expand behavioral health outreach teams (e.g., mobile crisis). ii. Ensure the diversity of street outreach staff to include people with lived experience by lowering barriers to employment and recruitment.
3.2.e	<p>Develop a peer support program as part of an interdisciplinary approach that trains and uses peers with lived experience of homelessness for street outreach and system navigation.</p>

STRATEGY 3.3: EXPAND SERVICES TO SUPPORT EXITS FROM HOMELESSNESS

Action Steps:

3.3.a	<p>Hire housing navigator staff to help increase exits from homelessness by building and maintaining relationships with landlords, affordable housing providers, and other housing programs to help increase the number of units available for households exiting homelessness</p> <ul style="list-style-type: none"> i. Identify potential funding source(s) for immediate and long-term. ii. Identify host agency or jurisdiction for housing navigator/locator staff. iii. Hire qualified housing navigator with housing/real estate experience.
3.3.b	<p>Expand supportive services available to individuals and families experiencing homelessness.</p> <ul style="list-style-type: none"> i. Expand availability of ongoing regular case management for individuals seeking housing and individuals exiting to permanent housing. <ul style="list-style-type: none"> a. Invest in local funding for case management, physical health, behavioral health, and substance use services for households receiving financial assistance. ii. Help local homeless services providers build capacity by getting additional funding for staffing, staff training and the support needed to expand direct services offered to clients. <ul style="list-style-type: none"> a. Expand language accessibility of the CES, CoC providers, Outreach Teams, and the Crisis Response System to ensure that individuals whose first language is not English have access to multilingual resource materials and staff who can assist them in their preferred language. b. Evaluate and revise salaries and benefits for case managers to ensure that El Dorado providers can recruit and retain qualified staff.

3.3.c	Identify a partner to build out workforce development programming specifically for households who are unhoused (or formerly unhoused) who have secured or maintained housing with a one-time grant or ongoing rental subsidy/voucher.
3.3.d	Provide additional support to participants who exit shelters to permanent housing through proactive case management and best practice strategies, such as motivational interviewing, trauma-informed care, and housing-focused case management and planning.
3.3.e	Strengthen partnerships and coordination with mainstream agencies such as legal aid, credit repair services, public benefits advocacy and appeals (Medi-Cal, CalFresh, CalWORKS, SSI/SSDI), workforce development, etc.).
3.3.f	Expand the use of a hotline to operate 24/7 as the publicly available contact point that supports unhoused and housed residents in need of case management or behavioral health services, shelter or housing, or public works/sanitation/safety support.
3.3.g	Ensure local programs that primarily serve people experiencing homelessness can access and fully participate in the Front Door Coordinated Entry System and can enter data into the countywide HMIS.

STRATEGY 3.4: EXPAND SERVICES FOR SUBPOPULATIONS WITH SPECIAL NEEDS

Action Steps:

3.4.a	Expand access to mental and behavioral health services for the homeless population.
3.4.b	Expand support services for people with a history of criminal legal system involvement , including housing location, record expungement, and credit repair.
3.4.c	<p>Anticipate and address the growing needs of older adults experiencing homelessness in El Dorado.</p> <ul style="list-style-type: none"> i. Support better connections to clinical diagnosis and disability documentation for seniors to establish eligibility for SSI, including strengthening system of clinicians trained in working with people experiencing homelessness with complex needs. ii. Identify and build connections with existing housing resources for seniors to support older adults experiencing homelessness.

<p>3.4.d</p>	<p>Strengthen the system of care targeting youth and young adults to ensure culturally competent service delivery and engagement.</p> <ul style="list-style-type: none"> i. Conduct additional youth focus groups to identify priority needs and gaps in system accessibility for youth experiencing homelessness in El Dorado. ii. Expand partnerships with schools and colleges, the child welfare system, the juvenile justice system, and runaway and homeless youth providers to address gaps and ensure coordinated and culturally competent access to a youth-informed system of care. iii. Ensure youth access to Coordinated Entry and supportive housing resources, outreach and crisis shelter, and behavioral health and other supportive services.
<p>3.4.e</p>	<p>Evaluate, track, and implement training and program modifications to address disparities in system access and service provision for special subpopulations, including for people of color, non-English speakers, and persons identifying as LGBTQ+.</p> <ul style="list-style-type: none"> i. Assess and evaluate racial disparities in service access and provision, including in numbers receiving Coordinated Entry System assessment, matched to a housing program, entering housing, and retaining housing. ii. Provide cultural humility and implicit bias trainings and support for Coordinated Entry and direct service program staff, including outreach, emergency shelter, housing navigation, and housing program staff. iii. Add or modify Point-In-Time Count and HMIS measures to collect targeted data about special subpopulations, including persons identifying as LGBTQ+. <ul style="list-style-type: none"> a. Add or modify Point-In-Time Count and HMIS measures to collect targeted data about special subpopulations, including persons identifying as LGBTQ+. b. Enhance tracking of LGBTQ+ population experiencing homelessness by adding questions to the communitywide survey, engaging peer outreach, and leveraging peers in identifying locations for PIT. c. Ensure subpopulation fields in HMIS are tailored and being used by staff conducting intake. Train intake staff on cultural competency and ensuring equal access.
<p>3.4.f</p>	<p>Build stronger partnerships with service providers working with specific subpopulations to expand connections to mainstream resources</p> <ul style="list-style-type: none"> i. Include service providers in coordinated entry case conferencing or partners meeting ii. Consider designated service connector staff to work with specific government agencies

3.4.g	Establish a quarterly monitoring protocol, including a field in HMIS to identify households who fall into homelessness for the first time or who return to homelessness, and to track impact of interventions to help with understanding the needs of high-risk households.
3.4.h	Review data entry and data quality requirements for HMIS- participating homeless service providers to improve local understanding of the scope of chronic homelessness in El Dorado.

STRATEGY 3.5: IMPROVE TRANSPORTATION OPTIONS TO HELP PEOPLE OBTAIN AND MAINTAIN HOUSING

Action Steps:

3.5.a	<p>Develop a comprehensive transportation strategy in partnership with local transit authorities that considers the transportation needs of people experiencing homelessness.</p> <ul style="list-style-type: none"> i. Provide visible, easily accessible information about transit schedules that does not require a smart phone or access to the internet. ii. Create a program/expand existing programs that provide(s) discounted or free transit passes to people experiencing homelessness. iii. Set up and identify locations where personal belongings may be stored and where pets and service animals may be cared for while individuals access services and resources. iv. Develop a subsidized ridesharing program or create a van service for individuals experiencing homelessness or recently housed who need to access health or behavioral health appointments or other resources. <ul style="list-style-type: none"> a. Work with health care providers to create transportation to and from medical appointments.
3.5.b	Provide a feedback mechanism for people to share experiences they have had on public transportation and process to assess submissions and act based on that feedback. Individuals who must rely on public transportation should be able to feel safe and respected while riding.
3.5.c	Consider the existing limitations of public transportation in terms of time of day, days of the week, and geographic coverage as many individuals recently housed may work second and third shift jobs and may need transportation to various services across the county.

GOAL 3 EXAMPLE METRICS

<p>Short-Term 6 months to 1 year</p>	<p>Medium-Term 1 to 3 years</p>	<p>Longer-Term 3 to 5 years</p>
<p>Metric 3.1: Develop plans for navigation center(s) with regional coverage and begin implementation by Fall 2022 by leveraging additional state and federal funding.</p> <p>Metric 3.2: A low-barrier Warming Center is open and providing shelter and supportive services no later than Fall 2022.</p> <p>Metric 3.3: A safe parking pilot is in place for individuals and families no later than Fall 2022.</p> <p>Metric 3.4: Develop plans for supplemental temporary housing solutions, such as tiny homes or a Pallet Program by Fall 2022.</p>	<p>Metric 3.5: A multi-disciplinary outreach program is providing services and support to unsheltered individuals.</p> <p>Metric 3.6: At least two additional housing navigators are providing services no later than June 30, 2023.</p> <p>Metric 3.7: A comprehensive strategy has been developed and at least 2 steps have been taken to improve transportation access for people experiencing homelessness no later than December 31, 2023</p>	<p>Metric 3.8: A robust quarterly monitoring protocol is in place to track through HMIS first-time homelessness and returns to homelessness and measure impact of interventions intended to reduce both.</p>

GOAL 4: PARTNER ACROSS EL DORADO TO BUILD COLLECTIVE SOLUTIONS

STRATEGY 4.1: DEEPEN PUBLIC UNDERSTANDING OF HOMELESSNESS AND ITS SOLUTIONS

Action Steps:

4.1.a	Roll out the Strategic Plan, using the process to support community-wide engagement and alignment around a single roadmap for next steps in addressing homelessness in El Dorado.
4.1.b	<p>Establish a year-round communication strategy to educate the public about homelessness and the local homelessness response, addressing common myths and celebrating progress in Strategic Plan implementation.</p> <ul style="list-style-type: none"> i. Highlight programs and services, data-driven best practices, opportunities for community members to get involved, and examples of impact and success.
4.1.c	Create resident- and business-focused initiatives that match local employers with individuals facing housing instability. Initiatives can include training, in addition to offering employment, scholarship, mentorship, or housing opportunities.
4.1.d	Consult and partner on an ongoing basis with local faith-based organizations to leverage their strengths in building community, providing essential services, and coordinating volunteers and resources.

STRATEGY 4.2: STRENGTHEN THE HOMELESS SYSTEM RESPONSE INFRASTRUCTURE

Action Steps:

4.2.a	<p>Develop a year-round structure for Countywide Strategic Plan implementation and reporting.</p> <ul style="list-style-type: none"> i. Create a Countywide implementation body (Committee/Taskforce) to lead the development of the communication strategy, coordinate the Strategic Plan implementation process and monitor the progress of the Strategic Plan's strategies to address homelessness in El Dorado.
4.2.b	Develop an annual work plan with prioritized action steps to guide Strategic Plan implementation along with identifying key stakeholders to guide those steps.

	<ul style="list-style-type: none"> i. Establish stakeholder committees as needed to achieve strategies of focus, with a process for regular updates to the County-wide implementation body. ii. Regularly provide updates on progress made on Strategic Plan goals, strategies, and metrics, and refine action steps as needed. <p>Establish Jurisdictional Action Committees to coordinate local Strategic Plan implementation in each municipality with representatives on the County-wide Implementation body.</p>
4.2.c	Secure a funded staff position to support community wide implementation of Strategic Plan strategies to address homelessness in El Dorado, including coordination of various implementation bodies, the outreach campaign and carrying out various initiatives and action steps.

STRATEGY 4.3: PROVIDE INFORMATION AND ENGAGEMENT OPPORTUNITIES TO PEOPLE WITH LIVED EXPERTISE

Action Steps:

4.3.a	<p>Establish a Lived Experience Advisory Board, comprised of people currently experiencing homelessness or with recent lived expertise who can provide feedback to the CoC and jurisdictions and be involved in policymaking and allocations processes within the CoC.</p> <ul style="list-style-type: none"> i. Outreach documents advertising the positions have been reviewed by people with lived experience before being circulated widely. ii. At least one person with lived experience of homelessness participates in the review and selection of Lived Experience Advisory Board members. iii. Lived Experience Advisory Board members are fairly compensated for their time participating on the Board.
4.3.b	Provide meaningful opportunities for people with lived experience of homelessness to share their stories and advocate for what they need, including focus groups, surveys, invitations to speak at meetings, etc. Provide opportunities for allies to partner with persons with lived expertise and advocate with and on behalf of them if asked.
4.3.c	<p>Develop policies that are humane and responsive to the needs of unsheltered individuals and families.</p> <ul style="list-style-type: none"> i. Ensure policies reflect the input of those living unsheltered. ii. Repeal or stop enforcing policies that criminalize homelessness. iii. Work with experts and persons with lived experience on encampment resolution.

4.3.d	Provide more education about mental illness and its impacts on individuals and its intersection with homelessness.
4.3.e	<p>Develop resource materials and educational information that can be available online, through social media, and accessible at places where people experiencing or at risk of homelessness can learn more about the variety of organizations and services in the community.</p> <ul style="list-style-type: none"> i. Expand language accessibility to materials, including online and printed. ii. Ensure that people with lived experience of homelessness are part of the development of the materials or can review/edit them prior to release.

STRATEGY 4.4: IMPROVE COMMUNICATION, COORDINATION, AND COLLECTIVE ACTION

Action Steps:

4.4.a	<p>Increase participation by key stakeholders and essential community partners in meaningful solutions to address homelessness in El Dorado.</p> <ul style="list-style-type: none"> i. Involve philanthropy, service organizations, and faith community in supporting critical initiatives such as public engagement and education campaigns, the flexible housing and risk mitigation funds, and volunteer opportunities. ii. Support opportunities for community members to engage and connect with people experiencing homelessness, such as volunteer food service, that then connect to larger solution-focused campaigns. iii. Include diverse stakeholders in Strategic Plan implementation processes and committees to support engagement across sectors and ensure that all partners with a stake in addressing homelessness are part of the solution.
4.4.b	Provide additional opportunities for facilitated conversations with the Elected leadership, CoC leadership, CoC Board members, key stakeholders in the homeless system of care, and members of the community as they seek to work together in an actionable way to implement the Strategic Plan.
4.4.c	Continue to enhance the CoC’s website with a publicly facing dashboard that shows progress towards identified goals (i.e., services offered, people assisted, or people placed into housing) and information regarding success stories, challenges, key policy decisions, funding allocations, available resources, housing opportunities, etc.

4.4.d	Evaluate and track any disparities in access to the homeless system of care and in those who receive housing and services, including racial disparities, and implement training and program modifications to address any identified disparities.
4.4.e	Develop a new routine where CoC Board members provide periodic updates at jurisdictional meetings and jurisdictional leadership and other departmental staff (i.e., Planning, HHS, Behavioral Health, etc.) provide updates at CoC meetings.

GOAL 4 EXAMPLE METRICS

Short-Term 6 months to 1 year	Medium-Term 1 to 3 years	Longer-Term 3 to 5 years
<p>Metric 4.1: A year-round communication strategy to educate the public about homelessness has been created, finalized, and put in place no later than December 31, 2022.</p> <p>Metric 4.2: A countywide implementation body has been selected and is in place and has produced an annual work plan for calendar year 2023 no later than December 31, 2022.</p> <p>Metric 4.3: Accessible outreach materials have been written, reviewed, and are circulated widely that share information about the myriad of resources, agencies, and organizations that provide services and support to people at risk of or experiencing</p>	<p>Metric 4.4: The process for creating a Lived Experience Advisory Board has commenced and the Advisory Board is in place no later than March 30, 2023.</p> <p>Metric 4.5: CoC board members regularly present periodic updates at jurisdictional meetings through the region, no later than January 31, 2023.</p>	<p>Metric 4.6: The CoC website has a public-facing dashboard that provides visualization of progress toward the 4 stated goals.</p>

homelessness no later than December 31, 2022.		
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APPENDIX A: ACKNOWLEDGEMENTS

The Community Plan to Prevent and End Homelessness was drafted by Homebase and was guided and developed by all organizations that participate in the El Dorado Opportunity Knocks CoC (the Continuum of Care) as well as many other service providers and partners that engaged in meetings, focus groups, and surveys. The CoC would like to thank the members of the Homelessness Strategic Plan Steering Committee for their partnership and guidance throughout the process of developing this Strategic Plan. Special thanks to the many nonprofit service providers; faith-based, healthcare, and other stakeholders; city and county government staff; individual community members and the individuals experiencing homelessness or with recent experience for sharing their invaluable stories, expertise, and insight. This plan would not exist without the effort and commitment of all of you.

El Dorado Opportunity Knocks Continuum of Care Officers

- Marissa Muscat, MD, Barton Hospital, CoC Co-Chair
- Michael Boyd, El Dorado County Probation, CoC Co-Chair
- Margaret Lewis, El Dorado County Office of Education, CoC Vice-Chair
- Jennifer LaForce, Only Kindness, Secretary
- Pam Maxwell, US Bank, Treasurer

Jurisdictional Partners

- El Dorado County
- The City of Placerville
- The City of South Lake Tahoe
- Current and Former Members of the El Dorado County Board of Supervisors
- Current and Former Members of the Placerville City Council
- Current and Former Members of the South Lake Tahoe City Council
- El Dorado County Health and Human Services Agency

El Dorado Opportunity Knocks CoC Board Members

- Barton Hospital
- El Dorado County Office of Education
- El Dorado County Probation
- El Dorado County Sheriff's Office
- Green Valley Community Church
- Housing El Dorado, Pathways
- Job's Shelters of the Sierra
- Live Violence Free
- New Morning Youth and Family Services
- Only Kindness
- South Lake Tahoe Police Department
- Tahoe Prosperity Center
- Tahoe Youth and Family Services
- The City of Placerville
- Volunteers of America
- US Bank

El Dorado Opportunity Knocks CoC Members & Partners

- El Dorado Community Foundation
- El Dorado National Alliance on Mental Health (NAMI)
- Food Bank El Dorado County
- Gainsbrugh Ministries
- Tahoe Coalition for the Homeless
- Marshall Foundation for Community Health
- Marshall Medical Center
- Soroptimist International Placerville
- Upper Room

APPENDIX B: IMPLEMENTATION PLAN

Goal 1: Stop Homelessness Before It Begins

<i>Activity</i>	<i>Steps</i> (\$ → \$\$\$ scale indicates initial cost from low to high)	<i>Responsible Parties</i>	<i>Stakeholders</i>	<i>Funding Source</i>
<p>Strategy 1.1: <i>Bolster the Emergency Response System</i></p>	<p>Short-Term</p> <ul style="list-style-type: none"> 1.1.a. Coordinate with Emergency Response System providers 1.1.b. Coordinate with 2-1-1 service to help connect people to CES and homelessness prevention and diversion services, including rental assistance, eviction defense advocates, supportive services, and housing locator services. 			
<p>Strategy 1.2: <i>Increase Prevention and Diversion Services in El Dorado</i></p>	<p>Short-Term</p> <ul style="list-style-type: none"> 1.2.b. Ongoing education and training on prevention and diversion 1.2.c. Identify and align resources for prevention and diversion and identify gaps in the availability of resources. 1.2.e. Develop a process to work with the El Dorado County Office of Education McKinney-Vento Program Liaison to ensure early identification of families facing housing instability. <p>Medium-Term</p> <ul style="list-style-type: none"> 1.2.a. Create and implement coordinated, system wide prevention and diversion screening and problem-solving protocols to help people at high risk of homelessness remain housed. 1.2.d. Identify and allocate flexible funding for prevention and diversion and eviction prevention and designate agencies to disburse those funds to eligible clients. 1.2.f. Collaborate with agencies and partners (e.g., local colleges, child welfare agencies) to identify transition age youth, including youth 			

<i>Activity</i>	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
Strategy 1.2 <i>(cont'd)</i>	<p>aging out of foster care who are experiencing or at-risk of homelessness.</p> <p>1.2.g. Survey the housing needs of senior residents aging in place to ensure physical and mental well-being and housing stability. Consider funding options for those identified at risk of losing their housing where a small monthly subsidy would eliminate the risk.</p>			
Strategy 1.3: <i>Improve Coordination to Ensure Individuals are not Discharged into Homelessness</i>	<p>Medium -Term</p> <p>1.3.a. Coordinate discharge planning with the following systems: the criminal legal system, (including juvenile legal system), child welfare (including foster care), and hospital systems.</p> <p>1.3.c. Work collectively to ensure that programs can provide robust case management for discharged populations from discharge to housing placement and beyond until housing stability is achieved.</p> <p>Longer -Term</p> <p>1.3.b. Create additional resources and housing for people discharged from institutions:</p> <p>Requires new funding</p>			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
<p>Strategy 1.4: Strengthen the Support Systems Available to Help Residents Maintain Housing</p>	<p>Medium-Term</p> <ul style="list-style-type: none"> 1.4.a: Expand access to income, including employment and benefits, for people experiencing homelessness and recently homeless households. 1.4.b: Work with all local housing and rental assistance providers to annually assess whether any of their tenants who have received past financial support need additional support to prevent re-entry into homelessness. 1.4.c: Create a multi-disciplinary team to provide intensive support and a tailored interventions as needed for at-risks households to prevent returns to homelessness. 1.4.e. Strengthen partnerships and coordination with mainstream agencies such as legal aid, credit repair services, public benefits advocacy and appeals (Medicaid, SNAP, TANF, SSI/SSDI), workforce development, etc. <p>Longer-Term</p> <ul style="list-style-type: none"> 1.4.d: Increase the availability and amount of flexible funds that support homeless and at-risk households through both one-time and short-term, recurring financial assistance to solve acute housing crises and emergencies. <p>Requires new funding</p>			

Goal 2: Increase Housing for All El Dorado Residents

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
<p>Strategy 2.1: Assess and Use Available Public and Private Land for Permanent Housing</p>	<p>Short-Term</p> <ul style="list-style-type: none"> 2.1.f. Explore models from other communities that implemented PSH programs 2.1.e. Explore master lease, lease to own, or create agreements with existing facilities in the community to create PSH. <p>Medium-Term</p> <ul style="list-style-type: none"> 2.1.b: Rehabilitate vacant or underutilized properties to create PSH. 2.1.c: Evaluate the feasibility and next steps for immediate development of rent-controlled apartment buildings, multi-family housing units, and in-law units, as well as non-traditional options such as repurposed motels/hotels and/or Accessory Dwelling Units (ADUs). 2.1.d: Consider the development of single-room occupancy (SROs) buildings, which provide non-congregate, small furnished single rooms within multi-tenant buildings for residents with low- or minimal income who may be transitioning out of long-term homelessness. <p>Longer-Term</p> <ul style="list-style-type: none"> 2.1.a: Establish a five-year Countywide Housing Development Pipeline that identifies an achievable path to establish new housing for unsheltered populations and other underserved populations. <p>Requires new funding</p>			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
<p>Strategy 2.2: Protect and Expand Affordable Housing through Local Policy</p>	<p>Short-Term</p> <p>2.2.c. Develop “Moving On” policies within the Public Housing Authority that prioritize Housing Choice Vouchers for people in permanent supportive housing (PSH) to provide an affordable housing option and short-term services and resources that support program participants during and shortly after their transition to a greater level of independence. The Moving On program helps to keep limited supportive housing available for households who need intensive services.</p> <p>Medium-Term</p> <p>2.2.a: Evaluate current City and County policies to identify any rules or programs in place that inhibit development of affordable housing. Identify changes that would reverse the negative impacts of those policies.</p> <p>2.2.b.: Adopt City and County policies that require set asides for all new development, dedicating a certain proportion or number of units within each new development for very low-income (VLI) and extremely low-income (ELI) households.</p> <p>2.2.d.: Create local policies that incentivize absent landlords to sell or develop properties (e.g., residential vacancy tax or other similar efforts, including county-level approaches).</p> <p>Requires new funding</p>			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
<p>Strategy 2.3: Increase Access to Housing through a Coordinated Landlord Engagement Campaign</p>	<p>Short-Term</p> <p>2.3.c. Address barriers that make it difficult for tenants to obtain affordable housing by creating client portfolios that include letters of support from community members who know the client, information about the client’s background and the steps they have taken to improve their housing stability.</p> <p>2.3.a: Establish a county-wide collective landlord engagement strategy that includes year-round staffing support to help providers educate the public, recruit landlords, and engage in outreach to property managers and landlords with collective, consistent messaging.</p> <p>Medium-Term</p> <p>2.3.b Establish a landlord risk mitigation and/or incentive fund that provides compensation to landlords to mitigate any damage caused by tenants and to incentivize renting to formerly homeless.</p> <p>Requires new funding</p>			
<p>Strategy 2.4: Expand the Flexibility and Availability of Resources to Subsidize and Operate Supportive Housing</p>	<p>Short-Term</p> <p>2.4.c: Maximize the availability and use of housing vouchers and other housing subsidies that can be used to address homelessness to increase total resources available for supportive housing, including adopting a homeless preference for all possible Public Housing Authority vouchers.</p>			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
Strategy 2.4: <i>(cont'd)</i>	<p>Medium-Term</p> <p>2.4.a: Engage all stakeholders, including cities, county agencies, and the CoC, in growing the federal and state funding available for supportive housing through new and existing programs.</p> <p>2.4.b: Direct mainstream supportive service resources toward ending homelessness, including Medi-Cal and Mental Health Services Act (MHSA) funding.</p>			
Strategy 2.5: Create Flexible Resources to Expedite a Household's Ability to Attain Permanent Housing	<p>Short-Term</p> <p>2.5.d. Expand rental assistance programs to cover application fees and assistance with security deposits and move-in costs to help ensure vouchers are utilized equitably</p> <p>Medium-Term</p> <p>2.5.a: Develop a Flexible Housing Fund program to provide financial support to individuals and families with moving costs, addresses the limitations of housing subsidies to respond to rapidly rising housing costs, and tackle other financial barriers that can prevent people from successfully exiting homelessness.</p> <p>2.5.b: Strengthen access to resources to support households with expungement, credit assistance, and document readiness to ensure they can use available housing subsidies as quickly as possible.</p> <p>2.5.c.: Develop a shared housing program that can increase the housing available to single adults through 2- and 3-bedroom homes for individuals exiting homelessness by coordinating across programs</p>			

Goal 3: Increase Access to Homeless Response Emergency Services

<i>Activity</i>	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
<p>Strategy 3.1: Expand Access to Safe, Low-barrier Temporary Housing Options Countywide</p>	<p>Short-Term</p> <ul style="list-style-type: none"> 3.1.a. Establish permanent year-round, low-barrier housing-focused navigation center(s) with countywide coverage and adequate capacity that use evidence-based practices to support households exiting homelessness, minimize barriers to prevent people from participating, and are open around the clock to provide resources, services, and connections to housing. 3.1.d. Evaluate approaches for increasing crisis shelter options for special populations. 3.1.g. Improve shelter system and day services. 3.1.h: Reduce existing barriers to entry and deepen housing-focused emphasis and programming at locations where people are experiencing homelessness regularly access, including permanent low-barrier housing-focused emergency shelters/navigation centers and adequate transitional housing. <p>Medium-Term</p> <ul style="list-style-type: none"> 3.1.b. Design navigation center(s) with capacity to expand as needed to utilize extra capacity as a Warming and Cooling Center or Establish Warming/Cooling Center(s) for regular use to provide shelter and supportive services during inclement weather. 3.1.c Create safe parking zones/sites for individuals and families experiencing vehicular homelessness where they can park safely and connect to additional services, 3.1.e. Assess whether host homes program could work for specific populations to create new housing opportunities in El Dorado. 3.1.f. Explore using tiny homes or pallet shelters as temporary housing solutions if part of an overall continuum of housing solutions, including medical help, housing navigation, benefits, employment, hygiene needs, etc. 			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
Strategy 3.1: (cont'd)	<p>3.1.i: Consider and address potential impacts on the surrounding community of any temporary housing, including navigation center, safe parking, or pallet shelter. Engage with the community, conduct facilitated conversations, provide examples of successful similar projects supported by data, and address concerns whenever possible.</p> <p>Requires new funding</p>			
Strategy 3.2: Expand Countywide Street and Encampment Outreach	<p>Short-term</p> <p>3.2.b: Enhance support of existing outreach teams</p> <p>3.2.c: Evaluate and Improve Street and Encampment Outreach</p> <p>Medium-term</p> <p>3.2.a: Establish a mobile multi-disciplinary program to support health and wellness and provide connections to benefits and other resources to exit homelessness.</p> <p>3.2.d: Develop a peer support program as part of an interdisciplinary approach that trains and uses peers with lived experience of homelessness for street outreach and system navigation.</p>			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
<p>Strategy 3.3: Expand Services to Support Exits from Homelessness</p>	<p>Short-term</p> <p>3.3.g: Ensure local programs that primarily serve people experiencing homelessness can access and fully participate in the Front Door Coordinated Entry System and can enter data into the countywide HMIS.</p> <p>Medium-term</p> <p>3.3.a: Hire housing navigator staff to help increase exits from homelessness by building and maintaining relationships with landlords, affordable housing providers, and other housing programs to help increase the number of units available for households exiting homelessness</p> <p>3.3.b: Expand supportive services available to individuals and families experiencing homelessness.</p> <p>3.3.d: Provide additional support to participants who exit shelters to permanent housing through proactive case management and best practice strategies, such as motivational interviewing, trauma-informed care, and housing-focused case management and planning.</p> <p>3.3.f: Expand the use of a hotline to operate 24/7 as the publicly available contact point that supports unhoused and housed residents in need of case management or behavioral health services, shelter or housing, or public works/sanitation/safety support.</p> <p>Longer--term</p> <p>3.3.c: Identify a partner to build out workforce development programming specifically for households who are unhoused (or formerly unhoused) who have secured or maintained housing with a one-time grant or ongoing rental subsidy/voucher.</p> <p>3.3.e: Strengthen partnerships and coordination with mainstream agencies such as legal aid, credit repair services, public benefits</p>			

<i>Activity</i>	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
	advocacy and appeals (Medi-Cal, CalFresh, CalWORKS, SSI/SSDI), workforce development, etc.)			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
<p>Strategy 3.4: Expand Services for Subpopulations with Special Needs</p>	<p>Short-term</p> <p>3.4.f: Build stronger partnerships with service providers working with specific subpopulations to expand connections to mainstream resources</p> <p>3.4.h: Review data entry and data quality requirements for HMIS-participating homeless service providers to improve local understanding of the scope of chronic homelessness in El Dorado.</p> <p>Medium-term</p> <p>3.4.a: Expand access to mental and behavioral health services for the homeless population.</p> <p>3.4.b: Expand support services for people with a history of criminal legal system involvement, including housing location, record expungement, and credit repair.</p> <p>3.4.c: Anticipate and address the growing needs of older adults experiencing homelessness in El Dorado.</p> <p>3.4.d: Strengthen the system of care targeting youth and young adults to ensure culturally competent service delivery and engagement.</p> <p>3.4.e: Evaluate, track, and implement training and program modifications to address disparities in system access and service provision for special subpopulations, including for people of color, non-English speakers, and persons identifying as LGBTQ+.</p> <p>Longer-term</p> <p>3.4.g: Establish a quarterly monitoring protocol, including a field in HMIS to identify households who fall into homelessness for the first time or who return to homelessness, and to track impact of interventions to help with understanding the needs of high-risk households.</p>			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
Strategy 3.5: <i>Improve Transportation Options to Help People Obtain and Maintain Housing</i>	Medium-Term 3.5.a: Develop a comprehensive transportation strategy in partnership with local transit authorities that considers the transportation needs of people experiencing homelessness.			

Goal 4: Partner Across El Dorado to Build Collective Solutions

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
Strategy 4.1: <i>Deepen Public Understanding of Homelessness and its Solutions</i>	Short-Term 4.1.a: Roll out the Strategic Plan, using the process to support community-wide engagement and alignment around a single roadmap for next steps in addressing homelessness in El Dorado. 4.1.b: Establish a year-round communication strategy to educate the public about homelessness and the local homelessness response, addressing common myths and celebrating progress in Strategic Plan implementation. Medium-Term 4.1.c: Create resident- and business-focused initiatives that match local employers with individuals facing housing instability. Initiatives can include training, in addition to offering employment, scholarship, mentorship, or housing opportunities. 4.1.d: Consult and partner on an ongoing basis with local faith-based organizations to leverage their strengths in building community, providing essential services, and coordinating volunteers and resources.			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
	Requires new funding			
Strategy 4.2: Strengthen the Homeless Response Infrastructure	<p>Short-Term</p> <p>4.2.a: Develop a year-round structure for Countywide Strategic Plan implementation and reporting</p> <p>4.2.b: Develop an annual work plan with prioritized action steps to guide Strategic Plan implementation along with identifying key stakeholders to guide those steps.</p> <p>Medium-Term</p> <p>4.2.c: Secure a funded staff position to support communitywide implementation of Strategic Plan strategies to address homelessness in El Dorado, including coordination of various implementation bodies, the outreach campaign and carrying out various initiatives and action steps.</p>			
Strategy 4.3 Provide Information and Engagement Opportunities to People with Lived Experience of Homelessness:	<p>Short-Term</p> <p>4.3.b: Provide meaningful opportunities for people with lived experience of homelessness to share their stories and advocate for what they need, including focus groups, surveys, invitations to speak at meetings, etc. Provide opportunities for allies to partner with persons with lived expertise and advocate with and on behalf of them if asked.</p> <p>4.3.e: Provide more education about mental illness and its impacts on individuals and its intersection with homelessness.</p> <p>4.3.f: Develop resource materials and educational information that can be available online and accessible at the public library, at transportation sites, and other places where people experiencing</p>			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
	homelessness or at risk of homelessness can learn more about the variety of organizations and services in the community.			
Strategy 4.3 (cont'd)	<p>Medium-Term</p> <p>4.3.a: Establish a Lived Experience Advisory Board, comprised of people currently experiencing homelessness or with recent lived expertise who can provide feedback to the CoC and jurisdictions and be involved in policymaking and allocations processes within the CoC.</p> <p>4.3.c: Center racial equity and the voices of people with lived experience of homelessness in homeless services design. To do this, the CoC and jurisdictions must commit to lowering barriers to entry to outreach, shelter, and housing interventions; as well as emphasizing the goals of each individual and their unique barriers to housing stability.</p> <p>4.3.d: Develop policies that are humane and responsive to the needs of unsheltered individuals and families.</p>			
Strategy 4.4: Improve Communication, Coordination, and Collective Actions	<p>Short-Term</p> <p>4.4.a: Increase participation by key stakeholders and essential community partners in meaningful solutions to address homelessness in El Dorado.</p> <p>4.4.b: Provide additional opportunities for facilitated conversations with the Elected leadership, CoC leadership, CoC Board members, key stakeholders in the homeless system of care, and members of the community as they seek to work together in an actionable way to implement the Strategic Plan.</p> <p>4.4.f: Develop a new routine where CoC Board members provide periodic updates at jurisdictional meetings and jurisdictional leadership and</p>			

Activity	Steps (\$ → \$\$\$ scale indicates initial cost from low to high)	Responsible Parties	Stakeholders	Funding Source
	other departmental staff (i.e., Planning, HHSA, Behavioral Health, etc.) provide updates at CoC meetings.			
Strategy 4.4: (cont'd)	<p>Medium-Term</p> <p>4.4.d: Evaluate, track, and implement training and program modifications to address any disparities in system access and service provision for special subpopulations.</p> <p>4.4.e: Engage partners from other Counties/CoC's to learn what programs and evidence-based practices have been successful in those areas. Develop a peer network to share challenges, successes, and to collaborate with regionally.</p> <p>Longer-Term</p> <p>4.4.c: Continue to enhance the CoC's website with a publicly facing dashboard that shows progress towards identified goals (i.e., services offered, people assisted, or people placed into housing) and information regarding success stories, challenges, key policy decisions, funding allocations, available resources, housing opportunities, etc.</p>			

APPENDIX C: GLOSSARY OF KEY TERMS

Ambassador Program is a program which would provide local outreach to unhoused residents, hospitality and safety services for the community, maintenance and cleaning of public spaces, and employment opportunities for those with lived experience of homelessness.

At risk of homelessness is a status given to individuals and their families who have unstable housing and inadequate income and resources.⁴²

Behavioral Health describes the connection between a person's behaviors and the health and well-being of the body and mind.⁴³

California Emergency Solutions and Housing (CESH) Program provides funds for a variety of activities to assist persons experiencing or at risk of homelessness. Funds primarily may be used for five primary activities: housing relocation and stabilization services (including rental assistance), operating subsidies for permanent housing, flexible housing subsidy funds, operating support for emergency housing interventions, and systems support for homelessness services and housing delivery systems.

Case management includes assessment, planning, facilitation, care coordination, evaluation and advocacy with people experiencing homelessness. Staff work with individuals and families to address their comprehensive needs to help them exit homelessness and stay housed.

Chronically Homeless is when a person has been homeless for at least a year, either 12 months consecutively or over the course of at least 4 separate occasions in the past 3 years. To be chronically homeless, the individual or head of household must also have a disability.

“By-Name” List would be a complete and inclusive list of every person experiencing homelessness in the El Dorado County. It would include information collected and shared with the individual’s consent like their name, history, health considerations, and housing needs.

Community Development Block Grant (CDBG) is a flexible program run by HUD that provides communities with resources to address a wide range of unique community development needs.

Continuum of Care (CoC) is the group organized to carry out the responsibilities prescribed in the CoC Program Interim Rule⁴⁴ for a defined geographic area. A CoC is composed of representatives of organizations including: nonprofit homeless providers, victim service providers, faith-based organizations, governments, businesses, advocates, public housing agencies, school districts, social service providers, mental health agencies, hospitals, universities, affordable housing developers, law enforcement, organizations that serve homeless and formerly homeless Veterans, and homeless and formerly homeless persons.

⁴² See 24 C.F.R. § 576.2 for complete definition of “at risk of homelessness” under the Emergency Solutions Grant Program.

⁴³ CDC, The Critical Need for a Population Health Approach: Addressing the Nation’s Behavioral Health During the COVID-19 Pandemic and Beyond. Available at: https://www.cdc.gov/pcd/issues/2020/20_0261.htm

⁴⁴ CoC Interim Rule, <https://www.hudexchange.info/resource/2033/hearth-coc-program-interim-rule/>

Responsibilities of a CoC include operating the CoC, designating and operating an HMIS, planning for the CoC (including coordinating the implementation of a housing and service system within its geographic area that meets the needs of the individuals and families who experience homelessness there), and designing and implementing the process associated with applying for CoC Program funds.

CoC Program is designed to promote communitywide commitment to the goal of ending homelessness; provide funding for efforts by nonprofit providers, and state and local governments to quickly rehouse homeless individuals and families while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness; promote access to and effect utilization of mainstream programs by homeless individuals and families; and optimize self-sufficiency among individuals and families experiencing homelessness.

CoC Program Interim Rule focuses on regulatory implementation of the CoC Program, including the CoC planning process. The CoC Program was created through the McKinney-Vento Homeless Assistance Act as amended by the HEARTH Act of 2009.⁴⁵

Coordinated Entry System (CES) provides a centralized approach to connect the region's most vulnerable homeless residents to housing through a single community-wide assessment tool and program matching system. El Dorado CES is called Front Door.

Congregate Shelters are facilities with overnight sleeping accommodations, in shared quarters, the primary purpose of which is to provide temporary shelter for the homeless.

Cost burden is the ratio of housing costs to household income. For renters, housing cost is gross rent (contract rent plus utilities). For owners, housing cost is "select monthly owner costs," which includes mortgage payment, utilities, association fees, insurance, and real estate taxes.

Day center or day services offer showers, internet access, case management, housing navigation, and other supportive services during traditional daytime hours. In most cases these services are free.

Diversions is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing.

Emergency Housing Voucher (EHV) is a program available through the American Rescue Plan Act (ARPA). Through EHV, HUD is providing 70,000 housing choice vouchers to local Public Housing Authorities (PHAs) in order to assist individuals and families who are homeless, at-risk of homelessness, fleeing, or attempting to flee, domestic violence, dating violence, sexual assault, stalking, or human trafficking, or were recently homeless or have a high risk of housing instability.⁴⁶

Emergency Shelter is any facility with overnight sleeping accommodations, the primary purpose of which is to provide temporary shelter for the homeless in general or for specific

⁴⁵ Ibid.

⁴⁶ <https://www.hud.gov/ehv>

populations of the homeless. Shelter may include year-round emergency shelters, winter and warming shelters, navigation centers and transitional housing. These types of shelter have varying hours, lengths of stay, food service, and support services.

Emergency Solutions Grants (ESG) provides funds to assist people to quickly regain stability in permanent housing after experiencing a housing crisis and/or homelessness.

Fair Market Rent (FMR) is a statistic developed by HUD in order to determine payments for various housing assistance programs. It is generally calculated as the 40th percentile of gross rents for regular, standard quality units in a local housing market. It excludes low-quality, subsidized, or units that have been built in the last 2 years. FMR rent data is typically taken from recent move-ins rather than long-term tenants. FMR includes core utilities, like water and power, but does not include internet and other optional services.

Federal Poverty Guidelines are issued each year by the federal Department of Health and Human Services. The guidelines are a simplification of the federal poverty thresholds and are used to determine financial eligibility for certain federal programs.

Flexible Funds have increasingly been permitted and encouraged as an allowable expense by federal, state, and County funders. Flexible funds can be used for different purposes. They can pay for costs that will result in an immediate solution of a housing crisis. They can bridge the gap while permanent housing is secured. They can cover household needs that will help people keep their housing. Flexible funding can be used to purchase grocery cards, gas cards, certificates or licenses to work, car repair, furniture, pest extermination, storage, essential minor repairs to make living space more habitable, transportation vouchers/passes, costs for birth certificates or other documents, bus or train tickets, shipping belongings, housing application fees, credit checks, rental deposits, past due rent, one-month rent on new units, utility deposit, and/or utility payments.

Functional End to Homelessness means that the number of people experiencing homelessness at any time does not exceed the community's ability to house that many people within a brief period of time. This requires systems to prevent homelessness, be able to quickly detect homelessness when it occurs, and permanently and promptly resolve it.

Homeless is defined by HUD in four categories:

- (1) individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who resided in an emergency shelter or a place not meant for human habitation and who is exiting an institution where he or she temporarily resided;
- (2) individuals and families who will imminently lose their primary nighttime residence;
- (3) unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; and
- (4) individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

Homeless Emergency Aid Program (HEAP) is a \$500 million one-time block grant program designed to provide direct assistance to cities, counties and CoCs to address the homelessness crisis throughout California.

Homeless Emergency Assistance and Rapid Transition to Housing Act (HEARTH Act) was signed into law in 2009. HEARTH reauthorized the McKinney-Vento Act. It also provided substantial changes to the law, updating the definition of homelessness and chronic homelessness, as well as other changes including consolidating competitive grants, simplifying match requirements, and providing prevention resources.

Homeless Housing, Assistance and Prevention (HHAP) Program is a \$650 million one-time block grant that provides local jurisdictions with funds to support regional coordination and expand or develop local capacity to address their immediate homelessness challenges.

Homeless Management Information System (HMIS) is a local information technology system used to collect client-level data and data on the provision of housing and services to homeless individuals and families and persons at risk of homelessness.

Homeless student is defined under the McKinney-Vento Act as a child without a regular adequate residence, which includes any students living in shelters, in substandard housing, doubled up with friends or relatives because they have no other place to go and cannot afford a home. The other living arrangements included are single room hotels, cars, parks, and public places.

Homeless system of care is another way of describing the Continuum of Care (CoC) and the network of partners who come together to work to support people experiencing homelessness or at risk of homelessness.

Housing and Urban Development (HUD), U.S. Department of, is the federal agency responsible for national policy and programs that address housing needs, improve and develop communities, and enforce fair housing laws.

Housing Choice Vouchers (HCVs), formerly known as the Section 8 program, are long-term rental subsidies funded by HUD and administered by Public Housing Authorities that can be used to help pay for rent.

Housing Element is the County's plan to meet the housing needs of everyone in the community – a blueprint for how the county will grow and develop. *Housing Element Updates* are required every five years by the California Department of Housing and Community Development to guide the creation of housing policy in El Dorado County.

Housing First is a well-accepted, national, evidenced-based best practice that eliminates barriers to housing, ensuring individuals and families can exit homelessness as quickly as possible. Housing First is an approach to quickly and successfully connect households experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. Supportive services are

offered on a voluntary basis to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry.⁴⁷

Housing-focused shelter (also sometimes called “navigation centers”) help people connect long-term solutions to homelessness and address the barriers that keep them from becoming housed. The goal is to help people exit homelessness as rapidly as possible. Once housed, people can work on the underlying challenges that undermine their stability. Housing-Focused Shelters typically offer: admissions policies that screen-in (not screen out) households, and welcome pets, partners, and possessions; minimal rules and restrictions that focus on safety (e.g., no weapons) and ability for people to come and go, with 24-hour operations; client-centered services tailored to support a household’s ability to exit homelessness (e.g., job training, benefits enrollment); physical layout and aesthetics that include community spaces, outdoor spaces for pets, storage for possessions, mixed-gender dormitories that allow partners to request beds next to one another, and other design elements that promote a welcoming environment; staff with cultural competencies who treat residents with respect and dignity and caseloads that are kept small enough for staff to spend adequate time with each client; and co-location of benefits eligibility workers, health care, Department of Public Health, and other services. Partnerships with programs such as meals-on-wheels can assist with providing food.

Housing wage is an estimate of the hourly wage a full-time worker must earn to afford a rental unit at HUD’s Fair Market Rent (FMR) without spending more than 30% of income on housing costs, the accepted standard of affordability.

Inclusionary Housing Programs are designed to counteract economic and racial segregation by requiring developers to create affordable housing units or contribute to the development of affordable housing.

Landlord incentive programs provide education and incentives to landlords to make it more likely they will rent to people experiencing homelessness. They can provide funding to support risk mitigation (compensating landlords if tenants harm their premises) and financial incentives that make landlords more likely to rent to people transitioning out of homelessness. Most programs include an education component and address racial inequities in voucher acceptance and access to housing.

Local preference is a housing policy that ensures affordable housing units developed in the city would be first made available to local residents and/or workers (to the extent permitted by law) in order to help address displacement and increase the availability of affordable housing.

Low-barrier shelters are emergency shelters that have removed most requirements/obstacles for entry into the program so that households are more likely go indoors to connect to services rather than stay on the street. For example, unhoused residents are allowed to bring their pets and possessions, to live with their partners, and do not have to exit the shelter each morning. They are not expected to abstain from using alcohol or other drugs, so long as they do not engage in these activities in common areas of the shelter and are respectful of other residents and staff.

⁴⁷ *What Housing First Really Means*, National Alliance to End Homelessness (NAEH), <https://endhomelessness.org/what-housing-first-really-means/>

Mainstream Voucher assist non-elderly persons with disabilities. Aside from serving a special population, Mainstream vouchers are administered using the same rules as other housing choice vouchers.

McKinney-Vento Act is a federal statute that has a more expansive definition of homelessness than the HUD definition. The Act requires schools to track students experiencing homelessness. For public education programs up through high school, homelessness includes people experiencing homelessness under the HUD definition, but also includes youth who are couch surfing or doubled-up (e.g., with multiple families sharing the same space).

Motivational Interviewing is a client-centered, evidence-based approach used by direct service providers working with people experiencing homelessness. It focuses on allowing individuals to direct their own path toward the change they seek, rather than trying to convince them of what they need to do. The provider builds trust, listens, and then acts as a guide to help the client to identify their own personal next steps.

Navigation Centers are housing-focused facilities that provide shelter and comprehensive onsite services to support participants to exit homelessness permanently. *See “Housing-focused shelter,” above, for more details.*

Non-congregate shelters provide overnight sleeping accommodations with individual quarters, such as hotels, motels, and dormitories.

People with lived experience is a term used to refer to people who have lived through the experience of homelessness and have first-hand knowledge of what it feels like to live unsheltered and/or to move through the homeless system of care.

Point-in-Time (PIT) count is a biennial process required of CoCs by HUD to count the number of people experiencing homelessness on a single night in January. The PIT count provides a snapshot of data available on the size and characteristics of the homeless population in a CoC over time.

Permanent Supportive Housing (PSH) provides long-term housing with intensive supportive services to persons with disabilities. These programs typically target people with extensive experiences of homelessness and multiple vulnerabilities and needs who would not be able to retain housing without significant support.

Prevention is a strategy intended to target people who are at imminent risk of homelessness (whereas diversion usually targets people as they are initially trying to gain entry into shelter).

Rapid Rehousing (RRH) provides rental housing subsidies and tailored supportive services for up to 24-months, with the goal of helping people to transition during that time period to more permanent housing.

Shared housing is a living arrangement between two unrelated people who choose to live together to take advantage of the mutual benefits it offers. Families, students, young adults, seniors, and Veterans have been using this arrangement for generations. It is now recognized as a viable option for people exiting homelessness.

Street outreach involves multi-disciplinary teams who work on the streets or in encampments to engage with people experiencing homelessness who may be disconnected or alienated from services and supports that are offered at an agency.

Supportive services include assistance applying for benefits, mental health and substance use services, outpatient health services, information and referral services, child care, education, life skills training, employment assistance and job training, housing search and counseling services, legal services, outreach services, transportation, food assistance, risk assessment and safety planning (particularly for individuals and families experiencing domestic violence), and case management services such as counseling, finding and coordinating services, and monitoring and evaluating progress in a program.

Transition Age Youth (TAY) are persons between age 18 and 24 who are transitioning from childhood to adulthood.

Transitional Housing (TH) provides temporary housing accommodations and supportive services. While many households benefit most from direct connections to permanent housing programs such as RRH or PSH (which are often more cost-effective over the long term), transitional housing can also be an effective support in the intermediary. In particular, certain subpopulations, such as people fleeing domestic violence and transitional age youth, can meaningfully benefit from a transitional housing environment.

Trauma-informed care is a practice that focuses on understanding and compassion, especially in response to trauma. The practice utilizes tools that empower people to work toward stability. It recognizes a wide range of trauma that can impact people experiencing homelessness; physical, psychological, social, and emotional trauma. It emphasizes the safety of both clients and providers.

APPENDIX D: EL DORADO HOMELESS SERVICES

The Chart below is a summary of homeless housing and services provided by the El Dorado providers. There may have been some changes to the programs not reflected in the chart below due to the impact of the COVID-19 pandemic on the local provider. In some instances, the number of beds has been reduced to comply with social distancing requirements, staffing has been reduced and some shelters were forced to temporarily close. Several temporary programs were also quickly created and due to the urgent and changing need of the homeless population during this time.

<p>Coordinated Entry and Assessment</p>	<p>Front Door Coordinated Entry System is managed by Tahoe Coalition for the Homeless. Provides centralized entry and assessment for anyone seeking homeless services and housing assistance. Front Door creates a centralized By-Name List and refers clients to available resources based on severity of need and local priorities.</p>	
<p>Permanent Housing</p>	<p>Permanent Supportive Housing</p>	<ul style="list-style-type: none"> • Homekey Program: Tahoe Coalition for the Homeless is in the process of creating 64 interim housing beds with supportive services. Units not currently available.
	<p>Rapid Rehousing</p>	<ul style="list-style-type: none"> • El Dorado County Health and Human Services: CalWORKs Rapid Rehousing: 33 subsidies for families with children who are eligible for CalWORKs. • El Dorado Probation Department: Rapid Rehousing for people re-entering from criminal legal system. • Only Kindness: Rapid rehousing subsidies for 17 families. • Whole Person Learning: Rapid rehousing subsidies for 5 individuals.
	<p>Public Housing Authority Programs</p>	<ul style="list-style-type: none"> • Mainstream Vouchers: 10 vouchers for non-elderly disabled persons. • Emergency Housing Vouchers: 70 vouchers for homeless individuals, allocated in conjunction with the Coordinated Entry System. • Housing Choice Vouchers: all vouchers are being utilized. Waiting list has been closed since 2016.

	<p>Affordable Housing Developments (rent set at 30% of income)</p>	<ul style="list-style-type: none"> • Deerview Park: 48 units • Placerville Apartments: 84 units • Shingle Springs Apartments: 12 units • Sierra Gardens: 76 units • Diamond Sunrise: 42 units, seniors only • Eskaton Lincoln Manor: 100 units, seniors only • Sunrise Garden: 67 units, seniors only • Tahoe Senior Plaza: 45 units, seniors only
<p>Temporary Housing</p>	<p>Emergency Shelter</p>	<ul style="list-style-type: none"> • There are no year-round low-barrier emergency shelter beds in El Dorado County • Total 125 seasonal and population-specific shelter beds. • Housing El Dorado: Pathways: 20 Seasonal emergency shelter overnight beds. • El Dorado County Health and Human Services: CalWORKs Housing Assistance: 10 emergency housing assistance beds for families with children who qualify for CalWORKs.
	<p>Transitional Housing</p>	<ul style="list-style-type: none"> • Christ Like Services: Transitional House and Housing Emergency Lodging Program (HELP): Assists local homeless individuals and their families to secure temporary emergency shelter with 19 beds total.
<p>Sub-population beds</p>	<p>Transition Age Youth</p>	<ul style="list-style-type: none"> • Tahoe Youth and Family Services (TYFS) master-leases one apartment as transitional housing for TAY and is in the process of acquiring additional units. TYFS also runs a host homes program in three homes and is looking to expand. • Tahoe Youth and Family Services: limited number of transitional housing and emergency shelter beds reserved for Transition Age Youth. • New Morning: 12 youth shelter beds. • Whole Person Learning: Housing Opportunities Providing Experience (HOPE). 1 transitional housing bed along with intensive life skills support for young adults that have emancipated from court ordered foster or group home care.

		<ul style="list-style-type: none"> • Whole Person Learning: 5 rapid rehousing subsidies
	Domestic Violence Survivors	<ul style="list-style-type: none"> • Living Violence Free: 25 total transitional housing beds for survivors of domestic violence and their children. Drug, alcohol and tobacco-free transitional housing. • The Center for Violence Free Relationships: 18 emergency shelter beds for domestic violence survivors.
	Families with children	<ul style="list-style-type: none"> • Mother Teresa Maternity Home: 6 beds for pregnant adult women or emancipated minors. Drug and alcohol-free program. Provides support through pregnancy and connects residents with medical care, mental health counseling, sobriety support and other opportunities.
Street Outreach	<ul style="list-style-type: none"> • Front Door Coordinated Entry System, Law Enforcement, including from the El Dorado County Sheriff’s Department (EDSO) & both local Police Departments, El Dorado County, and both local hospitals all have various outreach components. Additionally, some outreach is being done by smaller faith-based and community-based nonprofit organizations assisted by community volunteers. 	
Behavioral Health Services	<ul style="list-style-type: none"> • El Dorado County Behavioral Health: 12 Permanent Supportive Housing Beds for those with mental health disabilities under the Mental Health Services Act (MHSA). 	
Prevention & Diversion Programs		<p>Tahoe Coalition for the Homeless: limited diversion funding and services to connect clients with families.</p> <p>Only Kindness: offers limited prevention and diversion services and financial assistance.</p> <p>CalWORKs: prevention and diversion financial assistance.</p>
Veteran Services		<ul style="list-style-type: none"> • Public Housing Authority: 7 permanent supportive housing bed for Veterans • Volunteers of America: SSFV Veterans rapid rehousing. Currently assisting 5 people.

		<ul style="list-style-type: none"> • Only Kindness: supportive services and limited financial assistance for Veterans and Veterans' families.
<p>Re-entry Services</p>	<ul style="list-style-type: none"> • The El Dorado County Probation Department offers Rapid Rehousing to justice system involved individuals and recently opened a six-bed transitional home to help justice-involved individuals experiencing homelessness or at-risk of homelessness. 	