



AGENDA

Cloverdale Homelessness Community Advisory Group Meeting No. 3

Date: Tuesday, April 13, 2021

Time: 1:00-3:30 pm

Location: Virtual

-IMPORTANT-

THIS MEETING WILL NOT BE PHYSICALLY OPEN TO THE PUBLIC, THE MEETING WILL BE BROADCASTED VIA TELECONFERENCING OR OTHER ELECTRONIC MEANS

In order to minimize the spread of the COVID 19 virus, this Regular Meeting will be conducted pursuant to the provisions of the Governor's Executive Order N-29-20, which suspended certain requirements of the Brown Act.

All Members of the advisory group will be participating in the meeting remotely via teleconferencing or other electronic means consistent with Executive Order N-29-20. If you would like to provide public comment, we encourage you to submit them via email to the City Clerk: iwerby@ci.cloverdale.ca.us.

Please refer to the end of the agenda for instructions on how to view the meeting and provide public comment using Zoom: <https://us02web.zoom.us/j/88014108253> Web ID: 880 1410 8253

Meeting Convener: City of Cloverdale


TIME	Topics
1:00-1:15	Welcome from Vice-Mayor Cruz and Councilmember Lands <ul style="list-style-type: none">• Introductions of Community Advisory Group Members
1:15-1:45	Update on Recent Court Decisions regarding Homelessness <ul style="list-style-type: none">• Update by Meyers-Nave City Attorney Alex Mog
1:45-2:15-	Update on Northern Sonoma County Homelessness Task Force
2:15-2:30	Update from Police Chief Ferguson on Police Response to Homelessness

2:30-3:15	<p>Recap/Overview of Draft Strategic Plan Goals #1-7:</p> <ul style="list-style-type: none"> • Vision for Success • Guiding Principles, Goals and Performance Measures in the Framework <ol style="list-style-type: none"> 1. Identification of major strategies (actions) to reduce the number of people experiencing homelessness in Cloverdale (Goal #1) 2. Prevent and mitigate public health and safety impacts stemming from homelessness (Goal #2). 3. Consider Programs to prevent homeless among residents (Goal #3) 4. Outreach and Supportive Services to homeless individuals and families in need of assistance (Goal #4) 5. Increase community awareness of the homeless initiative (Goal #5), 6. Advocate for legislative and program to strengthen Cloverdale efforts (Goal #6) 7. Develop governance infrastructure to facilitate implementation of the Strategic Plan (Goal #7).
2:30-3:15 (Continued)	<p>For Goal #1 - 7, determine the following:</p> <ol style="list-style-type: none"> 1. Supporting actions to take to implement the goals 2. Populations to target for each action 3. Organizations that need to be involved to provide or support these actions 4. Resources needed to implement actions <p>Timeline and Performance metrics: Identify timeframe for action steps and how the success of each action will be measured).</p>
3:15	Public Comments
3:30	<p>Next steps:</p> <ul style="list-style-type: none"> • Next Meeting: May 11, 2021 - 1:00-3:30 pm Location: Via Teleconference Through the Use of Zoom

IMPORTANT NOTICE REGARDING THIS ADVISORY GROUP MEETING

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In order to minimize the spread of the COVID 19 virus, please do the following:

- Attendees may join the meeting through the use of Zoom at: <https://us02web.zoom.us/j/88014108253>
Webinar ID: 880 1410 8253 or by **Telephone 1+ (669) 900-6833** and entering **Webinar ID: 880 1410 8253**
- Attendees will be muted until they are called upon for Public Comment. To make a public comment, use the “raise hand”  icon on your smart device or desktop computer, or dial *9 if you are using just your telephone. Please listen carefully for the Chair or City Clerk to address you by name (or phone number) and for the audible Zoom notification that you have been unmuted. Once you begin your public comment, your three (3) minutes will begin.
- If you would prefer to submit public comment in writing, please email your comments to iverby@ci.cloverdale.ca.us. If you are commenting on a specific agenda item or items, please state the agenda item number(s) in the subject line of the email. All comments received via email will be provided to the Advisory group in writing and included as a part of the record of the meeting.

The City of Cloverdale thanks you in advance for taking all precautions to prevent spreading the COVID 19 virus.

CERTIFICATION – Pursuant to Government Code § 54954.2, the agenda for this meeting was properly posted on or before 1 p.m., 04/09/21.



Northern Sonoma County Strategic Plan to End Homelessness July 1, 2021-June 30, 2026

Developed by the Northern Sonoma County Homelessness Planning Task Force

DRAFT #3, March 23, 2021

Scope of Homelessness in Northern Sonoma County

According to the 2020 Sonoma County Homeless Census & Survey, there are 209 individuals identified as homeless in Northern Sonoma County, an area that includes Cloverdale, Healdsburg, Windsor, and the unincorporated area of the county. Of those 209 individuals, 205 are unsheltered and 4 are sheltered in transitional housing. The locations of where these individuals were identified during the February 2020 Point in Time Count include the following:

Northern Sonoma County Location Where People Experiencing Homelessness were Identified in January 2020	Number of People Experiencing Homelessness Identified in January 2020
Healdsburg	69
Cloverdale	33
Windsor	38
Unincorporated Area of Northern Sonoma County	69
TOTAL	209

NOTE: No Sonoma County Homeless Census & Survey was conducted in 2021 because of COVID

Causes of Homelessness

According to the National Alliance to End Homelessness, there are four leading causes of homelessness nationwide. These nationwide causes of homelessness also apply to the Northern Sonoma County homeless population and include the following:

1. **Housing is out of reach:** There is a lack of housing that low income people can afford, especially in Sonoma County where median home prices approximate \$700,000 and two-bedroom, one-bath rentals cost roughly \$2,000 per month. Without housing options, people face eviction, instability, and homelessness.
2. **Low income:** Low-income households are typically unemployed or underemployed due to several factors, such as limited education; a gap in work history; a criminal record; unreliable transportation; unstable housing; poor health or a disability.
3. **Health conditions:** An acute physical or behavioral health crisis, substance addiction, or any long-term disabling condition may lead to homelessness.
4. **Domestic violence:** Survivors seek a safe temporary place to stay after fleeing an abusive relationship or may turn to homeless service programs because they lack the economic resources to secure or maintain housing after leaving an abusive relationship.

Solutions to Homelessness

Current research indicates that there are five major solutions for ending homelessness. These solutions include the following:

1. **A Coordinated Approach:** A community-wide coordinated approach to delivering services, housing, and programs is essential. This approach includes coordinated entry—a process designed to quickly identify, assess, refer, and connect people in crisis to housing and assistance, no matter where they ask for help. Planning is a key component of a coordinated approach and includes establishing goals, processes, and timelines for implementing strategies to end homelessness. A coordinated approach also includes collecting and examining local data to inform decisions about how to effectively allocate resources, services, and programs. For a coordinated approach to be successful, there must be a shared data system that can be used by providers of homeless services and funding agencies and performance measurement and evaluation of homeless services.
2. **Housing/Rapid Re-Housing:** *Housing/rapid re-housing is the primary solution for ending homelessness.* Rapid re-housing provides short-term rental assistance and services. The goals of rapid re-housing are to help people obtain housing quickly, increase self-sufficiency, and stay housed. It is offered without preconditions (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided are typically tailored to the needs of the person. Through rapid re-housing, which is effective in getting people into permanent housing and keeping them housed, people are homeless for shorter periods of time than those assisted with shelter or transitional housing. By connecting people with a home, they are in a better position to address other challenges that may have led to their homelessness, Rapid re-housing is also effective for people perceived to be more difficult to serve, including people with limited or no income and survivors of domestic violence.
3. **Permanent Supportive Housing (PSH):** PSH is a proven solution to homelessness for the most vulnerable chronically homeless people. PSH pairs housing with case management and supportive services. It builds independent living and tenancy skills and connects people with community-based health care, treatment, and employment services. The benefits of PSH include increased housing stability and improved health for the most vulnerable individuals experiencing homelessness. Since 2007, the implementation of PSH has decreased the number of chronically homeless individuals in the U.S. by 26% percent.
4. **Increase Income and Income Supports:** Many housing crises are caused by a financial crisis. Increasing and stabilizing income is a primary goal of many homeless assistance programs. Government-funded income support programs help many people weather economic crises. However, most people experiencing homelessness find these programs to be inaccessible and the benefits offered may be insufficient to help them achieve stability. Although some people exiting homelessness leave with a permanent rent subsidy to buffer effects of income fluctuations, the majority must depend on income from employment or benefits to help them pay rent. Having access to childcare and transportation assistance is often critical to enabling people experiencing homelessness to sustain their employment.
5. **A Crisis Response System:** Having an effective crisis response system enables the community to identify and quickly connect people who are experiencing homelessness or who are at risk of experiencing homelessness to housing assistance and other support services. Through a crisis response system, communities, programs, and services are aligned with a common goal of making homelessness rare, brief, and nonrecurring.

Northern Sonoma County's Goal for Ending Homelessness

Through a Housing First¹ approach, the communities of Northern Sonoma County will collaborate by implementing a crisis response system to identify and quickly connect people who are experiencing homelessness and who are at risk of experiencing homelessness to housing assistance and other services that will result in functional zero homelessness² by June 30, 2026.

Strategies for Ending Homelessness in Northern Sonoma County

Between July 1, 2021 and June 30, 2026, the communities of Cloverdale, Healdsburg, and Windsor and the unincorporated areas of Northern Sonoma County will work together to implement the following six major strategies for ending homelessness in Northern Sonoma County:

1. **Engage community members, including residents, businesses, nonprofits, the faith community, and government officials, as partners** in solving the homelessness crisis through continuous dialogue about the homeless population's characteristics, needs, and solutions to their homelessness.
2. **Conduct street outreach and street medicine** to identify and engage people living in unsheltered locations and on the streets to connect them to stable housing and tailored, person-centered services and supports of their choice, including health and behavioral health care, transportation, access to benefits, and more.
3. **Continue to implement Coordinated Entry** to efficiently match people experiencing homelessness with available housing via a low barrier streamlined system, a key component of Housing First, that prioritizes those facing the highest vulnerability and provides crucial information to help Northern Sonoma County communities strategically allocate resources and identify gaps in service.
4. **Provide homelessness prevention assistance** to enable households to preserve their current housing situation **and diversion services** to help prevent homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with appropriate person-centered services.
5. **Provide immediate, low-barrier access to emergency shelter and interim housing**, as a step to permanent housing, for individuals facing a housing crisis.
6. **Connect people experiencing homelessness with permanent housing programs**, such as rapid re-housing, permanent supportive housing, and other stable housing options.

¹ Housing First is an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to addressing predetermined treatment goals prior to permanent housing entry (HUD Exchange, 2018).

² Functional zero is reached when the number of individuals who are homeless, whether sheltered or unsheltered, is no greater than the monthly housing placement rate for individuals experiencing homelessness.

Implementing Strategies for Ending Homelessness in Northern Sonoma County

The communities of Northern Sonoma County will collaborate to implement the following tactics to support the six identified major strategies for ending homelessness in Northern Sonoma County:

1. Engage community members, including residents, businesses, nonprofits, the faith community, and government officials, as partners in solving the homelessness crisis through continuous dialogue about the homeless population's characteristics, needs, and solutions to their homelessness.

A. Tactics

- i. Develop simple, high level documentation (talking points, frequently asked questions, flow charts, etc.) to widely share with community members on an on-going basis describing the homeless population in Northern Sonoma County, what the communities in Northern Sonoma County are doing to address the needs of the homeless population, success stories, and how community members can collaborate with service providers to become engaged to help solve the issues of homelessness.
- ii. Develop an asset map describing the services that are available locally to serve individuals experiencing homelessness and how to access these resources.
- iii. Conduct presentations at community-based organizations, including schools, veterans' groups, faith-based organizations, service groups, etc.; health fairs; and other community events that describe the Northern Sonoma County homeless population and their needs and the work that is happening in Northern Sonoma County to end homelessness.
- iv. Provide coordinated volunteer opportunities through homeless service providers and faith-based organizations for community residents to engage with community members experiencing homelessness, including providing meals, donating personal services, making financial contributions to homeless service providers, participating in United Way Days of Caring, and accompanying street outreach teams that work directly with homeless individuals, as a way for community members to gain a deeper understanding of Northern Sonoma County's homeless population and their needs.
- v. Conduct a regionwide outreach campaign to raise awareness of local issues related to homelessness, to humanize the homeless population, and to encourage landlords to make housing available for the homeless. Outreach methods could include the use of billboards, bus signs, Supervisor Gore's video posts, social media, series of newspaper ads underwritten by banks and other businesses, direct outreach to residents via mail and phone, positive media placements, and working with the Public Information Office from the Sonoma County Sheriff's Office. This will help the community develop a *common language* regarding the population experiencing homelessness
- vi. Engage with local employers willing to hire people experiencing homelessness and connect homeless individuals with appropriate local job opportunities.

B. Lead organization(s)

- i. Reach for Home
- ii. Supervisor Gore
- iii. Local elected officials

C. Collaborating organizations and individuals

- i. Sonoma County Sheriff's Department Public Information Officer
- ii. Alliance Medical Center
- iii. Alexander Valley Health Center
- iv. Homeless service providers
- v. Civic organizations/service clubs
- vi. Faith-based organizations
- vii. Community influencers and champions
- viii. Sonoma County Sheriff's Department Public Information Officer
- ix. Local media
- x. Banks to help underwrite marketing and provide volunteers
- xi. Local chambers of commerce
- xii. Sonoma County Economic Development Board
- xiii. Libraries

D. Performance Metrics

- i. Increase in philanthropic funding to partnering community-based organizations
- ii. Public feedback provided to Supervisor Gore's office
- iii. Polling on public's attitudes toward individuals experiencing homelessness
- iv. Social media surveying regarding types of comments about issues related to homelessness
- v. Roundtable discussions/small group discussions to assess public perception regarding issues related to homelessness

E. Funding needs/sources

- i. Compensation for a dedicated Public Information Officer/Outreach Specialist
- ii. Advertising
- iii. Cost to conduct community meetings
- iv. Interns from Sonoma State University and/or Sonoma County Economic Development Board
- v. Private, philanthropic funding from individuals, businesses, and foundations
- vi. Funding from Transient Occupancy Taxes (TOT) distributed through the Sonoma County Community Investment Fund Program

- 2. Conduct street outreach and street medicine** to identify and engage people living in unsheltered locations and on the streets to connect them to stable housing and tailored, person-centered services and supports of their choice, including health and behavioral health care, transportation, access to benefits, and more.

A. Tactics

- i. Create a comprehensive community outreach approach, based on successful national models, that is connected to coordinated entry processes and incorporates various providers engaged in ending homelessness, including nonprofits, law enforcement, and local government.

- ii. Identify an eight-member service team comprised of dedicated service team members (two people per community and two medical team members) who are capable of building relationships with unsheltered individuals that will lead to their willingness to return to stable community living in safe and affordable housing, supported by person-centered services, as needed. This team can serve as a Rapid Response Team in emergency situations.
- iii. Provide a new mobile van with WIFI to support the outreach team in addressing the comprehensive needs of unsheltered people experiencing homelessness.
- iv. Connect the Russian Riverkeeper Clean Camp Program, St. Vincent de Paul Homeless Court and vehicle registration program, and expungement programs/On the Road Again provided by the Sonoma County Public Defender's Office to outreach efforts.
- v. Provide trauma-informed support for staff and volunteers of service organizations that serve the homeless population to help them manage the stress associated with street outreach and providing homeless services.

B. Lead organization(s)

- i. Reach for Home
- ii. Russian Riverkeeper

C. Collaborating organizations

- i. Sonoma County Sheriff's Department
- ii. Sonoma County Public Defender
- iii. St. Vincent de Paul
- iv. Homeless service providers
- v. Mental health and substance abuse service providers
- vi. COTS
- vii. Catholic Charities
- viii. Local chambers of commerce

D. Performance Metrics

- i. Number of people connected to health, mental health, substance abuse treatment
- ii. Number of people connected to shelter and/or interim housing
- iii. Number of people permanently housed
- iv. Amount of time between initial contact with homeless individuals to housing placement
- v. Number of contacts made with homeless individuals prior to them agreeing to receive services

E. Funding needs

- i. Funding to adequately resource a comprehensive street outreach and street medicine initiative
- ii. Funding for transportation for the street outreach team to be able to contact people where they are located
- iii. Funding for an eight-member dedicated service team
- iv. Long-term sustainable funding for Reach for Home that includes adding four additional staff members

3. **Continue to implement Coordinated Entry** to efficiently match people experiencing homelessness with available housing via a low barrier streamlined system, a key component of Housing First, that prioritizes those facing the highest vulnerability and provides crucial information to help Northern Sonoma County communities strategically allocate resources and identify gaps in service.

A. Tactics

- i. Identify the number and type of coordinated entry sites needed to effectively serve the needs of people experiencing homelessness and ensure that there is an adequate number of sites in the coordinated entry network that offer privacy where vulnerable people seek community services.
- ii. Train dedicated, consistent staff at all designated coordinated entry sites on the benefits of Coordinated Entry, Housing First principles, how to assess individuals experiencing homelessness, referral protocols, and methods for entering data into the Sonoma County Homeless Management Information System (HMIS).
- iii. Inform the community about Coordinated Entry processes, how Coordinated Entry is implemented throughout Sonoma County to serve the most vulnerable individuals experiencing homelessness, and the role of local service providers in serving individuals experiencing homelessness through Coordinated Entry.

B. Lead organization(s)

- i. Reach for Home
- ii. Catholic Charities—Coordinated Entry
- iii. CDC--HMIS

C. Collaborating organizations

- i. Alliance Medical Center
- ii. Alexander Valley Health Care
- iii. Healdsburg Hospital
- iv. Faith-based organizations
- v. Corazon Healdsburg
- vi. Libraries
- vii. Local government facilities

D. Performance Metrics

- i. Number of individuals assessed via the VI-SPDAT
- ii. Number of individuals entered into HMIS
- iii. Number of qualified coordinated entry sites (currently Reach for Home is the only official CE site; CE at St. Peter Catholic Church in Cloverdale ended when COVID restrictions started)
- iv. Number of individuals trained to conduct coordinated entry and administer the VI-SPDAT
- v. Number of individuals connected to permanent housing

E. Funding needs

- i. Funding to staff adequate number of coordinated entry sites
- ii. Outreach to the community about what coordinated entry is and the need for organizations to provide additional coordinated entry sites

4. **Provide homelessness prevention assistance** to enable households to preserve their current housing situation **and diversion services** to help prevent homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with appropriate person-centered services. (Will discuss this during the April 29, 2021 Task Force meeting)

A. Tactics

- i. Assess individuals at risk of becoming homeless and provide the most appropriate interventions to connect them with services and financial assistance to help them maintain their current housing situation or return them to permanent housing.
- ii. Ensure that local ordinances and public policies are in place that help people preserve their current housing situation.
- iii. Identify local vulnerable housing stock to be converted to market rate to enable families to remain housed.
- iv. Partner with a local financial institution to establish a flexible spending account to which individuals, organizations, and government agencies can contribute to provide financial assistance to be used to prevent vulnerable populations from becoming homeless.

B. Lead organization(s)

- i. Reach for Home
- ii. Local government agencies
- iii.

C. Collaborating organizations

- i.
- ii.
- iii.

D. Performance Metrics

- i.
- ii.
- iii.

E. Funding needs

- i. Cash for rent and utilities to help people preserve their current housing situation (currently need at least \$100,000/year in cash assistance)
- ii.
- iii.

5. **Provide immediate, low-barrier access to emergency shelter and interim housing**, as a step to permanent housing, for individuals facing a housing crisis. (Will discuss this during the April 29, 2021 Task Force meeting)

A. Tactics

- i. Continue to provide a winter shelter to accommodate at least 30 individuals per night.
- ii. Convert units that become vacant in each of Reach for Home's housing facilities in all three communities to flexible units to be used for emergency shelter, medical respite, and/or detoxification that can ultimately be converted to a Permanent Supportive Housing (PSH) units or Rapid Re-Housing units depending on an individual's needs.
- iii. Over a five-year period, develop 100 flexible units within existing housing facilities that can be used for emergency shelter, medical respite, detox, and PSH, depending on individual need.
- iv. Explore the possibility of providing an indoor-outdoor shelter facility (similar to the Courtyard model at San Antonio's Haven for Help) to accommodate individuals who have been unsheltered for a long period of time who may not be ready to commit to staying in a sheltered environment.
- v. Explore the possibility of purchasing FEMA travel trailers to house homeless individuals.

B. Lead organization(s)

- i. Reach for Home
- ii.
- iii.

C. Collaborating organizations

- i. Hospitals
- ii. Burbank Housing/other housing developers
- iii.

D. Performance Metrics

- i.
- ii.
- iii.

E. Funding needs

- i.
- ii.
- iii.

- 6. Connect people experiencing homelessness with permanent housing programs**, such as rapid re-housing, permanent supportive housing (PSH), and other stable housing options. (Will discuss this during the April 29, 2021 Task Force meeting)

A. Tactics

- i. Over a five-year period, develop 20 PSH units per year, for a total of 100 units throughout all three communities and in the unincorporated areas (25% in each of the four designated areas).
- ii. Acquire existing housing stock.
- iii. Re-purpose existing housing stock (Additional Dwelling/Junior Units).

B. Lead organization(s)

- i. Reach for Home
- ii.
- iii.

C. Collaborating organizations

- i. Housing developers
- ii.
- iii.

D. Performance Metrics

- i.
- ii.
- iii.

E. Funding needs

- i. Need \$50,000 per unit = \$5 million
- ii.
- iii.