



A HOME FOR EVERYONE

Strategic Plan to End Homelessness in Whatcom County

2019 Local Plan Update

Phase 5

Submitted by the Whatcom County Health Department



Whatcom County
HEALTH
Department



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- East Whatcom Regional Resource Center
- Every resident of our community without a home of their own
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- Interfaith Coalition
- Lake Whatcom Residential and Treatment Center
- Lighthouse Mission Ministries
- Lydia Place
- Northwest Regional Council
- Northwest Youth Services
- Opportunity Council
- PeaceHealth St. Joseph Medical Center
- Pioneer Human Services
- Plan to End Homelessness Ad Hoc Committees
- Skagit County Public Health
- Small Cities Partnership of Whatcom County
- Sun Community Services
- Unity Care Northwest
- Washington State Department of Social and Health Services
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- Whatcom County Council
- Whatcom County Housing Advisory Committee
- Whatcom County Planning Department
- Whatcom County Steering Committee of the Coalition to End Homelessness
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Recognition is also due to all local service providers and nonprofits responding to homelessness, and to volunteer heroes who work tirelessly on behalf of those who are without a home of their own.

This local plan update is dedicated to those who lost the battle and died while homeless.

Executive Summary

This plan describes Whatcom County's response to the complex issue of homelessness in our community. It explains how the strategies and actions required of an effective homeless crisis response will be used to meet the needs of Whatcom County.

Housing in Whatcom County

The most frequent and direct hardship that leads to homelessness is the lack of affordable and available housing. This challenge is often compounded by difficulty in accessing treatment for medical or behavioral health disabilities, domestic violence, and discrimination that further reduces housing stability. Whatcom County's housing programs provide financial, behavioral health, and other types of support services that successfully end homelessness and create lasting stability for participants, and they provide significant benefits to the broader community as well. To overcome anticipated rent growth in Whatcom County however, commensurate increases in funding will be necessary to prevent a corresponding increase in homelessness.

Community Oriented Approach

A Home for Everyone was created with input from a wide range of community stakeholders that includes elected officials, service providers, and those with the lived experience of homelessness. It calls for continuation of our balanced approach that seeks to make homelessness a rare, brief, and non-repeated experience. Services will generally be prioritized for households who are most likely to suffer the greatest harm as a result of homelessness and who are the least able to resolve their housing crisis unassisted. At the same time, some resources will be reserved to divert households from losing housing in an effort to avoid the trauma of homelessness. Every intervention aims to move people towards safe and stable housing.

Objectives from the Washington State Department of Commerce

In support of the goal of reducing and ending homelessness, five objectives, complete with specific actions, are included in this strategic plan:

- To quickly identify and engage people experiencing homelessness
- Prioritization of housing for people with the greatest needs
- Operation of an effective and efficient homeless crisis response system that swiftly moves people into stable permanent housing
- Project the fully implemented plan's impact on the number of households housed and the number of households left unsheltered, assuming existing resources and state policies
- Addressing racial disparities among people experiencing homelessness in Whatcom County

What We Need

A full continuum of services is vital to overcome the common and unique barriers to household stability. The system must include outreach programs that engage with unsheltered households and provide interim housing shelters that can transition people into permanent housing. We need rapid re-housing that gets people back into stable housing and we need skilled case managers to link them with the financial, medical, and social resources that will keep them housed. We must dedicate affordable housing for people with constrained incomes and permanent housing programs that welcome and support people with disabilities. And we need ready assistance to help those at risk as they face eviction or the threat of domestic violence.

Progress Made

Despite the rising costs of housing and healthcare, great strides have been made toward ending homelessness in Whatcom County in recent years. The annual census of people experiencing homelessness found a 14% decrease in the number of individuals from 2018 to 2019. Program capacity of supportive, affordable, and accessible housing units increased. New diversion programs and a landlord liaison position helped people find and maintain housing by building relationships and applying existing resources. A new comprehensive day center is connecting homeless youths with what they need to get back on their feet. The community's hardest-to-serve residents are enrolled in a new countywide coordinated care and engagement program. New buildings for permanent supportive housing have been constructed to serve people with experiencing chronic homelessness while challenged with disabilities. Private citizens and faith-based institutions improved their responsiveness and expanded upon their already generous donations of time and resources. And the partnerships between government and not-for-profit housing agencies continue to strengthen and create opportunities for greater impact.

Ending Homelessness in Whatcom County

A Home for Everyone calls for the development of new and promising programs, and for the fine-tuning and coordination of the nationally recognized best practices already in place. Better integrated data and performance management, as well as broader partnerships and increased emphasis on equity, make *A Home for Everyone* a plan that will bring us closer to realizing our goal of ending homelessness for every person in Whatcom County. The objectives of this plan include quick identification and prioritization of those with the greatest needs, operating an efficient system that moves people to permanent housing, quantifying and communicating the gap between the supply and needs for homeless housing, and decreasing the disparities experienced by groups that face discrimination. This plan serves as a public blueprint for ending homelessness in Whatcom County. Dedication and collaboration from government officials, community organizations, and an engaged public can turn *A Home For Everyone's* vision into a reality for Whatcom County.

DRAFT

Introduction

History of Planning

Background

This 2019 Local Plan is a significant update to the 2012 Whatcom County 10-Year Plan to End Homelessness that includes both local priorities and state mandated objectives. Local Plan Updates such as this are required by Washington State legislation for counties receiving state funding at a minimum of once every five years, with briefer updates annually.

The purpose is to provide information about homelessness, review progress of reducing and ending homelessness locally, and to present a revised strategic plan. This overview of activities and performance encompasses the years from 2012 and into 2019, and demonstrates a commitment to strategic short, medium, and long term solutions that require participation from multiple sectors of the community. Although this Plan includes components related to other systemic issues that contribute to homelessness, its primary focus is the homeless crisis response system in Whatcom County. Importantly, this plan is limited to the areas and activities that can be reasonably influenced by the Whatcom County Health Department, its primary author. Although the network of contracted agencies that have formal relationships with the health department has grown, it still accounts for a minority of the work and funding behind the broader efforts to end homelessness, develop affordable housing, increase access to essential behavioral health supports, and provide social services for the county's most vulnerable residents. The health department recognizes and appreciates that there are many agencies and organizations working towards similar goals, but differences in approach, funding, and missions often lead to different strategies and impede close coordination.

Local Plans serve as blueprints that guide decisions about how resources will be prioritized to reduce and end homelessness. Informed by a wide range of community participants, including those with lived experience of homelessness, formal and informal organizations, government entities and nonprofit agencies, Local Plans offer strategies and activities that provide local solutions to homelessness. Deliberate collaboration and alignment among willing partners ensures effective and efficient use of resources supporting those most vulnerable to homelessness.

For the purposes of this Local Plan Update, we have set objectives and targets, revisited the strategies, explored new solutions, and collaborated with community partners in our efforts to reduce and end homelessness for everyone in Whatcom County.

This 2019 Update to our original 10 Year Plan to End Homelessness summarizes the earnest efforts, achievements, setbacks, and challenges, as we move forward with our persistent vision of *A Home for Everyone* in Whatcom County.

A Phased Approach

The following summary describes the primary impacts of Phases 1 through 4 of our Local Plan Updates:

Phase 1, 2005:

- The County's Homeless Coalition, Whatcom County Housing Advisory Committee, and other key stakeholders identified major homeless housing and prevention gaps and priorities for funding.
- Key concepts and strategies emerged as necessary components of all future Plans – Housing First, Housing Affordability, Serving All Homeless Populations, Single Point of Entry, Street Youth, and Ending Homelessness as we know it.

Phase 2, 2006:

- The County designed a three-year pilot project to incorporate the priorities and approaches identified in Phase I. It was submitted as an application for Washington State Department of Commerce's first round of the Homeless Grant Assistance Program (HGAP) and resulted in a \$1.4 million grant to establish the Whatcom Homeless Service Center.

Phase 3, 2008:

- A new Plan Update transformed the housing community from a system that managed homelessness to one focused on ending homelessness.

Phase 4, 2012:

- Emerging priorities included increased focus on ending Veteran homelessness, quicker response to people who are medically fragile, and the provision of needed resources such as a surplus furniture bank, advocacy to assist with obtaining identification documents, and access to services in the annual Project Homeless Connect.

Phase 5, 2016-2019:

- In late 2016, planning began for an Update due at the end of 2018. The Steering Committee for the Whatcom County Coalition to End Homelessness advised on plan components throughout 2017 and into 2018. The vision, guiding principles, core values, goals, and strategies of the Plan were reviewed.
- In December of 2018, Commerce published new guidelines for local plans with a new due date of December 1, 2019. The guidelines were revised in March 2019 and then again in June of 2019. This plan adheres to the guidelines, and incorporates additional elements necessary to best reconcile our local strengths, challenges, and strategies into the Update.

Community Process of Plan Development

Since 2017, housing specialists with the Whatcom County Health Department began reaching out to seek community input specifically for this update. Focus groups, meetings, interviews, and community forums included a broad range of stakeholders:

- Policy makers
- Housing partners
- Funding partners
- Medical professionals
- Vocational specialists
- School district staff
- Planning staff
- People with lived experience
- Concerned residents and members of the public

Our Vision: A home for everyone.

Guiding Principles

The housing community's guiding principles date to 2005, when planning sessions for our first strategic plan generated a list of consensus principles that continue to hold true today. These principles shaped the development of all phases of the Plan: how we write policies, the methods of service delivery, how we talk about our work, and the way we interact and engage with people seeking services.

- Housing is a basic human right
- Housing saves lives
- Housing restores dignity and instills hope
- Failures across multiple systems contribute to the prevalence of homelessness
- Homelessness is expensive; investments in strategies that work and are sustainable are fiscally responsible
- Prevention of homelessness is a primary intervention

- Communicating our work and using consistent messages will increase community support and produce better results

Our Core Values

The core values identified in earlier Plans continue to represent the position of housing partners and others in the community:

- We believe that it is unacceptable for any resident of our community to be homeless.
- Stable housing is the foundation upon which people build and improve their lives – the foundation for good health, for positive educational outcomes, and for reaching their economic potentials.
- Therefore, we maintain agreement to strive to end homelessness for all. We are committed to seek long term solutions to homelessness in Whatcom County.

Homelessness in Whatcom County

This section describes the community-wide challenges facing Whatcom County residents and provides data that explains the particular barriers faced by people experiencing homelessness locally.

Whatcom County's Housing Stability Needs

It would be difficult to overstate the severe need for housing in Whatcom County. In Bellingham alone (Whatcom County's largest city and home to about half of the population), planners have estimated that there is a need for an additional 11,000 affordable housing units. Although not as precisely quantified, this need is prevalent across all of Whatcom County's populated areas, and the housing shortage hits the community's most vulnerable residents the hardest. Specifically, people with the lowest incomes, highest housing barriers, or with ongoing health needs are those most likely to struggle with housing stability, to become homeless, and to enter the homeless crisis response system.¹

Western Washington University's Center for Economic and Business Research in 2019 found that Homelessness and Housing Affordability were the first and second most highly rated challenges facing the City of Bellingham in a survey completed by 1,295 residents.² Although a comparable study was not completed for all of Whatcom County, a database of households seeking services in Whatcom County suggests that these issues are not unique to Bellingham residents. In July of 2019, there were 123 homeless households signed up and waiting for housing services who reported their last stable address had been a place in Whatcom County outside of Bellingham. Of all the households who had most recently been housed in Whatcom County, 62% were from Bellingham and 38% were from elsewhere in Whatcom County. Additionally, many who list their last address as "Bellingham" may not technically live within city limits, such as the neighborhoods of Sudden Valley, Alderwood, Geneva, Tweed Twenty, Lake Samish, and elsewhere; potentially, half of the Whatcom County residents who seek services here did not live within Bellingham's city limits. Regarding affordability in Whatcom County, Zillow reports that rate of rent increase from July 2018 through June 2019 was greater for Whatcom County as a whole than it was for the City of Bellingham (15.1% vs 14.5%). All of this suggests that our housing crisis is not a problem created in or confined to the county's largest city, but is spread throughout western Whatcom County.

Affordability of Housing Units

Each individual who has experienced homelessness has a story that is theirs alone. But in those unique stories there are frequently shared components. The most common element that leads to homelessness in those stories is financial stress. This underlying economic hardship is a combination of high housing costs and low incomes, and often spirals out of control following an unexpected financial hardship like job loss, expensive medical bills, or even unanticipated automotive expenses.

¹ <https://www.cob.org/Documents/council/Issues/housing/Narrative%20A%20Why%20is%20housing%20expensive%206-28-19.pdf>

² <https://cbe.wvu.edu/files/2018%20City%20of%20Bellingham%20Residential%20Survey%20Executive%20Summary.pdf>

A national study completed in May of 2019 by the Consumer and Community Research Section of the Federal Reserve's Division of Consumer and Community Affairs found that 27% of survey respondents would need to sell something and 12% would simply be unable to pay an unexpected expense of \$400.³ To put this in local terms, at the rate identified in the survey (12%), the number of Whatcom County residents who would be unable to withstand a \$400 economic blow is over 27,000 people. In other words, there are tens of thousands of Whatcom County residents who are one mishap away from homelessness.

The terms "cost-burdened" and "severely cost-burdened" are used among service providers to describe households spending more than 30% or 50% of their gross income on housing costs. The 2017 American Community Study estimated that approximately 65% of Whatcom County's renter households pay more than 30% of their income in rent. A comprehensive study completed in 2018 identified an affordability inflection point at which the rate of homelessness increases at a quicker pace with subsequent rent increases.⁴ That is to say, the impact of rising cost burden, as shown in Figure 1, does not have a linear relationship with homelessness. The study compared area median income for metropolitan areas with its median cost of rent, and found that where median rent exceeded 32% of the median income, the rate of homelessness increased at an accelerated rate. That rate for Whatcom County was 28.7% in 2018.

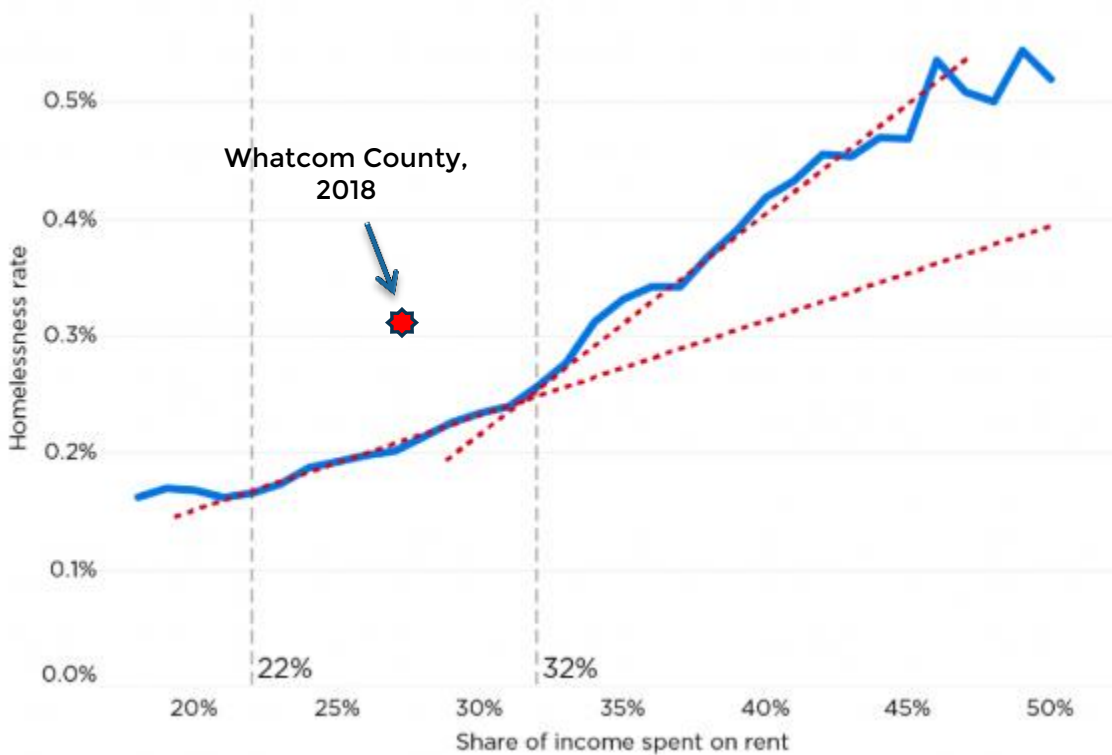


Figure 1: Homelessness rates increase more dramatically once a community's median rent exceeds 32% of its median income. This model was created using national income, rent, and Point In Time data, and shows the relationship between housing affordability and homelessness. The rate of homelessness in Whatcom County exceeds the model's prediction based on the amount of income spent on rent.

³ <https://www.federalreserve.gov/publications/2019-economic-well-being-of-us-households-in-2018-dealing-with-unexpected-expenses.htm>

⁴ Chris Glynn, Thomas H. Byrne and Dennis P Culhane. "Inflection Points in Community-level Homeless Rates" (2018)
Available at: http://works.bepress.com/dennis_culhane/228/

In July of 2018, Zillow reported Whatcom County's median rent index had reached \$1,543 per month. The median household income in Whatcom County in 2018, as estimated by the Washington State Office of Financial Management was \$64,681.⁵ This computes to a household that earns the median income spending 28.7% of their income for a median-priced rental. At the time of writing (using July 2019 figures), Zillow estimates the county-wide median rent increased by 6.4% from a year earlier.⁶ The homelessness rate, as measured with Point In Time figures, is just over 0.3%. The model predicts that for an area with a median rent that is 29% of the median household income, the rate of homelessness would be below 0.25%. The rate of homelessness in Whatcom County is higher than the model estimates, but it is worth noting that homelessness is more concentrated in certain areas of the country, and is much more prevalent on the West Coast. While rent is certainly a contributing factor, this suggests that it is not the only factor to influence the rate of homelessness in Whatcom County.

Availability of Rental Units

The rental vacancy rate in Whatcom County was measured by the University of Washington's Runstad Department of Real Estate at 0.4% in the spring of 2019.⁷ Whatcom County's rental vacancy rate has not been above 2% since 2013, which is below the state average and well below the 7% that is often considered a healthy, "natural" rate by the Joint Center for Housing Studies at Harvard University.⁸ Low vacancy rates often drive increases in rents, and also make it more difficult for individuals who would benefit from rental subsidies to remain competitive against conventionally funded tenants. Although measures have been taken to outlaw discrimination against potential tenants with vouchers both locally and at the state level, there have been reports from individuals in Whatcom County who believe discrimination is still taking place. The competitive nature of securing a unit has created an environment that is difficult for households with poor credit or the inability to pay large move-in costs.

The rental market remains constrained in part because of the high cost of purchasing a home. For households currently occupying rentals, the ability to purchase a home and create a rental vacancy has become more and more difficult. The Runstad Department of Real Estate measures housing affordability as a function of median home prices and median household incomes for each county. Using this index, Whatcom County was identified as the 5th worst of Washington State's 39 counties for affordability and 6th worst for first time homebuyers in the second quarter of 2019 for county residents to purchase locally.⁹

Population Growth

From April 1, 2010 through April 1, 2018, the natural population increase (births in excess of deaths) has accounted for about 29% of growth, while migration from outside of Whatcom County has constituted the other 71%.¹⁰ In the five years following 2013, the population of Whatcom County grew by 19,578 people, and the average household size has been 2.48 persons per household (American Community Survey, 2013-2017). Over that period of time, the number of housing units increased by only 5,457 units. Given the average household size (one unit needed per 2.48 people), this created a deficit of 2,437 housing units. This has contributed to a housing shortage and increased the challenge of housing in Whatcom County, especially for the local households who are competing with newer residents for the scarce units- some of which are moving from areas with higher average incomes and/or selling homes in higher-valued areas and are less sensitive to rising costs.

⁵https://www.ofm.wa.gov/sites/default/files/public/dataresearch/economy/median_household_income_estimates.pdf

⁶ <https://www.zillow.com/research/local-market-reports/>

⁷ <http://realestate.washington.edu/wp-content/uploads/2019/06/2019SpringApartmentMarketReport.pdf>

⁸ <http://www.jchs.harvard.edu/sites/jchs.harvard.edu/files/w07-7.pdf>

⁹ <http://realestate.washington.edu/research/wcrr/housing-reports/>

¹⁰ https://www.ofm.wa.gov/sites/default/files/public/dataresearch/pop/april1/ofm_april1_poptrends.pdf

Health Services for Housing Stability

Behavioral health disorders, including mental illness and the proliferation of opiate and methamphetamine abuse, are contributing factors that lead some to become homeless. Although mental illness and substance abuse rates have remained relatively steady and are not the leading causes of homelessness, a shortage of treatment options for those struggling with substance use disorder and/or poor mental health is an enormous challenge for people experiencing homelessness. The issue is further complicated by property damage (contamination) that occurs when methamphetamine is used within rental units. Both publically and privately owned rentals have been damaged in this way, and the result is often loss of housing for the tenant and the withdrawal of that housing unit (or units) from our housing system. The Bellingham Housing Authority reports that the average cost for an environmental clean-up following the identification of methamphetamine contamination is approximately \$15,000 in addition to the several months of forgone rent collections. They have decontaminated and rebuilt a total of 21 units in just the two years leading up to September 2019. This issue is not unique to Bellingham Housing Authority properties however, and a stakeholders' meeting will be convened in 2020 to address this issue in a way that addresses the individuals' needs, complies with fair housing laws, and supports landlords in their effort to preserve local housing opportunities.

A new coordinated care program in Whatcom County, *Ground-level Response And Coordinated Engagement (GRACE)*, has brought providers together to rally in support of those with the most complex situations. Strengthening partnerships between housing and behavioral health providers is contributing to a reduction in untreated behavioral health disorders, largely through improved accessibility. Expansion of permanent supportive housing programs, including a brand new facility purpose-built at the end of 2018 for those who have experienced chronic homelessness have also helped to house those with multiple barriers to housing. The permanent supportive housing model has shown that individuals afflicted with behavioral health disorders can be successful and retain housing when given the proper supports. Despite expansions of permanent supportive housing programs and behavioral health services in recent years, there is still a severe shortage of purpose-built housing and associated services for those with chronic behavioral health needs. Planning is currently underway by the Lighthouse Mission Ministries, the Whatcom Homeless Service Center, and PeaceHealth St. Joseph Medical Center, to increase capacity for medical respite care offered at the Mission, which currently offers two beds for medical respite care. This will address a critical need in the community to provide medical respite care for those experiencing homelessness with serious medical problems. There is also an identified need for an urban rest stop with health services for people who are homeless. This issue is in the planning stage, but has been approved in the 5-year strategic plan of Unity Care NW.

In 2013, the Affordable Care and Patient Protection Act's began reducing the number of uninsured Washingtonians. When the last update to this plan was released in 2012, the uninsured rate was at about 14% statewide. By 2017 the rate had decreased to just 5.5%. The decrease was seen across all age groups, all race/ethnic groups, and for both male and female sexes.¹¹ The persistent disparities seen along racial and ethnic lines closely resemble those seen in Whatcom County's homelessness, with people of Hispanic origin and American Indian/Alaska Native populations three to four times as likely to be uninsured.

Local Homelessness Data

Collecting complete data about people experiencing homelessness is challenging. Many individuals and families are difficult to locate because they have no predictable residence, while others actively avoid being located. Many are reluctant to share personal information with people who have not earned their trust, and some go to great lengths to blend in. For these reasons, quantitative data about homelessness should be used as general indicators of trends, not as definitive facts, and generally we should assume true numbers to be greater than reports can count.

¹¹ <https://www.ofm.wa.gov/sites/default/files/public/dataresearch/researchbriefs/brief089.pdf>

Point In Time Count

At the time of writing, the most recent Point In Time Count was conducted on January 24th, 2019. Volunteers surveyed 514 households who had spent the previous night either unsheltered or sheltered in interim housing. The number of individuals counted (700) represents a 14% decrease from the 2018 count, and the consistency in counting methodology adds validity to the suggestion that the number decreased. This reduction is attributed to moderating rent growth, wage increases, a new 40-bed permanent supportive housing facility, and increased services for people experiencing homelessness. The Point In Time report, although likely an undercount of the homeless population, provides important demographic and descriptive information about people experiencing homelessness locally.

Sheltered and Unsheltered Homelessness

Sheltered homelessness is used to describe the living conditions for individuals or households staying in emergency shelters or in transitional housing programs.

Unsheltered homelessness is used to describe the living conditions for individuals or households who sleep in places not meant for human habitation, such as tents, doorways, abandoned buildings, vehicles, or other places outside.

Number of Individuals Using Shelters

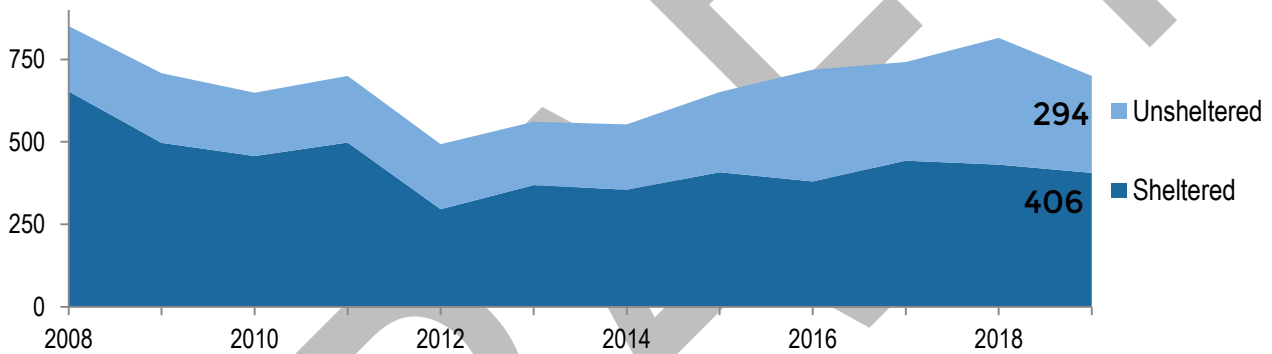


Figure 2: Whatcom County Point In Time Count of Sheltered and Unsheltered Individuals 2008-2019. There were 700 individuals counted in 2019.

Household Composition

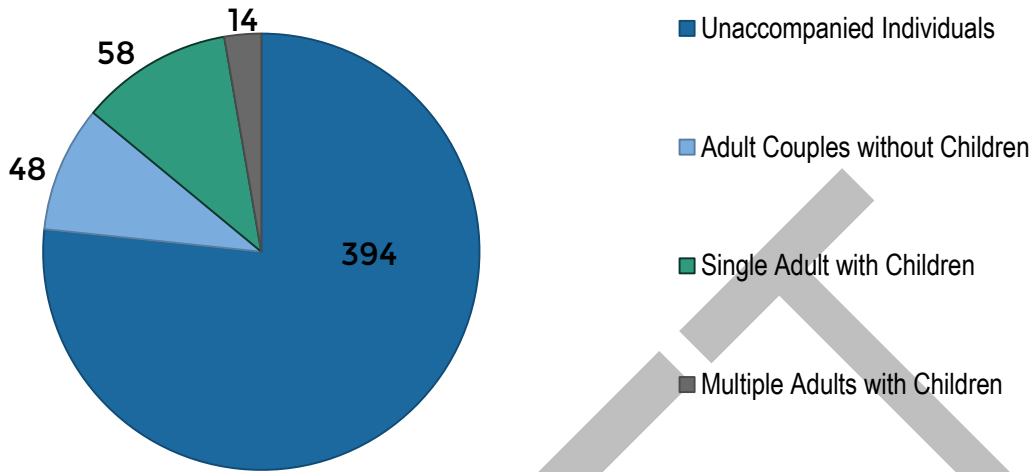


Figure 3: Whatcom County Point In Time Count household configurations 2019. There were 514 households counted.

Homeless Individuals by Age Group

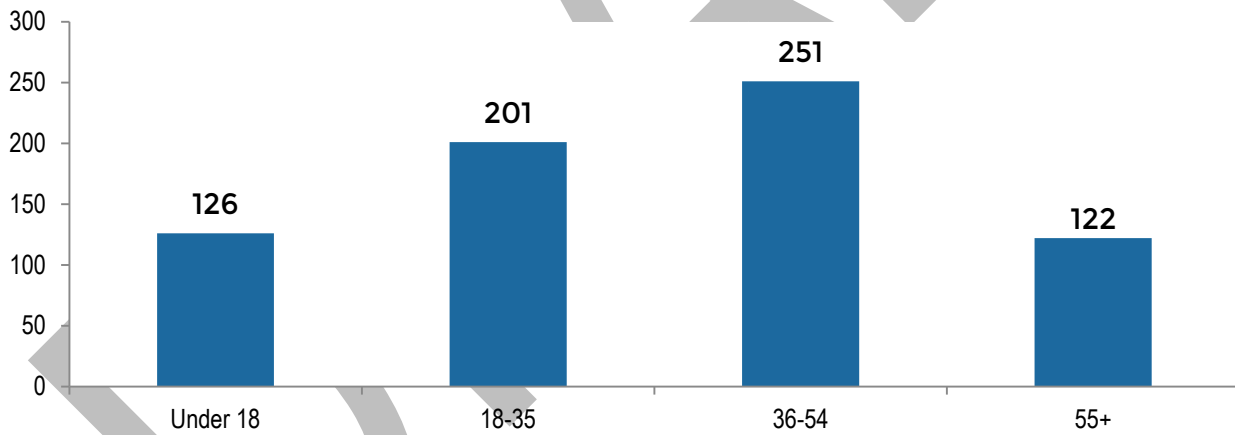


Figure 4: Whatcom County Point In Time Count ages of individuals experiencing homelessness 2019

Factors Leading to Homelessness (%)

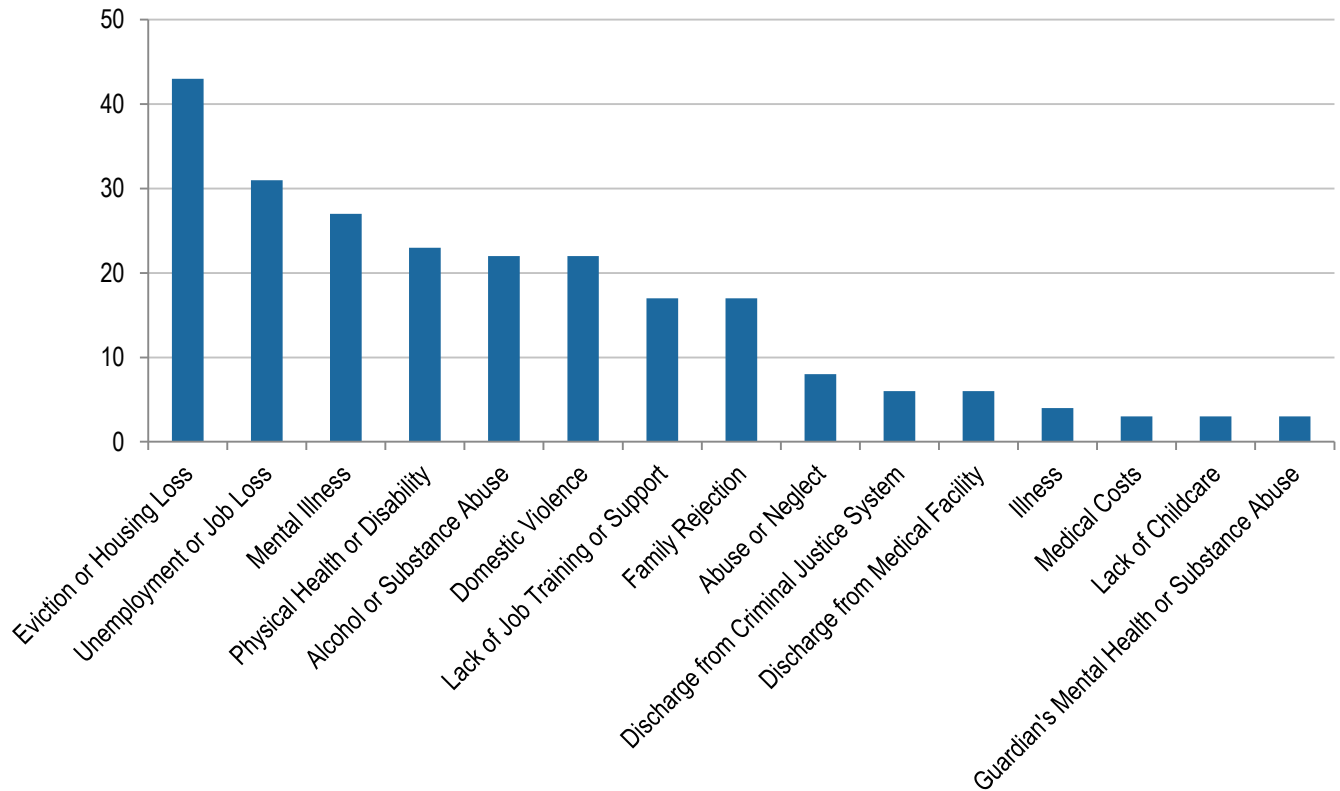


Figure 5: Whatcom County Point In Time Count self-identified factors that led to homelessness 2019 as reported by survey respondents.

The 2019 Whatcom County Point In Time Count identified 72 households that included children. The total number of individuals in these families was 207, and more than 80% of these families had only a single adult. The Count also revealed that 119 individuals experiencing homelessness were at least 55 years of age. The median age of all people was 37 years old, and 64% had their last stable housing within Whatcom County. In contrast to the common belief that people who experience homelessness are overwhelmingly men, almost half (47%) of individuals counted in the 2019 PIT identified themselves as female.

Local Housing Pool Data

The local *Housing Pool* is a database that holds household data, including housing history and eligibility considerations, and is used to determine which households will be selected to fill program openings when requested by participating housing partners. Households in the pool have been assessed to determine their level of need and their barriers to stable housing. The eligibility often hinges on a combination of income, household composition, duration of homelessness, veteran status, and/or the presence of a documented disability, in accordance with funding requirements. The level of need attempts to understand the consequences and likelihood of harm with continued homelessness for the individual. When partner agencies have openings in their programs they contact the Whatcom Homeless Service Center to request a referral. The Whatcom Homeless Service Center then uses data from the Housing Pool database to refer an eligible household for that program's opening. When more than one individual or family is eligible, they refer in order of greatest need. More details about the referral process are available in the Central Point of Entry strategy on page 28.

There are several ways that households are removed from the pool. The best outcome is when a household either self-resolves (finds housing on their own) or is matched to a program vacancy and moves directly into permanent housing or into a supportive transitional program that will likely lead to permanent stability. Another way removal from the pool occurs is through loss of contact. For a household to stay in the pool there must be ongoing verification that the household is still seeking services, remains income eligible, is still experiencing homelessness, and continues to reside in Whatcom County. Periodically, the households that have left the county, have found housing independently, have increased income and lost eligibility, technically stopped being considered homeless due to prolonged institutionalization, lost interest in services, or cannot otherwise be located are removed from the pool. Sudden drops in the number of households in the pool are usually explained either by this process, or when a new facility opens and many are housed in a short period of time.

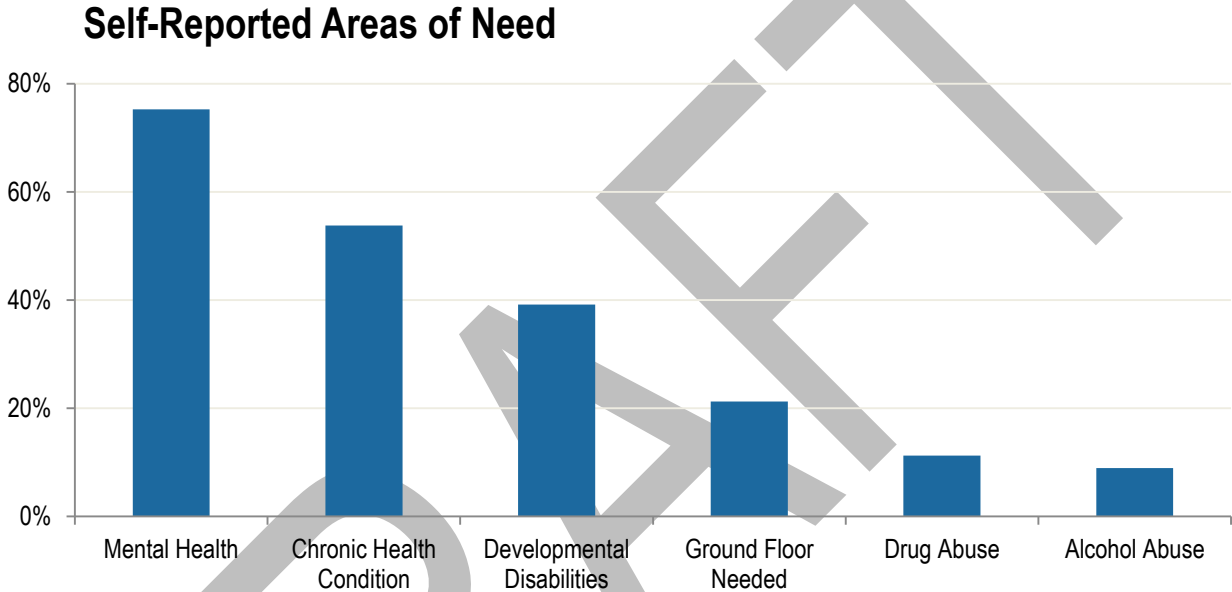


Figure 6: Prevalence of self-identified needs and barriers to stable housing for households in the housing pool at Intake (January – June 2019)

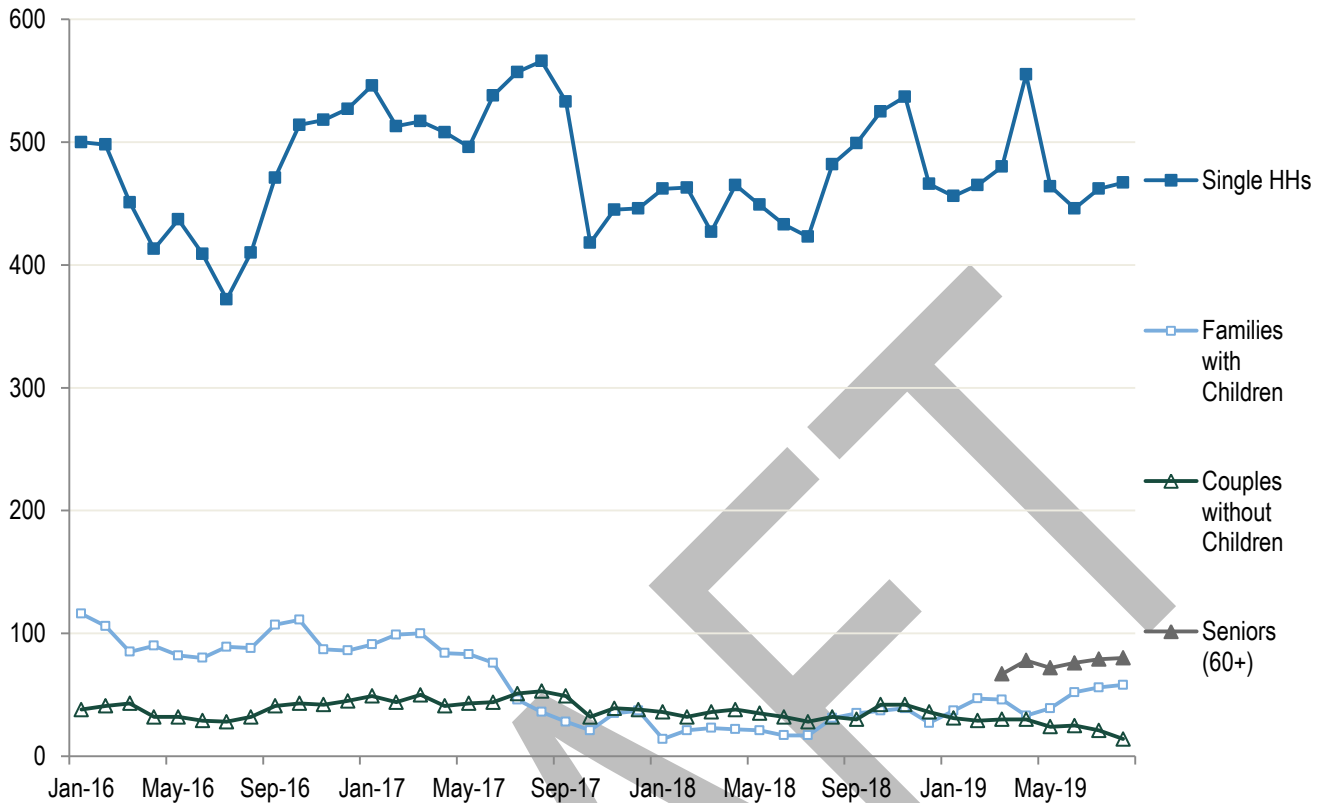


Figure 7: Number of households in the housing pool who are waiting for placement (Jan '16 - Aug '19). The number of families with children (and adult couples without children) almost reached functional zero in 2018, but rebounded slightly as vouchers from HUD were exhausted.

Households on the housing pool list are grouped into categories corresponding to the type of intervention most likely to fit their needs. At the time of writing, August 2019, there were 236 households waiting for placement in Rapid Re-Housing programs, 259 waiting for placement in Permanent Supportive Housing Programs, and another 42 households in need of move-in or deposit assistance. More information about these program types is available in this plan's section on local strategies.

Office of Superintendent of Public Instruction

Each year school districts in Washington State report information about homelessness among their students to the Office of the Superintendent of Public Instruction (OSPI). OSPI makes this data available for the public.^{12,13} Although OSPI's definition of homelessness differs from the federal definition used for the Point In Time Count (more than half of their reported students are "doubled up"), the information they provide adds depth to our understanding of homelessness in Whatcom County. Across the county's seven school districts, a total of 966 students (3.1%) were identified as having experienced a housing crisis during the 2017-2018 school year. This ratio is significantly higher than what is seen in the Point In Time Count, albeit with use of a different definition. The largest district in the county, Bellingham School District, accounts for about 42% of the county's students but has about 53% of the students experiencing housing instability. The Mount Baker School District, though much

¹² <http://www.k12.wa.us/HomelessEd/Data.aspx>

¹³ The sum of these numbers does not equal 100% because the sensitive nature of the topic requires that school districts not report numbers that could lead to personal identification of students. The numbers for groups that make up smaller, more identifiable populations are not reported when fewer than 10 students of a specific race within a school district are homeless. In effect, this leads to an undercounting of Asian, Black, Multiracial, and Native American students.

smaller, has a matching rate of instability among its students at 3.9%, which speaks to the presence of rural housing needs as well as the urban needs.

	Bellingham	Blaine	Ferndale	Lynden	Meridian	Mount Baker	Nooksack	Total
Total Enrollment 2017-18	12,923	2,514	5,287	4,081	1,970	2,066	2,001	30,842
Students that Experienced Housing Crisis	509	79	120	81	31	81	65	966
Percent of Students that Experienced Housing Crisis	3.9%	3.1%	2.3%	2.0%	1.6%	3.9%	3.2%	3.1%

The OSPI data also is broken out by other characteristics of the students, which allows us to see elevated rates of instability within certain groups. In particular, the data show non-white students and students with limited English proficiency experiencing particularly high rates of housing instability. Although Whatcom County’s Hispanic population accounts for only 9.1% of Whatcom County residents, Hispanic school children make up 31.2% of students who experienced a housing crisis during the school year.¹⁴ The table below shows these trends among other racial minority groups as well.

Race	Percent of Homeless Student Population (n=966)	Percent of Community Population (n=225,685)	Homelessness Probability Differences by Race
Native American	4.2%	3.1%	135%
Asian	Too few to report	4.1%	n/a
Black	1.9%	1.0%	190%
Hispanic	31.2%	9.1%	343%
Multiracial	7.0%	4.2%	166%
White (non-Hispanic)	50.5%	79.8%	63%

A Community Wide Response to Homelessness

This report is a product primarily of the Whatcom County Health Department, but the vision and strategies were created jointly with stakeholders and require the contributions of an organized coalition of partners to make them possible. The wide mix of housing programs and services in Whatcom County would not be possible without significant efforts, energy, and funding from a large number of like-minded agencies and individuals.

Funding

The Whatcom County Health Department funds affordable housing, interim housing, supportive services, and permanent supportive housing with funding collected from a variety of source. The bulk of this funding, as seen in Figure 7 below, comes in the form of document recording fees collected locally, and from state grants awarded by the Department of Commerce. The taxes and fees for these sources is collected specifically for housing programs and may not be used for any other purpose. Additional funding, which amounted to nearly \$1.2 million in 2019 was added to housing programs from sales and property taxes raised specifically to benefit local veterans and people with behavioral health disorders. With support of elected officials,

¹⁴ The OSPI definition of housing instability includes multiple families sharing a home. When comparing across cultural groups, it is important to consider that customs and traditions, especially as they pertain to shared housing, will impact these figures. At the same time, inequities and lack of opportunity are factors that decrease the access of disadvantaged populations to housing.

the health department was able to fund over \$5 million in services for people experiencing (or at risk of) homelessness in 2019.

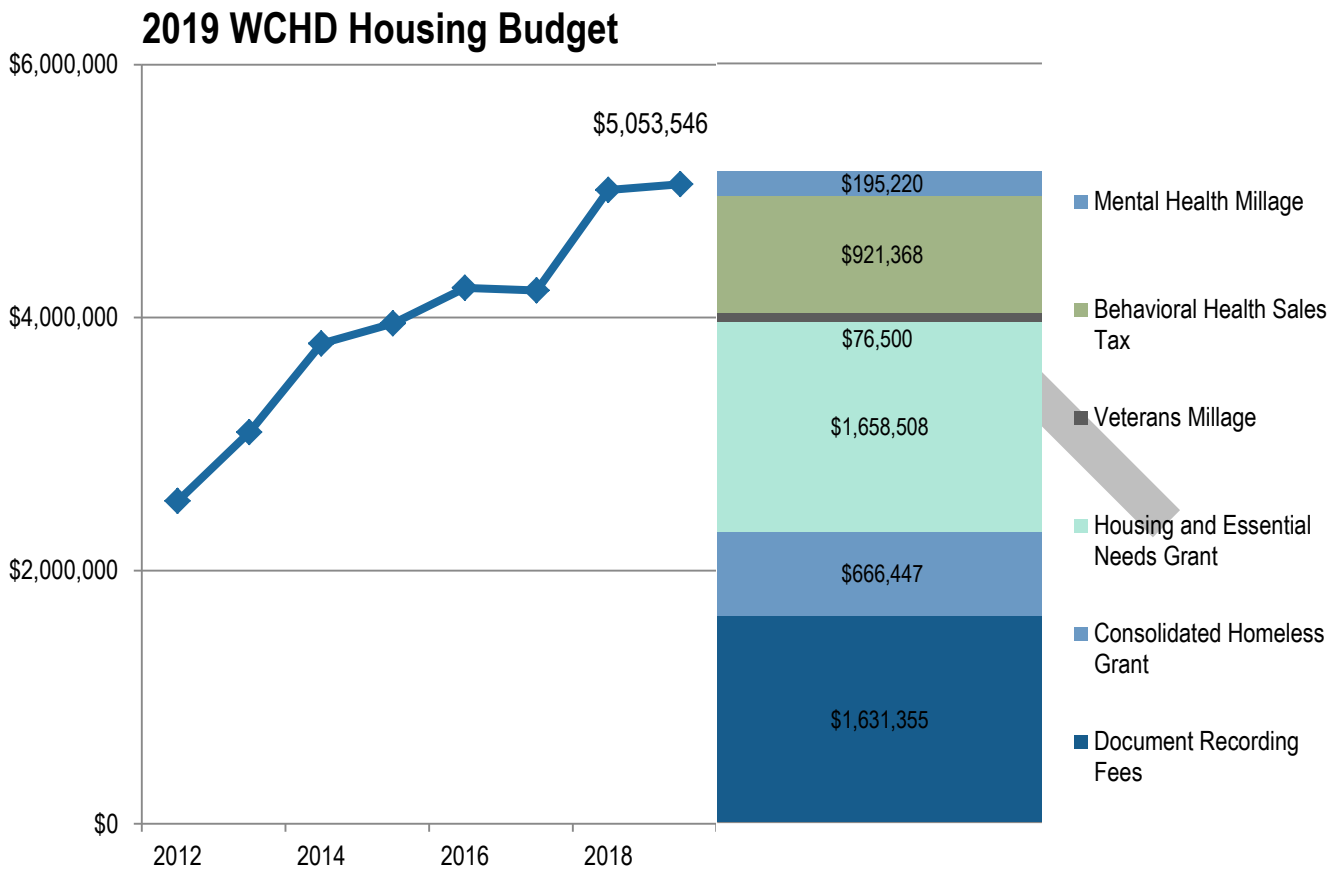


Figure 7: Expenditures of Housing Services Contracted by Whatcom County Health Department exceeded five million dollars in 2019 (left). The sources of revenues to pay 2019 contracts are shown at right.

Even with the addition of the veterans' and behavioral health dollars, the health department's funding accounts for less than 30% of spending on services for Whatcom County's homeless population. Non-profit agencies and other government agencies play a vital role in the sponsorship of homelessness and housing services. The City of Bellingham contributes generously in the affordable housing arena, and with services and resources for those experiencing homelessness within city limits. The 2018 renewal of the City of Bellingham's Housing Levy for an additional 10 years boosted the community by ensuring continuity of services and affordable housing projects that fill gaps in housing capacity. Through the Housing Levy, together with the City's entitlement funds from the federal Department of Housing and Urban Development, the City of Bellingham contributes over \$5 million annually to the county's housing programs. The City of Bellingham's Planning and Community Development Department and the Whatcom County Health Department work together closely and jointly fund many critical services.

In Washington State's Fiscal Year 2019, Whatcom County's non-profit and faith-based agencies reported that they had raised more than \$5 million in private contributions. These donations are raised largely through the hard work associated with creating and hosting fundraiser events, and with dedicated development specialists that help community members understand the importance and impact of giving to organizations that work on behalf our vulnerable neighbors.

Another key agency is the Whatcom County/Bellingham Housing Authority, which is responsible for the majority of federal funding distributed to Whatcom County's low-income rentals, and who also worked very hard to use a variety of resources to

construct new units that will be reserved for households with modest incomes and for formerly homeless households, too. Federal funding, in the form of vouchers issued by Whatcom County/Bellingham Housing Authority, and in grants issued directly to local non-profit organizations amounted to approximately \$4 million in the State Fiscal Year of 2019.

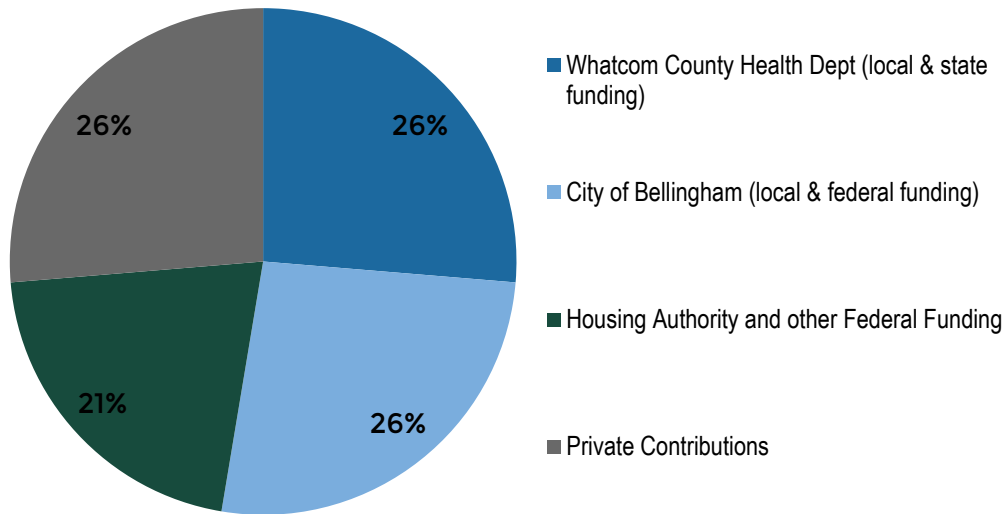


Figure 8: This graph shows the four leading categories of funding for housing programs in Whatcom County. It does not include in-kind or volunteer contributions.

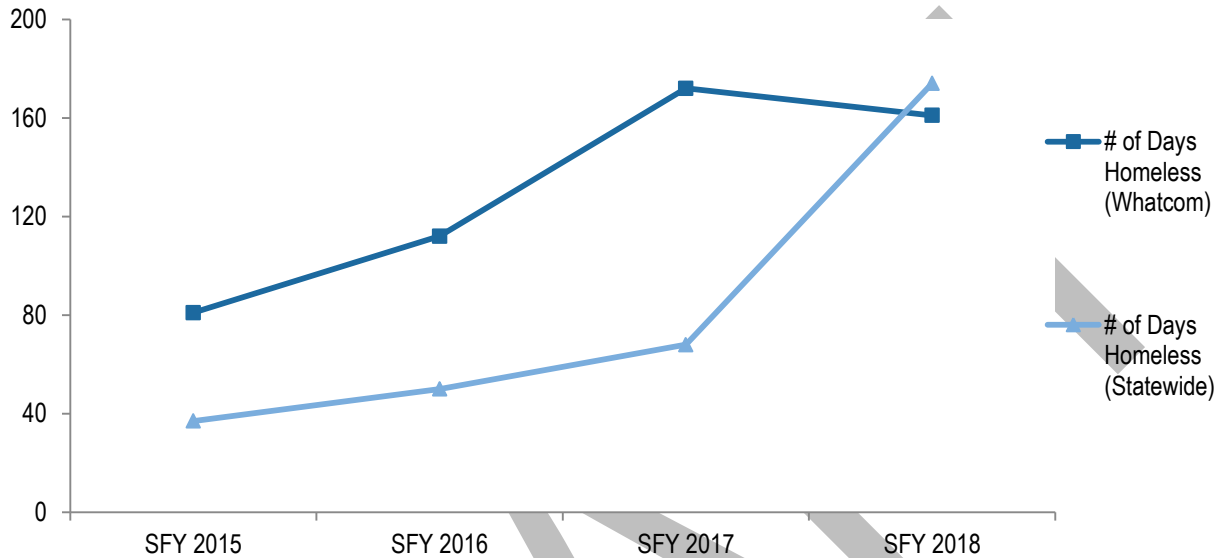
In addition to the main sources of state, local, and federal funding from the government and charitable donations from local residents, many foundations award grants to the county’s hardworking non-profit agencies for specific programs or projects that serve people experiencing homelessness. All of these resources add value to the county’s housing system.

Community Services Partners

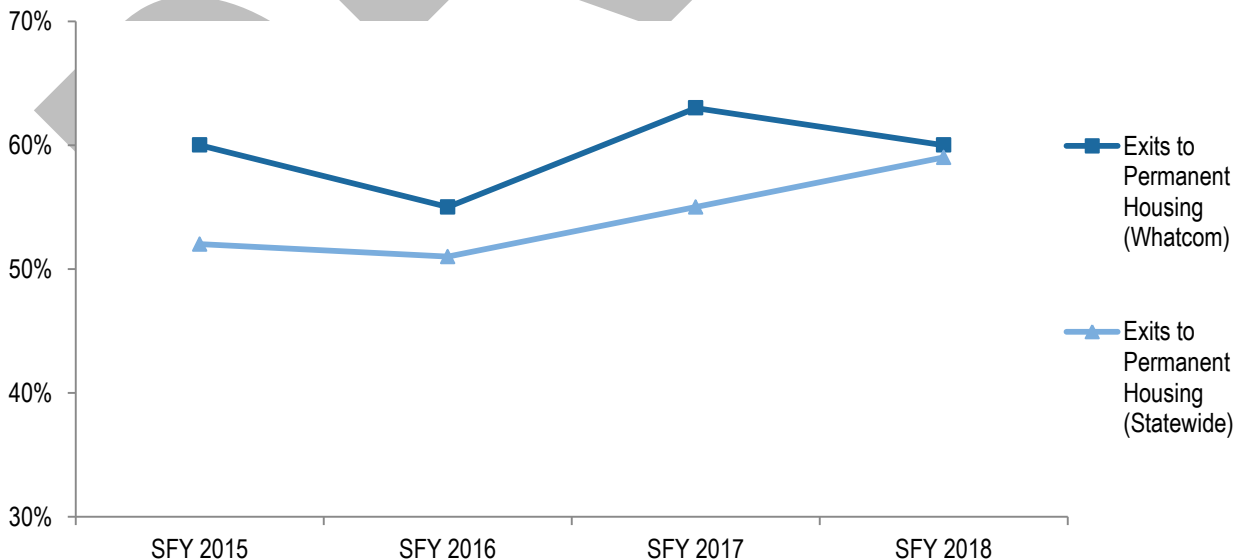
Whatcom County is fortunate to have many partner organizations that contribute towards ending homelessness. These agencies combine public funding with grants and/or private contributions to deliver a wide range of programs in response to our community’s needs. Anti-poverty, legal support and other social service agencies provide invaluable support for people experiencing or at-risk of homelessness, as do a number of medical and behavioral health providers. The community’s strong base of volunteers has given generously of time, money, material items, and compassion for the cause of homelessness. Our faith-based community has strengthened local efforts by filling gaps of public funding, some opening their doors to provide emergency and transitional housing for our residents. In early 2019 a local congregation completed extensive renovation of their basement to provide a comprehensive day center for youth. The Lighthouse Mission Ministries programs, funded solely by private donations, provides emergency shelter for an average of approximately 130 people per night, as well as a wide range of complementary services for their guests. There are two new grassroots efforts that were championed by local residents in the past year, some having a history of homelessness themselves. These projects include a safe camping site for those in recovery from alcohol and other drugs, and a safe storage program is being developed for those living unsheltered. Other contributing community members include the seven school districts of Whatcom County, as well as the local hospital and the Whatcom County Jail, which both connect homeless individuals with service providers prior to discharge. Partners provide essential housing support for homeless clients within the Mental Health Court and Drug Court programs, while others, such as Mercy Housing, have chosen to fill desirable senior housing units partially from the Whatcom Homeless Service Center’s housing pool candidates.

Changes in Whatcom County Homeless System Performance

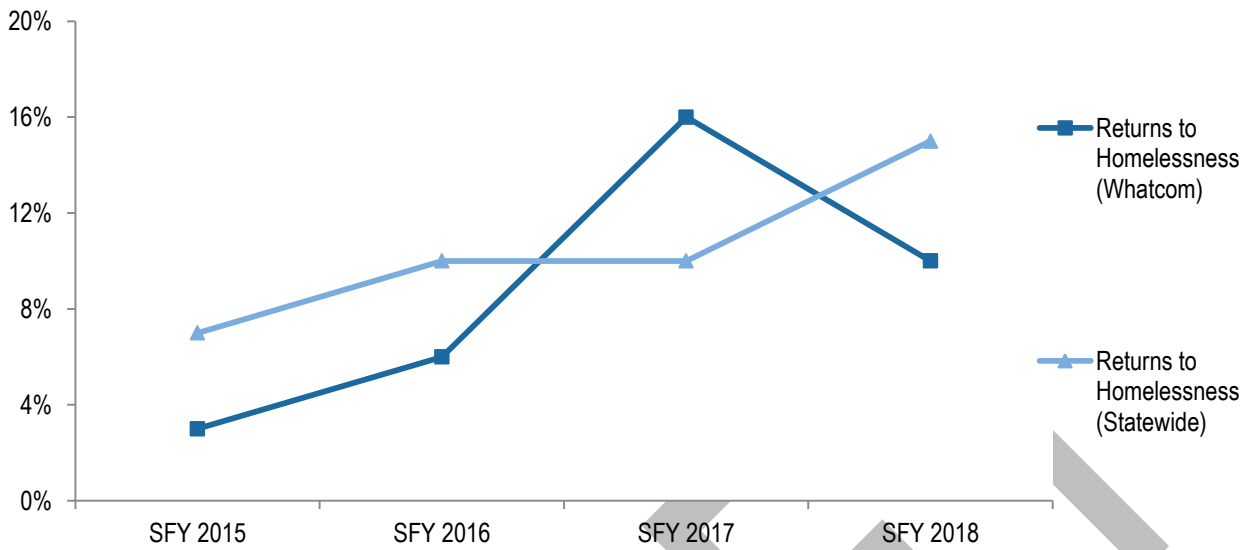
There are four system-wide measures that the Department of Commerce uses to track key indicators of each crisis response system. They include the length of time households spend homeless while working towards permanent housing, the percent of exits to permanent housing, the percent of households that return to homelessness within two years, and the percent of households that are entering into services who have recently spent times unsheltered.



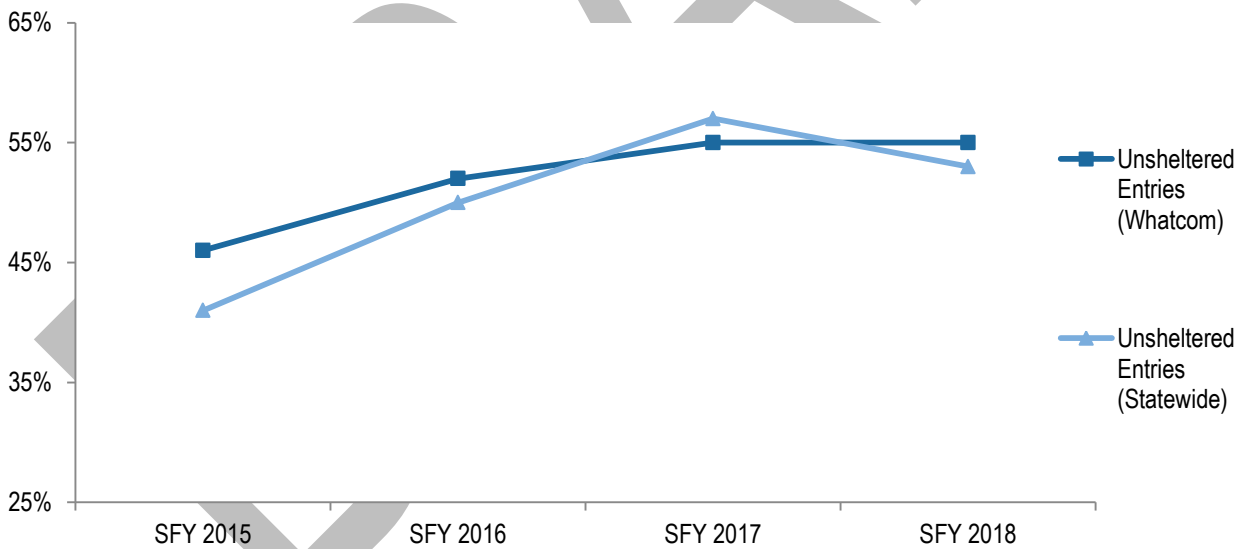
Length of Time Homeless: The median number of days people who are active in Emergency Shelter, Safe Haven, and Transitional Housing experience homelessness. This includes the length of time homeless in any Emergency Shelter, Safe Haven and Transitional Housing projects during the report period, and prior to the report period going back no further than October 1, 2012. If the person reports that homelessness started prior to project enrollment, the project date is essentially extended back in time to the date reported.



Exits to Permanent Housing: The percent of people who exited Emergency Shelter, Safe Haven, Transitional Housing, and Rapid Re-Housing projects to permanent housing destinations.



Returns to Homelessness: The percent of people in Street Outreach, Emergency Shelter, Safe Haven, Transitional Housing, and any permanent housing type projects who exited to permanent housing destinations two years prior to the reporting period.



Unsheltered Entries: The percent of people served who were unsheltered or had a recent history of unsheltered homelessness or were fleeing domestic violence.

The above data is reported in Washington State Department of Revenue County Report Cards and is derived from the statewide HMIS Database. To view updates or compare across counties, visit <https://public.tableau.com/profile/comhau#!/>.

Alignment of Local Context with Federal and State Plans

Homelessness is not unique to Whatcom County. Although there are a unique combination of advantages and disadvantages locally, the five leading causes of homelessness identified by the National Alliance to End Homelessness¹⁵ are all very important at the local level as well.

1. Lack of affordable housing
2. Insufficient income
3. Poor health
4. Domestic violence
5. Racism and discrimination

Alignment with other strategic plans (federal, state, and municipal) ensures that those working to end homelessness are striving to meet the same goals and objectives, and thus have an additive effect with this plan.

Federal and State Plans

The Washington State Department of Commerce guidelines require that Local Plans align with federal and state strategic plans to prevent and end homelessness. The current federal plan, *Home, Together*, was released by the United States Interagency Council on Homelessness (USICH) in July 2018, and covers fiscal years 2018-2022.¹⁶ The Washington State Department of Commerce's *State of Washington Homeless Housing Crisis Response System 2019-2024 Strategic Plan*¹⁷ was released Spring of 2019. Overlap between the goals, objectives and strategies of these two plans and our Local Strategic Plan for Whatcom County may be summarized by the following themes:

- The overarching goal is to end homelessness
- If homelessness occurs, it should be rare, brief, and a one-time experience
- A systemic response is needed by multiple partners from a wide range of sectors to end and reduce homelessness
- Equity must be addressed in strategic planning
- The voice of those with lived experience in homelessness is critical in seeking solutions for preventing and ending homelessness
- Affordable housing resources must be expanded to end homelessness
- Employment opportunities support housing stability and independence

Housing First

Housing First is an approach to connect households experiencing homelessness to permanent housing without preconditions to entry. Supportive services are offered to maximize housing stability and prevent returns to homelessness as opposed to mandating treatment prior to entry.

Housing First emerged as an alternative to the linear approach in which people experiencing homelessness were required to first participate in and graduate from short-term residential and treatment programs before obtaining permanent housing. In the linear approach, permanent housing was offered only after a person experiencing homelessness could demonstrate that they were "ready" for housing. By contrast, *Housing First* is premised on the following principles:

- Homelessness is a housing crisis and can be addressed through the provision of safe housing.
- All people experiencing homelessness, regardless of their housing history, can achieve stability in permanent housing. Some may need very little support while others may need more intensive and long-term supports. These supports must be available to all who wish to participate.
- Everyone is "housing ready;" sobriety, compliance in treatment, or expunged criminal histories are not necessary to succeed in housing.
- Many experience improvements in quality of life, in health, mental health, substance use, and employment, as a result of achieving housing.
- People experiencing homelessness have the right to self-determination and should be treated with dignity and respect.
- The exact configuration of housing and services depends upon the needs and preferences of the population.

¹⁵ <https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/>

¹⁶ https://www.usich.gov/resources/uploads/asset_library/Home-Together-Federal-Strategic-Plan-to-Prevent-and-End-Homelessness.pdf

¹⁷ <http://www.commerce.wa.gov/wp-content/uploads/2018/02/hau-strategic-plan-2018.pdf>

- Systems should be held accountable through performance standards
- Embrace a Housing First approach that offers behavioral health services but does not require preconditions to housing

Local Plans

Consistency between the Local Plan Update with other local strategic plans builds community momentum to identify and implement solutions for homelessness locally. The City of Bellingham’s Consolidated Plan¹⁸, the Whatcom County Comprehensive Plan¹⁹, and the Community Health Improvement Plan²⁰ of the Whatcom County Health Department all address local housing needs. These local planning efforts identify similar key challenges:

- Whatcom County has a need for additional affordable housing of a wide range from standard type units to innovative solutions for people with special needs
- Health and housing are inextricably related; substandard housing and homelessness leads to poor health outcomes and vice versa.
- We need to preserve our existing housing stock and address expiring tax credit project that risk becoming unaffordable
- All over Whatcom County, many people are paying more for housing than they can afford

While our Local Strategic Plan to End Homelessness focuses on the explicit goal of ending homelessness, each of the above strategic plans encompass the vision that Whatcom County is able to offer all residents safe, healthy, and affordable homes. It is essential that we share a common understanding of why homelessness exists in Whatcom County, and have a shared map to guide us in engaging in proven strategies and solutions to implement in our community.

Foundational Pillars and Locally-Identified Strategies

Four essential pillars of our homeless housing system that are woven into some or all of the seven strategies of this plan are described below.

Pillar 1: Collaboration

Collaboration is a crucial component of the strategies listed below. This plan cannot be successful without broad support across sectors. We need strong leadership and shared vision to break down silos and organize our resources. Homelessness is rarely caused by a single barrier to housing, and for most people and families, permanent housing will require a few types of support before becoming truly sustainable. The scale of our challenge demands that we approach our solutions with all hands on deck. We must develop public, private, and non-profit partnerships and investments with citizens, including people who have had firsthand experience with homelessness working alongside local public officials, businesses, nonprofits, faith-based organizations, charitable foundations, and volunteers. As we make progress toward our goal of ending homelessness, we should expect growing community interest in Plan efforts and the shared belief that it is unacceptable for anyone in our community to be without a home, and that we can truly end homelessness. Intentional communication about plans, progress, and opportunities will be important to foster alignment among the many actors involved in ending homelessness.

¹⁸ <https://www.cob.org/services/housing/Pages/consolidated-plan.aspx>

¹⁹ <http://whatcomcounty.us/1171/Current-Comprehensive-Plan>

²⁰ <https://wa-whatcomcounty.civicplus.com/2930/Community-Health-Improvement-Plan>

Highlight 1: DVSAS and Lydia Place

Since 2015, Domestic Violence and Sexual Assault Services (DVSAS) has partnered with Lydia Place, another local non-profit agency whose mission is to “disrupt the cycle of homelessness and promote sustained independence” for people living in Whatcom County. Through this partnership, Lydia Place Housing Case Managers visit the DVSAS Safe Housing Program shelters and meet with survivors one-on-one. They assist clients to better understand the local housing landscape and identify safe housing options that best fit the clients’ situations. Housing Case Managers work closely with DVSAS Safe Housing Advocates to help clients make and carry out plans that give them the best chance of achieving stability and independence upon leaving the Safe Housing Program. For some clients, this plan includes accessing supportive housing programs through the local Coordinated Entry System and the Bellingham Whatcom County Housing Authority. For others, it means increasing their income and finding an apartment to rent. For many, it means working to overcome debt, bad credit, poor or nonexistent rental history, or prior criminal convictions, all of which are barriers to becoming independent renters. Throughout this process, Lydia Place Housing Case Managers and DVSAS Safe Housing Advocates communicate frequently to make sure that updates are shared, paperwork is turned in, and mostly importantly, that clients are supported and empowered. In 2018, this partnership helped make it possible for 64% of clients to secure stable housing upon leaving the Safe Housing Program.

By DVSAS and Lydia Place forming this strategic partnership, both agencies have been able to provide expert services that align with their mission and strengths (survivor advocacy for DVSAS and housing case management for Lydia Place), ensuring that Safe Housing Program residents have access to the best level of care and support possible while on their journey to safety and permanent housing.

Highlight 2: Mental Health Court & Pioneer Human Service’s City Gate Apartments

Another successful cross-agency collaboration involving housing programs is the relationship between Pioneer Human Services, the agency that operates City Gate (a permanent supportive housing facility in Bellingham) and the two local Mental Health Court programs. Mental Health Court members have pending criminal charges and are diagnosed with a serious mental illness, usually schizophrenia or bipolar disorder. All are found to be “high risk and high need” as defined by the likelihood of committing further crimes and the relationship between their mental health symptoms and the criminal behavior. Most experience substance use issues either at the “severe” level or at a level that negatively impacts their mental health. Needless to say, access to stable housing is crucial for members’ recoveries and for their success in the Mental Health Court program. A history of homelessness is not uncommon among program participants.

Mental Health Court members are granted access for up to 6 of the 10 re-entry apartments set aside at City Gate for people involved in the criminal justice system. City Gate staff and the Mental Health Court program manager meet on a bi-weekly basis to consider referrals, review status and treatment plans of mutual clients, and explore long-term housing plans. Since Mental Health Court members usually have multiple service providers including mental health, substance use disorder treatment, housing case managers and others, the Mental Health Court program manager brings together all service providers in a coordinated plan. The entire treatment and on-site housing team provides weekly updates to the Mental Health Court program so the individual’s successes can be noted and celebrated at court.

Highlight 3: HSSP and Youths (OC, NWYS, Bellingham School District)

The Homeless Student Stability Program (HSSP) is a partnership between the Opportunity Council, Northwest Youth Services, and the Bellingham School District. This program is funded by grants from the Department of Commerce and Office of Superintendent of Public Instruction for the purpose of offering support for unaccompanied homeless students and homeless families. The objective is to improve educational outcomes for identified students by supporting housing stability. Case management and housing navigator services provide in-school support, connection to coordinated entry and housing services, and diversion.

Pillar 2: Quality Assurance

A benefit that we anticipate from growing public interest and cross-agency collaboration is collective accountability and responsibility. Given the broad array of strategies, it will be necessary to have a multi-tiered governance structure to oversee and guide Plan efforts, with managers, supervisors, and front-line staff engaged, coordinated, and working towards the same goals. An engaged public will ensure that this is done transparently and that it remains a top priority. To further guarantee that programs are implemented as intended and that the plan results in quality services, the Whatcom County Health Department will use the action plan detailed in the table below.

To assist organizations in coordinating service delivery, we need common standards and procedures while at the same time allowing for agencies to stay true to their missions. The common values and guiding vision needs to be shared and strategically communicated to the public as well as the participating partners that provide coordinated services. And it will be important that the work of this plan is reviewed by the very people it is intended to serve. Those who have been homeless in the past or continue to live without adequate housing need to have their voices heard as this plan and our programs change over time.

Pillar 3: Case Management

A third pillar that runs through the following strategies is high quality case management services for people experiencing homelessness, at risk of homelessness, or not yet stable in their new homes. Case management services may be needed infrequently or daily for households; briefly, for a month or two, or for a lifetime. Case managers throughout the housing system work diligently in increasingly complex systems to help individuals identify their strengths and overcome the barriers that led to homelessness. Clients are assisted with navigation of bureaucratic social services and medical systems, accessing legal counsel, managing difficult relationships, resolving landlord/tenant issues, and making ends meet in the face of economic disadvantages, among other roles case managers fulfill. Their more pragmatic support might involve taking clients to appointments or helping them to fill out paperwork, but they also must deal with behavioral health complications and cultural stigma that negatively impacts their clients. Case managers are most successful when they benefit from the support of system administrators, receive high quality training, have reasonably sized and appropriate caseloads, work in positive team-focused environments, and are recognized in a way that encourages them to stay in their jobs, build experience, increase skills over time.

The need for additional case management positions in our homeless housing system has long been recognized by funders and nonprofit housing providers. However, funding levels have been insufficient to fill this gap. Increased capacity of case management is critical to ensuring an adequate level of support for responding quickly to crisis situations, to providing ongoing support to help build trust and avoid crises, and relieving strain on current case managers with unreasonable caseloads. More case management resources would also allow case managers to spend more time with colleagues and make important connections across the network of social support service providers. Smaller caseloads and more experienced staff are expected to lead to a decrease in the time it takes households to establish permanent housing, and access essential resources and supportive services.

One area related to case management in which significant progress has been made is the increasingly intentional manner in which training has been provided locally and by state partners. A Community Training Committee comprised of Human Services and nonprofit staff came together in 2016 and began identifying the most critical training needs for direct service staff in homeless housing programs. In 2017, Whatcom County began assisting with the coordination of and funding for several key trainings. Maintaining this committee is a challenge due to limited staff capacity, yet efforts made to find quality trainers, who are vetted by Community Training Committee members and Human Services staff, have paid off as indicated by feedback forms collected at the events.

Quality Assurance Action Plan for Case Management				
Actions	Who	Frequency	Milestones	How to measure success?
Contract Monitoring	WCHD Housing and Fiscal Staff; City of Bellingham; partner agencies	Annually or biennially	Monitoring is conducted as per funder requirements	No findings issued to partner agencies
Robust training provided for housing partners	WCHD; Community Training Committee; partner agencies	Quarterly	Trainings offered for <ul style="list-style-type: none"> • Trauma-Informed Care • Harm Reduction • Motivational interviewing 	Zero grievances filed against service providers; housing staff reports that they consider themselves supported and prepared through available training
Survey WHSC partner agencies	WCHD	Annually	Partner agencies complete surveys and share needs and ideas about their work	Surveys completed by a majority of case managers within the coordinated entry system
Survey a random sampling of partner agency clients	WCHD	Annually	Clients complete surveys to share about their experience with case management	Surveys call attention to system-wide issues that highlight training or supportive needs

Pillar 4: Whatcom Homeless Service Center

The fourth pillar of support for the following strategies is the Whatcom Homeless Service Center (WHSC), based in the Opportunity Council, which fulfills a unique role in our local homeless housing system. The primary functions of the WHSC, in addition to operating the county's Coordinated Entry system (see Strategy 1), are explained below.

Leadership and expertise related to homelessness is provided by the WHSC county-wide. The WHSC Director serves in leadership roles as Chair for the Whatcom County Coalition to End Homelessness and the Steering Committee for the Coalition. The WHSC also has a responsibility for ensuring effective functioning of the homeless housing system in Whatcom County, working with government agencies at the local, state, and federal levels, to maintain a high-functioning system to the extent possible with available funding. The WHSC serves as a resource for the entire community on homelessness-related issues.

Data Management is provided by the WHSC, the center for our Homeless Management Information System (HMIS).. Our local Systems Administrator for HMIS has three primary roles: 1) providing ongoing support and consultation for all local users of HMIS; 2) offering assistance accessing data reports by partner agencies of HMIS; and 3) monitoring data quality. The WHSC also assists with coordination of the annual Point in Time Count (PIT) for Whatcom County, which culminates in a report prepared by the WHSC, providing an analysis of data from the most recent and previous PIT Counts.

Outreach provided by the WHSC Homeless Outreach Team (HOT) connects people experiencing homelessness with services. The HOT operates primarily in the City of Bellingham, which is the largest city in Whatcom County and the primary funder for the team. HOT's additional funding from the US Department of Veterans Affairs' SSVF (Supportive Service for Veteran Families) grant and the Substance Abuse Block Grant's Opioid Substance Use Disorder Program provide for modest outreach into the county and bring expertise and resources specifically to people with opiate use disorders. Outreach staff is available five days weekly and engages those new to homelessness, as well as those with a history of homelessness in the

community. Assistance is offered to connect people to community resources, such as the WHSC, shower facilities, medical care, employment, and income supports. HOT focuses mostly on unsheltered households and encampments, but also does weekly on-site outreach at the Lighthouse Mission to facilitate check-ins for Coordinated Entry, perform intakes, and to provide additional resources and referrals. The HOT also provides support for businesses and community members in working through issues related to homelessness.

Landlord liaison services were implemented in the WHSC in 2017 with funding from the City of Bellingham and the VA's SSVF grant. The landlord liaison's services are available to anyone, regardless of vulnerability or income, and include:

1. Recruit new landlords to participate in the homeless housing system by choosing to rent to households exiting homelessness. This helps to increase the number of units available to people seeking re-housing opportunities.
2. Maintain existing relationships through support, education, and mediation for tenant disputes. Communication and mediation from a third party is a positive influence on housing retention.
3. Assist households experiencing homelessness with housing search and application support through the Housing Lab program, a weekly drop-in client-driven service that utilizes advocates who help create custom plans to help attain housing. This service reduces the time it takes for people to find new housing options and can also reduce reliance on vouchers or rental assistance.

In addition to these three central services, the landlord liaison hosts a weekly Roommate Café for adults who are unable to afford living alone but need help finding good matches for roommates who are in similar positions. This assistance, in effect, creates arrangements that make housing affordable to people who would otherwise be unable to pay rent for a place of their own. The low-barrier, cost effective program is open to anyone experiencing homeless or housing instability and does not require participation in the Coordinated Entry system. A similar program, focused on the growing number of at-risk or homeless seniors, is the Generations Housing Program that helps seniors find roommates or host homes.

Distribution of rental assistance for some eligible households is available through the WHSC. A wide range of rental assistance resources are provided to the WHSC through the County and City of Bellingham, along with federal and state grants. The WHSC works with partner agencies including Catholic Community Services, Lake Whatcom Treatment and Residential Center, Lydia Place, Northwest Youth Services, Opportunity Council, and Pioneer Human Services to distribute rental assistance. Unfortunately, the need for these resources exceeds the amount of financial support available. Prioritization for households most in need of rental assistance is determined through the policies and procedures of our Coordinated Entry system. Use of a coordinated entry system is the first of seven strategies, which include or are best practices in resolving homelessness.

Evidence-Based Strategies

The strategies below reflect a plan of action focused on meeting our goal and objectives. Strategies are evidence-based practices: tried and true methods that have been proven to affect and sustain changes when implemented correctly. The seven strategies below were components of the last local plan in 2012, and they will continue to be refined in the future to include new approaches to homelessness and to meet evolving local needs.

Strategy 1: A Centralized Point of Entry

Whatcom County works closely with the Whatcom Homeless Services Center (WHSC) to operate a coordinated services approach for those seeking housing. The coordinated service protocol follows the Housing First approach, which has been

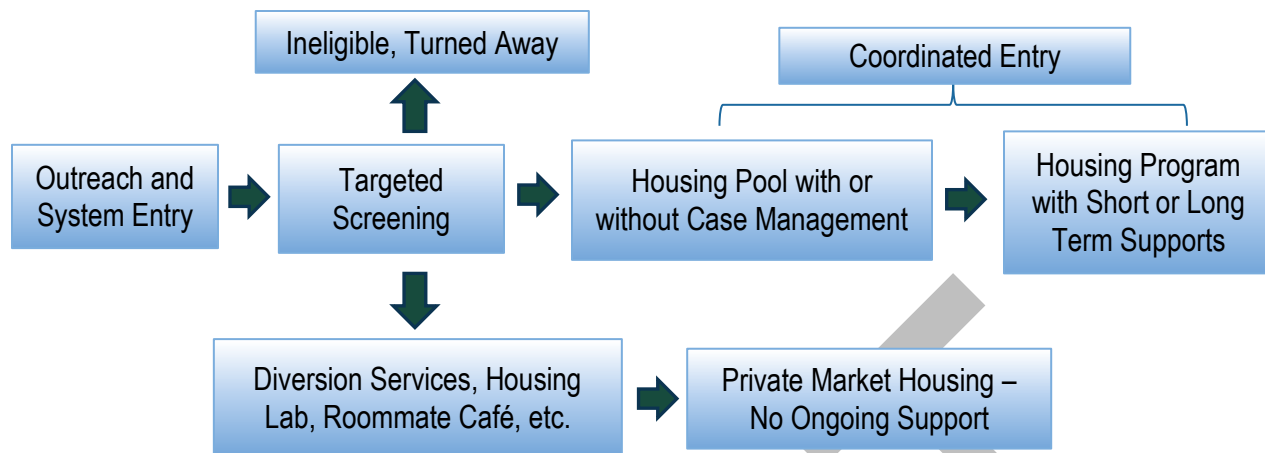
shown to improve mental health and quality of life while decreasing health services use and improving housing stability.²¹ In an effective and efficient crisis response system, people are quickly identified, assessed, and connected to housing and homeless assistance based on their needs and strengths. Standardized tools are used and consistent practices are utilized to maximize transparency and fair distribution of scarce resources. Participant choice is provided to the greatest extent possible. Within the array of coordinated services provided by the WHSC, the federal, state, and locally supported Coordinated Entry (CE) system is a process that aspires to help all people experiencing a housing crisis in a defined geographic area. CE also makes strong efforts to ensure that all have a fair and equal access to assistance, with that assistance prioritized for those with the greatest needs. WHSC is the CE lead agency, and provides referrals to partner agencies for individuals or households that best match the type of housing and supportive services they provide.

Prior to the introduction of the coordinated services approach, households seeking services needed to contact each agency independently and respond to information requests from each agency. This was a burdensome task, and often required people to relive trauma repeatedly as they spoke with the many intake professionals around the county. Now, a household can connect at the community resource center at the WHSC office and in effect, be connected with all of the housing services available from the entire network of Coordinated Entry agencies. Coordinated Entry evolves based on changing requirements from funders, community needs, resource availability, partner capacity, and emerging best practices. The Coordinated Entry lead for Whatcom County is the Whatcom Homeless Service Center (WHSC), a department of the Opportunity Council, which is a local not-for-profit organization based in Bellingham. A secondary entry point managed by Northwest Youth Services provides access for youth at a youth-specific provider location, and intakes are also completed by the Homeless Outreach Team specialists, at the DVSAS safe shelters with Lydia Place staff, at Opportunity Council's East Whatcom Regional Resource Center, and the Lake Whatcom Residential and Treatment Center. Partner agencies participating in our CE System in 2019 are listed on a chart found in the Appendix, along with the type of interventions offered and population(s) served. Partner agencies are nonprofits that specialize in serving Whatcom County residents with a history of homelessness.

One achievement of this strategy since 2012 includes local implementation of the statewide homeless services database, the Homelessness Management Information System (HMIS), with the majority of CE housing partners. Additionally, an updated and more thorough risk assessment tool, the Service Prioritization Decision Assistance Tool (SPDAT) was adopted in 2019.

The SPDAT scores those with highest level of vulnerability to be prioritized for housing and services. Community values also guide CE; families with children, veterans, seniors, and people experiencing chronic homelessness have been prioritized. Partner agencies providing case management and housing support receive referrals for the population they serve as program openings occur. There are hundreds of people awaiting housing on the Housing Pool (HP), and case management to assist those on the HP is limited to those who are most vulnerable.

²¹ Baxter AJ, Tweed EJ, Katikireddi SV, et al. J Epidemiology and Community Health 2019;73:379–387., <https://jech.bmj.com/content/jech/73/5/379.full.pdf>



This diagram shows the pathways for housing services through the Whatcom Homeless Service Center

In 2018, the most recent year for which we have complete data, there were 1,304 households that received some level of support at the Whatcom Homeless Service Center. These households included 2,281 individual people.

In the state fiscal year (SFY) of 2018 (July 2017-June 2018), there were 1,698 project entries logged in Whatcom County's HMIS database. This includes services that range from one-time homelessness prevention funding to medium term Rapid Re-Housing (RRH) or long-term Permanent Supportive Housing (PSH) programs. The average length of time homeless while enrolled in programs, but before receiving permanent housing, was 161 days, and 60% of program exits were to permanent housing situations. Of all the people served, 55% were unsheltered at their time of entry. Of the people who exited to permanent housing over the last two years, only 10% returned to homelessness.²²

Recently, new Coordinated Entry Guidelines have been released by the State Department of Commerce. CE systems statewide are also being evaluated by the Department of Commerce, and Whatcom County is awaiting a final evaluation report in response to the evaluation that took place in the summer of 2019.

Coordinated Entry Action Plan				
Actions	Who	Timeline	Milestones Prior to 2022	How to measure success?
Implementation of revised 2019 CE policies	WHSC Director and Manager; CE Partners	By end of 2019	n/a	Results of monitoring by Commerce; annual evaluations by WCHD
Establishment of CE Governance Committee	WHSC Director and Manager; WCHD Housing Program; Committee members	CE Governance Committee membership established by WHSC and approved by WCHD by September 30, 2019	CE Governance Committee will be formed and active with scheduled meeting	Records of meetings will be kept by WHSC

²² This data is updated annually by the Department of Commerce. Both current and historical data can be found here: <https://public.tableau.com/profile/comhau#!/vizhome/WashingtonStateHomelessSystemPerformanceCountyReportCardsSFY2018/ReportCard>

		2. WHSC will ensure Committee meets twice annually.	Committee will provide suggestions to improve coordinated entry	Changes incorporated into CE policies and procedures
Quarterly WHSC Partner Coordination Meetings	Coordinated by WCHD and WHSC Director and Manager; CE Partners	Beginning May, 2019	Improved system measures for partner agencies	County report cards

Strategy 2: Rapid Re-Housing

Rapid Re-Housing (RRH) helps families and individuals living outdoors, in emergency shelters, or in transitional housing to obtain permanent housing through a custom package of supportive services and time-limited financial assistance. Households will typically pay 30% of their income towards rent, and the sponsoring agency will cover the rest of the rent. The model has shown positive results by helping households exit homelessness permanently. A fundamental goal of RRH is to reduce the length of time households are homeless.

According to the United States Interagency Council on Homelessness, RRH moves people into permanent housing with costs that are significantly less than emergency shelter or transitional housing. The high rate of successful transitions that RRH provides and the absence of permanent subsidies are the key factors that make this such an economical approach. Because households enter leases directly with landlords, there is no obligation to relocate when rental assistance tapers off. This makes the transition to independence much easier for the household. The biggest challenge for RRH in Whatcom County is the lack of suitable units that are affordable to the households after the subsidies are discontinued. For households unable to acquire full time employment with adequate pay, or struggle to pay prior debts, keeping up on rent remains a challenge.

Core components of RRH include finding available units, financial assistance for rent and move-in costs, and case management and other supportive services that promote housing stability. This is colloquially referred to as a “find, pay, and stay” model. Services are always voluntary and respectful of people’s right to self-determination.

Who is served? RRH serves more people than any other intervention type. Eligible families and individuals can receive RRH if they can live independently and maintain a lease.

Partner agencies providing RRH in Whatcom County include Catholic Community Services, Lydia Place, Northwest Youth Services, and the Opportunity Council.

Number served, cost, and length of time served: The table below provides information on these measures from the last two State Fiscal Years.

Whatcom County Rapid Re-Housing Data for State Fiscal Years 2018 and 2019	SFY 2018	SFY 2019
Total Households served in RRH (service began or continued from previous year)	492	539
Total Households Entries in RRH (service began)	389	344

Households Entering from Unsheltered Homelessness	300 (77%)	235 (68%)
Households Entering from Sheltered Homelessness	71 (18%)	83 (24%)
Households Entering from Institutions	17 (4%)	22 (6%)
Total Exits from RRH	347	397
Exits to Permanent Housing	255 (73%)	261 (66%)
Exits to Sheltered Homelessness	12 (3%)	15 (4%)
Exits to Unsheltered Homelessness	11 (3%)	46 (12%)
Exits to Institutions	2 (1%)	2 (1%)
Exits to Unknown Destinations	48 (14%)	56 (14%)
<p>This information is derived from data entered into the Homeless Management Information System by partners participating in Coordinated Entry in Whatcom County. Updates can be found online by accessing the Washington State Department of Commerce's Housing Assistance Unit dashboard: https://public.tableau.com/profile/comhau#!/.</p>		

Strategy 3: Permanent Supportive Housing

Permanent Supportive Housing (PSH) is a housing intervention based on the Housing First Model in which homes are provided for people who would otherwise be unlikely to maintain stable housing. PSH offers housing combined with supportive services for people with a history of chronic homelessness. In order to be considered as CH two requirements must be documented: First, that the individual has a disability. Secondly, the individual must have a documented history of homelessness for at least one year or on at least four occasions (which totaled at least 12 months) in the last three years. Deep subsidies may be provided for rental assistance. Although the experience of homelessness can lead to health problems or make existing physical and mental illnesses worse, PSH has been shown to improve physical and mental health and reduce the need for expensive treatment services. People's lives improve dramatically with PSH and the community benefits too. PSH is designed to meet the long term needs of homeless individuals and families who have been chronically homeless using the Housing First model, which does not require any preconditions to housing or participation in supportive services. PSH interventions in Whatcom County may be provided in a staffed "single-site" facility or in unstaffed "scattered site" units. The increase of PSH units in Whatcom County has been among our greatest assets developed since our last Local Plan Update in 2012.

Chronic Homelessness
 Often the public face of homelessness, chronic homelessness involves either long-term (12+ months) or repeated periods of homelessness (totaling 12+ months over three years) as well as a disability. People experiencing chronic homelessness may be sheltered or unsheltered, and they are considered the least likely to self-resolve their experience of homelessness.

Chronic Homelessness was identified as a likely (though unverified) characteristic of 165 unaccompanied households during the January 2019 Point In Time Count. This represents more than a 50% increase in the three preceding years and highlights a need that is growing faster than resources. An exciting opportunity to use federal funds (Foundational Community Supports) to sponsor care for these households may play a critical role in reversing the trend of a growing population of chronically homeless individuals.

In January of 2019, the Whatcom County Point In Time Count identified 514 households experiencing homelessness. At the same time, an additional 350 formerly homeless households were enrolled in Whatcom County's permanent supportive housing programs, according to our Homeless Management Information System data. These 350 households included 530 household members who would likely have remained homeless were it not for the permanent supportive housing programs.

In the spring of 2019, when the most recent county-wide survey of housing resources was conducted, there were 365 project beds in permanent supportive housing projects for people with disabilities and another 213 beds for people without diagnosed disabilities. The total cost of administering these programs, including both the facilities and services, was approximately \$4,012,160. Looking at just the units dedicated for people with disabilities, and the fact that the more robust service need necessitates higher spending levels, it's not surprising that the price per unit is significantly higher. The total operating and service expenditures to house this population totaled \$3,661,247 in State Fiscal Year 2019, which amounts to just over \$10,000 per bed year.

A 2017 study conducted by RAND Corporation found that similar interventions (high intensive permanent supportive housing) in Los Angeles County provided net savings to their communities of approximately 20% while improving the lives of the individuals they housed. Cost savings were primarily attributed to fewer ER visits, fewer inpatient hospital stays, and reduced outpatient visits as well as decreased use of financial assistance for indigent adults.²³ If comparable savings are found in Whatcom County, the 365 beds dedicated to PSH would have generated positive economic externalities (social, legal, and medical) of approximately \$732,250 (\$2,000 per person) above the cost of providing the services. In other words, for every \$100 spent serving this population, \$120 of benefit is returned to the community.

The state and locally-funded Consolidated Homeless Grant's primary performance measure for PSH is the exits to or retention of permanent housing. The 2018 State Fiscal Year baseline for Whatcom County was a 93% retention rate, which is a remarkable percentage for those members of our community with lengthy histories of homelessness *and* a disability. The more intensive support provided for people in PSH may be a significant reason for the high percentage of retention of and exits to permanent housing for this subpopulation. In the 2019 State Fiscal Year, this retention rate increased to 97%, a reduction of more than 50% in the negative discharges and putting Whatcom County's rate above the state average of 95%. PSH has clearly seen success for some of our most vulnerable people in the community.

Strategy 4: Increase the Supply of Affordable Housing

Housing is considered affordable when rent or mortgage expenses account for no more than 30% of gross household income. People are considered *severely* cost burdened when they pay 50% or more of their gross income for housing. Transportation needs must be considered when providing affordable housing because it is critical for connecting people to jobs, schools, health care, and child care. Many of the more affordable places to live in Whatcom County require households to incur greater expenses associated with commuting, both financially and in terms of their time. One measure, the Housing and

²³ https://www.rand.org/content/dam/rand/pubs/research_reports/RR1600/RR1694/RAND_RR1694.pdf

Transportation Affordability Index, considers housing as affordable if the combined housing and transportation costs are less than 45% of household income.

Although eviction and housing loss are cited by a large number of Point In Time respondents as factors leading to homelessness, the rate is particularly high for single parent households with children. This group in particular appears to be strongly impacted by financial constraints exacerbated by high housing costs. When surveyed for the Point In Time count, single parent households reported below average rates of mental illness, substance abuse, and other disabilities compared to the general homeless population, but struggle to maintain housing nonetheless. One contributing factor is likely the high cost of childcare in Whatcom County, which was found to have among the least affordable childcare in Washington State.²⁴

Housing affordability is the product of two distinct factors: the price of rent, and the tenant's income and ability to pay. One way to shrink the gap between ability to pay and price of rent for many households is through rental assistance programs that subsidize some or all of the household's rental payments. The Bellingham Housing Authority uses funding from HUD to issue rental vouchers to eligible households to the greatest extent possible. Another source of federally funded rental assistance is to the HOME Consortium of Skagit, Whatcom, and Island Counties. This consortium allocates federal funds to the Opportunity Council for use outside of the City of Bellingham in Whatcom County, as well as locations in most of Skagit and Island Counties. The City of Bellingham also provides HOME-funded and local Housing Levy-funded rental assistance to the Opportunity Council, Lydia Place, and NWYS as part of or in addition to services contracts that support clients with case management.

The need for affordable housing is acknowledged by local officials in Whatcom County. In the first half of 2019, the permitting office at the City of Bellingham issued permits for 450 new units, which is on track to surpass the 785 permits issued in all of 2018 and 578 in 2017.²⁵ At the same time, the Small Cities Caucus of Whatcom County has formally expressed interest in using local Economic Development Investment funds to renew (and increase) funding for the *Homes Affordable For The Workforce* program. In 2018, City of Bellingham residents approved an initiative to renew and strengthen a tax levy that will provide a variety of housing-related supports for at least ten more years. The smaller cities of Whatcom County however have not found support for these types of programs and may need more support from county government to address the needs that exist in their communities too, albeit at a smaller scale. This need for affordable housing in rural areas of Whatcom County persists, and is addressed in the action plan that follows.

A number of local groups and agencies have organized to address the challenge of our affordability crisis. Not-for-profits, such as Whatcom Skagit Housing, Habitat for Humanity, and Kulshan Community Land Trust have contributed greatly to the construction and retention of housing affordability for aspiring homeowners. The Whatcom Housing Alliance, a broad alliance of public health, economic development, housing development, and private business owners is working to advance diversity and affordability throughout Whatcom County.

The City of Bellingham sponsors a down-payment assistance program for first time homebuyers with modest incomes and makes use of both federal HOME funding and local funding derived from their housing levy to support low-income renters. The City of Bellingham also funds a grant program through the Opportunity Council that offers health and safety repairs for residents of mobile home parks. This grant allows residents to retain their existing affordable housing, and the city is currently assessing potential planning, zoning, and funding strategies to further support mobile home parks over time.

²⁴ <https://childcareawarewa.org/wp-content/uploads/2019/05/2018-Affordability-Analysis-by-County-2019-04-08-FINAL.pdf>

²⁵ <https://www.cob.org/services/permits/Pages/activity.aspx>

Affordable Housing Action Plan				
Actions	Who	Timeline	Milestones Prior to 2022	How to measure success?
Prepare for expiration of federal affordable housing requirements at risk of losing affordability requirements	WCHD and community partners	By end of 2020	Plan developed to help households maintain tenancy or to relocate without entering homelessness	Households losing affordability protections do not become homeless as a result
Conduct needs assessment to measure the need for farmworker housing together with identified community partners that work with this community	WCHD and community partners	By end of 2020	Needs assessment complete and recommended interventions compiled	Strategy developed that will address housing needs of farmworkers in Whatcom County
Partner with organization(s) to conduct a needs assessment and explore the need for rural housing together with identified community partners, such as the Opportunity Council's East Whatcom Regional Resource Center	WCHD and community partners	By end of 2020	Needs assessment complete and recommended interventions compiled	Strategy developed that will address housing needs of residents in rural Whatcom County
Federal HOME Consortium funding contributes to affordable housing development or acquisition in Whatcom County	WCHD, Consortium partners, and local housing agency	By end of 2020	HOME Consortium funding is used to support down payments for first-time homebuyers or to provide rental assistance to low-income renters	An increased proportion of the Consortium funding is used to support rural or small city Whatcom households
Apply annually for a Community Development Block Grant from the Washington State Department of Commerce that support affordable housing in Whatcom County (outside of Bellingham city limits)	WCHD staff	Annually	A block grant is awarded for a project based in Whatcom County; Project increases supply of affordable housing in Whatcom County	Grant spending will be accompanied by reports that quantify number of households supported by the grant

Strategy 5: Homelessness Prevention and Diversion

Although the most urgent priority of our homeless housing system is to assist the most vulnerable who have lost their homes, some resources are used to divert and prevent certain households from ever becoming homeless or from returning to homelessness. Homelessness prevention and diversion are key components in an effective homeless crisis response system, as they can ultimately reduce the size of a community's homeless population.²⁶ According to the National Alliance on Ending Homelessness, prevention can help households avoid homelessness by preserving their current housing situation, while

²⁶ https://www.usich.gov/resources/uploads/asset_library/Prevention-Diversion-Rapid-Exit-July-2019.pdf

diversion assistance helps people seeking shelter by helping them identify alternatives and supportive services available.²⁷ The Substance Abuse and Mental Health Services Administration (SAMHSA) reports that research indicates prevention interventions are more cost effective than assisting people after homelessness occurs.²⁸ Examples in which these two interventions are offered by local housing partners are described below.

Diversion is typically used for families with children or seniors that need briefer and less intensive assistance. Short-term case management and services are offered to help the household identify available resources to find an affordable and safe home or maintain stability in the home where they currently reside. The diversion case manager uses practical methods to steer families away from homelessness, which may include advocacy with landlords, or negotiated agreements with an amiable relative that has housing available. Diversion is intended to be used as a first response in working with families experiencing housing instability.

The Opportunity Council reported in 2019 that a grant-funded diversion program they implemented from 2017-2018 had a 69% success rate in keeping households from being added to the Housing Pool, primarily by relying on their own resources and social support networks. The program served approximately 50 households per year and managed to divert more than half without any direct financial assistance. This diversion program, funded by the Seattle non-profit, Building Changes, through a 3-year nonrenewable grant, came to an end in the summer of 2019.²⁹ The 80% success rate for participant diversion from homelessness over the 3 years this program operated and relative low cost of administration firmly established it as an important program to maintain in our local continuum of care. The non-renewable grant was so successful that the Opportunity Council moved other funding from traditional homeless prevention to continue the important work of diversion into the future. While there will be a gap in funding that was formerly used to cover rent shortages formerly targeted with prevention funding, the impact and efficacy of diversion was deemed too valuable to let expire.

In 2019, the City of Bellingham began funding a new diversion program delivered by the Opportunity Council that assists seniors experiencing homelessness and families with children who are at risk of homelessness. This diversion program is intended to re-house households and support housing stability without relying on other more conventional, longer-term programs. The program offers flex funding, deposit assistance, and case management for as many as 72 households, including 36 households that include seniors, and 36 households that include children.

County funding from the Consolidated Homeless Grant (CHG) also began supporting a family diversion program in mid-2019, which primarily offers deposit assistance. Previously, CHG funding had been used for prevention. Other resources are used locally to provide additional prevention funding for veterans as follows:

- The Veteran's Assistance Fund (VAF) assists eligible veterans with eviction prevention using local veteran-specific funding
- A large federal grant awarded to the Whatcom Homeless Service Center, referred to as the Veterans Affairs' Supportive Services for Veteran Families (SSVF), also offers prevention resources for veterans.

The Whatcom Homeless Service Center reports that from 2011-18, a total of 735 total client households were served with the VAF and/or the SSVF program, including 328 households who were re-housed and 407 households who received homeless prevention services.

From a wider perspective, there are many other ways of preventing homelessness further upstream, such as an adequate supply of affordable housing, offering vocational and financial skills, and sufficient behavioral health services. For the

²⁷ <https://endhomelessness.org/ending-homelessness/solutions/crisis-response/>

²⁸ <https://www.samhsa.gov/homelessness-programs-resources/hpr-resources/housing-shelter>

²⁹ <https://buildingchanges.org/strategies/diversion>

purposes of an effective homeless crisis response system, however, interventions generally focus more narrowly on households who are already on the brink of experiencing homelessness.

Strategy 6: Interim Housing

Interim housing is the general term that describes both emergency shelters and transitional housing. Emergency shelters are usually easier to access and are intended for shorter durations than transitional housing, but there is a wide range of approaches to this type of shelter. For purposes of the Point In Time Count and official definitions used by HUD and the Department of Commerce, individuals staying in emergency shelters and transitional housing continue to be homeless until they're able to find a more permanent housing arrangement. Emergency shelters may operate on a night-by-night basis and require shelter users check in each evening. Most night-by-night shelters allow users to stay for as many nights as necessary. Other emergency shelters may limit stays to 90 days and encourage shelter users to find new housing resources as soon as possible. Transitional housing placements may last as long as two years before participants are required to move. When stays in transitional housing reach their limits, residents are required to move to a different residence, and therefore are still considered homeless while in transitional housing. For more detail about Whatcom County's interim housing, please refer to the appendix.

Interim housing resources are best used in support of the bigger goal of helping people get into permanent housing as quickly as possible. Time spent in emergency shelters or transitional housing units can be used to prepare individuals or families for independent or supported living. Often, those using interim housing shelters need time to connect with economic or medical services, resolve legal issues, and/or connect with other community supports. Because the current housing stock is unable to meet the demand for immediate housing for all, these interim programs are a resource for people waiting for longer term placements. However, because people served in these programs remain in a state of homelessness and because these programs are much more costly than rapid re-housing, precisely targeting people for these services is a must.

Significant changes have occurred in the need and availability of shelter beds in Whatcom County since the last Local Plan Update, and offering beds to the unsheltered homeless population remains an urgent priority for the community. The largest interim housing provider in Whatcom County is Lighthouse Mission Ministries (LMM), which houses approximately 250 people at any given time in various arrangements ranging from low-barrier night-by-night shelter, to residential interim housing options as part of longer-term programs. In the fall of 2016, LMM opened a low-barrier shelter, and increased their capacity to serve an additional 80 individuals beyond what already existed in the community. They have since been able to increase this number further, and have been willing partners with other agencies and organizations who have stepped up to help those experiencing homelessness, especially during the winter when local capacity to provide shelter is severely strained. LMM's primary facility that hosts shelter beds has an interim permit that will expire at the end of 2022, putting urgent pressure on the need to find permanent shelter facilities that offer adequate capacity, as well as space for hygiene facilities and other social and health services.

As shown in the appendix, LHM is one of a number of providers that participate in interim housing services, but the demand for shelters is far from being met in Whatcom County. The Point In Time Count of January 2019 identified nearly 300 individuals who were unsheltered in Whatcom County. And while it's true that some of these individuals do not wish to stay in shelters, it's also likely that there are many more unsheltered individuals in Whatcom County that were not counted. In 2018 a group of elected officials and community stakeholders attempted to identify a site for a permanent night-by-night shelter in Bellingham but was unable to find a location that met all of their criteria. Increasing the capacity of existing shelters and adding additional shelters for populations with special needs remain priorities for the local community. In the near-term, work is being

done to establish sites and develop policies for severe weather shelters that will operate on an as-needed basis when weather presents life-threatening conditions, and to add additional capacity throughout the winter months when those in need would otherwise be turned away when all available beds are expected to be filled.

The Consolidated Homeless Grant’s performance measure for Interim Housing is the percent of exits to permanent housing. The SFY 2019 baseline is 38% for emergency shelters and 66% for transitional housing. The Whatcom County rates are 32% and 52% respectively, indicating room for improvement in our interim housing projects. The target is an increase of 5% for each intervention by June 30, 2020.

Strategy 7: Economic Security

While circumstances vary, the main reason people experience homelessness is because they cannot find housing they can afford. Loss of a job, medical bills, or other emergency expenses can lead to inability to pay the rent, then eviction, and eventually homelessness. For the past several years, during the annual Point In Time Count, household economic factors topped the list of reasons for homelessness; those being the inability to pay rent or mortgages, and job loss.

The good news is that while economic insecurity is a significant factor as a cause of homelessness for many, the strategy of *creating* economic security provides a way *out* of homelessness and supports people at risk of homelessness. Providing services to help people increase workforce skills, build assets and manage income, maximize their earning potential, accessing affordable housing, and avoid financial disruptions (such as large medical bills) are effective at preventing or ending homelessness for many.

In Whatcom County, economic security for those experiencing homelessness can be increased through a myriad of pathways. However, programs designed to connect people to employment need to respond to the concurrent needs of people who have been or still are homeless. Examples of this type of support offered in the community follow.

Income/Employment

Resources related to increasing income and employment or providing financial stability in Whatcom County includes:

Programs to Improve Economic Stability					
Focus Population	Vocational Training and/or Supported Employment	Food and Basic Needs	Financial Planning / Financial Literacy	Direct Financial Support (SSI / SSDI)	Physical and Behavioral Health Care for People Experiencing Homelessness
Youths (13-17)	1, 9	1	1		10, 11, 12
Youths (18-24)	1, 2, 3, 4, 5, 9	1,2, 5	1, 2, 6, 7	5	10, 11, 12
Veterans	2, 3, 4, 5	2, 5	2, 6, 7	5, 13	10, 11, 12
Adults	2, 3, 4, 5	2, 5	2, 6, 7	5	10, 11, 12
Seniors	2, 3, 4, 5	2, 5	2, 6, 7	5	10, 11, 12
People with Disabilities	1,2, 3, 4, 5, 10	1,2, 5	2, 6, 7	5	10, 11, 12

1. Northwest Youth Services
2. Opportunity Council
3. WorkSource

4. Goodwill
5. Department of Social and Health Services
6. Whatcom Asset Building Coalition
7. Whatcom Dream
8. Department of Children, Youth, and Families
9. Job Corps
10. SeaMar
11. Unity Care NW
12. Compass Health
13. Whatcom County Health Department's Veterans Office

Health Management's Role in Financial Stability Economic security can also be strengthened with affordable health care by reducing costs and improving health and capacity for work. Two federally qualified community health centers serve a high number of those experiencing homelessness in Whatcom County.

- Unity Care Northwest offers a full range of health care services in Bellingham and Ferndale. Payment is based on a sliding fee scale for uninsured patients or with high deductibles and co-pays. Psychiatric care and mental health specialists are available, as well as health coaching, dental care, and general medical care.
- Sea Mar Community Health Center offers similar services, along with long term care services and Health Care for the Homeless. The Health Care for the Homeless program, available in Bellingham, includes case management, migrant outreach, shelter outreach, food vouchers, community voice mail, and bus and shower passes, among other services.

Economic Security Action Plan				
Actions	Who	Timeline	Milestones Prior to 2022	How to measure success?
Support federal, state, and local policies that contribute to the economic wellbeing of low-income populations and reduce homelessness; connect interested community members with the Washington Low Income Housing Alliance (WLIHA)	WCHD, interested community members, WLIHA	Continuous	Local priorities and ideas are included in new policy agendas	Whatcom County Coalition to End Homelessness meetings include time for policy suggestions at least once per year
Organize a resource fair that connects case management staff and other interested professionals to learn about various organizations working in Whatcom County to promote economic opportunities and stability	WCHD and community partners	Once every two years	Resource fair held in 2021	Number of attendees and number of participating organizations that table at the event

Statewide Goal and Objectives

Washington State is adopting the 2018 federal strategic goal to end homelessness and the federal criteria and benchmarks for ending homelessness for each subpopulation. This plan is required to include the five objectives that have been adopted by our state partner, the Department of Commerce. While the objectives and measures of success are mandatory components of the local plans, the methods by which we achieve success are created specifically for Whatcom County. This local methodology encompasses the actions, responsible parties, timeline, milestones prior to 2022, and how success will be measured in the charts under the following five objectives. The seven strategies of our local plan, included in an earlier section, support the accomplishment of these objectives.

Objective 1: Quickly identify and engage 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	Action	Responsible Parties	Timeline	Milestones Prior to 2022	How Success Will Be Measured
1.1 Street Outreach will increase the percentage of exits to positive outcome destinations to the level of the top performing 20 percent of homeless crisis response systems nationwide.	1.1a Increase training opportunities for outreach and day center staff in behavioral health care, community resources, trauma informed care, motivational interviewing, & harm reduction strategies, to give them tools to support people moving indoors.	1.1a WCHD; WHSC; Street Outreach staff; NWYS staff at Ground Floor.	1.1a 3-4 local trainings offered annually for outreach workers beginning in 2020	1.1a Trainings will occur according to timeline; all staff working in outreach will receive training in at least 3 areas listed by the end of each calendar year.	1.1a % exits to positive outcome destinations increase by 2% annually and by at least 5% between 1/1/20 and 6/30/22

Measure of Success	Action	Responsible Parties	Timeline	Milestones Prior to 2022	How Success Will Be Measured
	1.1b Increase use of emergency shelters by expanding the total capacity, improving accessibility, expanding choice, and improving quality of stay	1.1b WCHD; City of Bellingham; partner agencies providing shelter	1.1b Annual increase in # of shelter beds and in proportion of people who are homeless that stay in emergency shelters; and fewer people unsheltered	1.1b Reduction in proportion of unsheltered households by 2% annually and a minimum of 6% by 2022; provide more case management to increase availability of PSH	1.1b PIT annual report on sheltered/unsheltered; HMIS; Annual Report (# of ES units reported)
1.2 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.	1.2a Conduct annual evaluations of policies and make adjustments as necessary with guidance by Commerce; receive technical assistance by Commerce in continuing to build and maintain active lists as practice evolves	1.2a WCHD & WHSC; WA State Dept. of Commerce; providers using HMIS	1.2a Annual evaluations of CE by WCHD due in February; monitoring of CE by Commerce	1.2a Full compliance with contractual obligations and Commerce and HUD requirements	1.2a Data quality scores on County report cards show consistent improvement on annual basis
1.3 Increase share of individuals served who are entering services from unsheltered homelessness to at least 60%	1.3a Increase engagement of unsheltered population and collect data to capture transitions into shelters	1.3a WHSC, Street Outreach agencies, WCHD, shelter providers	1.3a Annual improvements	1.3a At least 60% will enter from unsheltered homelessness	1.3a County report cards; HMIS data

Measure of Success	Action	Responsible Parties	Timeline	Milestones Prior to 2022	How Success Will Be Measured
	1.3b Coordinated Entry system to hold meetings for Street Outreach and Referral Specialist staff to review progress of unsheltered receiving housing	1.3b WHSC, Street Outreach agencies, WCHD	1.3b Quarterly Meetings	1.3b At least 60% will enter from unsheltered homelessness	1.3b County report cards; HMIS data; partner data

Where we are now:

Program directors from Coordinated Entry partners have traditionally met on an as-needed basis to address system challenges as they are identified. Regular meetings with this team, as have been recently scheduled, are anticipated to improve coordination and make this system more efficient.

The table to the right shows the total number of people on the Housing Pool in January of each of the last five years. Although the number has generally decreased since a high 2017, it remains above a realistic number of who can be served in a reasonable time. Additional measures will be taken to reduce the number of people placed on the Housing Pool list who are unlikely to be served, thereby conveying a more realistic expectation among people in need of services.

According to Point In Time Counts, the ratio of unsheltered individuals has been increasing over time. The average percent of unsheltered individuals was 28% from 2008-2011, but rose to 44% from 2016-2019. Services for people experiencing unsheltered homelessness will be a priority. This includes both outreach efforts and the myriad of factors that can lead unsheltered individuals and households to choose to stay in shelters instead of alternative and less healthy arrangements. Although the drop from 2018's PIT to 2019's PIT count of unsheltered homelessness fell by 23%, continued attention and effort will be required to decrease the number further. Measuring the unsheltered population and the movement from unsheltered to sheltered locations is particularly challenging in our community because there are gulfs between data collected at the largest shelter (LMM's Drop-In Center), the Homeless Outreach Team (HOT) field staff, and the Homeless Management Information Systems.

Year	Average number of active households on Housing Pool (January)
2015	487
2016	659
2017	686
2018	512
2019	524

While the HOT focuses their efforts on unsheltered individuals and households in the field, a day center for homeless youths provides drop-in services for the county's youths and young adults at a set location. The Ground Floor was developed by the First Congregational Church of Bellingham in partnership with Northwest Youth Services. This day center was extensively remodeled from an underused basement in 2018 and began operating in early 2019. The Ground Floor provides access to free laundry machines, free essential needs (hygiene items, clothing, food, etc.), private bathrooms and showers, study spaces, and quiet rooms for rest and regrouping. Staff is available to offer support, and to connect youth with other resources necessary to end homelessness. Ongoing operations of the Ground Floor are made possible by funding from the City of Bellingham. A further expansion of the hours, services, and resources currently offered at the Ground Floor as additional funding becomes available would have a positive impact on young people presently experiencing homelessness or at risk of becoming homeless.

One area of renewed commitment has been to provide trauma-informed care and harm reduction for front-line staff to increase their skills when work with people who have experienced trauma or may struggle with behavioral health disorders. This is expected to improve outcomes for the unsheltered and/or isolated households in Whatcom County as a result of more positive interactions working with agency staff and better communication of needs. Funding has been set aside by the Whatcom County Health Department specifically for training community workers who work directly with individuals experiencing behavioral health disorders.

Number of Unsheltered Individuals

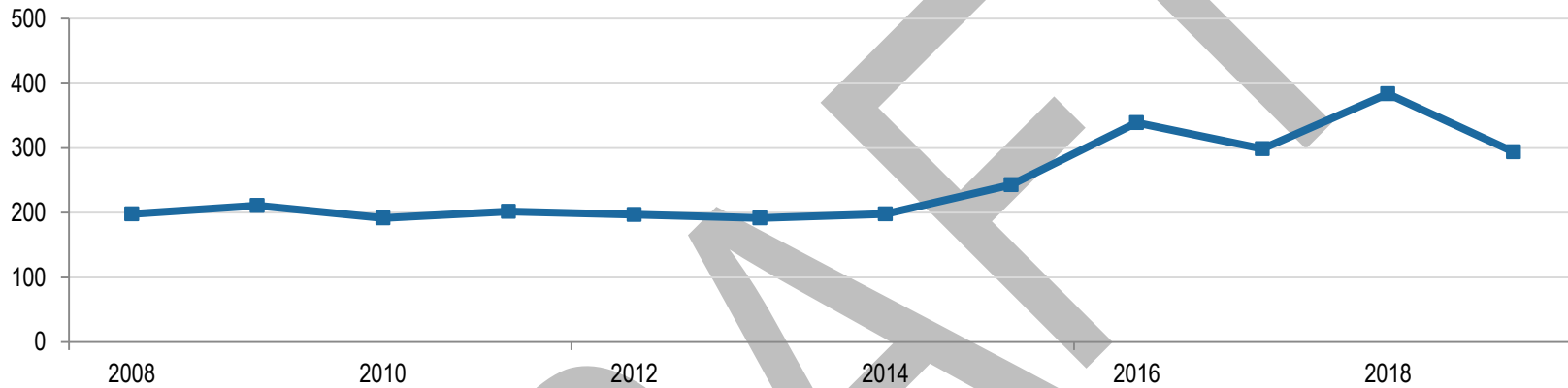


Figure 9: Number of individuals experiencing unsheltered homelessness during Point In Time counts (2008-2019).

Ratio of Unsheltered Homelessness

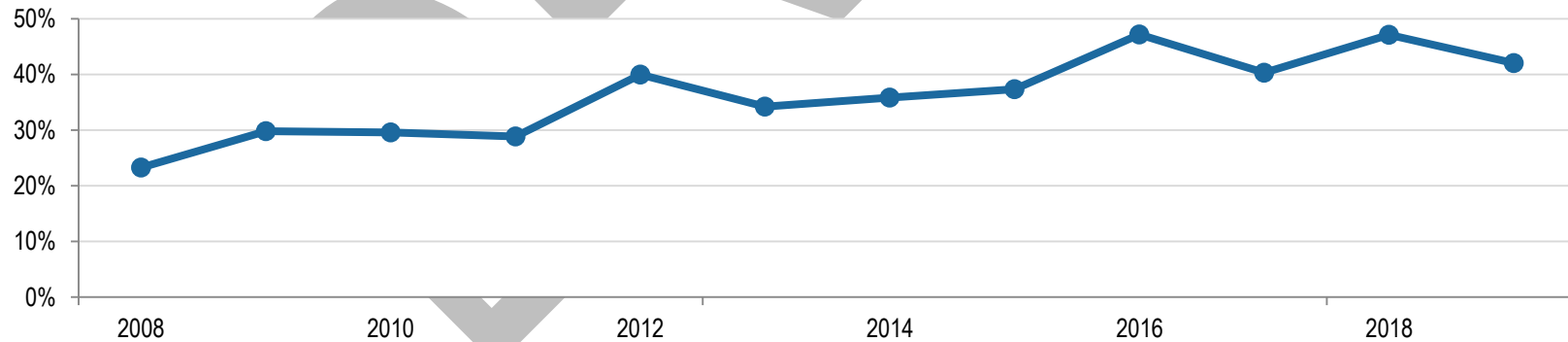


Figure 10: Percent of people experiencing homelessness who are unsheltered during Point In Time counts (2008-2019).

Rate of Homelessness in Whatcom County

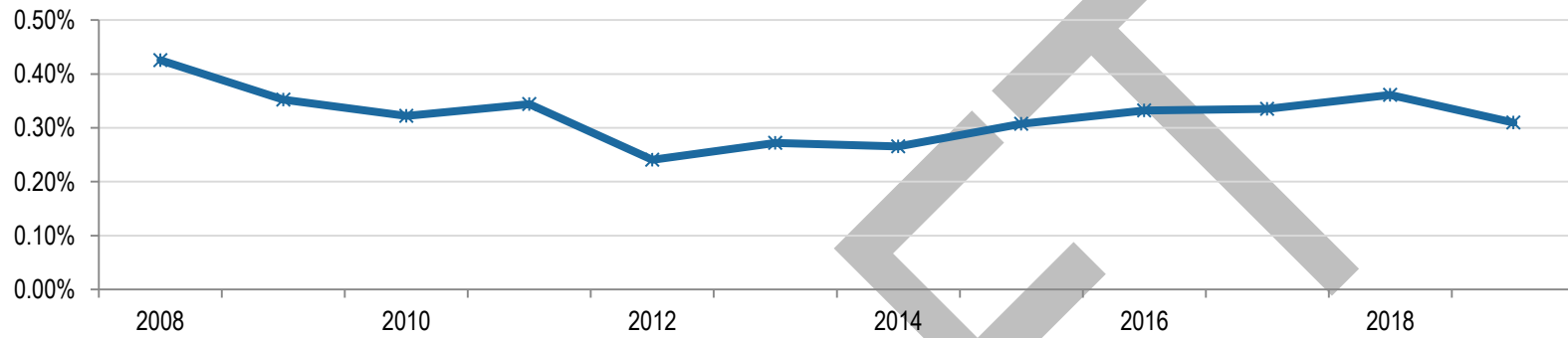
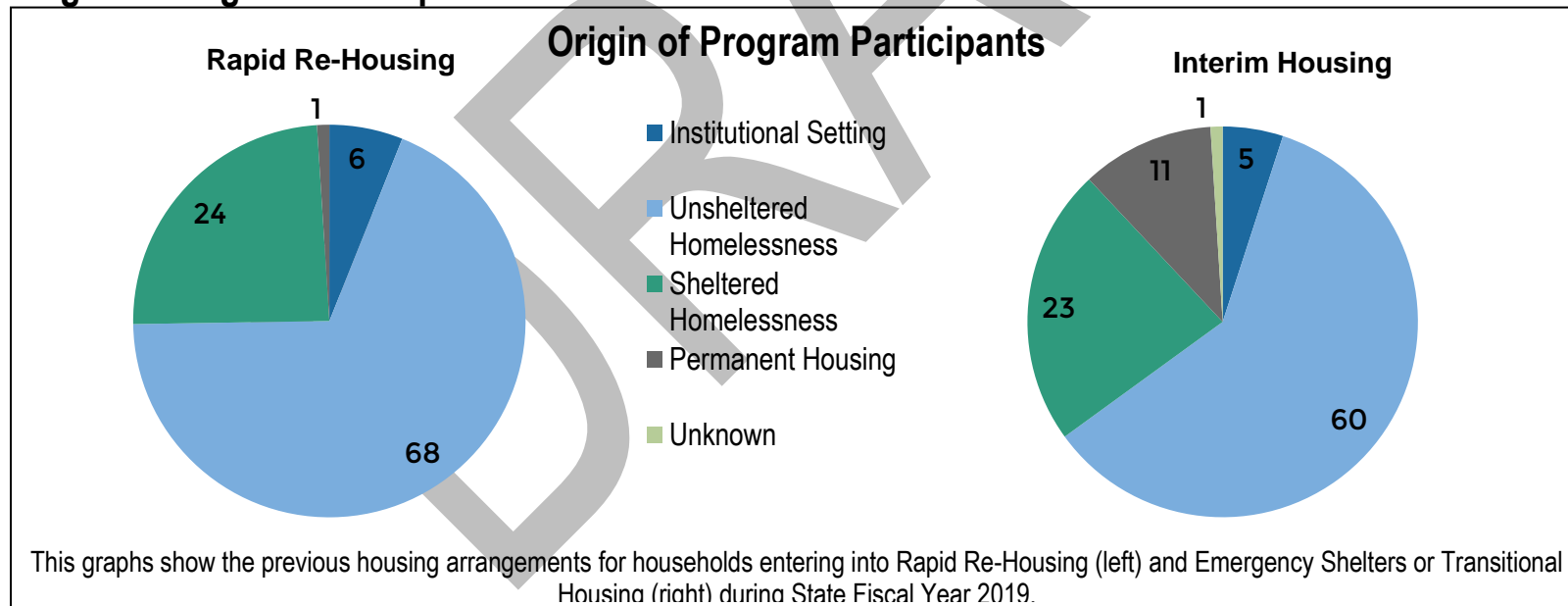


Figure 11: The Percent of Whatcom County residents experiencing either sheltered or unsheltered homelessness during Point In Time counts (2008-2019). The rate of homelessness was 0.29% in Washington State in 2019 and 0.17% nationally in 2018 (most recent available data).

Origin of Program Participants



Objective 2: Prioritize housing for people with the greatest need.

This objective refers to people living unsheltered, in emergency shelters, and in transitional housing. Implementing changes so our system enables people to move quickly into permanent housing is not only a cost-saving and humane measure, but achieves what people want - a home of their own. The primary mechanism for housing prioritization is our Coordinated Entry system operated by the Whatcom Homeless Service Center. A standardized assessment, OrgCode’s Service Prioritization Decision Assessment Tool (SPDAT)³⁰, is in use to objectively determine the level of need among households requesting services. As program openings occur, level of need is used to prioritize services for eligible households.

Measure of Success	Action	Responsible Parties	Timeline	Milestones Prior to 2022	How Success Will Be Measured
2.1 Compliance with state and federal Coordinated Entry requirements for all projects receiving federal, state and local homeless funds	2.1a Review requirements with project staff regularly	2.1a WHSC & WCHD	2.1a Quarterly	2.1a Quarterly meetings will be held with new staff beginning in 2020; annual meeting with all HMIS active staff by 2020; new governance committee meets biannually beginning in 2020	2.1a Data quality reports show consistent improvement; monitoring by WCHD and Commerce results in no findings or issues.
2.2 Revisit 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 annually	2.2a Implement recommendations in consultation with local youth services provider; assess need for additional access points for CE for youth	2.2a WCHD, WHSC & NWYS	2.2a WCHD, WHSC & NWYS will meet annually to respond to changes; decision to implement recommendations made by 2/1/20.	2.2a Number of youth-headed households in Point In Time counts decreases	2.2a Point In Time reports
2.3 Successful implementation of prioritization policies for all projects receiving federal,	2.3a Update assessment tool to more accurately determine needs and	2.3a WHSC	2.3a New tool in use for select populations by end of 2019	2.3a SPDAT 4.01 assessments complete for majority of highly vulnerable households	2.3a A detailed assessment is available for placements in

³⁰ <https://d3n8a8pro7vhm.cloudfront.net/orgcode/pages/313/attachments/original/1479850999/SPDAT-v4.01-Single-Fillable.pdf?1479850999>

Measure of Success	Action	Responsible Parties	Timeline	Milestones Prior to 2022	How Success Will Be Measured
state and local homeless funds, resulting in prioritized people consistently housed in a timely manner	improve referrals			on housing pool list	services/program from the housing pool list for the majority of prioritized households
	2.3b Streamline referral process and communication between CE lead and partner agencies	2.3b WCHD, WHSC	2.3b New referral process in place by end of March 2020	2.3b Regular meetings to discuss referrals with all relevant agencies	2.3b Fewer negative outcomes for clients in programs
	2.3c Increase the percent of system entries for households who were previously unsheltered or fleeing domestic violence to 60%	2.3c WCHD, WHSC, partner agencies	2.3c Increase to 60% by 06/30/2020	2.3c Maintain level of unsheltered entries at 60% or higher	2.3c County report cards from Department of Commerce

Where we are now:

The prioritization of services and resources for people in need is an ongoing challenge. Different opinions, perspectives, and values exist along a continuum. Funding requirements from HUD and the Washington State Department of Commerce require that the most vulnerable - those with the greatest needs - are prioritized for services because they are most likely to suffer the greatest harm as a result of being turned away from services. Much of the state and federal funding spent locally is designated to support people who are experiencing chronic homelessness, which is both 12 months or more of homelessness either continuously or in four or more episodes over the last three years, and the presence of a professionally recognized (and documented) disability. On the other end of the spectrum, others are quick to point out that a greater number of people could be served if resources were spread more thinly for those who need significantly less support- so called “light touch” populations. There are also strong opinions in support of specific special populations - homeless youths, seniors, families with young children, veterans, individuals with medical complications, people with developmental disabilities, and for people with mental illness. Because the needs of the community so greatly dwarf the resources devoted to resolving homelessness, conflicting values about prioritizing those resources will persist.

The Whatcom County Health Department’s housing program budget is funded with seven distinct revenue sources, each with its own set of eligible expenses and household eligibility criteria. Details about revenue, expenditures, and eligible uses of funds are available on the Whatcom County website, from the Washington State Department of Commerce, from HUD, in Washington State Administrative Code, and in the Revised Code of Washington. Where flexibility exists, the health

department strives to gather input from diverse stakeholders that work in housing-related fields, from elected officials, from open public meetings of the Whatcom County Housing Advisory Committee, from the general public, and from people who have the lived experience of homeless.

Objective 3: Operate an effective and efficient homeless crisis response system that swiftly moves people into stable permanent housing.

For people who experience homelessness, their time without housing is often traumatic, dangerous, and fraught with significant risks to their health. For these reasons, as well as others, it is important to strive to make these homeless experiences as brief as possible. To quickly re-house an individual or family there must be effective outreach, accessible intake processes, and program capacity to enroll new clients.

A key challenge in program capacity has been the scarcity of vacancies and cost of rentals, as detailed on page 11. Many programs struggle to exit households from interim housing or ongoing case management, and rising rents have made it very difficult to continue to expand RRH programs that require rental assistance.

State Fiscal Year	Average number of days spent homeless before housing provided
2015	81
2016	112
2017	172
2018	161

Table 1: Time spent homeless in any living arrangement before being housed

State Fiscal Year	Days in Interim Housing before enrollment in Permanent Housing Projects (mean)	Days in Interim Housing before enrollment in Permanent Housing Projects (median)
2018	126	63
2019	93	44

Table 2: Length of time in emergency shelters or transitional housing before obtaining permanent housing. This does not include time spent unsheltered or in an emergency shelter or transitional housing facilities that does not participate in Washington State’s HMIS data system.

It is encouraging to see the length of time decrease in the two tables above from 2017 through present, but it does not capture the experience of all people facing homelessness. According to the 2019 Whatcom County Point In Time Count Report, roughly 20% of the people counted in 2019 were also counted in 2018, and 11% were also counted in 2017. This means that 20% of the people (about 140 individuals) were in roughly the same position they had been in full year ago.

Measure of Success	Action	Responsible Parties	Timeline	Milestones Prior to 2022	How Success Will Be Measured
3.1 Increase percentage of exits to permanent housing to the level of the top performing	3.1a Implement recommendations from CE assessment	3.1a WHSC, WCHD	3.1a TBD	3.1a TBD	3.1a TBD

20 percent of homeless crisis response systems nationwide.	3.1b Improve referrals to better match needs of clients	3.1b All agencies participating in HMIS	3.1b Continuous	3.1b Increased percent exits to permanent housing by 2% annually from 2019 to 2022	3.1b County Report Cards; HMIS data from WHSC
	3.1c Improve exits to permanent housing from all programs by 5% by 06/30/2020	3.1c WCHD, partner agencies	3.1c Continuous	3.1c Increase system-wide average or successful exits to 70%	3.1c County Report Cards
3.2 Reduce returns to homelessness after exits to permanent housing to less than 10 percent	3.2a Build partnerships with behavioral health providers and expand access to behavioral health services	3.2a WCHD	3.2a Continuous	3.2a Increased number of clients accessing BH services	3.2a Quarterly reports from PSH facilities; County Report Cards
	3.2b Strengthen landlord liaison program	3.2b WHSC	3.2b Continuous	3.2b Annual housing related contacts from LL program increased	3.2b LL Monthly reports
	3.2c Reduce returns to homelessness to 5% or less by 2024	3.2c WCHD, WHSC, partner agencies	3.2c Continuous	3.2c Returns to homelessness will reduce to 7% or less	3.2c County Report Cards
3.3 Reduce average length of stay in temporary housing projects to less than 90 days.	3.3a Increase case management to decrease size of caseloads as funding allows	3.3a WCHD and case management partners	3.3a When funding is available	3.3a Average length of stay in ES and TH decreases	3.3a County Report Cards; quarterly reports from agencies
	3.3b Respond quickly to lengths of stay in excess of 90 day; develop permanent housing plans within 14 days after client enters interim housing	3.3b WCHD; all relevant ES case management and shelter providers	3.3b Quarterly	3.3b Reasons for extended stays are documented in client and agency files	3.3b Analysis conducted to determine causes of long stays; reduction in average # of days spent in ES and TH projects

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.

Measure of Success	Action	Responsible Parties	Timeline	Milestones Prior to 2022	How Success Will Be Measured
4.1 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	4.1a Update modelling tool provided by Commerce with latest numbers to improve accuracy	4.1a WCHD	4.1a By September 01, 2019	4.1a Completed	4.1a Tool attached as appendix to this plan update and subsequent updates
	4.1b Make annual adjustments in response to variations from predictions	4.1b WCHD	4.1b By September 1 st of each year 2020-2024	4.1b Annual updates	4.1b Annual updates will include updated appendix

The model provided by Department of Commerce predicts that the number of unsheltered homeless households will decrease by 24 over the next five years if demographics and housing costs remain stable, given the current performance of our crisis response system. However, even modest growth in population and rents will reverse the predicted decrease. The table below highlights six potential population and rent scenarios:

	Population Growth (annual %)	Rent Growth (annual %)	Predicted change in number of unsheltered households in 2024	Annual funding increases required to offset inflation (price of service delivery) and to overcome scenario's increase of population and rent prices
Scenario 1	0	0	-24	\$111,629
Scenario 2	0	3	-5	\$198,314
Scenario 3	1.5	3	+29	\$318,183
Scenario 4	1.5	5	+97	\$493,327
Scenario 5	1.5	8	+129	\$758,772

For reference, the population growth rate in Whatcom County has been about 1.5% over the last decade. The year-over-year increase in Whatcom County rent value, according to Zillow was 6.4% in July of 2019. An annual growth rate of 5% has been the average since 2012.

Objective 5: Address racial disparities among people experiencing homelessness.

To better understand the impact of race on homelessness and access to services, the following analysis was derived from questions posed by the Washington State Department of Commerce and data collected in 2018.

- 1) How does your county compare to other like size counties in the state? Are any groups over or underrepresented in the homeless population?
 - a. In Whatcom County, people who belong to minority groups are over-represented among people experiencing poverty, and over-represented even more so among people experiencing homelessness. Although white people make up 86% of the population and 78% of people experiencing poverty, they account for only 68% of those identified during the most recent Point In Time Count. In families with children, white people made up only 48% of the people experiencing homelessness.
 - b. The Native Americans/Alaskans make up only about 3% of the county's population, but they account for 5% of people in poverty and 16% of people experiencing homelessness. These disparities are larger still within families with children experiencing homelessness, where Native American/Alaskan individuals accounted for 31% of all the people in families with children who were experiencing homelessness.
 - c. Black people make up a small percent of the county, and are only 2% of the people living in poverty. Still, they make up 4% of people experiencing homelessness.
 - d. For multi-racial or those who do not identify as white, black, Native American/Alaskan, or Asian/Pacific Islander, there are also elevated rates of homelessness beyond what poverty ratios would predict, but this is seen only among families with children. The "Other/Multi-Racial" group makes up 10% of those in poverty, but 15% of the homeless families with children population.
 - e. Single-parent households with children are disproportionately headed by a female parent. Nationally, single mothers account for about 80% of the single-parent households; however they were identified as 93% of the single-parent households during the Point In Time Count.
- 2) In PIT counts, are there significant differences between sheltered and unsheltered counts?
 - a. For people without children, race appears to play only a very small role in access to shelter. Although white people make up 68% of the people experiencing homelessness in Whatcom County, they account for a larger percent (73%) of people who are unsheltered. This means that people of racial minorities are able to (or choose to) access shelter at a slightly higher rate than their white peers. This phenomenon is more pronounced among families with children, where we see white people make up 48% of the population, but account for 58% of those who are unsheltered.
- 3) Are there specific local or state conditions that might lead to these differences?
 - a. The most startling data here suggests that Native American/Alaskans in poverty are three times more likely to become homeless than others who are in poverty. And although this population is just 5% of the county's people experiencing poverty, they account for 31% of the people in families who are experiencing homelessness. Specific local conditions that may be contributing to this, as well as possible corrections need to be researched; this will be a topic for discussion in the new Coordinated Entry governance body.

Measure of Success	Action	Responsible Parties	Timeline	Milestones Prior to 2022	How Success Will Be Measured
5.1 Completion of an initial analysis using a racial equity tool and data provided by Commerce.	5.1a Include analysis in this document	5.1a WCHD, Steering Committee of Coalition to End Homelessness	5.1a By September 01, 2019	5.1a Completed	5.1a Analysis included in this plan and subsequent updates
	5.1b Revisit analysis and make adjustments annually	5.1b WCHD	5.1b By September 1 st of each year 2020-2024	5.1b Annual updates	5.1b Annual updates will include updated appendix
5.2 Reduce disparities in homelessness seen in the Point In Time Count for people of color, LGBTQ, and formerly institutionalized individuals	5.2a Provide training for partner agency staff on equity and cultural competency	5.2a WCHD with Partner Agencies	5.2a At least one annual training specifically on equity	5.2a Training program in place	5.2a Annual training activities; HMIS and PIT Count Data will indicate fewer disparities in data reporting on successful exits to PH and housing retention
	5.2b Require contractual partners of WCHD to submit annual plan on how they intend to work toward reduction in disparities in at least one identified group with disparities; provide opportunities for more suggestions from partners	5.2b WCHD with Partner Agencies	5.2b Included in contracts/amen dments by 01/01/2020	5.2b Increase in # or % of households from minority groups that receive permanent housing, and retain housing for 6 months and 1 year.	5.2b Quarterly reports

	5.2c Develop criteria for CE assessment that recognizes barriers for people of color, LGBTQ, formerly institutionalized individuals and other groups that face disparities in rates of homelessness	5.2c WCHD and WHSC	5.2c WCHD and WHSC and partners will discuss and decide on this by 06/01/2020.	5.2c Assessment tool modified to account for systemic prejudice that adds barriers to housing for minority groups	5.2c Decrease of time spent in housing pool for people that belong to groups facing disparities in rates of homelessness
	5.2d Analyze hiring and recruitment practices of partner organizations to determine if outreach to populations with inequitable outcomes in housing can be improved	5.2d WCHD with Partner Agencies	5.2d Analysis of hiring practices completed by 06/01/2020	5.2d Hiring and recruitment policies include considerations to attract staff that reflects the population being served	5.2d New efforts to recruit from minority populations will be documented and reported in annual updates
	5.2e Fill position for Tribal Representative on Whatcom County Housing Advisory Committee	5.2e WCHD housing staff	Position will be filled by 06/01/2020	Tribal Representative will be present for majority of meetings	List of attendees in minutes will include Tribal Representative

DRAFT

Glossary

Affordable Housing – Housing is considered “affordable” when a household pays no more than 30% of their gross income towards housing, inclusive of utilities.

Chronically Homeless – A subset of the homeless population that has been homeless either for the last 12+ months, or homeless several times over the past three years adding up to 12 months or longer. People who have experienced chronic homelessness are the primary participants in permanent supportive housing projects.

CoC – Continuum of Care (CoC) is a HUD designation for a jurisdiction that receives federal grants for housing programs. In Washington State, the five most populous counties (King, Snohomish, Pierce, Spokane, and Clark) constitute their own CoCs, while the rest of the counties (including Whatcom County) form a sixth CoC called the Balance of State.

Commerce – The Washington State Department of Commerce is the primary state-level funder for housing assistance in Washington State. There are three offices in particular that support people experiencing homelessness, the Office of Family and Adult Homelessness, the Office of Supportive Housing, and the Office of Homeless Youth.

Coordinated Entry – A system that allows people seeking services to have a single point of entry for all participating agencies. This eliminates the need to visit and register with several agencies across the county. A list of people seeking services is used to connect households with agencies that provide services.

Diversion – A relatively brief service that helps households creatively solve housing crises without formal engagement in the coordinated entry housing system. Households that use diversion services typically will relocate to a new living situation but will not lose housing altogether.

ES – Emergency Shelter (ES) is any type of site that houses individuals or families on a temporary basis. Some shelters are reserved for specific populations, such as women fleeing domestic violence or for minors, while others are available for any adult seeking shelter. People using emergency shelters, regardless of their length of stay, are still considered to be homeless.

HMIS – The Homeless Management Information System is a database that keeps statistics about housing services and clients. Information from Whatcom County is connected to other counties and used by Department of Commerce and HUD to analyze performance of each county and Continuum of Care. Data entry is required of agencies that receive funding from the Whatcom County Health Department and for all programs receiving state or federal funds.

Housing Pool – The “housing pool” serves as a quasi-wait list that matches individuals seeking services with appropriate programs. Households in the housing pool are organized by eligibility status, housing needs and vulnerability.

HUD – The United States Department of Housing and Urban Development (HUD) is a funder for many housing subsidy programs delivered locally and the primary funder of the Whatcom County and Bellingham Housing Authority.

Partner Agencies – Non-profit organizations that receive funding from local, state, and/or federal sources and implements programs that serve populations experiencing and/or at risk of homelessness. Many of these organizations also collect private contributions at fundraising events and benefit from significant volunteer support. As a condition of public funding, these agencies must record data in HMIS and populate their programs primarily through referrals from the WHSC.

PH – Permanent Housing (PH) can be subsidized or paid at market rate. PSH and RRH program participants are considered to be in permanent housing and no longer homeless.

Prevention – A program that provides stopgap funding for households in imminent risk of eviction or housing loss. Unlike diversion services, prevention usually helps families maintain their housing without having to relocate.

PSH – Permanent Supportive Housing (PSH) is a service that combines rental subsidies with ongoing case management support. PSH is offered either in single-site facilities that provide on-site staff to assist tenants, or in scattered-site locations that may be integrated into neighborhoods.

Rapid Re-Housing – A rental subsidy that generally lasts for about two years. Households receiving rapid re-housing (RRH) are expected to develop financial independence over the two year period and take over rent payments at the completion of the program. These tenants have leases with their landlords and typically remain in the same housing unit after the subsidy ends.

Referral – A referral for a client is issued by the WHSC when partner agencies identify a vacancy or additional capacity. When requested for a referral, the WHSC accesses the Housing Pool to determine the most appropriate household to refer to the requesting agency.

SPDAT – The Service Prioritization Decision Assistance Tool is used to determine the level of vulnerability of applicants for housing services. The result of this assessment helps determine the most appropriate service for the household.

TAY Triage Tool – This version of the SPDAT is designed specifically for transition-aged youths (TAY). It helps determine the needs of young adults aged 18-24 and is used both for Northwest Youth Services and Whatcom Homeless Service Center intakes for client in that age range.

TH – Transitional Housing (TH) is a temporary arrangement that is expected to provide subsidized housing for up to two years. Unlike RRH, transitional housing tenants are not protected by leases and are expected to move out to a different home at the end of the program. While in TH, households are still considered to be homeless.

WHSC – The Whatcom Homeless Service Center is the lead agency for Coordinated Entry in Whatcom County. It disperses rental assistance funding and fills referral requests when partner agencies have vacancies in their programs.

Appendix A: Interim Housing in Whatcom County

As of early 2019, the number of year-round emergency shelter or transitional housing beds for men, women, and children in Whatcom County was approximately 700. In practice, due to household configurations, the total number of individuals that can be sheltered is typically less, although temporary shelters are used during the winter months and motels can be used to add capacity when necessary. Because many of the organizations that provide shelter do not participate in county-wide data sharing, the number of people in shelters at any given moment is generally not known.

Interim housing operated by partner agencies that work with the Whatcom Homeless Service Center and/or receive funding from the City of Bellingham or Whatcom County Health Department:

- *Domestic Violence and Sexual Assault Services (DVSAS)*
 - DVSAS's Safe Housing Program provides emergency, confidential shelter to individuals and families fleeing domestic violence. Survivors are housed in three buildings at two locations in Bellingham, one for families and two that are limited to adult women. Survivors can be screened through the DVSAS office in downtown Bellingham or over the 24-hour helpline, and can enter the shelter immediately. Shelter stays are typically limited to ninety days, and motel stays are available for survivors who do not identify as female.
- *Interfaith Coalition*
 - Interfaith Coalition uses several houses and housing units to provide emergency shelter and transitional housing for families. These units are located in Bellingham, Ferndale, and Blaine. The goal for the emergency shelter units is to move families into permanent housing within 90 days, however this demographic and the expense of housing families make this target very challenging. Transitional housing units allow for stays up to two years in length. Entry to these units is through Coordinated Entry.
- *Lydia Place*
 - Lydia Place operates a small transitional housing facility with room for five households (women with or without children). Households may stay up to a year, but often move on after only a few months. This facility is located in Bellingham. Lydia Place also provides motel stays to be used as emergency shelter on an as-needed basis for families. Entries to Lydia Place's transitional housing program are facilitated by Coordinated Entry.
- *Northwest Youth Services*
 - Northwest Youth Services operates a Positive Adolescent Development (PAD) program for up to eight minors aged 13-17 that is available on an emergency basis directly through Northwest Youth Services. They also operate an eight-bed emergency shelter for youths aged 18-24. Both shelters limit stays to 90 days and are located in Bellingham. Transitional housing is available for youth at scattered site units with case management support available.
- *Sun Community Services*
 - Sun Community Services operates a nine bed emergency shelter called Sun House in Bellingham. Residents there are expected to limit their stays to 90 days, although these stays are extended on a case-by-case basis when necessary. Their beds are filled through the Coordinated Entry referral process, and their focus is primarily on single adults with serious mental illness.
- *Whatcom Homeless Service Center*
 - The Whatcom Homeless Service works with Opportunity Council's Community Services division to provide emergency motel stays primarily for families with children on an as-needed basis.
- *YWCA*

- The YWCA in downtown Bellingham provides both emergency shelter and transitional housing for a total of 36 single women. Entry to this facility is through the Coordinated Entry system.

Interim housing operated by agencies that do not work with the Whatcom Homeless Service Center and/or receive funding from the City of Bellingham or Whatcom County Health Department:

- *Engedi Refuge Ministries*
 - The Engedi Refuge works with women who are survivors of sex trafficking. They house up to six women at a time at a facility in Lynden without limits on length of stay. Entries to the refuge come through the Washington Anti-Trafficking Response Network.
- *HomesNOW!*
 - The HomesNOW! organization operates a tiny-home encampment of 15 units on a temporary basis in Bellingham. Entries to this encampment are screened by HomesNOW! staff with consultation from the Bellingham Police Department. This organization intends to expand in the coming years and add operations outside of Bellingham. There is no specific limit to length of stay.
- *Lighthouse Mission Ministries*
 - The Lighthouse Mission's Drop-In Center, in Bellingham, is the largest emergency shelter in Whatcom County. The Lighthouse also operates a transitional housing program for single women and for women with young children and another for single men. There is no limit on the number of nights a person may stay at the Mission.
- *Lummi Housing Authority*
 - The Lummi Housing Authority operates a temporary housing facility for tribal members on the Lummi Indian Reservation called Sche'leng'en Village. This project provides housing and wrap-around services for 30 families. Entry is through the Lummi Housing Authority and residents must comply with clean and sober policies before admittance. There is no limit on length of stay, but the residencies are not expected to be permanent for most households.
- *New Way Ministries*
 - New Way Ministries provides housing for 23 families in Lynden, Washington. Applications for entry are made directly with the facility.
- *Lummi Stepping Stones*
 - Lummi Stepping Stones provide emergency shelter in two facilities on the Lummi Indian Reservation. They provide beds for up to 51 individuals and entries are through the Stepping Stones organization directly.
- *Lummi Victims of Crime*
 - Lummi Victims of Crime is a domestic violence support agency that operates on the Lummi Indian Reservation. They provide emergency shelter for up to five individuals.

Appendix B: Coordinated Entry Programs

Whatcom Homeless Service Center: Coordinated Entry System Partners		
Partner Agency	Intervention Type	Population Served
Catholic Housing Services	Permanent Affordable Housing	Low-income adults and families
Catholic Housing Services	Permanent Supportive Housing with 24-hour On-site Staff	Chronically homeless single adults; some young adults
Catholic Community Services	Case Management	CH single adults
DVSAS	Emergency Shelter	Survivors (families and singles) of domestic violence
Interfaith Coalition	Emergency Shelter	Families with children experiencing homelessness
Interfaith Coalition	Transitional Housing	Families with children experiencing homelessness
Lake Whatcom Residential and Treatment Center	Permanent Supportive Housing	Chronically homeless individuals with mental illness
Lydia Place	Transitional Housing	Families with children
Lydia Place	Case Management	Families with children; some singles
Lydia Place	Rapid Re-Housing	Families with children
Lydia Place	Long Term Support (No disabilities required)	Bellingham Housing Authority project-based voucher holders
Mercy Housing	Permanent Affordable Housing	Low-Income senior households
Northwest Youth Services	Emergency Shelter	Youth and young adults
Northwest Youth Services	Rapid Re-Housing	Families with children
Northwest Youth Services	Transitional Housing	Youth and young adults
Northwest Youth Services	Case Management	Youth and young adults
Opportunity Council	Case Management	Families with children and small number of singles
Opportunity Council	Permanent Supportive Housing	Chronically homeless single adults and single adults with children
Opportunity Council	Transitional Housing	Homeless families with children
Opportunity Council	Rapid Re-Housing	Families with children; veterans; aged, blind, or otherwise disabled adults
Opportunity Council	Emergency Shelter	Homeless families with children
Pioneer Human Services	Permanent Supportive Housing with 24-hour On-site Staff	Singles re-entering the community from institutions; Veterans; chronically homeless
Sun Community Services	Emergency Shelter with 24-hour On-site Staff	Single adults with serious mental illness discharged from correctional and mental health facilities or unsheltered
Sun Community Services	Permanent Supportive Housing	Chronically homeless single adults
YWCA	Emergency Shelter and Transitional Housing with Daytime On-site Case Manager	Single women experiencing homelessness and often history of domestic violence

Appendix C: County Recommendations to the State

- Eliminate unnecessary reporting requirements and regulations for counties to allow county staff time to focus on implementation of system improvements, increased support to partners, and monitoring contract compliance.
- Support counties to use local document recording fees without tying use of the fees to CHG requirements. This provides opportunities for counties to respond effectively to the unique local combination of factors that drives homelessness.
- Seek input from counties before assigning funding requirements for a specific population. For example, the Permanent Supportive Housing funding in the CHG and the ending of TANF specific funding may not be as helpful for Whatcom County as general CHG funding, which allows for more varied uses.
- Consider legislation that would create consistency and factor in special needs when clearing homeless encampments from public property.
- Consider legislation that would revise sitting and lying in public ordinances to create safe alternatives for people without homes.
- Provide funding that can be used to install public bathrooms or urban rest stops to enable better hygiene and health outcomes for people without homes.
- Sanction and support safe parking or camping areas that promote security, stability, and healthy conditions conducive to exiting homelessness.
- Create limits or regulations relating to escalation of rent without improvements or justification.
- Create legislation to limit the application and move-in fees that property management companies charge.
- Provide more oversight resources to better enforce fair housing laws; provide legal support to applicants who have been illegally discriminated against to bring lawsuits against landlords who break the law.
- Gradually taper withdrawal of social service benefits to avoid abrupt benefit cliffs.
- Fund complete behavioral health and medical services that are accessible for indigent people with mental illness, and support the inclusion of these services in supportive housing programs and operations.
- Create legislation to ban the use of criminal history as criteria that may deny housing to an individual, much like the “ban the box” legislation for job applications.
- Fund an increase of accessibility of legal support services for survivors of domestic violence who wish to separate from spouses and free themselves from their ex-partner’s debts.
- Add contextual flexibility to the criteria that define chronic homelessness or other eligibility restrictions, and develop systems for exceptions that would increase efficiency and effectiveness of the homeless housing system for people in unique situations or who are unable to produce specific types of documentation.