



SAN DIEGO
HOUSING
COMMISSION

INFORMATIONAL REPORT

DATE ISSUED: December 30, 2020

REPORT NO: HCR21-010

ATTENTION: Chair and Members of the San Diego Housing Commission
For the Agenda of January 8, 2021

SUBJECT: October 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 former Mayor Faulconer'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 through October 2020, Family Health Centers of San Diego provided on-site intake, assessment, triage and referrals for permanent and longer-term housing opportunities. They assisted individuals experiencing homelessness to identify immediate housing solutions, provided crisis management, accessed mainstream benefits important to addressing issues impacting housing stability, and worked 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 authorized 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.

On October 16, 2020 the Housing Commission Board of Commissioners approved a recommendation to the City Council and Housing Authority for the Housing Commission to directly operate a Homelessness Response Center at the 1401 Imperial Ave. site where the Housing Navigation Center program has operated since December 2019. On October 27, 2020, the Housing Authority and City

Council authorized the execution of a Memorandum of Understanding (MOU) between the City of San Diego and the Housing Commission for the Housing Commission to operate the proposed Homelessness Response Center for an initial term continuing through June 30, 2021, with two one-year options to renew. The opening date of the new program is still being determined and is based on timelines for execution of the MOU, staff recruitment and transfer of site control.

Family Health Centers of San Diego's operation of the Housing Navigation Center ended on October 29, 2020. The City of San Diego currently has site control and has assigned 24-hour security. In addition, signs have been posted on-site that provide information on where persons experiencing homelessness or at-risk of homelessness can access services, including basic needs, medical care and other resources.

MONTHLY REPORTING SUMMARY – OCTOBER 2020

The information below provides an overview of data captured in the San Diego Regional Continuum of Care's Homeless Management Information System (HMIS). Data included in this report summarizes services delivered on-site and in the field via street outreach efforts. It also provides both an overall picture of the population served throughout the entirety of HNC operations and a summary of activities specifically conducted during the reporting month of October 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 the last day of HNC operations on October 29, 2020, including services delivered via outreach efforts since they began in April 2019 and services delivered on-site since it opened in December 2019.

A total of 1,678 individuals accessed on-site or outreach services through the HNC program as of its final day of operations on October 29, 2020.

Tables one and two include additional demographics of the population served through all program services as of October 29, 2020.

Table One: Age Distribution of All Persons Served by HNC Outreach (April 1, 2019 – October 29, 2020) and HNC On-Site Services (December 3, 2019 – October 29, 2020)

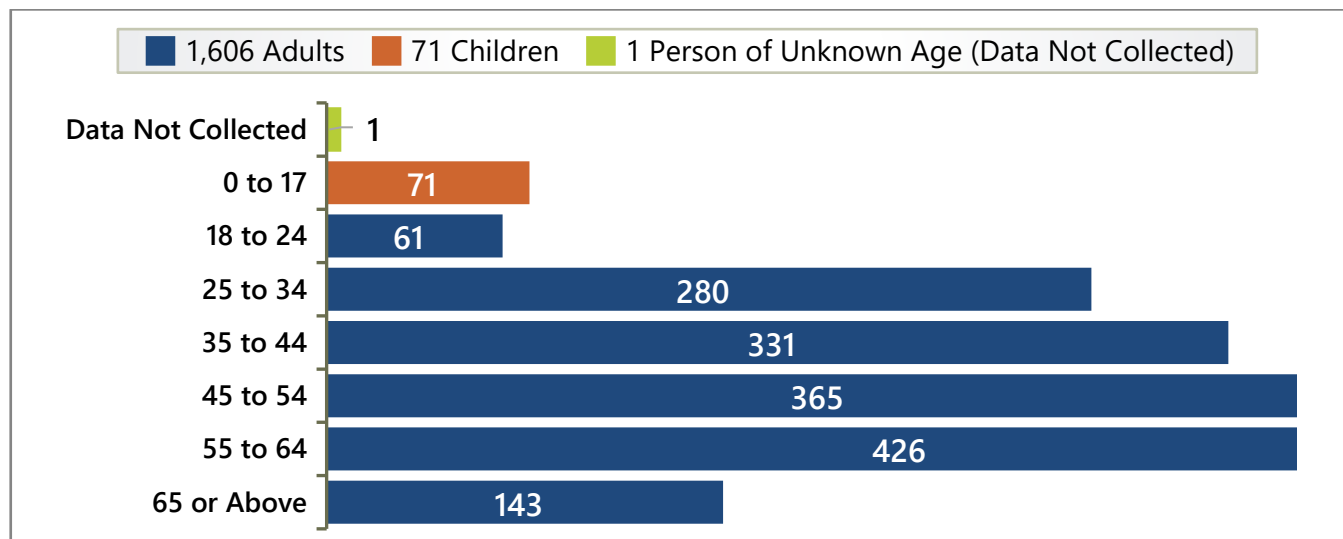
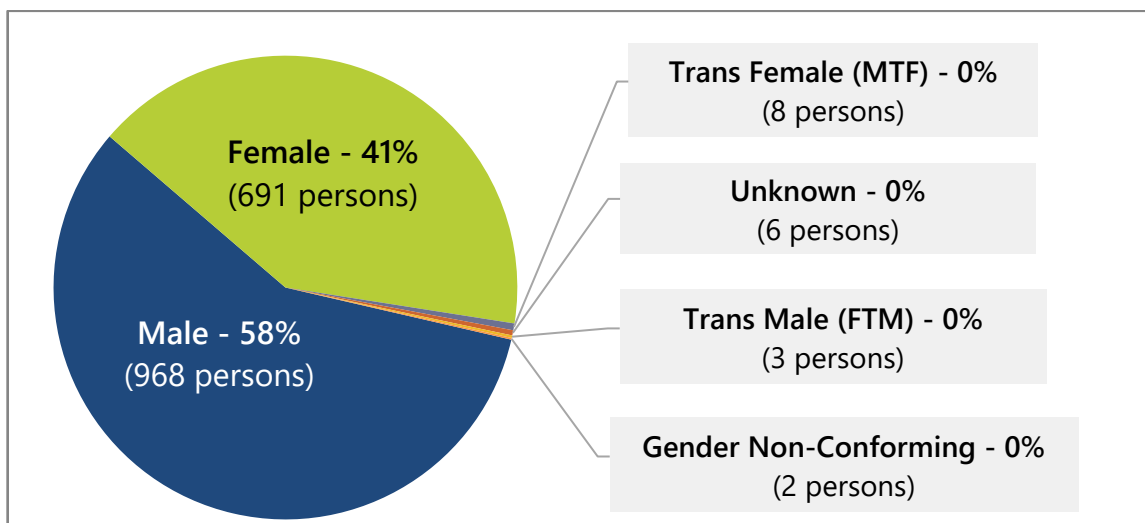


Table Two: Gender of All Persons Served by HNC Outreach (April 1, 2019 – October 29, 2020) and HNC On-Site Services (December 3, 2019 – October 29, 2020)



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 – October 29, 2020) and HNC On-Site Services (December 3, 2019 – October 29, 2020)

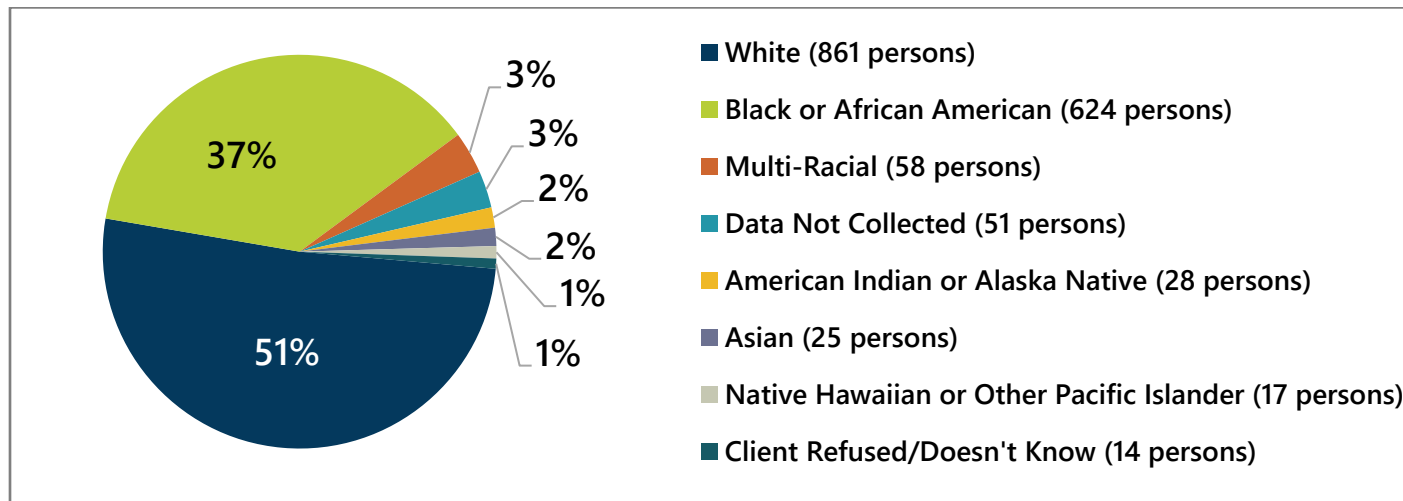


Table Four: Ethnic Demographics of All Persons Served by HNC Outreach (April 1, 2019 – October 29, 2020) and HNC On-Site Services (December 3, 2019 – October 29, 2020)

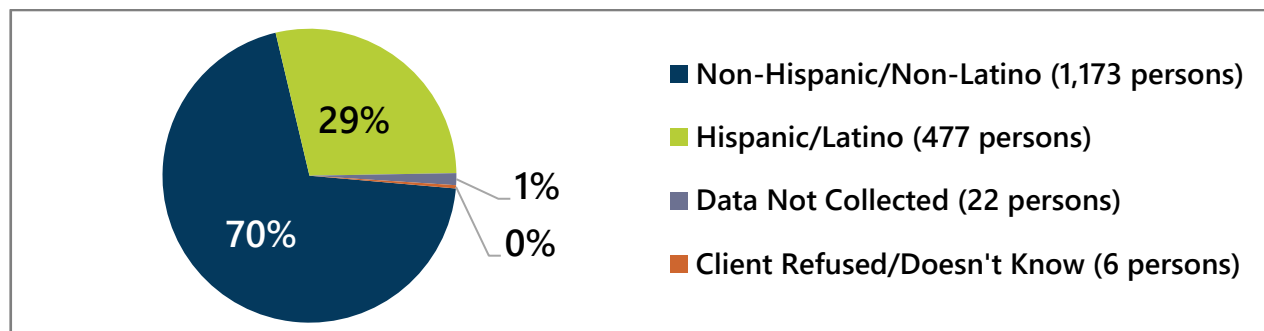


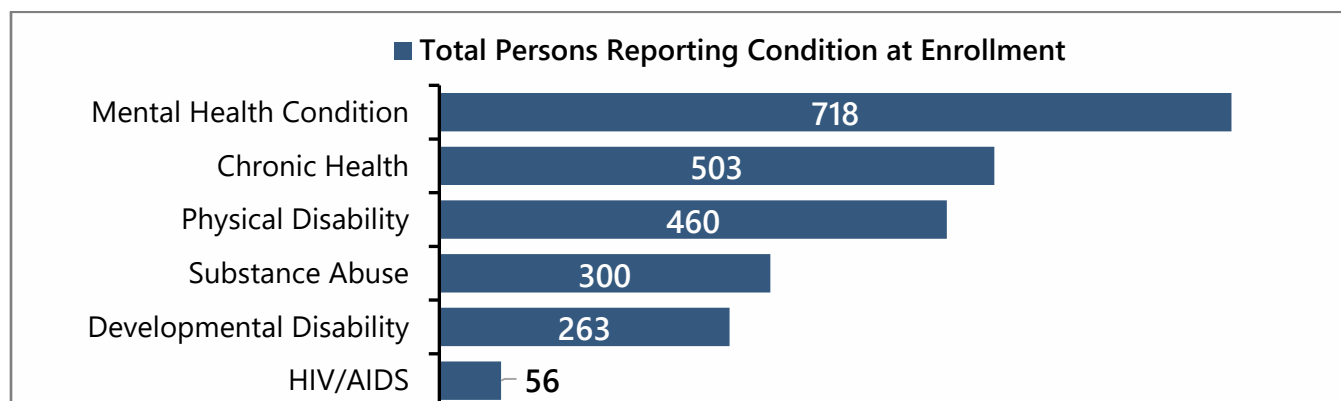
Table five describes the disabilities and health conditions that persons served on-site and via outreach reported upon enrollment. This data is based only on self-reported responses to a standard set of questions required as part of enrollment in HMIS, which includes six questions that ask participants 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 1,041 persons, or 62 percent of all persons served, reported one or more current disabilities or health conditions. Of those who reported a disability or health condition, 93 percent (968 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 543 persons, or 32

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>

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 – October 29, 2020) and HNC On-Site Services (December 3, 2019 – October 29, 2020)



The HNC served 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 followed the Continuum of Care’s guidance and completed necessary steps to connect clients with the CES process. Those steps included - 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 received HNC services and who also have VI-SPDAT assessment scores, including clients served via street outreach efforts and clients served via on-site services.

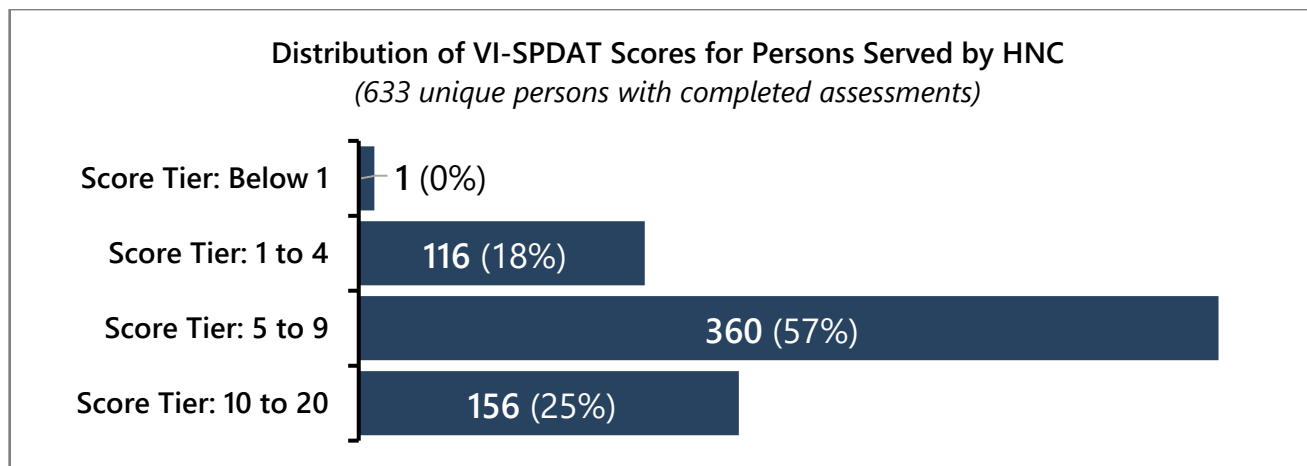
The regional approach to triage assessments for coordinated entry no longer recommends that all persons engaging in homeless services and entered into HMIS should immediately be administered the VI-SPDAT. Therefore, the number of persons receiving services at the HNC will not match the number of persons with a VI-SPDAT score.

The tiers of VI-SPDAT scores included in the following table 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.

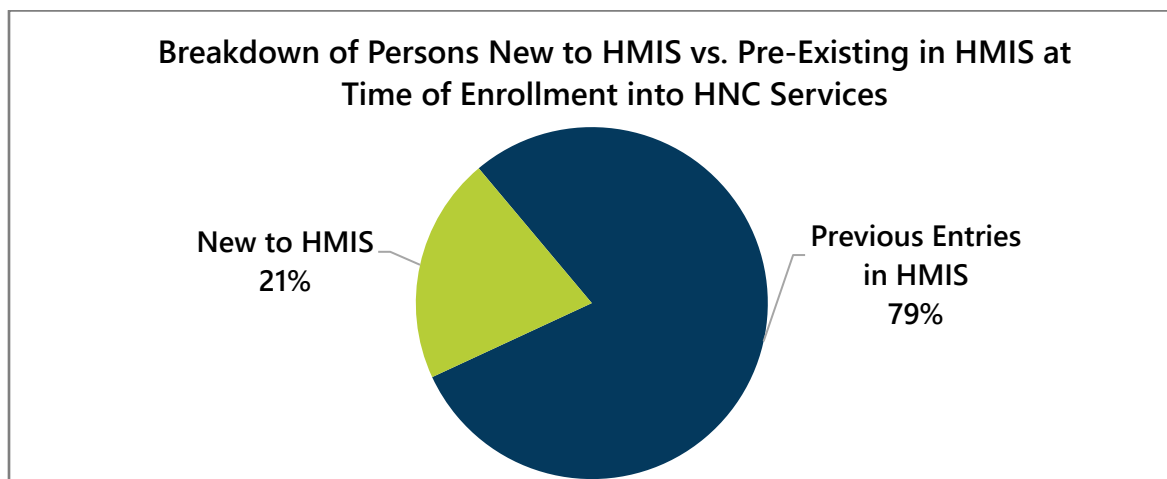
Table Six: Distribution of VI-SPDAT Assessment Scores for Persons Served by HNC Outreach (April 1, 2019 – October 29, 2020) and HNC On-Site Services (December 3, 2019 – October 29, 2020)



As part of Family Health Centers’ agreement to operate the HNC, they collected and recorded data on persons they served 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 CES.

Among the 1,678 participants who were served through HNC outreach or on-site services, 21 percent were new to HMIS at the time they enrolled in HNC services.

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 was 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 2020 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 the following months to continue ensuring the safety of those providing services at the HNC as well as those receiving services.

Measures that remained in place during October 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.

During October 2020, 408 persons were actively enrolled in HNC on-site services.² All active clients were exited from program services on or before the last day of program operations on October 29th, 2020. Among all clients that were still actively enrolled during October 2020, 230 total persons (57 percent of those actively enrolled) had been connected to a Housing Navigator.

The following table summarizes data on services provided during October 2020.

² "Actively enrolled" signifies that client had been enrolled in the program during or prior to the reporting month of October 2020 and that they were not exited until October 2020.

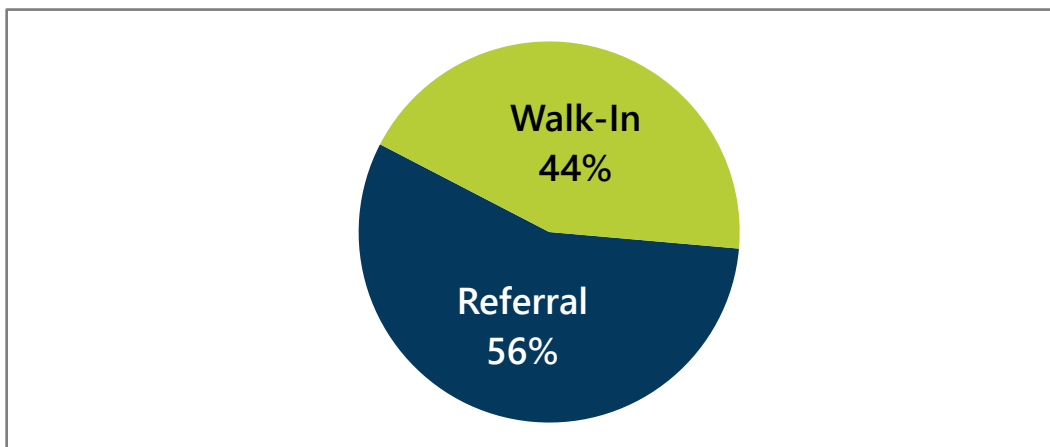
Table Eight: Summary of On-Site HNC Services during October 2020 and Since Opening

Summary of HNC Services in October 2020 and Since Opening	
Total Persons Actively Enrolled in HNC On-Site Services during October 2020	408
Participants Connected to a Housing Navigator (among total active during October 2020)	230
Participants Connected to a Housing Navigator – Since Program Opening	979 ³
Number of Participants Placed into Permanent or Longer-Term Housing in October 2020	75
Average Time to Permanent or Longer-Term Housing Placement for Participants Placed in October 2020	47 days
Number of Participants Placed into Permanent or Longer-Term Housing – Since Program Opening	153
Average Time to Permanent or Longer-Term Housing Placement for All Participants Placed Since Program Opening	54 days
Number of Resource Referrals Provided to Participants	31
Number of Participants Linked to Community Support Services	21
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	8
Number of Participants who Received On-site Mental Health Services	18
Number of Participants who Received On-site Substance Use Disorder Services	9
Number of Participants who Received On-site Life Skills Classes	0
Number of Participants who Received Mail Services	79
Number of Participants who Received Telephone and Messaging Services	10
Number of Participants who Accessed Computers	3
Number of Participants who Received Transportation Assistance (bus passes or transport to off-site services by HNC shuttle driver)	14
Number of Participants who Attended On-site Group Sessions	0

HNC staff collected 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 503 on-site participants for whom this data has been collected since the program opened.

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

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



Between the opening of the HNC’s on-site program in December 2019 and the closure of the program on October 29, 2020, a total of 1,300 persons were exited from HNC on-site services. The majority of these persons (63 percent) were exited due to a failure to return for services or respond to repeated attempts by HNC staff to contact them. Among the 483 persons who exited to known destinations, 62 percent exited to either permanent or longer-term housing or emergency shelter. Destinations for all 483 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.

Permanent or other longer term housing	153
Emergency shelter	145
Other	137
Unsheltered destination	45
Deceased	2
Jail, prison or juvenile detention facility	1

Summary of HNC Outreach Services and Activities

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 staff took up housing navigation roles on-site.

Street outreach efforts by the HNC were halted in May 2020 due to both the needs of persons seeking on-site services and service delivery modifications needed to address the COVID-19 pandemic. No new clients were served through HNC street outreach efforts after May 2020, and thus no street outreach services were provided during the reporting month of October 2020.

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 regular meetings were 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 former Councilmember Chris Ward, the Office of County Supervisor Nathan Fletcher and the County of San Diego Department of Health and Human Services.

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 last meeting held was on August 18, 2020. No additional NAC meetings were held prior to the last day of HNC operations on October 29, 2020.

San Diego Housing Commission staff will continue to engage with the group of East Village community stakeholders that participated in NAC meetings to ensure community input is solicited and incorporated in plans for the launch of the Homelessness Response Center.

Commitment of Partner Service Providers to Provide On-Site Services

Family Health Centers engaged more than 30 partner service providers in discussions about service partnerships during its operation of the HNC program.

Most HNC partners halted on-site services during April 2020 due to the COVID-19 pandemic. A limited number of HNC partners continued to provide some services on-site during the final months of program operations, including Home Start, Inc., San Diego County Health and Human Services, the National Alliance on Mental Illness (NAMI) and Veterans Village of San Diego. HNC staff also continued to refer clients to partners for services via other methods, such as phone calls and email.

HNC staff conducted their final remote partner meeting on October 1, 2020. HNC staff facilitated monthly partner meetings to provide a venue for service provider partners to connect and coordinate as well as learn about the array of services each brought to the HNC. The October meeting featured an update from HNC staff on the planned closure of the current iteration of the HNC program on October 29, 2020 and two presentations by HNC service provider partners.

Table eleven summarizes partners that made commitments to provide services on-site at the HNC. Since Family Health Centers concluded HNC operations at the program site, Housing Commission staff are engaging with collaborating agencies to inform them of the transition and engage them in conversations about opportunities to collaborate the new Homelessness Response Center program.

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 included 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 assistance 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,

Lisa Jones

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Approved by,

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Jeff Davis
Deputy Chief Executive Officer
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.