



San Mateo County Continuum of Care (CoC)  
**CoC STRATEGIC PLAN ON HOMELESSNESS**

July 2022 through June 2025



# TABLE OF CONTENTS

- I. Introduction . . . . . 4**
  - A. Background and Purpose of This Plan . . . . . 5
  - B. Planning Process Overview . . . . . 5
- II. Landscape Analysis . . . . . 6**
  - A. People Experiencing Homelessness in San Mateo County . . . . . 7
    - Household Composition and Subpopulation Data . . . . . 7
    - Geographic Distribution . . . . . 8
  - B. San Mateo County’s Homeless Crisis Response System . . . . . 8
    - A System of Programs and Services for People Experiencing Homelessness . . . . . 8
    - New Efforts to Achieve Equity and Inclusion . . . . . 10
    - Partnerships and Collaboration . . . . . 11
    - System Infrastructure . . . . . 12
- III. Goals and Strategies . . . . . 13**
  - A. Vision . . . . . 14
  - B. Guiding Principles . . . . . 14
  - C. Goals and Measures to Track Progress . . . . . 15
- IV. Implementation and Evaluation . . . . . 22**



## I. INTRODUCTION

## A. Background and Purpose of This Plan

The San Mateo County Board of Supervisors is committed to preventing homelessness and ensuring anyone who is experiencing homelessness is supported with safe shelter and a pathway to housing. The Human Services Agency (HSA) is the County Department tasked with implementing this vision on behalf of the Board of Supervisors and the San Mateo County Continuum of Care Steering Committee (CoC), a diverse, cross-sectoral body that guides and shapes the countywide response to homelessness. HSA works in close collaboration with other County departments and community partners in these efforts.

In 2016, HSA published *Ending Homelessness in San Mateo County*, a five-year strategic plan for the County's response to homelessness. That Plan set a goal of reaching a functional zero level of homelessness by 2020 through a systems improvement effort aligned to national best practices and embedded in the local community context of San Mateo County. The sunset date for that Plan fell in the early part of the COVID-19 pandemic, and so the Plan was extended through June 2022.

This Strategic Plan builds upon and updates the 2016 Plan to set forth a vision and roadmap for the community's response to homelessness over the next three years. It is aligned with the Working Together to End Homelessness (WTEH) initiative being led by the County Executive's Office that is bringing together City representatives, service provider agencies, partner agencies, business representatives, community members, and other partners to craft a high-level framework for ending homelessness as a community. This Plan also satisfies the requirements of the State of California to develop a Homelessness Action Plan, a prerequisite for requesting funding under the State's Homelessness, Housing Assistance and Prevention (HHAP) program. The required HHAP elements of the Plan are attached in Appendix 1.

## B. Planning Process Overview

The process for developing this Plan brought together a broad range of community stakeholders, people with lived experience of homelessness, and experts from non-profit and governmental entities tasked with responding to homelessness. In April and May 2022, HSA facilitated the following input opportunities:



**Four topical input sessions with key stakeholders on (1) crisis response strategies; (2) housing solutions; (3) special populations of people experiencing homelessness; and (4) cross-system partnerships.**



**Four focus groups with people with lived experience of homelessness, who were either staying in emergency shelter or living unsheltered. These groups included single adults and families with children, and people from throughout the County geography, including the Coastside region.**



**One input session with stakeholders to review and refine draft goals and strategies for the Plan.**

*A summary of the input gathered can be found in Appendix 2. With technical assistance from our expert consultants at Focus Strategies, HSA also analyzed data from the Homeless Management Information System (HMIS), our bi-annual Point-in-Time (PIT) counts, and system performance data generated by the State of California's Homeless Data Information System (HDIS) to inform the drafting of goals and strategies for this Plan. The data analysis work underlying this Plan can be found in Appendix 1.*



## II. LANDSCAPE ANALYSIS

The development of this Plan was informed by a thorough analysis of the current landscape of homelessness in San Mateo County. HSA gathered and reviewed data on the population of people experiencing homelessness, trends in the growth of the population, and performance of our programs and the system overall. This section provides a brief summary of that landscape assessment. Additional information can be found in Appendix 1.

## A. People Experiencing Homelessness in San Mateo County

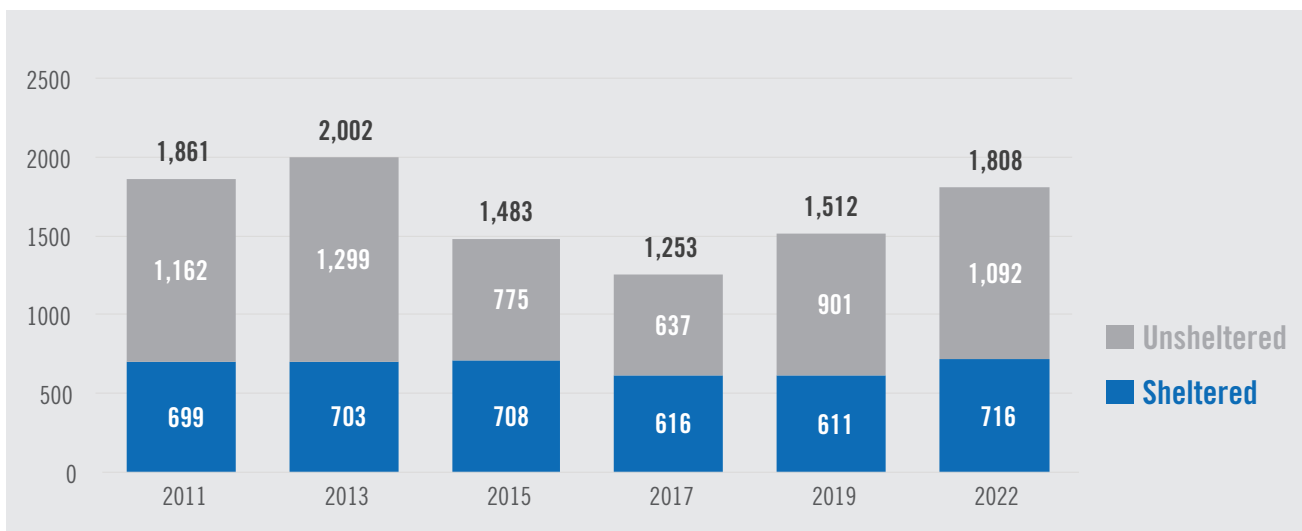
After trending downwards for several years between 2013 and 2017, the number of people experiencing homelessness has been rising over the past five years - driven by the continuing housing affordability crisis in San Mateo County and exacerbated by the economic challenges created by the COVID-19 pandemic.

The most recent complete PIT count, also known as a One-Day Count, of both unsheltered and sheltered people experiencing homelessness was conducted in February 2022. The 2022 Count found that there were **1,808 people experiencing homelessness in San Mateo County on the night of February 23, 2022**. This number includes:

- **1,092 unsheltered** homeless people staying on streets, in cars, in recreational vehicles (RVs), or in tents, and
- **716 sheltered** homeless people staying in emergency shelters and transitional housing programs.

This finding of 1,808 people experiencing homelessness represents an increase from the 2015, 2017, and 2019 counts, but a decrease from the counts in 2011 and 2013. The number of people experiencing unsheltered homelessness in 2022 is an increase of 191 (21%) compared to 2019. Since 2017, there has been a particularly large increase in the numbers of people living in RVs. The number of people staying in shelters in 2022 is an increase of 105 (17%) compared to 2019.

### One Day Count Over Time



## Household Composition and Subpopulation Data

The 2022 Count found:



The majority of people experiencing homelessness are single adults or people in adult-only households. Of the 1,248 households counted, 1,138 (91%) consisted of only adults, while 109 households (9%) were families with at least one minor child. There was one household counted consisting of a minor unaccompanied child.



The majority of people experiencing homelessness are male. Of the 1,808 total people counted, 1,211 were male (67%), 578 were female (32%), 10 were gender non-conforming (less than 1%), and 9 were transgender (less than 1%).



A significant number of the adults counted had long histories of homelessness and/or a disabling condition: 44% of were experiencing chronic homelessness, 32% had significant mental illness, and 21% had substance use disorders. Other populations represented included survivors of domestic violence (8% of all adults counted) and veterans (5% of all adults counted).

## Geographic Distribution

People experiencing homelessness in San Mateo County live throughout the county; however, there are some areas of the county that have larger numbers of unsheltered individuals.

### Racial and Ethnic Disparities in People Experiencing Homelessness

Black, Indigenous, and People of Color (BIPOC) have historically been over-represented among the people who experience homelessness in San Mateo County. Data from the Homeless Management Information System (HMIS) shows that:

- People identifying as Black/African American are 19% of those served in homeless programs but make up only 2% of the overall county population.
- People identifying as Native Hawaiian/Pacific Islander are 8% of those served in homeless programs but make up only 1% of the overall county population.
- People identifying as American Indian/Alaskan Native/Indigenous are 4% of those served in homeless programs but make up less than 1% of the overall county population.
- People identifying as Hispanic/Latinx are 34% of those served in homeless programs but make up less than 24% of the overall county population.

See Appendix 1 – Table 1 for additional data on people experiencing homelessness in San Mateo County.



## B. San Mateo County's Homeless Crisis Response System

Building upon the roadmap set out in the 2016 Strategic Plan, significant strides have been made in designing and implementing a robust system to respond to homelessness in San Mateo County. This section provides a brief overview of the programs, initiatives, and strategies in place that will provide the foundation for system improvement over the next three years. Appendix 1 – Table 2 provides additional data on the current system and the numbers of households that have accessed different types of services.

### A System of Programs and Services for People Experiencing Homelessness

The core of the homeless crisis response system is a set of coordinated programs and interventions designed to support each person who experiences homelessness along a pathway that leads to a housing solution.

This system is designed to serve all people experiencing homelessness, including responding to the unique needs of different subpopulations, such as families with children, undocumented households, youth, veterans, or survivors of domestic violence or human trafficking. The primary interventions offered are:



**Outreach and Engagement:** To end homelessness requires a concerted effort to identify and engage people who are unsheltered, particularly those living in encampments, vehicles, and other places not meant for people to live. Over the past five years, the County has invested in a re-design and expansion of countywide mobile outreach efforts to expand geographic coverage and hours of operation, as well as to provide more robust case management. In 2021, 1,183 households received outreach and engagement services.



**Shelter/Interim Housing:** Shelter is a critical element of the overall response to homelessness – offering people a safe place to stay where they can address their immediate needs and receive housing-focused case management to develop a plan to identify and move into permanent housing. Over the past several years, the County has significantly expanded shelter for adults, including the addition of new beds at the Maple Street and Safe Harbor shelters, planned expansion of the WeHOPE shelter, and new non-congregate shelters in Half Moon Bay and Redwood City in former motel structures. A new Navigation Center in Redwood City and an additional non-congregate shelter in the City of San Mateo are slated to be completed by the end of 2022. HSA has also worked intensively with the shelter provider agencies to improve the effectiveness of shelter services in helping residents exit to permanent housing destinations, including expanded training, improved connections to housing resources, and enhancements to housing-focused case management and housing support services at shelters. In 2021, there were 1,282 households served in shelter and interim housing programs.



**Housing Solutions:** While interim housing provides people with a short-term place to stay where they can be safe and access needed services, permanent housing solutions are needed for people to truly end their experience of homelessness.

- **Rapid Rehousing:** Provides medium-term rental subsidies, intensive housing location services, and case management services to help households secure and sustain housing. Over the past five years, HSA and partners have substantially expanded the inventory of rapid rehousing – from 127 beds in 2016 to 733 beds in 2021, a nearly 600% increase, by

increased funding resources including County Measure K funding. In 2021, 504 households received Rapid Rehousing assistance.

- **Housing Navigation:** In 2016, HSA partnered with the San Mateo County Housing Authority and a non-profit provider to launch a Housing Locator program. Housing locators help identified households who have a housing voucher with the housing search process, including identifying units, completing applications, and negotiating with landlords. This service has been particularly critical for people who are unsheltered and those for whom conducting a housing search is particularly difficult.
- **Permanent Supportive Housing (PSH):** Provides long-term housing subsidies combined with intensive services to households with the highest needs, particularly people who have significant disabilities. The inventory of PSH has been steadily growing, driven primarily by the availability of a variety of federal funding sources leveraged through the County Housing Authority. In 2021, there were 1,208 households served in PSH.



**Prevention Assistance:** The County has continued to support the Core Service Agencies' emergency financial assistance programs to support housing stability and prevent homelessness among community members who are experiencing challenges in maintaining their housing. During the COVID-19 pandemic, there was a large uptick in the number of households needing support to pay their rent. As the pandemic eases, emergency financial assistance programs will continue to be critical to helping community members maintain housing and avoid entering homelessness whenever possible. In 2021, there were 1,891 households that received prevention assistance.



**Targeted Programs for Special Populations:** There are several subpopulations of people who experience homelessness who have specific needs and for whom tailored strategies are essential, including:

- **Veterans:** San Mateo County has made a commitment to end veteran homelessness, and to that end, HSA launched the Vets at Home project in partnership with the local offices of the U.S. Department of Veteran Affairs (VA), homeless service providers, and the County's Veterans Services Office. The Vets at Home master list of veterans and collaboration between partner agencies has improved the ability to identify a housing solution for each veteran on the list, including through Veterans Affairs Supportive Housing vouchers (VASH) or Supportive Services for Veteran Families rapid rehousing program (SSVF).
- **Families with Children:** The San Mateo County Board of Supervisors is committed to ensuring that San Mateo County families with minor children do not experience unsheltered homelessness. Over the past several years, HSA has redesigned the homeless crisis response system for families to prioritize temporary shelter beds for those who are living outside or in vehicles and also offering prevention and diversion assistance to those at-risk of homelessness. Additional rapid rehousing capacity has also been added to the system so that families have a pathway to leave shelter and secure housing in the private market. With the large increase in people staying in RVs, including many families, the system is responding with mobile outreach and safe parking programs.
- **Youth:** HSA has taken steps to ensure there is capacity within the system to provide youth-specific shelter for those young people who need it, and they may also access the adult shelter system if they so choose. Youth-specific housing programs have also been expanded, and in 2020 there was an addition of a new rapid rehousing program specifically for young adults.

## New Efforts to Achieve Equity and Inclusion

A variety of efforts are underway to advance equity and inclusion in the homeless crisis response system in San Mateo County.



**Focus on People with the Highest Needs:** The homeless crisis response system has shifted significantly to better prioritize available resources for those individuals and families who have the highest needs and who have had the longest histories of homelessness. The Coordinated Entry System was launched in 2016 to provide a consistent and streamlined access process for both emergency shelter programs and housing programs, by ensuring that households with the greatest needs receive the most appropriate assistance available. Over the past several years, the CE system has undergone evaluations, and the findings from those studies have been used to implement refinements and improvements to the system.



**Advancing Racial Equity in the Homeless Crisis Response System:** In San Mateo County, as is the case throughout California, people who experience homelessness are disproportionately Black and Latinx. HSA has been reviewing homeless system data with a racial equity lens, reporting out on these indicators to stakeholders, and inviting provider partners to examine racial disparities in their program level data. The CoC Steering Committee recently seated a new standing Committee on Racial Equity which will be providing guidance on a range of initiatives to understand the causes of these disparities and implementing strategies to address them, including through improved training of provider organizations and greater involvement of people with lived experience in decision-making about the homeless crisis response system.




**Involving People with Lived Experience of Homelessness in System Planning:** HSA and the CoC Steering Committee has been intensifying focus on involving people who are currently or have previously experienced homelessness in the evaluation, design, and operation of the homeless crisis response system. Centering the experiences of people with lived expertise will help ensure the homeless crisis response system is more equitable, person-centered, trauma-informed, and responsive to what people who interact with the system know that they need.


## Partnerships and Collaboration

Partnerships and collaboration across systems, sectors, and jurisdictions is a central feature of the homeless crisis response system. Deepening these partnerships has been a priority for HSA and the CoC over the past several years.




**Collaboration with Health Programs to Address Health Challenges for People Experiencing Homelessness:** Collaborations with programs such as Street Medicine, Mobile Clinic, Behavioral Health and Recovery Programs, Whole Person Care, and Healthcare for the Homeless and Farmworker Health Program help people experiencing homelessness to access health services. During the COVID-19 pandemic, these collaborations between the homeless crisis response system and health providers are especially critical to addressing COVID-19 risk for people experiencing homelessness and the programs that serve them. The County has worked with a wide array of stakeholders to develop a San Mateo County Recovery Initiative to promote inclusive recovery and leverage the collective capacity of the community to build a more equitable, healthy, and connected community, including a focus on vulnerable populations.


 **Cross-System Partnerships:** Partnerships with other County systems are crucial to ensuring that people with multi-system involvement are supported with a holistic approach and do not fall between the cracks in systems of care. One such example is HSA's successful diversion project for people leaving the County hospital or a County correctional facility to help them identify a housing solution from within their existing social support networks or through a local housing program, rather than being discharged to the streets or shelters. HSA also maintains a strong partnership with the Department of Housing (DOH) to expand affordable housing opportunities for people who are extremely low income, including those who are experiencing homelessness.


 **Collaboration with Cities:** The County's collaboration with cities is critical to the work to prevent and reduce homelessness, as cities play critical roles from providing funding and support to emergency financial assistance/homeless prevention programs, to increasing availability of affordable housing units, to law enforcement partnerships with homeless outreach programs, and many other ways that city programs interact with the homeless crisis response system.

## System Infrastructure

A final crucial element of the homeless crisis response system in San Mateo County is having the infrastructure needed to support data gathering and evaluation, system planning, and capacity building and training for non-profit providers and other partners.

 **Training to Implement Best Practices:** HSA and the CoC are committed to developing a homeless crisis response system that is person-centered, trauma-informed, and housing-focused. To help advance this goal, HSA has invested in enhanced training and technical assistance for provider partners, covering topics such as housing first principles and practices, property owner engagement, housing-focused case management, diversion, and compliance with federal requirements, such as those relating to equal access and implementation of the Violence Against Women's Act (VAWA) in homeless system programs.

 **Increased Use of Data for Continuous Improvement:** High quality data collection and analysis is essential for understanding what the homeless crisis response system is accomplishing, identifying areas in need of continued improvement, and making decisions regarding funding of various program types. Over the past five years, HSA and homeless provider agencies have been building their capacity for data analysis and evaluation, including work groups to discuss project and system performance.

 **Strategies to Maximize Impact of the Homeless Crisis Response System with Uncertain Funding Sources:** The County continues to invest significant local funding to support programs that work to reduce and prevent homelessness. Federal and state funding are also critical to the continuation of the programs within the homeless crisis response system. There has recently been an increase in state and federal funding, although much of this is via one time, time-limited grants. Given the COVID-19 pandemic and the economic uncertainty within the County and throughout the state and country, the funding availability within various funding sources is uncertain.



### III. GOALS AND STRATEGIES






Based on the landscape analysis as well the input gathered from stakeholders, this Plan sets out the primary goals and strategies that will organize the community's response to homelessness over the three-year period from July 2022 to June 2025. Implementation of these strategies is dependent on resource availability and also may be impacted by context including changing needs or other emerging issues in the community.

This Plan also sets out measurable outcome goals that will be used to track progress in meeting the Plan's objectives. Additional information about the outcome goals and strategies can be found in Appendix 1 – Tables 4 and 5.

## A. Vision

The high-level goal of this Plan is that every person experiencing homelessness in San Mateo County can be sheltered in an emergency shelter or in permanent housing. This concept of functional zero homelessness incorporates the vision that homelessness will be a rare, brief, and one-time occurrence:

-  **Rare:** Whenever possible, the system will prevent vulnerable individuals and families from falling into homelessness.
-  **Brief:** The system will strive to ensure that any household experiencing a crisis of homelessness returns to housing within 30 days.
-  **One-time:** Individuals and families that secure housing through the homeless crisis response system will not return to homelessness.

## B. Guiding Principles

The Plan is informed by six key principles:

- 1. Systems Orientation:** The goal is to foster a system that responds effectively and rapidly to the crisis of homelessness. Within the system, all stakeholders, programs, and organizations work together in coordination to accomplish a clear set of shared objectives. The objective of the homeless crisis response system is to ensure that anyone who is homeless quickly returns to stable housing.
- 2. Data-Informed:** The system is data-informed. Plans are based on an analysis of the current system and the best assessment of what is and what is not working. System- and program-level performance is measured, then results are used for continuous quality improvement. Funders of the system view their role as stewards of community resource who are responsible for understanding what results their investments are achieving and ensuring resources are used in a way that maximizes impact.
- 3. Person-Centered:** People experiencing homelessness are at the center of the system design. Their views are sought out and their voices are welcomed. The system is designed to ensure easy and streamlined access for everyone, particularly those who experience the greatest challenge navigating the complexities of publicly funded services and programs. Programs within the system adopt fair, transparent, and understandable policies regarding how assistance is accessed and how these policies respect client choice and self-determination.

4. **Housing First:** People experiencing homelessness need housing above all else. Strategies and interventions must focus on returning individuals and households to safe, secure housing that they can use as a starting point to address other issues.
5. **Equity Oriented:** The homeless crisis response system acknowledges the barriers to housing and resource connection that disproportionately impact people by race, ethnicity, gender, and other identities. The system and programs utilize intentional policies and practices to reduce these disparities and advance equity in system experiences and outcomes.
6. **Context-Specific and Aligned with Best Practices:** The Plan is specific to the local context and priorities. It is tailored to reflect the specific strengths and challenges of San Mateo County. At the same time, it is aligned with evidence-based practices and lessons learned from the field, as well as state and federal policy direction.

## C. Goals and Measures to Track Progress

The centerpiece of this Plan is a set of six goals that articulate what HSA and the CoC seek to accomplish over the next three years. These goals will organize the community’s response to homelessness and provide a methodology to track progress. For each goal, there is a related set of outcome measures and targets that are requirements for the HHAP Action Plan. While this Strategic Plan will cover the period from July 2022 to June 2025, the HHAP goals cover from July 2021 to June 2024. Additional details regarding the HHAP outcome goals can be found in Appendix 1 – Table 4.



### **Engage and support people who are unsheltered to transition to interim housing, permanent housing, or other places where they can access needed services and supports.**

This goal articulates a commitment to meeting the needs of people who are unsheltered, meaning they are living outside either on the street, in tents, in encampments, or in vehicles. While ideally each unsheltered person would be able to move directly into permanent housing, emergency shelter and other forms of interim housing represent a critical intervention that meets an immediate need for safety and connections to services and housing assistance. The San Mateo County Board of Supervisors is committed to reaching a functional zero level of homelessness, where every unsheltered person in San Mateo County who chooses assistance can be sheltered in an emergency shelter or in temporary or permanent housing. Having sufficient shelter capacity and providing housing-focused services in shelter is a critical part of reaching functional zero homelessness.

#### **Results:**

- Achieve functional zero, where every unsheltered homeless person in San Mateo County can be immediately sheltered in an emergency shelter, or in temporary or permanent housing.
- The number of people experiencing homelessness will decrease.
- Homeless outreach programs will assist a larger number of people to secure shelter and permanent housing.

**GOAL****2****Permanently house people experiencing homelessness by increasing the capacity of the homeless crisis response system to provide housing solutions.**

To end their homelessness, each person who is unhoused will need to secure permanent and stable housing. The capacity of the homeless crisis response system in San Mateo County to provide housing solutions has been increasing year after year but is still not sufficiently scaled to meet the need. Over the next three years, HSA, in partnership with the Department of Housing, cities, and non-profit partners will continue prioritizing available resources to expand housing solutions for people experiencing homelessness through the development of new units and by identifying funding for more rental subsidies to support access to the existing rental inventory. The system will also provide services to support people to secure housing outside the homelessness response system – such as moving in with friends or family, securing a shared housing solution, or gaining enough income to rent an unsubsidized unit.

**Results:**

- Increase the number of people exiting homelessness into permanent housing.
- Decrease the length of time people experience homelessness.

**GOAL****3****Prevent people from experiencing homelessness through early intervention, stabilization services, and financial assistance for households with housing instability.**

A critical strategy to reduce the number of people experiencing homelessness is to identify people who are at imminent risk of becoming homeless and provide interventions to help them remain housed. This includes people who may be cycling back and forth between institutions (e.g., jails, hospitals, and treatment programs) and homelessness, people who have been placed into permanent housing but need additional services to prevent a return to homelessness, and people with extremely low incomes and other challenges that make it difficult to pay their rent and avoid eviction.

**Results:**

- Decrease the number of people who become homeless for the first time.
- Decrease the number of people who return to homelessness after exiting homelessness to permanent housing.





**GOAL  
4**

**Advance equity by identifying and addressing disparities in who experiences homelessness, who accesses the homeless crisis response system, their experiences with the system, and the outcomes of the system.**

Black, Indigenous, and People of Color (BIPOC) in San Mateo County are more likely to experience homelessness than White people. While these disparities are lower when considering the race and ethnicity of people who access the homeless crisis response system and the outcomes of the system, there are still significant inequities to be addressed. Over the next three years, HSA, the CoC, and all the partners in the system will deepen understanding of the causes of disparities through more intensive information gathering and analysis, provide training to increase skills and knowledge among provider organizations and system partners, and increase representation of people with lived experience in CoC and agency leadership.

**Results:**

- Racial and ethnic disparities in who experiences homelessness will be reduced.



**GOAL  
5**

**Listen and respond to the voices of people with lived experience of homelessness to enhance person-centered approaches in the homelessness response system.**

Fostering a system that is person-centered and responsive to the needs and goals of people who experience homelessness requires meaningfully involving them in decision-making about system and program design and implementation. People who have experienced or are currently experiencing homelessness have unique insights that can help inform the development of policies and programs to improve homelessness response. A priority for the next three years will be to continue developing more robust input processes and structures for involving people with lived experience in developing solutions.

**Results:**

- Increased involvement by people with lived experience in design, implementation, and evaluation of the homelessness response system.

**GOAL**  
**6**

**Use data for continuous quality improvement and service coordination.**

Robust data analysis and evaluation are essential to ensure that efforts to address homelessness achieve their intended impact. Analysis of performance data helps to identify inefficiencies or areas in need of improvement and develop solutions. Over the course of the next three years, HSA will continue to gather and analyze data from the Clarity HMIS system and explore ways to expand cross-system data sharing and analysis, including real-time sharing of client data with appropriate privacy safeguards, with the goal of improving outcomes for people with complex needs who are involved with multiple systems of care.

**Results:**

- Continued refinement and deepening of data gathering and analysis capacity.
- Improved service coordination for clients involved in multiple system through real-time data sharing.

**D. Strategies to Accomplish Goals**

This section outlines the high-level strategies that the HSA, CoC, and partners will deploy over the next three years to achieve the goals set forth in the Plan. Implementation of the strategies detailed in this section is dependent on the availability of resources to fund the identified initiatives and projects. Additional details on some high priority, measurable strategies can be found in Appendix 1 – Table 5.

**GOAL**  
**1**

**Engage and support people who are unsheltered to transition to interim housing, permanent housing, or other places where they can access needed services and supports.**

- a. Continue existing street outreach programs and implement targeted expansions to further cover County geography, offer services after hours and on weekends, and deepen connections and collaborations with health and behavioral health services.
- b. Refine and fine-tune connections between street outreach programs and Coordinated Entry access points to streamline access into services for people who are unsheltered.
- c. Enhance data collection by outreach teams to increase understanding of numbers and characteristics of people who are experiencing unsheltered homelessness.
- d. Expand emergency shelter bed inventory for adult-only households, including completion of the Navigation Center in Redwood City. Continuously analyze data to ensure inventory of shelter for adults is right-sized.
- e. Maintain inventory of emergency shelter and transitional housing beds for families, youth, and domestic violence survivors. Continue analyzing data to ensure inventory of shelter for these populations is right-sized.

- f. Offer a range of shelter options and models, including both congregate and non-congregate settings.
- g. Continue and enhance Housing First approaches in emergency shelter programs – including low barriers to entry, 24/7 operations, voluntary service participation, and housing-focused services and supports.
- h. Scale up existing programs and create new programs providing nimble, intensive, wrap-around service for highly vulnerable unsheltered people who have multi-system involvement and/or are ineligible for some shelter programs.

## GOAL 2

### **Permanently house people experiencing homelessness by increasing the capacity of the homeless crisis response system to provide housing solutions.**

- a. Prioritize developing new housing units targeted to people who are experiencing homelessness and/or who are Extremely Low Income (incomes at or below 30% of Area Median Income).
  - i. Leverage the County’s Affordable Housing Fund (which consists of a combination of local sources like Measure A/K and State sources managed locally like HHC, MHSA, NPLH, PLHA) to continually add new units targeted to ELI households and people experiencing homelessness.
  - ii. Secure funding to acquire and rehabilitate motels for permanent supportive housing through future Project Homekey rounds.
  - iii. Use the Housing Authority’s HCV project-basing authority to incentivize development of new units for people experiencing homelessness.
  - iv. Explore creation of new Local Operating Subsidy (LOSP) program to provide a local source of subsidy for deeply affordable units.
  - v. Explore innovative construction methods and models such as modular units.
  - vi. Identify sources to develop housing for specific populations impacted by homelessness – particularly older adults who need medical and behavioral health support.
- b. Maintain and expand permanent housing voucher programs for people experiencing homelessness, e.g., CoC-funded PSH, EHV, VASH, FUP, Mainstream Vouchers. Introduce more flexibility to transition people to different levels of support or phase out support as appropriate. Create voucher programs with simplified eligibility criteria and process (e.g., EHV).
- c. Analyze the need for Rapid Rehousing (RRH) slots and continue adding to the system inventory as needed. Identify strategies to stabilize RRH households that need additional support (e.g., with longer subsidies, options to transfer to permanent supportive housing).
- d. Evaluate CE policies and tools for matching people to permanent supportive housing and rapid rehousing to identify whether the matching process is functioning as intended and revise as needed.
- e. Assess need for housing search services and scale up as needed to serve more households that need support with identifying units, completing housing applications, and negotiating with property owners. Explore dedicated housing search services for special populations such as DV survivors and veterans.
  - i. Continue and enhance Housing First approaches in permanent housing programs – including low barriers to entry, voluntary service participation, and housing-focused services and supports.

- ii. Identify innovative housing solutions for populations that have the greatest barriers to housing – people with complex health needs, older adults, people with criminal histories, and people who are undocumented.
- iii. Leverage Cal-AIM resources to provide housing supports.
- iv. Strengthen partnerships with programs providing employment and training services for experiencing homelessness who have significant employment barriers, such as NOVA/WIOA programs. Connect eligible households to income supports such as SSI.
- v. Deepen connections between health services and homeless crisis response system to expand housing access and support housing retention.

**GOAL**  
**3**

**Prevent people from experiencing homelessness through early intervention, stabilization services, and financial assistance for households with housing instability.**

- a. Refine strategies to prevent discharge from institutions to homelessness, including diversion services for people exiting jails and hospitals.
- b. Partner with school districts to identify families at risk of homelessness and ensure they are connected to available prevention services.
- c. Provide the right level of case management and clinical services, matched to what participants need, for people who are housed – particularly people who are chronically homeless who have recently secured housing (to prevent returns to homelessness).
- d. Maintain system capacity to provide emergency financial assistance to help households maintain their housing.
- e. Explore strategies around using data to target prevention assistance to households most likely to experience an episode of homelessness.

**GOAL**  
**4**

**Advance equity by identifying and addressing disparities in who experiences homelessness, who accesses the homeless crisis response system, their experiences with the system, and the outcomes of the system.**

- a. Convene quarterly meetings of CoC Racial Equity Committee to guide development and implementation of strategies to advance equity, including:
  - i. Qualitative data gathering (e.g., interviews, focus groups, etc.) to identify and understand causes of racial and other disparities in the system.
  - ii. Developing and releasing regular data reports.
  - iii. Providing training and technical assistance to homeless crisis response system providers.
  - iv. Increasing representation of those with lived experience in CoC and agency leadership.

**GOAL****5****Listen and respond to the voices of people with lived experience of homelessness to enhance person-centered approaches in the homelessness response system.**

- a. Create regular, ongoing processes for gathering input from people experiencing homelessness and involving them in decision-making on homeless crisis response system implementation (e.g., focus groups, surveys, a lived experience advisory group), including staff working within the system who have had experiences of homelessness.
- b. Assess and identify how to streamline access processes for services, treatment, and shelter so that people can more immediately access the services and supports they need when they are ready to reach out for help.
- c. Enhance “customer service” orientation throughout the system.
- d. Build partnerships, collaboration, and communication between providers and across systems to provide more nimble, responsive, and coordinated assistance for people who are experiencing homelessness.
- e. Scale up training programs for agency staff to build capacity to deliver trauma-informed, client-centered services.
- f. Review existing grievance processes.
- g. Find ways to measure quality of engagement, not just number of contacts that service providers have with people experiencing homelessness.

**GOAL****6****Use data for continuous quality improvement and service coordination.**

- a. Continue using HMIS/Clarity and other systems to gather and analyze data to understand what the homeless crisis response system is accomplishing, identify areas in need of continued improvement, and make decisions regarding funding of various program types.
- b. Expand capacity of data systems to provide real time information at the client level to support service coordination between service providers and across systems.



## IV. IMPLEMENTATION AND EVALUATION





This Plan lays out a set of three-year goals and performance targets, and outlines the broad strategies that HSA, the CoC, and County partners will implement to achieve the Plan’s objectives. The Center on Homelessness team will be the lead entity responsible for operationalizing these strategies in close collaboration with County leadership, other County programs, and community partners – including through managing local investment strategies and funding processes for elements of the homeless crisis response system, leading the development of system level policies, and convening and staffing the CoC and its sub-committees. HSA will conduct data analysis to assess progress towards the measurable goals in this Plan, and regularly report out these results to the CoC Steering Committee and community partners.

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For more information, please visit <https://www.smcgov.org/hsa/center-homelessness>



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