



REGIONAL HOMELESS ACTION PLAN
City of Stockton
San Joaquin County
San Joaquin Continuum of Care

March 2024

Prepared By:
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I. GLOSSARY OF TERMS

211	211 is a three-digit phone number that provides access to a wide range of community services.
ArcGIS	Geographic Information System
ARPA	American Rescue Plan Act
BHS	Behavioral Health Services
BIPOC	Black, Indigenous, and People of Color
Block Grant Funds	A type of federal grant provides state or local governments with a broad range of discretion over how the funds are allocated within a specific program area.
CAL-ICH	California Interagency Council on Homelessness
CAO	County Administer Office
CARE Program	A homeless outreach co-response model pairing first responders with health and behavioral health professionals and people with lived experience.
CBO	Community-Based Organizations
CDBG	Community Development Block Grant
CDCR	California Department of Corrections and Reentry
CES	Coordinated Entry System
CoC	Continuum of Care - Continuums of Care exist across the nation and are the designated recipients of certain federal homeless funds.
CoC Program Competition Process	The competitive process through which funding is allocated to Continuum of Care (CoC) organizations by the U.S. Department of Housing and Urban Development (HUD).
Collaborative Applicant	The County of San Joaquin is defined as the Collaborative Applicant for HHAP 5, referring to the entity designated by the U.S. Department of Housing and Urban Development (HUD) to submit a single application for Continuum of Care (CoC) funding on behalf of the entire homeless services system in a particular geographic area.
Collaborative Applicant Agreement	A formal document that outlines the roles, responsibilities, and obligations of the entity designated as the Collaborative Applicant within a Continuum of Care (CoC) homeless services system.
Congregate Housing Programs	Shared living arrangements where individuals or families reside in a communal setting while having access to supportive services.
Continuum of Care (CoC)	A comprehensive approach to addressing homelessness within a community or region.
Coordinated Entry	A centralized system designed to streamline and coordinate access to homeless services and resources for individuals and families experiencing homelessness.
COS	City of Stockton
COVID-19	Coronavirus Disease 2019
CY	Calendar Year
DCDC	Delta Community Developers Corporation

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DV	Domestic Violence
ECM	Engagement, Case Management
ESG	Emergency Solutions Grant
ESRI	Environmental Systems Research Institute
EUCs	Eligible Use Categories
FY	Fiscal Year
Governance Charter	A formal document that outlines the structure, responsibilities, and operating procedures of a governing body or organization.
HACSJ	Housing Authority of San Joaquin County
HCS	Healthcare Services
HDIS	California's Homeless Data Integration System
HHAP	Homeless Housing Assistance and Prevention
HHD	Regional Homeless Housing Development
HIC	Housing Inventory Count
High-Barrier Shelter	A type of homeless shelter that imposes requirements or conditions for individuals seeking accommodation.
HIPAA	Health Insurance Portability and Accountability Act
HIV/AIDS	Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome
HMIS	Homeless Management Information System
HOME Funds	Home Investment Partnership Program
Homekey	California state grant program aimed at addressing homelessness and providing housing solutions during the COVID-19 pandemic.
Housing Density	Refers to the number of housing units or people living within a given area of land.
HPSJ	Health Plan of San Joaquin
HSA	Human Services Agency
HUD	Housing and Urban Development
Interim Housing	Also known as transitional housing, providing temporary shelter and support services for individuals or families experiencing homelessness.
Landscape Analysis	The process of assessing and evaluating the features, characteristics, and dynamics of a particular geographical area or system.
LGBTQIA+	Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, Intersex, Asexual and other terms
Low-Barrier Shelter	A type of homeless shelter that aims to provide accommodation to individuals experiencing homelessness with minimal barriers to entry.
Lx	A person from Latin American origin or descent.
Medi-Cal	California's Medicaid Health Care Program
MCPs	Managed Care Plans
MHSA	Medical Health Services Act
MOU	Memorandum of Understanding

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N	Total number of individuals
N/A	Not Applicable
NAACP	National Association for the Advancement of Colored People
NOFA	Notice of Funding Available
PATH	Projects for Assistance in Transition from Homelessness
Permanent Housing	Long-term, stable housing solutions for individuals or families experiencing homelessness.
Permanent Supportive Housing (PSH)	A housing intervention model designed to provide stable and affordable housing coupled with supportive services for individuals or families experiencing chronic homelessness, particularly those with disabilities or other complex needs.
PIT	Point in Time - Annual PIT Counts are conducted across the nation, using a census model, to count homeless individuals.
PLEE	People with Lived Expertise and Experience
PLHA Funds	Permanent Local Housing Allocation Program (state funding)
PTSD	Post-Traumatic Stress Disorder
Region	SJCoC's HUD designated region is San Joaquin County
RHNA	Residential Housing Needs Allocation
RRH	Rapid Rehousing
San Joaquin Council of Governments (SJCOG)	San Joaquin County's regional transportation planning agency.
SJC	San Joaquin County
SJCHSA	San Joaquin County Human Services Agency
SJCoC	San Joaquin Continuum of Care
SMI	Serious Mental Illnesses
STAND	Stocktonians Taking Action to Neutralize Drugs
SUD	Substance Use Disorders
TAY	Transition Age Youth
Unincorporated Areas	Regions within the county's jurisdiction that are not governed by any specific municipal government or incorporated municipality.
UOP	University of the Pacific
WKSHP	Workshop
WPC	Whole Person Care

II. EXECUTIVE SUMMARY

Purpose: Through this Action Plan, the County of San Joaquin, the City of Stockton, and the San Joaquin County Continuum of Care commit to working jointly in a coordinated, regional fashion to make homelessness rare, brief, and non-recurring.

Intent: Through this Action Plan, the three partners express their intentions and the planned strategies to address homelessness through the articulation of specific roles and responsibilities, actions, and funding plans.

Invitation: The Cities of Lathrop, Lodi, Manteca, Ripon, and Tracy are hereby invited to adopt this Action Plan and join this partnership. As independent public entities, the San Joaquin County Office of Education, the Housing Authority of the County of San Joaquin, and the San Joaquin Council of Governments are also invited to join the partners in the work expressed within this Action Plan.

Key Findings: The region is well positioned to address homelessness, and significant achievements have been accomplished in the past few years, including a 40% increase in emergency shelter beds and approximately 180 new units of housing intended for homeless persons developed or in construction, with more pending. However, significant work remains in the areas of increasing transitions to housing, especially for people with specialized and acute needs such as substance use disorders and reducing duplications in services. Overcoming barriers and challenges will require a stronger emphasis on housing navigation and supportive services for people to maintain in placements successfully. Accordingly, this will require the three partners to ensure funds are allocated towards priorities, contracts are managed to ensure investments are leading to the desired results, and that contracted support, or technical assistance is available to continuum partners around operational issues, including data management, evaluation, training, and communications.

Roles and Responsibilities: The **County of San Joaquin**, in its role as the Collaborative Applicant, has the primary and lead agency responsibilities for operating the continuum. This means having the staff expertise and capacity to manage and coordinate the approximately \$30 million in direct regional funds allocated annually to address homelessness and complete the reports, plans, evaluations, and monitoring required under federal and state regulations and in accordance with local needs and priorities. The leadership role of the Collaborative Applicant in leveraging the additional \$100 million that passes through other public agencies for collaborative and assigned purposes is also essential.

The **County of San Joaquin**, in its role as the recipient of state and federal health, safety, and entitlement program funds, has an obligation through its Departmental Leadership to align and leverage all available funding to the purposes of this Action Plan and as permitted under regulation. The San Joaquin County **Human Services Agency (HSA)**, **Probation Department**, and **Behavioral Health Services (BHS)** are called to participate in regular SJCoC Board of Directors Meetings, and to work with the Collaborative Applicant and other public agencies on the continued and strategic blending and braiding of efforts. Specifically, it is anticipated that:

- HSA will help ensure that homeless program partners across the region have the tools and communication pathways to link clients to eligible public assistance effectively;
- Probation will help ensure that there is a coordinated and regional approach to outreach to unsheltered persons, using a co-responder model (the joint engagement of emergency services personnel, health/behavioral health professionals, and people with lived expertise and experience); and,
- BHS will help ensure that sufficient and consistent treatment support is available to sustain and maintain housing placements according to assessed needs and as necessary to obtain the highest level of self-sufficiency.

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The **City of Stockton**, in its role as the largest of the five incorporated cities, has the primary responsibility of working with municipal partners on crafting a shared approach to engaging and organizing their local communities. This includes developing a shared approach to homeless outreach and engagement, emergency sheltering, and the development of affordable housing suitable for people experiencing homelessness. It also includes developing program partner expectations around suitable competencies and ensuring local community partners, including people with lived expertise and experiences in homelessness, receive information, training, and capacity-building assistance as needed to improve the delivery of services.

The **San Joaquin Continuum of Care (SJCoC)**, through its elected Board and broader General Membership, is responsible for the general oversight and stewardship of effort. The Board is responsible for monitoring the performance of its Collaborative Applicant in discharging its duties. Additionally, the Board is responsible for engaging and sustaining the broader General Membership of homeless service practitioners, community members, people with lived expertise and experience, and responsible professionals in informed dialogue and discussion about needs and opportunities to strengthen the homeless continuum of care.

The **Collaborative Applicant** looks to the guiding principles and directives of the SJCoC, applicable regulations, local priorities, and best practices in the disbursement of its operational management of required activities, including the procurement and operations of a functional Homeless Management Information System (HMIS) and Coordinated Entry System, overseeing the federal CoC Program Competition process, and the general operations of the continuum including establishing standards, monitoring sub-recipients, and conducting regular evaluations of the system as a whole to assess housing and service needs.

Performance Measures: Through this Action Plan, the County of San Joaquin, the City of Stockton, and the San Joaquin County Continuum of Care agree to the following regional and system-wide performance measures, as articulated in federal and state regulations, to assess homeless housing and service needs:

Homeless Housing

- Number of people accessing homeless services.
- Number of unsheltered homeless.
- Number of first-time homeless.

Service Needs

- Number of people successfully placed in interim or permanent housing from a street outreach or engagement program.
- Number of people exiting homelessness into permanent housing.
- Average length of time homeless people experience homelessness.
- Percent of people returning to homelessness after a placement.
- Percent of people who make improvements in self-sufficiency, following placements, by severity of need.

And to measure and track the extent to which these measures are having equitable results across race/ethnicity, gender, age, vulnerabilities, and disability status as tracked by HUD for people with HIV/AIDS, chronic health conditions, substance use disorders, and serious mental illnesses.

Contract Management: Through this Action Plan, partners agree to embed within all contracts issued for direct program service activities provisions to track effort (work conducted), fidelity (adherence to practice standards), and outcomes (the extent to which performance measures are being achieved, including equity) by January 2025.

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Key Actions: Through this Action Plan, the County of San Joaquin, the City of Stockton, and the San Joaquin County Continuum of Care agree to undertake the following key actions to achieve regional and coordinated programmatic and systemic objectives.

By June 30, 2024:

1. Outsource, or otherwise assign to neutral third parties, the 2024 CoC Program Competition Process.
2. Develop a regional and coordinated list of homeless housing pipeline projects with quantifiable criteria such as units, feasibility, and funding plan, including other leveraged resources such as tax credits or supportive housing vouchers.
3. Confirm partner agreements to address key actions and assign additional tasks and activities. Determine staff duties or procurement needs and assign the Collaborative Applicant to begin solicitations for technical assistance. Review Action Plan with County Counsel and other jurisdictions.

By September 30, 2024:

4. Revise the Collaborative Applicant Agreement to address identified deficiencies in roles and responsibilities and incorporate new local and state expectations.
5. Update the Governing Charter and Bylaws to address identified deficiencies in the Conflict-of-Interest Policies.
6. Update the Governance Charter and Bylaws to expand participation on the SJCoC Board, including fixed seats for city staff and department leaders and for more people with lived experiences in homelessness, including homeless youth and other populations overrepresented in homelessness.
7. Conduct the HUD-mandated review and updates to the SJCoC Board Nomination Process in accordance with regulations.

By December 31, 2024:

8. Update the SJCoC website. Release regular communications for community stakeholders and partners.
9. Standardize procurement process for (unobligated) HHAP-4 and HHAP-5 sub-grantee awards.
 - Develop a shared approach to measuring and prioritizing organizational capacity to address disparities as a component of application review.
 - Develop shared contractor reporting requirements for demonstrating effort, fidelity, and outcomes, by program type.
 - Develop shared contractor expectations for staff training, qualifications, and use of HMIS or CES to complete program activities.
 - Release joint or aligned NOFAs and create a joint County/City review process using neutral third parties to reduce applicant burden.
10. Complete a comprehensive review of existing information systems to determine where they are working to enhance client-level coordination and collaboration, program management and monitoring, and system-wide assessments of performance measures, as well as where there are deficiencies based on regulations and Action Plan needs. Use recommendations to drive system improvements and increase validity and confidence in HMIS data.
11. Update and revise the Coordinated Entry System prioritization process. Prepare guidance and convene regional trainings to ensure consistent and effective use of the CES, including standardized assessment tools to triage needs and referrals.

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- Update procedures to prioritize people who have primarily been living unsheltered for the duration of their most recent episode of homelessness, regardless of occasional use of shelter services or recent linkage pending placement. (In accordance with Encampment Resolution Fund Initiative.)
- 12. Develop a regional CARE model. Create a regional co-response model and routine practices for coordinating activities across jurisdictions and departments. Develop regional practices and training protocols for teams.
- 13. Create a practice kit for housing navigators. Articulate best practices and expectations for local program partners. Create uniform expectations and protocols for housing navigators to ensure clients are document-ready and eligible for a range of public benefits and housing support services, including rapid re-housing rental assistance vouchers.

By June 30, 2025:

14. Complete a system-wide assessment of homeless housing and service needs as indicated by the selected performance measures and other key indicators. The assessment must include all relevant Federal and State initiatives, including but not limited to the CoC Program Competition, Emergency Solutions Grant (ESG), HHAP, and Homekey projects and activities.
15. Create regional screening and referral protocols to escalate case management and treatment for individuals likely to have serious mental illnesses or other disabling conditions that require specialty interventions. Disseminate model and train program partners responsible for hospital discharge, jail release, and street outreach.
16. Develop a Housing-focused shelter model. Standardize expectations for housing navigation and case management within interim housing programs. Standardize practices for other services and supports, including substance use treatment, medication monitoring, counseling services, peer support, and legal advocacy services. Embed the model into the procurement process.
17. Develop regional Rapid-Rehousing funding and practice expectations. Clarify the allocation and monitoring of funds for eligible purposes associated with short-term rental assistance and support for homeless individuals vs. people at risk of homelessness. Clarify expectations for wrap-around support services, case management and rapid re-housing. Clarify rules and policies for landlord incentives. Develop a regional tracking system for accounting and monitoring purposes. Embed model within any procurement processes.
18. Develop practice guidelines for other innovative and creative housing solutions, including master leasing and landlord incentives.

By December 31, 2025:

19. Develop shared accounting and contract monitoring protocols to prevent service duplication between the County of San Joaquin and City of Stockton-funded projects.
20. Provide routine updates to the SJCoC Board regarding the obligation and use of CoC Program Competition, Emergency Solutions Grant (ESG), HHAP, and Homekey program funds.
21. Provide routine updates to the SJCoC Board regarding unique clients served, by demographics, service utilization, and costs per client by service activity.

The Action Plan narrative contains the intent and justifications for the planned key actions in Sections V., VI., and VII.

The application includes Tables 2.2, 2.3, and 2.4, which further list key actions with timelines, funding sources, and responsibilities.

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Fund Allocations: Through this Action Plan, the County of San Joaquin, the City of Stockton, and the San Joaquin County Continuum of Care agree to the collective allocation of Homeless Housing Assistance and Prevention (HHAP) Round 5 funds as follows:

Proposed Eligible Uses	Proposed County / SJCoC Allocations	Proposed City of Stockton Allocations
Permanent Housing	At least 30%	Up to 45%
Interim Housing – Shelter Operations	At least 30%	At least 30%
Street Outreach and Service Coordination	Up to 10%	No funds allocated
Systems Support	Up to 20%	At least 14%
Administration (7%) / HMIS (1%)	8%	8%
Total	\$6,914,426	\$7,153,179
10% Youth Set-aside	\$ 691,443	\$715,318

The Action Plan below includes further details articulating allocations by eligible use categories.

The partners further agree that **unobligated HHAP Round 3 and Round 4** funds will also be released under the vision and spirit of this Action Plan and as promised under their respective and approved funding applications to the California Interagency Council on Homelessness (Cal-ICH).

The partners acknowledge the imperative of obligating the remainder of the County’s HHAP Round 3 funds by May 31, 2024, and through this Action Plan, state an intent to obligate funds as necessary for (a) systems support activities including Collaborative Applicant staffing and/or technical assistance needs as outlined in this Action Plan and to support the Key Actions described above; and (b) existing programs that are showing significant progress in using funds as planned to achieve goals and are at risk of stopping activities before other funds can be secured.

The Collaborative Applicant will make funding recommendations for unobligated County HHAP-3 funds and bring them to the SJCoC Board of Directors for discussion at the regularly scheduled Board meeting in April 2024 and ratification at the May 2024 SJCoC Board Meeting.

Authority for this Action Plan: This was developed under the collaborative management of the County of San Joaquin, the City of Stockton, and the San Joaquin County Continuum of Care. An independent consulting firm was contracted through a public purchase solicitation to conduct the public planning process, which included three public meetings and engaged a range of experts and subject matter professionals, including:

- People with lived experience of homelessness
- Youth with lived experience of homelessness
- Persons of populations overrepresented in homelessness
- Local departmental leaders (County)
- Staff from local municipalities (other smaller jurisdictions)
- Homeless service and housing providers
- Medi-Cal managed care plan partners
- Street medicine providers and other outreach partners

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The planning process also included a community survey, key informant interviews, strategy workshops, discussion groups, and analysis of expenditures and funded activities. The SJCoC Board reviewed and vetted all Planning Activities, and a shared management team of the three partners monitored them weekly.

Action Plan Term: This Action Plan will be implemented under a joint Memorandum of Understanding (MOU), entered into following plan review and approval by the SJCoC Board of Directors, the Stockton City Council, and the San Joaquin County Board of Supervisors, as of March 27, 2024, and continued until its termination on June 30, 2028, or modified or renewed.

Further evidence and details in support of this Action Plan are contained in the full Action Plan narrative.

PART ONE

III. Introduction

IV. Landscape Analysis

V. System Performance Measures

VI. Key Findings

III. INTRODUCTION

Purpose of the Action Plan

San Joaquin County, the City of Stockton, and the San Joaquin Continuum of Care (SJCoC) work jointly to promote the coordinated and impactful delivery of homelessness supports and services across the full continuum of care. Through this Action Plan, the three partners commit to a coordinated regional approach to making homelessness rare, brief, and non-recurring.

This plan's purpose is to lay out how the region will build, deploy, sustain, and strengthen actions across the full array of homelessness programs and resources, leveraging federal, state, and local investments. It builds upon and continues the vision and legacy of the community's first strategic plan, A Community Response to Ending Homelessness. Five years later, it is time to update and advance our regional efforts and chart a continued path forward. We invite other local jurisdictions and community partners to join us.

Guiding Vision

Jointly, partners recognize the need for and are committed to fostering collaboration to further:

- A formal coordinated system that functions throughout the region,
- A focus on solutions that can be measured and impactful, and
- Significant investment in housing-focused services that increase successful transitions to long-term permanent housing.

This Action Plan is guided by the following vision statement, as developed through the 2019 community planning process:

We envision a future in which homelessness in San Joaquin County will be rare, brief, and nonrecurring, supported by a robust homeless crisis response system. People experiencing homelessness will be empowered through a responsive, nimble, housing-focused system that provides effective, supportive, and humane services and housing, efficiently leveraging public and private resources.

This plan articulates regional actions to promote this vision, which are intended to:

- Increase coordination, strengthen cross-system partnerships, and improve the quality and use of data;
- Maximize the effective use of resources to support improved implementation and outcomes at every point along the continuum of care;
- Address disparities that underlie inequitable provision of services and outcomes for Black, Native and Indigenous, Latinx, Asian, Pacific Islanders, and other sub-populations disproportionately impacted by homelessness; and
- Expand access to housing and supports delivered in a low-barrier, trauma-informed, and culturally responsive manner.

Regional Goals

Goal 1: Establish a Coordinated and Engaged Regional System of Care.

Develop a fully coordinated and transparent system that can help obtain greater funding, identify shared priorities, and establish a formal coordinated entry system to identify, assess, and connect individuals to housing and services.

Goal 2: Increase Access and Reduce Barriers to Homeless Crisis Response Systems.

Engage unsheltered individuals, provide safe places to stay at night, and connect people to public benefits, services, and housing opportunities.

Goal 3: Ensure Households Experiencing Homelessness Have Access to Affordable and Sustainable Permanent Housing.

Invest in the creation, rehabilitation, and expansion of affordable housing options; and provide the support and tools necessary for people to maintain their housing and optimize their self-sufficiency successfully.

Mission and Values

The SJCoC provides leadership and effective stewardship of resources and facilitates community planning, design, and implementation of programs critical to preventing and ending homelessness in San Joaquin County.

- Our core values are collaboration, communication, and transparency.
- We are committed to evidence-based programming and data-driven initiatives.

Research Methods

Rane Community Development led research activities for this 2024 Regional Homeless Action Plan. The mixed-method approach combined qualitative research, consisting of interviews, public meetings, focus groups, and a survey of community sentiments, with statistical analysis of various financial and programmatic data.

Key aspects of the research included:

- A thorough review of each entity’s financial resources, expenditures, and specific use of funds;
- Quantitative analyses of data from the State of California’s Homeless Data Integration System (HDIS), the U.S. Housing and Urban Development’s (HUD’s) Homeless Management of Information System (HMIS), the SJCoC’s Point-in-Time (PIT) count, and local Housing Inventory Counts (HICs);
- Systematic reviews of relevant reports and plans, including the 2022 San Joaquin County Cost of Homelessness Survey Summary Report (Amoroso-Pohl, 2023) and the Community Survey on Homelessness Needs & Resources Report. Shelter Health and Safety Project (Kiss, 2020), A Portrait of the Valley: San Joaquin Valley Human Development Report (Lewis, 2023), 2023 San Joaquin Continuum of Care Point in Time Count Local Report (Mendelson & Singh, 2023), The San Joaquin County Unsheltered Encampment Outreach Study (Birtwhistle, et al., 2023);

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- Collection and analysis of qualitative data obtained through interviews, focus groups, and workshops/public forums, all conducted to gather input from stakeholders, including individuals with lived experience in homelessness and people working to address homelessness and/or serve people experiencing homelessness (conducted January-February 2024 - Please see Appendix A for a comprehensive list of qualitative data collection events and participants);
- Observation of PIT count interviews of ten people with lived experience (conducted on February 28, 2024, at St. Mary’s Community Services); and
- Analysis of a local community online survey regarding priorities for the elimination of disparity in homelessness across the region (conducted in February 2024, with 33 respondents, 67% of whom worked or volunteered at a homeless-serving organization or agency).

Information from the sources listed above informs the priorities and strategies described in this plan. The variety of datasets and analyses enable triangulation to ensure a comprehensive assessment of the region’s needs, strengths, and opportunities regarding homelessness.

Limitations

While every effort has been made to ensure that the analyses informing this plan are sound, the authors must acknowledge a few limitations, resulting from data that are incomplete and/or contain inaccuracies. For example, certain inconsistencies suggest that some of the HMIS data are not fully representative of activities that have taken place or the demographics of those served. The financial data was acquired from agency funders over two weeks and may include unintended revenue or expenditure inaccuracies due to the extremely brief reporting span. All expenditures were classified within Eligible Use Categories (ECUs) by financial and analytic staff and, due to the potential for overlapping uses, are subject to classification bias. To mitigate inaccuracies, multiple team members monitored datasets and classification decisions.

Report Structure

This **Introduction (Section I)** is followed by a **Landscape Analysis (Section II)**. The Regional Overview includes an overview of the region and its homeless systems, a description and demographic breakdown of the population experiencing homelessness in the region, disparities in experiences and outcomes, and an exploration of expenditures and utilization, including duplications and gaps.

Section III covers **Key Findings** from the various analyses, including community service needs, strengths, and challenges. **Section IV** details **Recommendations** deriving from the analyses, which center coordination and service delivery, land use and development, unsheltered outreach and encampment site coordination, interim housing, permanent housing development, performance measurement, racial and gender equity, housing linkages for people exiting institutions, and strategies to leverage resources to maximum effect.

Section V covers **Implementation**. Specifically, this section will lay out roles and responsibilities, system performance measures, and actions to improve performance, address equity, and reduce exits to homelessness from institutions. **Section VI** covers the **Funding Recommendations**, including suggestions for upcoming State Homeless Housing Assistance and Prevention programming allocations.

In the **Appendices**, readers will find a list of stakeholders involved in public discussions and workshops, copies of meeting presentations, and literature references.

IV. LANDSCAPE ANALYSIS

Background

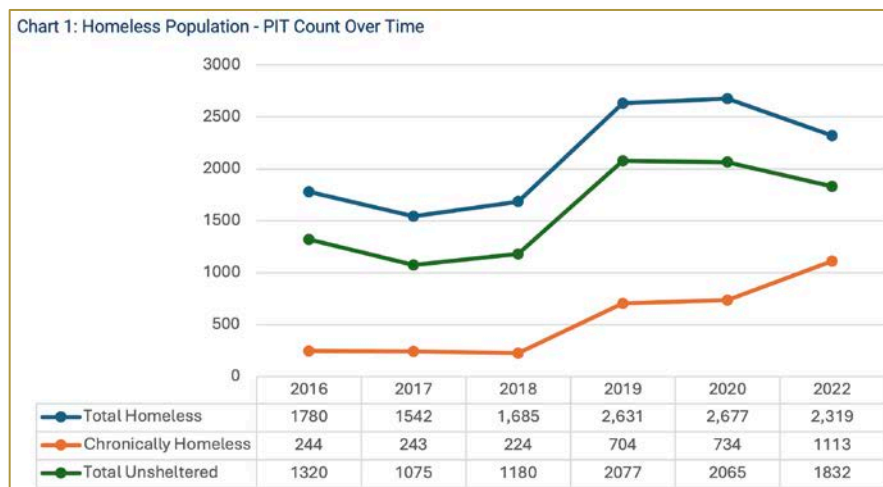
Located due east of the Bay Area, in the heart of California’s Central Valley, the San Joaquin region (the region) encompasses 1,426 square miles and has a population of approximately 800,000. Within the region are the City of Stockton, with a population of 320,000, and several smaller cities (Tracy, population: 89,000; Manteca, population: 77,000; Lodi, population: 65,000; Lathrop, population: 23,000; Ripon, population: 17,000; and Escalon, population: 7,200). The remaining approximately 200,000 county residents live in rural and unincorporated areas.

The California Department of Finance estimates the region will experience a 25% population explosion from 2020-2060 (State of CA Dept. of Finance, 2020). This substantial growth rate will require a corresponding expansion of infrastructure, including affordable housing and support for un-housed and under-housed populations. In recent years, the region has experienced significant population growth without a sufficient increase in housing, which has significantly driven up the cost of housing and exacerbated homelessness and housing insecurity.

Regional Homelessness

Homelessness figures for the region are available for 2016 through 2020 (HUD Exchange, 2022) and 2022 (Cheshire & Mendelson, 2022).[1] These data, displayed below in Chart 1, show that the total number of people experiencing homelessness in general, chronic homelessness, and unsheltered homelessness rose precipitously between 2018 and 2019 and have remained high. While some decreases were measured in 2022 for homelessness and unsheltered homelessness, chronic homelessness has continued to increase steadily. Furthermore, the proportion of homeless individuals who are unsheltered, which saw a peak in 2017 and 2018 at 30%, dropped to 21% in 2022.

Notably, the 2022 PIT count found that 77% of homeless in the region became homeless while living in San Joaquin County, suggesting that housing and economic conditions within the region are pushing individuals and families into a state of poverty, housing insecurity, and desperation. Indeed, vacancy rates within the multi-family housing sector are currently very low (less than 2% for affordable housing stock), and even the waiting lists for subsidized housing in San Joaquin County are closed.



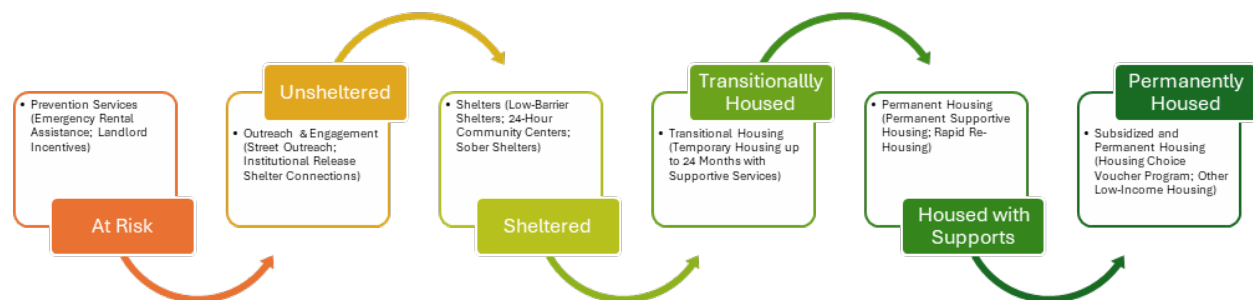
^[1] The 2024 PIT count had been conducted, but data were not available at the time that this plan was written.

The San Joaquin CoC

The San Joaquin Continuum of Care (SJCoC) is tasked with providing leadership and effective resource stewardship, as well as facilitating community planning, design, and implementation of programs critical to ending homelessness in San Joaquin County. The values driving the SJCoC are collaboration, communication, and transparency, along with a commitment to evidence-based programming and data-driven initiatives.

The goal of the San Joaquin CoC is to improve and support a comprehensive coordinated homeless housing and services delivery system operated by the community by bringing together stakeholders. The San Joaquin CoC supports stakeholders throughout the San Joaquin County region to assist homeless persons in making the transition from homelessness to independent or supportive permanent housing, accessing education, health, and mental health services, employment training, and life skills development. We are dedicated to the development and implementation of strategies to create permanent solutions to homelessness in our community.

The SJCoC includes all the services homeless people need along the full spectrum of homelessness, ranging from outreach and engagement to emergency shelter to transitional housing to permanent supportive housing or affordable housing. It is designed to ensure and coordinate support at each point along the spectrum of homelessness.



Partnership Model

The SJCoC is tasked through federal and state regulations to:

- Promote a community-wide commitment and approach to preventing and ending homelessness.
- Disburse funding to rapidly re-house homeless individuals and families.
- Promote access to and effective use of mainstream programs (such as Housing Choice Vouchers, Food stamps, and other public benefit programs).
- Optimize self-sufficiency among individuals and families experiencing homelessness.

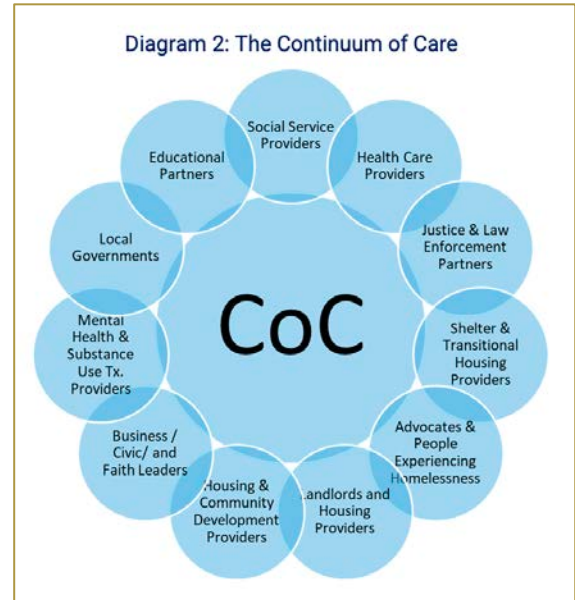
The SJCoC comprises diverse partners working jointly and collaboratively to prevent and end homelessness.

Organizationally, the SJCoC is guided by a governing Board of Directors. Governing Board members are nominated through an annual “open call” to solicit interested parties to serve on the Board. The board roster is fluid and responsive to the needs of the community, but it will generally have a minimum of 11 board members and a maximum of 21. At least one, ideally more, Persons with Lived Expertise and Experience (PLEE) in homelessness serve on the Board.

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Board members generally represent a rich array of professional and service interests and, at a minimum, include people who are themselves or provide services to the specialty sub-populations that comprise the homeless community. This includes but is not limited to, partners that work with or provide services to, homeless youth, veterans, people fleeing domestic violence, people with HIV/AIDS, people with mental health and substance use conditions, and those who are chronically homeless.

Additionally, the SJCoC is supported and informed by numerous community members and professionals who participate in twice-annual “general membership” meetings, serve on various committees, and serve as the heart and soul of the SJCoC. Made up of retired people, business leaders, program staff, members of faith communities, and people who have experienced homelessness, the membership provides unflinching support to our community during bi-annual point-in-time count activities, fundraising events, and other calls to action. During the COVID-19 pandemic shutdowns of 2020, members rallied to ensure that everyone experiencing homelessness had adequate food, hygiene supplies, and information about the health risks to keep themselves safe. For this planning effort, the general membership attended public meetings, participated in focus groups, responded to a community survey, and provided as-needed information and ideas to the planning team on a near-constant basis.



Anchoring the SJCoC is its partnership with San Joaquin County to serve as its Collaborative Applicant and fiscal sponsor to receive and manage federal and state entitlement grant funds, including the federal CoC Program Competition funds and State of California Homeless Housing Assistance and Prevention Funds.

Complimenting San Joaquin County’s role as the Collaborative Applicant, the four largest municipalities in the region are all deeply engaged with SJCoC, with staff either serving as Board members, heading up various committees and task forces, and participating in regular conversations through the SJCoC, and within their communities to guide and shape the narrative and opportunities to prevent and end homelessness.

Partner Roles and Responsibilities

Across the nation, CoCs are charged with developing and maintaining a continuum of programmatic services, supports, and housing opportunities necessary to prevent and end homelessness.

- Outreach, engagement, and rapid linkages to services to prevent unsheltered homelessness, whereby people are living in places not intended for habitation, such as a vehicle or tent;
- Interim, temporary, and transitional housing programs as necessary to provide immediate sheltering for individuals and rapidly connect them to long-term services and permanent housing opportunities; and,

Planning and Coordination:

- Homeless Outreach
- Interim Housing
- Homeless Housing
- Land Use and Development

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- Permanent housing for those exiting homelessness or those at immediate risk of becoming homeless through rent assistance and wrap-around support services to help clients maintain housing and optimize their self-sufficiency.

In California, CoCs are also enjoined to actively plan and advocate for new affordable housing opportunities for homeless individuals. This includes reviewing and prioritizing potential sites and projects for new developments and providing informed and coordinated input to local planning departments.

The CoC is also responsible for ensuring that the system works as intended to achieve desired results, as part of coordinating and strengthening the system of care.

At a minimum, this means that programs are using resources wisely, delivering effective and culturally responsive services, working in a coordinated fashion, and sharing metrics and information to enhance service delivery and leverage additional resources.

Locally, the SJCoC is aided in these endeavors by strong partnerships and coordination with San Joaquin County and the City of Stockton, who also receive direct state and federal grant allocations to address homelessness. Jointly, these three partners have entered a regional and coordinated compact through a Memorandum of Understanding (MOU) to work in concert to achieve regional aims. The SJCoC, The County of San Joaquin, and the City of Stockton are joined in this partnership by the support and assistance of the City of Lodi, the City of Manteca, the City of Tracy, the Housing Authority of the County of San Joaquin, Health Plan of San Joaquin, Health Net, and the County Departments of Behavioral Health Services, Public Health, and Probation all of whom jointly and collaboratively contributed to this Action Plan.

Subsequent sections of this report include further details about all three partners' specific roles and responsibilities for implementing this Action Plan.

Additional Responsibilities:

- Grant and Fiscal Management
- Data Management and Facilitating Information Sharing
- Evaluating Performance and Equity Measures
- Building Local Capacity (with a focus on emerging PLEE, BIPOC, and LGBTQIA+)
- Land Use and Development

Key Partners to this Action Plan

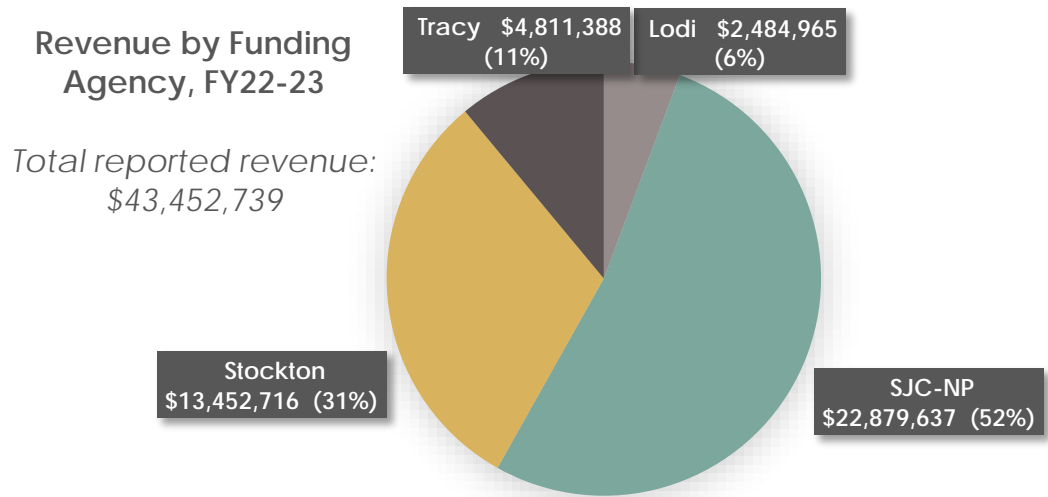
- San Joaquin County (SJC)
- City of Stockton (CoS)
- San Joaquin Continuum of Care (SJCoC)

Current Use of Funds

This Action Plan aims to strengthen the collaborative and regional approach to ending homelessness. To this end, the Action Planning process followed State of California guidance, and considers a total approach that combines all available federal and state funds, designated for addressing homelessness, which are received and managed through local jurisdictions including the SJCoC.

The revenue and expenditure analysis below, is based upon budget information received from the Cities of Lodi, Manteca, Stockton, and Tracy and from the County of San Joaquin's Neighborhood Preservation Unit which manages the tasks of the Collaborative Applicant and manages all other Federal and State affordable housing and homeless related program grants. Additional information was received from Managed Care Plan partners, San Joaquin County Behavioral Health, and Whole Person Care Programs.

REVENUES AND EXPENDITURES: FISCAL YEAR 2022 – 2023



Across the four municipal partners, the County of San Joaquin and SJCoC, the region reportedly received over \$43 million in state and federal funding to address homelessness.

Additionally, County Health and Behavioral Health programs received separate allocations to provide outreach and engagement services, street medicine, addiction, and mental health treatment services, and to provide case management and housing to people with serious mental illnesses. Hospitals and public health plans for medical care and treatment absorb an additional sum. All told, **the region spends between \$130,000,000 to \$160,000,000 annually** on addressing homelessness, according to the 2022 Cost of Homelessness Report by the University of Pacific’s Center for Business and Policy Research.

Most of the funding received, and re-distributed into the region, was through federal grants, although some cities made allocations from their general fund balance.

Revenue by Source, FY22-23
Total reported revenue: \$43,452,739



Of the funds received in FY 2022-2023, State HHAP funds accounted for the largest share, followed by federal CoC Program competition funds. In total, 49% of all funding was from federal sources, 44% from state

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sources, and 7% were local allocations. Of the funds received, about \$20 million can be considered “ongoing annual allocations,” primarily federal funds.

However, of the long-term ongoing funds, only HUD’s CoC Program Competition funds and Emergency Solutions Grant (ESG) funds (\$6.5 million and \$700,000, respectively) are specifically intended for homeless services and support. Other funds such as HOME and PLHA funds are intended for affordable housing projects which may have the benefit of increasing the housing supply. Community Development Block Grant (CDBG) program funds may be used for a range of community benefit programs, including programs that offer case management, food and nutrition, and other supportive services that may have homeless individuals and households as intended program recipients – or may not.

Of the \$43 million received in FY 2022-2023, collectively, the SJCoC, the County of San Joaquin, and the Cities spent or re-allocated nearly \$34 million during this same period. Notably, the City of Stockton allocated more funds than were received in 2022-23, likely due to disbursements of prior year allocations. In general, the City of Stockton is expending resources at a somewhat faster pace than the County of San Joaquin/SJCoC’s combined allocations.

Table 4: Total Revenue and Expenditures, FY22-23

	Stockton	SJC	Tracy	Lodi	Healthnet	Total
All Revenue	\$13,452,716	\$22,879,637	\$4,811,388	\$2,484,965	Not Reported	\$43,452,739
All Expenditures	\$14,155,012	\$11,171,693	\$4,626,561	\$2,309,454	\$1,550,135	\$33,812,856
Revenue Minus Expenditures	(\$702,296)	\$11,707,944	\$184,827	\$171,511	N/A	\$3,501,234
Revenue Remaining (%)	-5%	51%	4%	7%	N/A	9%

Consistent with prior regional planning, the greatest proportion of funds were allocated to the construction of new permanent and interim housing projects, which jointly accounted for 57% of all homeless spending in FY 2022-2023 (\$18.7 million).

Table 5: Expenditures by Strategy/Allowable Use

Strategy / Allowable Use	Sum of Expenditures
Permanent Housing	\$17,400,746
Capital for Permanent Housing	\$10,845,886
Rapid Rehousing	\$1,592,403
Prevention and Diversion	\$4,404,623
Services and Subsidies for Permanent Housing	\$557,834
Interim Housing	\$11,202,981
Operating Subsidies for Interim Housing	\$2,342,720
Renovations and Upgrades	\$979,666
Delivery of New Interim Housing	\$7,880,595
Service Provision and System Support	\$3,396,365
Street Outreach	\$1,969,858
Service Coordination	\$661,041
System Support	\$765,467
Administration	\$1,812,764
Grand Total	\$33,812,856

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In summary, looking at all revenues and expenditures, spending in FY 2022-23 was responsive to prior regional planning with expenditures allocated as follows:

- Permanent Housing: 52%
- Interim Housing: 33%
- Services and Coordination: 10%
- Administrative Costs: 5%

Across the top ten agencies receiving funding allocations through the SJCoC, County, and local municipalities the first nine largest allocations were for the provision or development of permanent housing:

Table 6: Top Agencies Allocated Funding by SJCoC, County, and Local Municipalities

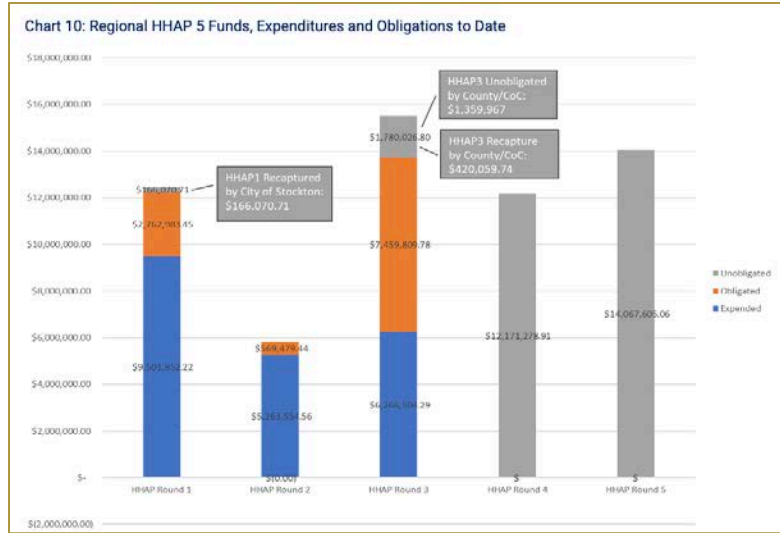
Agency	Total Expenditures
Housing Authority (DCDC)	\$7,133,136.00
Central Valley Housing	\$5,424,993.01
Tracy Navigation Center	\$4,610,802.10
Visionary Home Builders	\$3,109,652.73
Stockton Navigation Center	\$2,106,388.49
Lodi Navigation Center	\$2,009,725.12
Children's Home of Stockton	\$1,313,137.39
Lutheran Social Services	\$859,554.01
STAND	\$856,531.41
St. Mary's Community Services	\$767,600.06

HHAP REVENUES AND EXPENDITURES (ALL ROUNDS)

Looking forward, an additional \$26 million in one-time HHAP Round 4 and Round 5 funds are coming into the region and an additional \$9 million of HHAP Round 3 funds was unexpended as of December 31, 2023, suggesting that a total of \$35 million in state HHAP funds needs to be expended over the next four years. Importantly, allocations must be spent on schedule to prevent reversion to the state's general fund.

HHAP PROGRAM SPENDING DEADLINES:

- HHAP-1: by 6/30/25
- HHAP-2: by 6/30/26
- HHAP-3: by 6/30/26
- HHAP-4: expend (50%) of initial by 5/31/25 and remainder by 6/30/2027.
- HHAP-5: expend (50%) of initial by 6/30/26 and remainder by 6/30/2028.



To date, program expenditures have been slower than anticipated due to numerous compounding challenges, including:

- **Influx of One-time Funds:** In addition to the State’s HHAP allocations, new one-time American Rescue Plan Act funds also required spend down along specific timeframes. In general community partners were encouraged to draw down from ARPA related contracts prior to HHAP related contracts.
- **Contracting Processes:** Fair and transparent public purchases take time. Other aspects of contracting, including scope refinements and approvals, also contribute to delays in getting contracts executed in a timely manner. County/SJCoC HHAP-3 contracts were just completed recently, in Fall 2023.
- **Construction Delays:** Supply chain logistics have been a hurdle. More critically, any capital development project comes with its own timing challenges associated with securing additional financing, approvals, and permits. In the case of the Stockton Navigation Center, permits were required from the Federal Department of Transportation to build underneath Interstate 5.

Program and Service Utilization

DATA DASHBOARD

Table 7: Utilization Data from San Joaquin CoC Data Dashboard (August 2022)

Engaged by Project Type: 04/01/2021 - 06/30/2022		
	Individuals (N = 11,866)	Households (N = 8,311)
Emergency Shelters	7,730	4,956
Permanent Housing with Services	39	39
Permanent Supported Housing (for people with disabling conditions)	732	547
Rapid Re-Housing	1,930	841
Street Outreach	4,056	3,931
Transitional Housing	535	451

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According to data from the HMIS data dashboard, nearly 12,000 individuals accessed homeless services in San Joaquin County during the 15-month period between April 2021 and June 2022. For all persons active in the HMIS system, 14,659 case management encounters were recorded, or approximately 1.2 case management sessions per person or 1.8 per household served. Despite case management sessions being the most frequent type of service, data entry was sporadic across programs. While some programs appear diligent about recording case management activities, others, particularly interim housing programs, were less inclined to report these types of activities.

Other data regarding program utilization appear more reliable. All told, 732 individuals in 547 households received permanent supportive housing. An additional 39 households benefitted from permanent housing and did not require long-term supportive services, consistent with a disabling condition. Enrollments (pre-determined eligibility) into rapid re-housing were also robust, with 1,930 individuals from 841 households qualifying for rapid rehousing (RRH) assistance and services. Typically, RRH program recipients will receive case management and housing navigation services. Those that can find housing are provided with short-term rental assistance. During the first part of the reporting period, an average of about 50 households entered a new RRH situation each month. Later data show that the figure drops to an average of 33 households entering RRH programs each month. Additional data is forthcoming and will provide information if the dip in placements was an abnormality or a sign of more concerning trends.

HOUSING INVENTORY COUNT

Table 8: Utilization Data from Housing Inventory Count (November 2023)

Housing/Program Type	Capacity (# of Beds)	Occupancy	Occupancy Rate	# and % of Sites Operating Under-Capacity
Emergency Shelters	1,311	892	68.0%	26 out of 42 = 62%
Transitional Housing	326	170	52.1%	12 out of 15 = 80%
Other Permanent Housing	530	408	77.0%	2 out of 3 = 67%
Permanent Supportive Housing	752	650	86.4%	5 out of 7 = 71%
Rapid Re-Housing	381	381	100.0%	0 out of 19 = 0%
Total (All Types)	3,300	2,501	75.8%	45 out of 86 = 52%

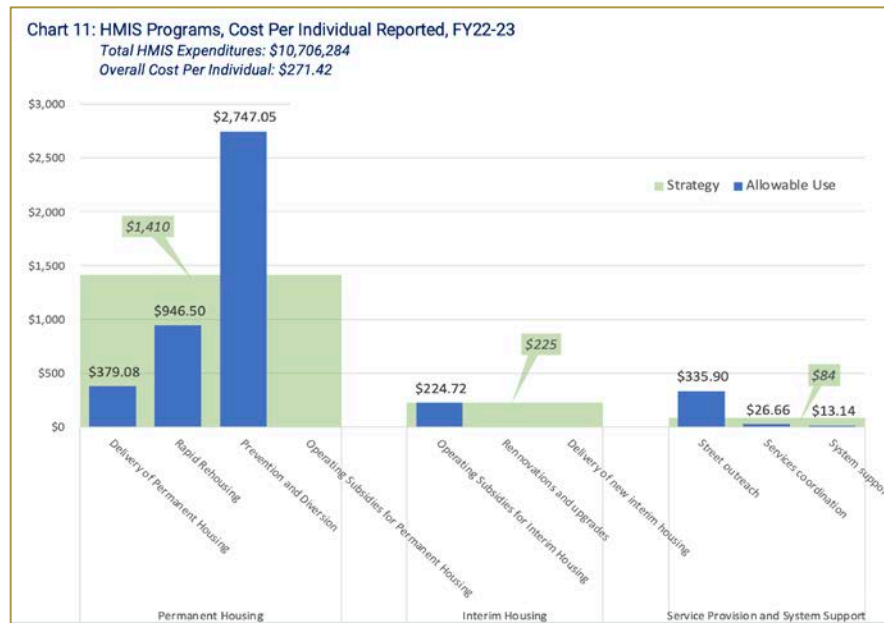
At the request of the planning team, the HMIS lead agency prepared a “proxy” housing inventory count for one night in November to provide an informal snapshot of interim and permanent housing utilization. The chart above shows overall occupancy rates for different types of interim and permanent housing. Further analysis of the HIC data revealed the following findings:

- There are eighty-five separate programs, providing 3,300 different interim, transitional, and permanent housing options.
- Occupancy rates were highest for units dedicated for short-term RRH placements (100%)
- Family shelters had lower occupancy rates than non-family shelters. This is expected, as family shelters tend to have more “beds” per unit than is necessarily needed at that moment (e.g., the unit has a rated capacity of five beds, but the family size is three).
- Emergency shelters designed for individuals had higher occupancy rates (83%) than when aggregated together with family-serving programs.
- Utilization rates were lowest for transitional housing (52%) and voucher-based programs (65%).
- Transitional housing programs with the lowest occupancy rates typically had more barriers to entry (e.g., sobriety or faith requirements).

FISCAL YEAR 2022-2023: EXPENDITURES BY PROGRAM UTILIZATION

About one-third of the expenditures made by the contributing program partners in FY 2022-2023 were allocated to programs intended to have direct client benefit. The chart below shows the average per-person program cost/benefit:

- Engaged in a permanent housing program: \$1,410.00
- Engaged in an interim housing program: \$225.00
- Receiving street outreach or other case management: \$84.00



Persons who receive the greatest benefit from public resources are those at risk of homelessness, who received, on average, \$2,747.00 per person, likely rental assistance, or other subsidies to remain housed.

This data shows that the region's most resource intensive intervention is in preventing new incidents of homelessness.

V. SYSTEM PERFORMANCE MEASURES

People Experiencing Homelessness

According to the most recent report generated by the San Joaquin CoC Homeless Management Information System (HMIS) and released by the state's Homeless Data Information System (HDIS), the number of unduplicated individuals receiving homeless services is 11,722.

This figure, along with figures for the number of people experiencing homelessness for the first time and the percentage of people returning to homelessness within six months of exiting permanent housing, is down slightly from 2022 figures (See Table 1). Approximately 53% of individuals in the HMIS data report experiencing homelessness for the first time, suggesting that the problem of homelessness is continuing to grow in the San Joaquin region.

Table 1: System Performance Measures

Measure	CY 2020	CY 2021	CY 2022	7/1/22-6/30/23
1.a. Number of persons experiencing homelessness in HMIS	9,421	8,931	11,977	11,722
1.b. Estimated number of people experiencing unsheltered homelessness on the SJCoC PIT count	1,558	-	1,355	1,355
2. Number of people accessing services who are experiencing homelessness for the first time	4,715	4,348	6,485	6,211
3. Number of people exiting homelessness into permanent housing	977	913	1,273	1,169
4. Average length of time (in days) that people were enrolled in non-residential or short-term programs without securing long-term housing	73	85	72	76
5. Percent of people who return to homelessness within 6 months of exiting homelessness response system to permanent housing	6%	12%	19%	11%
6. Number of people with successful placements from street outreach (temporary or permanent)	4*	2*	3*	6*

* Low numbers likely a result of insufficient data entry practices

Table 2 lists the individuals in the HMIS system according to specific characteristics, including gender, family structure, and key vulnerabilities.

Table 2a: Individuals Served by Key Characteristics

Gender / Household Composition	Number	Proportion of Total
Man/Boy	6,372	55%
Woman/Girl	5,316	45%

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Transgender	18	0.2%
Single adults without children	6,445	52%
People in families with at least 1 child	5,492	44%
People in households with only children	469	4%

Table 2b: Individuals Served by Vulnerabilities

Additional Vulnerabilities	Number	Note
Adults with SUD	1,339	Percentages are not calculated. The high number of children served by the homeless system would skew a proportional analysis.
Adults with SMI	1,182	
Veterans	463	
Adults fleeing Domestic Violence (DV)	337	
Parenting Youth	249	

People Living Unsheltered in San Joaquin County

Point in Time (PIT) homeless count data from 2022 (HUD 2022b), which is the latest data available at the time of this plan, show sheltering variations:

- Sheltering by the presence of children in the household

The majority (75%) of people living in households without children (single adults) were unsheltered, vs. all (100%) people in households with at least one adult and child (families) were in emergency shelters or transitional housing.

- Sheltering status of unaccompanied youth

Nearly the same proportion of unaccompanied youth were sheltered (54%) and unsheltered (46%) (n=72).

- Sheltering by status of people with behavioral health conditions

A large majority (73%) of people with chronic substance abuse issues were unsheltered (n=602), and a very large majority (79%) of people with serious mental illness were unsheltered (n=567).

- Sheltering status of other vulnerable populations

All (100%) people known to have HIV/AIDS were sheltered (n=10); most (67%) people fleeing domestic violence were sheltered (n=32); and most veterans (71%) were unsheltered (n=127).

Findings from the Unsheltered Encampment Outreach Study researched and published by the United Way of San Joaquin County provide insights into the personal situations and challenges that may have contributed to the experience of homelessness.

Data highlights from the study show that among those living unsheltered:

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- 33% did not graduate from high school.
- 37% reported that "job loss/income reduction" contributed to their homelessness.
- 64% indicated that losing employment or housing was part of what contributed to them becoming homeless.
- 44% reported being prevented from working because of a disability.

Consistent with state and national trends, the vast proportion of people experiencing homelessness in San Joaquin County, sheltered or unsheltered, are from San Joaquin County.

Racial and Ethnic Disparities by Performance Measures

For the purposes of running an analysis of racial and ethnic disparities, some recoding of the traditional Census designations was conducted to construct a more consolidated set of categories that recognized Latina/o/x individuals as non-white, even if they did not select "Black." These consolidated categories grouped all Asian-identified, Black-identified, Native American/Alaska Native-identified, and Polynesian/Pacific Islander-identified in those self-same designations, irrespective of Hispanic identification. People who indicated they were of Hispanic ethnicity were grouped into the Latina/o/x category (Lx) if they were also white, Multi-Ethnic, or Unknown. The category of White comprised people who were white-identified and not of Hispanic ethnicity.

The following analyses are based on these recorded racial and ethnic categories.

HMIS TOPLINE BY RACE/ETHNICITY:

The HMIS data report lists a series of figures and outcomes broken down by the recoded race/ethnicity categories in Table 3. Please note that the data for Measure 1.b., Unsheltered Count from PIT, was not provided in a way that enabled analysis using the race/ethnicity categories, so that measure is not listed below.

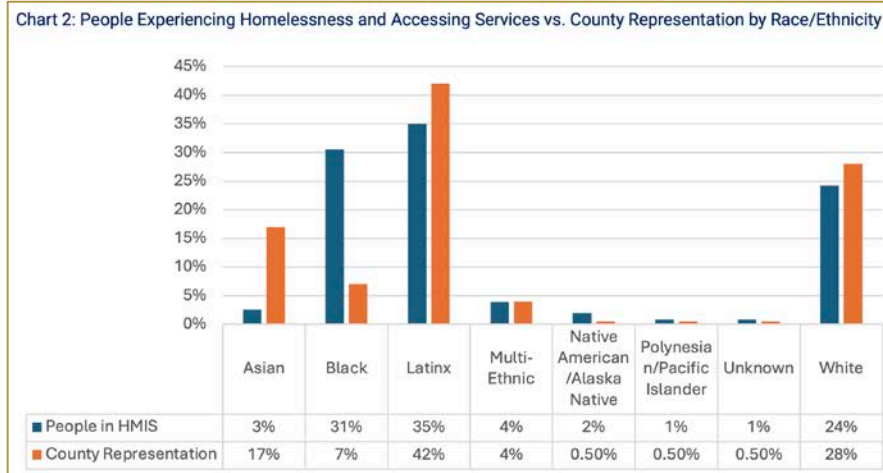
Table 3: HMIS Topline Measures

	Measure 1a: Number of people accessing services who are experiencing homelessness	Measure 2: Number of people accessing services who are experiencing homelessness for the first time	Measure 3: Number of people exiting homelessness into permanent housing	Measure 4: Average length of time (in days)	Measure 5: Percent of people who return to homelessness within 6 months of exiting homelessness to permanent housing
Asian (all)	317	205	35	59	11%
Black (all)	3,556	1,824	411	79	13%
Latinx (combo)	4,067	2,222	385	67	10%
Multi (non-Lx)	453	261	56	73	13%
Native American/ Alaska Native (all)	204	92	18	79	20%
Polynesian/Pacific Islander (all)	116	59	***	96	0%
Unknown (non-Lx)	96	81	***	34	0%
White (non-Lx)	2,805	1,397	231	91	10%

COUNTY POPULATION COMPARISON:

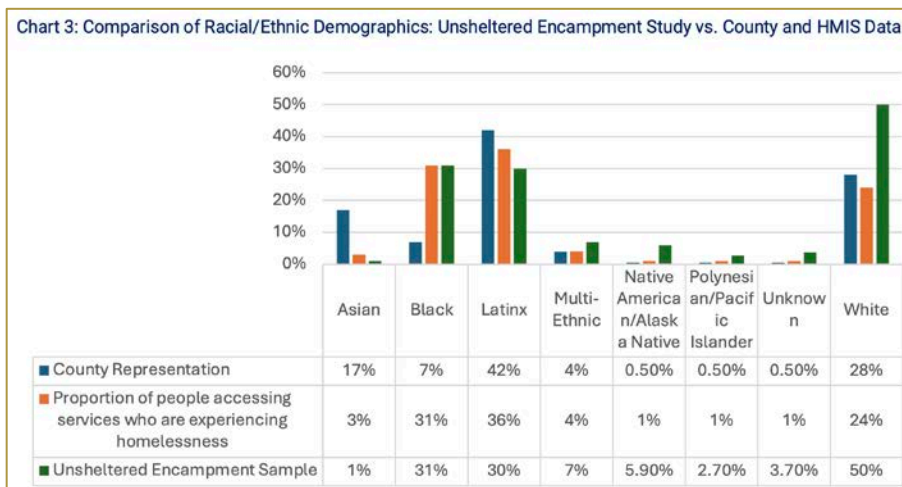
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The HMIS data show some disproportionality between the racial and ethnic composition of county residents versus the composition of people accessing services who are experiencing homelessness. As shown in Chart 2, relative to their representation in the community, Black residents are highly over-represented in the HMIS data, Asian residents are highly under-represented and white and Latinx residents are slightly under-represented.



UNSHELTERED HOMELESSNESS:

Certain racial/ethnic groups are overrepresented among the unsheltered homeless. For this measure, because PIT count data were not provided according to the previously described racial/ethnic groups, this analysis considers data from the San Joaquin County Unsheltered Encampment Outreach Study (Birtwhistle, et al., 2023). For comparison purposes, Chart 3 shows the racial/ethnic breakdowns of people surveyed in the Unsheltered Encampment Study with both county and HMIS racial/ethnic breakdowns. As evident in the chart, among unsheltered homeless, Asian residents are substantially underrepresented, Black residents are highly overrepresented, Indigenous peoples (both American Indian/Alaska Native and Polynesian) are highly overrepresented, and Multi-Ethnic people are somewhat overrepresented. Curiously, while white residents are slightly underrepresented among people in the HMIS, they are highly overrepresented among the unsheltered vis-a-vis their representation in the county.

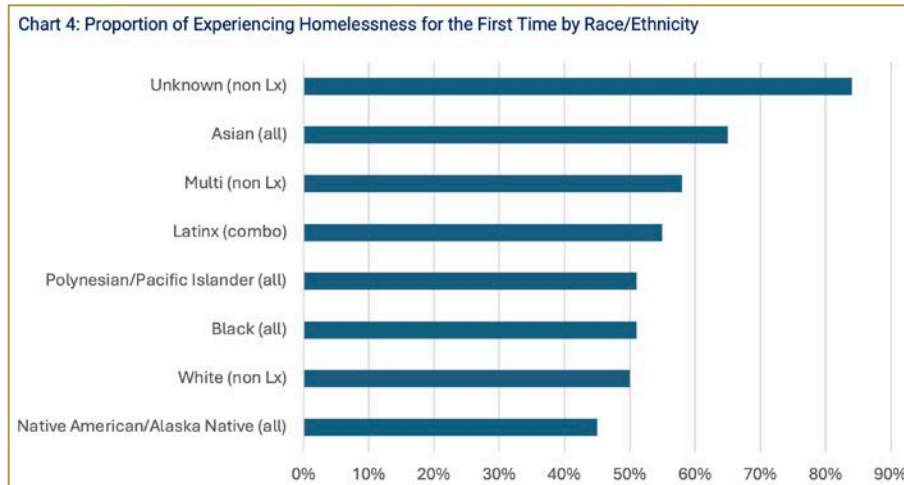


FIRST TIME HOMELESSNESS:

Among all individuals represented in the HMIS data, the proportion experiencing homelessness for the first time is 53%. As Chart 4 shows, when disaggregated by race/ethnicity, differential rates of first-time

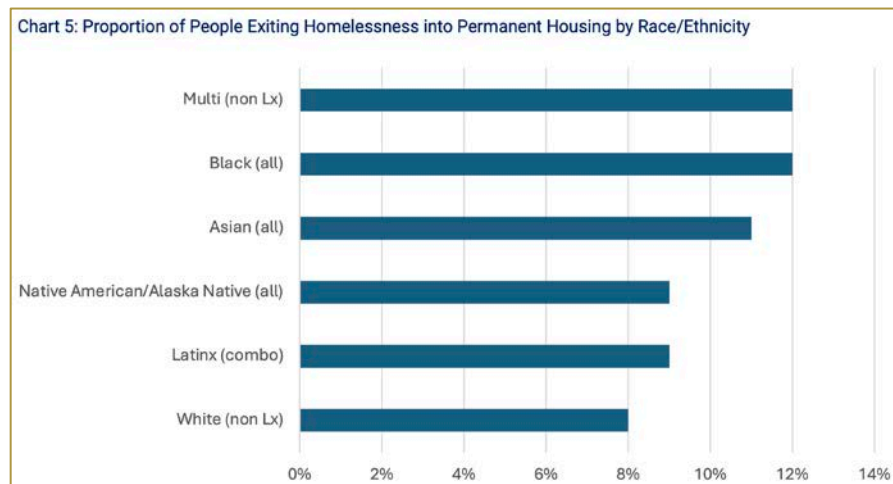
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homelessness become evident. The three groups with a higher-than-average proportion experiencing homelessness for the first time were Asian and Multi-Ethnic, as well as those whose race/ethnicity was Unknown.



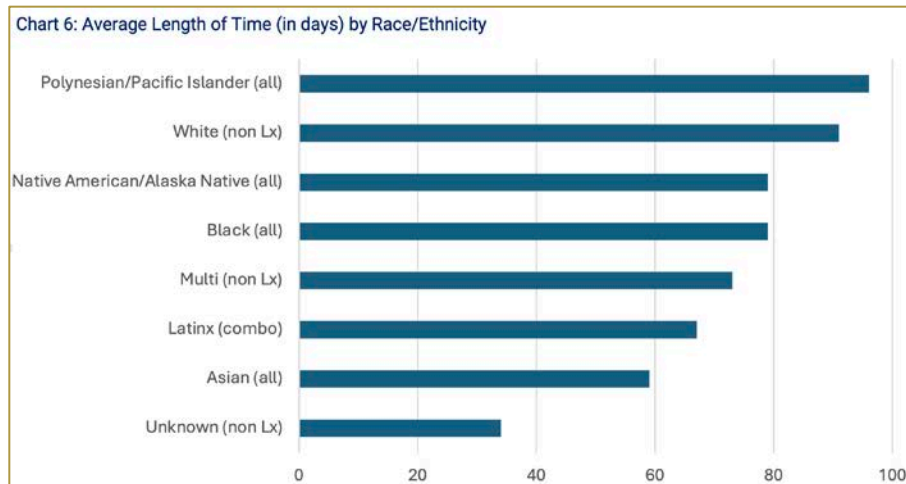
EXITS TO PERMANENT HOUSING:

Among all individuals in the HMIS data, the overall proportion exiting into permanent housing was 10%. Disaggregation by race/ethnicity shows that Asian, Black, and Multi-Ethnic individuals had higher rates of obtaining permanent housing, while Native American, Latinx, and White individuals had lower-than-average rates. Data were not reported for Polynesian/Pacific Islander individuals and those of unknown race/ethnicity.



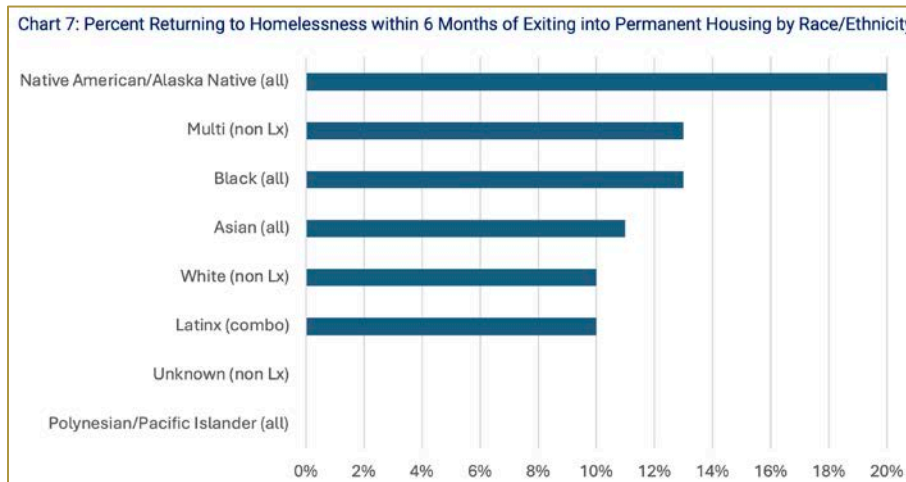
LENGTH OF TIME HOMELESS:

Overall, the average length of time that people spent enrolled in street outreach, emergency shelter, transitional housing, safe haven projects, and time prior to move-in for persons enrolled in rapid rehousing and permanent housing projects was 76. A few racial/ethnic groups had higher-than-average numbers of days in known homelessness, including Polynesian/Pacific Islander, White, Native American, and Black. Groups with less-than-average lengths of time in known homelessness included Multi-Ethnic, Latinx, Asian, and those of Unknown race/ethnicity.



RETURNS TO HOMELESSNESS:

The HMIS data show that overall, 11% of individuals who exit homelessness to permanent housing return to homelessness within six months. The analysis by race/ethnicity shows that people who are Native American/Alaska Native have a much higher rate than average (20%). Multi-Ethnic and Black individuals have slightly higher-than-average rates of return to homelessness, and White and Latinx people have close to average rates. The rates for people of Unknown race/ethnicity and Polynesian/Pacific Islander individuals were listed as zero.



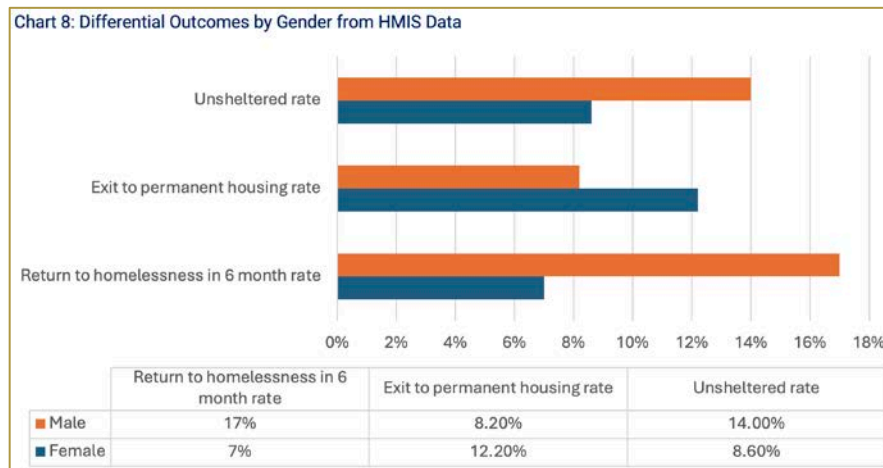
Gender Disparities by Performance Measures

INCREASE IN FEMALE HOMELESSNESS:

The current HMIS 511 data for the San Joaquin region show that 45.6% of people in the HMIS system are female. This compares to 41% in 2015 (HUD Exchange, 2015). This increase is consistent with a statewide trend measured by the U.S. Department of Housing and Urban Development (HUD). Over the past eight years (as of December 2023), there has been an increase of more than 50% in the number of women experiencing homelessness in California -- many of these women face additional vulnerabilities associated with pregnancy, parenthood, and domestic violence (McClure, 2023).

DIFFERENTIAL OUTCOMES BY GENDER:

The HMIS data show that men/boys, comprising 54.4% of all individuals in the system, were more likely to be unsheltered and return to homelessness, and were less likely to exit to permanent housing, as compared to women/girls in the system (See Chart 8). As there were only 18 individuals listed as Transgender, most of these outcomes were not listed in the HMIS data report for Transgender individuals.



ADDITIONAL GENDER DIFFERENCES:

Males and females in the HMIS system had moderately different rates of first-time homelessness (51% and 55%, respectively), although the small number of Transgender individuals had a substantially higher rate (67%). The average length of time (in days) that people were known to be homeless, as documented within the SJCoC's HMIS, differed by gender, with men showing 84 days, women showing 66 days, and Transgender individuals showing 133 days.

VI. KEY FINDINGS

Community Service Needs

- Accessible / Responsive / Non-Duplicative Services
- Housing Navigation
- Affordable Housing
- Housing for Vulnerable Populations
- Culturally Responsive Services

ACCESSIBLE / RESPONSIVE / NON-DUPLICATIVE SERVICES

The mixed methods analysis points to a need for a robust system to assess individual needs and place people accordingly. This will require enhanced coordination and collaboration among community partners, emphasizing the importance of honest and open conversations among service providers.

Stakeholders reported in interviews that the services for people experiencing homelessness are fragmented and not easily accessed. The Community Survey revealed coordination across agencies (criminal justice, behavioral health, hospitals, housing resources, domestic violence programs, etc.) as the top priority for addressing homelessness in the San Joaquin region. In workshops and interviews, stakeholders asserted that while the issues and challenges that homeless individuals are experiencing are interconnected, the services that could help them are disconnected. As a result, a person seeking support will need to access multiple agencies, undergo repetitive intakes, and still not be guaranteed to receive the support they need.

One direct service provider explained:

“

It’s an onion... and you’re trying to isolate each layer, but it’s not you; you can’t. For an individual to be able to be successful, you have to be able to transition to mental health treatment, substance abuse treatment, housing, health services, [and] all of these services are siloed; they are all separate. So, the individual has to go somewhere, then go somewhere else, and go through the whole process at a different physical location: one for substance abuse and another intake process at a different location. Everything is so siloed, and I get it because funding is separate, but it discourages people from accessing services.”

While calling 211 could theoretically be a way for homeless people to access care more seamlessly, few people experiencing homelessness can take advantage of this resource. Many do not have a phone to make the call in the first place, and if they do have a phone, it is seldom charged. Some may make the call with the assistance of an outreach worker, but in most cases, they must leave a message and wait for a callback, and without a phone, they have no ability to receive that return call.

Some of the barriers to effective communication and collaboration result from agencies and actors not being aware of one another and the array of resources that exist in the region; some arise from obstacles like restricted access to client information when entities do not have HIPAA clearance, and others still occur because funded agencies are not making optimal use of the HMIS system. With a more effective Coordinated Entry System, which makes better use of the HMIS, providers could coordinate case management efforts, reduce duplication, and capture basic intake information (reducing the need for repeat intakes).

More than one stakeholder indicated that there is a need for one-stop shops, where people experiencing homelessness can seamlessly access services and supports that correspond to the complex needs experienced by this population. Under one roof, or even as a mobile event, individuals and families could navigate resources and access immediate help, including medical care, legal services, mental health care, veterans' programs, substance abuse treatment, disability program enrollment, childcare, hygienic products, emergency shelter, housing applications, and more.

HOUSING NAVIGATION

The analysis points to a need for affordable permanent housing in the region. The lack of affordable housing poses a significant challenge, rendering housing vouchers ineffective if suitable properties are inaccessible. To address housing needs sustainably, stakeholders emphasized that long-term low-income housing solutions should be prioritized over short-term temporary shelters.

Furthermore, stakeholder input raised the need for improved housing navigation to help homeless individuals and families identify the potential housing resources among the few that do exist. The region's HMIS data show that around 90% of people in temporary shelters exit either to other temporary programs or unknown destinations, rather than permanent housing programs. Building up skilled housing navigation could help remedy this situation.

Current housing navigation services are insufficient and not guided by pre-established standards. Housing navigation should be readily available to all shelter residents and should constitute support with housing applications as well as the more nuanced work of brokering relationships among clients, engaging with landlords, putting clients on the Coordinated Entry list, and providing specialized case management plans that set people up for successful and sustained permanent housing.

Finally, stakeholder input underscored the need to increase awareness and access to housing resources for vulnerable populations to ensure equitable access to available services and support. They pointed to a need to equip the region with a continuum of low-barrier housing options to serve those with consistently less positive housing and provide creative housing options for individuals with extensive needs, beyond traditional shelters.

AFFORDABLE HOUSING

The dearth of affordable housing is a major contributing factor to homelessness in the San Joaquin region. Stakeholders recognize that the shortage of housing leads to shelter hopping among the homeless, which further destabilizes people's lives. They also indicate that high barriers to entry into affordable housing frustrate efforts to find permanent housing for people experiencing homelessness, especially those in key vulnerable populations. Many voiced concerns that there is insufficient support to ensure that once engaged in affordable housing, people will not return to homelessness.

Below are key findings from the multi-method analysis:

“We need to remove the barriers to housing navigation. There are too many inefficiencies within our current programs. We must improve coordination, implement streamlined processes, enhance communication, and generally act with a sense of urgency to provide successful housing exits.”

Participant, Key Stakeholder Interviews

RESOLVE BOTTLENECKS: Bottlenecks in the permanent housing process, such as limited availability of affordable housing units or bureaucratic obstacles, hinder progress, exacerbate homelessness in San Joaquin County, and highlight the need for more affordable housing options and streamlined housing placement processes.

HOUSING CONSTRUCTION RATE: Independent analyses of the region’s homeless issues and stakeholder input indicate that the housing construction rate has been inadequate to mitigate rising prices or meet demand. Specifically, the 2014 County’s Residential Housing Needs Allocation (RHNA) Plan called for 40,360 new units to be constructed in San Joaquin County between 2014 and 2023 (San Joaquin Council of Governments, 2014). The San Joaquin Council of Government's public data dashboard estimates a shortfall of 23,400 units on that initial promise (San Joaquin Council of Governments, 2022). The current RHNA plan adds to the total construction need, calling for 52,719 new units, including 21,637 very low and low-income housing units (San Joaquin Council of Governments, 2022a). The insufficiency was not lost on stakeholders – in nearly every interview and public input forum, the need to build additional affordable housing was specifically named. The region’s projected population growth is likely to exacerbate further the affordable housing shortage, which in turn would lead to more homelessness, shelter-hopping, disparities among vulnerable populations, and returns to homelessness after achieving permanent placement.

COORDINATION & ACCOUNTABILITY: Stakeholders expressed a desire to develop a unified vision and strategy for promoting self-sustainability among homeless individuals in permanent affordable housing, ensuring coordinated efforts and resources in San Joaquin County. To this end, the SJCoC must facilitate more rigorous accountability structures, enhance communication channels, and foster alignment and collaboration among stakeholders to address permanent housing needs for the homeless in San Joaquin County effectively.

PROMOTING SELF-SUFFICIENCY: It is difficult to equip individuals with the necessary resources and support to ensure self-sustainability and prevent returns to homelessness—most require some skill-building, education, and employment support to promote long-term independence. For higher-need populations, affordable housing must be accompanied by ongoing and comprehensive behavioral health care to maintain stability and avoid falling back into homelessness. Offering services such as counseling, skill-building workshops, employment assistance, and case management can enhance the success of individuals with mild to moderate needs.

ADDRESSING DISPARITY: Stakeholders pointed out insufficient programs focused on specialized support for populations experiencing disparities. This lack of targeted programs perpetuates barriers to permanent housing access and promotes disparate retention rates. The HMIS data show very clearly that Black residents are highly over-represented among the homeless in the San Joaquin region, and that certain populations are less likely to move into and sustain permanent housing (e.g., men, people with serious mental illness (SMI), people with substance use disorders (SUD), youth, and people who are Transgender). Customized outreach and support can help remedy these disparities in permanent housing outcomes.

HOUSING FOR VULNERABLE POPULATIONS

HMIS data provide outcomes for key populations experiencing specific circumstances and vulnerabilities, including:

- People with SMI (serious mental illness)
- People with SUD (substance use disorders)
- Youth facing housing challenges
- Transitional-age youth (TAY) transitioning out of foster care
- People fleeing domestic violence
- Veterans

Stakeholder engagement and a review of relevant reports indicate specialized needs among individuals exiting jails and prisons, and people leaving hospitals and behavioral health facilities, although outcomes in the HMIS data analyzed for this plan were not broken down based on these characteristics.

■ 2024 REGIONAL HOMELESS ACTION PLAN – KEY FINDINGS

Chart 12 lays out the differential rates of placement in permanent housing according to key client characteristics, including the aforementioned categories available in the HMIS data, as well as gender and family structure. This chart demonstrates that some populations have higher rates of exit to permanent housing than others. The existence of specialized programming for veterans, for example, enables a higher rate for this sub-population. Parenting youth, families in general, adults fleeing domestic violence (DV), and women tend to have overall higher rates of placement in permanent housing. By contrast, being male, Transgender, young, and single are associated with lower rates of placement. Also of note are the low rates among adults with SMI and those with SUD. There was no data available for people with HIV/AIDS on this outcome.

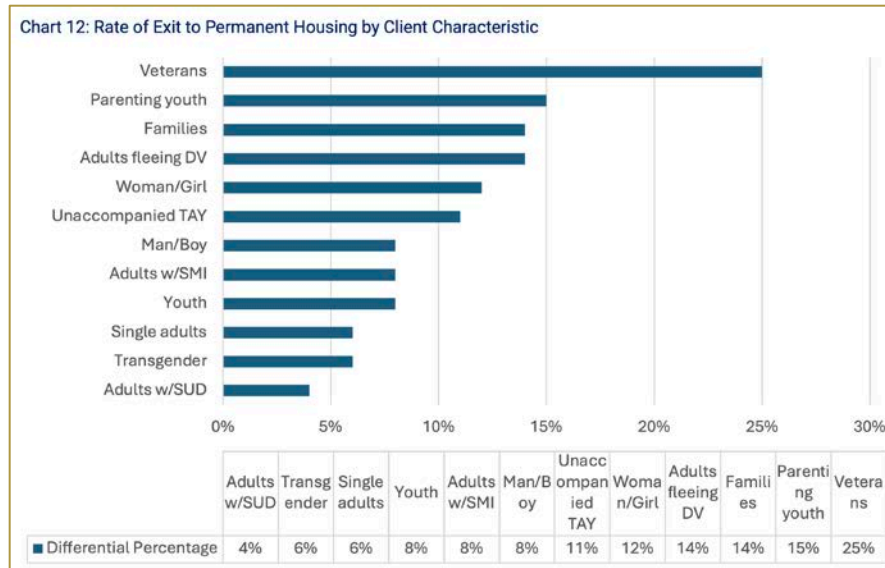
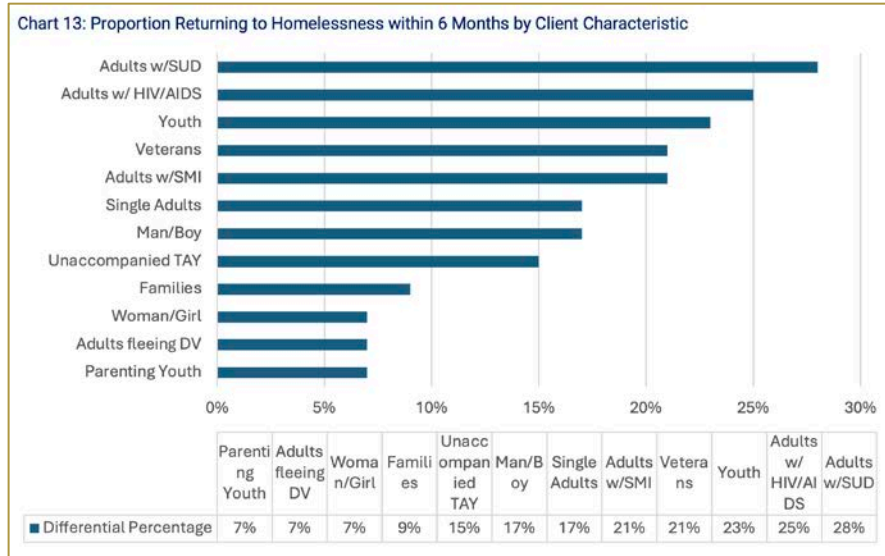


Chart 13 below shows the differential rates of return to homelessness (within six months of placement in permanent housing) according to these same client characteristics. Once again, adults with SUD, who had the lowest rate of placement, also have the highest rate of return to homelessness. Having HIV/AIDS, being a youth, and having an SMI are also associated with higher-than-average return to homelessness rates. Interestingly, while veterans had the highest rate for permanent housing placement, they also have a higher-than-average rate of returning to homelessness after placement, suggesting that veterans' housing programs might benefit from additional support for clients (perhaps trauma or PTSD-specific). Consistent with the permanent housing placement data above, the return to homelessness data show that people in families, parenting youth, women, and adults fleeing DV fare better than singles, men, and youth on their own. There were no data available for Transgender individuals on this outcome.



Community survey results provide a view on what some stakeholders believe to be priorities for addressing the specific needs of individuals leaving hospitals and jails into homelessness, and those of both youth and older adults.

When prompted to consider the complexities of serving people leaving jail into homelessness, respondents identified the following as the top priorities:

- Coordination across agencies (criminal justice, behavioral health, hospitals, housing resources, domestic violence programs, etc.) (61%)
- Outreach to unsheltered and/or vulnerable people exiting hospitals or jails (58%)
- Delivery of mental health treatment (30%)

Stakeholder input confirms that poor cross-agency coordination leads to gaps in service and challenges in placing individuals leaving jails, particularly those who do not qualify for limited specialized programs for individuals with disabilities or medical needs. They also indicate that the small number of low-barrier shelter beds in the region also hinders the easy placement of people leaving jail.

Improved cross-agency coordination and increased outreach also stood out in survey responses for how to support better outcomes for people leaving hospitals. Respondents felt increased permanent supportive housing with intensive case management should be prioritized for this population, as well:

- Coordination across agencies (criminal justice, behavioral health, hospitals, housing resources, domestic violence programs, etc.) (61%)
- Access to permanent supportive housing (with intensive case management) (52%)
- Outreach to unsheltered and/or vulnerable people exiting hospitals or jails (45%)

Stakeholder input pointed to the lack of discharge planning and cross-agency coordination for those leaving hospitals, naming the need for direct linkages to services and shelter at the moment of release.

In response to data showing poor outcomes among youth along the homeless continuum of care, survey respondents identified a range of priorities without much consensus. The top four are provided below, and while none show a majority of responses, the array demonstrates an appreciation that when youth are experiencing homelessness, their needs are usually complex and multi-faceted.

■ 2024 REGIONAL HOMELESS ACTION PLAN – KEY FINDINGS

- Access to permanent supportive housing (with intensive case management) (48%)
- Coordination across agencies (criminal justice, behavioral health, hospitals, housing resources, domestic violence programs, etc.) (36%)
- Delivery of mental health treatment (36%)
- Access to safe low-barrier shelter beds (no drug testing or other requirements for shelter) (33%)

There was more consensus among survey respondents when it came to contemplating how to best serve older adults experiencing homelessness who identified the following top three priorities, focused very clearly on permanent housing and prevention strategies:

- Access to permanent housing or rental assistance (with modest case management) (70%)
- Prevention activities (emergency rent assistance, eviction protection) (61%)
- Access to permanent supportive housing (with intensive case management) (52%)

Stakeholder input lent insights as to the challenges facing homeless individuals with SUD and SMI:

- People with SUD have few options, either for temporary shelter or permanent housing. A true housing-first approach requires accessible low-barrier shelter, navigation, and program options that do not pre-suppose sobriety or recovery.
- There is insufficient support for individuals exiting behavioral health facilities, including a lack of beds, alternative housing options, affordable housing, staffing, case management, medical support, and basic essentials.
- There is an overlap between people with SMI and those with SUD, as some people with SMI self-medicate in the absence of adequate psychiatric care. The exclusion of people with SUD from programs (that require drug tests) may, therefore, also affect the outcomes of people with SMI.
- People with SMI need ongoing treatment irrespective of their housing situation (or lack thereof), including free medication, psychiatric care, and medication management.

CULTURALLY RESPONSIVE SERVICES

When prompted to reflect upon what the highest priorities should be in addressing homelessness among Black residents of the San Joaquin region, whose representation among the homeless and unsheltered homeless are so disproportionate relative to their representation in the county, Community Survey respondents identified the following:

- Outreach to unsheltered and/or vulnerable people exiting hospitals or jails (45.5%)
- Access to permanent supportive housing (with intensive case management) (42.4%)
- Coordination across agencies (criminal justice, behavioral health, hospitals, housing resources, domestic violence programs, etc.) (42.4%)

In their comments, some respondents noted that intergenerational practices excluding Black people from housing and economic opportunities have long-term repercussions. Respondents also called for cultural responsiveness and implicit bias training for staff working within the continuum of care. Approximately 76% of respondents agreed that cultural responsiveness training should be tied to funding for homeless services, to improve service delivery based on race, gender, and other vulnerable categories, and 55% of respondents felt that the allocation of funds for homeless services should prioritize organizations that are led by people of color or have a proven record of serving people of color effectively.

■ 2024 REGIONAL HOMELESS ACTION PLAN – KEY FINDINGS

When asked to identify priorities for meeting the needs of the ever-increasing number of women experiencing homelessness, survey respondents indicated the following as their top three areas:

- Delivery of mental health treatment (51.5%)
- Access to permanent supportive housing (with intensive case management) (42.4%)
- Delivery of substance abuse treatment (39.39%)

In their comments, several respondents named the importance of recognizing the specialized needs of homeless women, including that they may be escaping domestic violence, may have experienced complex trauma, are vulnerable to sexual violence living on the streets, and may have children in tow.

Invited to identify priority areas for addressing homelessness among men, who are more likely to be unsheltered, less likely to transition into permanent housing from shelters, and more likely to return to homelessness within six months of obtaining permanent housing, respondents selected the following three solutions most frequently:

- Access to permanent supportive housing (with intensive case management) (54.55%)
- Delivery of mental health treatment (51.52%)
- Outreach to unsheltered and/or vulnerable people exiting hospitals or jails (45.45%)

Some respondents pointed out that relative to women, men are often less connected to family members whom they can call when they find themselves without housing. Others pointed out that men are more likely to be in the criminal justice system. When they exit from these settings, there are few safety nets to catch them – stakeholder interviews confirmed this, indicating that while there are some specialized programs for people with a disability or medical need, many leave the jail unhoused and ineligible for many local shelter programs. Housing outcomes for men may also be affected by fears that homeless men will engage in fights in congregate housing programs.

The three most common priorities identified by survey respondents for addressing the needs of Transgender people experiencing homelessness, who are less likely to exit to permanent housing, were:

- Coordination across agencies (criminal justice, behavioral health, hospitals, housing resources, domestic violence programs, etc.) (51.5%)
- Delivery of mental health treatment (45.5%)
- Access to permanent supportive housing (with intensive case management) (42.4%)

Several respondents indicated the importance of recognizing the trauma that many Transgender people have endured and named the importance of supporting agencies and services that have specific competence in serving LGBTQIA+ community members. Some also indicated that Transgender people may need privacy to feel safe in shelters, which are often divided based on binary gender definitions. Some expressed concern that faith-based shelters and providers would not be sufficiently accepting of Transgender individuals seeking services and support.

Strengths

The multi-method analysis indicated that the San Joaquin region has many strengths, including a robust service sector, engaged partners who share a vision for addressing homelessness, and innovation in using resources from various sources.

ROBUST SERVICE SECTOR

Many public agencies, community-based organizations (CBOs), and faith-based groups play roles in addressing homelessness within the region. Some providers offer specialized services (for example, County Behavioral Health, the Veterans Administration, and CBOs focused on domestic violence) to help ensure services are tailored to clients' unique circumstances. Connection and coordination among entities often function well, with cross referrals among shelters and programs facilitating effective service delivery. The engagement of community partners is seen as a significant asset and strength in addressing homelessness, with successful programs and partnerships contributing to supportive care for individuals living on the street and advocating for realistic solutions.

ENGAGED PARTNERS WITH SHARED VISION

Agencies working on homelessness unanimously demonstrated a shared desire for an honest assessment of the current state. Stakeholders were willing to discuss and take a frank look at areas that need improvement, including the historical disinvestment in affordable housing and the current over-reliance on shelters as temporary solutions. This understanding of the historical context provides a foundation for addressing the root causes of homelessness and implementing sustainable long-term solutions. It was also clear that entities across the regional service sector were open to adopting best practices and innovative approaches to addressing homelessness, including considering the potential replication of successful models delivered in adjacent areas.

Stakeholders consistently expressed a need for a unified vision for improved cross-agency coordination, bold leadership, and measurable, outcomes-focused implementation. They demonstrated a high consensus on the goal of expanding permanent housing situations while still acknowledging that immediate shelter is essential. Importantly, there was recognition that more support for the San Joaquin Continuum of Care (SJCoC) and increased transparency and trust in financial practices could yield better results. This shared ground indicates great potential for the region to move forward.

INNOVATIVE LEVERAGING OF RESOURCES:

Another clear strength in the region is the creative and innovative use of resources, drawing from a variety of sources. For example, general funds from county and city budgets are applied toward homeless outreach initiatives, enabling more extensive and sustainable support programs. Collaboration and cross-referral among public health agencies, Whole Person Care, County Behavioral Health, and other community partners can allow a client to benefit from multiple funding streams – this is recognized as essential for effective outreach and triaging. Furthermore, the implementation of incentives within managed care plans was identified as a strength -- these incentives encourage providers to offer tailored services and support to homeless individuals, ensuring more effective outreach and comprehensive care.

POSITIVE IMPACTS:

The strengths of the region and its commitment to addressing homelessness have led to strong successes, particularly as it pertains to new developments.

- 40% increase in emergency shelter capacity
- 180 new affordable housing units
 - Harmony Homes
 - Sutter Commons
 - Town Center Studios
 - Turnpike Commons
 - Victory Gardens
 - Crossways Residence
 - Sonora Square

- Additional projects pending:
 - Tracy Navigation Center expansion
 - St. Mary’s Navigation Center expansion
 - St. Mary’s Pathways Modular Community

Challenges

COC GOVERNANCE

While there were many strengths that stakeholders pointed to, there were also several challenges, some of which centered around CoC governance. Inefficiencies along the continuum of housing, including limitations of existing programs, gaps, and duplication of efforts, were sometimes framed as a failure of governance. Furthermore, governance dynamics stood out as something that sometimes interferes with effective SJCoC governance. Specifically, stakeholders conveyed that different opinions about the CoC's role hamper governance, as does the influence of personal agendas and potential conflicts of interest within SJCoC governance dynamics. Addressing these challenges will require a comprehensive approach focused on improving coordination, redefining roles, enhancing transparency, and fostering collaboration among stakeholders.

Regional Coordination, Oversight, and Accountability: The challenges with regional coordination, oversight, and accountability regarding homelessness in the region are multifaceted and encompass various themes, including a need for stronger leadership that sets clear expectations, political dynamics, and poor transparency and trust.

“We need a leader who will oversee centralized efforts to address homelessness in San Joaquin County – a leader capable of bringing together all stakeholders to foster collaboration and move the needle.”

Participant, Key Stakeholder Interviews

Expectations vs. Reality: There is a prevailing perception that leadership does not set clear expectations. For example, while strategic and Homeless Housing Assistance Program (HHAP) plans emphasize low-barrier solutions, implementation is challenging. Additionally, there is a pressing need for the construction of permanent housing, but funded projects are not materializing due to a shortage of developers. This discrepancy between the public narrative and the reality of what is being accomplished leads to mistrust and friction, hindering effective regional coordination.

Political Barriers and Conflicting Objectives: Political dynamics, particularly at the county level, create barriers to effective action. Conflicting objectives among CoC entities like cities and counties further complicate regional coordination and oversight. These dynamics lead to ineffective communication among critical entities, which results in fragmented services, duplication, and a lack of collective action. This breakdown in communication severely impacts regional coordination and oversight efforts.

Financial Challenges and Transparency Concern: Intense competition for resources, restrictions imposed by policymakers, and a lack of transparency contribute to perceived conflicts of interest and generalized mistrust. These issues further impede regional oversight and accountability.

Addressing these challenges will necessitate a comprehensive approach to improve coordination, redefine roles, and enhance transparency and accountability. Efforts to streamline communication, address housing needs, and strengthen partnerships with hospitals and community-based organizations are essential for improving the regional response to homelessness.

REGIONAL DATA MANAGEMENT: HMIS / CES

The HMIS has great potential to enhance the region’s Coordinated Entry System, but current practices prevent this.

Data Consistency and Management: There appears to be a lack of consistency in data entry and management across different parts of the sector. Additionally, it seems individuals and agencies may not be operating with the same definitions and terminology when entering data into HMIS. Furthermore, some stakeholders complained about the tediousness of needing to re-enter data, suggesting that people may need additional training on how to use the system more efficiently and/or that data-sharing agreements could be revisited to ease the burden of re-entering data. This underscores the need for improved training for HMIS users, including a unified language and clarification of parameters to ensure accurate and standardized reporting.

Real-Time Use of Data: Stakeholders reported that the HMIS does not reflect real-time updates. They are not able to trust that the data in the HMIS are up to date, which hinders the system’s effectiveness in informing decision-making processes. For example, without real-time bed count data, the HMIS cannot serve as an effective tool in Coordinated Entry, which weakens the system’s ability to respond promptly and effectively to the homeless population’s needs and results in poor resource management.

Transparency and Conflicts of Interest: Concerns were raised regarding transparency and potential conflicts of interest in managing and utilizing data within the HMIS and Coordinated Entry System.

These challenges underscore the importance of implementing additional training in data entry and data management for providers, enhancing monitoring and coaching to promote consistent data entry practices, and fostering collaboration and transparency within regional data systems. Addressing these challenges is vital to improving the effectiveness of the Coordinated Entry System and outcomes for the homeless population.

REGIONAL MONITORING OF PERFORMANCE MEASURES

The problems with using HMIS lead to performance monitoring challenges. Without reliable data, the CoC, partner agencies, and the community cannot recognize the impact that the work is having.

COMPREHENSIVE USE OF HMIS

A review of HMIS data revealed that parts of the data system are not fully utilized. For example, there are no data entered for San Joaquin under the category of outreach resulting in shelter placement (corresponding to HHAP Measure 6), despite stakeholder input verifying that this is occurring regularly. Therefore, there is a need to investigate further if other HMIS features or fields are not being properly utilized and strategize accordingly.

CAPACITY BUILDING FOR STANDARDIZED DATA PRACTICES

The aim is to leverage the use of the HMIS toward an improved regional Coordinated Entry System. However, without standardized practices for monitoring the quality and consistency of data entry practices, measures of progress and impact are unreliable. Input from stakeholders made it clear that some organizations will require capacity building to implement sophisticated data monitoring systems. Capacity building can establish clear and common definitions, emphasize the importance of accurate data maintenance, demonstrate the ways that data can be used for reporting and program improvement, and illustrate the need for transparency.

DATA SHARING AGREEMENTS

Encouraging collaboration and data sharing among stakeholders should also be revisited – while there are concerns about data ownership, confidentiality, and competition for funding, partners can establish agreements that conform to HIPAA while minimizing duplication and enabling providers to support individuals already in the system. An outreach worker explained the need and the feasibility of more

“For field teams to be on the release of information at the county level is key. I’ve seen it in other counties...[where] everyone was on the [HIPAA] release of information because we didn’t want barriers, even on the phone. There still had to be encryption, but it lowered the fence...It’s beneficial for our clients – if anyone has a resource, we should know about each other. It’s all connected: substance abuse, mental health, criminal justice, homelessness...There needs to be a feedback loop among providers.”

generous and flexible data-sharing arrangements:

These challenges underscore the need for improvements in data management practices, communication strategies, resource allocation, capacity building, and collaboration efforts to enhance the effectiveness of performance monitoring in addressing homelessness. Limited financial and human resources have impeded efforts to establish robust data monitoring systems; increased investment in infrastructure, technology, and staff training may be necessary to achieve the required level of data tracking.

REGIONAL PLANNING FOR LAND USE AND HOUSING

The challenges in regional planning for land use and housing encompass managing housing density, ensuring regulatory consistency, balancing rural-urban development, protecting high-resource areas, aligning housing density with transit infrastructure, and addressing disparities among marginalized communities.

Housing Density Management: The challenge of managing housing density is a persistent and prominent theme in discussing regional land use. As the region’s population continues to grow, it is important to build infrastructure with the capacity to support an increasing populace, and the community must figure out how to incorporate high-density housing into its plans. Stakeholders suggest that task forces be formed to analyze zoning regulations and infrastructure requirements for sustainable housing density.

“We must be proactive in planning for the projected growth of the San Joaquin Valley in the next five years, with many people moving from the Bay Area and the East Bay to find more affordable Housing.”

Participant, Key Stakeholder Interviews

Consistency In Permits and Restrictions: Ensuring consistency in permit processes and regulations across different cities and unincorporated areas in the region is crucial for streamlined development regulatory consistency. This requires high collaboration among departments to minimize barriers, confusion, and needless land use and housing development delays.

Rural-Urban Development Balance: Stakeholders, particularly those supporting homeless populations outside the region's most populous city, emphasized the need to balance development efforts between rural and urban areas. Data-driven decision-making can help ensure the needs of both rural and urban communities are met effectively.

Protection of High-Resource Areas: Some stakeholders highlighted the need to identify and protect high-resource areas through land conservation and ensure that land use and housing development decisions are

■ 2024 REGIONAL HOMELESS ACTION PLAN – KEY FINDINGS

made sustainably and ecologically responsible. Collaboration with relevant departments and agencies is necessary to designate and protect these areas effectively.

Transit Infrastructure and Housing Density: Balancing housing density with transit infrastructure development is crucial for efficient urban planning. The Transportation Department plays a key role in coordinating these efforts.

Disproportionalities in Homelessness: Addressing the highly disproportionate rate of homelessness among Black community members is a critical challenge that arises in connection with every form of support along the continuum of care. Within regional planning for land use and housing, this theme underscores the need for targeted strategies to address systemic inequalities and provide equitable access to housing and supportive services for marginalized communities. To remedy the disparate rate at which Black residents experience homelessness in the region, their rate of achieving successful outcomes must not simply be commensurate to those of their non-Black peers – to effect equity, Black clients’ “risk” of positive outcome must be equal to their risk, relative to other residents, of experiencing homelessness in the first place. Planning for land use and housing is one of the many critical areas where strategies may be designed with the express intent of reversing these disparities.

These challenges necessitate collaborative efforts and strategic planning involving various departments and stakeholders to achieve equitable and sustainable urban development.

PART TWO

Regionally Coordinated Homeless Action Plan

VII. Application Tables

- 2.1 Jurisdictional Roles and Responsibilities
- 2.2 Key Action to Improve Performance Measures
- 2.3 Equity Improvement Plan
- 2.4 Plan to Reduce the Number of People Experiencing Homelessness upon Exiting Institutional Settings

VII. Strategic Approach

- 2.5 Plan to Utilize Local State and Federal Funds to End Homelessness

IX. Key Activities: Project Summaries

X. Funding & Implementation Plan

- 2.6 Plan to Connect People Experiencing Homelessness to all Eligible Benefit Programs
- 3.0 Funding Plan

VII. APPLICATION TABLES

Roles and Responsibilities (Table 2.1)

OUTREACH

San Joaquin County, the City of Stockton, and the SJCoC will work together to ensure that outreach efforts enact and sustain a co-responder outreach model (the joint engagement of emergency services personnel, health/behavioral health professionals, and people with lived expertise and experience) wherein law enforcement agencies employ best practices in homeless outreach, focused on connecting individuals with supports (rather than arrest and other forms of enforcement). San Joaquin County, through its departments, will oversee the coordination and implementation of this model throughout the region. The City of Stockton will facilitate conversations as needed with counterparts in the City of Lodi, the City of Manteca, and the City of Tracy to educate and garner support for the implementation of this best practice. The SJCoC will ensure that people with lived experience and expertise in homelessness will remain central to the implementation of the model and that deliverables are met and measured accurately.

Participating Jurisdictions	Role(s) and Responsibilities in Outreach and Site Coordination
San Joaquin County	<ul style="list-style-type: none"> Is responsible, through Probation, for ensuring the replication of a co-responder outreach model wherein law enforcement agencies employ best practices in homeless outreach, focused on connecting individuals with supports (rather than arrest and other forms of enforcement); Is responsible, through BHS, for ensuring that there is sufficient staffing to ensure access to field-based (mobile) mental health assessments and that all assigned mental health /community health outreach workers have sufficient training and capacity to link homeless individuals to needed behavioral health service. Is responsible, through Whole Person Care, for creating a regional screening and referral pathway (triage tool) to escalate case management and treatment for individuals likely to have serious mental illnesses or other disabling conditions.
SJCoC	<ul style="list-style-type: none"> Is responsible for centering people with lived expertise and experience as influential members of SJCoC, alongside homeless service practitioners, community members, and responsible professionals in seeking and implementing opportunities to strengthen outreach and site coordination.
City of Stockton	<ul style="list-style-type: none"> Is responsible for working with leaders across all San Joaquin municipalities (and unincorporated areas) to promote a co-responder outreach model (the joint engagement of emergency services personnel, health/behavioral health professionals and people with lived expertise and experience) wherein law enforcement agencies employ best practices in homeless outreach, focused on connecting individuals with supports (rather than arrest and other forms of enforcement)

LAND USE AND DEVELOPMENT

Continued coordination among jurisdictions, departments, agencies, and the community is vital to effectively use available land to combat homelessness in the region surrounding the City of Stockton. Collaboration between the City of Stockton and neighboring cities like Tracy, alongside adherence to state and federal directives, is key for comprehensive land use planning. Priorities include pro-housing designations, homelessness mitigation, density promotion in transit corridors, and adaptive reuse of commercial spaces. In San Joaquin County, coordinated efforts among community departments are crucial for sustainable and equitable development, focusing on common issues and leveraging expertise. Collaboration between the City of Stockton and San Joaquin County is essential, emphasizing themes like collaboration, process streamlining, density optimization, and high-resource area protection. By incorporating these recommendations and fostering collaboration among stakeholders, the region can

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create inclusive, sustainable communities that enhance residents' quality of life while supporting economic growth.

Participating Jurisdictions	Role(s) and Responsibilities in Land Use and Development
San Joaquin County (Neighborhood Preservation Department and Collaborative Applicant)	<ul style="list-style-type: none"> Is responsible to align and leverage all available funding to the purposes of the Action Plan, including developing a regional list of homeless housing pipeline projects. Is responsible for facilitating grant and tax credit applications for eligible applicants. Is responsible to align federal HOME and CDBG funding opportunities towards affordable housing (particularly in high resource areas) and community improvement projects (particularly in low resource areas).
SJCoC	<ul style="list-style-type: none"> Is responsible to focus public awareness and education initiatives to address misconceptions and foster community support. Provide education resources to enhance understanding of homelessness issues. Provide support at public hearings regarding land use to ensure community engagement. Is responsible for supporting and coordinating needs assessments to identify gaps and allocate resources effectively. Encourage developers to invest in the county and promote development initiatives. Is responsible to implement targeted services for the homeless population and work with development teams on creating service-rich and sustainable housing opportunities.
City of Stockton	<ul style="list-style-type: none"> Is responsible for creating a positive and receptive affordable housing landscape. Prioritize creating a pro-housing environment and offering more housing options for homeless individuals. Emphasize density-oriented development over transit considerations. Explore adaptive housing approaches tailored to the homeless population. Integrate commercial multi-family housing. Is responsible to collaborate with municipal partners to craft a shared approach for engaging and organizing local communities, including developing strategies for homeless outreach, emergency sheltering, and affordable housing development. Collaborate with different departments and neighboring cities to identify high-resource areas for housing solutions. Is responsible to align federal HOME and CDBG funding opportunities towards affordable housing (particularly in high resource areas) and community improvement projects (particularly in low resource areas).
Other County and City Departments: Planning / Community Development	<ul style="list-style-type: none"> Is responsible to create local policies that emphasize housing density to maximize available space, identify and prioritize high-resource areas for housing solutions, explore the integration of commercial multi-family housing and adaptive solutions and remove barriers to development, particularly for affordable housing projects. Is responsible to facilitate opportunities for cross-jurisdictional collaboration on land use and development of projects to house homeless individuals. Ensure consistency in permits and restrictions to streamline development. Is responsible to tailor approaches to suit the unique challenges of rural and urban areas.

DEVELOPMENT OF INTERIM AND PERMANENT HOUSING OPTIONS

Interim and permanent housing initiatives in the City of Stockton and San Joaquin County involve collaboration among city governments, service providers, faith-based organizations, and funders to address

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homelessness. Key themes such as funding, accountability, partnerships, and sustainability guide these efforts, aiming to provide holistic support to homeless individuals and families. Strategies in San Joaquin County prioritize behavioral and public health support, county coordination, neighborhood preservation, and housing sustainability.

The SJCoC focuses on standardized policies and a low-barrier approach, enhancing collaboration with local decision-makers. This coordinated effort involves various stakeholders and emphasizes sustainability, selective support, effective assessment, and reporting. Priority initiatives within this strategy area include:

- Create a housing-focus framework.
- Create uniform policies for rapid rehousing programs.
- Create protocols for innovative housing solutions, including master leasing or landlord incentives.

The Interim and Permanent Housing Program relies on collaboration among property management, developers, managed care providers, and human services agencies to address housing needs effectively. Continued coordination, advocacy, and support are essential for program success.

Participating Jurisdictions	Role(s) and Responsibilities in Development of Interim and Permanent Housing Options
San Joaquin County	<ul style="list-style-type: none"> ● Is responsible for promoting housing focused shelters and transitional housing programs and permanent housing solutions with wrap-around case management, treatments, and other behavioral interventions. ● Is responsible for facilitating the collaboration among stakeholders and serves as the collaborative applicant. ● Is responsible for integrating county human and behavioral health services into major shelters. ● Is responsible for formulating policies, aligning, and leveraging funding, conduct comprehensive reviews of existing information systems, and allocating Homeless Housing Assistance and Prevention (HHAP) Round 5 funds according to agreed-upon categories.
SJCoC	<ul style="list-style-type: none"> ● Is responsible for promoting interim and permanent housing options, establishing best practices and guidelines, and offering technical assistance to higher barrier shelters and sober living environments. ● Is responsible for attending local council meetings to advocate for homelessness solutions and ensuring effective communication of pertinent information. ● Is responsible for overseeing the general oversight and stewardship of the homeless service continuum, ensuring that all partners are developing and delivering interim and permanent housing as planned.
City of Stockton	<ul style="list-style-type: none"> ● Is responsible for allocating funding and issuing NOFAs for the development and/or operation of interim and permanent housing options to combat homelessness. ● Is responsible for collaborating with shelters, law enforcement agencies, and other partners to enhance homeless outreach teams' ability to engage with and link to emergency sheltering or other housing solutions. As well as monitoring contracts to ensure expectations are being met. ● Is responsible for addressing concerns about shelter effectiveness, shelter-hopping behavior, and high barriers to entry through contracting and performance-based evaluations.
Other County Departments: Behavioral Health Services Whole Person Care Public Assistance	<ul style="list-style-type: none"> ● Is responsible for ensuring housing sustainability for people with SMI/SUD through treatment, case management, and assistance with independent living skills as needed. ● Is responsible for verifying eligibility for clients enrolled in Medi-Cal to ensure continued capacity to receive benefits, supporting housing stability efforts.

COORDINATION AND CONNECTION TO SERVICE DELIVERY

All participating jurisdictions in the region are working to establish a coordinated framework to provide a full array of services, including interim and permanent housing solutions, to people experiencing or at risk of homelessness. This effort involves creating standard operating procedures (SOPs) to ensure uniformity and efficiency in service delivery, establishing shared data and contract standards among entities like the City of Stockton and San Joaquin County, and designating positions for effective collaboration between county and city entities. By synthesizing feedback, grouping information, and standardizing procedures, data, and responsibilities, these coordinated efforts aim to enhance collaboration and improve outcomes for the community, effectively delivering quality services to those in need.

Participating Jurisdictions	Role(s) and Responsibilities in connection to Service Delivery
San Joaquin County	<ul style="list-style-type: none"> • Is responsible for developing protocols and managing data sharing requirements across relevant providers and partners, to streamline collaboration. • Is responsible for revamping standard operating procedures and data sharing agreements for the Homeless Management of Information System (HMIS) among providers and partners throughout the region, including: <ul style="list-style-type: none"> ○ Reviewing all program specific data points and ensuring that there are specific and uniform definitions for services that overlap between two or more programs. ○ Developing and communicating coordinated and aligned contracting agreements and performance monitoring expectations regarding the use of HMIS by funded sub-recipients (including Invoice Specifications); ○ Facilitating homeless service provider access to the HMIS system, allowing them to track activities and effort by program staff and determine whether activities are leading to desired outcomes. ○ Establishing programmatic rules and expectations regarding the Release of Information and the use of HMIS for case coordination; and ○ Supporting SJCoC in producing annual program evaluations based on the evidence of effort, impact, and timeliness of activities as measured in aggregate through HMIS, confirmed through independent monitoring and analysis Enhance. • Is responsible for issuing and managing contract standards among the City of Stockton, San Joaquin County, and other relevant entities.
CoC	<ul style="list-style-type: none"> • Is responsible for, in partnership with San Joaquin County and County Counsel, re-negotiating the Collaborative Applicant Agreement and updating SJCoC’s Governance Charter and HMIS/CES Lead Agency Agreements to meet new federal guidance, align with state regulations, and achieve local expectations (including capacity to use the HMIS as a component of sub-grantee performance monitoring). • Is responsible for reviewing the current Board composition and updating the nomination and selection process, specifically to ensure the voice of people with lived experience and expertise in homelessness. • Is responsible for reviewing community input and re-examining its committee structure: The SJCoC will develop a Finance and Performance Review committee and reimagine the purpose and need for the following committees: Coordinated Entry System Committee, Data and HMIS Committee, Education and Membership Committee, Resource Development Committee, and the System Performance and Evaluation Committee.
City of Stockton	<ul style="list-style-type: none"> • Is supporting the SJCoC and San Joaquin County, in partnership with County Counsel, and with guidance from the assigned HUD CoC Technical Assistance representative, to update the Governing Charter and By-laws with new sections, consistent with federal and state regulations and best practices addressing Conflict-of Interest Policy, Committee Structure, Board Composition with fixed representative seats, and Board Member Recruitment to Engage and Sustain PLEE.

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	<ul style="list-style-type: none"> Is committed to working with the County to develop standardized and aligned processes for procurement, contract monitoring, and accounting to facilitate shared performance monitoring.
Managed Care Plans	<ul style="list-style-type: none"> The Health Plan of San Joaquin (HPSJ), in partnership with HealthNet, will deliver service coordination and data management initiatives.

Key Actions to Improve Performance (Table 2.2)

Measure 1a: The number of people accessing services who are experiencing homelessness.

Measure
11,722

Across the four years from 2020 to 2023, efforts were made to monitor Measure 1a: the number of people accessing services while experiencing homelessness. In 2020, this count began at 9,421 individuals. However, the subsequent year saw a 5% decrease, bringing the countdown to 8,931 individuals in 2021. There was a significant upsurge in 2022 with a change in how the state decided to better measure and count data, resulting in a 34% increase from the previous year, raising the count to 11,977 individuals.

Thinking of this as a “new baseline,” 2023 shows a slight decrease of 2% from 2022, resulting in a count of 11,722 individuals.

Key Actions	Measuring Success of Action
Revise the Collaborative Applicant Agreement	Task Complete as Scoped
Standardize procurement process	Task Completed as Scoped
Revise the Coordinated Entry System prioritization process	CES updated as scoped. Integrated to HMIS.
Advocate for funding and approvals to develop new housing.	Projects are approved and funded

Measure 1b: The number of unsheltered homeless in the SJCoC’s Point-in-Time Count (on a single day)

Measure
1,355

From 2020 to 2023, there has been a consistent effort to measure the number of people experiencing unsheltered homelessness in the SJCoC’s Point-in-Time Count on a single day, designated as Measure 1b. In 2020, the count stood at 1,558 individuals, but unfortunately, there was no data available for the subsequent year, 2021. However, in 2022, there was a notable 13% decrease from the baseline of 2020, bringing the count down to 1,355 individuals.

Key Actions	Measuring Success of Action
Develop and replicate the CARE model	Program implementation. Program adoption, officers trained, partnerships formed.
Link street medicine Teams to CARE	Program Implementation
Create a regional screening and referral protocols	Triage tool and referral protocols established for field use, hospital discharge and jail releases.
Invest in the operations of existing low barrier and housing focused interim housing programs, including support services	Shelter utilization rates increase. Shelter exits are more consistently tracked.

Measure 2: The number of people accessing services who are experiencing homelessness for the first time.

Measure
6,211

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Over the course of four years, from 2020 to 2023, efforts have been made to track the number of individuals accessing services who are experiencing homelessness for the first time. In 2020, this count began at 4,715 individuals. The following year, there was a notable decrease of 7%, bringing the count down to 4,348 individuals.

Again, with a change in methodology to better capture information, numbers jumped significantly in 2022, raising the count to 6,485 individuals and establishing a “new baseline.” In 2023, there was a 4% decrease from 2022, resulting in a count of 6,211 individuals.

Key Actions	Measuring Success of Action
Develop regional Rapid Re-housing Strategy	People with RRH vouchers obtain housing within 70 days.
Invest in RRH Prevention strategies	People with RRH vouchers obtain housing within 70 days.

Measure 3: The number of people exiting homelessness into permanent housing.

Measure
1,169

Over the course of four years, from 2020 to 2023, significant fluctuations have occurred in the number of individuals exiting homelessness into permanent housing. In 2020, the count stood at 977 individuals. The following year saw a slight decrease of 6%, bringing the count to 913 individuals. However, in 2022, there was a 39% increase from the previous year, with the count rising to 1,273 individuals. 2023, saw an 8% decrease in placements from 2022, bringing the count down to 1,169 individuals, or about 10%. Fluctuations in housing availability are the largest contributing factor (supply) to the variation rather than changes in the need for placement (demand).

Key Actions	Measuring Success of Action
Develop Housing-focused shelter model	Interim Housing Programs have trained housing navigators.
Invest in the operations of existing low barrier and housing focused interim housing progs, including housing navigation / CM staff.	Shelter placement rates increase
Invest in Permanent Housing Acquisition, Construction, and ongoing operating subsidies and services	Additional Units approved and funded for development. Additional \$45 million leveraged. Target goal = 100

Measure 4: The number of days people remain in homelessness.

Measure
76

Over four years, from 2020 to 2023, there have been small fluctuations in the length of time people remain homeless before receiving a placement. Annual averages range from a low of 72 days to a high of 85 days. In general, this data point is a poor measure of the length of time people remain homeless because data is only analyzed for the small proportion of people who are known to have received housing (10%) and does not calculate the length of time homeless for the remaining 90% of individuals and families who either continue to be homeless or have been “lost” to system partners with unknown outcomes. This data will become more relevant with updates to the HMIS system and a new focus on housing navigation within emergency shelter programs. These strategies will improve the validity of the data.

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Key Actions	Measuring Success of Action
Develop regional CARE model	Program implementation
Invest in the operations of existing low barrier and housing focused interim housing programs including housing navigation & support services	Shelter placement rates increase
Develop regional Rapid Re-housing Strategy	People with RRH vouchers obtain housing within 70 days.
Invest in RRH Prevention strategies	People with RRH vouchers obtain housing within 70 days.

Measure 5: The percent of people who return to homelessness within six months of exiting the homelessness response system to permanent housing.

Measure
11%

Over the four years from 2020 to 2023, there have been small fluctuations in the length of time people remain homeless prior to receiving a placement. Annual averages range from a low of 6% days to a high of 19% days.

Key Actions	Measuring Success of Action
Increase investments in Permanent Housing Solutions (case management services)	Sufficient services (experienced and capable staff) are available. Return rates decrease to 6%
Develop guidance and expectations. Monitor Contracts.	Ratio of clients to staff Utilization: Case Management per client. Utilization: Cost per Client. Assess by: Mean, Mode, Quartile

Measure 6: The number of people with successful placements from street outreach projects.

Measure
6

In general, this data point is a poor measure of the work of outreach workers to successfully place individuals and families in interim and permanent housing programs. This data will become more relevant with updates to the HMIS system and enhanced coordination between outreach and shelter partners under the CARES model. These strategies will improve the validity of the data.

Key Actions	Measuring Success of Action
Review of existing information systems	Outreach Elements Added
Update HMIS data elements and permissions	Provide access to shelter bed counts / openings on an as-needed basis for field staff. Geo-code activities. Upload data from mobile app.
Develop regional CARE model	Reduce duplication of service. Coordinate service delivery. Outreach activities entered into HMIS. ESRI dashboard model adopted using ArcGIS
Create a regional screening and referral protocols	Triage tool and referral protocols established for field use.

Equity Improvement Plan (Table 2.3)

Key Action(s) the Region Will Take to Ensure Racial and Gender Equity in Service Delivery.

Key Actions(s)
Update the Governance Charter and Bylaws

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Revise SJCoC Board Nomination Process
Update HMIS to Data Elements
Standardize Procurement Process

Key Action(s) the Region Will Take to Ensure Racial and Gender Equity in Housing Placements.

Key Actions(s)
Assess homeless housing and service needs
Update CES prioritization process
Update Rapid Re-housing Protocols

Key Action(s) the Region Will Take to Ensure Racial and Gender Equity in Housing Retention.

Key Actions(s)
Invest in housing support services
Monitor contracts for performance

Key Action(s) the Region Will Take to Change Procurement or Other Means to Affirm Equitable Access to Housing and Services for Overrepresented Groups Among People Experiencing Homelessness in the Region.

Key Actions(s)
Develop shared approach to measuring and prioritizing organizational capacity to address disparities as a component of application review
Develop shared contractor expectations for staff training, qualifications
Create joint County/City review process using neutral third parties
Develop shared accounting and contract monitoring protocols
Regularly measure unique clients served, by demographics, service utilization, and costs per client by service activity
Conduct annual system reviews to determine change over time related to overrepresentation of Black / African American individuals and families as a proportion of those experiencing homelessness and as a proportion of those experiencing homelessness for the first time.

Improving Exits from Institutions (Table 2.4)

Key Action(s) to Reduce the Number of People Experiencing Homelessness upon Exiting a Jail.

Key Actions(s)
Implementing a voluntary re-entry program within a live-in complex.
Desired Result: Diminishing recidivism and homelessness while enhancing self-sufficiency.
Designating specialized HSA Staff to address the public benefit needs of homeless individuals transitioning from jails and prisons.
Desired Result: Ensure expertise in maintaining benefits.
Initiating changes in pre-release and release practices.
Desired Result: Generating effective measures that eliminate or minimize obstacles to coordination, resulting in streamlined linkages to services and improved outcomes.

Key Action(s) to Reduce the Number of People Experiencing Homelessness upon Exiting a Prison.

Key Action(s)
Expanding transitional housing services inclusive of mental health support, life skills training, and housing assistance.
Desired Result: Fostering stability and ultimately facilitating the transition to permanent housing as a long-term objective.
Implementing job training initiatives complemented by supportive services and educational programs.
Desired Result: Achievement of stable employment for participants leads to a decrease in recidivism rates.

Key Action(s) to Reduce the Number of People Experiencing Homelessness upon Exiting a Hospital.

Key Action, Lead and Collaborating Entities
Update HMIS processes, data values, and permissions to create unified criteria and enhance collaboration between hospitals and shelters.
Desired Result: Facilitating a seamless transition and warm handoff process between hospitals and shelters for individuals in need.
Implementation of a uniform (shared) communication tool.
Desired Result: enables real-time access to bed availability, facilitating efficient resource management.

Key Action(s) to Reduce the Number of People Experiencing Homelessness upon Exiting Other Institutional Settings (such as Foster Care, Behavioral Health Facilities, etc. as applicable in the region).

Institutional Setting	Key Action(s)
Behavioral Health Facilities	<p>Create incentives for landlords and ensure completion of coursework with tenants for application processes.</p> <p>Desired result is to establish a 24/7 on-call service to support both clients and landlords effectively.</p>
Behavioral Health Facilities	<p>Conducting regular check-ins with collaborating agencies and establishing a shared data system to better support our clients.</p> <p>Desired result: Encompass expanding our workforce, providing education opportunities, and enhancing engagement and outreach with colleges and vocational studies.</p>
Behavioral Health Facilities	<p>Invest in wrap around case management and support services for people in permanent housing.</p> <p>Desired Outcomes: Streamline strategies and establish a common flow to assessment levels, ensuring referrals to and support services are centralized into a one-stop system for enhanced accessibility and efficiency.</p>

VIII. STRATEGIC APPROACH

To date, the regional partnership has made important and meaningful progress in addressing homelessness. Through focused efforts, the region has accomplished the following:

- 40% increase in emergency shelter utilization.
- 180 new units of affordable homeless housing.
- 2% decrease in people using homeless services.
- 13% decrease in unsheltered homelessness.
- 4% decrease in first-time homelessness.

However, significant work remains.

- There are acute disparities in who becomes homeless, with African Americans accounting for 31% of all homeless individuals despite representing 10% of the population.
- Only 10% of homeless individuals are successfully placed into permanent housing.
- According to the data, there are almost no linkages from outreach to placement (though questions have been raised about the validity of this data).
- There are rising numbers of people who are over 55 experiencing homelessness (20%)
- Homeless individuals with substance use disorders are the least likely to become housed. People with mental illnesses are also finding greater than average difficulty in finding housing.

Further, as described in the key findings above, there are complex systems barriers that are impeding progress, including:

- Lack of effective regional planning for homeless housing.
- Inefficient stewardship of resources.
- Inconsistent and invalid data.
- Stand-alone and outdated data systems do not do enough to foster collaboration and linkage between programs, make planning difficult, and limit contract monitoring.
- Management and governance structure that is no longer responsive to system needs.

Systems Change Projects	Program Investments
Strengthen foundational aspects of SJCoC	Support targeted outreach and case management for vulnerable and underserved populations
Develop regional practice expectations	Support low-barrier emergency shelters adopting housing focused approaches
Refine the procurement, contracting, and monitoring processes	Expand Rapid Rehousing program for unsheltered individuals
Improve data quality, data systems, and data analysis to improve decision-making	Expand the supply of permanent housing for homeless individuals and families.
Invest in staff, training, and expertise (including PLEE) to grow and strengthen the continuum	
Improve Coordination of Services	

Coordinated Use of Leveraged Resources (Table 2.5)

Funding Program	Coordinated Use of Funds	Est. Budget T.B.D.
Homeless Housing Development (Acquisition and Development)		
Homekey	Funds are received from state and federal sources and administered by the County, the City of Stockton, and Behavioral Health Services. To the extent possible funds are braided together to secure sufficient local match to apply for loans or other financing. More regional coordination is needed.	Pending
HOME Investment Partnership		
Permanent Local Housing Allocation		
HHAP		
Local Governments		City Grants
Other Permanent Housing Solutions – including RRH		
CoC Program Competition Funds	Funds are allocated to sustain people currently in permanent supportive housing and to provide new RRH vouchers and case management services as feasible.	
Emergency Solutions Grant		
MHSA		
HHAP		
Interim Housing		
Emergency Solutions Grant	Funds are allocated for low-barrier shelter operations. Moving forward, more resources will be dedicated to housing navigators and case management through HHAP and enhanced care management (ECM) services under local managed care plan partners.	
HHAP		
Local Governments		City Grants
Managed Care Plans		Billable Services
Outreach and Service Coordination		
Public Safety Realignment	Probation will manage the coordination of behavioral health, street medicine teams and others for most outreach efforts in coordination with local law enforcement agencies, and with some reimbursements through ECM billable services. HHAP will fill gaps by funding targeted outreach and service coordination for youth and other vulnerable populations.	TBD
Local Governments		Varies
MHSA / PATH		
Managed Care Plans		Billable Services
HHAP		
Systems Support		
Local Governments	Local governments provide small, and one- time grants to CBOs for local capacity building projects.	Varies
HHAP	HHAP system support funds will be used to hire staff or procure technical assistance to: develop regional practice guidance, assess, and revamp data systems, train program partners, create and manage content for a website to disseminate information and coordinate activities, and evaluate system performance.	

IX. KEY ACTIVITIES: PROJECT SUMMARIES

Strengthen the Foundational Aspects of the SJCoC

The SJCoC incorporated as a mechanism to receive about \$6.5 million annually in HUD Continuum of Care Program Competition and Planning grant funds annually. Since then, an increasing proportion of residents have been living unhoused or teetering on the brink of homelessness. However, as homelessness has worsened, (particularly in California, which accounts for 28% of all people experiencing homelessness in the nation) and more people are living unsheltered (68% of homeless in California), in conditions not humane or fit for human habitation, new funds and guidance are being directed at communities to address homelessness¹.

The SJCoC’s Governance Charter was first created in 2013 and reimagined in 2018; while minor updates have occurred, the Charter is largely the same as conceived in 2018. Consistent with the discussion above, the Governance Charter should be updated to reflect broader expectations beyond the management of the CoC Program Competition, including alignment with State regulations and local priorities.

Stakeholders and community feedback suggest improving coordination and collaboration is the highest priority for the SJCoC and its partners. As a first step, it is important to reframe the SJCoC’s role as one that is actively involved in creating and implementing regional strategies and having a measurable impact on reducing homelessness as it is experienced in San Joaquin County today.

More broadly, the CoC is designed to promote community-wide planning and strategic use of resources to address homelessness; improve coordination and integration with mainstream resources and other programs targeted to people experiencing homelessness; improve data collection and performance measurement; and allow each community to tailor its program to the particular strengths and challenges within that community².

Activities:

1. Revise the Collaborative Applicant Agreement to address identified deficiencies in roles and responsibilities and incorporate new local and state expectations.
2. Update the Governing Charter and Bylaws to address identified deficiencies in the Conflict-of-Interest Policies.
3. Update the Governance Charter and Bylaws to expand participation on the SJCoC Board, including fixed seats for city staff and department leaders and for more people with lived experiences in homelessness, including homeless youth and other populations overrepresented in homelessness. Conduct the HUD-mandated review and updates to the SJCoC Board Nomination Process in accordance with regulations.
4. Revisit the committee structure within the Governance Charter to address purpose and conflicts.
5. Update the SJCoC Website

¹ US Department of Housing and Urban Development, 2023 Annual Homelessness Assessment Report to Congress.

² US Department of Housing and Urban Development, 2012 Program Guidance: Establishing and Operating a Continuum of Care.

COLLABORATIVE APPLICANT AGREEMENT

As a first step, the Collaborative Applicant Agreement will be updated to clarify the roles and responsibilities of the County and articulate the appropriate responsibilities of the SJCoC Board to oversee the work of the Collaborative Applicant. Tasks and activities best completed by dedicated staff members are conducted by County personnel or their contracted agents as the Collaborative Applicant.

The Collaborative Applicant Agreement will be updated to articulate responsibility for tasks associated with clearly:

- Procuring funding from all eligible state and federal sources.
- Accounting and managing the allocation of funds to sub-recipients.
- Contract and performance management of sub-recipients, including a regular independent system-wide program evaluation that includes progress in achieving equity-driven performance measures.
- Administering the CoC Program Competition Process with fidelity to HUD regulations and intent.
- Enabling data collection and information sharing consistent with federal and state requirements and local priorities.
- Communicating needs, strategies, performance, and impact to the public.

CONFLICT OF INTEREST

HUD has released new conflict of interest guidance for review and incorporation into the Governance Charter as applicable. Pertinent to the this Action Plan is the commitment to more transparency and clarity in matters pertaining to:

- Defining actual and perceived conflicts of interest.
- Clarifying allowable benefits from gifts or gratuities.
- Procedures for disclosing conflicts of interest annually and as they arise.
- Recusal procedures for discussions, votes, and rank and review processes.
- Policies to ensure transparency and awareness of conflict-of-interest processes.
- Procedures for intentional or unintentional violations of the policies.

The SJCoC Board, in partnership with the Collaborative Applicant and other stakeholders, should review and make recommendations on updated Conflict-of-Interest policies within the Governance Charter as soon as possible and bring these back to the general membership for consideration.

BOARD COMPOSITION

HUD requires that CoCs review, update, and approve the selection process for CoC Board members at least once every five years. This action is overdue.

The SJCoC Governance Charter currently calls for a minimum of 13 board members and a maximum of 21. Currently, 11 active Board members are listed as attending SJCoC meetings. The immediate recruitment of new members is required.

Currently, the SJCoC Governance Charter does not clearly indicate the required Board members. HUD regulations for CoC Board composition requires:

- One homeless or formerly homeless individual is to serve on the CoC board, though more are preferred. Homeless individuals are those that have been homeless within the past seven years.

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- Representatives of the relevant organizations and projects serving homeless subpopulations.

And indicates that:

- One board member may represent the interests of more than one homeless subpopulation.
- HMIS lead agencies, Collaborative applicant staff, etc., are not mandated board members.
- State and Federal regulations and guidance suggest that some consideration of BIPOC, LGBTQIA+, mobility limitations/disability inclusion, and Youth representation is allowable.

The SJCoC will work with community partners to review the current Board composition and update the nomination and selection process. Overall best practices suggest that there should be a balance between professionals working in systems that interact with the homeless response system and providers representing grant sub-recipients. Too many grant sub-recipients on the Board can jeopardize the capacity of the Board to have a discussion without breaking quorum through recusals.

Nearby Stanislaus County and Houston, Texas CoCs provide good examples of additional best practices for Board composition. These regions assign fixed representative seats to their CoC Boards. This helps engage high-level participation on their CoCs by local municipalities and public agencies. Local city governments and County agencies have pledged to support ongoing CoC efforts in San Joaquin County. It is recommended that fixed seats be allocated to the City Manager’s Office in each City for the designation of a CoC Board Member. Further, the Directors of the Public Agencies representing Behavioral Health Services, Human Services Agency, Probation, Public Health, and the local Housing Authority should be given discretion in appointing themselves or a high-level member of their leadership team to the CoC Board.

COMMITTEE STRUCTURE

Community stakeholders encouraged a re-conceiving of the committee structure to meet emerging community needs. Several committees currently detailed in the charter are inactive, others have outdated descriptions that no longer match needs, and others are missing, needed, or operating in a de facto fashion without formalization. Overall, stakeholders suggested fewer committees and more dedicated staff time to complete critical operational tasks.

The following changes to the committee structure are indicated:

- **EXECUTIVE COMMITTEE:** An executive committee meets on a de facto basis to plan CoC Board meeting agendas and other matters. There is also an ad-hoc nominating committee and a strategic planning committee dedicated to steering SJCoC’s responses to local needs and opportunities. The tasks of these three committees need to be more transparent and potentially combined. Formalized procedures for releasing and communicating the annual Open Invitation for New are ready for updates.³ Current CoC Board members and non-board members must participate in the development of processes and application review procedures, as well as ensuring PLEE, BIPOC, and LGBTQ+ representation. Finally, the Executive Committee should review agreements and contracts for services (such as the Collaborative Applicant, HMIS, and CES Lead Agency Agreements) annually and make recommendations to the Board for any updates to enhance performance or otherwise better meet the needs of the time.
- **FINANCE AND PERFORMANCE COMMITTEE:** Overall, one of the greatest challenges of the SJCoC is the lack of alignment between fund allocation and performance review. Most SJCoC Board members were unaware of the total amount of funds managed on their behalf through the Collaborative

³ US Department of Housing and Urban Development, FY 2023 CoC Application Detailed Instructions, See Question 1B-2 Open Invitation for New Members.

Applicant, the status of grant awards and expenditures, or the extent to which impact is being realized through investments. While it is the Collaborative Applicant’s role to serve as the fiscal agent and accountant for the funds, that does not preclude the Board’s responsibility for monitoring and managing financial resources. In furtherance of federal and state guidance, collective stewardship is needed for major regional investments that pass through the SJCoC, the County, and the City of Stockton, which explicitly come with guidance to use in a coordinated and collaborative fashion to address homelessness. Finally, there is too little quantitative information about the impact achieved by contractors in meeting their fair share goals of state and federal performance measures.

The Finance and Performance Committee should review sub-recipient agreements and contracts on an annual basis to ensure that funds are being expended as anticipated, goals are being met, and impact is being achieved. This committee, at a minimum, should include joint City and County representation, excludes contracted sub-recipients, and consider joint review of HHAP funding allocations to ensure appropriate coordination and utilization of resources.

Additional tasks could include reviewing and updating the CoC Program Competition scoring rubric and evaluating local projects. As with all committees, participation by additional community members, including PLEE, BIPOC, and LGBTQIA+ representatives, is required.

- **INITIAL STANDING COMMITTEES:** The SJCoC Board, jointly and with community input, will discuss and reimaging the purpose and need for the following committees:
 - Coordinated Entry System Committee
 - Data and HMIS Committee
 - Education and Membership Committee
 - Resource Development Committee
 - System Performance and Evaluation Committee

Two of the committees, **EDUCATION AND MEMBERSHIP** and **RESOURCE DEVELOPMENT**, are functionally inactive. Review tasks to determine if any remain necessary and reassigned.

The **SYSTEM PERFORMANCE AND EVALUATION COMMITTEE** serves a HUD-required purpose of preparing the application for the CoC Program Funds. However, moving forward, and for the next CoC Program Application:

- More clarity is in the Collaborative Applicant Agreement concerning staff roles and responsibilities vs. the oversight or support roles of the (volunteer) Board members with respect to the design and implementation of the collaborative planning process, the development of funding priorities for the region, and the application itself.
- Board members who are current or potential sub-recipients of CoC program competition funds should recuse themselves from any Board or Committee discussions or votes.

More work is necessary to strengthen the **HMIS/DATA COMMITTEE** and the **CES COMMITTEE**. Stakeholders repeatedly expressed concerns about the capacity and use of the two information systems. Specifically, stakeholders expressed concerns that after several years of implementation efforts, the CES software system still cannot pull information directly from the HMIS software system, resulting in duplication of effort and missed opportunities for improved coordination. Additional concerns include:

■ 2024 REGIONAL ACTION PLAN – KEY ACTIVITIES: PROJECT SUMMARIES

- **Data Validity.** The HMIS system contains too many errors or missing information to accurately inform decision-making. For example, the state HDIS data reports almost no work completed in one performance measure.
- **Data Quality.** The HMIS system has too many user-defined options, making data aggregation for performance monitoring challenging. Further, some organizations simply do not enter critical information without consequences.
- **Access to Information.** Partners need real-time access to information to improve linkage and referrals to resources, reduce duplicative case management activities, and prevent missed placement opportunities. Specific and useful data-sharing agreements (within the allowable use framework) are needed between program partners and clients who have signed a release of information.

Board members and other stakeholders have indicated that the work needed to strengthen the HMIS and CES systems is likely beyond the scope of their respective committees. The region needs a more thorough assessment and some of the work of the two committees should be combined and managed by paid staff or experienced information technology consultants. Resources for this time-limited project are available through HHAP-5 funding for systems support activities.

- **OTHER COMMITTEES:** There are currently regular meetings of Outreach Committees, a Housing Committee, a Shelter Committee, and the Youth Action Board. The greatest challenge of these committees is the lack of robust participation and overburdensome tasks. Despite the heroic efforts of the volunteer Board and community members of the committees, much work remains. Dedicated staff time will be assigned to committee efforts by the Collaborative Applicant or leveraged through additional county or city partners. Additional recommendations to strengthen services are in Section VI, below.

UPDATE THE SJCoC WEBSITE

The SJCoC's website requires significant attention. A new website and communication plan are needed, along with dedicated personnel to keep content updated and stakeholders engaged. HHAP funds will be used to hire or contract a person or entity to manage the SJCoC website, social media postings, and communications to ensure ongoing transparency of activities and compliance with regulations and keep the public informed of local needs, opportunities, and resources.

Develop Regional Practice Expectations

ACTIVITIES:

1. Outsource, or otherwise assign to neutral third parties, the 2024 CoC Program Competition Process.
2. Develop a regional and coordinated list of homeless housing pipeline projects.
3. Develop regional Rapid-Rehousing funding and practice expectations.
4. Develop protocols for landlord incentives. Provide a template for master-lease projects.

COC PROGRAM COMPETITION

There are currently insufficient Members of the SJCoC Board with the time and capacity to manage the CoC Program Competition Process who are free of any perceptions of conflict of interest. Board members have raised this concern with the Collaborative Applicant, and steps are being taken to shift responsibility to neutral parties. Guidance regarding the management of the process will be received through the HUD Technical Assistance Team and help inform processes moving forward.

REGIONAL HOMELESS HOUSING COORDINATION

The San Joaquin region needs a comprehensive and coordinated strategy for developing new homeless housing units. Clarity on the criteria for HACSJ to prioritize and assign project-based housing vouchers is also needed. Long-term agreement, understanding, and alignment on available sites and locally available funds across all jurisdictions and partners will streamline the development approach. Enhanced partnership between the County, Cities interested in promoting affordable housing, and the Housing Authority is recommended to create a **Regional Homeless Housing Development (RHHD) Plan**. Core elements will include:

- List of pipeline projects and/or available land
- HACSJ’s strategy for allocation of project-based housing vouchers.
- Coordinated project monitoring and program oversight.

RAPID REHOUSING PRACTICES

Develop regional Rapid-Rehousing funding and practice expectations. Clarify the allocation and monitoring of funds for eligible purposes associated with short-term rental assistance and support for homeless individuals vs. people at risk of homelessness. Clarify expectations for wrap-around support services and case management. Clarify rules and policies for landlord incentives. Develop a regional tracking system for accounting and monitoring purposes. Embed model within the procurement process.

CREATIVE HOUSING SOLUTIONS

Develop practice guidelines for other innovative and creative housing solutions, including master leasing and landlord incentives. Innovative solutions are needed to rapidly scale up the housing supply without the time constraints of acquisition and construction. Landlord incentives and master leasing can be wise investments – if implemented consistently in the region. Shared criteria for considering locations and units are needed to ensure consistency across jurisdictions. More coordination would be advantageous and potentially lead to a regional leasing strategy. Landlord incentives are another place where greater transparency between partners is beneficial. The primary purpose of a landlord incentive is to encourage “new” landlords to work with housing navigators. More coordination is required to ensure landlords and property management companies are not receiving multiple incentives from different programs.

Refine Procurement, Contracting, and Monitoring

ACTIVITIES:

1. Standardize procurement process for HHAP-4 and HHAP-5 sub-grantee awards.
 - Develop a shared approach to measuring and prioritizing organizational capacity to address disparities as a component of application review.
 - Develop shared contractor reporting requirements for demonstrating effort, fidelity, and outcomes, by program type.
 - Develop shared contractor expectations for staff training, qualifications, and use of HMIS or CES to complete program activities.
 - Release joint NOFA's and create joint County/City review process using neutral third parties to reduce applicant burden.
2. Develop shared accounting and contract monitoring protocols to prevent service duplication between the County of San Joaquin and City of Stockton-funded projects.
 - Make allocations contingent upon achieving desired impacts.
 - Invest in external evaluation and independent performance monitoring.
3. Provide routine updates to the SJCoC Board regarding the obligation and use of CoC Program Competition, Emergency Solutions Grant (ESG), HHAP, and Homekey program funds.
4. Provide routine updates to the SJCoC Board regarding unique clients served, by demographics, service utilization, and costs per client by service activity.

Improve Data Quality and Data Systems

ACTIONS:

1. Develop a Uniform Approach to Data Collection Grounded in HMIS
2. Establish Consistent Measures for Similar Programs.

Increasingly, community stakeholders are calling for an overhaul of the way in which we collect, compile, and use data to inform decision-making. While there is overall satisfaction with the HMIS software program as relates to the recording of day-to-day program activities, there is growing concern about the capacity of the data system to aggregate information across types of programs and activities; produce regular and accurate standardized reports to inform in-the-field decision making; and to provide program monitoring information that is responsive to new performance metrics. A qualified, independent assessment of system performance and opportunities is needed.

Further recommendations include:

- Reviewing all program specific data points and ensuring that there are specific and uniform definitions for services that overlap between two or more programs.
- SJCoC, the County, and the City should have coordinated and aligned contracting agreements and performance monitoring expectations regarding the use of HMIS by funded sub-recipients. Invoices for services should clearly demonstrate services completed (amount of work) and impact achieved (by assigned performance measures).

■ 2024 REGIONAL ACTION PLAN – KEY ACTIVITIES: PROJECT SUMMARIES

- Homeless service providers should have access to a working and functional HMIS system that allows them to track activities and efforts by program staff and determine whether activities are leading to desired outcomes.
- Programmatic rules and expectations regarding the Release of Information and the use of HMIS for case coordination should be regularly monitored through data validity checks.
- Annual program evaluations should be partially based on the evidence of effort, impact, and timeliness of activities as measured in aggregate through HMIS. Independent monitoring and analysis should be able to confirm reports and validate the completeness of data for both HUD reporting and program evaluation purposes.

Invest in Staff, Training and Expertise

A focus group was held on February 26, 2024, with the Re-Invent South Stockton and the Housing Justice Coalition to explore issues, root causes, and ramifications of disproportionate rates of Black and African American people experiencing homelessness or becoming newly homeless. Focus group participants shared thoughts and experiences pertaining to finding and maintaining housing in San Joaquin County. Among the root causes raised were the historic consequences of bank-backed redlining and disinvestments in Black and African American communities.

Stakeholders provided thoughtful suggestions on how SJCoC and its funding partners can work to overcome the harms of prior generations.

Culturally competent and effective service delivery is critical. Stakeholders were clear that the demographic characteristics of service providers are less important than the demonstrated competencies of highly qualified, professional providers. That said, service provider partners need to be diligent in working with a range of individuals, especially those who are most likely to be experiencing homelessness. Echoing the sentiment of a youth focus group conducted in the prior year, discussion group members talked about experiences of feeling judged or questioned by service providers based on dress, expression, or “attitude.” One young person reminded the group: “Of course, we are late, unorganized, dressed differently, and disrespectful - we are teenagers. That is essentially the definition of being a teenager. People who choose to work with teenagers should be prepared to work with teenagers. And like them.”

More evidence-based practices training is needed across the field. All training should additionally include discussions of cultural expectations and trauma-informed service delivery to help service providers recognize and overcome unintentional bias. Contracting and performance monitoring will be updated to address expectations.

Improve Coordination of Services

The SJCoC and its regional partners are committed to preventing and ending homelessness. Locally, there is a strong will and interest in reducing the number of families, veterans, people who are ill, escaping domestic violence, or otherwise suffering from multiple hardships who are living unaided, on the streets, and in hidden alleys, freeway underpasses, and drainage basins. Following concerns about the lack of housing options, the second greatest comment heard through the planning process was a plea to improve coordination of services and reduce duplication of effort. Stakeholders discussed the need for strong leadership and staff support to coordinate efforts between program partners. Two critical areas of practice improvement are discussed below.

COORDINATE OUTREACH EFFORTS

Support and partnership are requested of the **San Joaquin County Probation Department** to continue creating stronger and more effective coordination between emergency responders and service providers. Versions of police-supported homeless outreach teams exist within each municipal region. Work is needed to ensure that best practices are being followed to decrease the sudden and unplanned displacement of unsheltered homeless individuals. Encampment sweeps, while popular for “clearing an area,” have far-reaching negative consequences that worsen the problem of homelessness by the (unintentional) destruction of important documents and records necessary for program enrollment or housing, misplacement/loss of medications or other assisted mobility devices, exacerbation of trauma and grief over loss of sentimental personal possessions or removal of pets, and decreased trust and faith in homeless service partners to assist people in overcoming homelessness.

San Joaquin County has selected the CARES Program model for coordinated street outreach and encampment engagement. Adapted from Stanislaus County, the CARES Program is rooted in best practices for mobile co-responder teams. Mobile co-responder teams bring a coordinated and collaborative approach to homeless outreach activities, often involving a range of partners, including street medicine providers, behavioral health professionals, and specially trained local law enforcement officers. Officers engaged in co-responding programs typically receive intensive training in community policing strategies, which include recognizing trauma, problem resolution, and de-escalation. Rather than a “mop and sweep” model, mobile co-response teams engage in long-term case management and support to move people from the streets and into services and housing programs.

To this model, the Probation Department can bring regional leadership and coordination, reduce duplication of effort, and enhance the training and protocols used by local law enforcement agencies in responding to situations involving people who are homeless. San Joaquin County Probation Department is one of the first in the State to implement a graduated rewards approach, evidence-based programming, and assessment-guided case management. Having county-wide jurisdiction and pre-existing relationships with local municipal agencies means the Probation Department is well-situated to work with local departments on enhanced practices and protocols. The Probation Department Training Division can also provide assigned community police officers training on motivational interviewing and effective practices for encouraging and supporting behavioral change.

Ongoing staff and programmatic support work includes:

- Coordinate outreach activities to reduce duplication of effort.
- Ensure case coordination through the monitoring of HMIS activities.
- Create uniform co-response strategies in partnership with local municipalities and existing homeless outreach teams.
- Facilitate regional discussion.

HOUSING NAVIGATION

Support and partnership are requested of the **San Joaquin County Human Services Agency (SJCHSA)** to continue creating stronger and more effective coordination between eligibility workers and housing navigation teams to create housing-focused shelter programs.

Successful housing navigation is rooted in documentation and eligibility for public benefit programs. SJCHSA public assistance workers play a pivotal role in compiling documentation and ensuring eligibility. Over the years, SJCHSA has developed streamlined procedures for ensuring benefits are processed and approved in a timely manner to address critical safety net needs.

Ongoing staff and programmatic support work includes:

- Create uniform expectations and protocols for housing navigators to ensure clients are document-ready and eligible for a range of public benefits and housing support services, including rapid re-housing rental assistance vouchers.
- Enhance coordination and communication between outreach workers, housing navigators, and public social services teams.
- Provide feedback following any assessments of the community queue to measure whether this strategy is meeting the desired result of qualifying more individuals and families for housing support services and rapidly moving them into housing.
- Facilitate regional discussions on strategies to improve eligibility and document readiness for permanent housing.

SYSTEM SUPPORT PROJECTS TO BE COMPLETED THROUGH ALL AVAILABLE HHAP FUNDING

The County, SJCoC, and the City agree to the following Key Actions for improving the operational performance and impact of state and regional funds allocated to the region for preventing and addressing homelessness. These operational change activities are largely derived from key informant interviews, survey suggestions, and the strategy and planning sessions held during the four planning workshops. These sessions largely focused on the question of how we can, as a region, advance our work and meet our performance goals. Strategy sessions focused less on “what is needed” and more on “how to get there.” Overwhelmingly, responses focused on strategies to improve coordination and collaboration, reduce unnecessary duplication of services, and develop better protocols for “doing the work.” Currently, too much of the work is “everyone’s job,” meaning the collective responsibility of the SJCoC. Moving forward, and through updates to the Collaborative Applicant Agreement and Governing Charter, more responsibilities can be shifted to paid County, City, or partner staff and TA providers (such as external evaluators). Unspent HHAP-3, HHAP-4, and upcoming HHAP-5 funds will be leveraged to create a stronger and more effective foundation to manage and coordinate activities at the client and program levels.

Further details about the Workshops, including participants, presentations, and activities, are included in the Appendix.

CORE PROJECTS

1. Strengthen foundational aspects of the SJCoC, to address deficiencies in (1) Board composition and nomination process; (2) Conflict of Interest; (3) CoC Program Competition scoring, solicitation, and review process; (4) Coordination on land use and development; (5) Financial and programmatic accountability and monitoring; and (6) Transparency / public communications.
2. Complete a comprehensive review of existing information systems to determine where they are working to enhance client-level coordination and collaboration, program management and

monitoring, and system-wide assessments of performance measures, as well as where there are deficiencies based on regulations and Action Plan needs. Use recommendations to drive HMIS system improvements.

3. Complete a system-wide assessment of homeless housing and service needs as indicated by the selected performance measures and other key indicators. The System-wide assessment must include all relevant Federal and State initiatives, including but not limited to the CoC Program Competition, Emergency Solutions Grant (ESG), HHAP, and Homekey projects and activities.
4. Update and revise the Coordinated Entry System prioritization process. Prepare guidance and convene regional trainings to ensure consistent and effective use of the CES, including standardized assessment tools to triage needs and referrals.
 - Update procedures to prioritize people who have primarily been living unsheltered for the duration of their most recent episode of homelessness, regardless of occasional use of shelter services or recent linkage pending placement. (In accordance with Encampment Resolution Fund Initiative.)
5. Develop a regional CARE model. Create a regional co-response model and routine practices for coordinating activities across jurisdictions and departments. Develop regional practices and training protocols for teams.
6. Create regional screening and referral protocols to escalate case management and treatment for individuals likely to have serious mental illnesses or other disabling conditions that require specialty interventions. Disseminate model and train program partners responsible for hospital discharge, jail release, and street outreach.
7. Develop a Housing-focused shelter model. Standardize expectations for housing navigation and case management within interim housing programs. Standardize practices for other services and supports, including substance use treatment, medication monitoring, counseling services, peer support, and legal advocacy services. Embed the model into the procurement process.
8. Create a practice kit for housing navigators. Articulate best practices and expectations for local program partners. Create uniform expectations and protocols for housing navigators to ensure clients are document-ready and eligible for a range of public benefits and housing support services, including rapid re-housing rental assistance vouchers.
9. Fund program staff and experts to complete and implement work as planned.

X. FUNDING AND IMPLEMENTATION PLAN

Regionally, strong partnerships with managed care plan partners and the County’s Human Services Agency are a pivotal component of the implementation plan. Managed Care Plan partners were deeply invested into the local planning process, with leadership attending all public meetings and workshop discussions. Similarly, SJCHSA has committed to senior leadership support and thought partnerships with the SJCoC and other local partners to refine linkages to eligible federal, state, and local benefit programs.

Connections to Benefit Program (Table 2.6)

Connections to Benefit Programs	
CalWORKS	San Joaquin County Human Services Agency (SJCHSA) is an integral and engaged partner. Moving forward, <ul style="list-style-type: none"> ○ HSA will assign / designate an SJCHSA representative to the SJCoC Board. ○ Facilitate regional discussions on strategies to improve eligibility and document readiness for permanent housing
CalFresh	
SSI / SSP	
IHSS	
APS	
Child Welfare	
Child Care	
Med-Cal	
Enhanced Care Management Benefits	Managed care plan partners are actively working with homeless service providers to expand the provider network of entities capable of billing CalAIM for enhanced care management and community supports.

HHAP-5 Funding Priorities (Table 3.0)

Through this Action Plan, the County of San Joaquin, the City of Stockton, and the San Joaquin County Continuum of Care agree to the collective allocation of Homeless Housing Assistance and Prevention (HHAP) Round 5 funds:

Proposed Allocations	Proposed County / SJCoC Allocations	Proposed City of Stockton Allocations
Permanent Housing	At least 30%	Up to 45%
Interim Housing – Shelter Operations	At least 30%	At least 30%
Street Outreach and Service Coordination	Up to 10%	No funds allocated
Systems Support	Up to 20%	At least 14%
Administration (7%) / HMIS (1%)	8%	8%
Total	\$6,914,426	\$7,153,179
10% Youth Set-aside	\$ 691,443	\$715,318

Budget details to be refined prior to application submission. Following application submission, budgets may be refined with Cal-ICH approval.

HHAP ROUND 5 FUNDING PRIORITIES

- Expand the supply of permanent housing for homeless individuals and families.
- Expand the provision of treatment services and program supports for those receiving housing, including RRH vouchers and other short-term assistance to stabilize more people in their homes.
- Support low-barrier, housing-focused shelter programs with housing navigation and on-site treatment and case management services for those who seek additional support.
- Support targeted outreach and case management for vulnerable and underserved populations (e.g., youth, victims of domestic violence, etc.) who may not otherwise be the beneficiaries of outreach efforts, intensive case management, or other homeless supports.

SYSTEM SUPPORT AND COORDINATION PRIORITIES

- Improve HMIS data quality, data systems, and data analysis to improve decision-making.
- Update CES processes to streamline Rapid Rehousing program supports for unsheltered individuals exiting encampments.
- Invest in staff, training, and expertise (including PLEE) to grow and strengthen the Continuum of Care, including updates to the Collaborative Applicant Agreement and Governance Charter.

HHAP-5 LOGIC MODEL

Objective (Mandated Performance Measures)	Action (Recommended Areas of Program Funding)	Action (Recommended Areas of System Support Activities)
<ul style="list-style-type: none"> • Increase the number of people exiting homelessness into permanent housing. • Reduce the average length of time people experience homelessness. • Reduce percent of people returning to housing after placement. 	<p>Permanent Housing Invest in Permanent Housing Solutions. Invest in actions to increase supply of short and long-term supportive housing, including wrap-around support services.</p>	<p>Strengthen Continuum of Care.</p> <ul style="list-style-type: none"> • Collaborative Applicant Agreement • Governance Charter <p>Strengthen data collection, data validity, and monitoring.</p> <ul style="list-style-type: none"> • Assess and strengthen HMIS system and operations. • Develop aligned analysis and joint contract monitoring. <p>Strengthen linkages to permanent housing and other long-term supports services.</p> <ul style="list-style-type: none"> • Update CES to align with new state regulations. • Develop regional practice models, and train accordingly and in partnership with County systems. <p>Measure and work towards equitable outcomes.</p> <ul style="list-style-type: none"> • Use trauma informed and culturally responsive practices. • Ensure transparency of systems and information. • Conduct regional assessments and evaluation.
<ul style="list-style-type: none"> • Reduce the number of people experiencing unsheltered homelessness. • Increase linkages to programs from street outreach programs. 	<p>Shelter Invest in housing focused shelter operations, including housing navigation services and other wrap-around services.</p>	
<ul style="list-style-type: none"> • Reduce the number of people accessing homeless services. • Reduce the number of people experiencing first-time homelessness. 	<p>Outreach / Prevention Invest in early identification, prevention, and diversion programs for vulnerable persons and those over-represented in the homeless population. (e.g., youth, people fleeing domestic violence, and Black/African American community members).</p>	

Benchmarks of Success

As the City and Collaborative Applicant consider releasing funds for major project activities, the following benchmarks are key measures of success in accordance with HHAP-5 application requirements and indicators discussed during planning workshops.

ADDRESSING RACIAL AND ETHNIC DISPARITIES

- Reduce rates of Black / African Americans experiencing homelessness (31%), such that rates are more consistent with their proportion of the general population (7%).
- Reduce rates of Black / African Americans experiencing first-time homelessness (31%), such that rates are more consistent with their proportion of the general population (7%).
- Increase the rates for Polynesians and other Pacific Islanders (2%) and Native Americans (2%) to obtain housing after being homeless, such that there is parity with others (10%).
- Reduce the length of time Polynesians and other Pacific Islanders (100 days), White people (91 days), and Native Americans (88 days) experience homelessness such that there is parity with others (76 days).

INTERIM HOUSING AND HOUSING NAVIGATION

- Shelter utilization increases as a measure of % of the time the shelter is at or above 80% capacity. (For non-specialty shelter programs such as recuperative care or domestic violence shelters)
- Shelter exits are more consistently tracked; an exit is recorded for at least 50% of clients.
- Unique count of people using shelters and duration of use.
- Utilization of on-site services by demographics.
- Shelter stays can be analyzed using variables including length of time enrolled, number of stays during enrollment, number of services during enrollment, type of exit, and location of exit (if known), and cross-tabulated by demographic characteristics.

PERMANENT HOUSING AND HOUSING STABILIZATION

- Unique count of people accepted for a rapid re-housing voucher and duration to placement in a housing unit. The benchmark of success is for average wait time drops to less than 70 days to placement following issuance of voucher. The average length of time people remain homeless prior to placement is 76 days.
- Unique count of clients in housing program by type (RRH, Supported Housing, Other Housing). Monthly count of new admissions and exits. The ratio of clients to assigned program staff.
- Utilization of services, cost per c, and services received per client. Assessed by mean, mode, and quartile, and cross-tabulated by demographic characteristics.
- Unique count of clients who return to homelessness after placement. The goal is to achieve 6% or less.

Declarations

2.7 MEMORANDUM OF UNDERSTANDING

A copy of the MOU is in the Appendix for review.

2.8 APPLICATION DEVELOPMENT PROCESS

Public Meetings convened for the HHAP-5 Planning process.

MEETING	DATE	PURPOSE
1.	January 11, 2024	Review and launch planning process. Solicit input to strengthen community engagement.
2.	February 8, 2024	Review performance measures, equity assessment, and other key findings. Solicit input on funding priorities and additional research, including partner engagement.
3.	March 7, 2024	Review recommendations for funding and system improvements. Receive approval to incorporate recommendations into the Plan and Application as Actions through HHAP funding.

Public Plan Review.

MEETING	DATE	PUBLIC MEETING
1.	March 14, 2024	SJ CoC Board Meeting
2.	March 19, 2024	Stockton City Council Meeting
3.	March 26, 2024	San Joaquin County Board of Supervisors Meeting

XI. REFERENCES

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XII. APPENDICES

A. Key Stakeholder Interview Participants & Protocol

Seventeen key stakeholder interviews were conducted in the spring of 2024 to delve into the workings and shortcomings of homeless services in San Joaquin County. These interviews aimed to gather insights and recommendations from subject-matter experts to address homelessness effectively.

B. List of Public Meetings and Workshops

Three public meetings and four workshops were facilitated by Rane Community Development, engaging regional subject matter experts to explore current conditions, roles, responsibilities, and recommendations outlined in the HHAP 5 template. These sessions provided valuable input for shaping strategies to combat homelessness.

C. List of Planning Stakeholders

Appendix C compiles a roster of subject-matter experts involved in the HHAP 5 process, contributing through public meetings, workshops, or both. Their expertise and insights enriched the planning process.

D. Meeting Presentations

All presentations from the public meetings and workshops are cataloged in Appendix D. These presentations offer detailed insights and discussions on various aspects of homelessness, providing valuable context for understanding the challenges and solutions discussed during the sessions.

E. Community Survey Findings

Appendix E presents the findings from a community survey distributed in late February 2024. Approximately 33 respondents contributed their perspectives, offering statistical insights and thematic analysis into community perceptions and needs regarding homelessness.

F. Memorandum of Understanding

The Memorandum of Understanding (MOU) outlines the agreement between the City of Stockton Economic Development Department, San Joaquin County, and the Stockton/San Joaquin Homeless Continuum of Care CA-511. This document delineates collaborative efforts and responsibilities among these entities to address homelessness comprehensively.

Appendix A: Interview Participants & Protocol

List of Individuals Interviewed

Name	Agency
Veilka Guarascio	City of Manteca
John Narvaez	Salvation Army Hope Harbor
Petra Linden	St. Mary's Dining Room
Britton Kimball	Gospel Center Rescue Mission
Jennifer Spruill	SJC Behavioral Health Services
John Sisneroz	SJ Health
Jessica Velez	Red Rabbit Advocacy
Hector Jaimes	Familiar Faces (Program of Tracy Police)
Asst. Sheriff Mike Tibon	Sheriff's Office
Miriam Lyell	Public Defender's Office
Mark Yost	County Office of Education
Greg Diederich	Health Care Services Agency
Chris Woods	Human Services Agency
Sam Kaisch	Human Services Agency
Steve Jackson	Probation Department
LaTosha Waldon	Stanislaus County
Midori Lichtwardt	City of Tracy
RC Thompson	Reinvent South Stockton Coalition

Interview Protocol

1. Could you please describe your role in terms of homelessness in the region?
2. What programs and services currently exist to prevent and address homelessness in San Joaquin County?
3. What is currently working well in terms of types of service activities and coordination?
4. What is not working as well in this landscape of services? Where are the gaps, duplication of efforts, or lack of coordination?
5. What are the priority needs in terms of the full continuum of care?
6. What do you see on the horizon? Are there any specific causes for optimism?
7. What are your recommendations to strengthen the homelessness system of care?
8. What pitfalls or challenges should we be mindful of, systemically and programmatically?

Appendix B: List of Public Meetings and Workshops

Public Meetings

1. **January 11, Public Meeting #1:** CoC Board Meeting via Zoom, which included a public planning discussion on HHAP 5. The goal is to review the planning requirements and proposed planning process and gather input and support from SJCoC and community members for the HHAP 5 application.
2. **February 8, Public Meeting #2:** CoC Board Meeting, which included a public planning discussion on HHAP 5. System Performance Measures and Improvement Plan Discussion. Held at the Cesar Chavez Central Library, 605 N El Dorado St, Stockton, CA 95202, Meeting Room.
3. **March 7, Public Meeting #3:** CoC General Membership Meeting, which accepted the plan detailed in this report, and commensurate By-Law and Charter changes in alignment with the HHAP-5 requirements and the Action Plan. Held at City of Tracy Council Chambers, City Hall, 333 Civic Center Plaza, Tracy, CA. 95376.

Workshops

1. **January 22, Workshop #1:** Table 2.1 Participating Jurisdictions' Roles and Responsibilities. Held at the Public Health Department, 1601 E Hazelton Ave, Stockton, CA 95205, Conference Rooms 145 A&B.
2. **January 30, Workshop #2:** Table 2.2 System Performance Measures and Improvement Plan Discussion. Held at the Public Health Department, 1601 E Hazelton Ave, Stockton, CA 95205, Conference Rooms 145 A&B.
3. **February 12, Workshop #3:** Table 2.4 Plan to Reduce the Number of People Experiencing Homelessness Upon Exiting an Institutional Settings Discussion. Held at the Health Plan of San Joaquin, 7751 S Manthey Rd, French Camp, CA 9523, Conference Room.
4. **February 26, Workshop #4:** Coordinated Approach, Funding Plan, and Other Agreements Held at the Public Health Department, 1601 E Hazelton Ave, Stockton, CA 95205, Conference Rooms 145 A&B.

Appendix C: List of Planning Stakeholders

Name	Title	Agency/Dept	P. MTG 1	P.MTG 2	P.MTG 3	WKSHP 1	WKSHP 2	WKSHP 3	WKSHP 4
Alana Moreno		Emergency Food Bank			x				
Alejandra Navarro	Youth Program Supervisor	Community Partnerships for Families	x						
Alexander Nunez		Emergency Food Bank	x						
Augustine Navarro		Emergency Food Bank	x	x	x				
Ayesha Nic-Gongora		TPD/Familiar Faces			X				
Betty Wilson		Business Council SJC	x						
Brandi Hopkins	Assistant County Administrator	SJC/ CAO	x			x		x	x
Brenda Sison	Housing Navigator	Catholic Charities	x						
Brian McDonald	Interim Public Works Director	City of Tracy				x			
Britton Kimball	COO	Gospel Center Rescue Mission		x	x				
Carissa Lucas	Public Information Officer	City of Tracy		x		x		x	
Carrie Grover	Executive Director	Tracy Community Center			x				
Carrie Wright	Economic Development Manager	COS			x	x			x
Caryn Romero	TAY Program Director	Aspiranet	x						
Casey Armstrong		Turning Point Community Programs	x						
Cheryl Fowler		First 5 SJC – HAS	x						
Chris Woods	HSA Director	SJC				x			x
Christina Noble		Catholic Charities			x				
Christian Valeros		Lodi Police Department	x						
Courtney Wood			x						
David Tolliver	Deputy Director of Operations	SJC/ Public Works				x			
Dave Madura	Executive Director	Gospel Center Rescue Mission			x				
Dezarae Quilantang		First 5 SJC, HSA	x						
Oeun Prak	Assistant Director	HACSI		x				x	x
Dawn McLeish	Deputy Director	HSA					x	x	
D'Andre Davie		NAACP, Stockton	x						

■ 2024 REGIONAL HOMELESS ACTION PLAN – APPENDIX

Eliana Argeta	Regional Program Manager	Health Net				x		x	
Flor Robles	Administrative Technician HSD	City of Tracy			x	x			
Gina Calder	Chief of Staff	Board of Supervisors	x	x	x				
Gurman Singh	Staffer	Rep. Josh Harder's Office, 9 th District	x						
Greg Diederich	HSC Director	SJC/ HCSH		x		x	x	x	x
Harlin Smith	Shelter Specialist	Prevail				x			
Hector James		Familiar Faces							
Jayson Burk		SJ S/O		x					
Jeff Sabin	Deputy Director	BHS						x	
Jennifer Rhyne	Neighborhood Services Manager	City of Lodi	x			x		x	x
Jennifer Spruill	Chief Mental Health Clinician	SJC/ BHS	x			x	x	x	x
Jenny Rodriguez		Community Medical Centers & Care Link	x						
Jessica Quan	Director of Occupancy & Housing Compliance	HACSJ		x		x		x	x
Jessica Velez	CEO	Red Rabbit Advocacy		x					
John Della Monica	Community Development	City of Lodi				x		x	x
John Narvaez	Director, Lodi Hope Harbor Shelter	Salvation Army	x						
Jory Gwasdoff	Executive Director	Family Promise of San Joaquin County	x						
Juan Gonzales		City of Stockton	x						
Julisa Villalobos		City of Stockton	x						
Kate Hutchinson		Lutheran Social Services	x						
Kelly Vega	Program Assistant	Catholic Charities	x						
Kendra Kaiserman		Gospel Center Rescue Mission	x						
Kia Phillips		Insight Housing	x						
Kim De La Cruz	Captain	Sheriff's Office				x		x	x
Kimberly Murdaugh	Interim Assistant City Manager	City of Tracy				x			
Krista Fiser	SJCOC Chair	SJCOC/ Prevail	x	x	x	x	x	x	x
Kristen Birtwhistle	President & CEO	United Way of San Joaquin County		x	x				
Lakisha Holton	Correctional Health Admin	SJSO						x	
Latonya Jackson		Community Partnerships for Families	x						
Leanna Buck	Crisis/ Peer Counselor	Prevail				x	x	x	x

■ 2024 REGIONAL HOMELESS ACTION PLAN – APPENDIX

Lizeth Granados	Chief Executive Officer	HPSJ				x	x	x	x
Luis Ayala		Salvation Army		x					
Ahmad Majid		Concrete Development			x				
Maria Rodriguez		West Care	x						
Matt Garber	Assistant Director	SJC/ COC	x	x	x	x		x	x
Melanie Estarziau	Homeless Strategic Initiatives Manager	COS	x	x	x	x	x	x	x
Michael Tibon	Asst. Sheriff	SJSO						x	
Mayra Garcia		Insight Housing	x						
Muay Saechao		Children’s Home of Stockton	x						
Natascha Garcia	Administrator of Homeless Initiatives	HCS	x		x	x	x	x	x
Nicole Goehring			x						
Niyati Reddy	Director of Special Projects, Operations	Health Plan of San Joaquin	x						
Paul Canepa	SJ County Supervisor	SJC Board of Supervisors	x	x					
Perry Shelta Jr.	Service Coordination Liaison	Health Net					x	x	
Peter Ragsdale	Executive Director	HACSJ	x			x			
Petra Linden	CEO	St. Mary’s Community Services	x	x					
Ray Call	Interim Executive Director	SJC homeless related n/p orgs	x		x				
Sam Kaisch		SJCHSA		x					
Sandy Regalo	Assistant County Administrator	SJ County/ CAO	x				x		
Sasha Jackson	Chief Mental Health Clinician	SSC/ BNS				x	x	x	x
Shadi Barfjani	Senior Deputy	Public Health	x				x		
Shirley O’Neill		HCSA	x						
Steve Ding	SJ County Supervisor	SJC Board of Supervisors	x	x					
Tammy Shaff		St. Joseph’s Medical Center	x		x				
Tran Nguyen		Family Resource Center	x						
Vernell Shaw III	Regional Medi-Cal Lead	Health Net	x						
Vielka Guarascio	Management Analyst	City of Manteca					x	x	
Virginia Carney	Homeless Services Manager	City of Tracy	x	x	x	x	x	x	x
Wayne Templeton		Tracy Community Connections Center	x						

Appendix D: Meeting Presentations

January 11, Public Meeting #1

<p>San Joaquin Continuum of Care Public Meeting January 11, 2024</p> <hr/> <p>HOMELESS HOUSING, ASSISTANCE AND PREVENTION PROGRAM ROUND 5 (HHAP-5)</p>	<p>Memorandum of Understanding</p> <p><i>A Memorandum of Understanding (MOU) must be submitted along with the application. This MOU must be signed by each participating applicant committing to participate in and comply with the Regionally Coordinated Homeless Action Plan.</i></p> <p><i>MOUs and Regional Action Plans must be aligned.</i></p>
<p>HHAP-5 Planning and Submission</p> <p>Project Deliverables March 27, 2024: Due to California Interagency Council on Homelessness (Cal-ICH)</p> <ul style="list-style-type: none"> Regional Plan Coordinated Funding Plan(s) Regional MOU Application Form <p>➔ HHAP-5 is guided by new legislation: • HSC 50230.50238</p> <p>Rane Community Development</p> <ul style="list-style-type: none"> Kayce Rane, Project Lead Frances Hutchins Jennifer Susskind Motra DeNike Nikki Lowery <p>\$12 Million in Funding:</p> <ul style="list-style-type: none"> ~\$6 million (City of Stockton) ~\$3 million (SiCoC) ~\$3 million (San Joaquin County) 	<p>Application</p> <p>Application Requirements</p> <ul style="list-style-type: none"> Regional Action Plan is developed by Engaging Key Stakeholders SiCoC must verify that engagement occurred per guidance and regulations Administrative Entities must have Defined and Coordinated Roles and Responsibilities for: <ul style="list-style-type: none"> Outreach and Site Coordination Land Use and Development Development of interim and Permanent Housing Opportunities Coordination of and Connection to Service Delivery And clarify the roles, responsibilities, and implementation plan for: <ul style="list-style-type: none"> Updating prioritizations within Coordinated Entry System Developing pathways between eligibility, enrollment, provider engagement, and housing placements Using a data-driven and cross system plan designed to allocate resources in alignment with the State's priorities for homeless housing solutions – sufficient resources are dedicated to permanent housing solutions.
<p>Regionally Coordinated Homeless Action Plan</p> <p>Required Components</p> <ul style="list-style-type: none"> Identifying roles and responsibilities System performance measures Key actions to improve performance Key actions to ensure racial and gender equity Regional prioritization of unmet needs (aligned with the inventory from the Coordinated Entry System) Key actions to reduce exits to homelessness from institutional settings <ul style="list-style-type: none"> Regional coordination with regional care plan partners and utilization of CAHRI opportunities. Utilization of Funding Programs to End Homelessness <ul style="list-style-type: none"> Regional coordination and approval from state and federal funds, including CMHC, CCL, NAWICAP, Adult Safety, Neighborhood NHC, Success Development Fund. Connecting Individuals to Support Services Requires coordinated approach for access to ALL public benefits. <p>System Performance Measures</p> <ul style="list-style-type: none"> # of people accessing homeless services # of unsheltered homeless # of first time homeless # exiting to permanent housing Avg. length of time homeless % of people return to homelessness # successfully placed from street outreach Racial and ethnic disparities across all measures 	<p>Planning Process</p> <p>Planning Approach</p> <ul style="list-style-type: none"> Utilize existing/current findings and vision Engagement Plan <ul style="list-style-type: none"> 30 interviews with key stakeholders, plus interviews monitored by Kayce Lowery earlier in 2023. Three public meetings with comparable feedback meeting depending on participation of people with lived experience in homelessness. Four funding review meetings to address key issues regarding roles and responsibilities, coordinated funding plans – including emergent releases from other funds, and developing the MOU. Department leads are encouraged to invite significant members with lived experience in homelessness. Additional Data <ul style="list-style-type: none"> Price, current, and anticipated funding allocations MOU program utilization data for all funded programs System performance measure report <p>Engaging Key Stakeholders</p> <ul style="list-style-type: none"> People with lived experience of homelessness Youth with lived experience with homelessness Persons or populations overrepresented in homelessness Local department leads and staff from neighboring jurisdictions Homeless service and housing providers Medi-Cal managed care plans Street medicine providers and other service providers assisting people experiencing homelessness or at risk of homelessness
<p>Coordinated Funding Plan</p> <p>Funding Plan(s)</p> <ul style="list-style-type: none"> City of Stockton SiCoC San Joaquin County <p>Required Components</p> <ul style="list-style-type: none"> All funding must be regionally coordinated All activities must be adequately funded, carried out collaboratively, and effectively, across regional partners, and without duplication of effort. <p>NEW Funding Regulations</p> <ul style="list-style-type: none"> Applicable to HHAP-5 and any supplemental allocations Funding must prioritize permanent housing <ul style="list-style-type: none"> Disallows funds for new shelter beds With some exceptions for youth system housing, Dispersed care, and And with permission of CalICF Minimum 10% youth set-aside up to 7% Administrative costs up to 1% HHS licensing and operating costs 	<p>Work Plan Timeline</p> <p>January</p> <ul style="list-style-type: none"> Interviews Utilization Analysis Roles and Responsibilities Equity Improvement Plan <p>February</p> <ul style="list-style-type: none"> Key Findings Presentation Stakeholder Strategy Prioritization Managing Institutional Releases (Including Alignment to CAHRI and Care Court Initiatives) Regional Funding Consensus <p>March</p> <ul style="list-style-type: none"> Public Meeting on Draft Action Plan Public Meeting to accept CoC Charter and Bylaw updates consistent with the MOU and Plan Incorporate Final Input Approve and Publish Regional Action Plan Approve Funding Plan(s) Sign and Execute MOU Complete Required Application Template Upload Application, Regional Plan, MOU, and Funding Plan(s) <p style="text-align: right;">DUE March 27, 2024</p>
<p>HHAP-5 Strategies and Eligible Uses</p> <p>Permanent Housing</p> <ul style="list-style-type: none"> Delivery of Permanent Housing Rapid Rehousing Prevention and Diversion for those at risk of homelessness Operating subsidies for permanent housing programs <p>Interim Housing</p> <ul style="list-style-type: none"> Operating subsidies for existing interim housing Renovations and maintenance for existing interim housing Delivery of new Youth interim housing program <p>Service Provision and System Support</p> <ul style="list-style-type: none"> Street outreach Services Coordination System Support <p>All Activities, Use of Funds, and Approaches must be compliant with Housing First Approaches</p>	<p>Discussion and Public Input</p> <ol style="list-style-type: none"> Questions about HHAP-5 Requirements Feedback on the planning process Suggestions for engaging people with lived experience. Process for leveraging additional public funds in advance of February budget submissions. Additional input on the MOU process, Need to engage City Attorney, County Counsel, etc. <p>Please share any other suggestions:</p> <p>Kayce Rane Kaycerane@raneed.com</p> <p>Nikki Lowery Nikki@loweryconsulting.org</p>

Appendix D: Meeting Presentations
February 8, Public Meeting #2

SAN JOAQUIN COUNTY CONTINUUM OF CARE Public Meeting

HHAP 5 Funding Priorities
Rane Community Development
February 8, 2024

Keynote Speaker
Quahar / President
Rane Community Development

NDAI Leveary
Founder & CEO
NDAI Leveary Consulting & Facilitation LLC

Client Characteristics

Characteristic	Count	Percentage
Male	3,375	54.4%
Female	2,820	45.6%
Single adults	14	0.2%
Married	3,462	56.0%
Widow	403	6.5%
Divorced	761	12.3%
Partnering Youth	235	3.8%
Married with child	3,389	54.4%
Married without child	3,382	54.3%
Widowed	403	6.5%
Divorced	761	12.3%
Partnering Youth	235	3.8%

RACIAL & ETHNIC DISPARITIES

Outcomes by All Race & Ethnicity Groups

- Proportion of people accessing services who are experiencing homelessness
- Estimated proportion of homeless people experiencing unsheltered homelessness on the PIT
- Proportion of people accessing services who are experiencing homelessness for the first time

TODAY'S AGENDA

- 01 Performance Measures
Key Findings
- 02 Strategic Approaches
Table Discussion
- 03 Racial and Ethnic Disparities
Group Brainstorm Recommendations

RACIAL & ETHNIC DISPARITIES

People Experiencing Homelessness and Accessing Services vs. County Representation Among SJ County homeless people who are accessing services, there is some disproportionality

RACIAL & ETHNIC DISPARITIES

Outcomes by All Race & Ethnicity Groups

- Proportion of people accessing services who are experiencing homelessness
- Estimated proportion of homeless people experiencing unsheltered homelessness on the PIT
- Proportion of people accessing services who are experiencing homelessness for the first time

PERFORMANCE MEASURES

Program Effect... 04 Increasing the number of people seeking homelessness into permanent housing

OVERALL GOALS... 01 Reducing the number of persons experiencing homelessness, 02 Increasing the number of persons experiencing homelessness, 03 Reducing the number of persons who become homeless for the first time

05 Reducing the length of time persons remain homeless, 06 Reducing the number of persons who return to homelessness after exiting to permanent housing, 07 Increasing successful placements from street outreach

STRATEGIC APPROACHES

- 01 Self-Sufficiency, benefits/income, workforce development
- 02 Outreach with Case Management
- 03 Permanent Housing with Services
- 04 Intensive Housing with Services
- 05 Medical, Behavioral Health, Substance Abuse Disorder Treatment

Q. Based on our current needs, please rank the following strategic approaches in order of priority.

RACIAL & ETHNIC DISPARITIES

Average length of time (in days) people were known to be homeless, as documented within the CoC's HMSIS by Recorded Race/Ethnicity

Average = 75

Outcomes

- 1. Number of people accessing services who are experiencing homelessness: 11,727
- 2. Number of homeless people experiencing homelessness (PIT): 6,211
- 3. Number of people experiencing homelessness for the first time: 1,559
- 4. Number of people exiting homelessness to permanent housing: 1,135
- 5. Number of people exiting homelessness to other housing: 76
- 6. Number of people exiting homelessness to other housing: 129

RACIAL & ETHNIC DISPARITIES

Race/Ethnicity in HMSIS Service Recipients and Unsheltered Encampment Sample

RACIAL & ETHNIC DISPARITIES

Rate of Exit to Permanent Housing by Client Race/Ethnicity

Overall = 10%

UPCOMING DATES & NEXT STEPS

- 03/07 CoC Meeting
General Membership Meeting, By-Laws & Charter
- 03/14 CoC Meeting
Public Meeting - HHAP 5
- 03/19 City Council Meeting
Presentation of HHAP 5 Regional Funding Plan
- 03/27 Due Date
HHAP 5 Regional Funding Plan

Appendix D: Meeting Presentations
January 30 Workshop #2

RANE COMMUNITY DEVELOPMENT

SAN JOAQUIN COUNTY CONTINUUM OF CARE Public Meeting

HHAP 5 Funding Priorities Rane Community Development February 12, 2024

Kayce Rane
Owner / President
True Community Development

Nikki Lowery
Founder & CEO
Nikki Lowery Consulting & Facilitation LLC

Client Characteristics

Characteristic	Number	Percentage of Total
Homeless	5,275	34.4%
Homebased	5,275	44.4%
Respite/Respite	39	0.2%
High school	4,685	32.8%
Family	5,882	46.9%
Male	469	4.0%
Disenfranchised	702	4.4%
Physical Health	289	2.3%
Adults w/ID	1399	11.4%
Adults w/MS	1561	12.4%
Seniors	482	3.3%
Adults living ID	247	2.0%

RACIAL & ETHNIC DISPARITIES

Outcomes by All Race & Ethnicity Groups

- Proportion of people accessing services who are experiencing homelessness
- Estimated proportion of homeless people experiencing unsheltered homelessness on the PIT
- Proportion of people accessing services who are experiencing homelessness for the first time

TODAY'S AGENDA

- 01 Performance Measures
- 02 Strategic Approaches
- 03 Racial and Ethnic Disparities

RACIAL & ETHNIC DISPARITIES

People Experiencing Homelessness and Accessing Services by County Representation Among SJ County homeless people who are accessing services, there is some disproportionate

- Proportion of people accessing services who are experiencing homelessness
- County Representation

RACIAL & ETHNIC DISPARITIES

Outcomes by All Race & Ethnicity Groups

- Proportion of people accessing services who are experiencing homelessness
- Estimated proportion of homeless people experiencing unsheltered homelessness on the PIT
- Proportion of people accessing services who are experiencing homelessness for the first time

PERFORMANCE MEASURES

Program Effect →

Overall Goals	Program Effect
01 Reducing the number of persons experiencing homelessness	04 Increasing the number of people exiting homelessness into permanent housing
02 Reducing the number of persons who return to homelessness after exiting to permanent housing	05 Reducing the length of time persons remain homeless
03 Reducing the number of persons who become homeless for the first time	06 Reducing the number of persons who return to homelessness after exiting to permanent housing
	07 Increasing successful placements from co-occurring health

STRATEGIC APPROACHES

- 01 Self-Sufficiency, Benefits/Income, workforce development
- 02 Outreach with Case Management
- 03 Permanent Housing with Services
- 04 Interim Housing with Services
- 05 Medical, Behavioral Health, Substance Abuse/Co-occurring Treatment

Based on our current needs, please rank the following strategic approaches in order of priority.

RACIAL & ETHNIC DISPARITIES

Average length of time (in days) people were known to be homeless, as documented within the CoC's HMIS by Recorded Race/Ethnicity

Average = 76

Outcomes

- 1. Number of people accessing services who are experiencing homelessness = 11,722
- 2. Number of people exiting homelessness = 1,316
- 3. Number of homeless people experiencing homelessness for the first time = 6,211
- 4. Number of persons who return to homelessness after exiting to permanent housing = 129
- 5. Number of persons who return to homelessness after exiting to permanent housing = 1,169
- 6. Average length of time in homelessness = 76

RACIAL & ETHNIC DISPARITIES

Race/Ethnicity in HMIS Service Recipients and Unsheltered Encampment Sample

- Proportion of people accessing services who are experiencing homelessness
- Unsheltered Encampment Sample

RACIAL & ETHNIC DISPARITIES

Rate of Exit to Permanent Housing by Client Race/Ethnicity


Overall = 10%

UPCOMING DATES & NEXT STEPS

- 03/07 CoC Meeting - General Membership Meeting - By-Laws & Charter
- 03/14 CoC Meeting - Public Meeting - HHAP 5
- 03/19 City Council Meeting - Presentation of HHAP 5 Regional Funding Plan
- 03/27 Due Date - HHAP 5 Regional Funding Plan

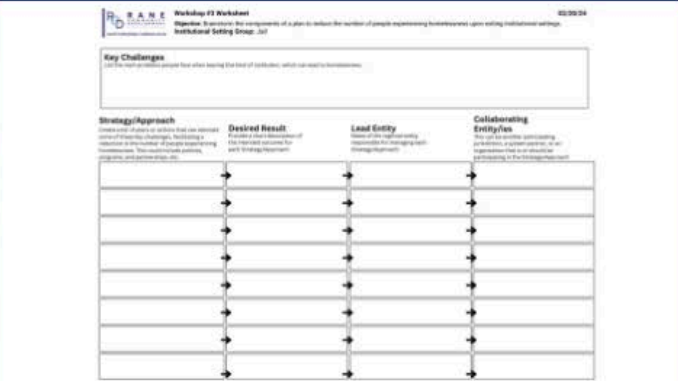
Appendix D: Meeting Presentations

February 12 Workshop #3



COUNTY/CITY/COC
ADDRESSING VULNERABLE POPULATIONS EXITING JAILS, HOSPITALS, COURT PROGRAMS, AND OTHER INST

HHAP 5 Funding Priorities
Rane Community Development
February 20, 2024
3:00 PM - 5:00 PM



Workshop #3 Worksheet
Objectives: Evaluate the components of a plan to reduce the number of people experiencing homelessness upon exiting institutional settings.

Key Challenges
List the top 5 greatest people first when leaving the field of activities, which can report to homelessness.

Strategy/Approach	Desired Result	Lead Entity	Collaborating Entities




TODAY'S AGENDA

- 01 Current State**
Feedback from Key Stakeholder Interviews
- 02 Strategic Approaches**
Brainstorm & Discussion



UPCOMING DATES & NEXT STEPS

- 02/26** Workshop #4
Coordinated Approach, Funding Plan, and Other Agreements (Review DRAFT Plan), Public Health Department on Hazardous Situations Conference Rooms 145-AGE
- 03/07** CoC Meeting
General Membership Meeting by Laws & Charter
- 03/14** CoC Meeting
Public Meeting HHAP 5
- 03/19** City Council Meeting
Presentation of HHAP 5 Regional Funding Plan
- 03/27** Due Date
HHAP 5 Regional Funding Plan



FEEDBACK FROM INTERVIEWS

- Jails and Prisons:** The Sheriff's Office in the jail provides programs and services for inmates, including social workers who assist with inmates' needs, such as housing, and make connections with County Behavioral Health and Whole Person Care for individuals experiencing homelessness. - Challenges include limited bed space in shelters and the restrictions on what they will and won't accept, leading to more holes than options for addressing homelessness.
- Behavioral Health Facilities:** Behavioral Health services, including mobile response, collaborative courts, and defense-based social workers, are identified as assets. - Challenges include the lack of a system to assess need and place people accordingly, addressing stereotypes and discrimination, and potential harm caused by homelessness in individuals' lives.
- Homeless Task Force:** The Homeless Task Force made progress for the jail and law enforcement by developing more space for clients and beds, aiming to address the needs of individuals with mental health issues who do not have a criminal case.
- Community-Based Organizations (CBOs):** Challenges include the difficulty in getting CBOs to come out unless they have a direct AS100 connection, and the need for more streamlined and efficient processes within the homelessness system of care.
- Hospitals:** Recommendations include strengthening partnerships with hospitals to support individuals in deterring or delaying and involving homeless individuals in decision-making processes.
- Foster Care:** The Public Defender's office is moving toward a more holistic model of defense, incorporating social workers to meet the complex needs of clients and prevent re-entry into the criminal justice system.

Overall, the feedback from institutional settings highlights the challenges and opportunities in addressing homelessness, including the need for improved coordination, increased housing availability, and tailored responses to individual needs.

Appendix D: Meeting Presentations
February 26, Workshop #4

Table of Contents

- 01 Revenue Analysis
- 02 Expenditure Analysis
- 03 Planning Considerations

Total Regional HHAP Funds
Rounds 1 - 3
Total: \$66,000,000

Anticipated HHAP 3/4 Expenditures

Recommendations:

- Create a regional homeless housing development strategy
- Limit of specific projects and/or available land
- Strategy for allocation of project based housing resources
- Coordinate project marketing and program oversight
- Develop regional approach to mental healthcare / services
- Shared protocols / methods / performance measures
- Regular monitoring of expenditures through GIS
- Majority of case management allocated following placement
- Section vision for existing section housing
- Develop fully 60 Outreach and Service Coordination KPIs for collaborative approach, not eligible for quarterly case management
- Create shared approach for Planning, Monitoring, Reporting, Metrics / KPIs improvement
- System Coordination
- System Support
- Administrative Funds are for grant coordination and management activities of applicant entities

Regional HHAP Fund Balance
Rounds 1-5

Regional Housing / Homeless Funds
Summary & Findings

Regional Revenues:

- 2023-24 through FY22-23: \$320,000,000
- City of Clark, Thurston, Tallapoosa
- Colo/Casity Homeless Designated Funds

Additional Related Funding Not Included:

- HHAP 4 and HHAP 5: \$28 million pending
- HHAP FY 2022, 2023, and 22/23: \$50 million allocated for Housing & Subsidies
- Whole Person Care (Janet FY13/17): \$70 million reserved for date
- HACS/HCP Operating Subsidies/Grants: \$75-\$80 million approximate annual allocations

Other:

- Neighborhood Preservation did not submit County APRA allocations for homeless projects.
- Health/Mat / Health Plan Data

Regional Expenditures

The majority of housing related funds are not allocated through the collaborative applicant or entitlement City, and are not included in the analysis:

- Janet, Behavioral Health Services and the Housing Authority LLC, over an estimated \$10 million in housing related programming, including associated stabilization services, treatment and care management, during FY 2023-2024

FY 22-23 Expenditures align with State designated priorities

- Permanent Housing: 52%
- Interim Housing: 33%
- Services and Coordination: 10%
- Administrative Costs: 9%

Revenue by Funding Agency FY22-23 through FY22-23

Revenue by Funding Agency FY22-23

Expenditure Analysis

Expenditure per Housing and Affordable Unit, FY22-23

Category	Amount
Operating Subsidies	\$16,800,000
Capital for Permanent Housing	\$15,000,000
Operating Subsidies for Permanent Housing	\$14,000,000
Operating Subsidies for Interim Housing	\$13,000,000
Operating Subsidies for Services and Coordination	\$12,000,000
Operating Subsidies for Administrative Costs	\$11,000,000
Operating Subsidies for Other	\$10,000,000
Operating Subsidies for Total	\$88,800,000

HHAP Allocations Rounds 1-5
Summary & Findings

Regional Allocations:

- Regional HHAP allocations (all rounds) will exceed \$40 million

Unallocated or Re-allocated Funds Need to be Assigned:

- HHAP 2 2012-3: \$1,500,000 (HHAP 2)
- City of Thurston: \$1,000,000 (HHAP 3)

Spent Down is Slow

Expenditure Deadlines are Approaching

- HHAP 1 FY2020
- HHAP 2 FY2021
- HHAP 3 FY2022
- HHAP 4 FY2023
- HHAP 5 FY2024

Key Challenges:

- Construction delays
- Administrative delays
- Delays in funding
- Delays in construction
- Delays in case management
- Delays in placement
- Delays in marketing
- Delays in other

Community Feedback on FY 22-23 Regional Expenditures

Existing Expenditures:

- 57% of all expenditures went towards construction (about \$19M)
- 20% for other construction
- 18% rental assistance, landlord incentives, rapid re-housing
- 1% for operating / fiscal assistance
- 5% Rapid Re-housing
- 8% operating subsidies for shelters and permanent housing
- 4% Service / System Coordination

Areas of Consideration:

- Rental assistance, landlord incentives, rapid re-housing
 - Research individual level that will be long and not just a "band-aid" - we will take care of them
 - Need better alignment of community support, HHAP and other funding
 - Too many funds remain unallocated, almost \$2 million in unallocated HHAP funds
 - Timeline prioritization is needed to reduce time to placement - but HHAP work is needed to be address
- Operating subsidies for shelters and permanent housing
 - HHAP applicant funds could start transitioning to long-term solutions
 - Private landlords have little incentive to accept homeless individuals or groups per HHAP funding
 - Subsidies for operating cost management
- Service / System Coordination
 - Collaborative approach and system coordination were identified as key program change in community survey

Appendix D: Public Plan Review Presentation

March 14, SJCoC Board Meeting

March 19, Stockton City Council Meeting

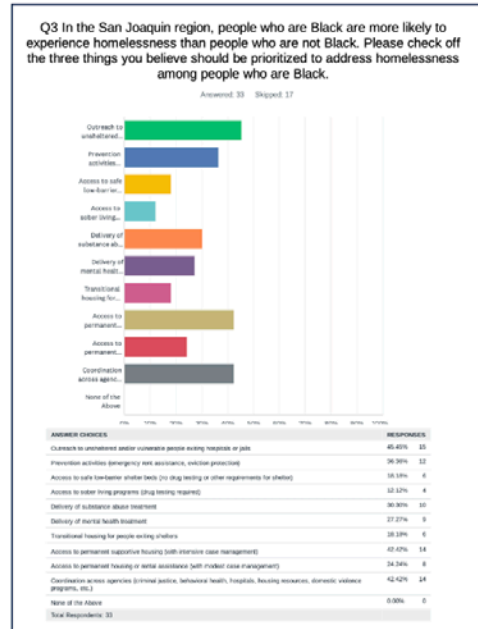
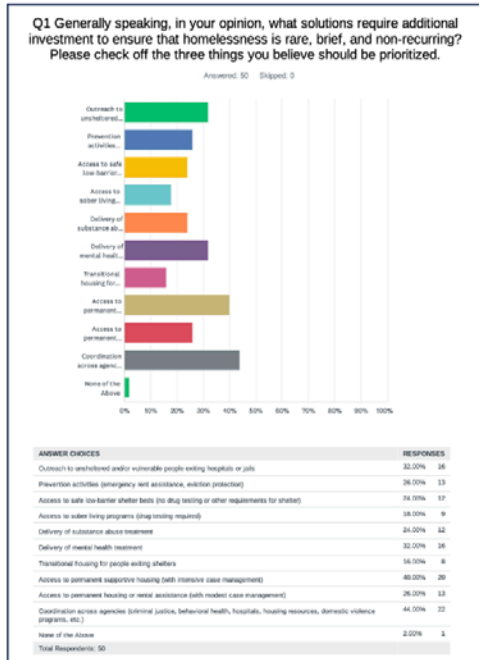
March 26, San Joaquin Board of Supervisors Meeting

This section is deliberately left blank for the public review draft.

Presentation and Comments from the plan review meetings listed above, including any *substantial* corrections or updates to the Regional Homeless Action Plan, will be inserted on March 27, 2024.

Appendix E: Community Survey Findings

HHAP 5 Regional Funding Plan Community Survey Findings



2. Please explain what you think are the highest priorities for ensuring that homelessness in this region is rare, brief, and non-recurring:

The following themes emerged:

- 1. Mental Health and Substance Abuse Treatment:** Many responses emphasize the importance of addressing mental health issues and substance abuse as significant factors contributing to homelessness.
- 2. Prevention and Early Intervention:** Several respondents prioritize preventing homelessness before it occurs, through measures such as rental assistance, eviction prevention, and early intervention programs.
- 3. Affordable Housing:** The need for affordable housing is a recurring theme throughout the responses, with suggestions ranging from rent control to the creation of more low-income housing options.
- 4. Wraparound Services and Supportive Housing:** Many respondents advocate for comprehensive support services, including wraparound case management, job training, and permanent supportive housing.
- 5. Individualized Approaches:** There's a recognition that homelessness is not a one-size-fits-all issue, with calls for tailored solutions that address the diverse needs of individuals, including specific populations like transition age youth and those with mental health disorders.
- 6. Coordination and Collaboration:** Collaboration among service providers, coordination of services, and communication are highlighted as essential for effective support delivery.
- 7. Enforcement and Consequences:** Some respondents suggest enforcing consequences for individuals who refuse assistance or engage in criminal activities, while also acknowledging the need for voluntary rehabilitation options.
- 8. Community Engagement and Listening to Homeless Voices:** There's an emphasis on involving homeless individuals in decision-making processes and listening to their needs and perspectives.
- 9. Accessibility of Services:** Suggestions include expanding access to services such as detox programs, mental health facilities, and job training, ensuring they are available and easily accessible to those in need.
- 10. Housing First Approach:** Several responses advocate for a Housing First model, prioritizing access to stable housing as a fundamental solution to homelessness.

Overall, the themes reflect a holistic understanding of homelessness as a complex issue requiring multifaceted solutions that address root causes, provide comprehensive support, and prioritize housing stability.

4. Please explain what you believe would improve homeless service delivery for people experiencing homelessness who are Black:

The following themes emerged:

- 1. Culturally Sensitive Service Delivery:** Respondents emphasize the importance of culturally sensitive approaches to service delivery, including the need for diversity among service providers and implicit bias training to address racial disparities in homeless service delivery.
- 2. Education and Training Opportunities:** Suggestions include providing educational opportunities and training for employment to empower Black individuals experiencing homelessness.
- 3. Outreach and Awareness:** There's a call for increased outreach efforts specifically targeting Black individuals experiencing homelessness, along with awareness campaigns to reduce stigma and ensure awareness of available resources.
- 4. Housing Access and Supportive Services:** Affordable housing and permanent supportive housing with intensive case management are highlighted as critical components for improving service delivery for Black individuals experiencing homelessness.
- 5. Community Engagement and Support:** Engaging with Black communities to address root causes of homelessness, such as poverty and lack of resources, and encouraging familial support are suggested strategies.
- 6. Representation and Lived Experience:** Recommendations include employing individuals with lived experience of homelessness, particularly from the Black community, to better connect with and serve the population.
- 7. Intersectional Approach:** Some respondents express the need to consider intersectionality and address the unique challenges faced by Black individuals, while also recognizing that other demographics may also be at risk.
- 8. Healthcare and Mental Health Services:** Ensuring access to drug treatment, mental health services, and addressing drug addiction and mental health issues are highlighted as essential for improving service delivery.
- 9. Data and Statistics:** There's a call for using data to understand and address racial disparities in homelessness service delivery, including questioning why resources may be disproportionately allocated.

Overall, the themes reflect a need for comprehensive, culturally competent approaches that address both systemic and individual factors contributing to homelessness among Black individuals.

Appendix E: Community Survey Findings

HHAP 5 Regional Funding Plan Community Survey Findings



5. Please explain what you believe would improve housing placement rates for people experiencing homelessness who are Black:

The following themes emerged:

- 1. Access to Affordable Housing:** The availability of affordable housing is consistently identified as a key factor in improving housing placement rates for Black individuals experiencing homelessness.
- 2. Coordination of Services:** Respondents highlight the importance of coordinated services, including mental health and substance abuse treatment, employment opportunities, and case management, to support successful housing placement.
- 3. Cultural Sensitivity and Nonjudgmental Support:** Recommendations include culturally sensitive service delivery and nonjudgmental assistance that addresses the unique needs and challenges faced by Black individuals experiencing homelessness.
- 4. Partnerships with Community-Based Organizations (CBOs):** Collaboration with local CBOs and organizations like the NAACP is suggested to better address housing barriers and provide support tailored to the Black community.
- 5. Financial Support and Rental Subsidies:** Providing financial support, such as rental subsidies, is identified as crucial for helping individuals increase their incomes and transition into stable housing.
- 6. Evaluation and Improvement of Programs:** Some respondents call for the evaluation of existing programs to identify and address any barriers to housing placement for Black individuals, ensuring equitable access to services.
- 7. Intervention and Prevention:** Interventions aimed at decreasing the risk of homelessness, such as intensive case management and prevention programs, are highlighted as strategies to improve housing placement rates.

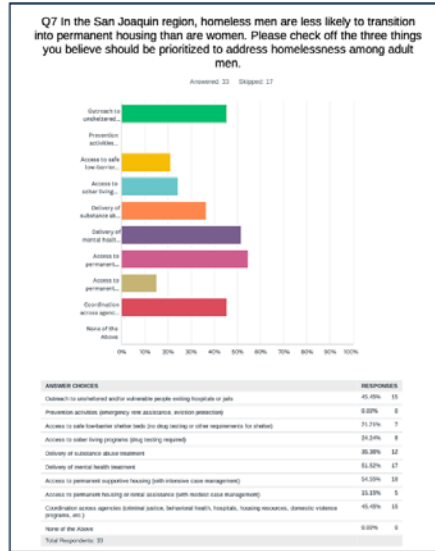
Overall, the themes suggest a need for comprehensive approaches that address both systemic barriers and individual needs, with a focus on affordability, coordination of services, cultural sensitivity, and community partnerships.

6. Please explain what you believe would improve housing retention rates for people experiencing homelessness who are Black:

The following themes emerged:

- 1. Employment and Financial Stability:** Many responses highlight the importance of job training, placement, and financial support in improving housing retention rates for Black individuals experiencing homelessness. This includes education in financial basics, quality employment opportunities, and ongoing support to retain jobs.
- 2. Case Management and Wraparound Services:** The need for comprehensive case management and ongoing wraparound services is emphasized to provide support and assistance beyond initial housing placement.
- 3. Cultural Sensitivity and Respect:** Recommendations include providing an environment respectful of Black culture and ensuring culturally sensitive service delivery to effectively engage and support individuals.
- 4. Affordable Housing and Rental Assistance:** Access to affordable rents, eviction protection, and rental assistance are identified as crucial factors in retaining housing for Black individuals experiencing homelessness.
- 5. Community Partnerships and Oversight:** Collaboration with local community-based organizations (CBOs) and oversight to ensure accountability and evaluate program effectiveness is suggested.
- 6. Mental Health and Supportive Services:** Mental health services, crisis intervention, and access to supportive services are seen as essential for addressing underlying challenges and preventing housing instability.
- 7. Education and Training:** Recommendations include education and training opportunities to improve employment options and provide tenants with knowledge of their rights and responsibilities.
- 8. Prevention Services:** Some respondents suggest investing in prevention services to address root causes of homelessness and mitigate housing instability before it occurs.

Overall, the themes reflect a need for holistic approaches that address systemic barriers, provide ongoing support, and empower individuals with the resources and skills needed to maintain stable housing.



8. Please explain what you believe would improve homeless service delivery for men experiencing homelessness:

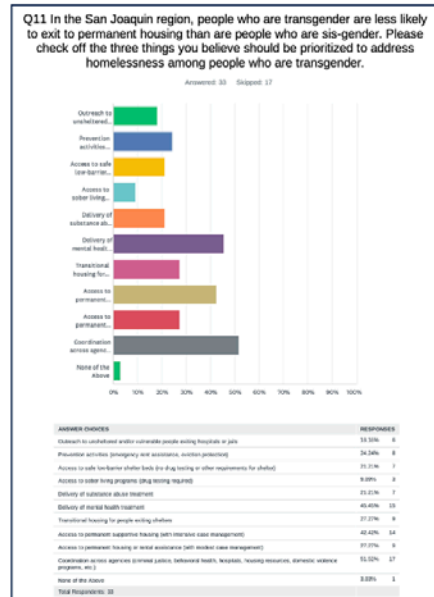
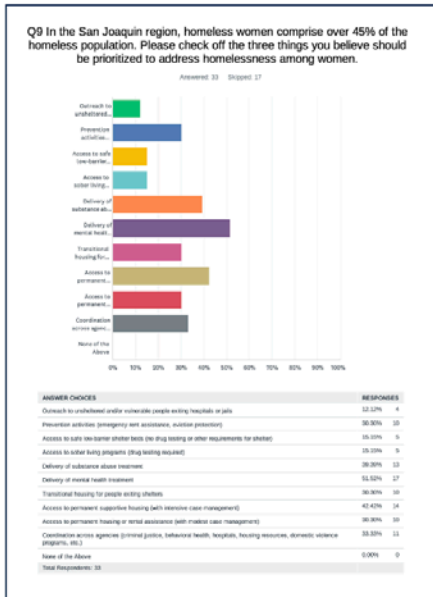
The following themes emerged:

- 1. Accountability and Supportive Services:** Several respondents emphasize the importance of accountability measures, such as requiring participation in services or programs in exchange for support, to ensure effective use of resources and encourage engagement in rehabilitation or treatment.
- 2. Street Outreach and Specific Outreach Strategies:** Suggestions include improving street outreach efforts, particularly targeted outreach to men experiencing homelessness, and involving formerly unhoused men in outreach activities to build rapport and trust.
- 3. Multi-Solution Approach:** Respondents advocate for a multi-faceted approach to homeless service delivery, incorporating job training, job placement, drug treatment with detoxing, and mental health support to address the complex needs of homeless men.
- 4. Housing Accessibility and Options:** The availability of affordable and desirable housing options is highlighted as crucial for homeless men, along with the need for transitional housing specifically designed for men and permanent supportive housing options.
- 5. Coordination of Services and Systems:** Coordination across agencies and systems, such as prisons and re-entry programs, is identified as essential to provide comprehensive support and ensure successful reintegration into society.
- 6. Focus on Rehabilitation and Supportive Programs:** Respondents stress the importance of rehabilitation programs, such as Ready to Work or Five Keys, which offer job training, education, and support to help homeless men find stability and purpose.
- 7. Addressing Drug Addiction and Mental Health Issues:** Interventions targeting drug addiction and mental health issues are considered critical to addressing the root causes of homelessness among men and promoting long-term stability.
- 8. Individualized Support and Trauma-Informed Care:** There's a call for individualized support, intensive case management, and wraparound services that address mental health, trauma, and other underlying issues affecting homeless men.

Overall, the themes highlight the need for a comprehensive and tailored approach to homeless service delivery for men, addressing a range of needs including housing, employment, mental health, and substance abuse support, while also focusing on accountability, coordination, and rehabilitation.

Appendix E: Community Survey Findings

HHAP 5 Regional Funding Plan Community Survey Findings



10. Please explain what you believe would improve homeless service delivery for people experiencing homelessness who are women:

The following themes emerged:

- 1.Accountability and Supportive Services:** Several respondents emphasize the importance of accountability measures, such as requiring participation in services or programs in exchange for support, to ensure effective use of resources and encourage engagement in rehabilitation or treatment.
- 2.Gender-Specific Needs and Services:** Respondents highlight the unique needs of women experiencing homelessness, including vulnerabilities related to domestic violence, sexual violence, and caregiving responsibilities. They stress the importance of providing gender-specific support services and shelter options tailored to women's experiences.
- 3.Coordination of Services and Systems:** Coordination across agencies and systems is identified as essential to provide comprehensive support for women experiencing homelessness, particularly in addressing complex issues such as domestic violence, mental health, and substance abuse.
- 4.Housing Accessibility and Support:** Access to affordable housing, drug treatment with detoxing, and permanent supportive housing with good case management are highlighted as crucial for women experiencing homelessness. There's an emphasis on prioritizing women-headed households with children for permanent housing and providing transitional housing with supportive services.
- 5.Mental Health and Substance Abuse Treatment:** Intensive drug and mental health counseling are identified as important interventions for women experiencing homelessness, along with access to social services, mental health, and substance abuse treatment programs.
- 6.Legislative Changes and Legal Support:** Some respondents advocate for changes in laws to ensure adequate support and services are provided to individuals suffering from drug addiction and mental health issues, as well as to address systemic barriers to housing stability.
- 7.Individualized Support and Trauma-Informed Care:** There's a call for individualized support, intensive case management, and wraparound services that address mental health, trauma, and other underlying issues affecting women experiencing homelessness.

Overall, the themes underscore the need for gender-sensitive and trauma-informed approaches to homeless service delivery for women, addressing a range of needs including housing, employment, mental health, and substance abuse support, while also focusing on accountability, coordination, and legislative advocacy.

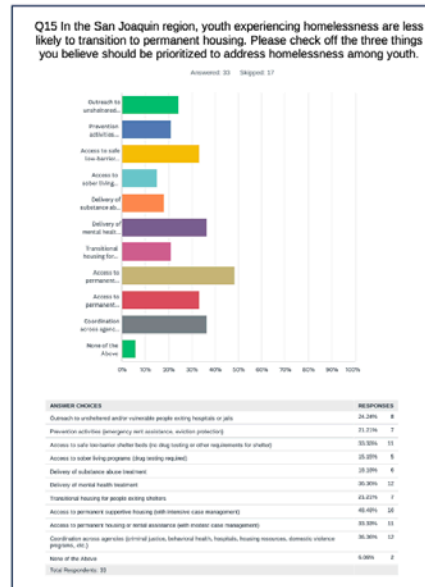
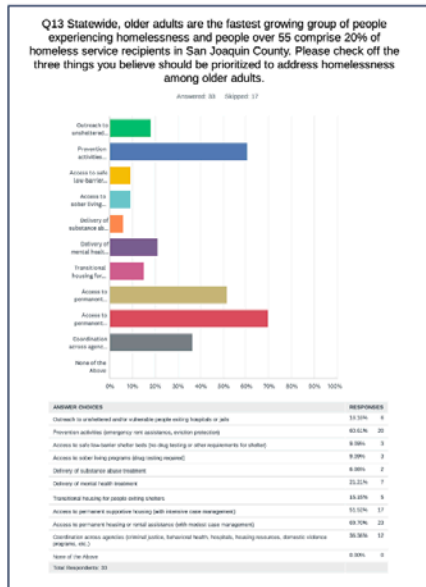
12. Please explain what you believe would improve homeless service delivery for people experiencing homelessness who are transgender:

- 1.Accountability and Supportive Services:** Several respondents emphasize the importance of accountability measures to ensure effective use of resources and support services for transgender individuals experiencing homelessness.
- 2.Comfort, Acceptance, and Inclusivity:** Comfort, acceptance, and inclusivity are highlighted as crucial elements in homeless service delivery for transgender individuals. Safe spaces where they can feel accepted and privacy in shelter and housing are identified as key factors.
- 3.Mental Health Support:** Mental health services, including therapy, are identified as essential for transgender individuals experiencing homelessness, addressing the unique challenges and trauma they may face.
- 4.Coordination of Services and Systems:** Coordination across agencies and systems is identified as essential to provide comprehensive support for transgender individuals experiencing homelessness, ensuring they can access housing and support services effectively.
- 5.Education and Training:** Education of service providers and implicit bias training are suggested to ensure trans-friendly services that effectively meet the needs of the population and provide the necessary support.
- 6.Legislative Changes and Legal Support:** Some respondents advocate for legislative changes to address systemic barriers and ensure adequate support and services are provided to transgender individuals experiencing homelessness.
- 7.Transgender-Specific Housing and Support Services:** Recommendations include transitional housing specifically designed for transgender individuals, providing education in financial basics, job skills, and support for mental health and substance abuse issues.
- 8.Community Engagement and Education:** Education in the community about transgender issues is suggested to reduce discrimination and increase acceptance and support for transgender individuals experiencing homelessness.
- 9.Individualized Support and Trauma-Informed Care:** There's a call for individualized support, intensive case management, and wraparound services that address mental health and trauma experienced by transgender individuals.

Overall, the themes emphasize the need for transgender-specific and trauma-informed approaches to homeless service delivery, addressing issues of comfort, acceptance, mental health support, coordination of services, and legislative advocacy.

Appendix E: Community Survey Findings

HHAP 5 Regional Funding Plan Community Survey Findings



14. Please explain what you believe would improve homeless service delivery for older adults experiencing homelessness:

The following themes emerged:

- 1. Financial Assistance and Housing Support:** Many respondents emphasize the need for financial assistance, increased rental assistance, and access to affordable housing to address the housing instability faced by older adults experiencing homelessness.
- 2. Access to Healthcare and Mental Health Services:** Access to healthcare and mental health services is identified as crucial for older adults experiencing homelessness, given their potential health issues and vulnerabilities.
- 3. Prevention and Intervention:** Some respondents advocate for prevention programs to address homelessness among older adults before it occurs, along with interventions that meet their specific needs, such as geriatric social work intervention and services.
- 4. Intensive Case Management and Support Services:** There's a call for intensive case management and wraparound services tailored to the needs of older adults, including access to skilled nursing facilities, geriatric social work interventions, and support for mental health and trauma.
- 5. Community Integration and Support:** Suggestions include providing opportunities for community integration, such as access to volunteer work, community gardens, and social activities, as well as re-connection with families where possible.
- 6. Legislative Changes and Advocacy:** Some respondents advocate for legislative changes to address systemic issues contributing to homelessness among older adults, such as healthcare costs and housing affordability.
- 7. Senior-Specific Housing and Services:** Recommendations include outreach efforts targeting older adults and the provision of senior-specific housing options with supportive services, including permanent supportive housing and all levels of nursing homes.
- 8. Community Concerns:** Concerns about the cost of housing in the region and the challenges faced by older adults on fixed incomes are highlighted as significant barriers to housing stability.

Overall, the themes underscore the need for comprehensive support systems addressing housing, healthcare, mental health, and community integration for older adults experiencing homelessness, with a focus on tailored interventions and advocacy for systemic change.

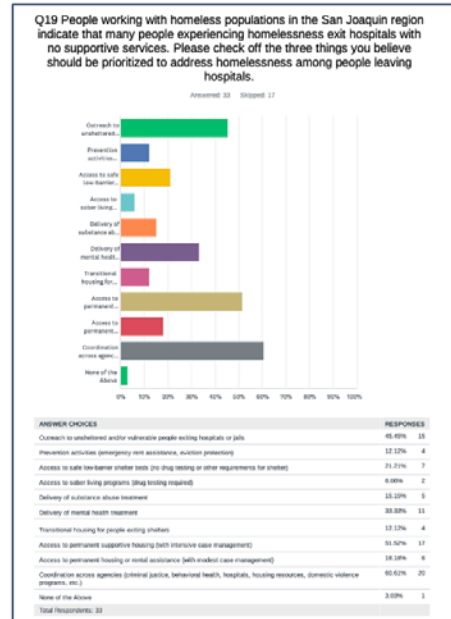
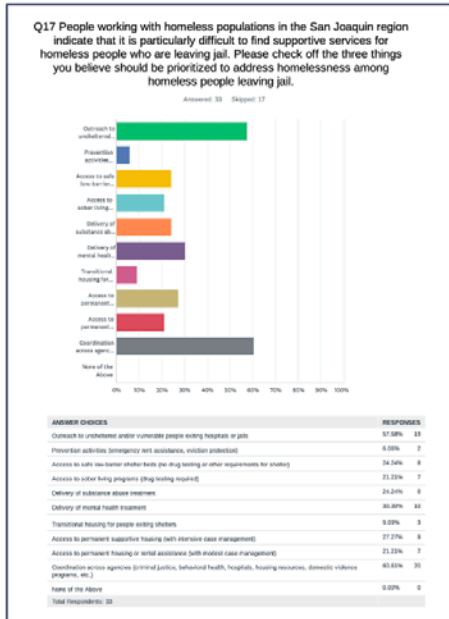
16. Please explain what you believe would improve homeless service delivery for youth experiencing homelessness:

- 1. Accountability and Support Services:** Accountability measures are highlighted as important for youth experiencing homelessness, along with the need for comprehensive support services tailored to their specific needs.
- 2. Family Reunification and Legislative Changes:** Recommendations include efforts to restore family units and legislative changes to facilitate placement of youth in supportive care environments.
- 3. Safe Spaces and Basic Needs:** Safe shelter spaces, access to education, job training, and mental health services are identified as essential for youth experiencing homelessness to address their vulnerability and provide opportunities for stability.
- 4. Education and Job Training:** Education and job training are emphasized as crucial for empowering youth to understand their potential and transition into stable living situations.
- 5. Housing Navigation and Transitional Housing:** Services such as housing navigation, temporary housing with case management, and transitional housing programs are suggested to provide support and pathways to stability for youth.
- 6. Prevention and Early Intervention:** Prevention efforts, including education in schools and early intervention for drug addiction, are recommended to address youth homelessness before it occurs or escalates.
- 7. Permanent Supportive Housing for Youth:** Calls are made for permanent supportive housing with good case management, specifically designed for youth and not housed with adults.
- 8. Community Integration and Support:** Suggestions include providing support for youth to find alternatives to street living, offering opportunities for education and job training, and fostering hope and empowerment through access to resources and safe spaces.
- 9. Intensive Case Management and Wraparound Services:** Emphasis is placed on the importance of intensive case management, counseling, and wraparound services to address mental health, trauma, and support youth transitioning from foster care.

Overall, the themes underscore the need for a holistic approach to homeless service delivery for youth, addressing their unique needs, vulnerabilities, and opportunities for empowerment and stability through education, support services, housing options, prevention efforts, and community integration.

Appendix E: Community Survey Findings

HHAP 5 Regional Funding Plan
Community Survey Findings



18. Please explain what you believe would improve homeless service delivery for people experiencing homelessness who are leaving jail:

The following themes emerged:

- 1.Accountability and Support Services:** Accountability is highlighted as essential for individuals leaving jail, along with the need for access to comprehensive support services to aid in their transition back into society.
- 2.Reintegration and Job Training:** Respondents emphasize the importance of job training and assistance in finding employment for individuals leaving jail to aid in their reintegration into the community.
- 3.Access to Services and Housing Assistance:** Recommendations include providing access to services such as housing assistance and educating individuals on available services under programs like Medi-Cal to support their transition.
- 4.Coordination of Services and Rehabilitation:** There's a call for better coordination of services, including drug treatment with detoxing, and rehabilitation programs with counseling to address mental health and substance abuse issues.
- 5.Legal Definitions and Institutional Support:** Suggestions include advocating for changes to federal and state definitions of homelessness to include individuals exiting institutions like jails and prisons, along with pre-release counseling to address criminal record stigma.
- 6.Transitional Housing and Supportive Services:** Transitional housing programs that offer counseling, job training, financial education, and support with basic life skills are recommended to assist individuals leaving jail.
- 7.Prevention and Rehabilitation Alternatives:** Some respondents advocate for pre-release counseling and the consideration of rehabilitation programs as alternatives to incarceration or conditions of release or probation.
- 8.Wraparound Services and Case Management:** The importance of wraparound services and continued case management, with a focus on addressing mental health and trauma, is emphasized to support individuals leaving jail.

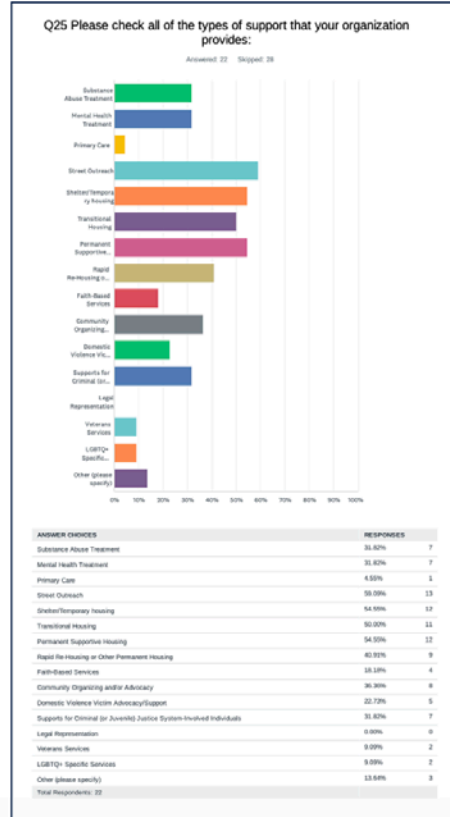
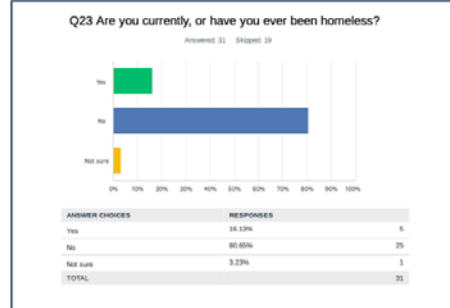
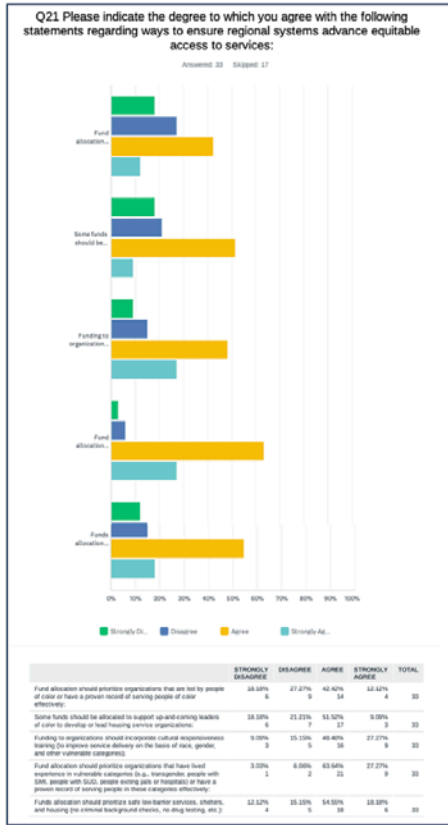
Overall, the themes underscore the need for a comprehensive approach to homeless service delivery for individuals leaving jail, including access to support services, job training, housing assistance, rehabilitation programs, legal reforms, and ongoing support with case management and wraparound services.

20. Please explain what you believe would improve homeless service delivery for people experiencing homelessness who are exiting the hospital:

- 1.Accountability:** Similar to other responses, accountability is emphasized as important for individuals exiting the hospital to homelessness.
- 2.Access to Healthcare and Mental Health Services:** Respondents highlight the need for continued access to healthcare, including physical therapy and mental health services, for individuals leaving the hospital and returning to homelessness.
- 3.Education on Housing Services:** Suggestions include educating individuals exiting the hospital on available housing-related services and providers to help them navigate and sustain housing.
- 4.Outreach and Follow-up Services:** There's a call for improved outreach and follow-up services to ensure that individuals exiting the hospital are connected with the necessary support services.
- 5.Shelter Opportunities and Temporary Housing:** Recommendations include stress on increasing shelter opportunities and providing temporary housing options for individuals recovering from injuries or illnesses after leaving the hospital.
- 6.Drug Treatment and Rehabilitation:** Suggestions for drug treatment with detoxing and access to residential treatment for substance abuse are made to support individuals leaving the hospital.
- 7.Referrals to Housing Services:** It's suggested that hospital personnel should make referrals to existing housing services rather than neglecting the issue, to prevent individuals from being discharged back onto the street.
- 8.Transitional Housing and Recuperative Care:** Transitional housing and recuperative care options that provide training in basic life skills, financial knowledge, and job training are recommended for individuals leaving the hospital to homelessness.
- 9.Resource Allocation and Infrastructure Building:** Some respondents mention the need for increased resource allocation and building service infrastructure to better support individuals experiencing homelessness exiting the hospital.
- 10.Wraparound Services and Case Management:** The importance of continued case management and wraparound services, with a focus on addressing mental health, substance abuse, and trauma, is highlighted to support individuals leaving the hospital. Additionally, there's a call for additional supports in recuperative care settings.

Appendix E: Community Survey Findings

HHAP 5 Regional Funding Plan
Community Survey Findings



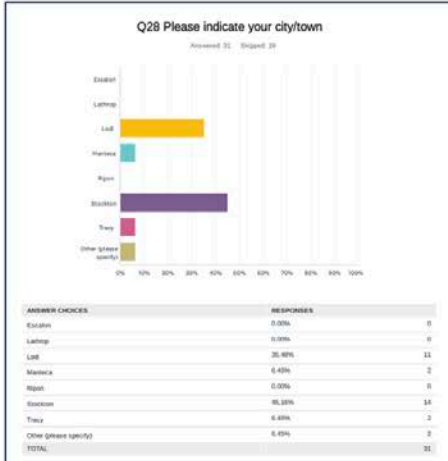
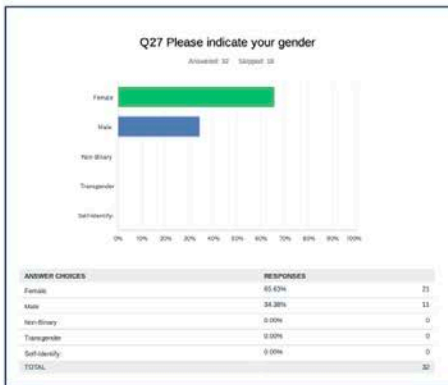
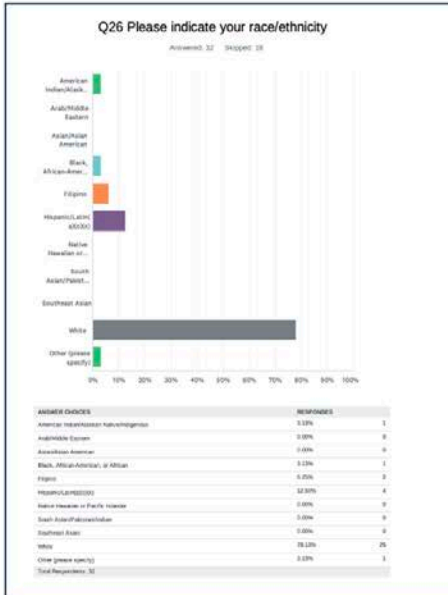
22. Please explain any ideas you have for improving systems so that they create more equitable services:

The following themes emerged:

- 1. Equality and Respect:** Many respondents emphasize the importance of treating all individuals equally and with respect, regardless of race, gender, or other characteristics.
- 2. Focus on Needs, Not Color:** Suggestions are made to prioritize addressing the needs of individuals rather than focusing on their race or color.
- 3. Addressing Disproportionate Burden:** Some responses acknowledge the disproportionate burden of homelessness and housing instability faced by people of color and Indigenous people, particularly women of color, and call for targeted efforts and funding to address this disparity.
- 4. Collaboration with Organizations:** Recommendations include working with organizations like the NAACP and other community-based groups with outreach and experience in serving diverse populations.
- 5. Improving Funding Allocation:** Concerns are raised about funding decisions and the allocation of resources, with suggestions to prioritize programs that have shown effectiveness and inclusivity.
- 6. Training and Education:** Suggestions include providing training and education for staff to ensure they are equipped to provide equitable services and address the diverse needs of clients.
- 7. Data Tracking and Outcome Measurement:** Calls are made for standardized data tracking and outcome measurement across homeless service providers to assess effectiveness and ensure accountability.
- 8. Transitional Housing and Outreach:** Recommendations include prioritizing transitional housing programs that provide education, job training, and support with basic life skills. Outreach efforts should also be empathetic and tailored to individual needs rather than focusing on demographic characteristics.
- 9. Intentionality and Contracting with Diverse Agencies:** Intentional efforts should be made to contract with agencies serving diverse populations to ensure equitable service delivery.
- 10. Awareness of Available Programs:** Suggestions include increasing awareness of available programs and services among individuals before they are discharged from jails, hospitals, or other institutions.
- 11. Case Management and Support:** Intensive case management and support services are highlighted as crucial for ensuring equitable outcomes and addressing the complex needs of homeless individuals.

Appendix E: Community Survey Findings

HHAP 5 Regional Funding Plan Community Survey Findings



Appendix F: Memorandum of Understanding

MEMORANDUM OF UNDERSTANDING BETWEEN THE CITY OF STOCKTON ECONOMIC DEVELOPMENT DEPARTMENT, SAN JOAQUIN COUNTY, AND THE STOCKTON/SAN JOAQUIN HOMELESS CONTINUUM OF CARE CA-511

This **MEMORANDUM OF UNDERSTANDING** (“MOU”), effective the date the last party to this MOU signs, is entered into by and among the City of Stockton, through its Economic Development Department (EDD), and the County of San Joaquin, through its Health Care Services Agency (HCSA), and the Stockton/San Joaquin Homeless Continuum of Care CA-511 (CoC), with reference to and consideration of the following:

WHEREAS, like many other regions in California, the County of San Joaquin has seen a rapid and troubling growth in the homeless population over the past several years, a condition that has been difficult to address given the increased rates of persons with untreated addictive disorders involving substance abuse and mental health conditions, the high cost of housing and property in the area, and the shortage of emergency, transitional, and affordable housing available in the County to serve this population;

WHEREAS, consistent with the CoC Program Interim Rule, the CoC was formed in 1996 as the group organized to carry out the Continuum of Care program authorized by regulation [under subtitle C of title IV of the McKinney-Vento Homeless Assistance Act (42 U.S.C. 11381–11389)] and, as required, the CoC includes representative groups from within the geographic borders of San Joaquin County;

WHEREAS, San Joaquin County serves as the Collaborative Applicant for the CoC pursuant to a Collaborative Applicant Memorandum of Understanding to apply for and administer state and federal grants allocated directly to the CoC, including CoC Program grants, and support the year-round CoC planning of homeless housing, services, and prevention;

WHEREAS, the City of Stockton is a municipality with a population of over 750,000 people and receives annual and periodic entitlement funding from the state and federal government for addressing homelessness, with these funds received, administered, and monitored by the City of Stockton Economic Development Department;

WHEREAS, On September 29, 2023, the State of California invited counties, Continuums of Care, and certain cities to apply for funds pursuant to HHAP Round 5, a program authorized by Assembly Bill 140, to provide local jurisdictions with flexible funding to continue efforts to improve regional and systems coordination to prevent and end homelessness in their communities, with a focus on moving homeless individuals and families into permanent housing and adopted into regulations: Health and Safety Code, Division 31, Chapter 6.5, Sections 50230-50238.

WHEREAS, to apply for HHAP Round 5 funding, applicants must jointly create and submit a Regionally Coordinated Homeless Action Plan that fully complies with California Health and Safety Code §50233 (c) [See also, Section 17 of AB 129, as signed into law on July 10, 2023] that is approved by the California Interagency Council on Homelessness (Cal-ICH), and a Memorandum of Understanding (MOU) signed by each participating applicant committing to participate in and comply with the Regionally Coordinated Homelessness Action Plan. ;

WHEREAS, the County, CoC, and the City of Stockton jointly engaged in a regional strategic planning process to create a Regionally Coordinated Homeless Action Plan;

The Parties agree as follows:

1. PURPOSE OF THE MEMORANDUM OF UNDERSTANDING

- 1.1 Statutory Requirement:** The Regionally Coordinated Homelessness Action Plan shall be reflected in a Memorandum of Understanding (MOU) committing each signatory to participation in, and to comply with, the Regionally Coordinated Homelessness Action Plan.

2. COMMITMENTS

Each Party to this MOU hereby commits to uphold, participate in, and comply with the actions, roles, and responsibilities assigned to it as described in the HHAP-5 Regionally Coordinated Homelessness Action Plan and summarized below.

- 1.1. Each Party commits to the roles and responsibilities as they pertain to outreach and site coordination, siting and use of available public land, the development of interim and permanent housing options, and coordinating, connecting, and delivering services to individuals experiencing homelessness or at risk of experiencing homelessness, within the region. *See Section 2.1 in the HHAP-5 Regionally Coordinated Homelessness Action Plan.*
- 1.2. Each Party commits to Key Actions to improve the system performance measures. *See Section 2.2 in the HHAP-5 Regionally Coordinated Homelessness Action Plan.*
- 1.3. Each Party commits to Key Actions to ensure racial and gender equity in service delivery, housing placements, housing retention, and any other means to affirm equitable access to housing and services for racial and ethnic groups overrepresented among residents experiencing homelessness. *See Section 2.3 in the HHAP-5 Regionally Coordinated Homelessness Action Plan.*
- 1.4. Each Party commits to actions to reduce homelessness among individuals exiting institutional settings, including but not limited to jails, prisons, hospitals, and any other institutions such as foster care, behavioral health facilities, etc., as applicable in the region. *See Section 2.4 in the HHAP-5 Regionally Coordinated Homelessness Action Plan.*
- 1.5. Each Party commits to roles in utilizing local, state, and federal funding programs to end homelessness. *See Section 2.5 in the HHAP-5 Regionally Coordinated Homelessness Action Plan.*
- 1.6. Each Party commits to the roles and responsibilities to connect individuals to wrap-around services from all eligible federal, state, and local benefit programs. *See Section 2.6 in the HHAP-5 Regionally Coordinated Homelessness Action Plan.*

3. MISCELLANEOUS

- 2.1. **Notice.** Any notices provided to any Party in connection with this MOU shall be directed as follows:

City of Stockton, Economic Development Director	Attn: Carrie Wright carrie.wright@stocktonca.gov
County of San Joaquin Health Care Services Agency Director	Attn: Greg Diederich gdiederich@sjchcs.org
San Joaquin County Continuum of Care Program Administrator for Homeless Initiatives and the current Chair of the SJCoC Board of Directors	Attn: Natascha Garcia ngarcia@sjcphs.org

- 2.2. **Parties as Independent Contractors.** Each Party is, and at all times shall be deemed to be, independent of the other Parties. Nothing herein is intended or shall be construed as creating the relationship of employer and employee, or principal and agent, between any Party, or any Party's agents or employees. Each Party shall retain all authority for rendition of services, standards of performance, control of personnel, and other matters incident to the performance of the Program pursuant to this MOU. Each Party, and its agents and employees, shall not be considered to be employees of any other Party.

IN WITNESS WHEREOF, the Parties to this MOU have caused the same to be executed by each of their duly authorized officers as follows:

City of Stockton	San Joaquin County
Harry Black, City Manager	Greg Diederich, Director, Health Care Services Agency
Date:	Date:

Stockton/San Joaquin Continuum of Care	Stockton/San Joaquin Continuum of Care
Krista Fiser, Chair, San Joaquin CoC	Natascha Garcia, Interim Program Administrator for Homeless Initiatives

Date:	Date:
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This report was created by a collaboration between:

Rane Community Development

and

Moira deNike Consulting

Nikki Lowery Consulting & Facilitation

Praxis Associates