County of Santa Clara

Office of Supportive Housing

150 West Tasman Drive
San Jose, CA 95134
(408) 278-6400 Main
(669) 220-1444 Fax

June 20, 2023

TO: Board of Supervisors
Housing, Land Use, Environment and Transportation Committee (HLUET) Committee

FROM: Consuelo Hernandez, Office of Supportive Housing (OSH)

SUBJECT: Supportive Housing System in Santa Clara County

The attached report highlights trends, successes, and challenges of the supportive housing system in Santa Clara County between May 2022 and April 2023. The primary function of this report is to communicate how different programs are contributing to an overall reduction in homelessness. The supportive housing system includes housing programs that fall into five main categories: Emergency Shelter (ES), Transitional Housing (TH), Rapid Rehousing (RRH), Permanent Supportive Housing (PSH), and Homelessness Prevention (HP). Additionally, this report provides supplementary data focusing on the County's Temporary Housing and Permanent Supportive Housing programs.

Supportive Housing System Trends and Highlights

Appendix A highlights data on two of the five overarching targets detailed in the County's 2020-2025 Community Plan to End Homelessness (Community Plan). As shown in Chart 1, the County has housed 11,070 individuals since January 2020, 55% toward the goal of housing 20,000 people by 2025. Chart 2 depicts progress toward the County's goal of reducing the number of newly homeless individuals and families each year by 30%. Inflow for calendar year 2019 (4,757 people) is used as a baseline. Inflow for the May 2022 to April 2023 reporting period is 3,774 households, nearly meeting the five-year goal to reduce the number of households completing their first assessment (since becoming unhoused) to 3,330 households.

Appendix B provides program capacity and utilization for the five program categories outlined above plus the Safe Parking (SP) initiative. As depicted in the Program Utilization chart in Appendix B, HP (109%) and Permanent Supportive Housing programs (93%) have

Board of Supervisors: Sylvia Arenas, Cindy Chavez, Otto Lee, Susan Ellenberg, S. Joseph Simitian
County Executive: Jeffrey V. Smith

the highest utilization for the reporting period. Utilization of HP programs over 100% means that the prevention system has served more households over the past year than the annual goal and households are staying enrolled in the program for a longer period.

While capacity across programs has remained relatively stable over the past year, there are 1,228 housing units in construction or approved by the Board of Supervisors and are in the pipeline. As these units are completed and approved for occupancy, PSH and RRH capacity will increase significantly.

Appendix C illustrates key system performance measures, benchmarks for which are determined in coordination with community partners on an annual basis. A few highlights for the reporting period are provided below.

- Chart 2 provides data on exits to permanent housing destinations by housing type and period. Seventy-two percent (72%) of households exiting RRH programs exited to permanent housing for the current reporting period, nearly meeting the 75% benchmark. Thirty-eight percent (38%) of households exiting ES programs moved on to permanent housing, exceeding the County's 30% performance goal. The system-wide exits to permanent housing destinations was 31% for the May 2022 through April 2023 study period. An analysis of total exits to permanent housing destinations shows the continued challenges low-income households face in maintaining permanent housing without a subsidy. The percent of RRH clients who exited to rental housing without an ongoing subsidy decreased from 46% in the previous annual period to 26% in the current period. Due to the lack of affordable housing in the community, many unhoused individuals and families require rental assistance to obtain and maintain stable housing.

- Chart 3 provides data on the percentage of people in Permanent Housing Programs retaining their housing in the reporting year. This primarily represents PSH programs. Across the county, this number has remained near or above the benchmark of 95% for several years. The housing retention rate was 95.7% for the current reporting period.

- Chart 4 provides data on returns to homelessness after exiting a program to a permanent housing destination two years prior. Data for the May 2022 to April 2023 period shows decreases in returns at the six-month and one-year and two-year time frames compared to the 2020 period. Returns to homelessness is mostly stable when compared to the 2021 period.

Appendix D presents data on housing placements and inflow by project type and month. The upper chart indicates the number of households that moved to permanent housing (housing placements), compared to the number of households completing their first housing

assessment (inflow). Over the past one year, approximately 2,195 households have been permanently housed and 3,760 households have taken the Vulnerability Index – Service Prioritization Decision Assistance Tool (VI-SPDAT) assessment for the first time (inflow). This means for every one household getting permanently housed, 1.7 households are getting assessed for their first time since becoming homeless. The inflow is classified by level of housing intervention – minimal intervention, RRH, or PSH.

The lower chart breaks down the housing placements by the type of project from which the household was receiving assistance. Permanent housing placements have increased by 9% over the past year with a greater proportion being families with children compared to one year prior. The need remains high with 348 households becoming homeless for the first time in April 2023 as shown in the upper chart, and annual inflow increasing by 21% compared to the previous 12 months. The increase in first time assessments can be attributed to economic factors including an ever-present shortage of affordable housing and ending eviction protections as well as an increase in capacity to complete assessments. Data shows that households who completed the VI-SPDAT for the first time have been struggling to maintain housing with 45% reporting 2 years or more since stable housing.
The OSH will continue to monitor trends over the next several months as it relates to the number of households becoming homeless for the first time. As more housing developments are completed and additional emergency housing vouchers are utilized, the OSH expects placements into permanent housing to increase in the coming months.

Temporary Housing Programs

Appendices E through G contain data related to the County's temporary housing programs, which consist of emergency shelter, transitional housing, and safe parking projects. These programs have the capacity to serve a total of 2,467 households. The graphs in Appendix E through G provide temporary housing capacity and utilization data as well as demographic comparisons for the temporary housing programs.

Year-round emergency shelters represent the largest share of capacity at 1,816 units (see Appendix E, Chart 1) including 1,158 units of emergency shelter units and 658 units of emergency shelter - interim housing, designated for clients enrolled in housing programs and in housing search. Between January 2015 and December 2019, through the collective efforts of the County and its community partners, temporary housing and emergency shelter capacity doubled. The County's 2020-2025 Community Plan to End Homelessness contains a goal to again double the number of year-round temporary housing beds and offer a variety of temporary housing options for unhoused residents.

In September 2021, the County officially launched the "Here4You" hotline which serves to centralize referrals to emergency shelter programs. The hotline matches households to the

appropriate emergency shelter based on need and availability thus increasing the efficiency at which homeless clients can be linked to shelter beds in the County. Over 2,100 clients were placed in Emergency Shelters through the Here4You hotline. In March 2022, Housing Problem Solving was added as part of services provided by the hotline to quickly resolve a client's housing crisis through mediation techniques and financial assistance. Housing Problem Solving is currently being offered by five agencies within the county. As tracked in HMIS, over 500 clients have received Housing Problem Solving with 13% or 65 clients avoiding or exiting homelessness because of this service.

Permanent Supportive Housing

Appendices H through M provide data and outcomes related to the County's PSH programs. PSH provides longer-term rental assistance, case management and supportive services to the most vulnerable chronically homeless individuals and families in the community. It is guided by the principles of Housing First and harm reduction. Housing First focuses on providing housing to homeless people as quickly as possible, and then providing supportive services tailored to the needs of each client. The harm reduction model is used in the context of homeless people who engage in substance abuse. It focuses on serving the client while also reducing the negative consequences of the client's substance use.

Appendices H and I provide capacity, enrollment, and demographic data for all PSH programs. Highlights include the following:

- Chart 2 in Appendix H shows that of the 3,533 enrollments in PSH programs that are tracked in HMIS, 94% of the people enrolled are currently housed. The remaining clients are in the housing search process or waiting for their unit to be ready. Note that participation data from the [HUD-VASH] program was recently integrated in our Homeless Management Information System (HMIS). This represents an addition of over 1000 veterans.

- Most PSH program participants (77%) report a mental health disorder (Appendix H, Chart 3), and approximately half (52%) indicate substance abuse. Most participants (73%) report two or more (co-occurring) disabilities. These data reflect the population for whom PSH services are intended – individuals who will require long-term assistance due to a chronic disabling condition.

Over half of the County's PSH program capacity consists of Care Coordination Project (CCP) programs (see Appendix H, Chart 1). The CCP is a multi-agency initiative developed to ensure the effectiveness of case management for the most vulnerable members of the County's homeless population. It is designed to coordinate, prioritize, and deliver permanent supportive housing to these highly vulnerable chronically homeless individuals and families.

Appendix J provides data and outcomes for participants in CCP-specific programs, which include both Scattered-Site and Project-Based Voucher (PBV) programs[1]. Highlights from the charts in Appendix J, which focus on CCP enrollments and retention, are as follows:

- Chart 1 shows from July 1, 2011, through April 30, 2023, the CCP enrolled 3,177 chronically homeless households (a total of 3,904 individuals) into intensive case management services and housed 2,853 households.

- Chart 2 shows the length of time from program enrollment to move-in date for housed CCP households. 41% of households were housed within 60 days of enrollment and another 19% were housed between 60 and 120 days of enrollment.

- Chart 3 shows the annual CCP housing retention rate for the period May 2022 to April 2023. The housing retention rate (defined for CCP as 12 consecutive months of housing) for the period is 95%.

Clients' utilization of County health, social service, and criminal justice services are key outcome metrics as it relates to both costs and client health. Service utilization data was obtained for CCP participants through records at the Santa Clara Valley Medical Center (SCVMC), Behavioral Health Services Department (BHS), Social Services Administration (SSA), and Criminal Justice Information Control (CJIC). Data in Appendices K through M reflect utilization data for 1,725 individuals who were housed in the CCP between July 2011 and February 2023, and who remained housed for a period of one year or more.

Changes in these clients' utilization of County services over a six-year period pre- and post-housing are shown. The pre-housed data show the utilization of services for a period of three years prior to the date they were housed. The post-housed data show the utilization of services for the same individuals for a period of three years after the date they were housed.

Trends and highlights from the charts in Appendices K, L, and M are as follows:

- Charts 1 and 2 in Appendix K provide data on outpatient services encounters in four health service areas: Outpatient Mental Health, Outpatient Drug and Alcohol Services (DADS), Santa Clara Valley Medical Center (SCVMC) Emergency Room, and Emergency Psychiatric Services (EPS). As seen in Chart 1, the highest utilization of mental health outpatient services occurred in the 12 months prior to being housed and after being housed. This is a positive indication, as clients are encouraged to seek

[1] Scattered-Site PSH provides housing to participants via private market housing units dispersed throughout the community, with mobile or off-site support services. Project-Based PSH provides housing at a central multi-unit development, with support services provided on-site.

mental health services and get stabilized once they are housed. As expected, mental health services utilization decreased significantly over time post-housing. DADS service encounters were highest in the 12 months prior to being housed, with a steady decline in these encounters at each post-housing time interval. A similar trend is seen for SCVMC Emergency Room and EPS admissions. Housing, coupled with supportive services, provides significant stability to clients who have been homeless for many years. The data show that the longer clients are stably housed, the less they utilize these services.

- Chart 3 in Appendix K shows counts of clients served in each of the four health service areas described above. The largest number of clients are served in Mental Health in the first 12 months after being housed, while DADS, SCVMC Emergency Room, and EPS data show a substantial reduction in the number of clients served in the post-housed period. These reductions continue the longer clients are stably housed. Clients are connected to primary care providers and receive care through regular office appointments, reducing the burden on emergency services.

- Appendix L illustrates a similar trend with respect to facility stays, general assistance services, arrests, and days incarcerated. Chart 1 illustrates that the number of days clients spend as an inpatient in the Hospital, Psychiatric Inpatient Unit, and Mental Health-Residential Care Facility (RCF) all decrease post-housing. The frequency of arrests as well as the number of days spent incarcerated (Charts 3 and 4, respectively) show substantial decreases in the post-housed period, with continued reductions the longer the client is stably housed.

The chart in Appendix M provides pre- and post-housing healthcare costs for 1,025 clients who were housed through the CCP prior to February 28, 2021. County staff linked these individuals' information with service utilization and cost data from the County Emergency Department (ED), VMC Inpatient, EPS (Emergency Psychiatric Services, Barbara Aarons Pavilion (BAP), contracted psychiatric hospitals, and County Mental Health Outpatient (MH-OP) and Residential Programs.

In total, the healthcare costs for these clients were about $30.2 million for the three-year period pre-housing, and $35.6 million for the three-year period post-housing. This increase appears to be related to VMC inpatient costs over the last two years for patients with COVID-19 as the primary diagnosis. Inpatient care for clients with COVID-19 diagnoses will likely continue to have an impact on the costs and the OSH will coordinate with our partners at Santa Clara Valley Healthcare to continue to monitor these trends.

The 2020-2025 Community Plan to End Homelessness

The county-wide plan is our roadmap for ending homelessness in Santa Clara County. The 2020-2025 plan set aggressive targets designed to reverse the current growth in homelessness and bring us one step closer to our collective goal of eliminating homelessness in our community. Appendix A highlights specific goals related to this plan.

Santa Clara County Continuum of Care

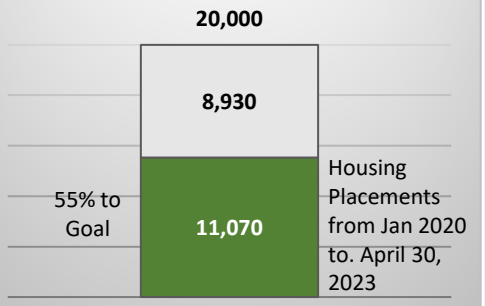
Office of Supportive Housing

Supportive Housing System Dashboard

May 1, 2022 – April 30, 2023

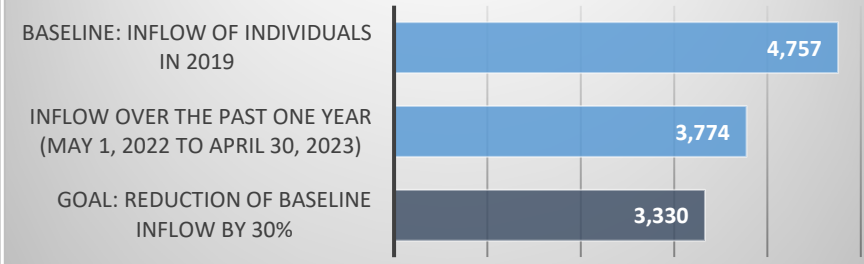
Appendix A: Community Plan Goals

1 Goal: Housing 20,000 People by 2025



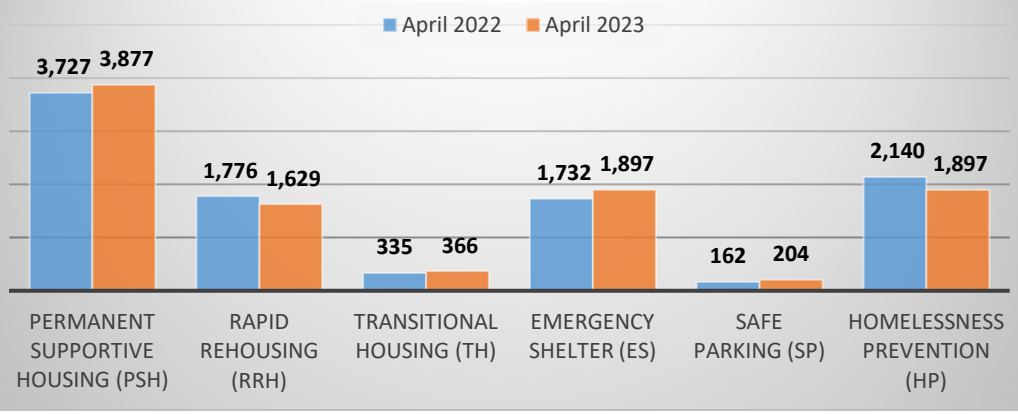
Goal: Achieve a 30% Reduction in Annual Inflow of People Becoming Homeless

(Inflow = Number of Households Completing Their First Assessment)



Appendix B: Capacity and Utilization as of 4/30/2023

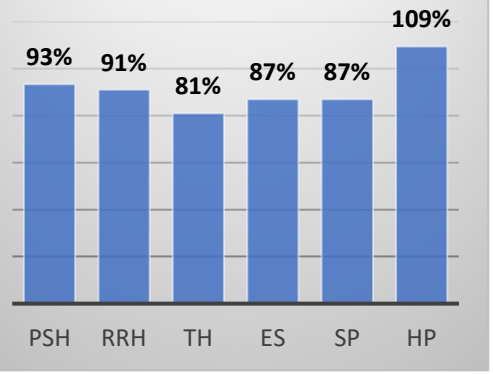
Program Capacity (Units or Households)



Under Construction or in the Pipeline Approved by the Board

1,228 Total Housing Units (546 PSH, 496 RRH, 82 VASH, and 104 I/DD)

Program Utilization, April 2023



- Utilization: PSH, RRH are point-in-time utilization on April 30, 2023. TH and ES data reflects utilization for the month of April 2023, and SP and HP utilization are based on the last 12 months
- Program utilization is based on households enrolled in programs that are tracked in HMIS.
- PSH capacity includes 40 units which are Permanent Housing with services (no disability required).
- For Safe Parking programs, one parking space is the equivalent of one unit of capacity with an estimated 2.5 individuals per vehicle.

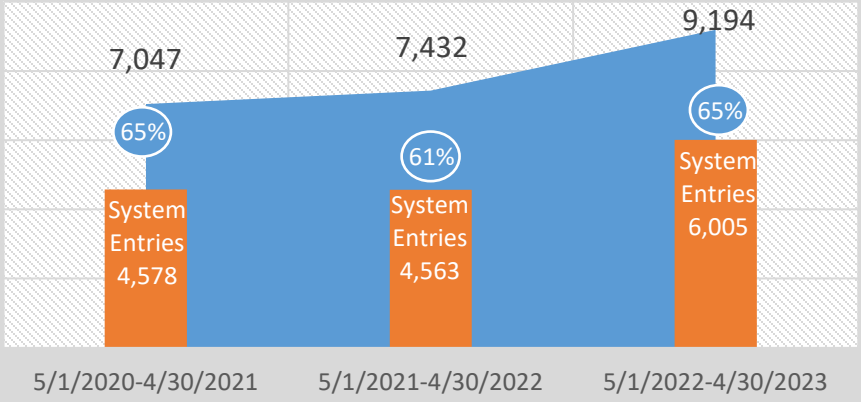
Appendix C: System Performance Measures

1 Total Enrollments and First Time Homelessness

Enrollments into ES, SH, TH, or PH Programs

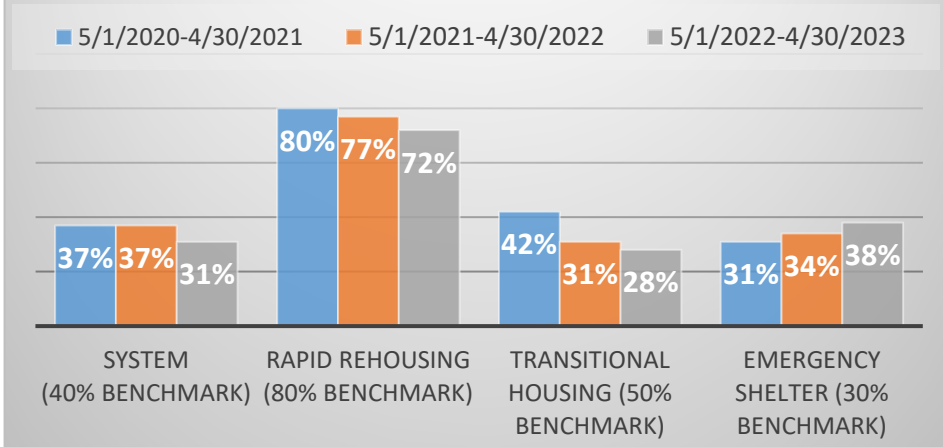
*System Entries: People Experiencing Homelessness for the First Time**

* "First Time" per HUD = no enrollments in ES, SH, TH or PH in the previous 24 months



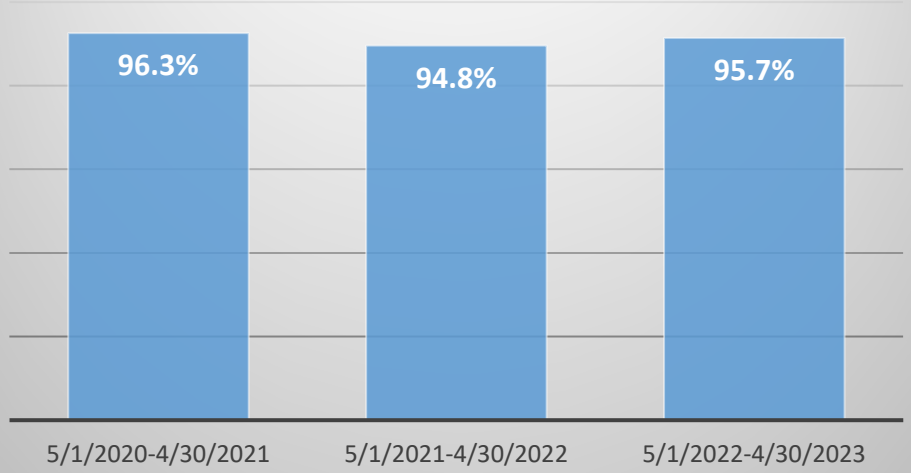
2 Exits to Permanent Housing Destinations

Of Persons in ES, TH, and RRH who Exited a program, the Percentage of Successful Exits to Permanent Housing



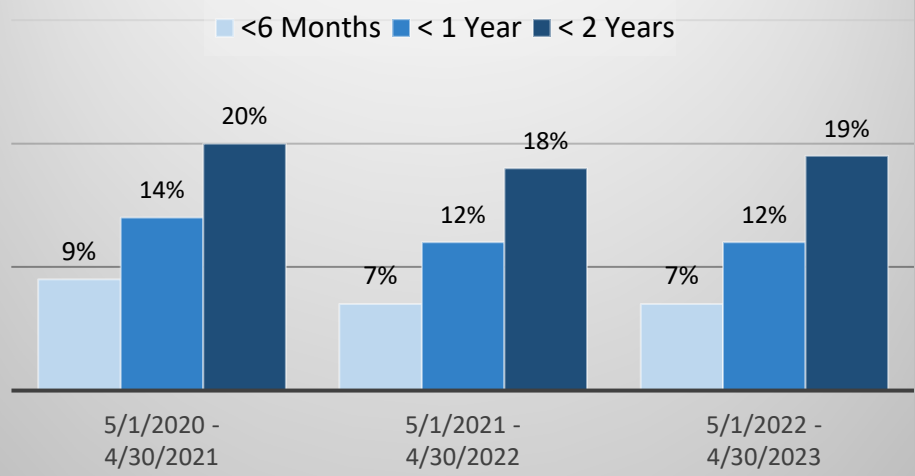
3 Permanent Housing Retention

Percentage of People in Permanent Housing Programs (excluding Rapid Rehousing) Retaining Housing during the Reporting Year ***(Benchmark = 98%)***

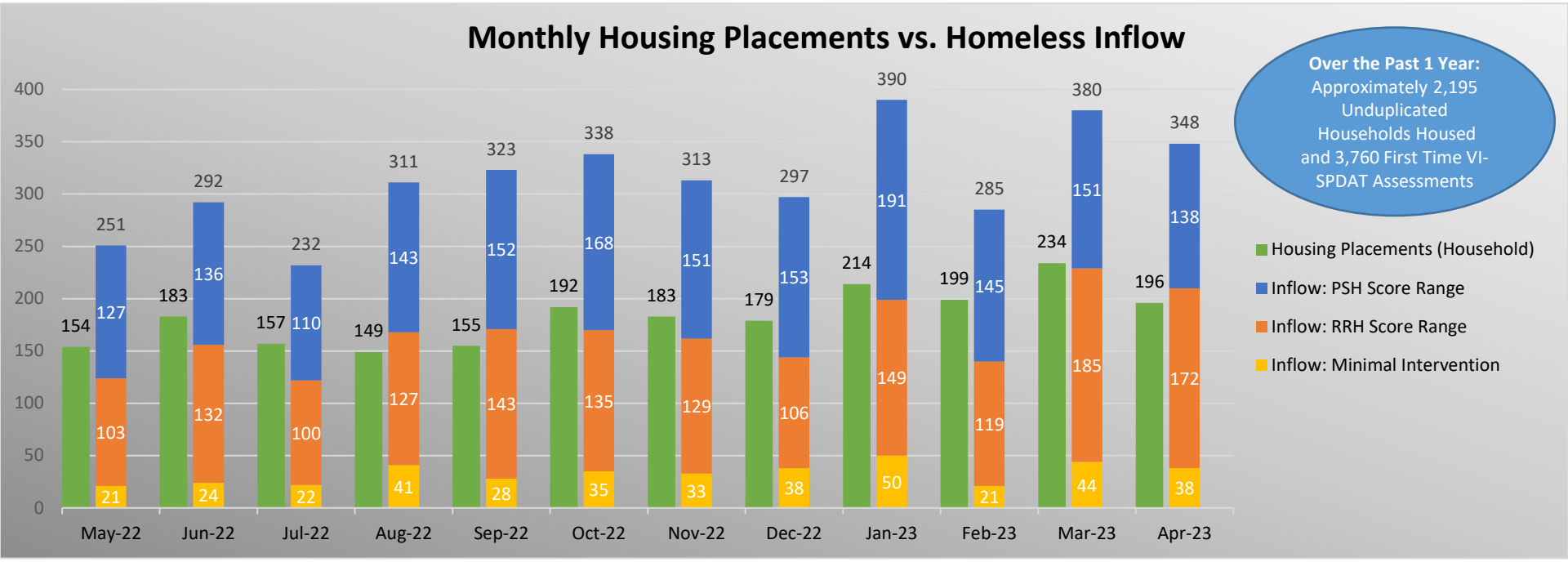


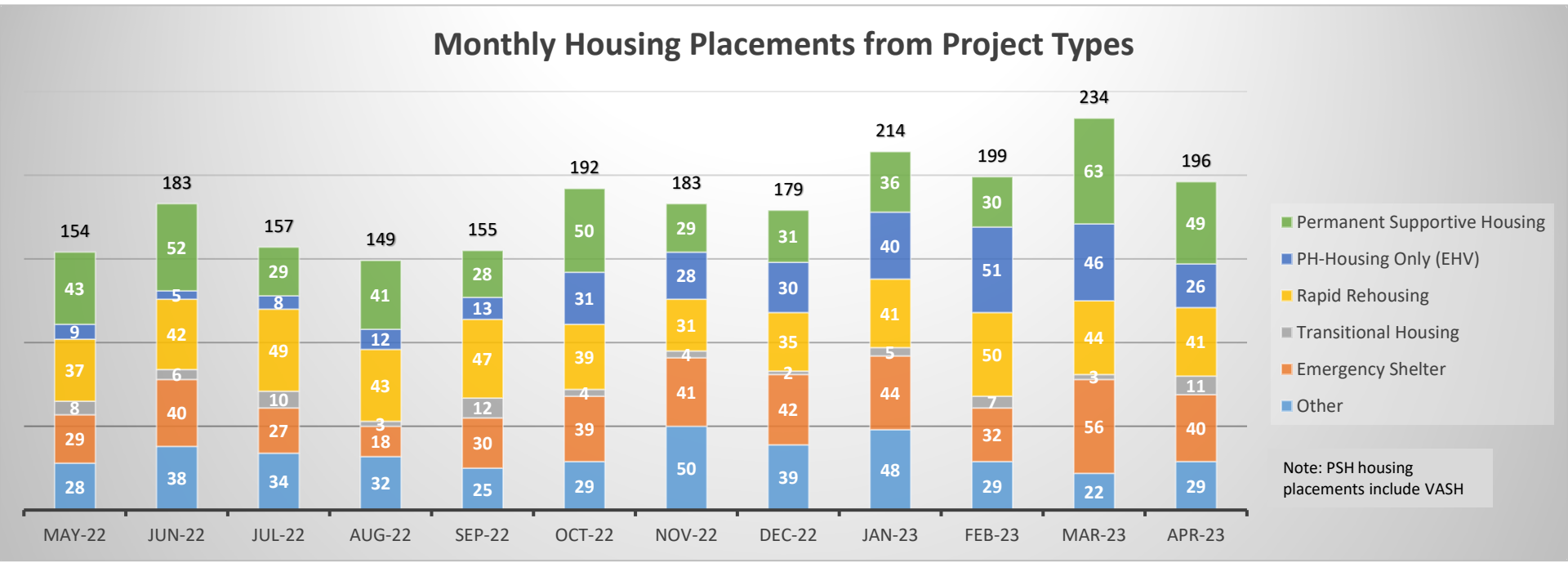
4 Returns to Homelessness

After Exiting to Permanent Housing Destinations, the Percentage of People who Return to Homelessness within 6 Months, 1 Year, and 2 Years



Appendix D: Housing Placements and Inflow by Month

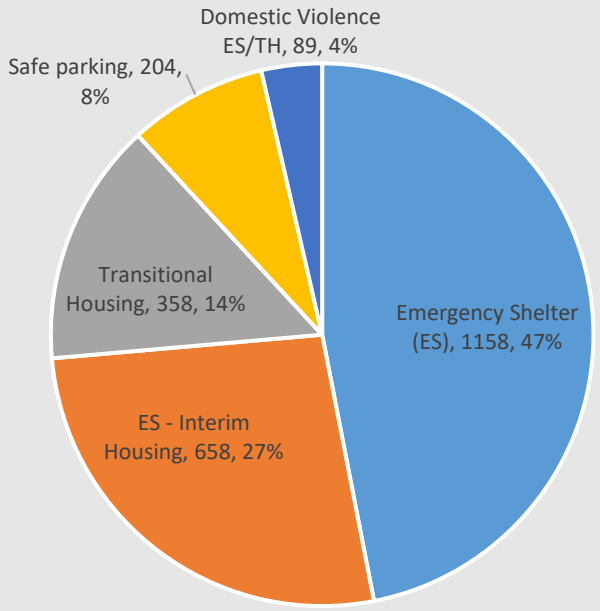




Appendix E: Temporary Housing Capacity and Utilization as of April 2023

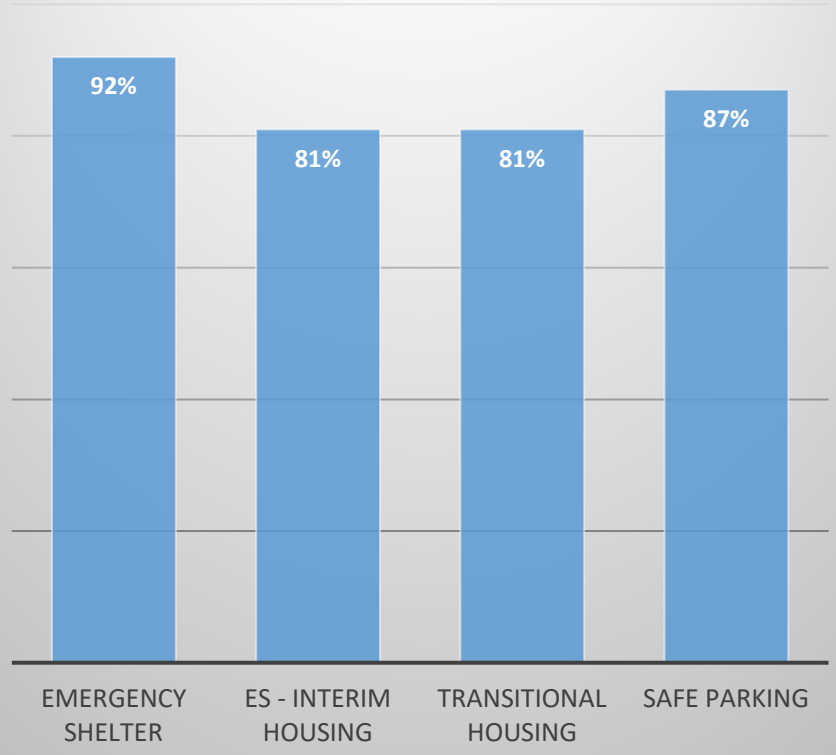
1

Temporary Housing Program Capacity (Units or Households) Total = 2,467



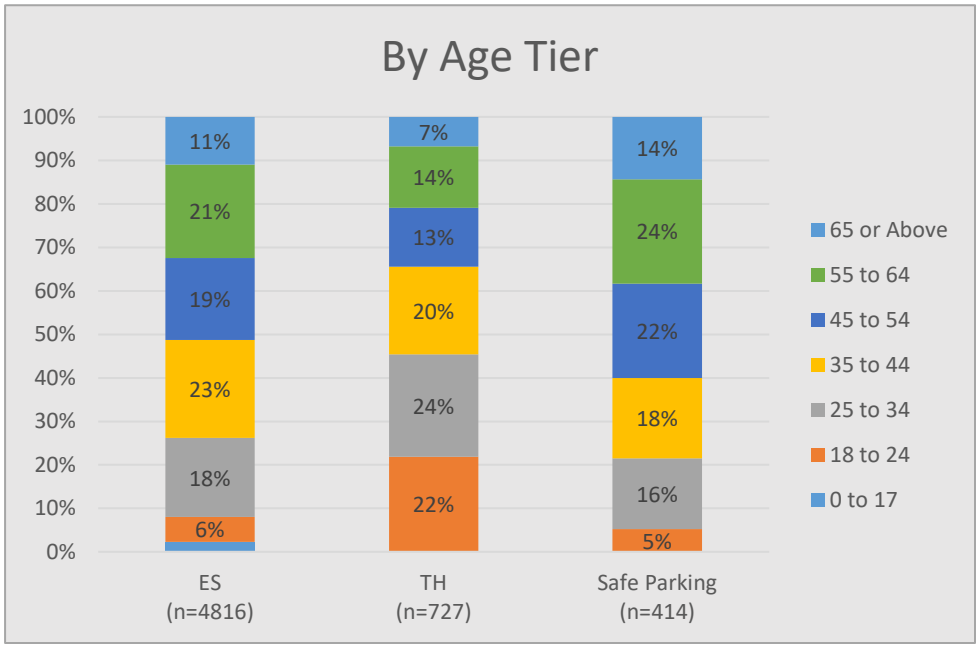
2

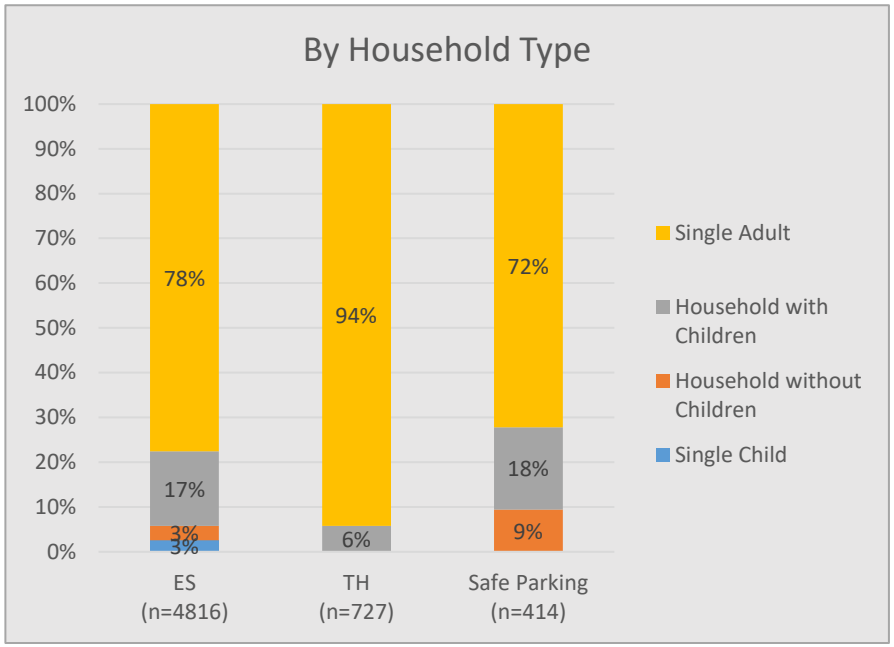
Temporary Housing Utilization

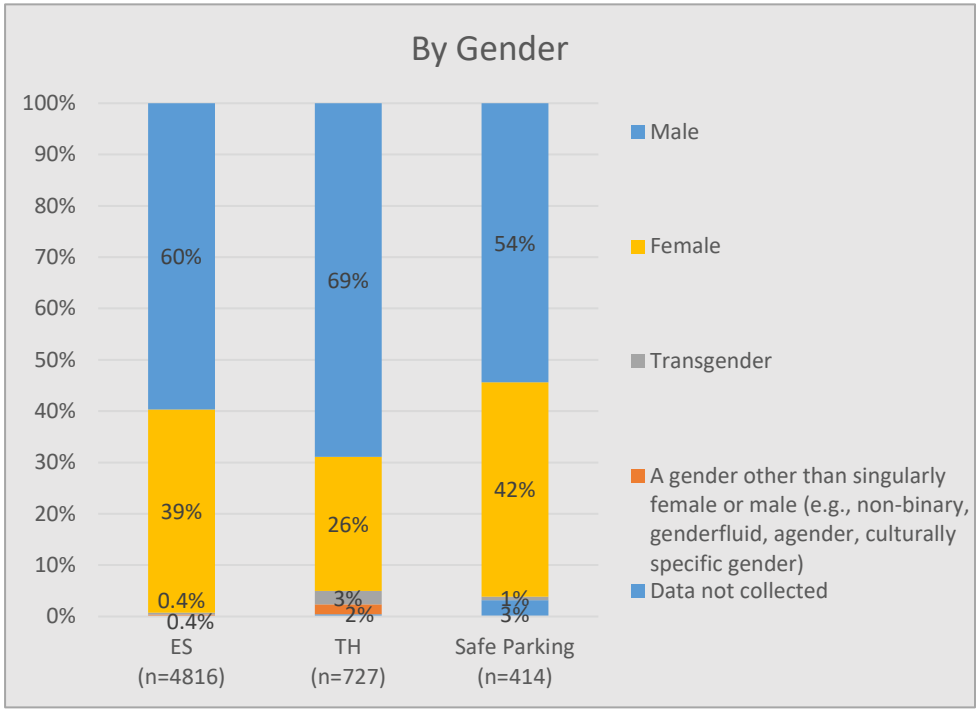


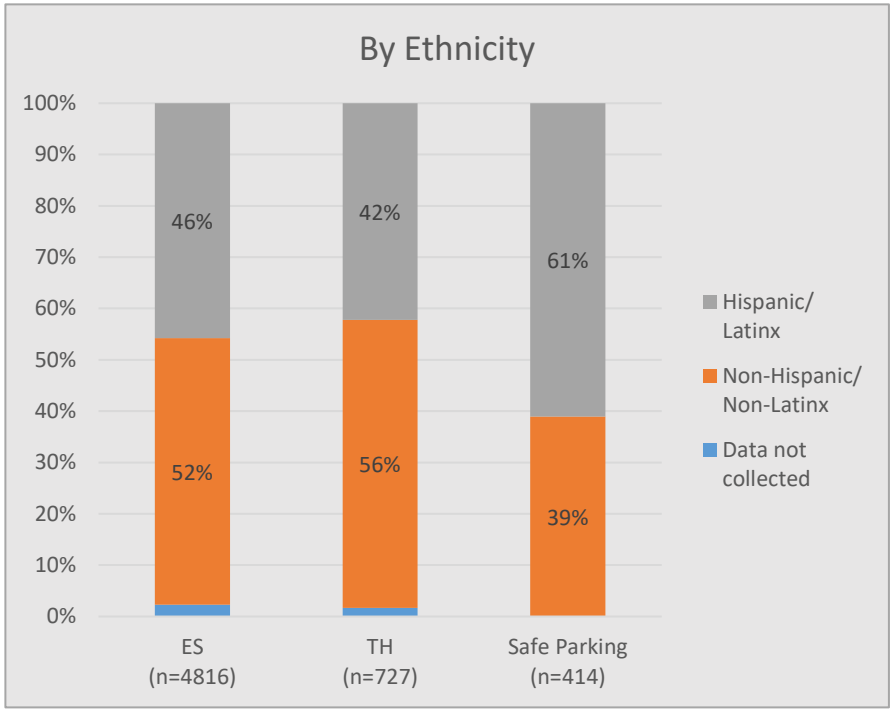
Note: Domestic Violence ES/TH housing utilization is excluded. Data is not recorded in HMIS in compliance with HUD safety and confidentiality provisions.

Appendix F: Temporary Housing Household Demographics (Enrolled between 5/1/2022 to 4/30/2023)

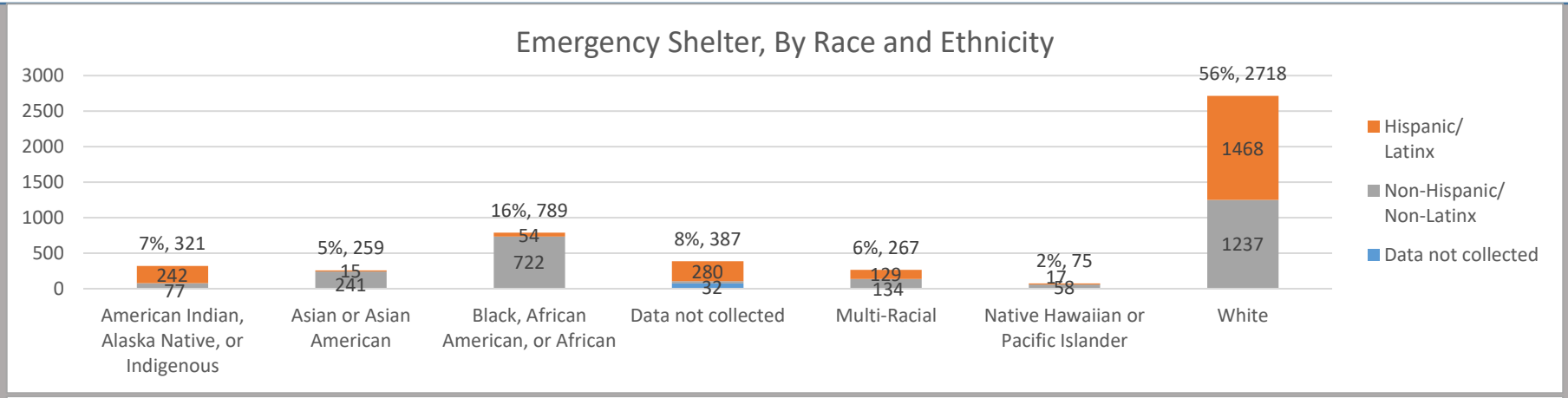


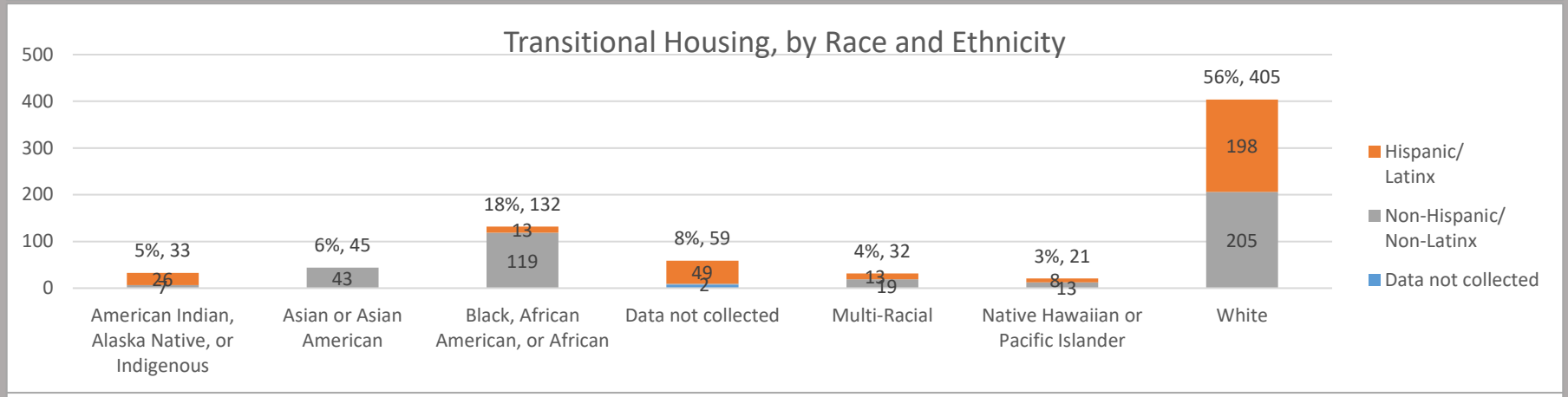


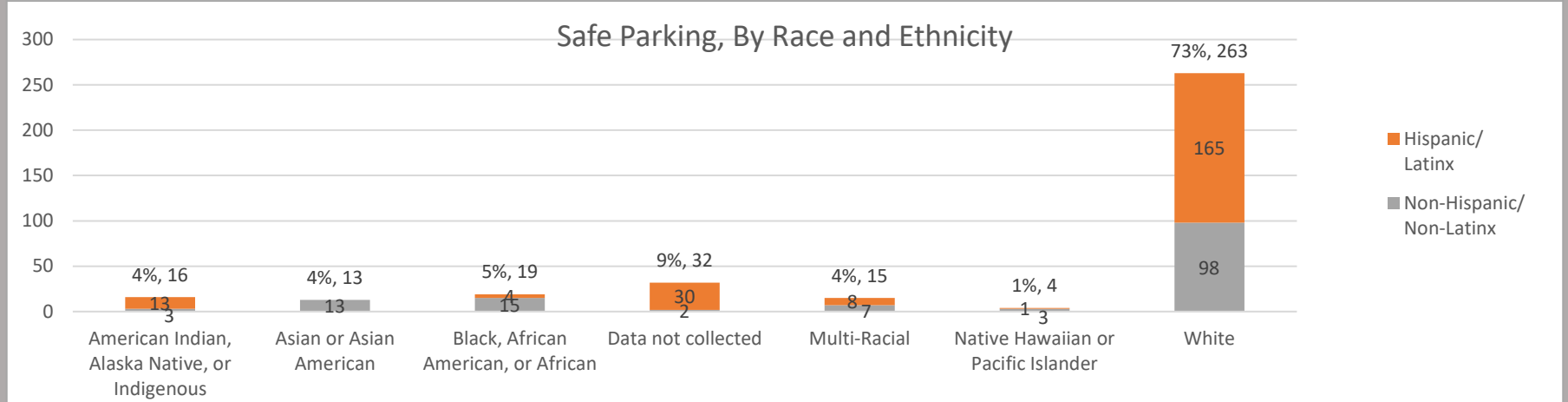




Appendix G: Temporary Housing Household Demographics (Enrolled between 5/1/2022 to 4/30/2023), Cont'd

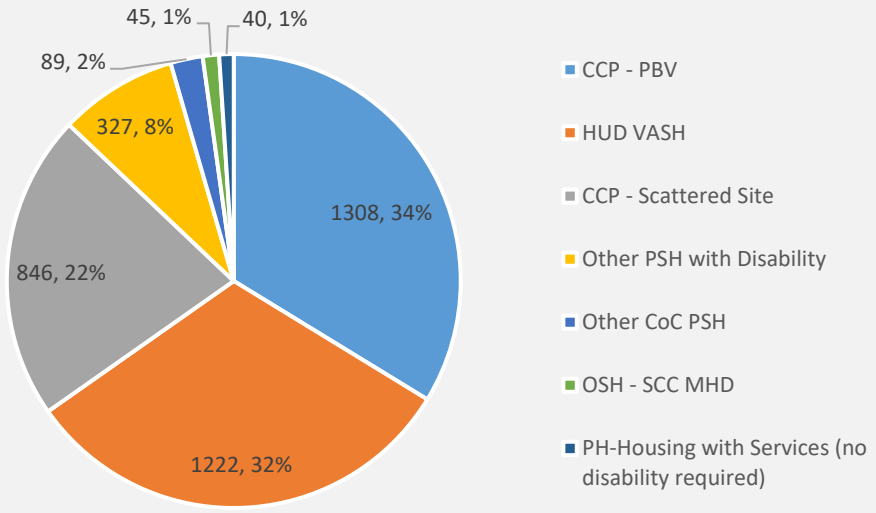




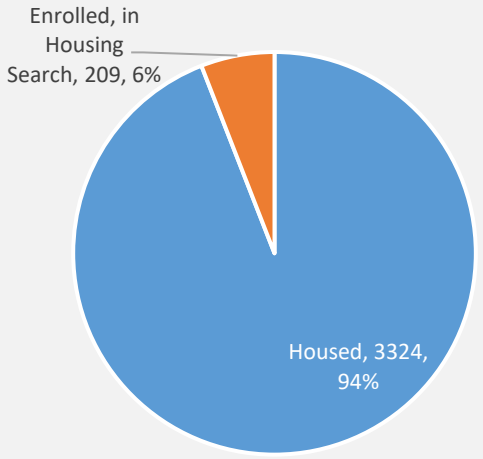


Appendix H: Permanent Supportive Housing (PSH) Capacity and Enrollment Data – April 30, 2023

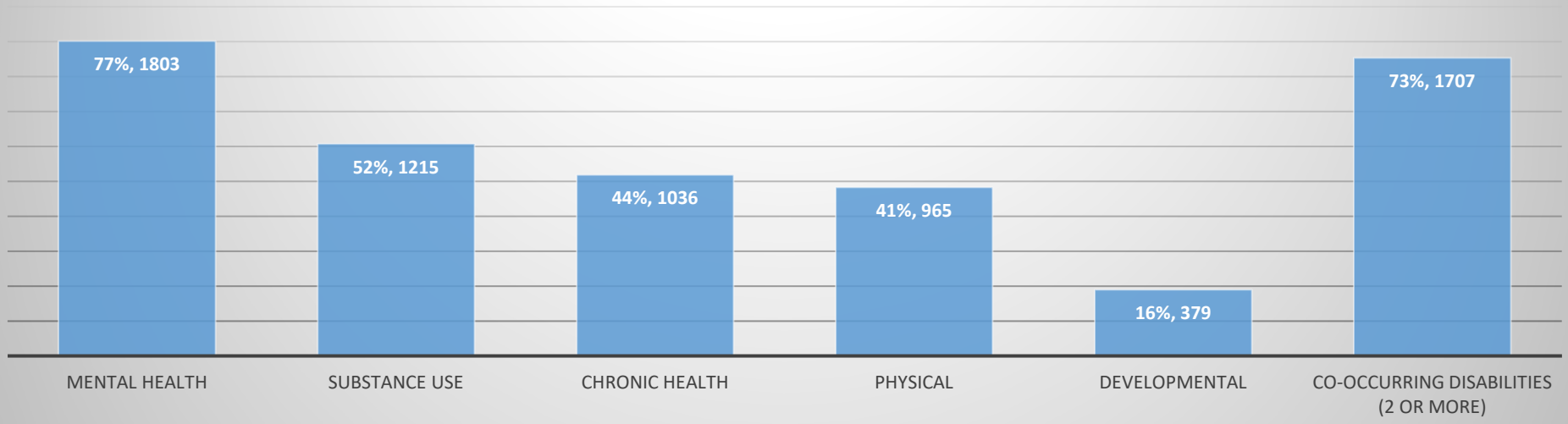
1 Total PSH Capacity = 3,877



2 Housing Status (For 3,533 PSH Households)



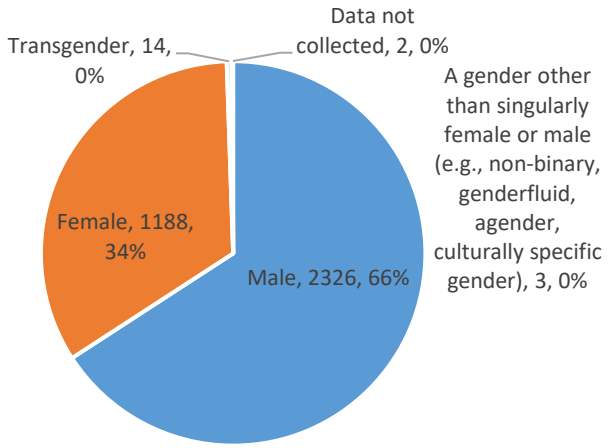
3 Self-Reported Disability Status for 2,350 Households Currently Enrolled in PSH (VASH Data not Included)



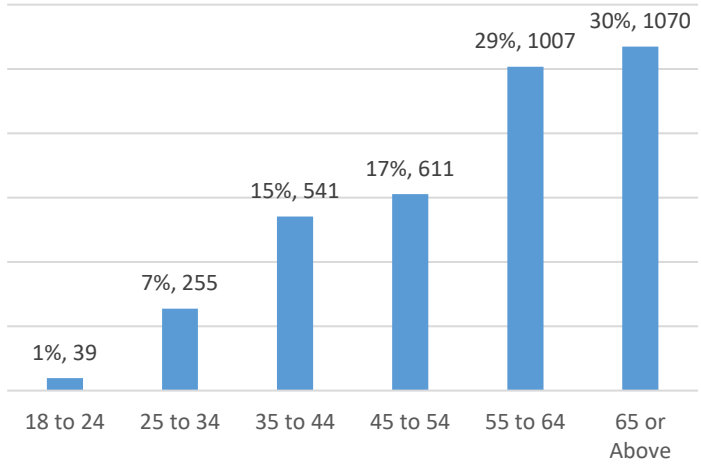
Appendix I: PSH Demographic Information – April 30, 2023

Demographics for 3,533 Households Currently Enrolled in PSH Programs

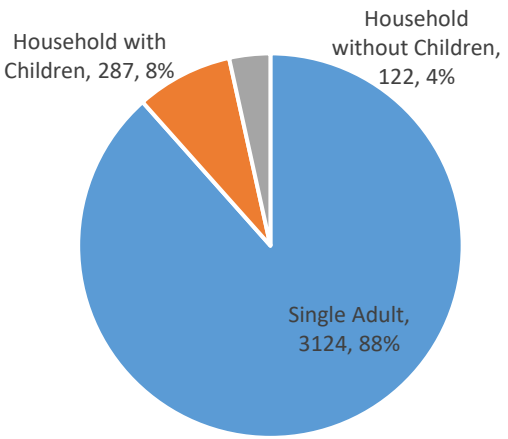
By Gender



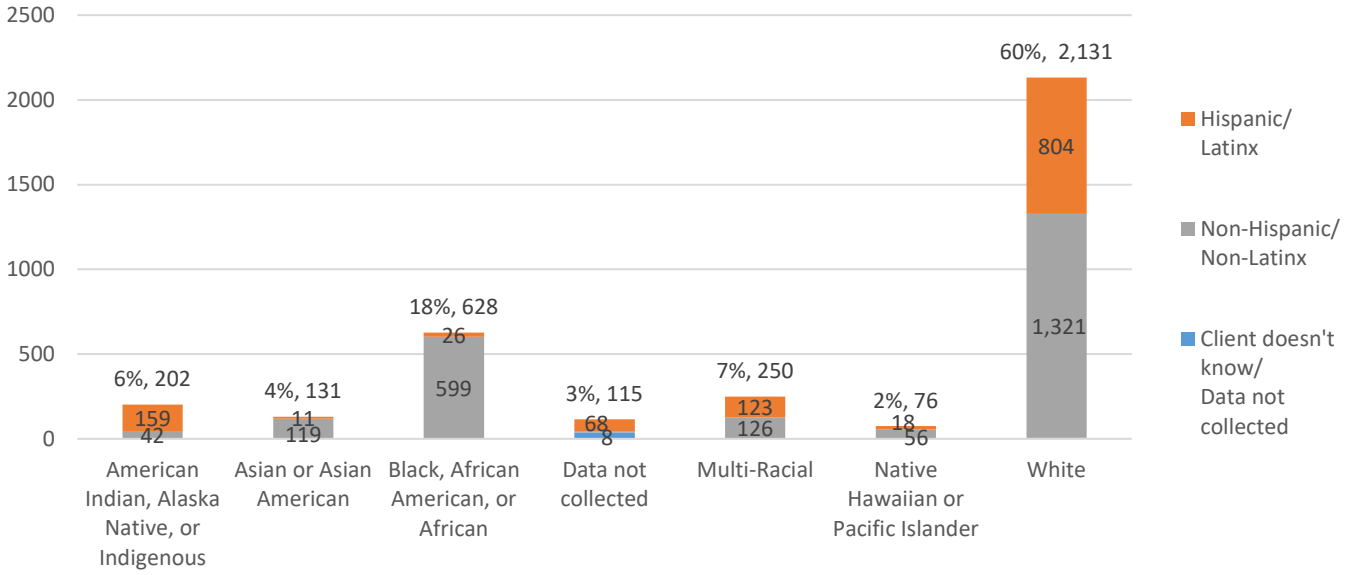
By Age Tier



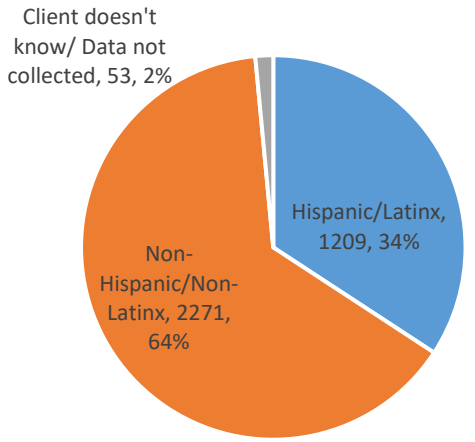
By Household Type



By Race and Ethnicity



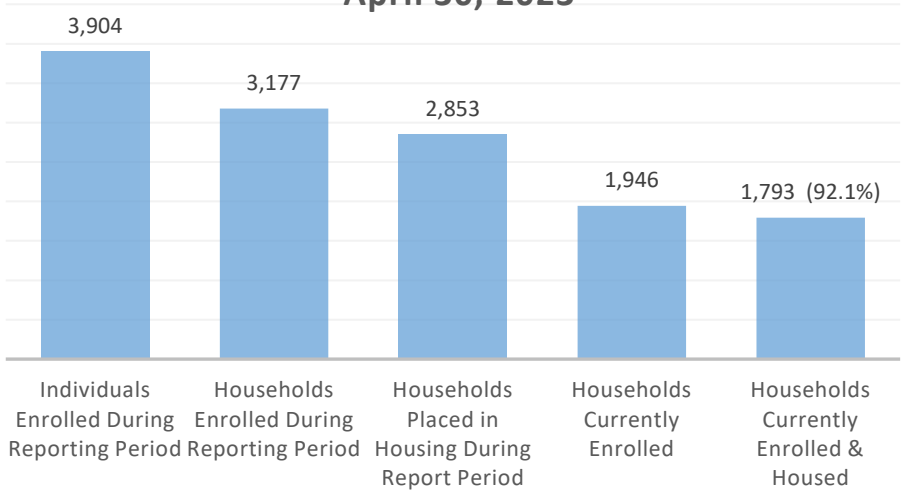
By Ethnicity



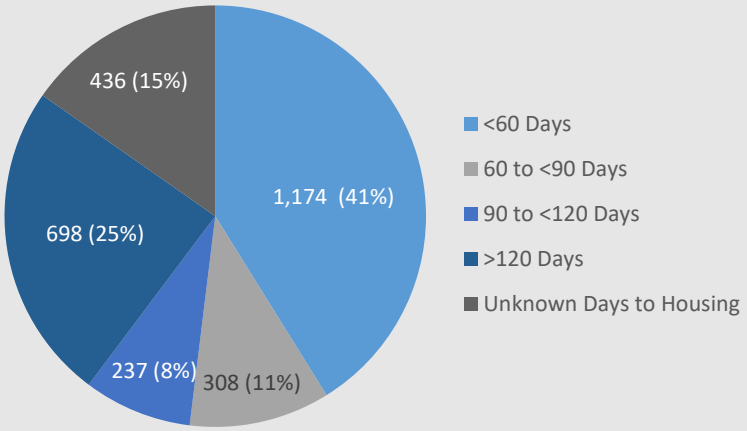
Appendix J: CCP Enrollments and Retention as of April 30, 2023

1

CCP Programs - Total Number of Households, July 1, 2011 through April 30, 2023



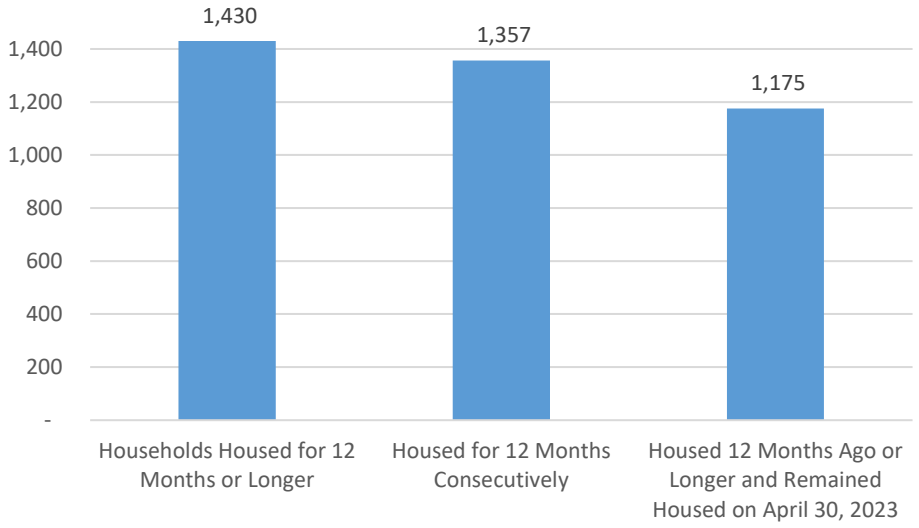
Number of Days to Housing



3

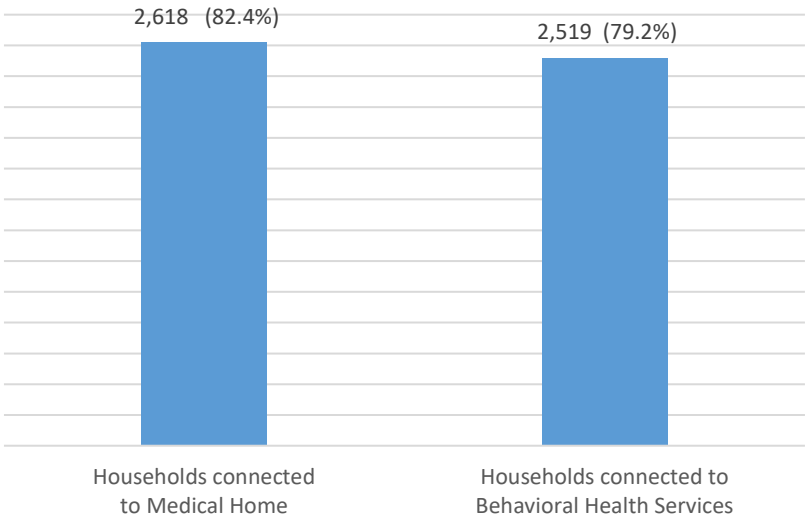
Annual CCP Housing Retention from May 1, 2022 to April 30, 2023

Retention Rate: 1,357/1,430 = 95%



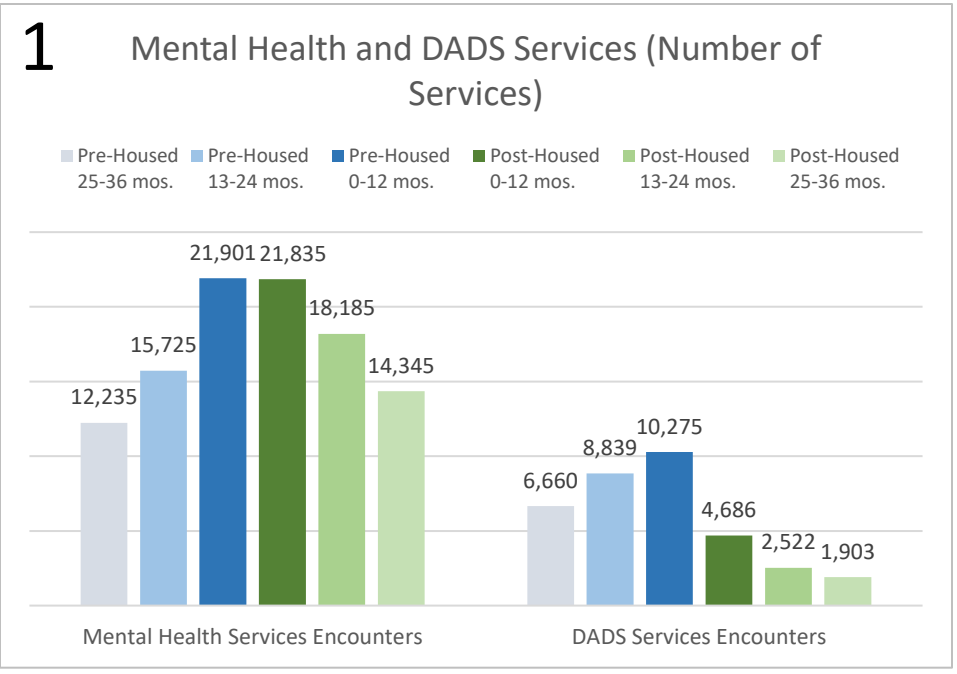
4

Households Connected to Medical Home and Behavioral Health Services



Appendix K: Mental Health, DADS, SCVMC Emergency Room, and EPS: Pre and Post Housed

1



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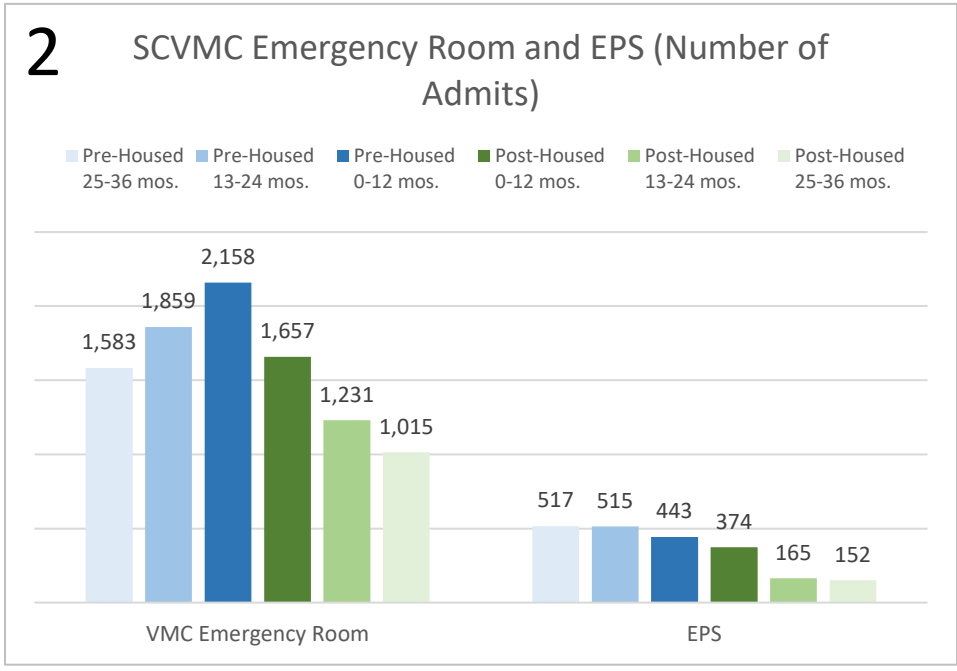

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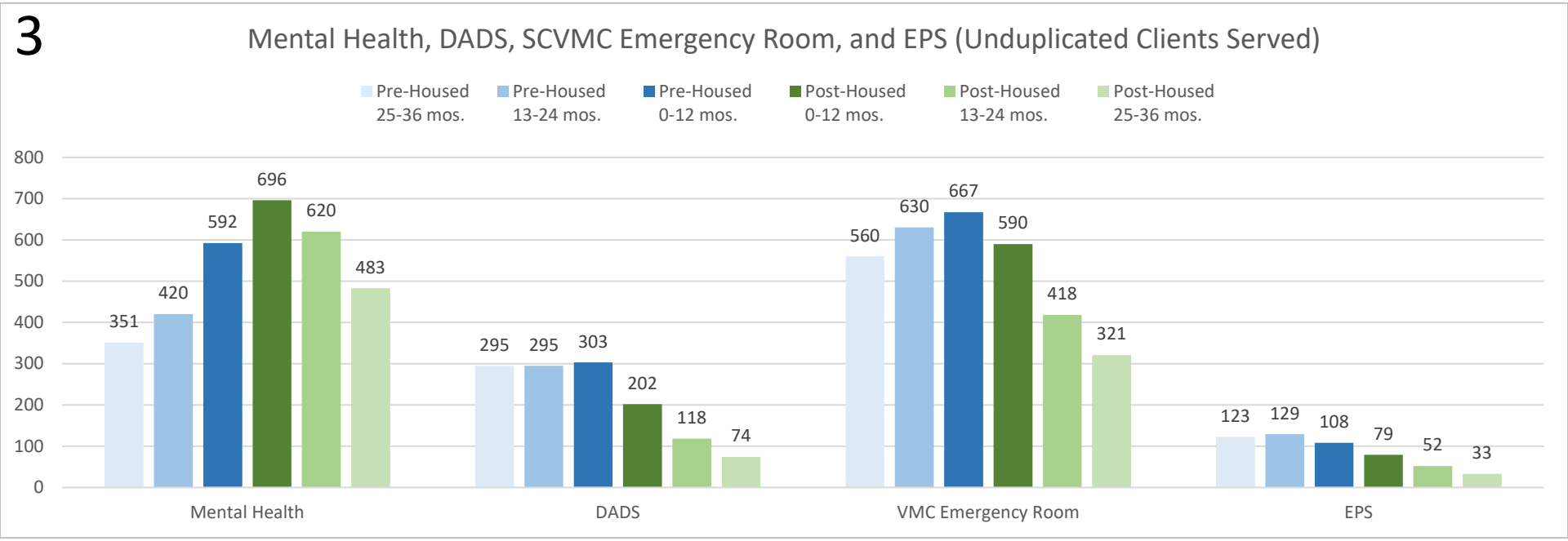
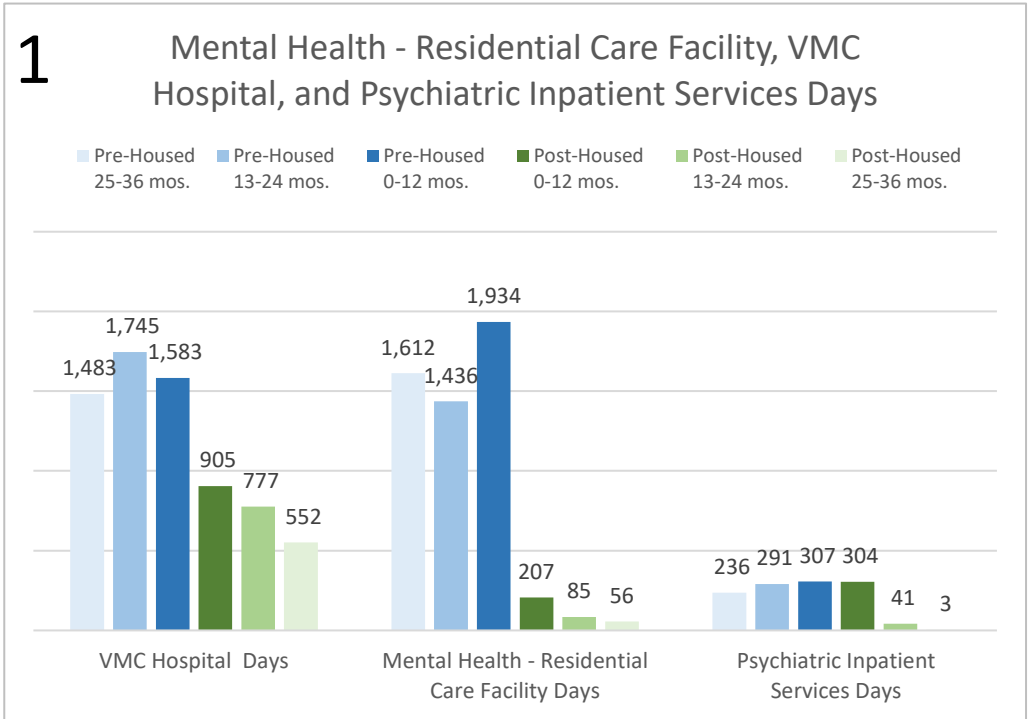


Appendix L: Service Days, General Assistance, Arrests/Incarceration: Pre and Post Housed

1



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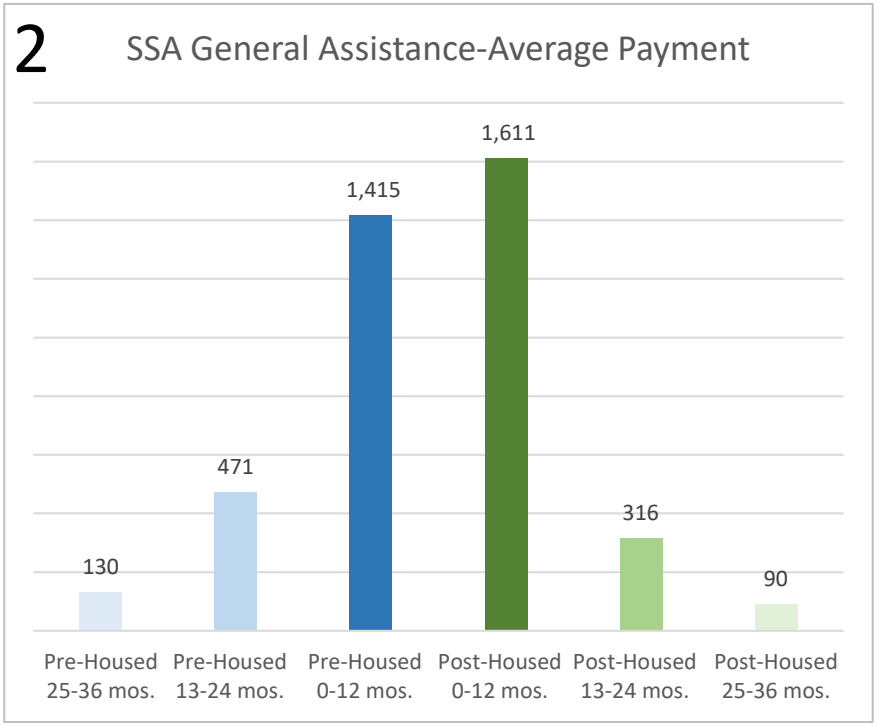

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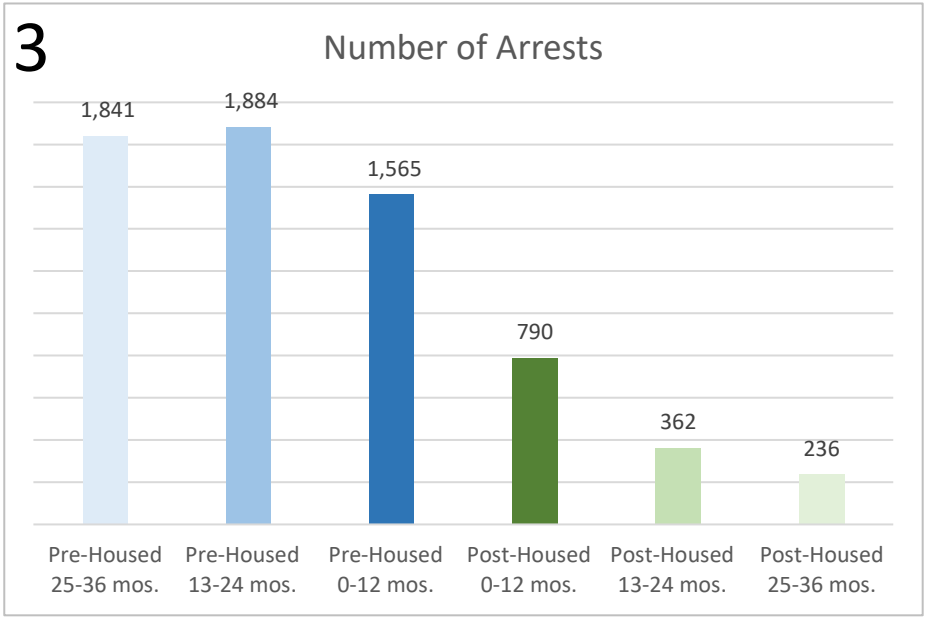

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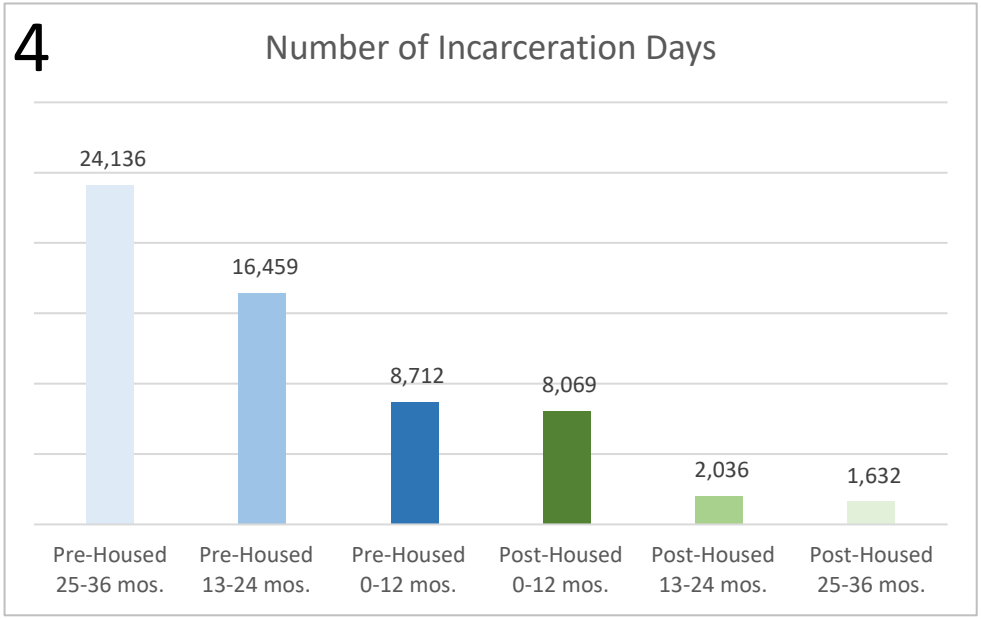
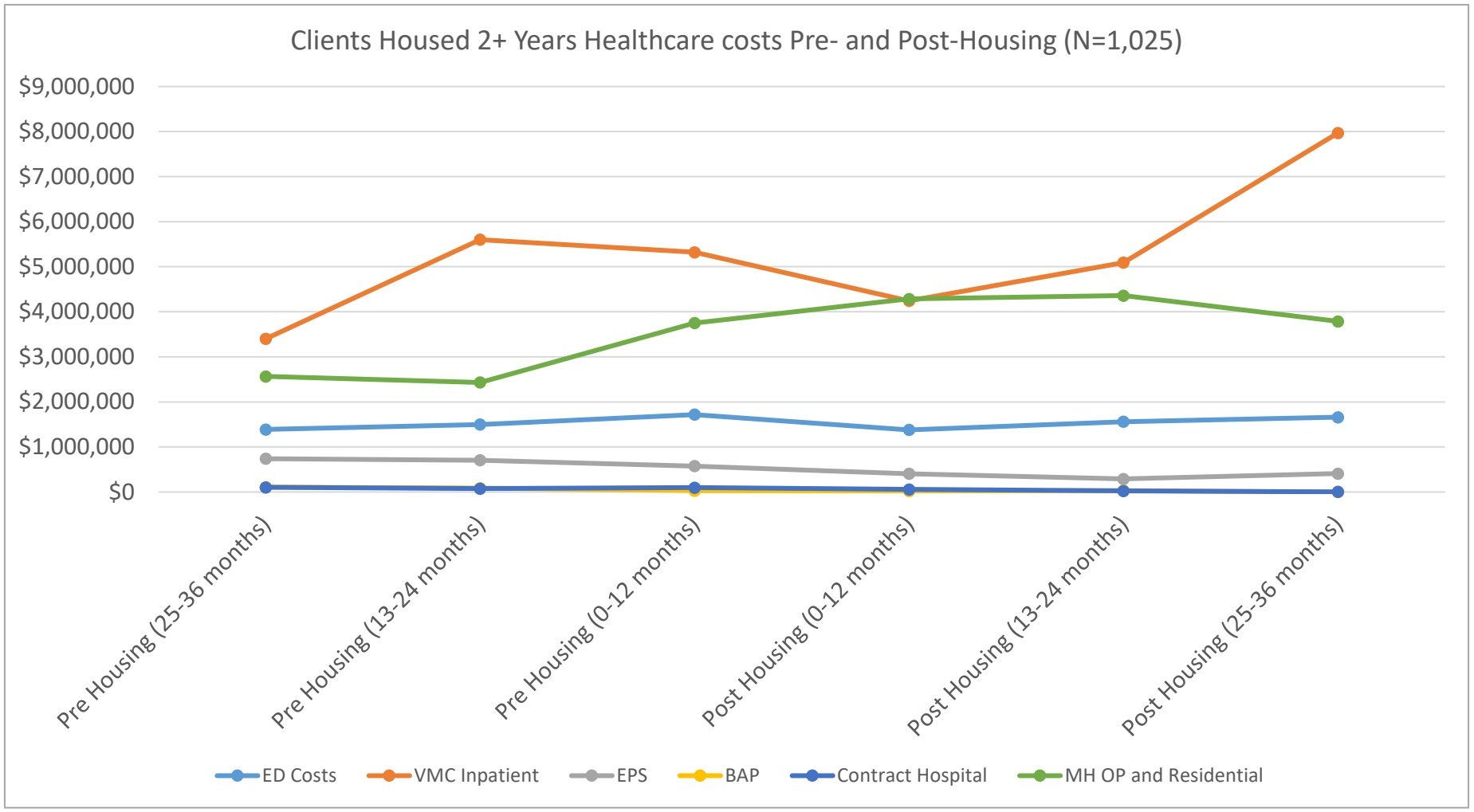
Appendix M: Health Care Cost Analysis for Housed CCP Clients – March 2023