Tacoma/Lakewood/Pierce County
Continuum of Care
5-Year Plan

for Public Review and Comment
February 21, 2024

Please submit comments
no later than April 5, 2024 to
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INTRODUCTION

Purpose

The Tacoma/Lakewood/Pierce County Continuum of Care (CoC) was established in 1996. Its mission is to carry out the provisions of 24 CFR Part 578, which include:

    A.   Promote community-wide commitment to the goal of ending homelessness within Pierce County;

    B.   Provide funding for efforts to quickly rehouse homeless individuals (including unaccompanied youth) and families, while minimizing the trauma and dislocation caused to homeless individuals, families, and communities by homelessness;

    C.   Promote access to and effective utilization of mainstream programs by homeless individuals and families; and

    D.   Optimize self-sufficiency among individuals and families experiencing homelessness.

As a CoC, the organization is authorized by the US Housing and Urban Development Department (HUD) to apply for HUD funding and disburse that funding to qualified applicants. HUD requires each CoC to adopt a five-year plan to address homelessness and funding applications consistent with that plan. The plan is intended to be very broad even though HUD only funds certain elements.

The CoC adopted its Five-Year Plan to Address Homelessness in December 2019, and so a new plan is required in 2024. This document represents the 2024 plan for which the CoC is soliciting public review and comment.

Once this plan has been amended in response to public comments and has been adopted, it will be the basis of funding decisions. However, it is intended to be a living document that can be amended as circumstances change. Currently based on 2022 data, it will be monitored over time and amended as needed.

Plan Update

The Committee who prepared this plan for the CoC reviewed the status of the CoC's 2019 Five-Year Plan to Address Homelessness and the subsequently adopted 2022 Pierce County Plan to End Homelessness (CPEH) and concluded that using the more recent document as a framework would achieve two objectives: to make the 2024 CoC plan as current as possible; and to ensure that planning for addressing homelessness in Pierce County creates a cohesive, integrated system through which all entities are working together.

This document, while based largely on the 2022 CPEH, adds goals and strategies that the CoC feels are needed to improve current conditions related to homelessness. This draft also reflects comments received from CoC members and members of the public following the presentation to the CoC in January 2024.

A separate Existing Conditions report (*available at https://www.piercecountywa.gov/DocumentCenter/View/135041/Existing-Conditions-Report--CoC-draft-5-year-plan-for-web-posting-2-22-24*) has also been prepared that reflects issues and data as of January 2024 and that will be updated at least annually either independently or in conjunction with future updates to the CoC's 5-Year Plan.

Expected Outcomes from Implementation of this 5-Year Plan

- Significant reduction in the overall number of homeless individuals and families in Pierce County.
- Shorter duration of homelessness episodes and quicker transitions to permanent housing.
- Enhanced efficiency and effectiveness in service delivery and resource utilization.
- Increased public awareness and support for homelessness initiatives.
- Alleviation of historical and systemic barriers that lead to and cause homelessness in our most vulnerable, at-risk, and marginalized communities and populations.

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EXECUTIVE SUMMARY

This Tacoma/Lakewood/Pierce County Continuum of Care (CoC) 5-Year Plan to Address Homelessness (the Plan) identifies a number of issues that contribute to homelessness in Pierce County and sets goals and strategies for addressing those. Based originally on the Pierce County Comprehensive Plan to End Homelessness (CPEH), this Plan has identified several additional goals and strategies that are needed given the more recent data available since that plan was adopted in 2022.

This Plan incorporates the vision and values of the CPEH. It also strives to address these issues in particular:
- Increasing homelessness;
- Racial inequities contributing to a disproportionate number of people of color who are unhoused;
- Lack of adequate data to use for program development;
- The need to address specific issues related to persons with disabilities;
- Concerns of people on the street;
- Need to improve CoC performance; and
- Community stigma.

The Plan acknowledges that lack of affordable housing is the biggest contributor to homelessness but that creating additional affordable housing is the responsibility of other adjacent systems.

This Plan prioritizes these measures:
- Coordination among all levels of government and providers in Pierce County to operate under a unified system;
- Prevention services;
- Outreach teams;
- Drop-in and service centers;
- Safe shelter options;
- Housing programs such as Rapid Re-Housing, rental assistance, and permanent supportive housing;
- Public education and reduction of stigma against people who are unhoused.

This Plan includes the following nine goals and associated strategies to implement them.
- Create a Unified Coordinating Entity for Homelessness
- Strengthen the Homelessness Management Information System (HMIS);
- Minimize the number of individuals who become homeless through prevention services;
- Meet immediate needs of unhoused individuals;
- Ensure that interventions are effective for all populations;
- Ensure that adjacent systems address needs of people becoming homeless or at risk of becoming homeless;
- Expand the permanent housing system to meet the need;
- Improve CoC capacity; and
- Implement a robust public education campaign.

As noted in the Introduction, these are the expected outcomes from implementing this Plan.

- Significant reduction in the overall number of homeless individuals and families in Pierce County.
- Shorter duration of homelessness episodes and quicker transitions to permanent housing.
- Enhanced efficiency and effectiveness in service delivery and resource utilization.
- Increased public awareness and support for homelessness initiatives.
- Alleviation of historical and systemic barriers that lead to and cause homelessness in our most vulnerable, at-risk, and marginalized communities and populations.

FOUNDATIONAL ELEMENTS OF THE PLAN

Vision & Values

Everyone has a right to adequate housing. Housing is the foundation on which other needs, such as security, safety and health depend.

This Plan envisions a system that prevents homelessness by stabilizing households at risk, and immediately responds to homelessness with appropriate shelter and a permanent housing intervention. While eliminating homelessness is nearly impossible, **functional zero** - a state where people have access to immediate shelter and an effective permanent housing program - is not just possible, but also necessary to achieve nearly every other civic interest. For example, success in schools requires that students and their families have adequate housing. Housing is also necessary for child welfare, physical health, mental health, and public health, for economic development and wage progression, for appropriate use of emergency services, public safety and order, environmental protection, justice, and racial justice.

The vision is an integrated, adaptable, and responsive network of services that supports restoration, stability, and self-determination for everyone- regardless of economic or social circumstances, and regardless of where in our community they live.

Collaboration across jurisdictions, across business sectors, with faith-based and nonprofit organizations, philanthropic organizations, and with neighbors housed and experiencing homelessness is key. Only working in unison, with a clear plan, can we create shelter and affordable housing to meet the existing and future need so that everyone has a home.

Targeted Universalism. By using the Targeted Universalism framework- setting universal goals and using targeted programming to achieve those goals- equity is built into this plan. The human consequences of inequity affect us all. This work must identify the historic and systemic barriers that keep people from securing and maintaining affordable housing, and our work must focus on removing those barriers.

Changes to Root Causes of Homelessness. How a community views the unhoused affects every area of the CoC's mission — grant funding, capital purchases (like shelters and motels), neighborhood satisfaction, political will, homeless assaults, and the reduction in numbers of people experiencing homelessness. Because of its significant impact against all we do, it is crucial that strong steps be taken toward improving roots and not simply roofs.

Applying the Vision & Values

The gap between the system articulated in the Vision and Values statement and the current homeless crisis response system is substantial. Expanding the homeless crisis response system to meet the needs of all people currently experiencing homelessness is an opportunity to build a system that better meets the unique needs of each household experiencing homelessness. Key tools to re-imagine and redevelop the homeless crisis response the community needs include Commitment, Community Engagement, Lived Experience, Targeted Universalism and System Accountability.

Commitment

Without full commitment to addressing the problem of homelessness in Pierce County, the words of this plan will be just wishes. Commitment to action by all parties involved will be essential to addressing homelessness. It is imperative that the CoC and its partners continuously examine progress and make changes as needed to achieve the desired outcomes.

Community Engagement

Ensuring the widest possible input on this Comprehensive Plan has enabled this plan to best reflect current needs in the community as well as the resources and approaches needed to meet those needs. Community engagement has spanned a variety of approaches, including presentations to community groups, an on-line open house, a survey of people experiencing homelessness, and bringing individuals and community groups into the Steering Committee and its subcommittees.

Community engagement will be a constant element in plan implementation. This Plan will evolve as new information is learned and as the needs of people experiencing homelessness and the communities they live in are better understood.

Lived Experience

Similarly, development and expansion of programs will be most successful when individuals and groups with lived experience are part of the decision-making and implementation processes. Individuals with lived experience often view matters with different eyes, seeing more clearly the connections and roots behind problems. Their observations are fundamental to CoC success. All strategies in this plan leverage the expertise of people with lived experiences and organizations that work to advance the needs of target populations. Individuals with lived experience will be involved throughout the Plan implementation.

Targeted Universalism

Targeted Universalism is a framework to pursue a common, shared goal with multiple strategies designed for the unique needs of different groups. Strategies are developed using a five- step framework:
1. Establish a universal goal;
2. Assess general population performance to the universal goal;
3. Identify groups that are performing differently with respect to the goal;
4. Assess and understand the structures that support or impede each group from achieving the universal goal; and
5. Develop and implement targeted strategies for each group to reach the universal goal.

Within the homeless system, that goal is permanent housing. Reaching that goal may require different approaches for different groups. Using targeted universalism as a foundation to this plan means reviewing enrollment data and outcome data to identify programs with low enrollments or poor outcomes for specific under-served populations. When data indicates the need for a targeted approach specific to a population, programs will be designed or modified around the unique needs of the affected population.

Some groups may benefit from simple technical fixes, such as ensuring ADA accessibility of shelter spaces. Other groups may see improved outcomes only with deeper structural reforms.

These reforms may include new service providers run by the populations currently experiencing poor outcomes.

Targeted Populations

Populations with known unique needs, those who are shown locally or nationally to have poor outcomes in homeless systems, and those disproportionately experiencing homelessness benefit from targeted strategies to exit homelessness. Monitoring of enrollments and program outcomes, as well as identifying specific strategies to improve enrollments and outcomes, is necessary for the following populations:

- Black, Indigenous and people of color (BIPOC)
- People with disabilities - as defined by the American with Disabilities Act
- Seniors - over the age of 65
- Families with children
- Members of the lesbian, gay, bisexual, transgender, queer, intersex, asexual, two-spirit (LGBTQ+) community
- Youth aged 12 to 18 and young adults between 18 and 24 unaccompanied by family
- People currently fleeing domestic violence, including intimate partner violence and other unsafe situations
- Veterans who have served in the United States armed forces

Accountability

The development of each goal and strategy in this plan requires customization for targeted populations. In addition, reporting tools and dashboards are necessary to ensure accountability that can be disaggregated by enrollments and exit outcomes for each targeted population.

Achieving Functional Zero

This plan targets functional zero - a state where any person starting a new homeless episode has immediate access to shelter and a permanent housing intervention. This acknowledges that homelessness will never fully disappear from a community. Instead, it aspires to making it rare, brief and, when it happens to someone, they do not experience it again.

This approach is in use in nearly 100 communities across the United States, including six of the largest twenty cities as well as a mix of suburban, urban, and rural communities. It has resulted in 14 communities ending homelessness for target populations, and 44 communities with measurable reductions.

Communities successfully reaching functional zero follow a common methodology. Each aspect of the methodology can be found in the Plan goals, strategies, and accountability measures below. Those aspects are:

- By-name list- a list of every person in the community experiencing homelessness, continuously updated

- Integrated Command Center Team - implemented as the Unified Regional Office to End Homelessness, brings key agencies together to work towards functional zero
- Community-level measurement - measure success by the number of people experiencing homelessness.
- Data-driven housing investments - securing the housing resources needed to house people experiencing homelessness

Success of this plan will be measured by the reduction of the total number of people experiencing homelessness and how quickly they exit homelessness to permanent housing. Individual programs will still need to be accountable for client outcomes, but the focus will be on the community-wide goal of ending homelessness.

To achieve the goal of ending homelessness by reaching functional zero, real-time data is needed to tailor interventions to each individual, pivot to address needs common to target populations, and have a clear picture of the homeless crisis response system. With disparate outcomes for many populations, a focus on racial equity is necessary. Targeted Universalism will allow that focus to permeate program design and accountability tools.
Functional zero requires not just quick responses to households experiencing homelessness, but also creation of supports necessary to prevent people from becoming homeless in the first place.

Affordable Housing
The causes of homelessness are complex and require a systematic response that accounts for that complexity. Yet, the complexity should not conceal a basic cause: Pierce County does not have enough housing for its residents, and much of its housing is not affordable, especially for households earning less than 50% of Area Median Income[1]. With high rents, households under 50% AMI will be rent/cost-burdened (meaning they spend more than 30% of their income on housing), and without subsidies, housing is nearly inaccessible to households under 30% AMI.

While increasing the supply of housing available to people experiencing homelessness is ultimately the most important factor affecting the success of ending homelessness, that effort cannot be addressed through this plan alone. The homeless crisis response system needs to coordinate with private and public housing developers, the South Sound Housing Affordability Partners (SSHA3P), and various municipal affordable housing action strategies.

The Pierce County Council approved the Pierce County Housing Action Strategy in September 2022. This Housing Action Strategy is designed to achieve three goals:
- Support more income-qualified homes for low-income households;
- Increase the rate of housing production; and
- Encourage a greater diversity of housing options.

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[1] Area Median Income (AMI) is an indicator of income relative to other households and is adjusted for household size. For example, a household of three earning less than $40,901 is under 50% AMI, and if they earned less than $24,551 they would be under 30% AMI. The US Department of Housing and Urban Development posts program income limits based on AMI at https://www.huduser.gov/portal/datasets/il.html.

Its strategies include:
- Develop New Funding and Revenue Sources;
- Strengthen and Coordinate Affordable Housing Incentives;
- Facilitate the Use of Land for Affordable Housing;
- Promote Middle Housing Production; and
- Reduce Development Costs and Barriers.

The current capacity, current and future demand, and the unique needs of people experiencing homelessness must be included in other affordable housing plans.

The need for very low-cost housing requires particular attention be paid to retaining and developing a wide variety of housing types, including shared housing, mobile home and RV parks, community land trusts, clean and sober transitional housing, single room occupancy projects, and permanent tiny house villages.

Ultimately, without access to permanent affordable housing that low-income households can sustain, the homeless crisis response system cannot successfully exit households from homelessness.

System Data

Data is a key tool to accomplish the goal of permanent housing for all. The Homeless Management Information System (HMIS) is currently used to store and manage the community's data specific to homelessness. HMIS is accessible to all providers in the community and allows monitoring of individual outcomes, program and provider performance, and overall progress towards ending homelessness across the entire homeless crisis response system. It also facilitates the creation and management of by-name lists (defined below), allowing us to respond to homelessness at the individual level.

Use of HMIS is required for all agencies funded as part of the homeless crisis response system. For system data to be most useful and accurate, HMIS use must be expanded to include use by all agencies in the community, not just those funded by the County.

While the Point-in-Time (PIT) Count will continue to be a tool to learn general year-over- year trends about people experiencing homelessness, using HMIS to manage the by-name list will provide the timely, accurate and information rich data needed to monitor progress to ending homelessness and to design programs to close the gap between system capacity and need.

By-Name List
This Plan proposes creation and maintenance of a by-name list of all people currently experiencing homelessness. By-name lists are presently managed in HMIS only for veterans and for youth and young adults. In the goals of this Plan, those lists are expanded to include all people experiencing homelessness. That list would be shared and managed by all providers in the homeless system and it would be continually maintained to ensure that every person

encountered during street outreach, staying at a shelter, or engaging any part of the homeless crisis response system is known.

To fully implement a by-name list for all people experiencing homelessness, several challenges need to be overcome. Often data input by service providers has inaccuracies and can be prone to delay in data entry. For data to be leveraged accurately and efficiently, data must be correct and up to date; expanded technical assistance will help to achieve this. This effort will also only be successful by increasing HMIS utilization.

Creating a universal by-name list serves several purposes. It better ensures that all persons receive what the system has to offer. It allows for better evaluation and assessment of the system's effectiveness. It will allow monitoring of progress towards ending homelessness.

Analysis will also allow comparison of needs and outcomes for all eight target populations identified in the targeted universalism section. Understanding those unique needs will drive program design. This data will provide transparency to allow for a greater level of accountability of individual providers and the entire system to people experiencing homelessness, funders, service providers, elected decision makers, and the general population. Finally, a by-name list reminds us that lives are at stake and that every single one of them is somebody, a unique person to know and serve by their name.

Merging Outside System Data
In addition to maintaining high quality comprehensive data in HMIS, it is necessary to merge that data with other data sources to understand the needs of people experiencing homelessness. For instance, tracking exits from incarceration to homelessness is only possible through joining data from both HMIS and jail and prison systems. Any effort to end the cycle of homelessness and incarceration requires monitoring that connects data in real time. This need for data integration is described in several strategies of this plan.

Qualitative Data
Quantitative (numerical) data is valuable but can often miss important information. Qualitative (narrative) data can provide additional information for use in decision making. In addition to expanding the use of quantitative data collection and analysis, expanded qualitative data collection is also needed and included in some strategies of this plan.

Prevention

While prevention has not historically been considered within Pierce County's homelessness response system, and provision of adequate housing stock to address the housing needs of all income levels is the responsibility of other plans, no plan to address homelessness can ignore the value of preventing homelessness altogether as the best way to end it. Prevention is less costly and more humane, but it requires extensive cross-system collaboration, such as with criminal justice, foster care, education, behavioral health, and other systems that interact with and affect people at risk of homelessness. Only by partnering can a supportive network that will

work to keep people housed be created, ultimately resulting in the population never having to experience homelessness at all.

Additionally, it takes public support to prevent homelessness. Much of the public sees the unhoused as deficient in character, motivation, and contribution to society. The result of this is low support for many changes that would reduce numbers and accomplish capital projects that increase housing. Strategies to address public perceptions and sentiments are necessary additional tools for prevention.

ISSUES TO BE ADDRESSED

Data and additional narrative to support the following conclusions about issues that this plan must address are included in a separate document, the 2024 Existing Conditions Report. The data cited in this document are from 2022 because as of this writing, no 2023 data is available.

Rate of Homelessness
- Homelessness has not declined since adoption of the 2019 CoC plan, nor since adoption of the 2022 CPEH. In fact, it has increased during that period. While accurate data collection was not possible during the COVID-19 pandemic, the most recent data available shows that there were at least 9,379 unhoused individuals in Pierce County at the end of 2022. Additionally, 4,845 students were identified as unhoused by the McKinney-Vento program in schools. This overlaps to some extent with the other data but not entirely.
- Approximately 3,438 individuals became unhoused for the first time in 2022.
- Only 30% of individuals experiencing homelessness were placed in permanent housing in 2022.

Racial Inequity
- The unhoused population is disproportionately comprised of people of color, especially African Americans. Although the Black unhoused population has declined slightly relative to the population at large since 2017, the ratios remain largely the same; and the unhoused Hispanic and Hawaiian & Pacific Islander populations have increased in that period of time.
- Among the racial groups of unhoused individuals, the White population has the largest ratio of chronically homeless; other racial groups have relatively similar ratios of chronically homeless to other homeless.

Disabilities
More than half of the people experiencing homelessness have a disability. This means that special measures must be taken to ensure housing and shelter suitable for the type of disability.

Permanent Supportive Housing
There is a need to supplement the current inventory of permanent supportive housing (PSH) in Pierce County, particularly to support people who are chronically unhoused and may not be able to live

independently. Some individuals with disabilities require the wrap-around services and subsidized housing that defines permanent supportive housing. PSH is the most expensive housing because of the subsidies required and the cost of the wrap-around services. It is also the type of housing most needed by individuals who are chronically homeless. This has been prioritized for HUD funding applications.

Access to Services

The average length of time between accessing Coordinated Entry and a housing outcome was 430 days in 2022. There has been anecdotal input about the inability of the 211 system, in particular, to function well. This is promoted to the public as the primary access point to Coordinated Entry, although other agencies do Coordinated Entry.

There are stories of inordinate delays in getting responses and referrals via the 211 system. Additionally, members of the Racial Equity Committee have also noted that 211 does not identify and refer to some of the smaller organizations tailored to racial minorities.

Success Measures

These measures are indicators that the Homeless Response System – including the prevention component – is not adequately responding to community needs.
- The percentage of individuals returning to homelessness within 24 months of exiting the homelessness response system to permanent housing has increased since 2018.
- The number of deaths among unhoused individuals on the street is increasing. From the Coalition to End Homelessness, 296 street deaths occurred in Pierce County in 2023, compared to 167 deaths in the prior year, a 77% increase.

The intention of this 5-year plan is to reverse these trends.

Specific Concerns of Unhoused People on the Street
- Lack of safety, or feeling safe, is a significant issue for unhoused people on the street.
- Unhoused people on the street do not feel respected by the public; however, they do feel respected by outreach workers.
- Unhoused people on the street have had very mixed experiences trying to access services.
- Specific organizations, rather than programs, were credited with giving help to people who are unhoused. Specifically mentioned were St. Vincent de Paul, multiple programs; Tacoma Rescue Mission; Nativity House; and the Veterans Administration. Additionally, there did not seem to be familiarity with various types of programs to respond to homelessness.
- Financial and lack of housing were the two biggest barriers to remaining housed.
- Nearly all respondents would accept a free place to live inside, which was respectful, safe and private. Some concerns come from among the small number who would not include living with unknown others and concerns about pets and allergies.
- Access to health care is quite variable. Many have not had health care for several years. Most could not recall where they got the care.
- Access to food on a daily or nearly daily basis is a problem for a majority of survey participants.

- A majority of respondents have interacted with police. Of those, a majority felt the interaction was respectful. In contrast, lack of compassion and respect was noted by the remainder.
- A majority of the respondents had experienced a "sweep", including half who said 2-5 times and a quarter who said more than 10 times.
- Many respondents asked for more understanding and more help.

- The Tacoma-Lakewood-Pierce County Continuum of Care is not performing well relative to other Washington State CoCs as reflected by various measures in the 2024 Existing Conditions report. Pierce County has not been able to generate as much federal revenue, for example, as other comparable CoCs.
- There is also a lack of coordination countywide among the jurisdictions and their respective approaches to homelessness. Not all agencies are using HMIS, Tacoma and Pierce County have separate plans for housing and homeless services, and there is a significant lack of data needed to plan for the needs of identified sub-populations.

Lack of Housing

The most significant factor in creating homelessness in Pierce County is the lack of housing units affordable to people with below-area median income (AMI). This has been substantiated by many sources and is illustrated in [this video][2]. This plan primarily focuses on the response to homelessness, and to some extent on the preventive measures that can assist people to stay in their homes. It does not directly address how to increase affordable housing supply.

However, there are efforts in progress to address the housing supply in Pierce County, and it will be important for the CoC to connect with those efforts in order for there to be a complete community-wide understanding of needs, potential solutions and responsibilities for providing housing affordable to all. These would be considered "adjacent systems" and include:

- [South Sound Housing Affordability Partnership](#) (SSHA3P). This group of local governments is collaborating to plan locally, regionally and with tribes to provide housing affordable to residents that work and/or live in Pierce County. They committed to acting cooperatively to formulate housing policies that address access to affordable/attainable housing, housing stability and to foster efforts to preserve and create affordable/ attainable housing by combining public funding or other resources with private-sector resources.

- [Community Development Corporation](#) (CDC). The purpose of the Corporation is to carry out programs to rebuild or revitalize blighted areas; to expand housing, job, and income opportunities; to develop housing programs including home rehabilitation, counseling and maintenance training services; to stimulate economic development through the use of all available resources; to improve educational facilities and

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[2] Colburn, Gregg and Aldern, Clayton Page, *Homelessness Is a Housing Problem*, University Of California Press, 2022.

programs; to combat disease and ill health; to reduce the incidence of crime and delinquency; to enhance recreational and cultural opportunities; to establish better access between homes and jobs; and, through the most effective and economical concentration and coordination of Federal, State, and local public and private efforts, to improve the quality of life, particularly for the socially and economically disadvantaged in Pierce County (the "County")

- Local Comprehensive Planning. Recent state legislation requires that each jurisdiction subject to requirements under the Growth Management Act include plans to ensure that housing is available at all income levels in the communities by 2044, including permanent supportive housing and emergency shelter capacity. The Existing Conditions report shows the adodpted need for this new housing by income level and jurisdiction.

Community Stigma

There remains a stigma against people experiencing homelessness and a need for a countywide vision for addressing the issue. As noted previously in this plan, stigmatization of people experiencing homelessness cannot be an afterthought, given its significant correlation to success. A robust and ongoing public education campaign, as mentioned elsewhere in this plan, is crucial. Every success is attached to changing the stigma that stops provision of housing for those who need it.

PRIORITIES

The goals and strategies in this plan address these priorities:

- **Coordination among all levels of government and providers** in Pierce County to operate under a unified system with a common vision, coordinate among the different elements of the plan, better ensure programs reflect effective practices, and to collect data for program adjustment, evaluation, and accountability.
- **Prevention services** that accurately identify households that, without intervention, will become homeless, and that offer them effective services or resources to keep them housed. Reducing the inflow of unhoused individuals will aid in addressing the needs countywide.
- **Outreach** teams to actively engage with homeless persons, especially those who are chronically unsheltered and who are resistant to services. The teams must have the services listed below to offer.
- **Drop-in and service centers** to offer daytime respite space, storage facilities, introduction to services, and the building of relationships with outreach workers.
- **Safe shelter options** ranging from those with less structure and fewer services, such as safe parking spots and sanctioned encampments, to shelter with more structure and more services, such as congregate shelter and tiny house shelters.
- **Housing programs** to provide permanent housing or to help people find permanent housing, such as Rapid Re-Housing, rental assistance, and permanent supportive housing.
- **Public education**. From funding to deaths on the streets, solutions that reduce the numbers of unhoused individuals must include public education about the realities of homelessness and new narratives that do not stigmatize people who are unhoused.

GOALS AND STRATEGIES

These goals and strategies are intended to address the increase in homelessness and achieve the following:

- Better countywide coordination and management of the Homeless Response System;
- Prevention of homelessness, thereby reducing the number of people who need services;
- More specific responses to the needs of unhoused individuals and families, thereby transitioning them to housing more quickly; and
- Community understanding and support for addressing the needs of unhoused people.

Goal 1: Create a Unified Coordinating Entity for Homelessness

Many factors are necessary to end homelessness: effective management, sufficient resources, coordination of those resources, accountability, and skilled leadership. A unified approach will enable an understanding of the entire need in the community and allow the leadership, management and resource acquisition and distribution necessary to meet that need.

In order for this to happen, interlocal negotiations are needed.

Strategies:

Create an entity responsible for coordinating planning and services to address homelessness, consisting of the right stakeholders with central decision-making authority for funding and services and with responsibility for:

- Developing a community vision for ending homelessness;
- Creating and overseeing implementation of a consolidated plan for addressing homelessness;
- Generating and communicating thorough, up-to-date data and analysis to inform policies and funding decisions;
- Generating funding necessary to provide services needed by people at risk of being homeless and who are unhoused;
- Using a Targeted Universalism approach to address racial disparities and other inequities;
- Evaluating system performance; and
- Coordinating with all jurisdictions, adjacent systems and providers to ensure that the system is operating optimally and that new affordable housing is also generated.

Goal 2: Strengthen the Homelessness Management Information System's Accountability

The lack of data available for planning and management of the homelessness response system requires that significant effort be put into creating new and more sophisticated systems, both for internal and for public use.

Strategies:

1. Establish data management and reporting systems to ensure that the public, service providers and decision-makers have current, thorough information with which to set policy and adjust services to meet the need.
   a. Implement a data collection system for Coordinated Entry that allows direct input by agencies serving clients, creates a by-name list for all clients, will have the capacity to

be used directly by clients and securely protects client records from inappropriate use.

b. Ensure that all formal and informal interactions with people experiencing homelessness are recorded.

c. Publish quarterly data, including:

    i. Disaggregated data by race, including multiple forms of program-level and larger-scale qualitative and quantitative data, and examines outcomes by race as it intersects with other identities linked to gender, LGBTQ+ identification, disability, family status, etc.. Use that data to regularly inform policy decisions and program development.

    ii. Indication of performance of the homelessness response system, including the following elements:

        a. Number of unhoused individuals and families in Pierce County by racial/ethnic groups, age, length of time in the Coordinated Entry system, including the number of returns to the system.

        b. Number of unhoused people who have used shelters.

        c. Number of unhoused individuals and families receiving navigation services.

        d. Number of formerly unhoused individuals and families placed in transitional and permanent housing.

        e. Amount of rental assistance provided and to how many individuals or families

        f. Number of individuals recently exited from institutional settings who accessed the homeless crisis response system

        g. Coordinated Entry System capacity and utilization, wait times for Coordinated Entry "Crucial Conversations" and the elapsed time between coordinated entry conversation and program referral and housed outcomes.

        h. Estimated need, capacity, current enrollments, new enrollments and exits for each permanent housing intervention type.

        i. Estimated need and capacity for 0-30% AMI housing and 30-50% AMI housing.

        j. Complaints registered with the Homeless System Ombudsperson.

2. Analyze system data to provide monthly, quarterly and annual reports documenting identified concerns with interventions, strategies to remedy those concerns, and status updates on past strategies.

a. Document any interventions or services with low performance or low enrollments for specific populations along with strategies to remedy those deficiencies in the annual reports.

b. Report quarterly on the status of each strategy, including what has been achieved to date, number of individuals and families served by each, implementation problems encountered, how those problems have been addressed, funding sources, and when the strategy will be implemented if it has not been as of the quarterly report.

3. Develop a homeless solutions website strategy by January 2025.

a. Create a Housing Solutions website that helps those experiencing homelessness or

at risk of homelessness to identify and access needed resources.

    b.   Establish a task force by June 2024 to define the characteristics of the web site and information necessary to address the reporting needs and to work with database analysts to prepare dashboards.

        i.   Provide easy-to-understand information for clients to access services and progress toward reducing homelessness.

        ii.   Publish updated information to provide current, up-to-date shelter and housing opportunities for people experiencing homelessness, including:

            a.   Daily, up-to-date bed capacity and availability at all emergency shelters.

            b.   The following resources:

- Rental assistance
- Mortgage assistance
- Permanent housing availability
- Landlord liaison opportunities

    c.   Create an improved citizen-friendly analytic that more accurately shows County progress. This should follow a review of other Pierce County jurisdictions for their best- practices.

Goal 3: Prevention: Minimize the number of individuals and families who become homeless by providing resources to improve financial and residential stability.

Strategies:

1. Establish a work group to revise homeless prevention services eligibility based on best practices, with eligibility adjustments to accommodate varying levels of resources available for rent assistance to target the assistance where it will prevent homelessness for the greatest number of households.

2. Develop recommendations and implementation timelines by June 2024 for developing and supporting shared housing opportunities for those unable to afford living alone.

3. By September 2024, develop and expand programs to address systemic racism that results in racial disproportionality among people who become unhoused.

4. Collaborate with Workforce Central and other organizations that provide workforce training and employment support to individuals at risk of becoming homeless to include training for jobs currently under-filled in Pierce County.

5. Provide legal aid and domestic violence services to support individuals at risk of losing housing as a result of circumstances needing legal support to address.

6. Provide financial counseling and life skills training to assist at-risk households with financial stability.

7. Provide mortgage assistance for at-risk homeowners.

8. Expand the housing diversion strategy to include households at risk of homelessness.

9. Ask the CoC Coordinated Entry Committee to develop recommendations for expanding Coordinated Entry eligibility to households at risk of homelessness.

Goal 4: Meet Immediate Needs

1. Add support for the Coordinated Entry program and 211 system to develop a 24-hour service.

2. Publish policies and procedures that ensure individuals at risk of being homeless or who are unhoused receive appropriate services quickly from any Coordinated Entry source or 211 system call.
   a. Work with the 211 provider to expand the capacity of the 211 system to ensure that calls are answered quickly and that appropriate services or service navigators are connected with clients within two days.
   b. Widely publicize ways to access Coordinated Entry, to ensure that the people who need service are aware of alternative methods, such as which agencies to contact, in addition to the 211 system.

3. Continuously update the 211 system and information provided to Coordinated Entry organizations to include as many organizations as possible that provide available and useful services for both unhoused individuals and families and those at risk of becoming homeless, including BIPOC churches, community centers and nonprofits. Create and manage a by-name list for the entire homeless population. Develop an app to record interactions between patrons and agencies and automatically upload information to HMIS system.

4. Use Targeted Unversalism to create and evaluate interventions that are responsive to meeting the needs of groups furthest from the Universal Goal, which would include particular racial groups.

5. Plan for a near-term continued rise in the number of people who become unhoused by evaluating the homelessness response system and identifying ways to ensure every household experiencing homelessness has access to navigation services, such as street outreach and Critical Time Interventions, including peer navigators.

6. Prioritize funding to implement the Adequate for All plan to expand homeless shelter, attached, ensuring access at shelter sites to behavioral health services.

7. Expand Coordinated Entry to ensure appointments are available the same day or the next day in shelters, day centers and other access points across Pierce County.

8. Offer Rapid Rehousing and Permanent Supportive Housing interventions during the Coordinated Entry conversation.

9. Modify the Coordinated Entry system to connect with and receive information about eligibility in real-time..

10. Size the homeless outreach system to engage all people living unsheltered.

11. Develop shelters specifically designed to address multiple disabilities, including training for shelter staff (and volunteers) in the needs and strategies to address issues associated with specific disabilities.

12. Develop and implement an aggressive inclement weather program to ensure that protection for unhoused people is provided during extreme weather events that put unhoused people at risk of loss of possessions, illness, injury, or death.

    a. By April 2024 form a CoC subcommittee to develop standards for and identify and assign roles and responsibilities for addressing and monitoring extreme weather events. This subcommittee should include people with lived experience, representatives of Pierce County, including the Emergency Response Department; City of Tacoma and one or more additional jurisdictions; a representative of the Coalition to End Homelessness; and several CoC members. This committee shall be responsible for the following:
       • By June 2024, establishing standards or thresholds to define various types of extreme weather events that will be applied by all jurisdictions in Pierce County. This should recognize that different parts of the county may experience events differently but the standards would apply to wherever the respective type of event occurs.
       • Determining what unhoused, unsheltered individuals need in each type of event and how those needs should be met.
       • By June 2024, defining which entity(ies) will be responsible for managing essential communications before and during extreme weather events.
       • Year-round monitoring handling of extreme weather events to determine what changes are needed for future events.
       • By July 2024, reporting to the CoC Board and membership with the protocols and responsibilities defined as listed above.
       • After each event, debriefing the event, how it was managed and any recommendations of changes needed for future similar events.
       • Annually report in June to the CoC Board regarding the experiences of the previous year.

    b. CoC Board review of the subcommittee work annually by April of each year to determine whether changes are needed.

13. Eliminate unsanctioned encampments by expanding sanctioned encampments, safe parking and tiny home villages.

14. In coordination with behavioral service providers, develop programs specifically oriented to people who are unhoused and need behavioral health and/or substance use disorder support and that ensure that people who are unhoused can receive periodic health evaluations and referrals to necessary services, including assistance in registering for health care coverage provided through Apple Health.

    a. Work with health care and behavioral health providers to identify programs that could be expanded to include services for people at risk of becoming homeless or who are unhoused. Work with homeless service providers and health care and behavioral health providers to include health/behavioral health components in homelessness

response programs.

15. Identify and implement strategies to increase the rate of financial gains among the homeless population.
    a. Work with Pierce County WorkSource and other employment organizations to provide information to the unhoused on employment suited for this population and training opportunities to pursue those employment opportunities.
    b. Work with organizations that provide financial management and training services to increase the number of unhoused individuals who increase cash income while homeless, thereby increasing their opportunities to obtain permanent housing.
    c. Utilize SOAR to increase access to and approval of SSI/SSDI and VA benefits.

Goal 5: Ensure Interventions are Effective for All Populations

Strategies:

1. Research and develop methods for implementing program changes to align with the needs of target sub-populations.

2. At least twice annually survey and/or host group discussions or focus groups with individuals and organizations from target sub-populations to identify concerns with the existing homeless crisis response system and needed program alterations or additional providers. Include compensation for participants. Analyze and publish the findings with recommendations for system improvements.

3. Annually evaluate how interventions and services to ensure referrals, enrollments and outcomes are being implemented and recommend program revisions for each target population as needed. Publish evaluation comparisons year over year.

4. By 2026, create a new independent or shared Ombuds office to investigate issues of system failure identified by people who are unhoused.

Goal 6: Ensure Adjacent Systems Address Needs of People Experiencing Homelessness or At Risk of Homelessness

[*Adjacent systems = those that serve people experiencing homelessness or who are at risk of homelessness but are not part of the formal homeless crisis response systems*]

Strategies:

1. By April 2024, contact adjacent system organizations to work with them and develop more coordinated communication among the CoC and those organizations.

2. Create or join existing workgroups to identify and implement best practices so individuals can more easily access services in adjacent systems.

3. Work with organizations in adjacent systems to develop and implement policies and procedures based on identified best practices.

4. Create or join existing workgroups to identify and implement best practices, including data sharing agreements, to assist and track individuals leaving institutional settings.

5. Coordinate with the Pierce County Behavioral Health Division to add housing and homeless specific metrics to their existing reports and to ensure the Behavioral Health Improvement Plan updates continue to identify gaps in capacity and effectiveness for people experiencing homelessness and create implementation plans to increase system alignment.

6. Partner with the Workforce Development system to identify gaps in effectiveness of workforce development system for people experiencing homelessness and work to close those gaps, ensuring availability of transitional employment programs that create pathways to self-sufficiency, including nontraditional job opportunities to address disability or other factors that affect standard employment circumstances.

Goal 7: Expand the Permanent Housing System to Meet the Need

[Note: The name of this goal suggests increased housing (# of units); but these are not addressing that. ==Consider rewording this goal to something like: Develop and implement programs that expand the potential of existing housing to be used by people at risk of becoming homeless.==]

Strategies:

1. Promote a new county-wide Shared Housing strategy for those unable to afford living alone. This could be a meaningful force-multiplier for success if implemented well.
   a. Expand shared housing to include all possible shared housing models, including social housing.
   b. Partner with a local non-profit to develop, or expand, a new shared housing web page to allow homeless service workers the ability to search for available spaces in their areas, and allow private residences, churches, and other members to create profiles for their available spaces based on client acuity, background checks, family status or sizes, case management requirements, and other safety parameters.
   c. Establish procedures and regulations to ensure that hosts and tenants both benefit from appropriate protections, which may vary with the type of shared housing.

2. Expand funding for Diversion Intervention to fully meet the need.

3. Expand funding for Rapid Rehousing Intervention to fully meet the need.

4. Create a dedicated housing voucher intervention for households experiencing homelessness and size existing housing voucher and Housing and Essential Needs programs to meet the need.

5. Size the capacity of the Permanent Supportive Housing system, including units and case management, to meet demand, using tenant-based and project-based programs, with a particular focus on projects that add new permanent housing at very low capital costs, such as hotel conversations and Community First! Style housing development projects.

6. Coordinate with affordable housing providers and local jurisdictions to develop 0-30% AMI and 30- 50% AMI housing dedicated to households exiting homelessness.

7. Size the Landlord Liaison Program to maximize access to the rental market, including using master leasing.

8. Facilitate movement from one housing intervention type to another to best serve the changing needs of clients as required supports increase or decrease, including sites with enhanced medical and behavioral health supports.

9. Develop one or more community villages of permanent supportive housing for chronically homeless individuals that provides housing, behavioral and substance use treatment services and meaningful employment opportunities in a thriving communal environment.

Goal 8: Improve CoC Capacity

Strategies:

These can be achieved by assigning work groups among CoC members with a mix of skills and representation according to the issue.

1. Provide annual training for CoC members that includes training on racial equity diversity, equity, inclusion; and how to apply Targeted Universalism to make concrete plans for how to implement its tenets throughout the system.

2. Analyze and implement methods of improving CoC applications and outcomes to increase HUD funding.

3. Establish and implement strategies to obtain community funding to support services not funded by HUD or other County resources.

4. Develop an annual process for evaluating Collaborative Applicant performance.

5. Analyze the homelessness response system to determine how to increase the number of people who exit to permanent housing and how to decrease the amount of time for clients to wait for permanent housing.

6. Work with community agencies to develop strategies for increasing clients' earned income.

7. Ensure that the CoC has broad representation that reflects racial diversity, representation by people with lived experience, and individuals with racial equity expertise.

Goal 9: Implement a Robust Public Education Campaign

Strategies:

1. Create a committee by June 2024 to plan and conduct regular public campaigns to correct damaging stereotypes about homelessness.
   a. Use economical methods such as train station posters, bus side banners, city park community boards, or short public TV PSA's.
   b. Feature heroes of the unhoused, showcasing and humanizing their goodness and

societal accomplishments. Include requests for testimonies of street heroism and unknown community help in future CoC Lived Experience surveys. It's important to inform the public of the many positive and ongoing accomplishments of the unhoused in their cities.

c.   Promote myth sheets about homelessness in the foyers of public facilities, such as Council chambers and city halls, similar to what has been done by Asian Anti-Hate campaigns.

d.   Highlight successes in addressing homelessness.

2.   Include public perception questions in future CoC surveys to track education results.

3.   Promote the awareness of homeless role-models to local school districts and Boards.

4.   Work with partners such as the Pierce County Coalition to End Homelessness and the Lived Experience Coalition to send a professional letter at least annually to the County's main media outlets on correct reporting about the unhoused.

5.   Implement a Cultural Competency Program, including features such as partner involved, evidence based talking points available for web download; a cultural slide-deck similar to the County's military deck; a list of lived experience organizations and individuals who can be contacted for information and discussion; and promotion of elected officials visits to shelters and sanctioned encampments to gain first-person knowledge of homelessness.

APPENDIX 1: GLOSSARY

211
211 is a simple, easy-to-remember phone number that offers access to all health and human services, serving the Pierce County area for people who need help. Individuals and families experiencing homelessness can call 211 to access Coordinated Entry.

ADJACENT SYSTEM
Systems such as health care and the workforce development that provide services to people experiencing homelessness but are not part of the homeless crisis response system.

AFFORDABLE HOUSING
Housing that a household can obtain for 30 percent or less of its income.

ADJACENT SYSTEMS
Adjacent systems are those that serve or interact with people experiencing homelessness or at risk of homelessness but are not part of the formal homeless system. Examples include the healthcare system, law enforcement, and the behavioral health system.

AREA MEDIAN INCOME
The area median income is the midpoint of a region's income distribution, meaning that half of households in a region earn more than the median and half earn less than the median. A household's income is calculated by its gross income, which is the total income received before taxes and other payroll deductions.

AT RISK OF HOMELESSNESS
A formal Housing and Urban Development definition. It is a household that is below 30 percent of the median area income, has insufficient resources to maintain housing, and meets one of 7 criteria for housing instability.

BEHAVIORAL HEALTH
A grouping together of mental health services and substance use services.

BUILT FOR ZERO
A methodology to end homelessness that relies heavily on data to monitor efforts and inform efforts to end homelessness by reaching functional zero.

BY-NAME LIST
A by-name list is a real time, up-to-date list of all people experiencing homelessness in the community that can be filtered by categories and shared across appropriate agencies. This list is generated with data from outreach, HMIS, federal partners, and any other community shelter and providers working within the homeless subpopulation.

CHRONICALLY HOMELESS

Chronic homelessness is a term used to describe people who have experienced homelessness for at least a year - or repeatedly - while struggling with a disabling condition such as a serious mental illness, substance use disorder, or physical disability.

CLEAN AND SOBER HOUSING

A model of housing that typically does not permit substance use on or off site. Urine analysis can be employed to monitor compliance. This model is often necessary for individuals exiting residential substance use treatment facilities to maintain sobriety. Also referred to as drug and alcohol free housing. See RCW 59.18.550.

CONTINUUM OF CARE PROGRAM

The HUD Continuum of Care (CoC) Program is designed to assist individuals (including unaccompanied youth) and families experiencing homelessness, and to provide the services needed to help such individuals move into transitional and permanent housing, with the goal of long-term stability. More broadly, the CoC Program 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 programs to the particular strengths and challenges in assisting homeless individuals and families within that community. Communities can apply to receive CoC funding.

CONTINUUM OF CARE COMMITTEE ("COC" OR COC COMMITTEE)

The CoC Committee is the unincorporated entity responsible for developing a plan to address homelessness, designating a Homeless Management Information System (HMIS) lead, and designing a Coordinated Entry system as part of its Homeless Crisis Response System. It also is responsible for preparing and submitting the annual application to HUD for funding to support plan implementation.

COORDINATED ENTRY SYSTEM

A coordinated entry system standardizes and coordinates the way households experiencing homelessness across the community are assessed for and referred to the housing and services that they need for housing stability.

COST BURDENED

A household is cost burdened if they pay more than 30 percent of income for housing expenses and severely cost burdened if they pay more than 50 percent of gross income for housing expenses.

CRITICAL TIME INTERVENTION (CTI)

CTI is a time-limited evidence-based practice that mobilizes support for society's most vulnerable individuals during periods of transition. It facilitates community integration and continuity of care by ensuring that a person has enduring ties to their community and support

systems during these critical periods. In Pierce County, an individual or family will be connected with a CTI Navigator who will help them navigate their transition to housing and build a network of resources from the time they are connected with CE and for a period of three to nine months, depending on their plan for exiting homelessness and degree of need. CTI is currently operating as a small pilot program in Pierce County.

DIVERSION
Diversion is a strategy intending to divert households from the Homeless Crisis Response System. It does so by helping them, through a Housing Solutions Conversation (see below}, identification of immediate alternate housing arrangements, and if necessary, connection with services and financial assistance to help them return to permanent housing. Diversion is implemented within the coordinated entry system.

EMERGENCY SHELTER
Emergency shelter includes any facility with the primary purpose of providing temporary shelter for all people experiencing homelessness or specific subpopulations. Most shelters limit shelter stays to 90 days.

EPISODIC HOMELESSNESS
Households that have experienced three or more homeless episodes in the past year, but do not meet the criteria for chronic homelessness.

FAMILY SUPPORT CENTERS
Community-based flexible, family-focused, and culturally sensitive facilities that provide programs and services based on the needs of the families. Services are many and can range from parenting skills courses and childcare to job training and mental health services. There are seven Family Support Centers in Pierce County administered by the Tacoma-Pierce County Health Department, and each is designed to meet the needs of the community around it.

FOUNDATIONAL COMMUNITY SUPPORTS (FCS)
FCS offers benefits for supportive housing and supported employment for Medicaid-eligible beneficiaries with complex needs. Benefits go to housing and employment providers to help vulnerable clients find and maintain supported jobs, and acquire and maintain stable, independent yet supportive housing.

FUNCTIONAL ZERO
A state where any person starting a new homeless episode has immediate access to shelter and a permanent housing intervention.

HOMELESS CRISIS RESPONSE SYSTEM
The programs that support household from the start of a homeless episode through entering permanent housing. It includes navigation services, shelter and permanent housing programs.

HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS)

An information system designated by the Continuum of Care Committee to comply with requirements prescribed by HUD. This system stores client information about persons who access homeless services in a Continuum of Care and is a core source of data on the population of people experiencing homelessness who engage with Coordinated Entry.

HOST HOME PROGRAM
A program that recruits and trains host homes/families to provide temporary, and in some cases long-term, homes to youth and young adults. Host home programs match participants with a host, provide services such as case management, and support and training to the host.

HOUSEHOLD
Household means all persons occupying or intending to occupy a housing unit. The occupants may be a family, two or more families living together, or any other group of related or unrelated persons who share living arrangements, regardless of actual or perceived, sexual orientation, gender identity, or marital status.

HOUSING AND ESSENTIAL NEEDS
This State funded referral program provides access to essential needs items and potential rental assistance for low-income individuals who are unable to work for at least 90 days due to a physical and/or mental incapacity.

HOUSING SOLUTIONS CONVERSATION
This short-term problem-solving technique, the core tactic for Diversion (see above), meets a housing crisis head on with the creativity and resources of the person experiencing the crisis. By helping them to leverage their resources - such as their family, friends, or faith communities - people can find no-cost or low-cost housing solutions at a critical moment. Once the issues are identified, their own solution can sometimes be paired with short-term rental assistance, a one-time bill payment, or help finding a job or addressing health and safety needs, providing support to help them maintain their current housing.

HUD (U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT)
The United States Department of Housing and Urban Development, which provides communities with resources for housing and to address homelessness. HUD requires communities to have a Continuum of Care Committee, a Collaborative Applicant, and to designate a HMIS Lead. HUD requires the CoC to implement and follow its policy guidance and to align with HUD's plan. HUD also requires communities to have Coordinated Entry, Prioritization, and to meet system-wide performance measures.

HUD-VASH (U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT – VA SUPPORTIVE HOUSING PROGRAM)
A collaborative program between HUD and the VA that combines HUD housing vouchers with VA supportive services to help veterans and their families experiencing homelessness find and sustain permanent housing.

INTERVENTION
Intervention is a general term to describe any type of program that works to meet the needs of households experiencing housing instability or living homelessness. Interventions can range from rent assistance to temporary shelter programs to long-term permanent supportive housing.

LANDLORD LIAISON PROGRAM
This is an innovative program that provides support to property managers/owners (landlords) who work with housing agencies in Pierce County. The program educates both tenants and landlords in operational etiquette and new housing related laws and policies and ensures that housing agencies continually offer support services to program tenants and respond rapidly to landlord concerns. The program offers Risk Mitigation Funds to landlords.

LITERALLY HOMELESS
A person who is literally homeless does not have a fixed nighttime residence and instead might sleep overnight in a temporary shelter or place not meant for human habitation.

MCKINNEY-VENTO HOMELESS ASSISTANCE ACT
The federal McKinney-Vento Act more broadly defines homelessness in an effort to provide protections and supports for students living in a variety of unstable housing situations. Homeless students are defined as those who lack "a fixed, regular, and adequate nighttime residence," and includes those that who are living in doubled up situations.

MCKINNEY-VENTO LIAISONS
McKinney Vento Liaisons are local homeless education liaisons responsible for ensuring the identification, school enrollment, attendance, and opportunities for academic success of students in homeless situations. By linking students and their families to school and community services, local liaisons play a critical role in stabilizing students and promoting academic achievement at the individual, school, and district level.

MEDICAL RESPITE
A shelter model providing additional medical support to medically fragile clients.

OPPORTUNITY COST
Opportunity costs represent the potential benefits misses out on when choosing one alternative over another. Allowing homelessness can prevent education for someone experiencing homelessness or prevent tourism in an area with visible homelessness. Those lost opportunities can be quantified.

OTHER PERMANENT HOUSING
An intervention similar to Permanent Supportive Housing, Other Permanent Housing provides priority housing to people experiencing homelessness and may or may not include case management.

PERMANENT SUPPORTIVE HOUSING (PSH)

Permanent Supportive Housing is long-term housing that provides supportive services for low income or homeless people with disabling conditions. This type of supportive housing enables special needs populations to live as independently as possible in a permanent setting. Supportive services may be provided by the organization managing the housing or coordinated by the housing provider and provided by other public or private service agencies.

POINT IN TIME COUNT

The annual count of sheltered and unsheltered homeless persons on a single night, which is conducted in Pierce County in January.

PUBLIC HOUSING AUTHORITY

Charted under state law, a housing authority is an autonomous, not-for-profit public corporation. This organizational structure allows housing authorities to work in conjunction with local governments and agencies to develop long-term housing strategies for communities. Though independently run, housing authorities are required to follow federal regulations. In addition, housing authorities receive a subsidy from the U.S. Department of Housing and Urban Development (HUD). Pierce County Housing Authority and Tacoma Housing Authority are the two local public housing authorities.

RAPID REHOUSING (RRH)

Services and supports designed to help persons experiencing homelessness move as quickly as possible into permanent housing with time-limited financial assistance.

RENTERS READINESS PROGRAM

Provides renters with basic tools to be good renters, helping them learn how to build healthy relationships and trust with landlords. The program is currently implemented by Associated Ministries.

RISK MITIGATION FUNDS

Reimbursement funds designed to incentivize and protect landlords who are willing to reduce screening criteria to rent to someone with limited income, poor rental history, or criminal history.

SAFE ENCAMPMENT

A shelter model where clients stay in tents in an encampment setting with hygiene facilities. Staffing can range from self-management models to 24x7 staffing with security and case management.

SAFE PARKING

A shelter model where clients stay in their cars in a parking lot setting with hygiene facilities. Clients typically only stay during the night, but some sites run 24x7. Sites are typically self-managed with some case management.

SECTION 8 PROGRAM
The common name for the Housing Choice Voucher Program, funded by the U.S. Department of Housing and Urban Development. The program allows private landlords to rent apartments and homes at fair market rates to qualified low-income tenants, with a rental subsidy administered by a local public housing authority. Eligible tenants typically pay 30 percent of their income and receive a "voucher" for the remainder.

SHARED HOUSING
A living arrangement where home providers offer accommodations to home seekers in exchange for an agreed-upon level of support in the form of financial contribution, assistance with household tasks, transportation, and/or companionship.

SHELTER
Shelter includes any facility with the primary purpose of providing temporary accommodations for people experiencing homelessness.

SOAR (SSI/SSDI OUTREACH, ACCESS, AND RECOVERY)
A program designed to increase access to Supplemental Security Income (SS)/Social Security Disability Insurance (SSDI) for eligible adults who are experiencing or at risk of homelessness and have a serious mental illness, medical impairment, and/or co-occurring substance use disorder.

STREET OUTREACH
Services focused on reaching out to unsheltered homeless individuals to connect them to emergency shelter, housing, or critical services.

SUPPORTIVE SERVICES FOR VETERAN FAMILIES (SSVF)
A supportive services program administered by the VA provides rapid rehousing and prevention funding to non-profit organizations and consumer cooperatives to assist with very low-income veterans and their families experiencing homelessness.

TARGETED UNIVERSALISM
A framework to pursue a shared goal with strategies designed for the unique needs of different groups.

TRANSITIONAL HOMELESSNESS
Transitional homelessness is the most common type of homelessness. These households enter a shelter or temporary housing system for only one brief stay. This situation could be the result of a catastrophic event or sudden life change.

TRANSITIONAL HOUSING
Temporary housing and supportive services for up to 24 months that serves households before they transition into permanent housing.

VHA DIRECTIVE 1162.05
This Veterans Health Administration (VHA) directive revises policy procedures for the Housing and Urban Development (HUD) Department of Veterans Affairs Supportive Housing Program (HUD-VASH) and sets forth the national authority and responsibilities for the Department of Veterans Affairs (VA) portion of administration, monitoring, and oversight of these services. (Amended October 2017.)

WRAPAROUND SUPPORTS
Services designed to address basic needs and the many and diverse aspects of individual wellbeing.

APPENDIX 2: PLAN DEVELOPMENT COMMITTEE

Rian Booker
Tom Breitenbauch
Tod Gunther
Faatima Lawrence
Courtney Love
Tamara Meade
Tiffany Speir
Cynthia Stewart
Ned Witting

With support from Alex Alvarado, Intern, UW Tacoma

APPENDIX 3: CONTINUUM OF CARE MEMBERS

(to be added)