



SAN DIEGO
HOUSING
COMMISSION

INFORMATIONAL REPORT

DATE ISSUED: September 15, 2020

REPORT NO: HCR20-076

ATTENTION: Chair and Members of the San Diego Housing Commission
For the Agenda of September 18, 2020

SUBJECT: June and July 2020 Reporting Update for City of San Diego's
Housing Navigation Center

NO ACTION IS REQUIRED ON THE PART OF THE HOUSING COMMISSION

SUMMARY

The Housing Authority of the City of San Diego (Housing Authority) and San Diego City Council (City Council) require the San Diego Housing Commission (Housing Commission) to provide “regular reports on the performance of the Housing Navigation Center” (Housing Authority Resolution HA-1793), which will be provided in a monthly Informational Report at regularly scheduled Housing Commission Board meetings.

BACKGROUND

As part of the City of San Diego's (City) comprehensive approach to addressing homelessness and the Mayor's vision to increase the resources within the City's Homeless Crisis Response System and support regional efforts to ensure instances of homelessness are rare, brief and non-recurring, the City's Housing Navigation Center (HNC) was envisioned to serve as an entry point for the Coordinated Entry System (CES), provide core services to address housing crises, and help participants access a range of mainstream services that impact housing stability.

As the HNC operator, Family Health Centers of San Diego provides on-site intake, assessment, triage and referrals for permanent and longer-term housing opportunities. They assist individuals experiencing homelessness to identify immediate housing solutions, provide crisis management, access mainstream benefits important to addressing issues impacting housing stability, and work with partnering agencies to link individuals to permanent housing and supportive service programs. On January 14, 2020, the Housing Authority approved Resolution HA-1849 to extend the initial contract term of the operating agreement with Family Health Centers of San Diego to June 30, 2020, to align the contract term with the Housing Commission's and City of San Diego's Fiscal Year. The resolution also authorizes the first option to extend the term of the agreement with Family Health Centers of San Diego for a six-month term, from July 1, 2020, through December 31, 2020, to provide a continuation of services under the agreement, contingent on the City making funds available for such purpose during the City of San Diego Fiscal Year 2021 budgeting process and approval.

MONTHLY REPORTING SUMMARY – JUNE AND JULY 2020

The information below provides an overview of data reported by Family Health Centers of San Diego to the Housing Commission and captured in both the San Diego Regional Continuum of Care's Homeless Management Information System (HMIS) and Family Health Centers' internal database

applications. Data included in this report summarizes services delivered on-site and in the field via street outreach efforts. It also provides both a longer-term picture of the population served since operations began and a summary of activities specifically conducted during the reporting months of June and July 2020.

The HNC on-site program opened on December 3, 2019. Months in advance of the physical site’s opening, the HNC’s team of Navigators began conducting street outreach efforts to engage unsheltered individuals in the field, starting in April 2019. Tables one through eight below include demographics and other data that describe the population served through all program services as of July 31, 2020, including services delivered via outreach efforts since they began in April 2019 and services delivered on-site since it opened in December.

A total of 1,360 individuals have accessed on-site or outreach services through the HNC program as of July 31, 2020.

Tables one and two include additional demographics of the population served through all program services as of July 31, 2020.

Table One: Age Distribution of All Persons Served by HNC Outreach (April 1, 2019 – July 31, 2020) and HNC On-Site Services (December 3, 2019 – July 31, 2020)

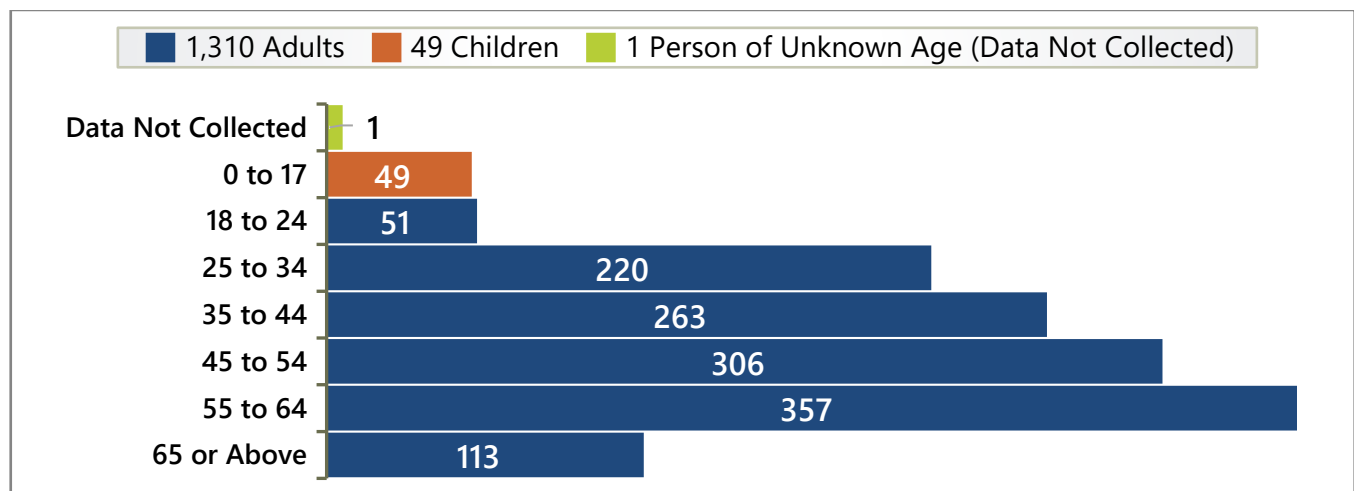
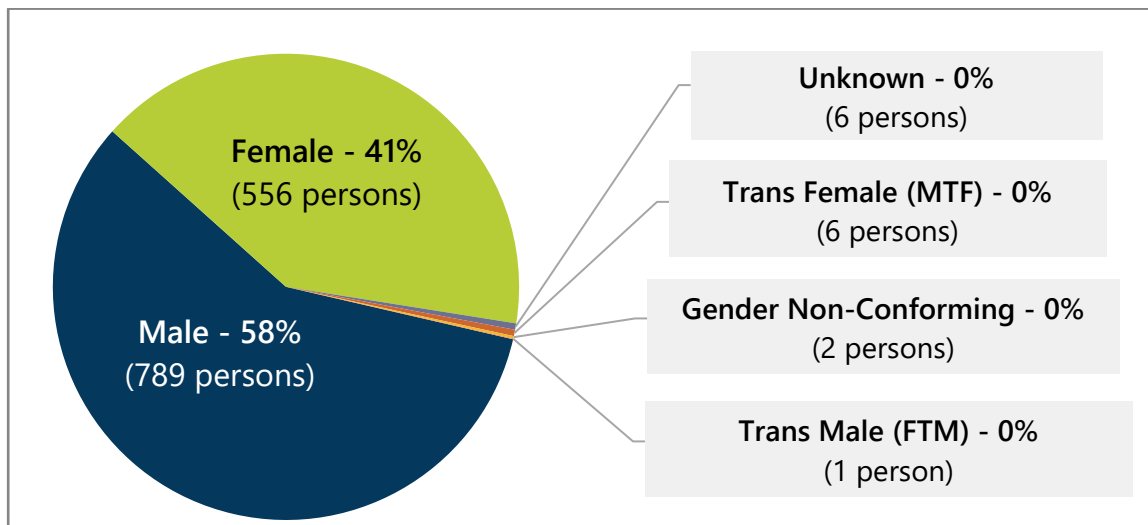


Table Two: Gender of All Persons Served by HNC Outreach (April 1, 2019 – July 31, 2020) and HNC On-Site Services (December 3, 2019 – July 31, 2020)



Tables three and four summarize information on the race and ethnicity of persons who accessed the HNC’s outreach and on-site services. This information was collected through two questions required as part of data collection in HMIS, which asks respondents to report their race from a list of five standardized responses and their ethnicity from a list of two standardized responses. The table below summarizes responses to both of those questions for persons served by the HNC.

Table Three: Racial Demographics of All Persons Served by HNC Outreach (April 1, 2019 – July 31, 2020) and HNC On-Site Services (December 3, 2019 – July 31, 2020)

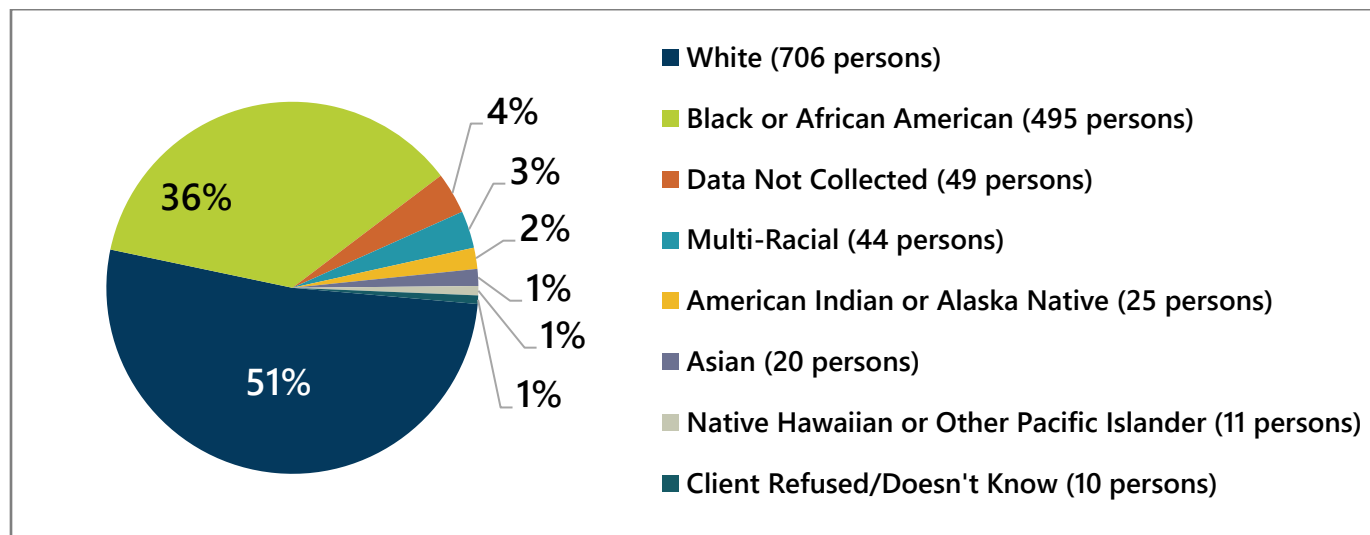


Table Four: Ethnic Demographics of All Persons Served by HNC Outreach (April 1, 2019 – July 31, 2020) and HNC On-Site Services (December 3, 2019 – July 31, 2020)

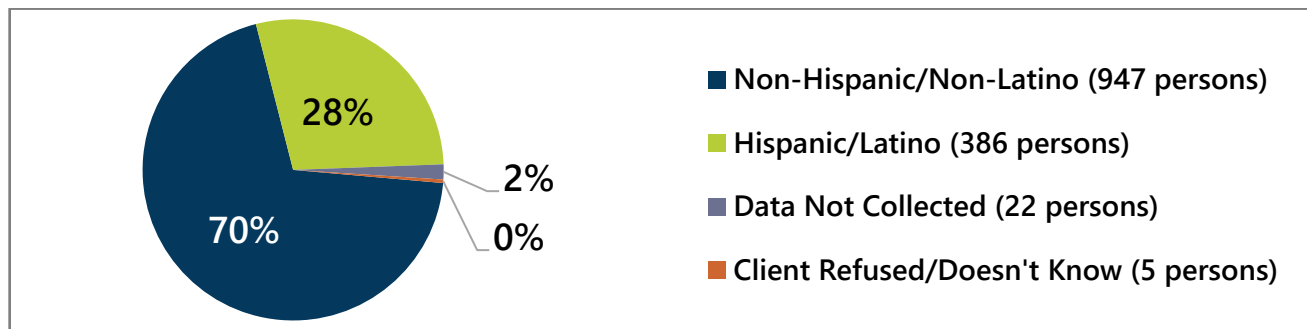
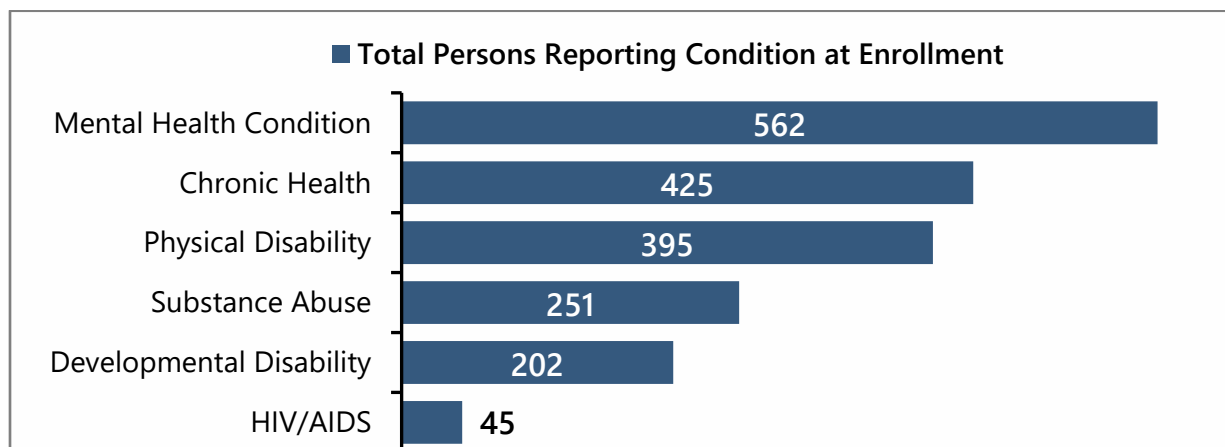


Table five describes the disabilities and health conditions that persons served on-site and via outreach reported upon enrollment. This data is based only on self-reported responses to a standard set of questions required as part of enrollment in HMIS, which includes six questions that ask participants to identify whether they experience specific disabilities and health conditions. Responses are not representative of the diagnosed conditions of all persons served by the HNC, given the specific set of potential responses and the self-reported nature of the information.

A total of 835 persons, or 61 percent of all persons served, reported one or more current disabilities or health conditions. Of those who reported a disability or health condition, 92 percent (767 persons) expected one or more of those conditions to be of “long-continuing or indefinite duration” and reported that they “substantially impair their ability to live independently¹.” A total of 402 persons, or 30 percent of all persons served, met the criteria to be considered chronically homeless based on available HMIS data history.

Table Five: Disabilities and Health Conditions Reported by Persons Served by HNC Outreach (April 1, 2019 – July 31, 2020) and HNC On-Site Services (December 3, 2019 – July 31, 2020)



¹ This language is included among HMIS intake questions regarding disabilities and health conditions and references this sample intake form provided by BitFocus (the vendor that distributes Clarity, San Diego’s HMIS software) and found here: <https://bitfocus.app.box.com/v/CoC-Intake-HMIS-2020>

The HNC serves as an access point for the Coordinated Entry System (CES), the coordinated process through which housing resources dedicated to persons experiencing homelessness in San Diego County's Continuum of Care are prioritized and referred to housing resources. Navigators follow the Continuum of Care's guidance and complete necessary steps to connect clients with the CES process. Those steps include - when deemed appropriate - completing the CES Triage Tool with clients.

The Triage Tool includes the Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT) assessment, which evaluates vulnerability in a number of key domains related to a client's physical and mental health, housing needs and identified risks. The client's VI-SPDAT assessment score provides information on vulnerability that informs the prioritization for housing resources provided through CES.

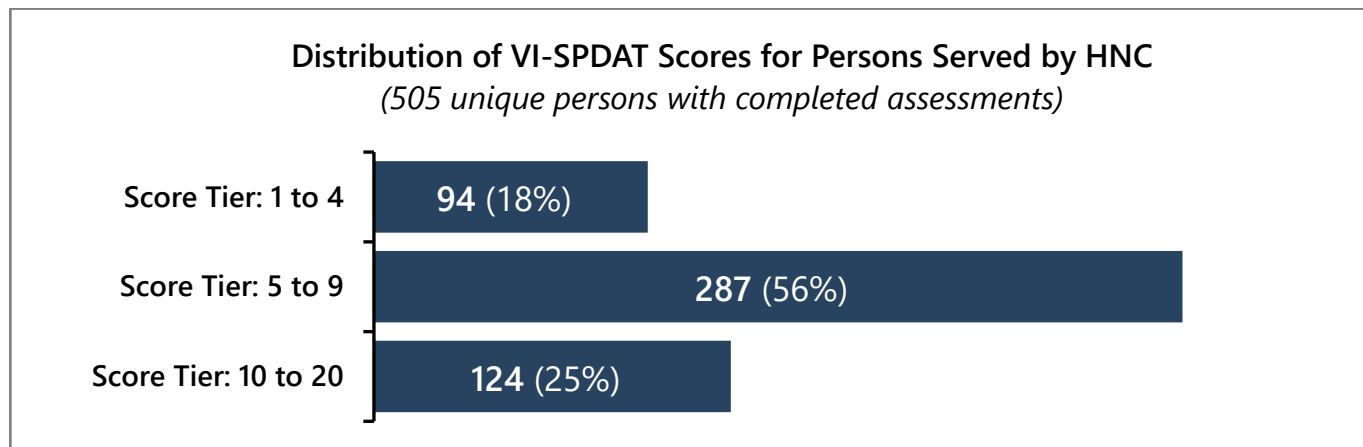
The table below summarizes the distribution of VI-SPDAT assessment scores for all participants who have received HNC services as of July 31, 2020, who also have VI-SPDAT assessment scores, including clients served via street outreach efforts and clients served via on-site services.

Please note, the regional approach to triage assessments for coordinated entry no longer recommends that all persons engaging in homeless services and entered into HMIS should immediately be administered the VI-SPDAT. Therefore, the number of persons receiving services at the HNC will not match the number of persons with a VI-SPDAT score. As the regional approach to coordinated entry continues to evolve, Housing Commission staff will determine the most appropriate data points to report on to reflect participant demographics in relation to level of need; therefore, reported data points may change over time.

The tiers of VI-SPDAT scores included in the following chart are intended to indicate general acuity and needs of persons assessed using the assessment tool:

- Individuals scoring within tier one to four are anticipated to need minimal to no intervention to transition into permanent housing independently.
- Individuals scoring within tier five to nine are anticipated to need moderate supportive services and short- to longer-term housing subsidy resources to successfully transition to permanent housing.
- Individuals scoring within tier 10 or above may need longer-term or permanent supportive housing with wraparound services to achieve long-term housing stability.

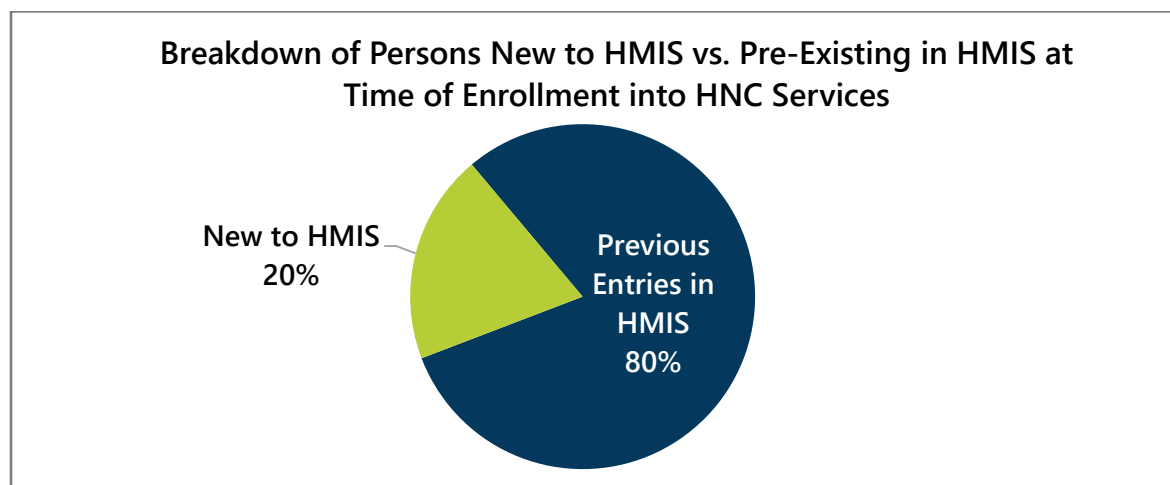
Table Six: Distribution of VI-SPDAT Assessment Scores for Persons Served by HNC Outreach (April 1, 2019 – July 31, 2020) and HNC On-Site Services (December 3, 2019 – July 31, 2020)



As part of Family Health Centers’ agreement to operate the HNC, they are required to collect and record data on persons they serve in HMIS. HMIS data helps inform the City’s and County’s system-wide understanding of San Diego’s homeless population and homeless service system. It also serves as a historical record of a client’s needs and services, facilitating coordination between San Diego’s homeless service providers and informing a client-centered approach. Additionally, having an assigned unique identifier in HMIS is needed for a person experiencing homelessness to be considered to receive a potential referral to housing through the Coordinated Entry System.

Among the 1,360 participants who have been served through HNC outreach or on-site services since services began, 20 percent were new to HMIS at the time they enrolled in HNC services. The proportion of participants new to HMIS upon enrollment has gone up by 4 percent since the June report, which indicates that a slightly larger proportion of clients enrolling in services in the last several months are new to the homeless service system.

Table Seven: Proportion of Persons New to HMIS vs. Pre-Existing in HMIS at Time of Enrollment into HNC On-Site Program or HNC Outreach Program



Summary of HNC On-Site Services and Activities

The HNC began serving clients on-site on December 3, 2019. The site's standard operating schedule is Monday through Friday from 7 a.m. to 7 p.m. and Saturday and Sunday from 8 a.m. to 12 p.m. However, on April 2, 2020, the Housing Commission approved a modified schedule and operating procedure, proposed by Family Health Centers in response to the COVID-19 pandemic, which reduced operating hours to Monday through Friday from 8 a.m. – 5 p.m.

In addition to modifying the program's operating schedule, Family Health Centers implemented a number of measures in April to minimize the potential for transmission of COVID-19 among program participants and HNC staff while continuing to maximize access to program services. These measures remained in place during May, June and July 2020 to continue ensuring the safety of those providing services at the HNC as well as those receiving services.

Measures that remained in place during June and July 2020 included (but were not limited to):

- Screening all clients upon entry to the site for symptoms of COVID-19 and referring symptomatic clients to appropriate medical care;
- Ensuring appropriate use of Personal Protective Equipment for staff and program participants;
- Ensuring social distancing guidelines were complied with during any in-person interactions;
- Converting in-person interactions between HNC staff and program participants to telephone interactions when possible and providing participants access to an on-site phone in the lobby of the site to facilitate telephone interactions;
- Working with the County of San Diego to distribute information and hygiene kits to HNC participants and unsheltered clients residing near the HNC program site.

While service delivery has continued to be impacted by the pandemic, the HNC has continued to serve participants while maintaining the aforementioned measures to protect staff and client safety.

During June and July 2020, 464 persons were actively enrolled in HNC on-site services.² A total of 398 persons, 86 percent of those actively enrolled, have been connected to a Housing Navigator. Sixty-six persons were still actively enrolled but have not yet been connected to a Housing Navigator. Persons not yet connected to a Housing Navigator accessed the site to learn more about services provided, seek information about specific partners or referrals available or inquire about other basic services provided but have not yet engaged with a Housing Navigator. The intention of the program is to continue to engage persons accessing the site until they are willing to engage in Housing Navigation and Case Management services.

The following table summarizes data on services provided during June and July 2020.

² "Actively enrolled" signifies that client had been enrolled in the program during or prior to the reporting month of June and July 2020 and that they had not yet been exited from services as of the end of the reporting month.

Table Eight: Summary of On-Site HNC Services during June and July 2020

Summary of Services Provided On-Site at the HNC (June 1, 2020 – July 31, 2020)	
Total Persons Actively Enrolled in HNC On-Site Services during June-July 2020	464
Participants Connected to a Housing Navigator (among total active during June and July 2020)	398
Number of Participants not yet connected to a Housing Navigator (among total active in June and July 2020)	66
Participants Connected to a Housing Navigator – Since Program Opening	811 ³
Number of Participants Placed into Permanent or Longer-Term Housing in June and July	30
Average Time to Permanent or Longer-Term Housing Placement for Participants Placed in June and July	63 days
Number of Participants Placed into Permanent or Longer-Term Housing – Since Program Opening	61
Number of Resource Referrals Provided to Participants	362
Number of Participants Linked to Community Support Services	176
Number of Participants who Received On-site Medical Triage Services	0
Number of Participants who Received On-site Public Health and Public Benefits Enrollment Assistance Services	14
Number of Participants who Received On-site Mental Health Services	21
Number of Participants who Received On-site Substance Use Disorder Services	17
Number of Participants who Received On-site Life Skills Classes	16
Number of Participants who Received Mail Services	290
Number of Participants who Received Telephone and Messaging Services	42
Number of Participants who Accessed Computers	22
Number of Participants who Received Transportation Assistance (bus passes or transport to off-site services by HNC shuttle driver)	160
Number of Participants who Attended On-site Group Sessions	46

During June and July 2020, the HNC continued to offer services to clients while taking steps to reduce the potential for transmission of COVID-19.

³ This number includes all clients that have been active during the reporting year, even if they have since exited.

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Mental health and behavioral health services continued to be offered twice a week and conducted primarily through telehealth visits. During June and July 2020, 21 total participants attended a total of 31 sessions. Sessions included psychological evaluations, brief emotional and behavioral health assessments, and referrals to appropriate behavioral health support groups.

During June and July 2020, 290 total persons accessed mail services through the HNC. Average participants utilizing mail services per month increased by 500 percent as compared to May 2020, with 145 average participants utilizing mail services per month in June and July versus 29 participants utilizing mail services in May 2020.

Telephone and messaging services were accessed by 42 total persons during June and July 2020. Purposes for using communication services included to connect with family/friends, pay bills, contact financial institutions, contact public benefit agencies and contact parole officers.

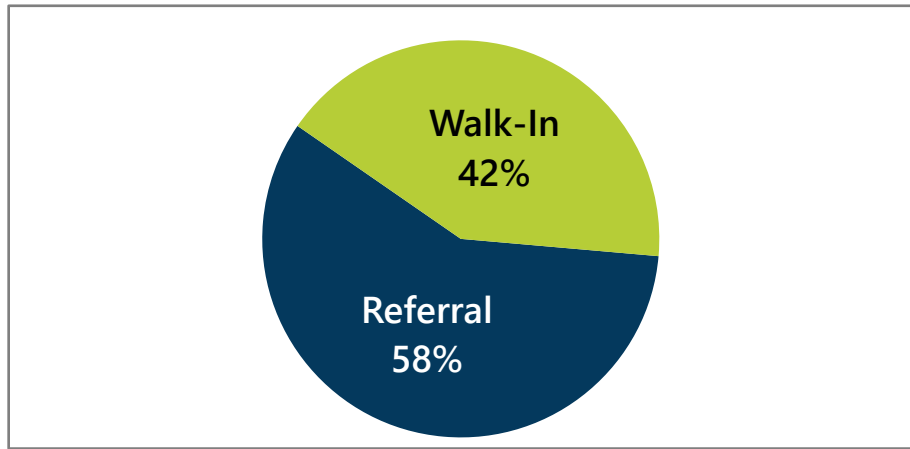
Average use of transportation services per month doubled in June and July as compared to May 2020. A total of 160 persons were provided 218 transports via HNC transportation services in June and July 2020. HNC program participants utilized transportation services to travel to destinations such as other service providers, drop-offs to shelter or housing, benefits offices, employment-related locations, pharmacies and medical providers for appointments.

Life skills classes conducted by Dreams for Change were resumed in June 2020 and were attended by 32 total persons. Regular sessions were halted again in July 2020 due to a rise in COVID-19 infection rates in the County.

Peer support group sessions were resumed in June 2020 in a redesigned format to reduce the potential risk of COVID-19 transmission. Fewer attendees are allowed at each session to ensure social distancing is easily achievable and all chairs and tables used for sessions are wiped down before and after every use. A total of 46 persons attended 8 group sessions within the months of June and July 2020.

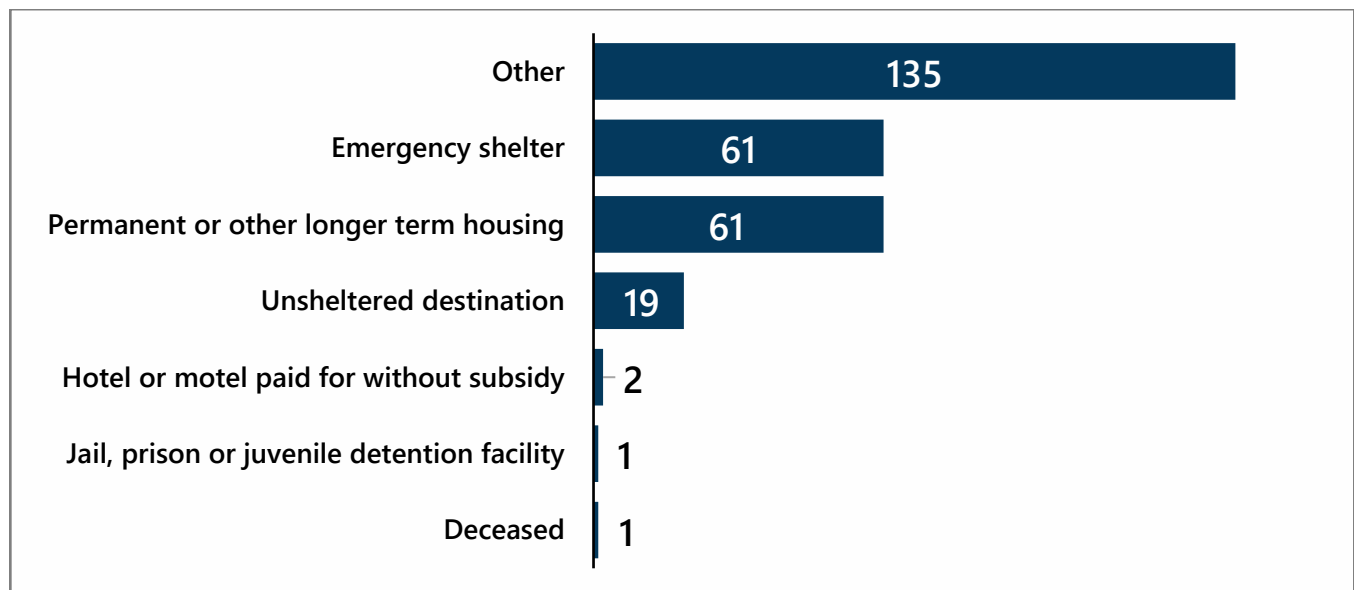
HNC staff collect data on how participants who receive on-site services came to enroll in the program, including distinguishing between clients who were referred to the program versus those who walked in. The following table summarizes the mode of entry for all 467 on-site participants for whom this data has been collected since the program opened.

Table Nine: Mode of Entry for Persons Served by HNC On-Site Services since Program Opening



Since the HNC’s on-site program opened in December 2019, 738 persons have been exited from HNC on-site services. The majority of these persons (62 percent) were exited due to a failure to return for services or respond to repeated attempts by HNC staff to contact them. Among the 280 persons who exited to known destinations, 44 percent exited to either permanent or longer-term housing or emergency shelter. Destinations for all 280 persons who exited to known destinations are summarized in the following table.

Table Ten: Exit Destinations for All Persons Exited from HNC On-Site Services to Known Destinations since Program Opening.



July 2020 Success Story

During July 2020, the HNC served “Samantha” (not her real name) and her 4-year-old son, who enrolled in HNC services because they were at risk of becoming homeless due to fleeing domestic violence. At the time “Samantha” enrolled in services, she was staying in temporary housing, working two jobs and struggling to find childcare for her son while also looking for a permanent home. After

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enrolling in HNC services, she had to leave her temporary housing and began sleeping in her vehicle. The HNC program worked with her to gather necessary documentation, provide computer access to submit rental applications, call housing providers to follow up on rental applications and assess her family's needs when searching for housing. After five weeks of services that included face-to-face interactions and phone calls, she was able to secure permanent housing in a location that met her and her family's needs and resolved their housing crisis.

Summary of HNC Outreach Services and Activities

The information below provides an overview of data captured on services provided through the HNC's outreach efforts.

The HNC's team of Navigators conducted significant street outreach efforts in the months leading up to the HNC opening in the neighborhoods surrounding the site. In the months following opening, Navigators' efforts naturally shifted significantly toward supporting the opening of the site and serving clients visiting the site, and street outreach efforts reduced as some staff took up the housing navigation roles on-site.

During May 2020, outreach efforts were largely halted due to both the needs of persons seeking on-site services and the service delivery modifications needed to address the COVID-19 pandemic. With staff resources needed to carry out the screening of all persons seeking on-site services, the measures taken to ensure staff safety by converting in-person interactions to tele-case management whenever possible and the focus on providing unsheltered clients basic information about COVID-19 and hygiene kits, street outreach efforts were limited in their scope.

Street outreach efforts remained limited for the same reasons during June and July 2020. HNC did not enroll any new clients in street outreach services during the two-month reporting period.

Community Engagement

Prior to the opening of the HNC, Family Health Centers, sought the input of residents in the East Village neighborhood surrounding the site to ensure a successful partnership with the community.

A Neighborhood Advisory Committee (NAC) was formed, and meetings are held with representatives from the East Village Community, including the East Village Residents Association. Representatives from Family Health Centers, the Housing Commission, the San Diego Police Department, the City's Environmental Services Department, the Mayor's office, the Office of Councilmember Chris Ward, the Office of County Supervisor Nathan Fletcher and the County of San Diego Department of Health and Human Services.

NAC meetings scheduled for March and April were cancelled in light of developments related to the COVID-19 pandemic. HNC staff continued to engage with local partners, including San Diego County Health and Human Services, to support local efforts regarding the response to the local health crisis. This coordination included joining the County in distributing information and hygiene kits to unsheltered persons in the area surrounding the HNC site.

Family Health Centers' staff resumed NAC meetings in May with the first NAC meeting held via video conference taking place on May 19, 2020. The agenda for the May 19 meeting included an overview of updated data on HNC activities and services and a presentation by a Family Health

Centers clinician and expert in infectious disease on the COVID-19 pandemic and its impact on the unsheltered community.

In June 2020, Family Health Centers’ staff solicited feedback from NAC attendees regarding desired frequency of NAC meetings. After reviewing feedback, Family Health Centers informed attendees and partners that NAC meetings would transition from a monthly to a quarterly schedule. With the new quarterly schedule in effect, the next meeting following the May 2020 meeting was scheduled for August 18, 2020.

Commitment of Partner Service Providers to Provide On-Site Services

In addition to engaging the community around the HNC, Family Health Centers has engaged more than 30 partner service providers in discussions about service partnerships at the HNC. Family Health Centers has executed 28 partnership agreements, and two additional partners have agreed to provide services regularly with informal commitments, as needs determine.

Most HNC partners have halted on-site services as of April 2020 due to the COVID-19 pandemic. During June and July 2020, a limited number of HNC partners continued to provide some services on-site. Home Start, Inc., San Diego County Health and Human Services, the National Alliance on Mental Illness (NAMI) and Veterans Villages of San Diego provided on-site services during the reporting period. Despite the shift in available on-site services due to program modifications necessary to provide for the safety of program participants and staff, HNC staff continued to refer clients to partners for services via other methods, such as phone calls and email.

HNC staff conducted two remote partner meetings during the reporting period, held online on June 4, 2020, and July 2, 2020. Monthly partner meetings allow partners to connect and coordinate as well as learn about the array of services each other brings to the HNC. The June and July meetings featured presentations by Downtown San Diego Partnership’s Clean and Safe program, the U.S. Department of Veterans Affairs San Diego Healthcare System, Dreams for Change and Family Health Centers’ Mental Health Services

Table eleven summarizes partners that have made commitments to provide services on-site at the HNC.

Table Eleven: Service Provider Partners who Committed to Providing Services at the HNC

Service Provider Partner Agreements/Commitments		
2-1-1 San Diego	McAlister Institute	The Regional Task Force on the Homeless
Alpha Project for the Homeless	Mental Health Systems	The Salvation Army
Community Research Foundation	National Alliance on Mental Illness	Telecare
Dreams for Change	People Assisting the Homeless	UPLIFT
Downtown San Diego Partnership	Recovery Innovations	Department of Veterans’ Affairs San Diego Healthcare System

Father Joe’s Villages & Village Health Clinic	San Diego LGBT Community Center	Volunteers of America
Home Start, Inc.	San Diego Rescue Mission	Veterans Villages of San Diego
Interfaith Shelter Network	San Diego Workforce Partnership	Helen Woodward
Legal Aid Society of San Diego	Serving Seniors	Department of Motor Vehicles

COVID-19 Mitigation Responses

Beginning in early March 2020, the Housing Commission began sending regular updates to homeless shelters and services providers on ongoing activities of the RTFH, the Housing Commission, City of San Diego and County of San Diego to mitigate the spread of COVID-19 among homeless shelters and services programs and unsheltered populations. This includes providing updated guidance as it is released from the Centers for Disease Control and Prevention (CDC), the United States Interagency Council on Homelessness (USICH) and the County of San Diego related to serving persons experiencing homelessness.

Housing Commission staff began tracking stock levels of critical cleaning supplies and Personal Protective Equipment (PPE) at all City of San Diego homeless shelters and services programs that the Housing Commission administers and began assisting with procuring needed cleaning and PPE supplies to ensure providers could effectively clean and sanitize program spaces in alignment with guidance from the CDC and County of San Diego.

In addition, the City of San Diego print shop started creating bundles of posters and flyers for providers for posting through facilities and delivered material on an ongoing basis to providers as needed.

Communication trees were also reinforced between providers, the Housing Commission, the City of San Diego, the County of San Diego, RTFH, and shelter leadership to ensure redundancy is in place at leadership and program management levels (as the Housing Commission carried out internally) in regard to communication and knowledge sharing, in case leadership workforce reduction occurred.

The City of San Diego, RTFH and Housing Commission staff continue to provide guidance to service providers during this time to support alignment with County Public Health and CDC guidance to protect the health and safety of staff and clients.

Respectfully submitted,



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Approved by,



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 San Diego Housing Commission

Docket materials are available in the “Governance & Legislative Affairs” section of the San Diego Housing Commission website at www.sdhc.org.