

# The Shelter Providers Network of Clallam County

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*In partnership since 1989*

*Informed and active citizens, joining together to explore common problems and identify shared common goals, can resolve the tough issues that confront our communities, our nation and our world.*

Clallam County League of Women Voters, 2/16/05, in recognition of county commissioners and other elected officials.

## Developing a 10 Year Plan to End Homelessness in Clallam County

Homelessness in Clallam County has become a growing concern, especially to those who provide emergency shelter and services, public housing assistance and rental assistance vouchers, to the business community, law enforcement, and medical and mental health providers. We are at risk of having a permanent homeless population on our streets.

In January 2005 the second point-in-time count of the homeless was completed. In Clallam County, 1,050 homeless individuals were identified and surveyed:

- 667 individuals in Port Angeles and central Clallam County,
- 322 in Forks and the West End and
- 63 in Sequim and East End of Clallam County.

Countywide, 398 (38%) indicated they had physical, medical or mental health disabilities.

In answering the question "what situations caused you to become homeless?"

- 257 respondents (25%) checked drug or alcohol use,
- 234 (23%) were unable to pay rent or mortgage and
- 263 (26%) had experienced family break-up or domestic violence.

Of those surveyed during the point-in-time,

- 237 of those surveyed were minor children.
- There were 334 single homeless men,
- 131 single homeless women, and 157 families with children.
- 160 individuals were living out of doors or in vehicles.
- 74 of the homeless surveyed were veterans.

**Questions that need answers:** In developing a 10 Year Plan, we have to choose where to focus: on all homeless, on the "chronically homeless," or on families with children. Is it more important to increase housing units or to increase services? How will we house those who need permanent support? Can we calculate the costs of such a plan and can we demonstrate the savings in reduced demand for emergency medical services, mental health and psychiatric treatment, shelters, jails and prisons?

**The Planning Process in 2004:** The Shelter Providers Network (the local Continuum of Care) began the process of answering those questions and developing a ten-year vision in March 2004. The Shelter Providers have been meeting and planning since 1989; they have an outstanding record of identifying gaps in services or housing and planning needed projects, including the Homestead Apartments, Sunbelt Apartments, the Lee Hotel, Evergreen Family Village, the Serenity House Single Adult Emergency Shelter and the Dream Center for homeless youth.

But in 2004, they attempted to look beyond projects to identify permanent solutions for homelessness.

**Reviewing and revising the draft:** The draft plan to end homelessness in Clallam County by 2014 is now being submitted to stakeholders in the community, soliciting feedback, improved strategies, creative solutions and new partners. Ultimately we will develop a *detailed action plan to implement the strategies* and a *financial blueprint* to describe the resources needed and the costs and benefits of the plan.

Commitments from city governments and the county are crucial to success. We seek long-term commitment, leadership and the willingness to engage diverse stakeholders from mayors, city councils and commissioners.

Further, we believe the planning process should include business and civic leaders, law enforcement officials, school districts, the United Way, housing developers, hospital administrators, churches, service providers and the homeless themselves.

**Part of a bigger picture:** Across our county, and our state, similar planning processes are ongoing or already complete. In Washington State, Seattle has just completed and published their plan; Tacoma went public with a finalized plan last winter and is now in the implementation stages. Rural counties across our state are working to create or revise viable plans.

In the Washington State legislature, bills have been written this year to mandate such a planning process, at the county level, with a coordinated 10 Year Plan at the state level. In the Senate, *Bill 5767* calls for 10 Year Plans to end homelessness. In the House, *2SHB2163* describes an ambitious plan to end homelessness, with counties taking the lead. This bill establishes a funding source. SHB 2163 has passed in the House and will next likely go to Senate Financial Institutions & Housing.

### **The cost of homelessness in the community:**

Homeless providers have learned that 10% of the entire homeless population will ultimately consume over 50% of the resources (Burt, Laudan & Lee, 2001.) Chronically homeless individuals are heavy users of expensive public resources, including emergency medical services, psychiatric treatment, detox facilities, shelter and law enforcement. Other research has found that providing housing actually saves money- a mentally ill homeless person uses \$41,000 annually in publicly funded services; putting that person into supportive housing can decrease those costs by \$16,000 (Riley, 2004.) This was confirmed by a recent study by Portland State University showing that homeless people spend 65% less time in hospitals and visited the emergency room 51% less once they moved into permanent supportive housing.

## How can we make the homeless system work better?

The housing continuum in Clallam County is well established and functions fairly efficiently for a portion of the households experiencing homelessness. But for many individuals and families, the system is a closed cycle, as they shuffle from service to service to back to the street. The focus in this planning process is this population and our intent is to discover opportunities, or doors, through which they can exit homelessness and obtain permanent housing.

The planning process in Clallam County is founded on seven principles:

- We will address **all homeless populations** in our community, including the chronically homeless, families with children and youth.
- We will adopt **strategies that fit our local needs and address our local priorities**, recognizing that there may be different priorities in Sequim, Forks and Port Angeles and that they all need to be addressed.
- Planning goals, strategies and outcomes must be determined in a **coordinated, collaborative** manner and designed to serve a diverse population.
- Our planning will concentrate on strategies that offer **measurable results** that are **sustainable and financially feasible**.
- We will be **assertive in identifying resources, innovations, and best practices** at the state and federal level.
- We will **track our outcomes and be data-driven** in monitoring, modifying and improving the plan.
- We will **engage our local community** over this issue, looking for creative partnerships and clear channels of communication regarding strategies to end homelessness. We will regularly report our progress to the community at large.

## Four actions that will get results.

To achieve our goal of eliminating homelessness in Clallam County by 2014, we must move on more than one front simultaneously.

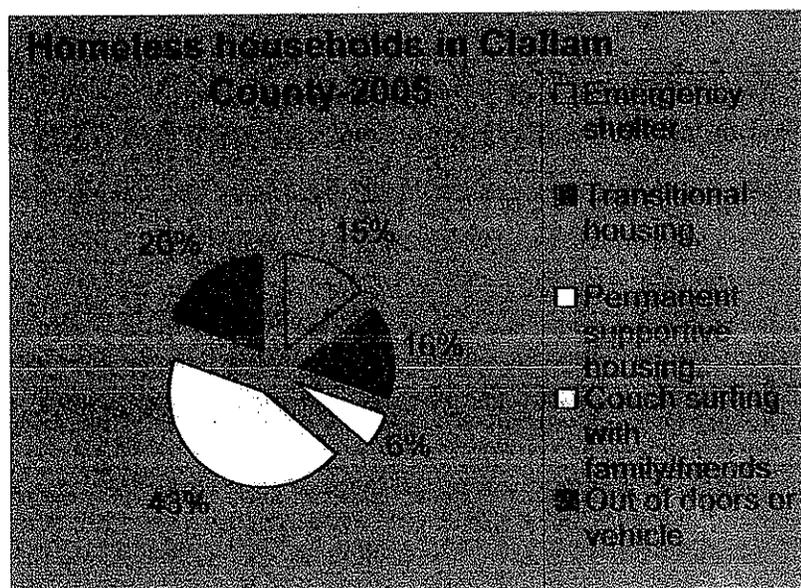
1. **We must prevent homelessness** through financial assistance, timely follow-up and intervention and effective discharge planning linked to housing.  
**Prevention services**, which include counseling and financial assistance to households at risk of homelessness, must be easily accessible in every community in our county. In 2005 the goal is to serve 150 households, 50 more than were served in 2004. To maintain effective prevention, we must have the funding and services to assist 325 households annually by 2009.  
**Discharge planning** from jails, prisons, hospitals and foster care must be linked to a housing outcome.  
Residents exiting homeless programs to permanent housing must have a **post-discharge plan and prevention assistance** in place.
2. **Move people into housing first and fast.** Emergency shelter is not temporary housing, but a temporary safe place when homeless. **Permanent housing is the goal.** Some households experiencing homelessness may be able to move directly to permanent affordable housing, with relatively short-term assistance and financial support. Other households may require a short time in emergency shelter, or a longer period in a services-enriched transitional housing program. But the goal remains permanent housing, as quickly as possible.  
The supply of affordable housing choices, for every income level, must be increased through **renovation and rehabbing of existing affordable stock and construction** of additional

affordable housing. We must **preserve the affordable housing** we have and **improve our partnerships with local landlords and property managers**, to identify more existing housing that could be used for homeless families and individuals.

3. **Increase the supply of permanent supportive housing** to serve the chronically homeless individuals and families in our community, inflicted with multiple disabilities and barriers and unlikely to succeed in existing housing programs. This population consumes resources with little effect in our current system: emergency medical services, psychiatric and mental health services, emergency shelters, detox and rehab facilities and law enforcement and corrections. Cost-effective permanent supportive housing must be added through renovation and conversion of existing facilities and new construction, all linked to the kinds of supportive services that will allow the family or individual to retain the housing.
4. Beyond 'bricks and mortar,' **sufficient and coordinated supportive services** must be **available on demand** to homeless households to provide the access to assistance, housing and the tools they need to maintain permanent housing.

We expect results. By the end of 2005,

- we will have completed the plan, action steps and financial blueprint for ending homelessness by 2014,
- we will have engaged the community in a broad array of opportunities for participation,
- we will have increased the number of households receiving prevention assistance by 50,
- we will have created 10 new units of permanent supportive housing, and will have a project under development to add 11 more units in the West End,
- and we will have begun a transition-in-place permanent housing program that will ultimately serve 15 homeless families with children.



**Step 1: Prevent homelessness through timely financial assistance, counseling and intervention. Demand effective discharge planning linked to housing.**

**A. Prevention of Homelessness**

The National Alliance to End Homelessness has established a goal to “close the front door” to homelessness. In our county, there is a significant number of cost-burdened households, whose financial situation puts them very much at risk of losing housing. This can happen when a parent is forced to stay home with a sick child and loses income, or even their job, due to excess sick hours. In other situations, a prolonged illness or sudden accident may mean the loss of employment. Changes in the economy with subsequent job lay-offs can also occur. A domestic dispute (domestic violence, parent/youth conflict) may result in a member leaving the household and becoming homeless.

When financial hardship occurs, some landlords will work with the family or individual, setting up a payment plan or waiting until the tenant can obtain emergency funding to cover outstanding rent or utility costs. Others, however, are not willing to work with the tenant, making homelessness a likely outcome. **It is more cost effective and less disruptive to these families or individuals to find a way to help them maintain their current housing than to admit them into a shelter or transitional housing program after they lose their housing.**

<b>What Needs to Happen:</b>	<b>2005-2006</b>	<b>By 2009</b>	<b>By 2014</b>
Create additional community awareness of scope of housing demand, existence of prevention program	√		
Identify additional prevention funding sources	√	√	√
Apply increased available prevention funds county-wide	+50%	+100%	maintain
Establish full prevention services in Sequim and Forks, using existing agencies and adding partners, if necessary	√	maintain	
Establish outcome criteria and monthly reporting of assistance provided	√		
Report and update outcomes to 10 Year Plan date page		√	
Use prevention centers as “homeless intake and screening centers”		√	
Use prevention centers as access points for ‘current vacancies’ list developed by SHCC Housing Resources coordinator	√		
Prevent youth homelessness through intervention and conflict counseling, leading to family reconciliation, where appropriate	Port Angeles	Sequim-Forks	
Prevent youth homelessness by screening at Dream Center for referral to “foster home” shelter.	√		
Establish “ready to rent” tenant training program		√	

**B. Discharge Planning** for foster care, hospitals, jails and corrections.

Many institutions in our county, and state, struggle with discharge policies that don’t effectively serve homeless people. It is difficult to link individuals being discharged from corrections, foster care and other institutions if there is a lack of appropriate housing available. As a result, individuals being discharged may soon fall into homelessness. We must avoid sending people to the streets and emergency shelters by providing links to the right services and preparing resources in advance of discharge.

<b>What Needs to Happen:</b>	<b>2005-2006</b>	<b>By 2009</b>	<b>By 2014</b>
Identify barriers to discharge planning in local institutions, like the hospital, jail and foster care.	√		
Ask the question, “Do you have a place to stay?” Develop list of resources & referrals, depending on response.	√		

<b>What Needs to Happen:</b>	<b>2005-2006</b>	<b>By 2009</b>	<b>By 2014</b>
Advocate for system change, requiring links to housing and services be part of approved discharge plan from local institutions.		√	maintain
Advocate for establishing financial support for discharge plan, i.e. an inmate at Clallam Bay would accumulate savings from prison employment, earmarked for housing upon release.		√	
Advocate for establishing education/training financial support for youth exiting foster care i.e. specific 'scholarship' funding at Peninsula College targeting youth aging out of foster care		√	
Establish outcome criteria and monthly reporting of discharges		√	
Report and update outcomes to 10 Year Plan date page		√	

**C. Post Discharge** case plans and prevention assistance for households leaving emergency shelter for permanent housing or successfully completing transitional housing programs. We must try to prevent discharging individuals or families back into eventual homelessness, by implementing post-discharge case plans, detailing community support systems, ongoing case management and linked to funds available to prevent a re-occurrence of homelessness.

<b>Affording a place to live: information on the cost of renting a two bedroom apartment at current Fair Market Rent in Clallam County</b>			
<b>Fair Market Rent for 2-bdrm</b>	<b>\$577</b>	<b>Wage needed to afford FMR</b>	<b>\$11.09</b>
<b>Affordable for minimum wage</b>	<b>\$382</b>	<b>Minimum wage</b>	<b>\$7.35</b>
<b>Affordable for SSI pay</b>	<b>\$165</b>	<b>SSI wage conversion</b>	<b>\$3.13</b>

## Step 2. Move homeless people into housing first.

A 'housing first' solution to homelessness requires an adequate supply of permanent, accessible and affordable housing. At the 2004 Planning Forum, participants determined the following needs:

(1) to preserve affordable housing, (2) to bring substandard housing up to standard levels, (3) construct additional affordable housing, (4) ensure access to housing for individuals with special situations or needs, such as domestic violence, mental health issues, veterans status, or disabilities; and (5) to ensure integrated housing, with low, middle, and high income housing intermixed throughout the county.

Implicit in a 'housing first' solution to homelessness is the use of emergency shelter units as temporary safe places, where the needs of the homeless household can be assessed and the household quickly transitioned from temporary shelter to a) transitional housing programs, or b) transition 'in place' permanent housing, or c) permanent affordable housing, with or without subsidies.

### Preservation of existing affordable rental housing.

Preservation of existing affordable housing stock has been listed as the highest priority for several years by the Continuum of Care in Clallam County. Clallam County has experienced significant increases in rental and home ownership costs, particularly in the past few years, when housing costs have increased more than 25%.

Median income has risen during that same time period, but has not kept pace with escalating costs, like housing. In the work force, this county has seen a decrease in unemployment from 6.9% in 2002 to 5.2% in 2005. However, increasingly, there is a sharp division occurring between those with higher work incomes and those who are paid only \$7.35 per hour in service or retail jobs.

Landlords have become more selective in their criteria for determining to whom to rent, many landlords choosing not to rent to those with any credit, housing history, or criminal issues. Most homeless individuals and families have issues in at least one of these areas. Even with reassurance by social service workers that they will provide supportive services to those individuals and families, many landlords select renters with clean records. The rental vacancy rate is currently below 4% in the central and east end of the county. Some landlords raise the rent to a level that is unaffordable to the low-income or households enrolled in subsidized housing programs.

In this era of limited resources, priorities for social services, including housing, are frequently determined from a political standpoint, with certain types of projects being "trendy" one year, to be replaced with a new priority the next year. Private foundations are often more interested in new, innovative projects than in maintaining current projects.

Every month, affordable housing is lost to development and "gentrification" in our county. This can good for our local economy, but very hard on tenants who lose affordable low-end housing, and in some cases, become homeless as a result.

USDA Rural Development subsidized housing projects are vulnerable as well, as they "age out" of their subsidy period or as owners "opt out." There are 11 USDA projects in the county and three are at risk and specifically targeted for preservation efforts.

What Needs to Happen:	2005-2006	By 2009	By 2014
Peninsula Apartments and the Ox Bow apartments, both in Forks, need to be preserved for low-income housing.	√		
Wildwood Terrace, in Port Angeles, needs to be preserved for low-income housing.	√		
Implement transition in-place program in existing affordable units, using project based section 8 and service dollars from Washington Families Fund. (15-30 units additional)	√		
Other USDA and tax-credit projects need to be monitored, with preservation as low-income housing the goal.		√	

<b>What Needs to Happen:</b>	<b>2005-2006</b>	<b>By 2009</b>	<b>By 2014</b>
Privately-held affordable housing needs to be identified and preserved where possible.		√	
Organize meeting of faith-based organizations and churches to marshal their support for committing available housing, from their congregations, to specific hard-to-house populations, in particular for felons.	√		
Tenants of affordable housing need to be protected financially and relocated when housing is lost due to gentrification or tear downs.	√		
Advocate for local jurisdiction's help via impact fees that benefit low income housing.		√	
Help private owners of affordable housing find low-interest loans or grants to maintain property, without raising rents.	√		
Analyze ratio of tenant-based -vs-project based section 8, to determine most effective use of funding available.	√		

### **Rehabilitation and renovation of existing housing.**

Rehab of low-end housing is an important strategy. Residential rehabilitation assistance should be available to provide small grants to owners and landlords to help them fix up their properties and retain them as safe, decent affordable housing. Mobile homes are a significant source of low-end affordable housing in Clallam County. Mobile housing stock need to be inventoried and assessed for short and long-term viability, particularly in the West End and in the Port Angeles area.

<b>What Needs to Happen:</b>	<b>2005-2006</b>	<b>By 2009</b>	<b>By 2014</b>
Make existing city and county residential rehabilitation assistance available to low-income home owners and to landlords <b>who agree to maintain housing as affordable.</b>	√		
Inventory mobile home housing at risk in the county (focus on West End and Port Angeles area) and establish funds for rehab for low-income home owners and for landlords, if they consent to maintain unit as affordable.		√	
Advocate for the enforcement of Mobile Home Landlord-Tenant Act, through assessment fee on each mobile home space.	√		
Advocate for local jurisdictions to pay for relocation of mobile home tenants who must vacate due to serious health and safety risks.	√		
Develop RV housing for non-disabled single adults (20 units)	√		

### **Construction of new affordable housing.**

Maintenance and rehab of the current affordable housing stock only addresses 30% of the need for homeless and low-income individuals and 60% of the need for families in our county.

Over the next five years we need to construct **175 units of affordable rental housing**, especially rental units targeting households lower than 30% of median income.

Home ownership for very-low income families and individuals is another housing option that deserves greater attention in our rural county. There are several home ownership programs currently available through the Housing Authority, USDA, and the local affiliate of Habitat for Humanity. Habitat homeowners often significantly decrease their housing costs when moving into their new home; mortgage payments, which include property tax and insurance, average around \$400 per month. Thus Habitat is able to target households below 30% of median income.

The cost of purchasing a home in Clallam County is rising quickly. Ensuring that low- and moderate-income families and individuals can have the option of buying a home requires financial assistance to defray building costs for new homes and reduce mortgage payments. Providing assistance to more individuals and families can be a cost-effective way to provide permanent housing to the citizens of Clallam County.

In the next five years, as many as **100 low and very-low income families will become homeowners through Self Help Housing and Habitat for Humanity programs.**

Housing Land Trusts are another way to foster affordable home ownership. The trust owns the land on which the home or apartment house is constructed, thereby reducing the overall cost to purchase. The newly-formed Jefferson-Clallam Housing Land Trust will acquire land on which affordable single-family and multi-family housing can be constructed. The land trust achieves permanent, long-term housing affordability through the use of a ground lease. Homebuyers purchase only the house, and usually enter into a 99-year ground lease with the land trust for the exclusive use of the land. When a homeowner decides to sell their home, the house is sold to another low-to-moderate income household. By limiting market appreciation, permanent affordability is ensured and initial subsidies invested in making the home affordable are spread across generations of low-to-moderate income homebuyers.

<b>What Needs to Happen:</b>	<b>2005-2006</b>	<b>By 2009</b>	<b>By 2014</b>
Advocate for and support private development and construction of affordable rental multi-family housing, particularly in Forks and Sequim. Goal-120 units total	√		
Establish partnerships with new multi-family housing projects (including privately owned) to create set-asides for "transition-in-place" units (20 additional subsidized units).	√		
Establish shallow, short term rental subsidies(20-40 additional units) to allow homeless households access to affordable housing.	√	√	√
Support Self Help and other home ownership programs that target households below 50% of median income.	√		
Encourage new partners (faith-based, etc) to focus on developing affordable, multi-family housing targeting the very-low income and homeless. Goal 40 units total	√		
Partner with the EDC to create a "housing cluster" focused on creating a supply of affordable <i>work-force housing</i> .		√	
Foster public support for Housing Land Trust development that targets households below 50% of median income.	√		
Develop a <b>non-profit property management company</b> that could reduce problems for private landlords, tax-credit projects, etc. while creating access to decent affordable housing for 'hard to house' families and individuals.	√		

### Step 3. Increase the supply of permanent supportive housing.

Permanent supportive housing will serve the chronically homeless individuals and families in Clallam County who suffer from multiple disabilities and barriers and are unlikely to succeed in existing housing programs. This population consumes enormous resources in our current system, yet never exit the revolving door of homelessness. Cost-effective permanent supportive housing must be added through renovation and conversion of existing facilities and construction of new housing. All housing must be linked to the kinds of supportive services that will allow the individual or family to retain the housing. Over the next ten years, 150 units of permanent supportive housing must be created through conversion or construction.

#### A. Chronically Homeless

For the majority of individuals and families that become homeless, it is a one-time occurrence. However, there are a percentage of individuals and families for whom homelessness becomes a way of life. This population is increasing in Clallam County for a variety of reasons: an increase in the incidence of substance abuse; changes in the mental health system; co-occurring substance abuse and mental health diagnoses; serious untreated medical and physical problems in the aging homeless population.

Since the 1980s, there has been a decrease in the number of hospital beds for individuals with serious mental health issues, with a focus on integrating those individuals into society by providing mental health services, prescription medications, and supportive services through community mental health centers. Unfortunately, there has never been adequate funding to serve this population to an extent that would ensure long-term success in terms of maintaining housing and a stable life. There are some who fall through the cracks and end up becoming chronically homeless.

HUD defines chronic homelessness in individuals as *“an accompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more or has had at least four episodes of homelessness in the past three years. To be considered chronically homeless a person must have been on the streets or in an emergency shelter (i.e. not transitional housing) during these stays.”* HUD defines *“disabling condition”* as *“a diagnosable substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability, including the co-occurrence of two or more of these conditions. A disabling condition limits an individual’s ability to work or perform one or more activities of daily living.”*

The chronically homeless require housing, generally with supportive services, such as mental health and/or veterans counseling, substance abuse treatment, medical care, case management, and living skills information. Some may also require a protective payee to help with money management. Preferable, services would be available on-site. Housing, however, is the key to success in keeping chronically homeless individuals and families off the streets. In New York City, 90% of seriously mentally ill homeless people assisted through a Housing Plus program remained housed 18 months later, and 70% agreed to psychiatric care even though it was not required for getting into or staying in housing.

What Needs to Happen:	2005-2006	By 2009	By 2014
Educate community about costs of <i>not</i> housing this population	√		
Communicate and collaborate with all impacted systems, including mental health, hospitals and clinics, substance abuse, law enforcement, courts, business and tribal.	√		
Identify and develop funding sources for permanent housing and services targeting chronically homeless.	√		
Advocate for funding and policies for treatment on demand in integrated system with housing.		√	
Implement extended outreach to chronically homeless, providing services, food, clothing and referrals.	√		