Contributors and Acknowledgements

The State Affordable Housing Act (2005) requires broad participation in the creation of the Homeless Crisis Response Plan (HCRP). To that end, the HCRP Planning Team worked with a broad array of people and organizations to develop, review and ultimately finalize of the 2019 Thurston County HCRP. Participants are listed by name and affiliation as follows:

Thurston County Commissioners
Commissioner Tye Menser
Commissioner John Hutchings
Commissioner Gary Edwards

Thurston County Office of Housing & Homeless Prevention Staff
Schelli Slaughter, Director Public Health & Social Services
Tom Webster, Program Manager
Nicole Boyes, Housing Program Coordinator
Kathy Cooper, Housing Program Coordinator
Keylee Marineau, Homeless Prevention and Affordable Housing Coordinator

Homeless Crisis Response Planning Team
Schelli Slaughter, Planning Team Chair & Thurston County Public Health Dept. Director
Keylee Marineau, Thurston County Homeless Prevention and Affordable Housing Coordinator
Anna Schlecht, City of Olympia Community Service Programs Manager
Derek Harris, Community Youth Services & Homeless Housing Hub Chair
Meg Martin, Interfaith Works Shelter
Trish Gregory, Family Support Center of the South Sound
Cary Retlin, City of Olympia Home Fund Manager
Kirsten York, Community Action Council

City of Olympia Staff
Keith Stahley, Community Planning & Development Director
Anna Schlecht, Community Service Programs Manager
Amy Buckler, Senior Planner
Stacy Ray, Senior Planner
Colin DeForrest, Homeless Response Coordinator
Casey Schaufler, Associate Planner
Ilan Weitzen, City of Olympia Intern

City of Lacey Staff
Jacob Ewing, Assistant City Manager
Rick Walk, Community Planning & Development Director
Jessica Brandt, Community Planning and Development Associate Planner
Chief Ken Semko, Chief of Lacey Police Department

City of Tumwater Staff
John Doan, City Administrator
Brad Medrud, Community Development Planning Manager

Yelm Homeless Task Force
Suzy Lafurgey
Yanah Cooke
Thurston County Staff
Ian Lefcourte, Associate Planner
Jeremy Davis, Senior Planner
Pamela Gant, Data Analyst
Carrie Hennen, Treatment Sales Tax Program Manager
Katie Strozyk, Social Services Program Specialist
Jen Houk, Accounting

Law Enforcement Agencies
Olympia Police Department
Lacey Police Department
Tumwater Police Department
Thurston County Sheriff Department

Thurston Thrives Housing Action Team
Keylee Marineau, Homeless Prevention and Affordable Housing Coordinator, Chair
Derek Harris, Community Youth Services, Homeless Housing Hub Red Team, Chair
Trudy Soucoup, Homes First, Blue Team, Chair
Elisa Sparkman, Thurston County Education and Outreach Specialist, Green Team, Chair

Housing Action Team Homeless Housing Hub
Derek Harris, Community Youth Services – Homeless Housing Hub – Chair
Community Action Council of Lewis, Mason, Thurston Counties
Community Youth Services
Family Support Center of South Sound
Interfaith Works
SafePlace
Catholic Community Services
Salvation Army
Housing Authority of Thurston County
The Asset Building Coalition
Build a Bus Home
Habitat for Humanity
Timberland Library
Family Education and Support
Washington Department of Veterans Affairs
Quixote Village

The Lacey Veterans Hub

Thurston Thrives Coordinating Council
Community Investment Partnership/Health and Human Services Council
Thurston County Board of Health
Lacey City Council
Olympia City Council
Tumwater City Council
Yelm City Council
VI Racial Equity Research Team
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ACRONYMS

AMI  Area Median Income
BoCC  Board of County Commissioners
CAC  Community Action Council of Lewis, Mason and Thurston Counties
CAN  Olympia Coalition of Neighborhood Associations
CDBG  Community Development Block Grant
CE  Coordinated Entry
CEC  Coordinated Entry Committee
CES  Coordinated Entry System
CRC  Crisis Response Clinic
CYS  Community Youth Services
ES  Emergency Shelter
FSC  Family Support Center of the South Sound
GARE  Government Alliance on Race & Equity
GROWL  Greater Regional Outreach Workers League
HAT  Housing Action Team
HCRP  Homeless Crisis Response Plan
HCRS  Homeless Crisis Response System
HHH  Homeless Housing Hub
HMIS  Homeless Management Information System
HUD  U.S. Department of Housing and Urban Development
HWRP  Hazard Weather Response Plan
HWTF  Hazardous Weather Task Force
JR  Juvenile Rehabilitation
LEA  Law Enforcement Agency
LGBTQ+  Lesbian Gay Bisexual Transgender and Questioning
MFTC  Multi-Family Tax Credits
ODA  Olympia Downtown Alliance
PATH  Projects for Assistance in Transition from Homelessness
PD  Police Department
PH  Permanent Housing
PHSS Public Health and Social Services
PIPE Partners in Prevention Education
PIT  Point-in-Time Count
POC  Person/People of Color
PSH  Permanent Supportive Housing
RRH  Rapid Rehousing
SHB  Substitute House Bill
SPARC Supporting Partnerships for Anti-Racist Communities
SPSCC South Puget Sound Community College
SRO  Single Room Occupancy
TC  Thurston County Housing Program
TCEDC Thurston County Economic Development Council
TH  Transitional Housing
TMBHO Thurston Mason Behavioral Health Organization
TRPC Thurston Regional Planning Council
TT  Thurston Thrives
USICH U.S. Interagency Council on Homelessness
VI-SPDAT Vulnerability Index – Service Prioritization Decision Assistance Tool
YMCA Young Men’s Christian Association
YWCA Young Women’s Christian Association
YYA Youth and Young Adults
INTRODUCTION

The landscape of homelessness is complex and shifting rapidly in Thurston County. Although community prosperity has increased, housing costs in our county continue to rise as well, resulting in an increase in homelessness. While the numbers of unsheltered homeless individuals, along with unsanctioned encampments and vehicle camping are at unprecedented levels and rising, funding to address the crisis has remained insufficient to adequately address the growing need.

In June 2018, the Thurston County Board of Health declared homelessness a public health crisis, pledging action to help alleviate the impact of the growing crisis. Coordinated regional meetings have begun in earnest, as the attention of the entire community turns to the Homeless Crisis Response System (HCRS) to develop strategies to ensure our unsheltered citizens are moved swiftly into permanent housing solutions.

This document, the Thurston County Homeless Crisis Response Plan (HCRP), is a living document. It will be updated annually to track progress, and will consider needs or gaps, as well as assessing successes and lessons learned. The intent is to create a plan that offers an opportunity to create flexible and innovative responses to emerging issues during this national affordable housing, homelessness and human health crisis. In addition to background information and the extent of the need in Thurston County, this plan outlines the mission, vision, core values, key goals, strategies, and many of the important implementation actions necessary to successfully resolve homelessness in Thurston County. The HCRP is the community-based framework for a strategic, focused approach to ending homelessness. This plan will lead to positive and innovative systemic changes in the way our community addresses homelessness.
THURSTON COUNTY HOMELESS CRISIS RESPONSE SYSTEM

Equitable, Coordinated, Consistent, Concise

An effective HCRS requires the system to be **equitable, coordinated, consistent and concise**.

<table>
<thead>
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<th>An <strong>equitable</strong> system is:</th>
<th>A <strong>coordinated</strong> system is:</th>
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<tr>
<td>• Aware of racial disparities that exist within the HCRS</td>
<td>• An efficient system, removing response-related silos, and increasing positive exits into housing projects</td>
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<tr>
<td>• Accountable for addressing those disparities</td>
<td>• Has shared data as allowable between providers and participates in concert with the coordinated entry system</td>
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<th>A <strong>consistent</strong> system is trauma informed and clearly communicates to the providers, the community at large and the participants within the system:</th>
<th>A <strong>concise</strong> system is a system that trims the processes in order to:</th>
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<tr>
<td>• What is to be expected</td>
<td>• Quickly and efficiently identify those who are experiencing homelessness</td>
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<tr>
<td>• How the system works</td>
<td>• Swiftly move them into housing.</td>
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<tr>
<td>• How to access various programs.</td>
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Additionally, all HCRS are mandated by the Department of Housing and Urban Development (HUD) and the WA Department of Commerce, to have specific programming requirements:

- Coordinated assessment and referral
- Outreach
- Low-barrier emergency sheltering per sub-population
- Permanent supportive housing
- Rapid re-housing programs
- Transitional housing for youth and young adults

**The Importance of Common Language**

Sharing an understanding of terms makes regional coordination possible. In addition, being clear and concise with our references as individual entities make it possible to communicate effectively across organizations, stakeholders, and throughout diverse communities regardless of scale. Defining and dissemination of common language for best practices, prioritization, and other program specific language creates cross-system consistency and therefore, is trauma informed.
According to the U.S. Interagency Council on Homelessness (USICH), shared terminology:

- Moves us forward as we discuss the scale and sources of funding needed for the various activities and stages of the process.
- Fosters consistency and effectiveness in our work, and a shared approach to measuring that effectiveness.

## Methods

### The Planning Process

The revision of the Thurston County 5-Year Homeless Housing Plan adopted in June 2018 involved a broad range of community participation, as required by RCW 43.185C.160, Balance of State Continuum of Care Policies and Procedures and according to best practice. The HCRP was developed by the Thurston County Homeless Prevention and Affordable Housing Coordinator, together with several stakeholder groups. Stakeholder groups included law enforcement agencies and city staff from four jurisdictions, county staff, and providers of housing and services for each sub population. The Homeless Coordinator met with key City of Olympia staff on a weekly basis to assure the 5-year planning process was in sync with their Homeless Response planning process. During Olympia’s planning process, the Homeless Prevention and Affordable Housing Coordinator attended two focus groups dedicated to people who have lived experience with homelessness, as well as other community listening sessions with concerned citizens and business owners, and incorporated those perspectives into the content of this plan.

Additionally, the planning efforts involved a smaller HCRP planning team, comprised of Family Support Services, Interfaith Works, Community Youth Services, City of Olympia, and Housing Authority of Thurston County supported by the Local Continuum of Care -Thurston Thrives Homeless Housing Hub (HHH) members. Following the adoption of this plan, a Thurston County Homeless Crisis Response Plan work group will be established to monitor and assess outcomes on a quarterly basis.

### Amendments

The homeless and housing crisis is complex and can change quickly. For this reason, the HCRP is a living document to be as responsive to emergent community needs as possible. In addition to the annual review, report, and recommendations, the HHH will review requests for amendments on an as-needed basis. Any recommendations for amendments requesting changes to goals, strategies or targets of the HCRP will be presented to the HHH, as well as the HAT and will be offered for final approval from the Board of County Commissioners (BOCC) prior to being adopted. Minor changes to the HCRP will be addressed by the HCRP work group.
Homeless Crisis Response Planning Process Framework

Background

A successful Homeless Crisis Response Plan must be built on a shared understanding and principle that all **people deserve dignity, respect and to feel safe**—both the housed and unhoused alike. As such, the strategies and solutions built and developed in the HCRP add value to every individual in our county. Although access to housing is the logical and primary solution for all populations of people experiencing homelessness, there is not a ‘one-size-fits-all’ approach. Everyone who is unsheltered, or at risk of experiencing homelessness, has a unique set of needs that require a flexible system to respond. An effective HCRP requires our system be equitable, coordinated, consistent, and concise, so any cross-system collaboration is trauma-informed and streamlined.

**Mission**

We collaborate to reduce harm and ensure homelessness in Thurston County is brief, rare, and one time only.

**Vision**

We envision a Homeless Crisis Response System that provides equitable, coordinated, consistent, and concise strategies to ensure homeless individuals are swiftly and humanely housed, and which offers guidance for all homeless-related plans and funds in Thurston County.

**Values**

All humans have the right to be treated equitably with dignity, respect, integrity, and compassion. The Thurston County HCRS further shares the understanding that, based on this value statement, all humans have the right to housing.

Trauma Informed Planning

The HCRS identifies trauma informed care as a best practice when engaging with or serving vulnerable populations. Most people experiencing homelessness survived some sort of trauma from earlier in their life. Sometimes a single traumatic event, like an incident of domestic violence, may have caused an individual’s current homelessness. Homelessness itself is a traumatic experience that endures sometimes beyond the point when a person is housed. Trauma informed care is considered a means of engaging with an individual as a whole person, considering their trauma, current or past, and understanding behaviors they may exhibit with compassion and patience. During the planning and revising of the HCRP, great care was taken to ensure the planning efforts involved people with lived experience of homelessness and the development of strategies and goals were taking into consideration the principles of trauma informed care.
Centering Race and Equity

The overrepresentation of people of color among the population of people experiencing homelessness is a concerning reality across the United States. Thurston County is no exception. In April of 2019, the WA Department of Commerce released updated guidelines for local homeless crisis response plans to include a section devoted to analyzing and addressing the overrepresentation of people of color experiencing homelessness. As part of integrating the HRCS value statement, and because it will increase the opportunity for strategies to be effective, this plan strives to ensure all strategies addressing racial disparities have integrity through an approach both actionable and accountable.

Measures of Success

The Thurston County HCRS is aligned with the vision of the State of Washington: No person is left living outside. To realize this vision, it is important to understand that to do so will take innovation, determination, creativity and patience. With the continued rise in rental prices, low rental vacancy, stagnant wages and a growing population, it is important to frame success incrementally.

The Department of Commerce set specific performance measures this plan must address:

- Outreach Projects: Increase percentage of exits to positive outcome destinations to the level of the top performing 20 percent of homeless crisis response systems nationwide.
- Compliance with state and federal Coordinated Entry Data Collection requirements in order to build and maintain active lists of people experiencing homelessness and to track the homelessness status, engagements and housing placements for each household.
- Compliance with state and federal coordinated entry requirements for all projects receiving federal, state and local homeless funds.
  o Consider implementation of the Coordinated Entry Core Element recommendations and the Office of Homeless Youth’s “Five Recommendations for Making Coordinated Entry Work for Youth and Young Adults.”
  o Successful implementation of prioritization policies for all projects receiving federal, state and local homeless funds, resulting in prioritized people consistently housed in a timely manner.
- Increase percentage of exits to permanent housing to the level of the top performing 20 percent of homeless crisis response systems nationwide.
- Reduce returns to homelessness after exit to permanent housing to less than 10 percent.
- Reduce average length of stay in temporary housing projects to less than 90 days.
- An estimate of people experiencing homelessness that will be housed during 2024 after successful implementation of the local plan using existing resources, and the count of households left unsheltered at a point in time in 2024, based on credible data and research.
- Completion of an initial analysis using a racial equity tool and data provided by Commerce.

The HCRP Work plan will lay out actionable strategies to ensure these performance measures are reached.
Annual Review and Progress Reporting

Progress in achieving the goals and strategies of the HCRP will be summarized in an annual report to the Thurston Thrives Housing Action Team’s Homeless Housing Hub (HHH) for review. Reports will chart progress on key indicators and include recommendations for updates, as needed. Performance measures will be also reported to Commerce and available on the Thurston County website on an annual basis in order to measure progress made towards guideline number 4.

Sources of Data

Progress in achieving the desired outcomes of the HCRP to reduce homelessness and to achieve an equitable, coordinated, consistent and concise HCRS is formally tracked by two methodologies: Annual Point in Time (PIT) Homeless Count of Sheltered and Unsheltered Persons, and the Homeless Management Information System (HMIS).

1. The Annual Point in Time (PIT) Homeless Count of Sheltered and Unsheltered Persons, more commonly referred to as the annual Homeless Census.

   Thurston County has conducted the PIT Annual Homeless Census since 2006. Subsequently, annual PIT data shows homelessness in Thurston County appears to have followed the pattern of the 2007-2008 Great Recession, with numbers spiking by 2010 and then receding. At that time many county plans—including Thurston County—were revised, recognizing the stated goals may not be met. By 2015 many communities faced the after-effects of the Great Recession, with an increase in rental and real estate prices, stagnant wages and declining funding for some homeless and affordable housing programs. Not surprisingly, the number of individuals and families experiencing homelessness are now at or above 2005 levels.

2. The Homeless Management Information System (HMIS), which collects client-level data on the provision of housing and services to individuals experiencing homelessness and families and persons at risk.

   The County utilizes data via the Homeless Management Information System (HMIS), which collects client-level demographics and enrollments and exits into and out of housing and services to individuals and families experiencing homelessness or at risk of homelessness. Ideally, the Homeless Crisis Response Plan would be based on data generated through HMIS to ensure real-time linkage of strategies to needs. However, HMIS is not fully utilized in the overall HCRS, as providers who do not receive county or state funding are not required to use HMIS. HMIS also only represents those individuals and families that have entered a HMIS-reporting program within the HCRS, and does not represent those outside of the system, such as the unsheltered individuals in various unmanaged encampments. Also, data quality differs significantly throughout the HCRS due to agencies varying internal data management and reporting priorities.
However, there are often significant differences between the data sets given the different methodologies, populations represented and other factors. Another goal for the work plan is to improve both these methodologies in tracking the number of people experiencing homelessness as a means of measuring performance of the Homeless Crisis Response Plan.

The work of overseeing implementation of the HCRP and tracking progress on specific strategies, tasks, and outcomes, milestones and supporting the work of the lead entities identified in the work plan will be undertaken by the Homeless Crisis Response Plan Core Team in conjunction with the Housing Action Team Data Work Group.

**Homelessness Among Humans**

*Homelessness happens to humans,*

*and it is vital*

*to be reminded of our shared humanity when*

*discussing solutions for resolving this crisis*

In Thurston County the primary factors that cause a person to experience homelessness are largely situations are out of an individual’s or family’s control. The 2019 PIT Census discovered domestic violence, mental illness, family rejection and physical disability make up 52% of the reasons census takers identified as causes for homelessness. The next highest percentage of factors are economic in nature; 31% of the respondents identified eviction, job loss and lack or job skills as the reason for homelessness. Substance use is often anecdotally identified as the leading cause of homelessness, yet according to the PIT census identifies only 10% of those experiencing homelessness identify substance use as the cause. It is important to note that any one circumstance does not alone cause a person to fall into homelessness but rather a combination of factors almost always partnered with poverty.

![Bar chart showing reasons for homelessness in Thurston County](chart.png)

*Source*

2019 Thurston County Homeless Census (PIT)

According to the 2019 Point-in-Time count, the number one reason Thurston County residents are experiencing homelessness is job loss and eviction. Job loss and eviction in conjunction with the next three highest reasons, mental illness, family rejection and physical disability point to situations that typically out of an individual or family’s control.
Homelessness can happen to any person, at any time, for multiple reasons, although some populations are disproportionately represented in the unhoused population. Nationally, 20 – 40% of youth and young adults experiencing homelessness identify as Lesbian Gay Bisexual Transgender and Questioning (LGBTQ+) (2019, Price, C., et al.). In Thurston County, people of color comprise 18% of our general population yet 32% of the population experiencing homelessness are people of color (2019, Thurston County Homeless Census Report). It is also important to note Indigenous peoples and people of color are routinely undercounted during the PIT count due to but not limited to:

- Distrust of the system due to pre-existing service system trauma,
- Threat of detainment and deportation due to immigration status,
- Other structural factors including the overrepresentation of incarcerated people of color who also were or will be experiencing homelessness following release (2017, National Law Center on Homelessness and Poverty)

The above factors suggest the 2019 PIT undercounted homelessness among people of color and that 32% is significantly lower than a true count. Outside of systemic, implicit and overt biases contributing to homelessness, multiple other factors might create a situation when an individual or family find themselves suddenly without housing.

**History of Homelessness**

Following the end of World War II, homelessness was a relatively rare occurrence. Employment rates were high, and there was plenty of affordable housing and public supports to help individuals and families remain housed. Affordable rental housing and very inexpensive single room occupancy (SRO) housing was abundant in most cities (Invisible People, The Paw Print).

In the 1980’s many changes aided and abetted an increase in the homeless populations across the nation. Most significant were the demolition of older buildings that provided the affordable work force SRO housing together with the closure of long-term care institutions for individuals with mental health issues. The closure of these institutions occurred concurrent to a significant reduction in federal spending for affordable housing.

The continued deinstitutionalization of persons with mental health issues without enough matching community-based housing and services throughout the 1990’s caused homelessness to continue to rise within that population. In addition, from an economic perspective, many low-skill labor jobs that offered living wages were lost, while a low-wage service economy blossomed. Funding to assist low-income people through public services did not match the growing need, leaving many people unserved.

The Great Recession of 2007-2009 caused many people to default on their mortgages due to various economic factors, which in turn caused a substantial increase in foreclosures, evictions and unemployment. The housing crisis combined with significant reductions in federal funding for need-based assistance programs pushed many individuals and families into homelessness.
Between 2016-2019, communities across the nation have seen an exponential increase in unsheltered homelessness. Low vacancy rates combined with steadily increasing rental prices and a healthy housing market have continued to push citizens out of housing and onto the street. Landlords who may have been holding onto their property due to the housing crisis in 2007-2008, are seizing the opportunity to sell their rental homes as the housing market has ballooned, displacing hundreds of low-wage to even middle-class earners. Locally, monthly rent in Thurston County has increased by an average of $200.00 since 2016, creating a 30% increase in homelessness. Communities across the nation, and particularly on the west coast are experiencing unprecedented numbers of unsheltered families and individuals living in unmanaged encampments, RVs, cars and on the streets (Thurston Region Planning Council; 2012, Byrne et al.).

## Homelessness Demographics in Thurston County

### Gender

Looking at the gender breakdown of individuals enrolled in the HCRS system, men comprise 56%, women 39%, and 2% transgender and nonbinary. However, it is important to note not all transgender and nonbinary individuals feel safe divulging their gender identity on intakes, some intakes may not have options outside of male and female, and some individuals who identify as “male” or “female” maybe in fact be transgender. However, the general spread of gender across the system has remained consistent over recent years with more men than others represented in the HMIS data. However, there is concern more women are ending up on the streets, especially aging women and single mothers, many of whom are fleeing domestic violence.

### Sexual Orientation

A key demographic not represented in these charts is sexual orientation. As previously mentioned, 20 – 40% of youth and young adults experiencing homelessness identify as LGBTQ+. This data is well researched and has informed best practices and policies for working with LGBTQ+ youth and young adults who are experiencing homelessness. However, if LGBTQ+ youth have not secured permanent housing prior to aging out of services, they ostensibly enter into the adult homeless systems.

Currently, it is not common practice for HMIS intake forms, PIT forms or other assessment for single adults to have sexual orientation options. Therefore, it is difficult to ascertain through available data how many LGBTQ+ adults there are in the HCRS.
Age
Sixty percent of individuals within the HCRS are adults over the age of 24, the majority of whom are adults without minor children. Youth and young adults make up 39% of the population of individuals experiencing homelessness, 23% of which are school aged youth. More regional efforts have evolved over recent years to account for large numbers of families experiencing homelessness through service providers and school districts.

Aging Adults
A growing segment of the population of people experiencing homelessness are our aging or senior individuals. The definition of “older adult” varies depending on what service or law you are referencing. For instance, a person can enroll in Medicare when they reach the age of 65, while many other services are offered to adults by the age of 60. Yet, street dependent life expectancy for adults ranges between 43 -46 years of age.

Many studies state by the year 2030, there will no longer be any baby boomers under the age of 65 and for the first time, there will be more people over the age of 65 then there will be children. There is growing concern in Thurston County and across the nation that with the affordable housing crisis, aging adults might find themselves unable to age-in-place and face increasing threats of homelessness. This is especially true of older women. Special attention needs to be paid to our aging citizens who are housing insecure to prevent them from falling into homelessness.

Race
As discussed earlier, people of color make up 18% of the general population in Thurston County, however 32% of people experiencing homelessness are people of color.
Ethnicity

Regarding ethnicity, 16% of individuals within the HCRS have “unknown” ethnicity. The high percentage of “unknown” could indicate an unwillingness for individuals to identify their ethnicity for fear of consequences based on their immigration status. The “unknown” category could also be due to not fully representing the diversity amongst individuals who may originate from countries in Central and South America.

The State of Homelessness in Thurston County

A Changing Local Landscape

The Thurston County Homeless Housing Plan 2017-2022 was originally drafted in 2016 and adopted by the Board of County Commissioners in June of 2018. According to the Point in Time Count (PIT) numbers, in 2016 there were a total of 189 unsheltered individuals counted and in 2017, only 124. Subsequently, the Homeless Housing Plan for 2017-2022 plan reflected goals oriented towards reaching “functional zero” for each subpopulation, with a priority emphasis on the veteran population. Other goals included providing 24/7 sheltering for each sub-population and building 500 new affordable housing units. By late 2018, youth and families had a 24/7 shelter up and running, veterans had 50 permanent supportive housing beds at the new Drexel II building, and through the development of the Affordable Housing New Construction and Rehabilitation Funding Schedule (a.k.a. – the Housing Pipeline) new affordable housing projects were identified and scheduled through 2021.

In the past 18 months, the landscape of homelessness in Thurston County has dramatically changed. In 2019, 394 out of 800 homeless households were identified as unsheltered through the PIT census in January 2019. Yet, the PIT has been identified by the National Law Center on Poverty and Homelessness (NLCHP) as a significant undercount. It is estimated Thurston County has between 800-1000 unsheltered individuals living in the woods, on the streets, and in unmanaged encampments (NLCHP).

A dramatic example of this growth was witnessed in downtown Olympia in the summer of 2018. Starting in August of 2018, several unmanaged tent encampments appeared in Olympia’s downtown. What started as 75 tents in August ballooned to over 300 by early October. Subsequently, during this sudden growth of unmanaged encampments, a court decision in the United States Court of Appeals for the 9th circuit – Martin v. Boise – ruled it was unlawful to remove homeless individuals from publicly owned property without a safe place for them to go. This created a pause in the city’s response to the expanding number of tents in their downtown corridor while the situation required emergent solutions.
The situation is not unique to Thurston County. Counties around the state and nation are finding themselves facing a nearly identical crisis: a steadily growing unsheltered population, lack of shelter beds, lack of affordable housing and an overly burdened system. City and County governments are finding themselves entering the homeless crisis response system not only as funders, but as service providers. A robust regional response that pools resources and engages the community is essential in truly forging a path towards ending homelessness in our community.

**Emergency Homeless Response**

Emergency homeless response is a very recent element of our HCRS. With unprecedented numbers of unsheltered individuals and new camps identified on a weekly basis, pressure on the HCRS to find immediate and safe solutions that do not financially impact existing system funding is intensifying. According to *Tent City, USA*, a 2017 nationwide report from the National Law Center on Homelessness and Poverty, the number of encampments reported by the media increased by 1,342% between 2007-2017 with two-thirds of the growth occurring after the recession of 2007-2012 ([2017, Tent City](#)). Jurisdictions within the HCRS are being called on for the first time to come up with swift solutions. However, these practices are new and have no tried and true pathways. There are no existing best practices for funding, standing up, or prioritizing individuals into managed encampments, including safe parking programs or tiny home villages. Meanwhile, the existing shelter system is at capacity and turning high numbers of unsheltered individuals away on a nightly basis.

Implementing emergency response efforts requires the HCRS define and develop best practices for emergency sheltering projects. Thoughtfully developing consistent programming and processes for emergency response can reduce harm to both the unsheltered population and neighboring residents and businesses. Response actions that need to be defined include, but are not limited to:

- Triage
- Prioritization
- Sheltering-in-Place
- By-passing the prioritization process within the Coordinated Entry System
- Clear, concise and consistent messaging to unsheltered individuals, the public, and providers.
- Consistent and trauma informed process for entry or enrollment
- Relationship of other systems and response efforts to the HCRS
- Siting property for emergency sheltering projects
- Funding for emergency response that does not impact the existing HCRS
- Legal guidelines for emergency sheltering programs
- Supervision and staffing of emergency shelter programs
- Exit strategies for moving individuals into permanent housing
2019 HOMELESS CRISIS RESPONSE PLAN UPDATE

Objectives

In December of 2018, the Washington State Department of Commerce released a set of new guidelines, with the intent local communities adjust their current Homeless Crisis Response Plans (HCRP) accordingly. The HCRP provides strategies for the following five primary objectives provided by Commerce:

I. Quickly identify and engage all people experiencing homelessness under the state definition*, and all unaccompanied youth under any federal definition*, through outreach and coordination between every system that encounters people experiencing homelessness:

II. Prioritize housing for people with the greatest need

III. Operate effective and efficient homeless crisis response system that swiftly moves people into stable permanent housing

IV. Project the impact of the fully implemented local plan on the number of households housed and the number of households left unsheltered, assuming existing resources and state policies

V. Address racial disparities among people experiencing homelessness.

*please see glossary for state and federal definitions

I. Identify and Engage

Data and Data Quality

There are an estimated 800-1,000 unsheltered people residing in Thurston County. This number is an estimate because gathering data on unsheltered individuals is challenging. Data collection barriers include initiating contact with reluctant individuals, clients opting-in to HMIS enrollment, and programs that do not report into HMIS.

Initiating contact with individuals experiencing homelessness with a heavy emphasis on data collection is generally an unsuccessful approach; many people who are experiencing homelessness may be system-shy at best and can be suspicious of data gathering efforts entirely. Therefore, the
relationship building aspect of an effective HCRS is crucial. Providers within the HCRS must approach their work from a Trauma Informed and Harm Reduction lens; both approaches are identified as best practices and are essential to initial engagement. These practices focus on a person-centered approach, prioritizing the agency and autonomy of all individuals, regardless of where they may be in terms of their housing status, substance use, mental health, etc.

Other barriers to acquiring accurate data to relate to the limitations of HMIS. Washington State is the only state in the US that requires explicit consent to be added into the system, “opt-in”, versus the remaining states that operate on an “opt-out” approach to data collection. Another consideration is that an individual must actively seek services and enroll in them to be accounted for in the system. A third barrier is that not all programs within the system are required to participate in Homeless Management Information System (HMIS) data entry. A Data Workgroup will be formed within the HCRS in order to ensure data is gathered and disseminated with increasing high quality.

In order to increase positive referrals into programs and increase data quality, the HCRS should continue operating outreach that utilize best practices, increase county-wide outreach efforts, and consider hiring and training peer outreach workers. Hiring and training peer outreach workers could result in a new workforce development program and increase engagement and successful referrals into the HCRS.

### Outreach and Engagement

Outreach and engagement are essential activities for a successful HCRS to reach the State of Washington’s vision of “no person left living outside.” Clearly defined best practices for outreach efforts are crucial to ensure that all contacts made with unsheltered individuals and families are trauma informed, couched in harm reduction, and are culturally responsive. Areas that require more research regarding best practices include outreach to individuals and families who are living in their vehicles or RVs, seniors and aging adults, people in rural regions, indigenous peoples and people of color. Once best or promising practices are identified, outreach workers should be trained prior to engaging with special populations in order to reduce unintentional harm.

Currently, outreach efforts in Thurston County are growing. In early 2019, a regional outreach effort was launched known as the Greater Regional Outreach Workers League (GROWL). GROWL is a group of trained outreach staff, advocates and volunteers who meet bi-weekly to coordinate outreach efforts into all areas of Thurston County. The GROWL will inform strategies for reaching out to individuals in encampments, RV’s and vehicles, with the goal of offering resources, referrals and advocacy. The GROWL members will be trained in coordinated entry intake processes by the corresponding Coordinated Entry (CE) agency per sub-population (see page 47 for CE specific outreach activities).

### II. Prioritize those with highest needs

**Housing First**

Thurston County Homeless Response System operates from a Housing First perspective in prioritizing individuals and families into sheltering and housing programs. A Housing First-oriented
system operates on the principle that all people are ready for housing. Housing First is a nationally recognized best practice based on the removal of barriers to housing in order to increase access to units is what ends homelessness. Assuring there is access to housing, however, is only the first step. Another essential tenet of a successful Housing First system is that housing first does not mean housing only. In order to ensure individuals and families maintain their housing, they must have access to on-going supportive services. According to the State of Washington Homeless Housing Strategic Plan, “A homeless crisis response system providing people with housing first then offers additional supports and voluntary services as needed. This evidenced based, national best practice approach yields higher housing retention rates, lower returns to homelessness, and significant reductions in the use of crisis service and institutions.”

Housing First paired with the principles of equitable and dynamic prioritization help ensure those with the highest needs are quickly placed in stable housing in order to mitigate the harm caused by chronic homelessness and other factors.

Historically, there has been some confusion regarding the system requirement of “prioritizing those with the greatest need.” This confusion leads to some fairly common questions: “How is ‘greatest need’ defined? And for what project? What about eligibility criteria?” All of these questions are valid, and it is imperative the Thurston County HCRS have a consistent, replicable and equitable prioritization process all players in the system can easily understand and participate in. Consistent prioritization practices are trauma informed. When enrollment into scarce housing projects is unclear, it creates confusion and often re-traumatization. Prioritization must be a process that adds value to the system, and especially to the individuals who are attempting to enter housing projects.

Prioritization processes leading to housing program placement are also subject to scrutiny regarding implicit bias and racial disparities through assessment tools. Accordingly, many communities, including Thurston County, have initiated efforts to examine current prioritization processes in order to address racial disparities in the tools and processes currently used.

**Coordinated Entry and Outreach**

Coordinated Entry is a process developed to ensure all households experiencing homelessness have fair and equitable access to intake, assessment and referral into housing and sheltering programs, prioritizing households identified as highest needs and also meet eligibility requirements per program. The Coordinated Entry System prioritization requirements ensure households with the greatest need and highest vulnerability are prioritized and placed in appropriate housing programs efficiently. The Department of Commerce mandates all recipients of HUD, and local homeless and housing funding utilize a system of “coordinated entry and assessment” to ensure “the quickest access to the most appropriate housing to every household experiencing, or at-risk of, homelessness through a standardized assessment and referral process.”

The Washington State Coordinated Entry Guidelines require all clients seeking housing are offered diversion, and administered a comprehensive needs assessment, a consistent vulnerability assessment and that each client be prioritized through a “Dynamic Prioritization” process. Currently, the CES utilizes the Vulnerability Index – Service Prioritization Decision Assistance Tool
(VI-SPDAT) for single adults and families in order to determine vulnerability. The youth and young adult CE agency have developed their own prioritization rubric for determining vulnerability with criteria specific to the needs of that population.

The Thurston County Coordinated Entry system is low-barrier, and adheres to state, federal, and local anti-discrimination laws. Households are not screened out based on any of the following criteria:

- Having too little or no income
- Having poor credit or financial history
- Having poor or lack of rental history
- Being involved with the criminal justice system
- Having active or history of alcohol and/or substance use
- Having a history of victimization
- The type or extent of disability-related services or supports that are needed
- Lacking ID
- Lacking proof of U.S. Residency Status
- Other behaviors that are perceived as indicating a lack of “housing readiness,” including perceived resistance to receiving services

In Thurston County, the primary entry points have been designed around three sub-demographic groups:

- Single adults, couples without children and veterans: Community Action Council
- Families with children: Family Support Center
- Youth and young adults ages 12 - 24: Community Youth Services

Additionally, other service agencies work directly with individuals fleeing domestic violence and those with veteran status. In both circumstances, providers attempt to help people access specific services through integration with the CE entry points.

Agencies managing CE points-of-entry are in downtown Olympia, West Olympia, and Lacey. The CE system is also supplemented by a single phone number called the Housing Hotline (1-844-628-7343) for those in need of services who are unable to access these physical locations. While there has been significant demand at each access point, there are known “side-doors” to the system. For this reason, implementing consistent and sufficient data collection is a struggle. The Coordinated Entry Committee (CEC) works diligently to identify, as equitably as possible, prioritization tools and processes to assure the HCRS is doing all it can to address racial disparity. A special task force, the Racial Equity Prioritization Research Team has met monthly for the past 18 months to address concerns about racial disparities within the currently utilized vulnerability assessment tool. The Racial Equity Prioritization Research Team will continue to meet and inform the CEC about research around prioritization and racial equity.

The CEC consists of leadership members of the three CE providers, Thurston County staff, and members of the Thurston Thrives Homeless Housing Hub. The HCRP includes strategies to
improve data quality, outreach efforts and to continue to grow the capacity of all coordinated entry efforts. Thurston County staff will conduct an annual evaluation of the CES in order to track progress of data quality, racial equity and other performance measures identified in the workplan.

The Coordinated Entry Committee also works to manage a comprehensive, by-name master list, to ensure prioritization is consistent and accessible to those operating within the CE system. Prioritization occurs through administering engagement in a vulnerability-scaled “Dynamic Prioritization” process, per sub-population, through housing interviews.

**Dynamic Prioritization**

Dynamic prioritization considers a household’s prioritization status and current resource availability. This approach requires CE to anticipate upcoming resource availability.

It is important to understand that while those with the highest VI-SPDAT scores, for example, need permanent supportive housing (PSH) units, if there are only 12 PSH units available per year, individuals will wait longer for PSH than if they were served with rapid re-housing. Dynamic prioritization challenges us to believe that everyone can be successful in maintaining permanent housing with interventions such as rapid re-housing. For example, while individual’s wait for a PSH unit, they could be housed using rapid re-housing.

**Increased Outreach**

In 2019, new Coordinated Entry Guidelines were introduced from the WA State Department of Commerce. Within the guidelines, outreach efforts were identified as a required element of Coordinated Entry. In the summer of 2019, the lead agency for the Thurston County Coordinated Entry System, Family Support Center (FSC) hired a Coordinated Entry Outreach Coordinator in order to provide CE outreach directly. The CE Outreach Coordinator provides direct CE intake and assessment, and coordinates volunteers and staff to increase accessibility of CE, as well as to increase data quality and collection. All three sub-populations within the CE system will benefit from an increase in outreach efforts for CE activities beginning in August 2019.
Prioritization for Youth and Young Adults

Youth and young adults require specialized approaches for all service delivery, and particularly around outreach and engagement activities. The Thurston County HCRS adheres to best practices for engaging with youth and young adults who are experiencing homelessness as identified by the Office of Homeless Youth.

The youth and young adult system must use the McKinney-Vento definition which includes youth who are couch-surfing, doubled up, or staying in hotels. It’s also important to understand that many youths do not identify as “homeless”, whether they are unsheltered or living on the street.

Thurston County has a well-established access point for young people experiencing homelessness. Community Youth Services (CYS), located in downtown Olympia, has a main office, a 24/7 youth drop-in shelter, and a robust outreach team. CYS is also identified as the Coordinated Entry point for youth and young adults and have created their own youth specific assessment tools. The youth specific prioritization tool utilized in the CE system was developed to use in conjunction with a youth specific generalized intake, and information gathered through rapport building and engagement with staff. Dynamic prioritization principles, eligibility requirements specific to youth and young adult housing, and knowledge of the youth are used during prioritization.

The HCRS considers situations and identity groups that are at higher risk of victimization while on the streets. For instance, LGBTQ youth, youth exiting mainstream systems, and youth of color are over-represented in the youth and young adult homeless system. Understanding these and other factors impact the experience of homelessness for youth on the streets allows for more effective prioritization.

III. Operate an effective and efficient homeless crisis response system

Currently, the Thurston County HCRS is operating during a public health emergency. Emergency mitigation activities and emergency shelter programs are the priority need when so many individuals are unsheltered and living on the streets or other places not meant for human habitation.

The HCRS is a long way from meeting that goal. Currently, emergency response efforts are prioritized in order to meet the unprecedented need of unsheltered households living in the county. However, if the unsheltered population grows, more existing and new funding may continue to be prioritized for emergency response. The unintended consequence might mean less funding available for prevention activities, and affordable and/or permanent supportive housing projects.
Current State of the Thurston County HCRS

Ideal State of the Thurston County HCRS

<table>
<thead>
<tr>
<th>PREVENTION</th>
<th>CURRENT SYSTEM</th>
<th>IDEAL SYSTEM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Keeping people housed when they are at risk.</td>
<td>Preventing people from falling into homelessness has no consistent funding source.</td>
<td>Homelessness is prevented by keeping people in their current residences.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>UNSHELTERED</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>People who are in need of shelter, including car or tent camping.</td>
<td>There are approximately 800-1,000 unsheltered individuals countywide.</td>
<td>Unsheltered individuals are rare and infrequent.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>EMERGENCY SHELTERS</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Temporary shelter options such as shelters, managed camps, and tiny home villages.</td>
<td>Need increases during cold weather months.</td>
<td>Fewer unsheltered individuals decreases the need for emergency shelters.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PERMANENT HOUSING</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A variety of housing and supportive housing options to keep people permanently housed.</td>
<td>The movement from unsheltered to permanently housed is slow and difficult. Contributing factors include increased rental prices, low vacancy rates, and minimal supportive housing projects.</td>
<td>A variety of permanent housing options exists to best fit the community so that people can remain housed permanently. Transitional housing is best practice for youth.</td>
</tr>
</tbody>
</table>
However, the HCRS has two critical bottle-necks: (1) lack of emergency sheltering options for unsheltered individuals and (2) a lack of permanent supportive and affordable housing units for households to move into. Ideally, the HCRS would be able to prioritize funding to prevent households from falling into homelessness and have an array of accessible, low-barrier permanent and transitional housing projects for unsheltered individuals to move into swiftly. When that transition comes, emergency sheltering, and emergency mitigation projects may be given less funding prioritization due to lesser need.

Ideally, an efficient HCRS will be able to move from prioritizing primarily emergency response activities and refocus funding priorities into prevention and housing by effectively creating housing projects to address the needs of unsheltered individuals and families.

**Community Engagement**

An important element for our HCRS is engaging our local communities through educational trainings, listening sessions and by addressing concerns and disputes. As the population of unsheltered households has grown, unintentional impacts to neighborhoods, urban hubs and commercial areas have also increased. It is essential to provide all residents of Thurston County (1) access to information on the root causes of homelessness, (2) the way in which our HCRS operates, and (3) clearly communicate the operational aspects of the HCRP. We will develop and offer an annual summit to ensure all Thurston County residents have an opportunity to gain information, be updated on the progress of the HCRP, and provide feedback.

Listening to the concerns of all citizens is crucial for the health of our system and citizens should have an opportunity to inform the system, whether housed or unhoused. We will conduct listening sessions twice yearly for those with lived experience of homelessness to ensure individuals accessing the HCRS are able to provide feedback and provide guidance for system improvement. Other residents of Thurston County will also have opportunities to ask questions, provide feedback and offer suggestions, including the proposed annual summit.

In neighborhoods where HCRS projects are located, efforts will be made to engage the residential and commercial neighbors of those projects. Neighbors to HCRS projects may experience unintentional impacts such as increase in foot traffic and noise. Developing ad hoc neighborhood associations, drafting and enacting good neighbor policies, and providing dispute resolution training or services will become common practice within the HCRS.

**Funding**

In order to execute the proposed workplan strategies it is imperative all potential funding sources be sought, awarded and maximized to truly have an effective and efficient HCRS. We will convene a Funders Workgroup with all regional funders in order to identify diverse funding streams and recommend ways to maximize existing funding to shore up and increase all HCRS activities and projects.
What is the Thurston County Homeless Crisis Response System?

Overview of this section:

A. Emergency Mitigation Projects
B. Homelessness Prevention
C. Diversion
D. Emergency Shelter
E. Permanent Supportive Housing
F. Affordable Housing

A. Emergency Mitigation Projects

Thurston County is charged with the task of responding to an emergency about lack of affordable housing, rising rents and unsheltered homelessness. With full shelter beds on a nightly basis, regional emergency measures must be enacted in order to address the need of our unsheltered citizens. These responses require regional funding, planning and innovative thinking. One aspect of successful emergency mitigation projects is effective crisis response. Creating a Regional Crisis Response Unit to attend to individuals who need help may reduce the need to rely solely on medical and law enforcement response.

B. Homelessness Prevention

Thurston County has both a homeless and an affordable housing crisis. Homelessness prevention activities are intended to provide a safety net to keep cost-burdened and low-income individuals and families from falling into homelessness and entering the HCRS. Yet, there is also a need to identify “Primary and Universal Prevention” needs for Thurston County. These Primary Prevention strategies according to the Homeless Hub of Canada’s “A New Direction: A Framework for Homeless Prevention” report refers to “structural-level initiatives that apply to everyone, in order to reduce the risk of homelessness and build protective factors.” Some of these prevention strategies to reduce the risk of homelessness are universal, not only to prevent homelessness, but as steps to address affordable housing and poverty prevention strategies for everyone.

Other targeted strategies for preventing homelessness include:

1) Short-term subsidies to defray rent and utility arrearages for families with eviction or termination notices;
2) Security deposits and first month's rent to permit a homeless family to move into its own apartment;
3) Mediation programs for landlord-tenant disputes;
4) Legal services programs that represent indigent tenants in eviction proceedings;
5) Payments to prevent foreclosure on a home; and
6) Other innovative programs and activities designed to prevent the incidence of homelessness.
Prevention activities are routinely de-prioritized due to the limits of funding for HCRS programs and services and cannot be the sole responsibility of the HCRS if they are to be effective. “Homelessness cannot be prevented by the homelessness sector alone; ministries and departments in health, education, child protection, criminal justice, housing, employment and training, etc. have a role to play” (A New Direction). Seeking to diversify funding sources to offer stronger prevention efforts is key, as the homeless and housing funding streams are already committed to specific sheltering and housing efforts.

**Prevention for Veterans in Thurston County.** In 2016, the City of Lacey opened the full-service Lacey Veterans Services Hub on the Lacey Campus of South Puget Sound Community College. Prior to the Hub, Thurston County’s 36,000 veterans did not have centralized access to benefits and services provided by local and national non-profits and service providers. The Hub provides a central location for area veterans to access employment, education, housing, nutrition, and healthcare benefits and services from over 60 service providers. In 2018, the Hub facilitated 6,256 client appointments including 1,290 for mental health, 1,091 for housing, and 281 for employment.

The Lacey Veterans Services Hub also serves as an access point for single adults to the Thurston County Coordinated Entry Program. Additional support for the Hub is provided by the Thurston County Veterans Assistance Fund and directly from Thurston County.

**C. Diversion**

Diversion is a cost effective “first response” strategy based on housing first principles designed to quickly move an individual or family early in their housing crisis expediently into housing. This is accomplished by by-passing the need to enter the HCRS entirely. If a household seeks services within the HCRS, the first strategy should always be a consistent and equitable diversion process. Ideally, diversion happens with a conversation, and little else. Empowered problem solving with a participant requires exploring their internal resources, their community and family resources, previous helpful services and other innovative inquiries to divert them out of the HCRS. Often times, diversion does not involve much in the way of funding, and therefore can free up those funds to be invested in other households in need. However, if it is determined that diversion is not an option, an individual or family member is enrolled in the coordinated entry system, assessed for needs and referred to various housing projects, including emergency shelters. Currently, diversion is available to all sub-populations, and funded through the Coordinated Entry System.

**D. Emergency Shelter**

*Emergency, continuous stay and higher barrier sheltering*

Individuals or family members can be referred into emergency (night-by-night) shelters through coordinated entry or other system referrals. In the Thurston County HCRS, there are emergency shelters for adults without children, youth and young adults, domestic violence survivors and families, and additional increased capacity during the cold weather season. All HCRS providers are required to have at least one low-barrier shelter model for each sub-population.
In Thurston County, there are two 24/7 low-barrier shelters for the youth/young adults/families with minors’ populations, and 4 low-barrier shelter options for single adults. (see appendix for low barrier definition from Dept. of Commerce). All shelters within the HCRS fall under the Fair Housing Act and are required to house all guests without discrimination. All shelter providers will receive annual training on the Fair Housing Act, for including specialized cultural competency training for the LGBTQ+ community, with an emphasis on sheltering transgender and non-binary individuals.

In addition to emergency sheltering, the Thurston County HCRS has continuous stay and higher barrier shelters. Continuous stay shelters have beds assigned to folks who have been prioritized through coordinated entry vulnerability assessments. Higher barrier sheltering has increased eligibility requirements and an interview before enrollment.

**How much shelter do we have? How much do we need?**

In 2019 there are an estimated 357 shelter beds available. Of those beds, 95 are emergency beds (night-by-night low barrier shelters) 145 are shelter beds assigned to those individuals or families who have been prioritized through the coordinated entry system and 115 are tents in the encampment managed by the City of Olympia. All these beds are full on any given night and all these sheltering options are housed within a 1-mile radius of downtown Olympia. Ideally, as the HCRP is implemented, we will reduce the need for emergency shelter beds. Until that time, the current sheltering system must be sustained in addition to expanding regional shelter capacity to meet the need of the unsheltered households in Thurston County to add at minimum 100 shelter beds.

### E. Permanent Supportive Housing

Operating an effective and efficient HCRS from a Housing First perspective requires a significant increase in permanent supportive housing (PSH) units and attached supportive services to ensure housing placement stability. Currently in Thurston County, there are approximately 179 PSH units, all of which are occupied. According to the Quarter 2 Housing Projects Data Report, 2% of individuals within the HCRS were placed into PSH units. Outside of prioritizing the development of new or rehabilitated PSH units, encouraging agencies within the HCRS to partner with Medicaid and the Foundational Community Supports as a funding source for support services is necessary.
F. Affordable Housing

Housing Affordability is Key to Preventing Homelessness

The cost of housing is directly linked to homelessness. Multiple studies, including Zillow, have linked increases in rent to increases in homelessness. To serve a diverse population, a robust housing system must include housing types for all household income levels as a primary means to prevent homelessness.

Thurston County and cities have taken many actions to influence the scarcity and rising cost of housing. All policies and programs that incentivize an increase in housing supply for all income levels should be considered. Every community in Thurston County should strive to scale housing production to the breadth of incomes within the community. Some examples of these are explored later in this plan.

Thurston County has (based on 2018 estimates) approximately 6,700 existing transitional, permanent supportive, and subsidized rental and home ownership units. According to the Quarter 2 Housing Projects Data Report, enrollment into these projects is slow compared with similar size counties elsewhere in Washington. At the end of the first quarter of 2019, only 2% of individuals and families enrolled in the HCRS have exited into permanent housing, 3% into transitional housing projects, and 23% into housing through rapid rehousing programs.

Lack of affordable housing, steadily increasing rents and stagnant wages are causing more households to be at risk of falling into homelessness. More affordable rental and permanent supportive housing units need to be developed, and policies and programs that help households find and retain housing should be pursued.

Publicly-assisted developed housing should serve the highest need households. In Thurston County most formerly transitional housing projects have converted to permanent supportive housing to ensure housing for people with disabilities. Thurston County, like other counties, is limited by operational and rent support for new public housing projects. Construction funds are easier to come by than long-term rent supports for those projects.

Cost-Burdened Households

There are a growing number of households in Thurston County who are not directly facing homelessness but whose unstable housing circumstance puts them at risk. According to the 2015 Washington State Housing Needs Assessment1, approximately 23,000 households in Thurston County were classified as cost-burdened (paying more than 30 percent of their income for housing) and severely cost-burdened (paying more than 50 percent of their income for housing). This represents about one third of the total community. That means those 23,000 households (13,000 renters and 10,000 homeowners) in Thurston County are at risk of homelessness.
In addition to being cost-burdened or severely cost-burdened, households earning between 0% - 80% of Area Median Income (AMI) are classified as Low-Income Households according to HUD. The combination of cost-burdened and low income creates a high likelihood of housing instability, which significantly increases the risk of a household becoming homeless (FY 2019 Income Limits Documentation System).
Supporting the data regarding cost burdened households, the 2019 Out of Reach report by the National Low-Income Housing Coalition states a full-time worker would need to make an hourly wage of $22.15. Yet, the average renter makes $14.50 per hour. In order to afford market rate 2-bedroom housing (average $1,152 per month) the average renter would need to work 61 hours per week. If the renter household has children or other dependents, the required wage for market rate housing increases.

The combination of cost-burdened and low income creates a high likelihood of housing instability, which significantly increases the risk of a household becoming homeless. Even if they can avoid becoming homeless, they are most likely existing under high levels of chronic stress and potentially existing in substandard housing or living conditions. Currently, most homeless prevention and rental assistance is focused on households classified as Extremely Low Income, earning between 0% - 30% of Area Median Income (AMI). That still leaves almost 8,700 income qualified, cost-burdened households who may become homeless without needed support to remain housed. This potential demand poses great risk to the effectiveness of the HCRS in several ways:

1. Without the ability to alleviate the cost burden with adequate affordable housing inventory, reducing the number of households in need of homeless housing services is beyond our control.
2. There are about 14,700 households struggling that we know little about because they are ineligible for services and therefore not tracked in program data.
3. The volume of demand on the homeless service system far outweighs the current funding available.
4. Most of the cost-burdened and severely cost-burdened households across the income spectrum face a greater risk of becoming homeless as rents rise and becomes less “affordable.”

Fortunately for our County, Lacey, Olympia and Tumwater all have developed affordable housing plans. It is the intent of the HCRP to be complementary rather than duplicative of those efforts. Along with some key affordable housing strategies highlighted in the work...
plan, an additional strategy to align the existing affordable housing plans and support their implementation has been inserted.

G. Transitional Housing for Youth and Young Adults

For some homeless youth and young adults, whether due to their age or to their family environment—(which may include: high risk of repeated abuse, neglect or exploitation, parents who are no longer around due to either death or incarceration, or parents who are homeless themselves), family reunification is, unfortunately, not an option. For this reason, transitional housing and permanent supportive housing are included in the youth model. Transitional housing for youth has been identified as best practice for youth and young adults (YYA). Many YYA have little to no experience in obtaining and maintaining housing and may require some level of on-going supportive services (The National Network for Youth).

Workforce Development

An effective HCRS requires all people experiencing homelessness have equitable access to employment and a living wage income. Individuals experiencing homelessness rank paid employment and housing as primary needs, and want and need opportunities for work, according to the USICH “Advancing Employment, Equity, and an End to Homelessness: The Pathways Forward Challenge” report. Yet, equitable and accessible entry points for employment are few and far between. Unless significant system changes are implemented to aid houseless job seekers in equitably obtaining and maintaining paid employment, addressing the homeless crisis is inextricably more difficult. System change, focusing on people who are not prioritized for housing due to long wait lists, and addressing workforce development through a racial equity lens to system change initiatives are strategies that can move the dial on this issue.

Housing Conditions

In order to fully address the need for additional housing, there need to be efforts to keep current housing in good condition. Mold and moisture issues are extremely common due to the wet and rainy climate in Thurston County, and have a negative impact on both human health and building health, potentially causing structural damage. The workplan in this report sets goals to improve current policies and programs in Thurston County to adequately address mold and moisture – especially in affordable rental units. Renters who are cost burdened and severely cost burdened are most likely to experience substandard living conditions, and the related negative health and wellness impacts. Addressing housing conditions is part of addressing health equity and disparities. Keeping residents in safe and healthy housing helps prevent homelessness and improves health outcomes.

Housing and habitability codes, rental registration programs, and financial assistance programs for the repair of rental housing are examples of policies and programs that can help the community ensure the housing stock will continue to serve as healthy and safe housing.
IV. Project the impact

Current State

Currently in Thurston County approximately 494 households can be served at any given time. With approximately 2,141 households served in 2018, a 33% successful exit rate (i.e., exits to permanent housing rate), a 22% return to homelessness rate following successful exit, and nearly 720 unsheltered households (as indicated in 2019 PIT Count), Thurston County has nearly 1,692 households currently not in a permanent housing solution.

<table>
<thead>
<tr>
<th>Current State</th>
<th>ES</th>
<th>TH</th>
<th>RRH</th>
<th>PSH</th>
<th>PH</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Capacity</td>
<td>235</td>
<td>68</td>
<td>114</td>
<td>39</td>
<td>38</td>
<td>494</td>
</tr>
<tr>
<td>Served Per Year</td>
<td>1640</td>
<td>125</td>
<td>290</td>
<td>44</td>
<td>42</td>
<td>2,141</td>
</tr>
<tr>
<td>2018 Project Exit Rate</td>
<td>57%</td>
<td>56%</td>
<td>63%</td>
<td>14%</td>
<td>48%</td>
<td>56%</td>
</tr>
<tr>
<td>2018 Successful Exit Rate</td>
<td>20%</td>
<td>81%</td>
<td>87%</td>
<td>33%</td>
<td>15%</td>
<td>33%</td>
</tr>
<tr>
<td>Return to Homelessness Rate</td>
<td>42%</td>
<td>17%</td>
<td>54%</td>
<td>50%</td>
<td>33%</td>
<td>22%</td>
</tr>
<tr>
<td>Unsheltered Households (2019 PIT Count)</td>
<td>720 unsheltered households</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Future State

To forecast the number of households in need of permanent housing solutions by 2024, the Model EZv7 tool provided by the Department of Commerce was used to examine service capacity and realistic service goals. If the county increases service capacity in emergency shelters/encampments (115 beds) and permanent supportive housing (25 beds), while increasing the successful exit rate and decreasing return to homelessness rate across all projects, by 2024 there will be a forecasted -52% change in unsheltered households in the point-in-time count. Additionally, with the increased capacity and improved performance of projects, the deficit of successful interventions is forecasted to decrease. However, considering population growth and rent-increases by 2024, the demand for successful interventions is likely to increase, resulting in a projected deficit of successful interventions to 1,077 households and nearly 153 unsheltered households in the 2024 point-in-time count.

<table>
<thead>
<tr>
<th>Future State</th>
<th>ES</th>
<th>TH</th>
<th>RRH</th>
<th>PSH</th>
<th>PH</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected Service Capacity</td>
<td>350*</td>
<td>68</td>
<td>114</td>
<td>64*</td>
<td>38</td>
<td>634</td>
</tr>
<tr>
<td>Projected Served Per Year</td>
<td>2443</td>
<td>125</td>
<td>290</td>
<td>72</td>
<td>42</td>
<td>2,972</td>
</tr>
<tr>
<td>Projected Exit Rate (no change)</td>
<td>57%</td>
<td>56%</td>
<td>63%</td>
<td>14%</td>
<td>48%</td>
<td>56%</td>
</tr>
<tr>
<td>Projected Successful Exit Rate</td>
<td>50%*</td>
<td>81%</td>
<td>87%</td>
<td>33%</td>
<td>15%</td>
<td>56%</td>
</tr>
<tr>
<td>Projected Return to Homelessness Rate</td>
<td>20%</td>
<td>10%</td>
<td>20%</td>
<td>50%</td>
<td>33%</td>
<td>20%</td>
</tr>
<tr>
<td>Projected Unsheltered Households 2024</td>
<td>153 unsheltered households</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Projected Deficit of Successful Interventions in 2024</td>
<td>1,077 households not in a permanent housing solution</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Projecting Impact Summary

- **2,972 households are likely to be housed annually by 2024** if capacity is increased and performance targets are met as indicated in the Future State table above.

- **1,230 households are likely to need housing annually by 2024** is (153 unsheltered and 1,077 households not in permanent housing solution) if following the same model as described in the Future State table above.

In order to meet our goals for increasing the number of households exiting to permanent and permanent supportive housing, decrease the number of households exiting back into homelessness and reduce the length of time a household experiences homelessness, an efficient and effective system is a requirement. *The strategies to meet these goals have been identified and created, and exist within the objective four section of the workplan.*

**V. Address Racial Disparity**

People of color are more likely than white people to experience homelessness in the United States. This is certainly true in Thurston County, where 32% of people experiencing homelessness are people of color (2019 Thurston County Homeless Census).

Of individuals experiencing homelessness in the Balance of State (WA-501), 19% are people of color; however, of individuals experiencing homelessness in Thurston County, 30% are people of color. Likewise, of unsheltered individuals in the Balance of State (WA-501), 21% are people of color; however, of unsheltered individuals in Thurston County, 30% are people of color. Arguably, we cannot end homelessness unless we address institutional, structural, and local racial disparity that contribute to these disproportionate impacts.
The work of incorporating racial equity principles and best practices is a lengthy and ongoing process which requires system-wide personal and professional buy-in. In conversations with members of the HCRS during the drafting of this plan, it was crucial to acknowledge the commitment to a meaningful and purposeful approach about how to address the disproportionate percentages of POC experiencing homelessness in the community. Truly assessing, analyzing and implementing practices to address equity and related disparities will take years of effort, and a system fully committed to the process.

The first step in addressing racial disparities within the HCRS and populations of people experiencing homelessness is to understand how the system is or is not implicit in perpetuating racial disparities. This requires a consistent analysis of high-quality data to examine exactly who is experiencing homelessness, and how they are or are not moving through the system towards housing, or if they are even being accounted for at all. This also requires a system analysis of the diversity of all providers, city and county staff, leadership and boards responsible for program development and delivery. Creating diversification strategies for direct service staff and more importantly, leadership, has a direct positive impact on outcomes for POC experiencing homelessness. Another strategy is to look closely at the data within HMIS and from the annual PIT count. Understandably, this requires providers who routinely entering quality data into the HMIS system, analysis of that data and the subsequent development of strategies to address disparities found (United States Interagency Council on Homelessness).

These initial strategies will take leadership, time and resources. Yet, if the Thurston County HCRS hopes to end homelessness, it is imperative we prioritize the implementation of the suggested strategies.
Summary

Understanding that all people deserve housing, are ready for housing, and that homelessness can happen to anyone at any time fosters a compassionate and pragmatic approach to addressing the current homelessness and affordable housing crisis in Thurston County. The Thurston County Homeless Crisis Response Plan aims to reduce unsheltered homelessness and increase access to affordable and permanent supportive housing through:

- Operating an equitable, coordinated, consistent, and concise HCRS
- Increasing outreach and engagement efforts to all people experiencing homelessness and mainstream services using a racial equity lens
- Fair and equitable prioritization of highest need households who are eligible for programs most appropriate per household
- Ensuring the HCRS moves toward developing and implementing a racial equity work plan that creates a pathway towards more equitable and accountable service delivery

In conclusion, the Thurston County HCRP will inform and work in conjunction with developing and existing homeless response efforts, affordable housing plans, comprehensive and strategic plans, opioid and mental health response plans and be informed by feedback from those accessing the system and the greater community. Working together as a region is the most effective way in which this issue can be addressed in order to work towards no person being left outside.
THURSTON COUNTY HOMELESS CRISIS RESPONSE WORK PLAN

The Thurston County HCRP work plan is structured to reflect the 5 objectives identified by the Department of Commerce. Each objective addresses specific strategies, tasks associated with each strategy, proposed outcomes, responsible parties and timeline and milestones. The work plan intends to capture the content described in the narrative portion of the HCRP in order to meet and exceed performance measures.

**Objective 1.**
Quickly identify and engage all people experiencing homelessness under the state definition*, and all unaccompanied youth under any federal definition*, through outreach and coordination between every system that encounters people experiencing homelessness.

**Measure of Success**

a) Communities with Street Outreach projects: Increase percentage of exits to positive outcome destinations to the level of the top performing 20 percent of homeless crisis response systems nationwide.

b) Compliance with state and federal Coordinated Entry Data Collection requirements in order to build and maintain active lists of people experiencing homelessness and to track the homelessness status, engagements and housing placements for each household.

**Objective 1, Strategy 1**
Ensure compliance with Coordinated Entry (CE) data collection requirements: Increase data quality for HCRS through targeted trainings

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Data Collection &amp; Sharing Continue to work with partners to streamline data collection and data sharing efforts</td>
<td>- Improved planning and implementation of programs and services within HCRS</td>
<td>Chair of CEC, Homeless Prevention and Affordable Housing Coordinator (HPAHC), PHSS Data Analyst</td>
<td>Quarterly and annual data quality assessment</td>
</tr>
<tr>
<td>2. Offer training in collaboration with the Department of Commerce for partners entering data into HMIS for specific projects</td>
<td></td>
<td>Bi-annual specialized trainings on Data Quality Improvement- 2020</td>
<td></td>
</tr>
<tr>
<td>3. Ongoing Evaluation through quarterly HMIS reports provided by PHSS and distributed through the Data Work Group</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Objective 1, Strategy 2

Maintaining active lists of individuals experiencing homelessness for all sub-populations: Continue to maintain active lists of all individuals experiencing homelessness and improve data sharing efforts for all sub-populations.

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Improve existing by-names list monitor all by-names lists</td>
<td>Increase in system efficiency</td>
<td>HPAPC, CEC Chair</td>
<td>Monitoring of all by-name lists – 2020 and ongoing</td>
</tr>
<tr>
<td>2. Engage all agencies within the HCRS to encourage them to refer all individuals experiencing homelessness to CE intake</td>
<td>More agencies referring to the CE system for enrollment and intake</td>
<td></td>
<td>Engaging all agencies in HCRS – 2020 and ongoing</td>
</tr>
<tr>
<td>3. Ensure all CE agencies are working in tandem to ensure by-name lists per sub-populations are not duplicative</td>
<td></td>
<td></td>
<td>Track status, engagement and enrollment – 2022 and ongoing</td>
</tr>
<tr>
<td>4. Track status, engagement and enrollment of all households into housing projects</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Objective 1, Strategy 3

Strengthen Outreach Best Practices: Identify and develop best practice trainings for outreach staff within the HCRS – with specific emphasis on special populations.

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Research Best Practices examine current national best practices for outreach to populations experiencing homelessness</td>
<td>Increased capacity of outreach efforts</td>
<td>CE Outreach Coordinator, Director of Rosie’s Place Shelter Services, CAC CE Outreach Specialist, HPAHC</td>
<td>Research Best Practices – 2019 and ongoing</td>
</tr>
<tr>
<td>2. Implement Training on best practices in conjunction with but not limited to trainings identified in strategy 5.F.</td>
<td>Increased consistency of service delivery</td>
<td></td>
<td>Implement Training – 2021 and ongoing</td>
</tr>
<tr>
<td>3. Expand Partnerships Identify and partner with service systems and/or sectors impacted by homelessness, i.e. law enforcement; corrections; hospitals; business organizations and others</td>
<td>Increased understanding of specific needs of sub-populations system-wide</td>
<td></td>
<td>Cross-Training – 2020 and ongoing</td>
</tr>
<tr>
<td>4. Cross-Training Expand cross-training between outreach service providers to align service models</td>
<td></td>
<td></td>
<td>Increase percentage of exits to positive outcome destinations to the level of the top performing 20 percent of HCRS nationwide – 2024</td>
</tr>
<tr>
<td>5. Increase Percentage of exits to positive outcome destinations for all sub-populations in outreach projects</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Objective 1, Strategy 4
**Increase Outreach to Emergency Services:** Increase or develop strategies to engage with emergency services as defined by Dept. of Commerce: Homeless prevention services, DV and emergency services hotlines, Drop-in service programs

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Identify existing</strong> emergency services within the HCRS</td>
<td>- Increase in positive exit outcomes for prevention services</td>
<td>HPAHC, CEC Chair</td>
<td>Identify existing services – 2020</td>
</tr>
<tr>
<td>2. <strong>Increase outreach</strong> efforts to these services</td>
<td>- Increase connection to emergency services specific to need</td>
<td></td>
<td>Increase outreach efforts – 2022 and ongoing</td>
</tr>
<tr>
<td>3. <strong>Include services</strong> in all resource guides for outreach activities</td>
<td>- Increase in positive exit outcomes for prevention services</td>
<td></td>
<td>Include services in resource guides – 2020 and ongoing</td>
</tr>
</tbody>
</table>

### Objective 1, Strategy 5
**Identify or Develop Best practices for outreach to households living in vehicles or RV’s:** Identify and implement promising or best practices in outreach efforts to individuals and families living in their vehicles or RV’s.

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Research best practices</strong> that are being utilized nationwide for engaging with households living in vehicles or RV’s</td>
<td>- Increase in understanding of best practices</td>
<td>HPAHC, Lead Provider</td>
<td>Research Best Practices – 2020 and ongoing</td>
</tr>
<tr>
<td>2. <strong>Develop regional and local</strong> best and promising practices for engaging with households living in vehicles or RV’s</td>
<td>- Increase in services linkages for this population</td>
<td>TBD*,</td>
<td>Implement Best practices by 2022</td>
</tr>
<tr>
<td>3. <strong>Implement best practices</strong> for engaging with households living in vehicles or RV’s</td>
<td>- Increase in positive exits to permanent housing for this population</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Objective 1, Strategy 6
**Racial Equity in Outreach Best Practices:** Identify and develop best practices for outreach activities for indigenous populations, people of color and immigrants who are experiencing homelessness.

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Expand Bi-lingual Staff Resources</strong> Hire and train bi-lingual outreach staff</td>
<td>- Increase in equitable and successful service linkages</td>
<td>HPAC, CEC Chair, REC Chair</td>
<td>Expand Bilingual staff – 2020</td>
</tr>
<tr>
<td>2. <strong>Create Materials</strong> for outreach that are in multiple languages</td>
<td>- More robust regional outreach operations</td>
<td></td>
<td>Create materials – 2020</td>
</tr>
<tr>
<td>3. <strong>Identify Community Partners</strong> Partner with traditional and non-traditional sites</td>
<td></td>
<td></td>
<td>Identify Partners – 2020 and ongoing</td>
</tr>
</tbody>
</table>
4. **Identify Technical Assistance** for a language bank to lower barriers for agencies to have materials translated

5. **Create Culturally Authentic User Guide(s)** Develop a road-map for communities of color to connect to services, using a human-centered system design approach*

6. **Reexamine Current Practices** Evaluate current best practices for outreach activities through a racial equity lens

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**Objective 1, Strategy 7**  
**Family Outreach:** Increase regional outreach efforts for families experiencing homelessness

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>School Partnerships</strong></td>
<td>- More families within Thurston County will be identified and referred into services</td>
<td>Outreach Specialist – Family Support Center</td>
<td>Continue to develop relationships with school districts and school counselor partnerships - ongoing</td>
</tr>
<tr>
<td>2. <strong>School Counselor Partnerships</strong></td>
<td>- Increase understanding of where families tend to converge</td>
<td></td>
<td>Increase Regional outreach - 2022</td>
</tr>
<tr>
<td>3. <strong>Broader Partnerships</strong></td>
<td>- Increase in system alignment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. <strong>Increase Regional Outreach</strong></td>
<td>- Potential for mapping areas of high need to target future and ongoing outreach and engagement strategies</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Objective 1, Strategy 8
#### Youth & Young Adult Outreach: Increase regional outreach efforts for youth and young adults (YYA) experiencing homelessness

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Identify Gathering Spots</strong> Continue to identify places where YYA congregate county wide</td>
<td>- More YYA experiencing homelessness county-wide will be identified and referred into YYA specific services</td>
<td>Rosie's Place Outreach Lead</td>
<td>All tasks listed are in progress and will remain ongoing tasks</td>
</tr>
<tr>
<td>2. <strong>School Partnerships</strong> Continue to identify and strengthen relationships with McKenny-Vento homeless liaisons for all school districts county-wide</td>
<td>- Increase understanding of where YYA tend to converge</td>
<td></td>
<td>Increase in system alignment, positive exits – 2022 and ongoing</td>
</tr>
<tr>
<td>3. <strong>School Counselor Partnerships</strong> Continue to partner with school counselors in school districts county-wide</td>
<td>- Increase in system alignment</td>
<td></td>
<td>Increase and improve partnerships with law enforcement, JJS, and Businesses – 2022 and ongoing</td>
</tr>
<tr>
<td>4. <strong>Other Partnerships</strong> Partner with Lacey Family &amp; Youth Resource Center</td>
<td>- Increase in positive exits from outreach to program system enrollment</td>
<td></td>
<td>Increase Rural Outreach – 2022 and ongoing</td>
</tr>
<tr>
<td>5. <strong>Juvenile Justice Partnerships</strong> Continue to strengthen partnerships with Juvenile Justice System</td>
<td>- Potential for mapping areas of high need to target future and ongoing outreach and engagement strategies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. <strong>Law Enforcement Partnerships</strong> Partner with regional law enforcement</td>
<td>- Build awareness and skills among non-homeless YYA organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. <strong>Business Partnerships</strong> Partner with business organizations</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. <strong>Youth Organization Partnerships</strong> continue to partner with youth organizations - - CYS, Together; Big Brothers Big Sisters; Boys and Girls Club, YMCA, Libraries</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. <strong>Parks &amp; Rec Partnerships</strong> Partner with Government funded Parks &amp; Recreation Programs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. <strong>Increase Regional Outreach</strong> in order to reach YYA in more rural jurisdictions</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
### Objective 1, Strategy 9

**Single Adult Outreach:** Increase regional outreach efforts for adults experiencing chronic homelessness

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Unsanctioned Camp Outreach</strong> Continue to increase outreach to unmanaged encampments with trained outreach workers according to best practice</td>
<td>- More chronically homeless adults within Thurston County will be identified and referred into services</td>
<td>CAC Single Adult Outreach specialist</td>
<td>Increase in system alignment – 2022</td>
</tr>
<tr>
<td>2. <strong>Sanctioned Camp Outreach</strong> Continue and increase providing outreach to mitigation or stability camp sites,</td>
<td>- Increase understanding of where chronically homeless adults tend to converge</td>
<td></td>
<td>Increase in regional outreach efforts – 2022</td>
</tr>
<tr>
<td>3. <strong>Day Center Outreach</strong> Continue providing and increase outreach to Community Care Center</td>
<td>- Increase in system alignment</td>
<td></td>
<td>Strengthen relationship with partners – 2020 and ongoing</td>
</tr>
<tr>
<td>4. <strong>Strengthen partnerships</strong> with Law Enforcement, Libraries, Parks and Recreation</td>
<td>- More chronically homeless adults within Thurston County will be identified and referred into services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. <strong>Increase Regional Outreach</strong> in order to reach individuals in more rural jurisdictions</td>
<td>- Increase understanding of where chronically homeless adults tend to converge</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Objective 1, Strategy 10

**Veterans Outreach:** Increase regional outreach efforts for Veterans experiencing homelessness

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Identify Veterans Outreach Lead</strong></td>
<td>- More Veterans within - Thurston County will be identified and referred into services</td>
<td>CAC Veterans CE specialist</td>
<td>Identify Veteran’s Outreach Lead - 2021</td>
</tr>
<tr>
<td>2. <strong>Increase Veterans Outreach</strong> Increase outreach efforts in order to identify and refer unsheltered veterans to the Veteran’s Hub for Coordinated Entry and program service referral</td>
<td>- Increase understanding of where unsheltered veterans tend to converge</td>
<td></td>
<td>Increase in unsheltered veterans being identified and receiving referrals to services – 2021 and ongoing</td>
</tr>
<tr>
<td>3. <strong>Partner</strong> with VFW, 22TooMany, and other veterans’ organizations</td>
<td>- Increase in system alignment</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Increase in successful referrals to mental health and substance use treatment</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Objective 1, Strategy 11

**Older Adult/Senior Outreach:** Develop outreach and engagement strategies to identify older adults/seniors experiencing homelessness

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
</table>
| 1. **Best Practices** Research existing best practices for engaging with unsheltered older adults/seniors in all service and day facilities as well as in unmanaged and managed encampments | - Increase understanding of the number of seniors experiencing homelessness  
- Mapping of locations where seniors experiencing homelessness congregate  
- Increased positive referrals and service linkages  
- Reduced fear among older adults/seniors in accessing services at other service/day centers | Chair of the Silver Team – HAT, HPAHC | Research Best Practices – 2021  
Develop strategies for outreach for seniors – 2021 |
| 2. **Implement best practices** for identifying and engaging older adults/seniors living on the streets, in managed and unmanaged encampments | - | Chair of the Silver Team – HAT, HPAHC | Implement Best Practices for engaging older adults/seniors – 2022 and ongoing |
| 3. **Service Linkages** Identify appropriate service linkages for seniors experiencing homelessness | - | Chair of the Silver Team – HAT, HPAHC | |

### Objective 1, Strategy 12

**Rural Outreach:** Increase rural outreach efforts for all sub-populations

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
</table>
| 1. **Identify Outreach Areas** Identify ex-urban & rural areas that need outreach coverage throughout the county | - Increase in understanding the need in rural communities for connection to programs, services and permanent housing  
- Increase positive referrals into the HCRS  
- Identification of service needs within rural communities in Thurston County  
- Develop positive relationships between outreach workers and rural communities | CRC Path Outreach Manager, CRU Outreach, TBD Rural Outreach Lead | Identify areas for outreach – 2020  
Identify stake holders – 2020  
Identify and mobilize outreach teams – 2020 |
| 2. **Identify Stakeholders** Identify key stakeholders in ex-urban & rural communities in order to create more effective outreach and engagement efforts | - | CRC Path Outreach Manager, CRU Outreach, TBD Rural Outreach Lead | |
| 3. **Identify Outreach Teams** with capacity for rural outreach efforts | - | CRC Path Outreach Manager, CRU Outreach, TBD Rural Outreach Lead | |
### Objective 1, Strategy 13
**Hospital/Treatment Center Outreach:** Increase outreach to systems outside of the HCRS - Hospitals, Treatment Centers

<table>
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<th>Tasks</th>
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<th>Timeline</th>
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</table>
| **1. Institutional Outreach** Strengthen relationships between medical institutional settings and the HCRS shelter system | - Increase in services referrals and linkages for those exiting medical institutions into homelessness  
- Reduce those exiting medical institutions into homelessness | IFW Executive Director, Rosie’s Place Shelter Services Director | Convene meeting with hospital and treatment center staff - 2020 |

### Objective 1, Strategy 14
**Jails Outreach:** Increase outreach to all correctional facilities and re-entry systems

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</table>
| **1. Jail Networks** Develop relationships with regional jails | - Increased linkage of Jails with available resources  
- Reduced numbers/percentages of prisoners released to homelessness | IFW Executive Director, Rosie’s Place Shelter Services Director, PHSS Data Analyst | Develop relationships with regional jails – 2020  
Develop a method or pathway for tracking data – 2022 |
| **2. Develop data tracking** number of people to be released to homelessness | | | |
| **3. Increase Positive referrals** and service linkages for Sex Offenders and other ex-offenders | | | |

### Objective 1, Strategy 15
**Outreach to Students in Higher Education:** Increase outreach efforts to local community college and four-year college students experiencing homelessness

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<th>Tasks</th>
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<th>Responsible Party</th>
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</table>
| **1. College Partnerships** Develop partnerships with college counseling, student, and specialized coordinators of programs that might interact with homeless students | - Increase program and services connections for homeless college students.  
- Increase education of the HCRS to college educators and staff in order to increase positive referrals  
- Create research opportunities | Rosie’s Place Outreach Specialist, CAC CE Outreach, CE Outreach Coordinator | Develop partnerships with outreach providers and schools – 2020  
Explore a variety of research and funding opportunities with local schools – 2022 and ongoing |
| **2. Explore Projects** in research and funding opportunities with local colleges | | | |
| **3. Resource Guides** Provide information via written materials or info session with local colleges about the HCRS and Coordinated Entry | | | |

- Resource Guides for students - 2020
### Objective 1, Strategy 16
**Coordination with Law Enforcement:** Engage regional and Law Enforcement Agencies (LEA) in Coordinated Entry referral and broad HCRS service linkages

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<th>Tasks</th>
<th>Outcome</th>
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<tbody>
<tr>
<td>1. <strong>Communication Networks</strong></td>
<td>Strengthen cross system connections between all law enforcement agencies and the HCRS</td>
<td>Chair of CEC, CE Outreach Coordinator, Rosie's Place Outreach Coordinator, Officers and Deputies TBD</td>
<td>Convene law enforcement and outreach meetings bi-annually – 2021</td>
</tr>
<tr>
<td>2. <strong>Referral Materials</strong></td>
<td>Develop up to date referral materials for LEA to distribute to people experiencing homelessness</td>
<td>Resource materials for Law Enforcement Agencies and Fire Departments – 2020 and updated ongoing</td>
<td></td>
</tr>
<tr>
<td>3. Offer Coordinated Entry information sessions for all LEA to increase positive referrals to CE</td>
<td>- Increase collaboration between service providers and law enforcement agencies to increase positive referrals to programs and services within the HCRS</td>
<td></td>
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<tr>
<td>4. <strong>Explore and develop</strong></td>
<td>innovative outreach and referral partnerships with service providers, mental health outreach providers, Coordinated Entry</td>
<td>- Increase positive referrals and service linkages for unsheltered individuals</td>
<td></td>
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</table>

### Objective 1, Strategy 17
**Outreach to Neighborhood Organizations:** Develop consistent outreach and engagement efforts for neighborhoods regarding efforts of the HCRS, and potential projects that might impact neighborhoods.

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<th>Outcome</th>
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<tbody>
<tr>
<td>1. <strong>Communication Networks</strong></td>
<td>Develop relationships to existing neighborhood organizations and coalitions</td>
<td>HPAHC, Olympia Coalition of Neighborhood Associations (CAN);</td>
<td>Ongoing</td>
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<tr>
<td></td>
<td>- Increase understanding of both homelessness and neighborhood concerns</td>
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<td></td>
<td>- Methodology for conflict-resolution that recognizes the needs and responsibilities of all involved</td>
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### Objective 1, Strategy 18
**Through the CE system by-names list management and enrollments, HMIS data quality improvement and ongoing system monitoring track status of all individuals and families exiting into housing**

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<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
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<tbody>
<tr>
<td>1. <strong>Monitor HMIS data</strong></td>
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<td>Ongoing</td>
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</table>
Objective 2.
Prioritize housing for people with the greatest need.

**Measure of Success**

a) Compliance with state and federal Coordinated Entry requirements for all projects receiving federal, state and local homeless funds.
b) Consider implementation of the Coordinated Entry Core Element9 recommendations and the Office of Homeless Youth’s Five Recommendations for Making Coordinated Entry Work for Youth and Young Adults
c) Successful implementation of prioritization policies for all projects receiving federal, state and local homeless funds, resulting in prioritized people consistently housed in a timely manner.

**Objective 2, Strategy 1**

**Annual Evaluation of Coordinated Entry System (CES):** Thurston County Office of Housing and Homelessness Prevention (OHHP) will monitor and evaluate the Coordinated Entry System (CES) annually through HMIS, CES surveys, and partner surveys

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<tbody>
<tr>
<td>1. <strong>Evaluate provider bias</strong> Evaluate CES continuously for possible implicit provider bias as demonstrated through quarterly data analysis of positive program enrollments and exits for overrepresented populations</td>
<td>- Continuous evaluation and improvement of the CES - Increased positive exits from CE into permanent, affordable, and permanent supportive housing projects for those who are highest needs within the system.</td>
<td>OHHP Social Service Program Specialist, HPAHC, HHH Chair</td>
<td>Quarterly: HMIS &amp; other Data Quality, Annual: Coordinated Entry System evaluation - Annually</td>
</tr>
<tr>
<td>2. <strong>Evaluate Prioritization Improvements</strong> Follow up with research being done with the REC on equitable prioritization tools</td>
<td></td>
<td></td>
<td>Evaluate Prioritization Improvements - 2022</td>
</tr>
<tr>
<td>3. <strong>Training</strong> Offer trainings on Implicit Bias on-going for CES staff and volunteers (See strategy 1.F.)</td>
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<tr>
<td>4. <strong>Evaluate Data Quality</strong> Evaluate CES for data quality</td>
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<tr>
<td>5. <strong>Evaluate Outreach</strong> Evaluate CES for increased number of contacts and increased assessments and enrollments into the CES</td>
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<tr>
<td>6. <strong>Share summary</strong> of the annual evaluation with stakeholders</td>
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</table>
7. **Evaluate Training** Evaluate CES regarding training and community engagement

### Objective 2, Strategy 2
**Evaluate Vulnerability Prioritization:** Conduct rigorous data analysis to examine and evaluate the efficacy of existing CES vulnerability assessment tools to effectively capture the vulnerabilities of people of color and other marginalized identities entering the HCRS.

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<th>Tasks</th>
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<tbody>
<tr>
<td>1. <strong>Quarterly HMIS Data Review</strong> Evaluate HMIS system data on quarterly basis to evaluate enrollments and exits into HCRS by demographic categories <em>(See strategies 1.A &amp; 1.B)</em></td>
<td>- Continuous evaluation of vulnerability and prioritization&lt;br&gt;- Improvement of positive enrollments and exits of vulnerable populations with the HCRS&lt;br&gt;- Implementation of improved prioritization tools</td>
<td>HPAHC, REC chair, CE Committee chair</td>
<td>Data analysis - Ongoing&lt;br&gt;Implement improved prioritization strategies and tools - 2022</td>
</tr>
<tr>
<td>2. <strong>Develop improved prioritization strategies and tools</strong></td>
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### Objective 2, Strategy 3
**Solidify Dynamic Prioritization Process within the CES:** Continue engaging in research about equitable, consistent and dynamic prioritization of people experiencing homelessness into the CES through exploration of the adoption or development of a comprehensive needs’ assessment and dynamic prioritization best practices.

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<tbody>
<tr>
<td>1. <strong>Research</strong> Engage in research efforts to consider equitable prioritization efforts occurring in peer counties state wide.</td>
<td>- Increase in equitable prioritization practices&lt;br&gt;- Increase in equitable, positive, and sustainable housing placements</td>
<td>CE Committee, VI Team Chair, REC</td>
<td>2022</td>
</tr>
<tr>
<td>2. <strong>Develop</strong> new or implement an existing evidence-based needs assessment for equitable dynamic prioritization</td>
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</table>

### Objective 2, Strategy 4
**Vulnerability-based Housing Placements:** Ensure continuous stay shelter and housing program enrollments are being prioritized based on need and eligibility requirements through the Coordinated Entry System (CES) for Families with Children and Single Adults.

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<th>Tasks</th>
<th>Outcome</th>
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<tbody>
<tr>
<td>1. <strong>Develop</strong> a unified definition of “highest need”</td>
<td>- Development of shared language on homelessness</td>
<td>HPAHC, CE Chair</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>
2. **Commence educational trainings** for the HCRS partners within and outside of the CES to ensure clear understanding of the definition of “highest need”

3. **VI Team Triage** Maintain Multi-Disciplinary Dynamic Prioritization Vulnerability Team for all sub-populations

**Objective 2, Strategy 5**

**YYA Specific Prioritization:** Continue to utilize best practices for prioritizing YYA population into CE and the HCRS

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<th>Tasks</th>
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<tbody>
<tr>
<td>1. Utilize McKinney-Vento definition of homelessness</td>
<td>- Increase of YYA accessing YYA specific services</td>
<td>Director of Young Adult Housing, Director of Rosie’s Place Shelter Services</td>
<td>Increase of YYA entering the CE system by 15% - 2022</td>
</tr>
<tr>
<td>2. Maintain a ‘single point of entry’ for YYA</td>
<td>- Increase of YYA entering into the CE system</td>
<td></td>
<td>Increase in diversion and family reconciliation by 15% - 2022</td>
</tr>
<tr>
<td>3. Maintain robust YYA specific outreach</td>
<td>- Increase of YYA diversion</td>
<td></td>
<td>Increase of YYA entering the CE system by 25% - 2024</td>
</tr>
<tr>
<td>4. Maintain operation of a 24/7 low-barrier YYA shelter</td>
<td>- Decrease in YYA living on the streets</td>
<td></td>
<td>Increase in diversion and family reconciliation by 25% - 2024</td>
</tr>
<tr>
<td>5. Consider overrepresented YYA populations in prioritization practices</td>
<td>- Increase in YYA entering coordinated care</td>
<td>Director of Young Adult Housing, Director of Rosie’s Place Shelter Services</td>
<td>Increase of YYA entering the CE system by 15% - 2022</td>
</tr>
<tr>
<td><strong>LGBTQ, Youth of Color, Youth exiting institutions and systems of care</strong></td>
<td>- Increase of minor YYA family reconciliation</td>
<td></td>
<td>Increase in diversion and family reconciliation by 25% - 2024</td>
</tr>
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</table>
Objective 3.
Operate an effective and efficient homeless crisis response system that swiftly moves people into stable permanent housing.

Measure of Success
a) Increase percentage of exits to permanent housing to the level of the top performing 20 percent of homeless crisis response systems nationwide.
b) Reduce returns to homelessness after exit to permanent housing to less than 10 percent.
c) Reduce average length of stay in temporary housing projects to less than 90 days.

Objective 3, Strategy 1
Inform and Address Need Within the Community of People with Lived Experience: Engage all sub populations with lived experience of homelessness on a bi-annual basis

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<tbody>
<tr>
<td>1. Locations Identify location for listening sessions</td>
<td>- The HCRS will be informed by those who are participating in it</td>
<td>HPAHC, TBD</td>
<td>Establish providers to participate and location of listening sessions – 2021</td>
</tr>
<tr>
<td>2. Incentives Identify and procure incentives for participants</td>
<td>- Innovative strategies can be identified and developed</td>
<td></td>
<td>Identify funding for incentives for listening sessions - 2021</td>
</tr>
<tr>
<td>3. Partners Identify partners to help facilitate listening sessions</td>
<td>- An opportunity for meaningful participation with the direction of the HCRS</td>
<td></td>
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<tr>
<td>4. Bi-Annual Reports Report to the HAT, HHH, and the HCRS Work Group</td>
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<tr>
<td>5. Offer CE Activities during the listening sessions</td>
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Objective 3, Strategy 2
Inform and Address Need Within Communities in the HCRS: Engage communities impacted by the HCRS on a bi-annual basis

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<tbody>
<tr>
<td>1. Locations Identify location for listening sessions</td>
<td>- Innovative strategies can be identified and developed</td>
<td>HPAHC, TBD</td>
<td>Establish providers to participate and location of listening sessions – 2021</td>
</tr>
<tr>
<td>2. Partners Identify partners to help facilitate listening sessions</td>
<td>- An opportunity for meaningful participation with the direction of the HCRS</td>
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<tr>
<td>3. Bi-Annual Reports Report to the HAT, HHH, and the HCRS Work Group</td>
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Objective 3, Strategy 3
Standardize Terminology: Create universal set of definitions and terms

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<tbody>
<tr>
<td>1. Develop Definitions</td>
<td>- Creating a universal set of definitions for the HCRS will create pathways towards consistent understanding of certain principles key to the health of the HCRS</td>
<td>HAT, HHH, HCRP Work Group Chair</td>
<td>Convene stakeholder meeting for universal definitions – 2020</td>
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<tr>
<td>2. Distribute Definitions</td>
<td></td>
<td></td>
<td>Distribution of definitions – 2022</td>
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<tr>
<td>3. Link Definitions Document</td>
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<td>On-going</td>
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<tr>
<td>4. Update Definitions</td>
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Objective 3, Strategy 4
Offer Annual Community Homelessness Summit: Offer annual trainings and educational opportunities for local communities on issues related to homelessness and affordable housing issues to include but not limited to:

- Best practices
- Root Causes of Homelessness
- Trauma Informed Care
- Harm Reduction
- HCRS information session
- Homeless Youth and Young Adults
- Low-Barrier Shelter
- Conflict Resolution

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<tbody>
<tr>
<td>1. Training Topic Listing</td>
<td>- Develop &amp; disseminate tailored information into a range of mainstream services - Increase community awareness about root causes of homelessness and related topics of concern to the public. - Increased solution</td>
<td>HPAHC, City of Olympia Homeless Coordinator, HHH - Chair</td>
<td>Identify trainers – 2021</td>
</tr>
<tr>
<td>2. Tailored Training Options</td>
<td></td>
<td></td>
<td>Develop content for Summit – 2021</td>
</tr>
<tr>
<td>3. Solicit Trainers</td>
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<td>Offer initial summit - 2022</td>
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focused communication with public

### Objective 3, Strategy 5

**Establish a Quarterly Data Work Group** through the Housing Action Team (HAT)

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</table>
| 1. Establish quarterly review of data quality and timeliness to ensure compliance with Commerce requirements | - Increase in oversight of the HCRS  
- Increase in data quality  
- Increase in accountability of the HCRS for addressing racial equity and other performance measures required by the Dept. of Commerce | HPAHC, HAT Chair | Ongoing |
| 2. Address and analyze racial disparity | | | Work Group – August 2019 |
| 3. Analyze the health of the HCRS and the rate of exits into PH projects | | | |
| 4. Ongoing HMIS training | | | |

### Objective 3, Strategy 6

**Good Neighbor Engagement:** Develop Good Neighbor Plans with neighbors of housing and homeless facilities that align with best practices and the HCRP

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</table>
| 1. Develop a standardized “Good Neighbor Plan” that sets for the rights and responsibilities of existing & new neighbors | - Acknowledge Issues  
- Reduced conflicts between neighbors, people experiencing homelessness, businesses and providers  
- Clear and functional plans for conflict resolution (part of “Good Neighbor Plans”) | HPAHC, TBD | Develop a model good neighbor plan – 2020 |
| 2. Develop a communication network to share real-information on: homeless needs; on proposed projects | | | Develop a model Communication plan per neighborhood - 2022 |
| 3. Conflict Resolution Establish a clear means to address & resolve neighbor conflicts as possible | | | |
**Objective 3, Strategy 7**  
**HCRS Funders Coordination:** Develop a coordinated and systemic approach for funders at all levels to maximize the fiscal capacity of the HCRS

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<tbody>
<tr>
<td>1. <strong>Gather all Funders</strong> and form a Funders Work Group to meet on a quarterly basis</td>
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<tr>
<td>2. <strong>Scale Funding</strong> in order to right-size funding priorities to meet the greatest need within the HCRS</td>
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<tr>
<td>- Improved consistent system processes</td>
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<tr>
<td>- Maximization of available funds</td>
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<tr>
<td>- Diversification of funding sources</td>
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<tr>
<td>Director of the HATC, Home Fund Manager</td>
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<tr>
<td>Create a Funders Work Group – Fall 2019</td>
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<tr>
<td>Determine maximization of available funds – annually</td>
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<tr>
<td>Identify Diverse Funding Sources – 2022 and ongoing</td>
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**Objective 3, Strategy 8**  
**Continue to Advocate for Legislation to Increase and Diversify Funding for the HCRS**

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<tbody>
<tr>
<td>1. <strong>Participate</strong> in ongoing Associated County Human Services (ACHS) meetings to make recommendations for policy</td>
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<tr>
<td>2. <strong>Solicit Policy</strong> recommendations from the HAT</td>
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<tr>
<td>3. <strong>Identify Advocates</strong> from members of the HAT to actively engage in advocacy at the legislature</td>
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<tr>
<td>- Increase awareness of funding opportunities</td>
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<tr>
<td>- Increase presence during legislative session</td>
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<tr>
<td>Increased and diversified funding opportunities</td>
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<tr>
<td>HAT&amp; CIP/HHS Chair, OHHP Program Manager</td>
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<tr>
<td>Solicit Policy from the HAT members – Annually</td>
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<tr>
<td>ACHS meeting attendance – ongoing</td>
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**Objective 3, Strategy 9**  
**Explore the Feasibility of County-Wide Revenue Opportunities:** Consider options such as a regional Levy to bring more dollars into the HCRS is essential for effective and efficient service delivery

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<tbody>
<tr>
<td>1. <strong>Form a Committee</strong> in order to explore the possibility of implementing a regional home fund levy</td>
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<tr>
<td>2. <strong>Draft Regional Home Fund Levy</strong> if the Levy is approved regionally, drafting and implementing the Levy will proceed</td>
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<tr>
<td>- If adopted, a Regional Home Fund Levy would increase the funding capacity of the HCRS -- More households would have access to permanent housing</td>
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<tr>
<td>Establish an inter-jurisdictional group modeled after LOTT (Lacey Olympia Tumwater Thurston County Clean Water Alliance)</td>
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<tr>
<td>Home Fund Levy Adopted - 2024</td>
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**Objective 3, Strategy 10**

**Identify Funding for Outreach Programs:** Identify diverse funding opportunities to hire and train outreach workers

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<th>Timeline</th>
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<tbody>
<tr>
<td>1. <strong>Analyze Funding System</strong> Engage the Funders Work Group (see strategy...) to analyze current funding streams for gaps in current funding based on system need</td>
<td>- Increase diverse funding for services within the HCRS - Increased alignment of outreach services - Deeper alignment of diverse community goals around the collateral impacts of homelessness</td>
<td>Home Fund Manager, HPAHC</td>
<td>Develop Funders Group – 2019</td>
</tr>
<tr>
<td>2. <strong>Identify Diverse Funding Sources</strong> Seek funding opportunities for increased outreach personnel</td>
<td></td>
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<tr>
<td>3. Award new Funding Sources to Outreach Providers priorities within the 5-year plan</td>
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**Objective 3, Strategy 11**

**Homeless Prevention Programs:** Expand targeted prevention programs for all sub-populations of people experiencing homelessness

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<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Identify Diverse Fund Sources</strong> for prevention programs for all sub-populations outside of the current funding available for the HCRS. Prevention funding should come from various resources as it serves households who are not yet homeless.</td>
<td>- Generate sufficient support for ongoing prevention programs - Partner with organizations to incorporate prevention activities into their service model(s) - Increase prevention services throughout the HCRS - Maximize the number of at-risk households that receive subsidies to remain housed - Reduce number of at-risk households that become homeless</td>
<td>HPAHC, HHH Chair</td>
<td>Identify diverse funds - Ongoing Per new fund sources identified, increase in targeted prevention strategies - 2022</td>
</tr>
<tr>
<td>2. <strong>Increase targeted prevention</strong> strategies and programs for each subpopulation according to best practices associated per sub-population</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Objective 3, Strategy 12

**Homeless Diversion:** Increase diversion activities for all sub populations of people experiencing homelessness

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Maximize Diversion Options</strong> Identify and leverage support for</td>
<td>- Maximize the number of at-risk households that receive subsidies to</td>
<td>HPAHC, HCRS Work Group Chair</td>
<td>Increase Diversion activities</td>
</tr>
<tr>
<td>diversion activities for homeless sub-populations:</td>
<td>remain housed</td>
<td></td>
<td>by 20% - 2022</td>
</tr>
<tr>
<td>a. Single Adults</td>
<td>- Reduce number of at-risk households that become homeless</td>
<td></td>
<td>Increase Diversion activities</td>
</tr>
<tr>
<td>b. Families with children</td>
<td></td>
<td></td>
<td>by 40% - 2024</td>
</tr>
<tr>
<td>c. Veterans</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Senior and Aging adults</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. <strong>Explore Private Sector Resources</strong> for funding diversion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. <strong>Explore Faith Community Involvement</strong> for funding and providing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>diversion activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Increase Diversion funds available to the Coordinated Entry</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Veterans Specialist at the Lacey Veterans Hub</td>
<td></td>
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</tbody>
</table>

### Objective 3, Strategy 13

**YYA Diversion:** Increase diversion or family reunification for youth

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<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Best Practices</strong> Apply diversion strategies as defined by YYA</td>
<td>- Increase of YYA being successfully diverted out of the HCRS in to</td>
<td>CYS – YAH Director</td>
<td>10 YYA served per year</td>
</tr>
<tr>
<td>diversion best practices to YYA entering the HCRS including family</td>
<td>stable housing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>reunification strategies</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Objective 3, Strategy 14

**Identify Diverse Funding Sources for Supportive Services:** in order to increase capacity for PSH projects

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Leverage Medicaid Funds</strong> Incentivize Medicaid Foundational</td>
<td>- Increase system capacity to provide ongoing support services for</td>
<td>HPAHC; HCRS Work</td>
<td>60% of HCRS utilizing FCS for</td>
</tr>
<tr>
<td>Community Supports (FCS) billing for support services for supportive</td>
<td>households enrolled in PSH projects</td>
<td>Group Chair; Funders</td>
<td>supportive services</td>
</tr>
<tr>
<td>housing projects</td>
<td></td>
<td>Group Chair</td>
<td></td>
</tr>
<tr>
<td>2. <strong>Explore other funding opportunities</strong> Such as Office of Crime</td>
<td>- Increase number of households enrolling in</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Victims funding to</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Thurston County Homeless Crisis Response Plan 2019-2024
Page | 55 of 99
Objective 3, Strategy 15
Regionalize FCS Programming: Ensure that households that wish to remain in their home communities can be supported through FCS activities

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Identify Agency</strong> Identify an agency within the HCRS that has capacity to provide regional service delivery of all FCS services</td>
<td>- Ensure households that wish to remain in their home communities can be supported through FCS activities</td>
<td>HPAHC, TMBHO staff TBD</td>
<td>Identify Agency – 2021</td>
</tr>
<tr>
<td>2. <strong>Implement Regional FCS Activities</strong> Activate regional FCS services delivery county-wide</td>
<td>- Increase in capacity of existing HCRS programs by localized housing and employment support service responses</td>
<td></td>
<td>Operationalize Regional FCS activities - 2022</td>
</tr>
<tr>
<td>3. <strong>Develop mobile ops units</strong> to outreach to rural communities to assure that services are available to them.</td>
<td>- Awareness of service gaps for mental health and substance use treatment services</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Objective 3, Strategy 16
Increase Access to Mental Health and Substance Use Outreach, Outpatient, and Inpatient Treatment: Ensure that the HCRS has increased capacity for meeting the needs of households that need Mental Health and substance use treatment services

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Synchronize</strong> with Opioid Task Force - Opioid Response Plan and the TMBHO strategic plan</td>
<td>- Awareness of service gaps for mental health and substance use treatment services</td>
<td>HPAHC, TMBHO staff TBD</td>
<td>Service Mapping and Needs Analysis – 2021</td>
</tr>
<tr>
<td>2. <strong>Service Mapping</strong> Identify existing mental health services available to unsheltered, vulnerably housed individuals and families</td>
<td>- Awareness of needs for access to mental health and substance use treatment services</td>
<td></td>
<td>Synchronize with strategic plans – 2019 and ongoing</td>
</tr>
<tr>
<td>3. <strong>Identify Need</strong> Understand where the gaps are in the HCRS for households who need mental health services</td>
<td>- Create analysis to inform further efforts to address these issues in the HCRS</td>
<td></td>
<td>Engage with key stakeholders – 2020 and ongoing</td>
</tr>
<tr>
<td>4. <strong>Engage</strong> with the key stakeholders for strategies and response</td>
<td></td>
<td></td>
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</tbody>
</table>
5. **Increase Recovery Housing and** Ensure that individuals leaving treatment have recovery housing to move into

**Objective 3, Strategy 17**

**Create a Regional Crisis Response Unit:** Regionalize a Crisis Response Unit to offer support to managed and unmanaged encampments, and all unsheltered individuals throughout the County

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Identify Funding Source</strong> Identify funding source to develop a regional CRU</td>
<td>- Increase in right-sized crisis response of unsheltered households throughout the county&lt;br&gt;- Decrease in arrests and citations for behaviors that are related to mental health and substance use&lt;br&gt;- Decrease in calls-to-service for Law Enforcement in unmanaged and managed encampments&lt;br&gt;- Increase coordination and partnerships with service providers</td>
<td>TST Manager, HPAHC</td>
<td>Identify Funding Source – 2021</td>
</tr>
<tr>
<td>2. <strong>Identify Agency</strong> Identify a non-profit or unit of government to operationalize regional CRU</td>
<td></td>
<td></td>
<td>Identify Agency – 2021</td>
</tr>
<tr>
<td>3. <strong>Implement Regional CRU</strong> Hire, train, and implement a regional CRU</td>
<td></td>
<td></td>
<td>Implement Regional CRU - 2022</td>
</tr>
</tbody>
</table>

**Objective 3, Strategy 18**

**Hazard Weather Response Plan (HWRP):** Maintain and expand operations of the Hazardous Weather Task Force (HWTF)

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>HWRP Assessment</strong> Assess existing HWRP for all populations</td>
<td>- Develop Assessment report on emergency housing resources and capacities by population&lt;br&gt;- Increase capacity of system preparation and response to all hazardous weather conditions as identified in the HWRP</td>
<td>HPAHC, HHH Chair, HWTF Chair</td>
<td>Annualize sheltering contracts – 2019</td>
</tr>
<tr>
<td>2. <strong>Annualize HWTF Sheltering Contracts</strong> For all contracted Cold Weather Shelter providers, expand contracts to annual contracts</td>
<td></td>
<td></td>
<td>Increase Shelter-in-Place activities – 2019 and ongoing</td>
</tr>
<tr>
<td>3. <strong>Increase Shelter-In-Place Activities</strong></td>
<td></td>
<td></td>
<td>Annual Evaluation</td>
</tr>
</tbody>
</table>
4. **Contract with provider** within the HCRS to procure survival items and operationalize shelter-in-place activities

**Objective 3, Strategy 19**

**Emergency Mitigation Best Practices:** Research and develop best practices for crisis sheltering efforts including but not limited to:

- Managed Encampments
- Safe Parking Programs
- Tiny Home Projects
- Shelter-In-Place Activities

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Assess current emergency mitigation service models</td>
<td>- Report on current best practices</td>
<td>HPAHC, HHH Chair</td>
<td>Annual Capacity Report</td>
</tr>
<tr>
<td>2. <strong>Environmental Scan</strong> Gather and synthesize compendium of emergency mitigation best practices</td>
<td>- Plan for enhanced best practices</td>
<td></td>
<td>Research best practices – 2020 and ongoing</td>
</tr>
<tr>
<td>3. <strong>Develop and Pilot Promising Practices and/or Implement Existing Best Practices Including:</strong></td>
<td>- Pilot new promising practices or implement existing best practices</td>
<td></td>
<td>Implement pilot promising practices – 2022 and ongoing</td>
</tr>
<tr>
<td>a. Enrollment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Prioritization</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>c. Operations</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>d. Staffing</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>e. Exits</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>f. Case Management</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>g. Crisis Response</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h. Behavioral Expectations</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>i. Community Partners</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j. Law Enforcement</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. <strong>Scale Emergency Mitigation projects</strong> appropriately as the need for them lessens in order to open funding possibilities for the HCRS</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
## Objective 3, Strategy 20
### Emergency Mitigation Resources: Increase temporary crisis sheltering projects for all populations county-wide

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
</table>
| 1. **Identify Diverse Funding** Increase capacity system wide by identifying and applying for diverse funding sources for emergency mitigation operations in order to increase bed capacity for unsheltered individuals. | - Develop Assessment report on crisis sheltering resources and capacities by population  
   - Increase ability for county to respond to needs of unsheltered households  
   - Ensure crisis shelter resources are proportional to demographics of need  
   - Create more temporary sheltering options to move people swiftly from unmanaged encampments to permanent housing projects  
   - Increased connection to substance use treatment referrals, mental health treatment referrals, case management, coordinated entry and workforce development | HPAHC, HHH Chair | Identify diverse funding sources – 2020  
   Explore other models – 2020 and ongoing  
   Provide outreach to all projects - 2021  
   Increase crisis sheltering projects – ongoing |
| 2. **Explore other models** of accommodation and emergency mitigation services nationally. |                                                                         |                             |                               |
| 3. **Increase Emergency Mitigation Project Inventory** Strengthen and increase temporary crisis and emergency shelter operations for all homeless populations county-wide |                                                                         |                             |                               |
| 4. **Provide Outreach and Supportive Services** to all emergency mitigation projects |                                                                         |                             |                               |

## Objective 3, Strategy 21
### Preserve Existing and Develop New Emergency Shelter: Preserve and develop new shelter capacity

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
</table>
| 1. **Continue funding** existing emergency* and continuous stay* shelters | - Sustain and Increase capacity of current sheltering system  
   - Diversify funding source for an effective HCRS | HPAHC; HHH Chair | 2024 complete two new projects |
| 2. **Identify diverse funding** sources in order to develop new shelter projects (see strategies 7-9) |                                                                         |                             |                               |
| 3. **Explore innovative practices** to increase regional sheltering capacity |                                                                         |                             |                               |
4. **Strengthen partnerships** for cross-system collaboration on regional low-barrier shelter projects
5. **Consider Pro-Rata** distribution of sheltering and other service options regionally based on population size

**Objective 3, Strategy 22**

**24/7 Emergency Shelter Strategies**: Develop 24/7 strategies for all homeless sub-populations, including Hazard Weather shelter response

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Identify Diverse Funding</strong> By utilizing strategies 7-9</td>
<td>- Comprehensive accommodations for homeless sub-populations 24/7</td>
<td>HPAHC; HHH Chair, HCRS Work Group,</td>
<td>Single adults 24/7 sheltering capacity implemented – 2021</td>
</tr>
<tr>
<td>2. <strong>Ensure Emergency Shelter</strong> resources are proportional to demographics of need</td>
<td>- <strong>Single Adults</strong>: Increase Capacity by 50%</td>
<td></td>
<td>Families with Children – Ongoing</td>
</tr>
<tr>
<td>3. <strong>Address Capacity</strong> for emergency and 24/7 shelter response</td>
<td>- <strong>Families with Kids</strong>: Increase capacity by 20%</td>
<td></td>
<td>Youth and young adults – ongoing</td>
</tr>
<tr>
<td>4. <strong>Explore</strong> alternative sheltering options to increase capacity</td>
<td>- <strong>Youth &amp; Young Adults</strong>: Increase capacity by 20%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. <strong>Best practices</strong> Ensure implementations for 24/7 operations of sheltering including low-barrier, harm reduction, and LGBTQ+ competency</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Single Adult 24/7 Strategies**

- Address Capacity for emergency and 24/7 shelter response
- Explore alternative sheltering options to increase capacity
- Best practices Ensure implementations for 24/7 operations of sheltering including low-barrier, harm reduction, and LGBTQ+ competency

**Families with Children 24/7 strategies**

- Continue offering 24/7 emergency sheltering
- Address Capacity for emergency and 24/7 shelter response
- Investigate alternative sheltering options to increase capacity
- Best practices Ensure implementations for 24/7 operations of sheltering including low-barrier, harm reduction, and LGBTQ+ competency
Youth & Young Adult 24/7 strategies

10. **Continue offering 24/7 emergency sheltering**
11. **Address Capacity** for emergency and 24/7 shelter response
12. **Investigate** alternative sheltering options to increase capacity
13. **Best practices** Ensure implementation for 24/7 operations of sheltering including low-barrier, harm reduction, and LGBTQ+ competency

**Objective 3, Strategy 23**

*Increase Rapid Re-Housing placements for all subpopulations*: Increase Rapid-Rehousing dollars for all sub-populations to ensure individuals and families stabilize in housing placements

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Maximize distribution of current annual funding</strong> to target all sub-populations for Rapid Re-Housing</td>
<td>- More people needing housing will receive housing</td>
<td>HHH Chair, HCRS Chair</td>
<td>Ongoing</td>
</tr>
<tr>
<td>2. <strong>Make Funding Flexible</strong> to meet the needs of families after immediately becoming housed to ensure stability</td>
<td>- Families will have a means for paying for costs not currently covered by RRH</td>
<td></td>
<td>Increase the flexibility of RRH dollars – 2022</td>
</tr>
<tr>
<td>3. <strong>Culturally Responsive</strong> Ensure all RRH activities are culturally humble and responsive to the needs of diverse families</td>
<td>- RRH efforts will be more culturally responsive therefore creating avenues towards more successful RRH placements</td>
<td></td>
<td>Ensure culturally responsive service delivery 2020</td>
</tr>
</tbody>
</table>

**Objective 3, Strategy 24**

*Increase Permanent Supportive Housing (PSH) Units for All Sub-Populations*: Increase PSH regionally to ensure housing stability and retention

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Increase capacity of developers</strong> to compete for construction funds for PSH units for all sub-populations</td>
<td>- Increased number of PSH units in construction pipeline in Thurston County</td>
<td>HPAHC, OHHP Program Manager, Home Fund Manager, TBD</td>
<td>300 supportive units funded by 2023.</td>
</tr>
</tbody>
</table>
2. **Assure capacity** of rent support, operating subsidies, and supportive services funding for proposed PSH units.

3. **Provide land predevelopment and development support** for PSH

- Increased positive exits into PSH programs
- Increased sustainability of PSH placements with adequate supportive services
- **Increase exits to PSH** above 59% for HCRR-wide PH exits
- Increased number of households exiting the HCRR into PSH projects

**Objective 3, Strategy 25**

**Improve Housing Placement Stability:** Improve housing stability for all households in the HCRR exiting into PH and PSH housing

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Increase affordable housing units by methods identified within the workplan</td>
<td>- Increased housing stability across all sub-populations</td>
<td>HPAHC, OHHP Program Manager, Home Fund Manager, CEC chair</td>
<td>Reduce returns to homelessness to less than 30% - 2022</td>
</tr>
<tr>
<td>2. Reduce returns to homelessness after PH and PSH exit to less than 10%</td>
<td>- Decrease in returns to homelessness for all sub-populations</td>
<td>HPAHC, OHHP Program Manager, Home Fund Manager, CEC chair</td>
<td>Reduce returns to homelessness to less than 10% - 2024</td>
</tr>
<tr>
<td>3. Reduce average length of time homeless for households entered into the HCRR to &lt;90 days</td>
<td>- Decrease length of time homeless for all sub-populations</td>
<td>Home Fund Manager, OHHP Program Manager, CEC chair</td>
<td>Reduce length of time homeless - 2024</td>
</tr>
</tbody>
</table>

**Objective 3, Strategy 26**

**Increase Affordable Housing Inventory Regionally**

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Support a Regional Housing Inventory (as required by the Growth Management Act) and standardize reporting</td>
<td>- Increase in Thurston County families and individuals able to attain and retain their housing due to an increase in affordable housing options</td>
<td>Home Fund Manager, OHHP Program Manager, HPAHC</td>
<td>Regional Housing Inventory – 2021</td>
</tr>
<tr>
<td>2. <strong>Improve Data Quality</strong> in Comprehensive Housing Affordability Strategy (CHAS)</td>
<td></td>
<td></td>
<td>Improve Data Quality – 2021</td>
</tr>
<tr>
<td>3. Identify Housing Gaps</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
4. **Set Tiered Housing Goals**
   - Identify goals by housing type and population served Single adults (sub-population goals: Seniors, veterans, other)
   - Families with children

5. **Synchronize all regional Housing Plans**
   Collect and synthesize all Comprehensive Plan Housing Chapters
   - Incorporate goals by development type
   - * Unsubsidized Private developers
   - Subsidized Private Developers
   - Non-Profit Developers
   - Partnership Developers by type

<table>
<thead>
<tr>
<th>Objective 3, Strategy 27</th>
<th>Strengthen and extend Multi-Family Tax Exemption (MFTE): Incentives to provide more MFTE* projects</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Tasks</strong></td>
<td><strong>Outcome</strong></td>
</tr>
<tr>
<td>1. <strong>Develop</strong></td>
<td>New market rate multifamily housing is constructed</td>
</tr>
<tr>
<td>2. <strong>Convene</strong></td>
<td>New affordable housing is constructed</td>
</tr>
<tr>
<td></td>
<td>Other benefits related to multifamily housing development is achieved under 84.14 RCW</td>
</tr>
<tr>
<td>3. <strong>Streamline</strong></td>
<td></td>
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<td></td>
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</tbody>
</table>
### Objective 3, Strategy 28

**Explore Increased Housing Densities:** Explore ways to increase housing density via zoning and other policy tools in regional urban hubs.

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. <strong>Catalogue and Align all affordable housing plans</strong> align affordable housing plans from all jurisdictions</td>
<td>- Increased capacity at the local and regional level for affordable housing options</td>
<td>County and City Managers and administrators, CP&amp;D Directors from all jurisdictions</td>
<td>TBD</td>
</tr>
<tr>
<td>2. <strong>Advocate locally and statewide</strong> for policies that support increased housing density in the spirit of affordable housing</td>
<td>- Opportunity for community-wide education about housing density and affordable housing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. <strong>Support the implementation</strong> of affordable housing plans</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Objective 3, Strategy 29

**HB 1406 Affordable Housing Implementation:** Implement HB 1406 programs related to 1406 revenue

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
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</thead>
<tbody>
<tr>
<td>1. <strong>Leverage HB 1406 resources:</strong> Identify all options to leverage HB 1406</td>
<td>- Increase capacity to fund affordable housing construction, maintenance and operating</td>
<td>TBD</td>
<td>Leverage HB 1406 resources – 2019</td>
</tr>
<tr>
<td>2. <strong>Support</strong> Thurston County, Lacey, Tumwater and south County jurisdictions to undertake a regional approach for utilizing 1406 funds to increase affordable housing capacity throughout Thurston County.</td>
<td>- Increased capacity at the local and regional level for affordable housing options</td>
<td>Align affordable housing plans – 2020 and ongoing</td>
<td></td>
</tr>
<tr>
<td>3. <strong>Align all affordable housing plans</strong> align affordable housing plans from all jurisdictions</td>
<td></td>
<td></td>
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</tbody>
</table>

### Objective 3, Strategy 30

**Olympia CDBG Housing Goals:** Set Olympia CDBG unit construction goals.

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
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<tbody>
<tr>
<td>1. <strong>Leverage CDBG</strong> Dedicate some portion of Olympia’s CDBG money to leverage other housing funds to build more affordable housing units (Limited eligible activities)</td>
<td>- CDBG Land Acquisition Acquire more land for supportive housing units in Olympia</td>
<td>Olympia CDBG Manager,</td>
<td>Leverage CDBG – 2020/2021 and ongoing</td>
</tr>
</tbody>
</table>

2. **CDBG Land Acquisition** Acquire more land for supportive housing units in Olympia

   - Increase capacity to fund affordable housing construction, maintenance and operating

### Objective 3, Strategy 31

**Tenant Protections:** Enact and implement tenant protection laws and fund enforcement

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
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</thead>
<tbody>
<tr>
<td>1. <strong>Research</strong> Examine models for tenant protection laws</td>
<td>- Reduce homelessness by reducing rates of eviction</td>
<td>CDBG Manager, HPAHC, HAT Rental Work Group - Chair</td>
<td>Research – 2020/2020</td>
</tr>
<tr>
<td>2. <strong>Enact Laws</strong> right-sized tenant protection laws</td>
<td>- Provide landlords resources to stabilize their tenant thereby stabilizing their rental income</td>
<td></td>
<td>Enact right-sized tenant laws – 2022</td>
</tr>
<tr>
<td>3. <strong>Conflict Resolution</strong> engage with the Dispute Resolution Center to provide resources for neighborhood conflict resolution</td>
<td>- Stabilize Neighborhoods by helping tenants remain in housing</td>
<td></td>
<td>Engage dispute Resolution Center – 2022</td>
</tr>
</tbody>
</table>

### Objective 3, Strategy 32

**Tenant Relocation Services:** Ensure that when tenants are asked to relocate that they are supported in that transition in order to prevent households falling into homelessness

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<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
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<th>Timeline</th>
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<tbody>
<tr>
<td>1. <strong>Identify models</strong> for Tenant Relocation Assistance programs</td>
<td>- Reduce homelessness by providing funds to help low-income renters</td>
<td>CDBG Manager, HPAHC, HAT Rental Work Group - Chair</td>
<td>Identify models – 2021</td>
</tr>
<tr>
<td>2. <strong>Identify fund sources</strong> work with the Funders Work Group to locate funding sources for tenant relocation services</td>
<td>- To relocate successfully when necessary</td>
<td>Identify Fund Sources – 2022</td>
<td></td>
</tr>
<tr>
<td>3. <strong>Implement</strong> Tenant Relocation Activities</td>
<td></td>
<td></td>
<td>Implement relocation services – 2022 and ongoing</td>
</tr>
</tbody>
</table>

### Objective 3, Strategy 33

**Address Housing Quality Standards:** Keep currently housed individuals and families in their housing by addressing housing quality issues as they rise

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<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
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<tbody>
<tr>
<td>1. <strong>Explore Models</strong> for Code Enforcement of rental conditions. Link to Tenant Protections</td>
<td>- Improve quality of housing inventory - Prevent loss of housing</td>
<td>HAT Renter Work Group – Chair, HPAHC, Funders Work Group -Chair</td>
<td>Explore models – 2021</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Identify funding – 2022</td>
</tr>
</tbody>
</table>
2. **Identify Funding** for Housing Rehabilitation

3. **Identify Agency** to take the lead in implementing Housing Quality activities

4. **Implement Housing Quality** activities implemented by lead agency

- Stabilize households

---

**Objective 3, Strategy 34**

**Workforce Development Strategies:** Develop a clear pathway to employment by developing strategies and partnering with existing workforce development programs

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
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</thead>
</table>
| 1. **Job Creation Strategies** Develop and implement strategies to create jobs for persons experiencing and at risk of homelessness | - Set job creation goals by jurisdiction  
- Increase in employment for individuals experiencing homelessness  
- Increase in economic and housing stability for individuals experiencing homelessness  
- More equitable solutions to workforce development needs  
- Identification of new fund sources for economic development | HPAHC, TEDC            | Job Creation Strategies Developed – 2022 |
| 2. **Economic Development (Job Creation) & Housing Policy Alignment** Align Homeless and Housing goals with Economic Development Goals |                                                                 |                   | Identify Job Creation Funding – 2022 |
| 3. **Focus on People not Prioritized for Housing**                    |                                                                 |                   | Align with Existing Programs – 2021 and ongoing |
| 4. **Ensure** all policy changes and program initiatives are developed and delivered through a racial equity lens |                                                                 |                   |                                 |
| 5. **Identify Job Creation Funding** Maintain existing and identify new funding sources for job training, economic development projects that create jobs |                                                                 |                   |                                 |
| 6. **Align with existing workforce development programs** and agencies: PacMtn, Supported Employment partners, WorkSource and others |                                                                 |                   |                                 |
### Objective 3, Strategy 35

**Increase the Implementation and Utilization of Peer Workers in the HCRS Service Delivery:** Increase capacity of the HCRS service delivery by increasing workforce while also creating career pathways for individuals with lived experience

<table>
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<tr>
<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
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</thead>
<tbody>
<tr>
<td>1. <strong>Identify programs</strong> with capacity and interest in implementing a Peer-based staffing model</td>
<td>-Increase in work-force development efforts system wide by creating a career path for individuals experiencing homelessness</td>
<td>HPAHC, TMBHO - TBD, IFW Director of Homeless Services</td>
<td>Identify Programs with Capacity – 2021</td>
</tr>
<tr>
<td>2. <strong>Develop Peer-Based</strong> workforce development model</td>
<td>-Increase in system staffing capacity</td>
<td></td>
<td>Develop Program – 2022</td>
</tr>
<tr>
<td>3. <strong>Implement Peer-Based</strong> programs for those with lived experience</td>
<td>- Increase housing stability through employment</td>
<td></td>
<td>Implement Program – 2022</td>
</tr>
<tr>
<td>4. <strong>Pay Peers a living wage</strong> in order to ensure longevity of employment and housing security</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Objective 4.**
Project the impact of the fully implemented local plan on the number of households housed and the number of households left unsheltered, assuming existing resources and state policies.

**Measure of Success**

a) An estimate of people experiencing homelessness that will be housed during 2024 after successful implementation of the local plan using existing resources, and the count of households left unsheltered at a point in time in 2024, based on credible data and research; including the data, assumptions, calculations, and related citations necessary for outside parties to review and reproduce the estimate.

**Objective 4, Strategy 1**
**Perform Calculations Utilizing Department of Commerce Modeling Tool to Project Estimate:** Utilize tool provided by Department of Commerce in order to project and estimate of how many households will be housed and unhoused in 2024

<table>
<thead>
<tr>
<th>Tasks</th>
<th>Outcome</th>
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</tr>
</thead>
<tbody>
<tr>
<td>1. Gather Data from HMIS and the Housing Inventory Count (HIC)</td>
<td>-Provide guidance for implementing strategies in Objective 3</td>
<td>HPAHC, PHSS Data Analyst</td>
<td>September 2019</td>
</tr>
<tr>
<td>2. Utilize the tool provided by Department of Commerce</td>
<td>-Foster awareness for targeted strategies</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Thurston County Homeless Crisis Response Plan 2019-2024
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**Objective 5.**
Address racial disparities among people experiencing homelessness.

**Measure of Success**
a) Completion of an initial analysis using a racial equity tool and data provided by Commerce.

**Objective 5, Strategy 1**
**Track Racial Equity in Service Delivery:** Develop and use available demographic data to determine racial equity in service delivery. **Sources to include:** The Point in Time Count reports; quarterly system HMIS reports; and, the HUD Racial Equity Analysis Tool to understand local disparities in who is experiencing homelessness in our HCRS

<table>
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<tr>
<th>Tasks</th>
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<tbody>
<tr>
<td>1. <strong>Create Data Work Group</strong> within the HCRS to meet quarterly</td>
<td>- Ongoing opportunities to understand, analyze and measure the HCRS in its progress in addressing racial disparities in the HCRS</td>
<td>Data Work Group Chair, HPAHC, REC Chair</td>
<td>Quarterly and Annual Reports – track recommendations &amp; status</td>
</tr>
<tr>
<td>2. <strong>Quarterly and Annual Demographic Data Analysis</strong> of the HCRS</td>
<td>- Data used to influence and develop ongoing strategies for reducing racial disparities within the HCRS</td>
<td>REC Chair, HPAHC</td>
<td>Quarterly and Annual Reports – track recommendations &amp; status</td>
</tr>
<tr>
<td>3. <strong>Report Annually</strong> to the HCRS and the Department of Commerce</td>
<td>- Data used to develop a Racial Equity Work Plan</td>
<td>REC Chair, HPAHC</td>
<td>Quarterly and Annual Reports – track recommendations &amp; status</td>
</tr>
<tr>
<td>4. <strong>Convene Caucuses</strong> with system participants regarding their experience as people of color in the HCRS and report back to the HCRP Work Group</td>
<td>- Increase awareness of disparities within the HCRS - Increase positive outcomes to permanent housing for ethnic or racial groups</td>
<td>REC Chair, HPAHC</td>
<td>Quarterly and Annual Reports – track recommendations &amp; status</td>
</tr>
<tr>
<td>5. <strong>Provide Compensation</strong> for those that participate in the caucuses</td>
<td>- Increase awareness of disparities within the HCRS - Increase positive outcomes to permanent housing for ethnic or racial groups</td>
<td>REC Chair, HPAHC</td>
<td>Quarterly and Annual Reports – track recommendations &amp; status</td>
</tr>
</tbody>
</table>

**Objective 5, Strategy 2**
**Analyze HMIS program entry and housing exit data.** Review HMIS data to determine if equitable permanent housing outcomes are being achieved and identify if there are ethnic or racial groups who are less likely to be exiting to permanent housing

<table>
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<th>Tasks</th>
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<th>Timeline</th>
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</thead>
<tbody>
<tr>
<td>1. <strong>Quarterly HMIS Analysis</strong> of the HCRS</td>
<td>- Increase awareness of disparities within the HCRS - Increase positive outcomes to permanent housing for ethnic or racial groups</td>
<td>REC Chair, HPAHC</td>
<td>Quarterly and Annual Reports – track recommendations &amp; status</td>
</tr>
<tr>
<td>2. <strong>Identify and develop</strong> plans for understanding reason for disparity if one is found</td>
<td>- Increase awareness of disparities within the HCRS - Increase positive outcomes to permanent housing for ethnic or racial groups</td>
<td>REC Chair, HPAHC</td>
<td>Quarterly and Annual Reports – track recommendations &amp; status</td>
</tr>
<tr>
<td>3. <strong>Develop Strategies</strong> to address housing disparities in conjunction with goal 1.A.</td>
<td>- Increase awareness of disparities within the HCRS - Increase positive outcomes to permanent housing for ethnic or racial groups</td>
<td>REC Chair, HPAHC</td>
<td>Quarterly and Annual Reports – track recommendations &amp; status</td>
</tr>
</tbody>
</table>
## Objective 5, Strategy 3

**Identify Diversity Within HCRS:** Gather demographic data of HCRS staff and board members and create a report comparing staff and leadership diversity to the population experiencing homelessness in order to develop diversification strategies.

<table>
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<th>Tasks</th>
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</thead>
<tbody>
<tr>
<td>1. <strong>Encourage agencies</strong> within the HCRS to participate in an anonymous demographic sampling of diversity within their staff and members of boards</td>
<td>- Ongoing opportunities to explore strategies to diversify the HCRS in order to provide leadership and service delivery in more equitable planning and homeless response efforts.</td>
<td>REC Chair, HPAHC</td>
<td>Communication planning regarding process – 2019-2020</td>
</tr>
<tr>
<td>2. <strong>Identify lead</strong> Identify lead individual or group to gather system wide demographics of staff and create an initial diversity report of the system</td>
<td>- Raising awareness within the HCRS regarding the needs of developing diversification strategies.</td>
<td></td>
<td>Demographic data gathering – 2020</td>
</tr>
<tr>
<td>3. <strong>Analyze</strong> diversity report in order to compare staff and board diversity compared to diversity of people experiencing homelessness</td>
<td>- Giving agencies and programs the tools to take steps to implement right-sized diversification strategies</td>
<td></td>
<td>Generate report – 2020</td>
</tr>
<tr>
<td>4. <strong>Identify strategies</strong> Convene Racial Equity Committee to develop initial diversification strategies</td>
<td></td>
<td></td>
<td>Develop diversification strategies – 2021 and ongoing</td>
</tr>
</tbody>
</table>

## Objective 5, Strategy 4

**Promote a Racial Equity Work Plan:** Identify an agent, Racial Equity Tool Kit, or consultant to lead the effort in analysis of the HCRS with regards to current policies, practices, data collection, data analysis, and implicit bias within the programs and services of the HCRS in order to develop a Racial Equity Work Plan.

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<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
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<tbody>
<tr>
<td>1. <strong>Identify methods, tools or consultants</strong> for analysis of PHSS, Coordinated Entry, Hazardous Weather Task Force, the Housing Action Team, Homeless Housing Hub, Thurston Thrives policies and practices</td>
<td>- Raise awareness regarding system existing policies and procedures within the HCRS and where improvement is needed.</td>
<td>HPAHC, REC Chair</td>
<td>Identify methods for analysis – 2020</td>
</tr>
<tr>
<td>2. <strong>Seek Other County Models</strong> Consult with peer counties who have engaged in this process re: lessons learned</td>
<td>- Increase in peer-to-peer support regarding analysis of policies and procedures from a racial equity lens.</td>
<td></td>
<td>PHSS Join G.A.R.E. – 2021</td>
</tr>
</tbody>
</table>
County Public Health and Social Services Explore possibility of Thurston County PHSS becoming a G.A.R.E.* member

4. **Utilize Tools** available from G.A.R.E., National Alliance to End Homelessness (N.A.E.H.), and others to develop a Racial Equity Work Plan

5. **Include Members** from all levels of the HCRS – including frontline staff, leadership, and people of color and lived experience in the development of the Racial Equity Plan ensuring people with lived experience are compensated for their contributions

### Objective 5, Strategy 5

**Implement Racial Equity Work Plan:** Once the Racial Equity Work plan has been developed by the Racial Equity Committee

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<th>Tasks</th>
<th>Outcome</th>
<th>Responsible Party</th>
<th>Timeline</th>
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<tbody>
<tr>
<td>1. Adopt the Racial Equity Work Plan</td>
<td>- Begin to address identified racial disparities within the HCRS</td>
<td>HPAHC, REC Chair</td>
<td>Convene Regional Racial Equity Committee – 2021</td>
</tr>
<tr>
<td>2. Convene Regional racial equity group to meet quarterly to implement and oversee progress of the racial equity work plan</td>
<td></td>
<td></td>
<td>Adopt Racial Equity Work Plan – 2022</td>
</tr>
<tr>
<td>3. Implement Plan across the HCRS with interested and invested parties</td>
<td></td>
<td></td>
<td>Implement Work Plan – 2022 and ongoing</td>
</tr>
</tbody>
</table>
Objective 5, Strategy 6

Racial Equity Training: Continue efforts to create, provide ongoing trainings for relevant HCRS, city and county staff in best practices around:

- Cultural Humility
- Trauma Informed Response
- Implicit Bias
- Institutional and Cultural Racism
- LGBTQIA+ Competency
- Harm Reduction

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<th>Tasks</th>
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<th>Responsible Party</th>
<th>Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Identify Trainers and experienced</td>
<td>- Continuous opportunities for the HCRS to enhance best practices</td>
<td>HPAHC, REC Chair</td>
<td>Identify trainers – 2020</td>
</tr>
<tr>
<td>professionals (recognized community based</td>
<td>consistently across the system to ensure consistency in program</td>
<td></td>
<td>Develop QRTLY training</td>
</tr>
<tr>
<td>racial equity trainers) to provide</td>
<td>delivery</td>
<td></td>
<td>2020</td>
</tr>
<tr>
<td>trainings</td>
<td></td>
<td></td>
<td>Implement quarterly training-</td>
</tr>
<tr>
<td>2. Training Calendar</td>
<td>Create an ongoing training calendar for relevant HCRS staff</td>
<td></td>
<td>2020</td>
</tr>
<tr>
<td>3. Seek Training Resources</td>
<td>Develop or research trainings to implement quarterly by 2020</td>
<td></td>
<td>Evaluate Training – ongoing</td>
</tr>
</tbody>
</table>
APPENDIX A

References

Governmental and other Plans

City of Olympia


Thurston County Washington

Thurston County Comprehensive Plan (2005 with subsequent amendments)
https://www.thurstoncountywa.gov/planning/Pages/comp-plan-current.aspx

https://www.co.thurston.wa.us/health/sscp/PDF/ThurstonCounty5YearPlan_082018.pdf

Thurston County Hazardous Weather Task Force
https://www.co.thurston.wa.us/health/sscp/hwtf.html

Thurston Thrives

http://thurstonthrives.org/

https://thurstonthrives.org/action-teams/housing/

https://www.co.thurston.wa.us/health/thrives/housing.html

https://www.co.thurston.wa.us/health/ehhm/index.html green team

United States Interagency Council on Homelessness (USICH)

https://www.usich.gov/home-together

Washington State Department of Commerce

Bonlender, B. et. al (2018, January) State of Washington Homeless Housing Strategic Plan

Homeless Grant Programs
Washington-2016-FINAL-1.pdf

Consolidated Homeless Grant Guidelines 2019-2021
https://deptofcommerce.app.box.com/s/sddzidhjin9zvb2zao5fes3rpwbc399o

Homeless Families

United States Interagency Council on Homelessness (USICH)

Family Connection: Building systems to end family homelessness (2014)
https://www.usich.gov/tools-for-action/family-connection/
Ending Family Homelessness (2018, November)
https://www.usich.gov/goals/families/

Chronic Homelessness

United States Interagency Council on Homelessness (USICH)

Ending Long-Term Homelessness for People with Complex Needs (2016, March)
https://www.usich.gov/tools-for-action/ending-chronic-homelessness-fact-sheet/

10 Strategies to End Chronic Homelessness (2016, April)
https://www.usich.gov/tools-for-action/10-strategies-to-end-chronic-homelessness/

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True Colors United

https://truecolorsunited.org/portfolio/at-the-intersections/

United States Interagency Council on Homelessness (USICH)

Preventing and Ending Youth Homelessness: A Coordinated Community Response (2015, September)

Washington State Department of Commerce, Office of Homeless Youth

Office of Homeless Youth Prevention and Protection Programs, 2016 Report

Office of Homeless Youth Prevention and Protection 2018 Progress Report

Racial Equity

C4 Innovations – Supporting Partnerships for Anti-Racist Communities - S.P.A.R.C.
https://c4innovates.com/training-technical-assistance/sparc/

Government Alliance on Race and Equity
https://www.racialequityalliance.org/

Journal of Public Health Management and Practice

Cresci, V. L. and James, R. D. (2019, September) The Role of Tribal Epidemiology Centers in Serving the Public Health Needs of American Indians and Alaska Natives
https://journals.lww.com/jphmp/Fulltext/2019/09001/The_Role_of_Tribal_Epidemiology_Centers_i_n_Serving.1.aspx#pdf-link
Los Angeles Homeless Services Authority

Report and Recommendations of the Ad Hoc Committee on Black People Experiencing Homelessness (2018, December)

Seattle Race and Social Justice Initiative

Racial Equity Toolkit to Assess Policies, Initiatives, Programs, and Budget Issues

United States Interagency Council on Homelessness (USICH)

Vogt, R. (2019, June) Breaking New Ground by Focusing on Race

Manzo, B. (2017, October) Emerging Strategies for Addressing Racial Inequities in our Efforts to end Homelessness

Best Practices

National Law Center on Homelessness and Poverty


Thurston County Board of Health

Thurston County Opioid Response Plan 2019 – 2020

United States Interagency Council on Homelessness (USICH)

USICH Communications (2019, June) Resource Roundup: Providing Access to Low Barrier Shelter

Prevention

Canadian Observatory on Homelessness

https://www.homelesshub.ca/solutions/prevention/framework-preventing-homelessness

Diversion

Building Changes

https://buildingchanges.org/strategies/diversion


**Tenant Protections**

National Law Center on Homelessness and Poverty

Protect Tenants, Prevent Homelessness (2018)

**History**

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History of Homelessness
https://invisiblepeople.tv/history-of-homelessness/

The Paw Print

Denuyl, C. (October 2011) A Brief History of Homelessness
https://blogs.adams.edu/thepawprint/a-brief-history-of-homelessness/

**Institutionalization**

CSH


**Coordinated Entry**

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HUD Coordinated Entry Requirements and Checklist of Essential Elements (January 2017)

**Crisis Sheltering/Tent Cities**

National Law Center on Homelessness and Poverty

Tent City USA: The Growth of America’s Homeless Encampments and How Communities are Responding (2017)

United States Interagency Council on Homelessness (USICH)


**Funding Diversity**

United States Interagency Council on Homelessness (USICH)

Services in the CoC Program: A Guide to Assessing Value and Finding Funding Alternatives (January 2014)
**Point in Time Count**

**National Law Center on Homelessness and Poverty**

Don't Count on it: How the HUD Point In Time Count Underestimates the Homelessness Crisis in America (2017)


**Thurston County Washington**

Thurston County Homeless Census Report (2019)


**Housing Affordability**

**Eviction Lab**

Princeton University Eviction Database https://evictionlab.org/

**Journal of Urban Affairs**


**National Low-Income Housing Coalition**

Out of Reach 2019 https://reports.nlhc.org/oor

**Thurston Regional Planning Council**

Housing Affordability https://www.trpc.org/459/Affordability

Apartment Rent and Vacancy https://www.trpc.org/456/Apartment-Rent-Vacancy

**Washington State Department of Commerce**


**Area Median Income (AMI)**

**Housing and Urban Development**

2019 Income Limits Documentation System

APPENDIX B
Glossary

Accessibility
The extent to which a facility is readily approachable and usable by individuals with physical disabilities, such as self-opening doors, elevators for upper levels, or raised lettering on signs. The term also refers to being admitted to programs and activities and having the right to enter institutions, such as colleges and universities.

Bias
Prejudice: an inclination or preference, especially one that interferes with impartial judgment.

Continuous Stay Shelter
Continuous stay shelter is a category of shelter that can either be low or higher barrier in terms of shelter entry. Individuals enter the Coordinated Entry system and then are prioritized into shelters within the HCRS and are assigned a bed. Most continuous stay shelters are not time limited in Thurston County and most are low-barrier.

Coordinated Entry
Coordinated Entry paves the way for more efficient homeless assistance systems by: (1) Helping people move through the system faster (by reducing the amount of time people spend moving from program to program before finding the right match); (2) Maximizing impact of existing resources by preventing “creaming” and by prioritizing higher needs households for more intensive (and expensive) programs; (3) Reducing new entries into homelessness by consistently offering diversion resources upfront, reducing the number of people entering the system unnecessarily; and (4) Improving data collection and quality and providing accurate information on what kind of assistance consumers need.

Coordinated entry is a standardized process for intake, assessment, prioritization, and referral of households entering the system to providers working in the system. Coordinated entry in Thurston County is provided by three agencies (Family Support Center, SideWalk, and Community Youth Services) serving three distinct subpopulations (families with children, childless adults, and youth / young adults, respectively).

Cultural Humility
Cultural humility is a humble and respectful attitude toward individuals of other cultures that pushes one to challenge their own cultural biases, realize they cannot possibly know everything about other cultures, and approach learning about other cultures as a lifelong goal and process.

Cultural humility was established due to the limitations of cultural competence. Some professionals, like social workers, medical professionals, or educators, believed themselves to be culturally competent after learning some generalizations of a particular culture. Cultural humility encourages an active participation in order to learn about a patient's or client's personal, cultural experiences.
https://study.com/academy/lesson/cultural-humility-definition-example.html

Discrimination
Actions stemming from conscious or unconscious prejudice, which favor and empower one group over others based on differences of race, gender, economic class, sexual orientation, physical ability, religion, language, age, national identity, religion and other categories.
Diversion
Diversion is a strategy that prevents homelessness for people seeking shelter by helping them identify immediate alternate housing arrangements and, if necessary, connecting them with services and financial assistance to help them return to permanent housing. Diversion programs can reduce the number of families becoming homeless, the demand for shelter beds, and the size of program wait lists. Diversion programs can also help communities achieve better outcomes and be more competitive when applying for federal funding. This paper will describe how communities can begin diverting families from entering their homeless assistance systems. Diversion is very similar to rapid rehousing but is typically faster, lower cost, and targeted to the point of system entry.

Diversity
Diversity includes all the ways in which people differ, and it encompasses all the different characteristics that make one individual or group different from another. It is all-inclusive and recognizes everyone and every group as part of the diversity that should be valued. A broad definition includes not only race, ethnicity, and gender — the groups that most often come to mind when the term “diversity” is used — but also age, national origin, religion, disability, sexual orientation, socioeconomic status, education, marital status, language, and physical appearance. It also involves different ideas, perspectives, and values. 

UC Berkeley Center for Equity, Inclusion and Diversity, Glossary of Terms

Emergency Mitigation Project
Temporary emergency response due to unprecedented numbers of unsheltered individuals and families in Thurston County. These projects may include but are not limited to: Managed Encampments, Safe Parking Programs, Tiny Home Villages, Faith Based Tiny Home Sponsorship and Shelter-in-Place efforts.

Emergency Shelter
Temporary, emergency intervention for people experiencing homelessness best when utilized only for a short time. In an ideal world we would have adequate housing and services for everyone that needs them thus eliminating the need for emergency shelters—a historically expensive and temporary intervention for homelessness. However, emergency shelters continue to play a vital role in our community safety net for highly vulnerable residents of Thurston County. Emergency shelters should be designed for maximum efficiency, minimum barriers and be tailored to serve the most vulnerable and at-risk homeless population. To ensure evidence-based practices, shelters should be based in the principles of housing first, low-barrier and trauma informed care.

http://100khomes.org/sites/default/files/Common%20Eligibility%20Criteria%20for%20Emergency%20Shelters%20FINAL_0.pdf

Equality / Equity

● Equality is the measure of sameness; being treated in the same way.

● Equity is a measure of fair treatment, opportunities and outcomes across race, gender, class and other dynamics.

This distinction is important. We are told that to be fair we must treat everyone the same (equal), however, when we recognize the legacy of institutionalized and structural racism we understand that differing people and communities need different resources (equity). In order to be equitable we provide specific, unique resources that will support people and communities getting their basic needs met and reaching their full potential. Sameness is not always fairness if the oppressed group remains disadvantaged.

**Functional Zero**
“Functional zero” is a measurement for ending homelessness. We will have reached functional zero when the number of people experiencing homelessness at a point in time is less than the monthly housing placement rate. Effectively this means that the resources available fully meet or exceed the need and homelessness has ended as a mass-scale problem.

**Gender**
The socially constructed roles, behaviors, activities, and characteristics that a given society categorizes as ‘masculine’ and ‘feminine’; not defined by one’s biological sex
https://www.tacoma.uw.edu/sites/default/files/sections/Diversity/diversity_glossary.pdf

**Gender Identity**
A person’s individual and subjective sense of their own gender; gender identities exist in a spectrum, and are not just masculine and feminine
https://www.tacoma.uw.edu/sites/default/files/sections/Diversity/diversity_glossary.pdf

**Harm Reduction**
A philosophy that focuses on the risks and consequences of a particular behavior, rather than on the behavior itself. In terms of substance use, it means focusing on strategies to reduce harm from high-risk use, rather than insisting on abstinence. Abstinence from alcohol or drugs is not appropriate or possible for everyone. Abstinence is neither condoned nor condemned in harm reduction services. Instead it is considered one strategy among many others. Harm reduction interventions incorporate a spectrum of strategies from safer substance use, to managed use to abstinence to meet drug users “where they’re at,” addressing conditions of use along with the use itself. Because harm reduction demands that interventions and policies designed to serve drug users reflect specific individual and community needs, there is no universal definition of or formula for implementing harm reduction.

With regard to housing, harm reduction means that tenants have access to services to help them address their substance use, mental health, personal care, nutritional or other challenging issues. It is based on the understanding that recovery is a long process, and that users need a stable living arrangement in order to address their addictions. Focus is on being healthier rather than on the unrealistic goal of being perfectly healthy right away. Harm reduction programs often provide stronger results than abstinence-only programs.

Principles of Harm Reduction are the basis for all successful Housing First programs and are applicable not only to active drug use or housing programs, but also to mental health challenges, conflict mediation, hygiene and general physical health. People make decisions within the context of their environment. Service providers coming from a harm reduction lens must always aim to “zoom out” to find the context for behavior rather than blaming the individual for their behavior. Every one of our clients has experienced trauma/is currently experiencing systemic trauma that has drastically affected their ability to manage their lives. https://docs.google.com/document/d/1nW46y8KEoKFDjkdAFxJG5Dje3sEABTyWjA3_oM9pSsc/edit

**Housing First**
The Housing First Model offers housing without precondition or “housing readiness” requirements. Participants are not required to be sober or to “work a program”. Housing is viewed as a support for - rather than a reward of - recovery. Rules and requirements in housing first programs are no stricter than a typical lease. Research shows that the best recovery outcomes are achieved through Housing First services (as compared to transitional systems and street homelessness).
Implicit Bias
Also known as unconscious or hidden bias, implicit biases are negative associations that people unknowingly hold. They are expressed automatically, without conscious awareness. Many studies have indicated that implicit biases affect individuals’ attitudes and actions, thus creating real-world implications, even though individuals may not even be aware that those biases exist within themselves. Notably, implicit biases have been shown to trump individuals’ stated commitments to equality and fairness, thereby producing behavior that diverges from the explicit attitudes that many people profess. The Implicit Association Test (IAT) is often used to measure implicit biases with regard to race, gender, sexual orientation, age, religion, and other topics.
State of the Science Implicit Bias Review 2013, Cheryl Staats, Kirwan Institute, The Ohio State University.

Institutional Racism
Institutional racism refers specifically to the ways in which institutional policies and practices create different outcomes for different racial groups. The institutional policies may never mention any racial group, but their effect is to create advantages for whites and oppression and disadvantage for people from groups classified as people of color.

Examples:

Government policies that explicitly restricted the ability of people to get loans to buy or improve their homes in neighborhoods with high concentrations of African Americans (also known as “red-lining”).

City sanitation department policies that concentrate trash transfer stations and other environmental hazards disproportionately in communities of color.

LGBTQ+
The umbrella community of people who identify as lesbian, gay, bisexual, transgender, non-binary, two-spirited, queer, questioning, intersex, and/or asexual. There are other identities under the LGBTQ+ heading. This definition is not definitive as new identities are added ongoing.

Low Barrier
Housing (or shelter) where a minimum number of expectations are placed on people who wish to live there. The aim is to have as few barriers as possible to allow more people access to services. In housing this often means that tenants are not expected to abstain from using alcohol or other drugs and are not required to engage in supportive services in order to maintain housing. Low-barrier facilities follow a harm reduction philosophy. “Low barrier” is fundamentally focused on going the extra mile to accommodate severe disabilities, including behavioral disabilities, and to support people based on the realities of the lives they are living rather than expecting them to conform to unrealistic program expectations.

Low barrier programs eliminate entry screening requirements to the greatest extent possible. Applicants are not turned away for criminal record, eviction history, refusal to engage in supportive services, credit problems, expulsion from other programs, or not being a “good fit”. More than this, “low barrier” is a philosophy that actively seeks to eliminate obstacles, challenges, and sources of discomfort for consumers. Excessive paperwork, appointment-based services, excessive rules governing behaviors, regulating personal autonomy, and inaccessible locations all create obstacles to services for vulnerable people.
In practice, this means:

- Individuals are welcome to participate in available programs but not required.
- No length of stay requirements.
- Sobriety is not required.
- No one is denied service for not having valid ID.
- Criminal history generally does not exclude people from services.
- Couples stay together whenever possible.
- There will be secure storage space for personal items.
- Service animals and companion pets will be accommodated.
- People are not denied service for mental illness or related behaviors, or for not being “a good fit” with a program.

**Marginalized**
Excluded, ignored, or relegated to the outer edge of a group/society/community.

**People of Color**
An umbrella term for any person or peoples that is considered by the society in which they live to be non-white https://www.tacoma.uw.edu/sites/default/files/sections/Diversity/diversity_glossary.pdf.pdf

**Permanent Supportive Housing**
Vulnerability based, non-coercive, non-judgmental, low-barrier, permanent housing for chronically homeless and permanently disabled individuals and families. Supportive services including but not limited to holistic health and medical, mental health, substance use, enrichment programs and case management are available on site for people who wish to engage in services or coordinated closely to reduce all possible barriers to residents accessing services once they are ready. As a costly intervention, PSH must be targeted to the people who are most likely to die if they are left on the streets using an objective, standardized assessment tool and placed through a coordinated entry system. An ideal candidate for PSH is a household or individual experiencing chronic homelessness, permanent physical, mental health or substance use related disability, chronic illness and high rates of interaction with law enforcement and emergency rooms.

**Prevention**
Prevention is the practice of providing short to medium-term supportive services and rent assistance to households at-risk or at imminent risk of homelessness. Prevention connects people with the care and support needed to maintain their housing and achieve a better quality of life. All prevention programs will provide targeted prevention, an approach where households are strategically prioritized to receive homeless prevention assistance based on a standardized, evidence-based assessment that identifies households who are at highest risk of becoming homeless. Successful targeted prevention reduces the number of households who actually become homeless. The length of assistance 4-6 months on average but can extend to 24 months.

*HUD Performance Training*

**Progressive Engagement**
Flexible, individualized service provision aimed at providing the minimal amount of resources necessary to help someone non coercively stabilize in housing and support services. In tandem with a standardized assessment process, progressive engagement helps to ensure that maximum access to resources is preserved for the most vulnerable community members who truly need maximum support. Progressive engagement is rooted in principles of motivational interviewing and harm reduction to create person
centered, client led individualized service plans based on the stated needs of the client in their own voice. Progressive engagement is considered a best practice and required by all grantees of the Consolidated Homeless Grant

**Racial Equity**
Racial equity is the condition that would be achieved if one's racial identity no longer predicted, in a statistical sense, how one fares. When we use the term, we are thinking about racial equity as one part of racial justice, and thus we also include work to address root causes of inequities not just their manifestation. This includes elimination of policies, practices, attitudes and cultural messages that reinforce differential outcomes by race or fail to eliminate them.

Racial Justice [is defined] as the proactive reinforcement of policies, practices, attitudes and actions that produce equitable power, access, opportunities, treatment, impacts and outcomes for all. 


**Racial Disparity**
Differences in measurable societal outcomes based on race. These disparities are rooted in unfairness and injustice and are perpetuated by policies and practices with racial bias (either implicit or explicit)


**Racism**
Individual, cultural, institutional and systemic ways by which differential consequences are created for groups historically or currently defined as being advantaged, and groups historically or currently defined as disadvantaged or non-White (African, Asian, Hispanic, Native American, etc.). Racism may also be said to be prejudice plus power. The relationship and behavior of these interdependent elements has allowed racism to recreate itself generation after generation, such that systems that perpetuate racial inequity no longer need racist actors or to explicitly promote racial differences in opportunities, outcomes and consequences to maintain those differences.


**Rapid Rehousing**
Rapid Re-housing is an intervention designed to help individuals and families to quickly exit homelessness and return to permanent, stable housing. Households served meet the HUD definition of literally homeless. Rapid rehousing assistance is offered without preconditions (such as employment, income, absence of criminal record, or sobriety) and the resources and services provided tailor to the unique needs of the household. Services to support rapid re-housing include housing search and landlord negotiation, short to medium-term financial and rental assistance, and the delivery of home and agency-based housing stabilization services, as needed. The length of assistance 4-6 months on average but can extend to 24 months.

*USICH

**Recovery Housing**
HUD defines Recovery Housing as housing in an abstinence-focused and peer-supported community for people recovering from substance use issues. Typically, residents choose to actively participate together in community activities focused on supporting recovery. In its December 2015 policy brief, HUD recognized the value to communities that have adopted a system-wide Housing First orientation of adding a Recovery Housing option for chronically homeless people with mental and physical health problems who are recovering from substance abuse issues. The key to this approach is that it provides the
participant with the option of choosing a program that supports their personal commitment to sobriety and holistic recovery

**Sexual Orientation**
An individual's natural preference in sexual partners; predilection for homosexuality, heterosexuality, or bisexuality.

[https://www.tacoma.uw.edu/sites/default/files/sections/Diversity/diversity_glossary.pdf](https://www.tacoma.uw.edu/sites/default/files/sections/Diversity/diversity_glossary.pdf)

**Shelter-in-Place**
Outreach activities that center on supporting unsheltered households to remain where they are due to lack of shelter space and affordable and supportive housing. Activities could include providing survival supplies, referrals to housing and other services, sanitation, laundering, and garbage removal.

**Transgender**
Appearing as, wishing to be considered as, or having undergone surgery to become a member of the opposite sex. Transgendered people can include transsexuals, cross-dressers, drag kings/queens, masculine women, feminine men, and those who defy what society tells them is appropriate for their gender.

[https://www.tacoma.uw.edu/sites/default/files/sections/Diversity/diversity_glossary.pdf](https://www.tacoma.uw.edu/sites/default/files/sections/Diversity/diversity_glossary.pdf)

**Transitional Housing**
Transitional Housing is a program that is designed to provide housing and appropriate supportive services to people who are literally homeless to facilitate movement to permanent housing. The housing is medium-term, typically less than, but up to 24 months and best practices dictate the focus should be on people exiting systems of care and youth. In addition to providing safe housing for those in need, other services are available to help participants become self-sufficient. The focus of Transitional Housing is to move people as quickly as possible into permanent housing, while providing the support they need to remain stably housed. Source: HUD Definitions

**Transitional Housing (Youth)**
Transitional Living Programs or Independent Living Programs provide longer term residential services to homeless youth (both minors and transition aged youth) who are unable to live with family either due to a lack of safety or a lack of family. The housing services offered are designed to help young people successfully transition to self-sufficient living.

Transitional Living programs should incorporate the Positive Youth Development (PYD) approach in the provision of stable, stable living accommodations for young people. PYD helps youth develop the skills necessary to become independent.

**Trauma Informed Care**
Trauma informed care is directed by a thorough understanding of the effects of trauma and the prevalence of these experiences in persons who seek services and the organizations that provide the service. Becoming Trauma Informed as an organization is a holistic and complete process that includes analysis of all aspects of the organization from top to bottom with a fundamental understanding that the service delivery cannot be truly trauma informed if the organizational structure is not as well. It considers knowledge about trauma — its impact, interpersonal dynamic, and paths to recovery — and incorporates this knowledge into all aspects of service delivery.

Trauma informed care also recognizes that traditional service approaches can re-traumatize consumers and family members. Trauma informed providers are sensitive to the ways in which coercion and control (program rules, disciplinary actions, etc.) re-traumatize consumers and they actively support client choice and self-direction.

**Vulnerability Index**
The Vulnerability Index (VI) is a tool for identifying and prioritizing people in the homeless and street dependent communities for housing according to the fragility of their health. The VI is administered in a form of a survey, which utilizes a ranking system to assess the individual’s health, risk factors and the duration of homelessness. This ranking allows those with the most severe health risks to be identified and prioritized for housing and other support.

Resource limitations reduce access to vulnerable people who are currently hospitalized or incarcerated who have not been assessed for vulnerability. Additionally, the lack of outreach into Lacey, Tumwater, and rural Thurston County greatly limits VI assessments among the homeless in those areas.

**Vulnerability-Based Prioritization**
Prioritizing the people most likely to die on the streets and who have higher interactions with costly public services due to their unsheltered status is a more effective and cost-effective approach to referrals from coordinated entry to providers. Thurston County coordinated entry providers adopted the use of an objective, standardized assessment tool.

*VI-SPDAT http://www.orgcode.com/product/spd*
APPENDIX C
2019 Point-in-Time Snapshot

Point-in-Time Homeless Snapshot for Thurston County

2019 Point-in-Time Count Results
Each January, Thurston County conducts a "point-in-time count" to capture the number and characteristics of people living without a home.

- 12% Unaccompanied youth 17 and under
- 42% Female
- 7% Veterans
- 10% Victims of domestic violence
- 32% People of color (People of color make up 18% of the Thurston County population)
- 31% Chronically homeless
- 34% Households with children

The main causes of homelessness are related to economic & family stability
1. Job loss/eviction
2. Mental/health/family rejection
3. Physical health/disability
4. Domestic violence/alcohol or substance abuse

800 Homeless people counted in Thurston County

- 30% Less than one year
- 70% More than one year

How long have people been homeless?

Not all people experiencing homelessness sleep outside

- 30% Emergency shelter
- 34% Out of doors (street, tent, etc.)
- 14% Vehicle, abandoned building, other
- 21% Transitional housing

Most said they lived in Thurston County before becoming homeless

- 54% Thurston County
- 35% Other WA Counties
- 11% Outside WA

Physical health is the most commonly reported disability
Here is the breakdown of the most commonly reported disabilities. Some people reported having multiple disabilities.

- Mental illness: 55%
- Physical disability: 54%
- Chronic health condition: 33%
- Substance use: 33%
- Developmental disability: 5%
Thurston County Homeless Crisis Response Plan 2019-2024

Final Report - May 2019

Thurston County - Point In Time Homeless Counts 2006-2019
 CLIENT DEMOGRAPHICS
All demographic information is a year-to-date percentage of distinct individuals who have enrolled in a housing project in 2019, as reported in HMIS.

Age Tier

<table>
<thead>
<tr>
<th>Age Tier</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-17</td>
<td>22%</td>
</tr>
<tr>
<td>18-24</td>
<td>16%</td>
</tr>
<tr>
<td>25-34</td>
<td>19%</td>
</tr>
<tr>
<td>35-44</td>
<td>17%</td>
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<tr>
<td>45-54</td>
<td>14%</td>
</tr>
<tr>
<td>55-64</td>
<td>9%</td>
</tr>
<tr>
<td>65+</td>
<td>2%</td>
</tr>
<tr>
<td>Unknown</td>
<td>0%</td>
</tr>
</tbody>
</table>

Gender Identity

- Male 55%
- Female 41%
- Transgender 1%
- Nonbinary 1%
- Unknown 2%

Sexual Orientation

- Unknown 93%
- Heterosexual 5%
- LGBTQ 2%

Thurston County acknowledges the enormous diversity within the LGBTQIA2S+ community regarding sexual orientation and gender identity. For the purposes of simplifying this report, the LGBTQ category above includes gay, lesbian, bisexual, questioning/unsure as available in HMIS.

Ethnicity

- Non-Hispanic / Non-Latinx
- Hispanic / Latinx
- Unknown

Race

- American Indian or Alaska Native
- Asian
- Black or African American
- Native Hawaiian or Other Pacific Islander
- White
- Multi-racial
- Unknown

5% VETERANS

8% FLEEING DOMESTIC VIOLENCE

30% REPORT ANY INCOME**

$772 / Month Average Income
24% Earned Income
18% SSI
12% TANF ** Adults over age 18

38% REPORT A DISABILITY

28% Mental Health
19% Substance Use
17% Chronic Health
7% Developmental Disability
16% Physical Disability

Contact Information
Keylee Marineau
Program Coordinator
keylee.marineau@co.thurston.wa.us

HOUSING PROJECTS DATA REPORT 2019-Q3

The Housing Projects Data Report uses HMIS data accessed through Looker queries. The report has been created by:
Pamela Gant | Data Analyst
pamela.gant@co.thurston.wa.us
## APPENDIX F
### Funding and Activity Guide 2019

<table>
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<th>Target AMI</th>
<th>Capital/Construction</th>
<th>Payment Assistance</th>
<th>Services</th>
<th>Admin</th>
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<td>Other activities to reduce or prevent homelessness as identified in the County's approved 5-year Homeless Crisis Response Plan are eligible for funding.</td>
<td></td>
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</table>

### Thurston County Office of Housing and Homeless Prevention

Funding and Activity Quick Guide
APPENDIX G
Thurston Thrives Organization Chart
Thurston Thrives. Thurston Thrives was founded by the Thurston County Board of Health in 2013 as a network aimed at bringing together community partners of Thurston County around the work we share. One of the main focuses of the network is to ensure that our county is a thriving place to live, work, and play, for current and future generations. The purpose is to engage our leaders across the board to move forward an action agenda we can all believe in to improve health for all Thurston County residents. Under a Coordinating Council, community members have come together to form action teams in eight areas—Clinical & Emergency Care, Community Design, Education & Resilience, Economy, Environment (including Climate & Clean Energy), Food, Housing, and Public Safety & Justice.

Thurston Thrives Coordinating Council. Thurston Thrives is overseen by a 24-member public-private Coordinating Council comprised of representatives from: funders (non-governmental), business, action teams/nodes, local government, and education, as well as two members at large. As the leadership of this network, the Coordinating Council serves as platform to advance the innovative actions of the teams and helps inform regional policies.

Housing Action Team. The Housing Action Team (HAT) develops strategies and recommendations to ensure housing adequacy and quality for our community. They are responding with a comprehensive approach to addressing the housing needs of our community, especially for those who are homeless and severely cost-burdened (spending 50% or more of their income on their housing). Within the HAT, teams work to achieve the goals and strategies on the HAT strategy map. The teams are color-coded, and work on specific areas of the housing continuum:

- The Homeless Housing Hub “red team” (HHH) is composed of a cross-sector team working to end homelessness. Activities include networking, development of best practices & policy work. This team also serves as the Thurston County Continuum of Care for the Department of Commerce and is part of the Housing Hub for the Thurston Asset Building Coalition. Under the HHH, there are several groups that work on specific elements of the Homeless Crisis Response System to ensure it is operating in a coordinated, concise and consistent manner.
  - Coordinated Entry. A team of service providers working to implement and oversee Thurston County’s Coordinated Entry System
  - Vulnerability Team. A team of service providers focused on prioritization of individuals and households for services and housing.
  - Outreach (GROWL). A team of outreach workers and providers focused on improving and coordinating outreach efforts to homeless populations.
  - with the HHH, but serves the entire HAT and other color teams, as those teams support the HCRP.

There are two teams that primarily work to support the HHH but which serve the entire HAT and support the work of all teams.

- HCRP Core Team. A team dedicated to leading the development and implementation oversight of the HCRP. The Core Team is primarily associated
- Data Quality. A team working to improve data collection and dissemination. The Data Quality team primarily focuses on data for the HCRS but serves to support the entire HAT.

- The Capital Housing Team “blue team” is focused on ways to increase the supply of affordable housing, primarily through new construction or acquisition and rehabilitation of existing housing. The team has two sub-teams: the incentivize team works to involve the private sector and local developers in working with the municipalities and nonprofits to solve our housing problems together; the pipeline team provides input to the County and elected officials on priorities for utilizing state and federal affordable housing capital funds.
- The Rental Housing “green team” looks into ways for renters, landlords and property managers to get support, tools and education to help improve multiple aspects of rental housing. The goal is for rental housing to remain in good, healthy and livable condition over time to continue to serve as safe, healthy and affordable housing for current and future generations.
- The Senior Housing “silver team” focuses on the housing needs of seniors as the age of our community increases, income disparity widens, and the need for care for chronic health increases among our population.
APPENDIX H
Out of Reach Report

Washington

FACTS ABOUT WASHINGTON:
STATE FACTS
Minimum Wage $12.00
Average Renter Wage $20.06
2-Bedroom Housing Wage $27.78
Number of Renter Households 102,879
Percent Renters 3%

In Washington, the Fair Market Rent (FMR) for a two-bedroom apartment is $714.45. In order to afford this level of rent and utilities — without paying more than 30% of income on housing — a household must earn $4,815 monthly or $57,783 annually. Assuming a 40-hour work week, 52 weeks per year, this level of income translates into an hourly Housing Wage of:

$27.78 per hour

STATE RANKING
#7*
<table>
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<th>RENTERS</th>
<th>AREA MEDIAN INCOME (AMI)</th>
<th>HOUSING COSTS</th>
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Washington Metropolitan Area
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<td>2016</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2017</td>
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<td></td>
</tr>
<tr>
<td>2018</td>
<td></td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>2019</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Washington

Thurston County Homeless Crisis Response Plan 2019-2024
APPENDIX I
Cost/ Benefit Comparison of Shelter Beds (2018 Data)

Cost / Benefit Comparison of Shelter Beds (2018 Data):

The following chart presents some rudimentary comparisons of shelter costs taken from 2018 data by calculating the cost of a single bed night by dividing the total shelter operating budget by the total available number of beds:

<table>
<thead>
<tr>
<th>Facility</th>
<th>2018 Annual Budget (operating at capacity)</th>
<th>Beds Available</th>
<th>Bed Night Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>FSC Pear Blossom Place</td>
<td>$470,120</td>
<td>56</td>
<td>$23</td>
</tr>
<tr>
<td>Interfaith Works</td>
<td>$499,685</td>
<td>42</td>
<td>$32.60</td>
</tr>
<tr>
<td>CYS Rosie’s Place</td>
<td>$289,445</td>
<td>17</td>
<td>$46.65</td>
</tr>
<tr>
<td>Salvation Army</td>
<td>$473,405</td>
<td>69</td>
<td>$18.80</td>
</tr>
<tr>
<td>Drexel House</td>
<td>$251,120</td>
<td>16</td>
<td>$43</td>
</tr>
<tr>
<td>Union Gospel Mission</td>
<td>$60,955</td>
<td>50</td>
<td>$3.34</td>
</tr>
<tr>
<td>St. Michael’s</td>
<td>$86,870</td>
<td>12</td>
<td>$19.81</td>
</tr>
<tr>
<td>SafePlace*</td>
<td>Unk.</td>
<td>29</td>
<td>Unk.</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>Average $304,514</strong></td>
<td>291</td>
<td>Average Bed Night $27</td>
</tr>
</tbody>
</table>

*Shelter and bed night information not provided

Community Costs of Unsheltered Homelessness (2018 Data)

As illustrated in the 2006 New Yorker article titled, “Million Dollar Murray” by Michael Gladwell, chronically homeless people often cost more per bed night than the default options of County jails or emergency services. PLEASE NOTE: Data presented dates from 2018, new data will be presented soon. The locally estimated “default accommodation” costs per bed night listed below:

<table>
<thead>
<tr>
<th>Provider</th>
<th>Description</th>
<th>2018 Cost per person Per day</th>
</tr>
</thead>
<tbody>
<tr>
<td>County Jail</td>
<td>1 day incarceration</td>
<td>$111.28</td>
</tr>
<tr>
<td>State Prison</td>
<td>1 day incarceration</td>
<td>$111</td>
</tr>
<tr>
<td>City Jail</td>
<td>1 day incarceration</td>
<td>$45</td>
</tr>
<tr>
<td>Thurston Telecare</td>
<td>1 day overnight</td>
<td>$1000</td>
</tr>
<tr>
<td>Emergency Room</td>
<td>8 hours @ facility</td>
<td>$2200*</td>
</tr>
<tr>
<td>Medic One</td>
<td>Emergency Response</td>
<td>$338</td>
</tr>
<tr>
<td>OPD</td>
<td>2 OPD Officers respond to call</td>
<td>$97.38</td>
</tr>
</tbody>
</table>