

HOUSING OUR HOMELESS DISCUSSION SYNOPSIS

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About

- **The County of Ventura** administers grant funding to support services to the homeless population.
- **Turning Point Foundation** is a nonprofit that provides transitional housing, financial support, rapid rehousing, continuum of care, mental health, wellness recovery, employment training services.
- The **Backpack medicine team** provides rapid response and regular outreach to encampments, farmworkers, and shelters.
- **One-stop centers** are located throughout the County to assist individuals with a variety of needs, providing a coordinated entry system, and assessing programs eligibility. Offers both guided help and self-serve. Has additional veteran, youth, domestic violence, etc. service coordination.

Current

- Unsheltered persons have lower regular access to healthcare and daily cleanliness, and a greater occurrence of depression and substance abuse.
- To prevent Covid outbreak in homeless population two programs were implemented:
 - **Project Room Key** provides funds to lease entire motels to house unsheltered, higher risk individuals. Served over 400 people since March at four different hotel sites. With reopening, property owners are unwilling to lease out their entire site, so assistance has transitioned to motel vouchers.
 - **Project Home Key** is a state allocation to help with acquisition and conversion of hotels to permanent supportive housing...e.g. Mercy Housing in Oxnard, Housing Authority-Ventura on the Avenue.
- Effect of Covid on homeless populations:
 - Varied by community with some showing an uptick and others lower because of Project Room Key and unemployment benefits.
 - Are seeing new homeless individuals; eviction protections are directly tied to covid19 impacts (health or employment) and does not protect non-covid issues. Most grant funding has strict requirements with a long process to intervene and prevent eviction.
 - Still have 75% of homeless that is unsheltered.
 - Often unsheltered encampments have less Covid risk because they are removed from population and more spread out. Only 13 homeless have tested positive for Covid in the County.
- Effect of Covid on providing services to the homeless
 - Lower occupancy mandated in shelter facilities to prevent spread.
 - Non-congregate shelters has been FEMA funded (an atypical source of funds) as well as some state recourses such as "Project Room Key".
 - New safety protocols for delivery of services, including physical distancing.
 - Backlog of cases because can't meet face-to-face and have to rely on phone, text, messages. Harder to assess needs and provide care. Still trying to figure out how to connect for mental health.
 - Restaurant style food service and extra cleaning in shelters and transitional housing.
 - Foresee lower state resources post-Covid because of overextension during Covid.
- Good current coordination between service providers: County Continuum of Care, Behavioral Health, Health Services Agency, various healthcare systems, Turning Point, Mercy, Interface (211), etc.

Future

- Need to capitalize on the current opportunity to expand services, outreach, re-housing homeless individuals because new Covid-related programs.
- Need to respond to homelessness every day the way we respond in a disaster or public health emergency.
- Need more affordable units to re-house; one of the biggest challenges in the County.
- Prevent homeless by helping with rent, etc. Expand programs at state and federal level
- Expand outreach on access services and the One-stop centers...currently marketing thru backpack services and various websites (Continuum of Care, County agencies, 211, etc.). Reach out via nonprofits, churches, mission outreach, etc.
- Find places for people needing higher level of care, and people leaving Project Room Key.
- Have policy makers come down and see what is really happening and assess needs from the ground.
- Need community education regarding homelessness to destigmatize: why, what can be done, etc...
- Support partnerships, co-mingle resources, and develop creative ways for community support.
- Challenges will be less if we can focus on housing, moving people out of shelter into supportive affordable homes. Advocate for a variety of housing placement models: board and care, reconnect with family, ADU, supportive, etc.
- Address designing new shelters, centers and program services in anticipation of future health concerns.