

San Francisco's Project Homeless Connect: A National Best Practice Model

NANCY WILLIAMS

EXECUTIVE SUMMARY

In 2000, The National Alliance to End Homelessness (NAEH) led a national campaign for communities to “re-commit to ending homelessness rather than managing it.” The NAEH has instituted a Ten-Year Plan to provide information and programs using creative and innovative strategies to address these issues on a local level with the goal of impacting homelessness nationwide. Over 200 communities have initiated plans to end homelessness. These plans involve the effort of the public, private, and non-profit sectors.

In 2004, San Francisco launched Project Homeless Connect where volunteers from the community partnered with city government, non-profits, and the private sector to provide a “one stop shop” of health and human services for the homeless population in San Francisco.

The goals of Project Homeless Connect are to:

- Improve access to services and housing for homeless San Franciscans,
- Engage and increase the collaborative involvement of homeless consumers, businesses, the non-profit community, and individual volunteers to work together to create solutions to homelessness,
- Improve the system of care by creating opportunities for collaboration and sharing of best practices among San Francisco's homeless provider community, and
- Leverage private, corporate, and foundation money and in-kind support to augment city efforts to increase housing options and build service capacity for homeless San Franciscans.

Project Homeless Connect is a national best practice model that is being implemented in 106 cities throughout the United States as well as in Puerto Rico and Australia. The intent of this project is to discuss ways to implement this concept in other communities as well as to create opportunities for collaboration and sharing of practices and services among the community in Santa Cruz County.

**Nancy J. Williams, Social Work Supervisor,
Family & Children's Services,
Santa Cruz County Human Services Department**

San Francisco's Project Homeless Connect: A National Best Practice Model

NANCY WILLIAMS

Background

In 2006, the U. S. Department of Housing and Urban Development (HUD) defined chronic homelessness as an unaccompanied homeless individual with a disabling condition (e.g., substance abuse, serious mental illness, developmental disability, or chronic physical illness) who has either been continuously homeless for a year or more, or has had at least four episodes of homelessness in the past three years. This definition includes those sleeping in places that are not considered to be fit for human habitation, as well as those sleeping in shelters for emergency purposes. A study done by the National Law Center on Homelessness and Poverty estimates that in the United States nearly 2.3 to 3.5 million people experience homelessness. In 2007, the National Alliance to End Homelessness (NAEH) reported that there were approximately 744,313 people homeless on one night in January 2005, and of these 56% were in shelters and transitional housing, while 44% were unsheltered. The NAEH report cites that 59% of these homeless individuals were single adults and 41% were families, (a total of 98,452 families).

Homelessness has become widespread; however, it continues to be largely an urban trend. Factors contributing to homelessness include poverty, mental illness, health-related conditions, substance abuse issues, domestic violence, lack of health care, and lack of affordable housing. Oftentimes, individuals and families experience more than one of these factors at any given time. This has created what some call a “cycling” of people in and out of the various systems, such as hospitals, shelters, treatment cen-

ters, and jails which has significant fiscal impact on these systems of care. The NAEH reported that 35 chronically homeless people in Portland, Oregon utilized over \$42,000.00 per year in emergency and institutional care. Many systems, such as shelters and health care programs, are not structured to address the multiple and extensive needs of this population. In response to these issues, many cities have launched innovative and creative approaches to end chronic homelessness. Communities are able to document their success in reducing chronic homelessness while documenting the cost effectiveness of these approaches. The City and County of San Francisco, has done just that in the launching of Project Homeless Connect (PHC).

San Francisco Project Homeless Connect

San Francisco was once considered to have the most pervasive homeless epidemic in the country. Upon Mayor Gavin Newsom's appointment to office, he decided to do things differently by moving away from the contingency of care model for addressing homelessness, and toward a “housing first” approach. As a part of this effort, Mayor Newsom established the “Care Not Cash” initiative which reduced general assistance checks to homeless clients and redirected those funds to create more housing units for this community. This initiative was predicated on the idea that if homeless clients were provided with a place to live first, and then housed, the underlying causes of mental health and drug abuse could be addressed with on-site case management and wrap around support services. Mayor Newsom believed

this would be a more effective method toward ending chronic homelessness.

One of the primary barriers to being able to do this was the difficulty of effectively engaging with the homeless population. Mayor Newsom and a few city workers developed a plan that would target reducing homelessness by going out on the streets of San Francisco and actually engaging with the homeless clients and connecting them with the essential city services and programs needed to foster self-sufficiency and assistance in getting people off the streets and engaged in needed services. Another challenge was finding a space large enough to accommodate not only the number of people utilizing services but also the service providers. Initially hotel spaces were utilized; however, due to the success of these outreach efforts, more and more people volunteered and individuals from the private sector offered their goods and services in an attempt to end homelessness in San Francisco.

This was over four years ago, and now this program is known as “Project Homeless Connect”. It has been recognized as a national best practice model and is being duplicated in various forms across the globe. Presently this “one stop shop” outreach program is held bi-monthly and has enlisted more than 20,000 volunteers, over 200 companies, and various sponsors offering pro bono services, including legal and medical assistance, massage, pet care, vision care, free voicemail, wheelchair repair, tickets home, food stamp assistance, and identification cards from the Department of Motor Vehicles. The NAEH reports that over a three year period, San Francisco reduced homelessness by 28 % and reduced street homelessness by 40%.

On December 5, 2007, I had the opportunity to participate in San Francisco’s 19th Project Homeless Connect event. The event was held at the Bill Graham Civic Auditorium and was sponsored by Blue Shield of California, which sent a number of volunteers for the day. There were several opportunities to volunteer on a team the day of the event. There was a *Check-In* station where those coming for services were assisted in identifying their needs and necessary

services through the gathering and sharing of information. The *Client Support* team members helped to engage clients by escorting them to each service site, and help them to navigate the center. The *Street Outreach* team traveled to different San Francisco neighborhoods encouraging clients to come to PHC where they can then receive a variety of social services. A *Medical* unit was available to clients for urgent care and medical services. *Food* services were offered through the Connect Cafe, a mini-restaurant, which serves meals to clients. *Activity* volunteers offered letter writing, foot washing, massage, free books, doggy day care, and a variety of other activity projects. *Data Entry* volunteers entered vital information into a database. The *Check Out* area allowed people to provide feedback in assessing and addressing their needs, particularly for future planning. In addition, there was a need for *Pre-Event* volunteers during the week and on weekends prior to the big event to assist in a variety of ways, such as data entry, packaging hygiene kits, managing the phone bank, or volunteer outreach.

In honoring the success of this program, the Federal Government declared December 3–7 as “National Project Homeless Connect Week” and PHC 19 was the kick off for that week. The event was attended by Phillip Mangano, Executive Director of the Federal United States Interagency Council on Homelessness as well as the Mayor himself who provided a personal tour of the service sites in the auditorium. This was an inspiring event with a tremendous show of support, resources and services.

On that day, there were 1,129 volunteers and they were able to accomplish the following:

- 1875 people were served (77 families, 24 children, oldest recipient was 93 years old)
- 291 people were screened for benefits (SSI, Medical, GA, Food Stamps).
- 164 people received medical care (79 people got follow up appointments).
- 42 people got put on Healthy SF (will now have ongoing medical care).
- 109 people got dental care.
- 68 people got methadone treatment.

- 98 people got mental health and substance abuse treatment.
- 273 people were counseled about employment opportunities.
- 200 people received glasses.
- 120 people got flu shots.
- 47 people received chiropractic adjustments.
- 133 people received legal assistance.
- 16,000 pounds of groceries were given out.
- 2,400 coats were distributed.
- 115 were off the streets (shelters, stabilization, housing, residential treatment).

On December 5, 2007, 76% of those who were served said they got what they came for.

Homelessness in Santa Cruz County

In 2001, the federal government adopted a national goal to end homelessness in ten years and required that governments receiving federal funding under the McKinney-Vento Homeless Assistance Act must conduct regular point-in-time counts of their homeless population. In 2007, Santa Cruz County Homeless Census and Survey Project Committee conducted a survey with several identified goals:

- To increase public awareness of homeless issues and generate support for constructive solutions;
- To provide an updated measure of changes in the numbers and characteristics of the homeless population. since the 2005 Santa Cruz County Homeless Census, and to track progress since the 2000 Santa Cruz County Homeless Census and Needs Assessment toward ending chronic homelessness;
- To improve the ability of policy makers and service providers to plan and implement services that meet the needs of the homeless; and
- To preserve current federal funding for homeless services and to enhance the ability to raise new funds;

According to the Santa Cruz County census survey, 2,149 homeless people were counted on the street within the 52 tract areas, plus an additional 154 unsheltered homeless people from the Families in Transition waiting list, and 486 homeless people

were counted in emergency shelters, transitional housing, or domestic violence shelters. The census total finding was 2,789 people. An additional 30 homeless people were reported in hospitals, jails, and rehabilitation facilities (which is not included in the 2007 census total finding). Of the 2,789 homeless people identified in the point in time count, 17% were in shelters versus 835 people who were unsheltered. Of the 429 homeless survey respondents nearly 62% had been homeless for a year or more. Of the 429 respondents, approximately 48% (204) can be considered chronically homeless. An estimate of 5,595 people was homeless at some time during 2006. Based on the 2006 population estimates from the State of California Department of Finance, this annual estimate of homelessness represents approximately 2.1% of Santa Cruz County's total population of 264,757 people.

Santa Cruz County Efforts to Address Homeless

In 1999, the Santa Cruz City Council formed the Homeless Issues Task Force (HITF) to study homeless issues and to develop recommendations to the City Council for ameliorating the conditions and conflicts relating to homelessness. The Task Force was charged with making recommendations to the City Council on: 1) the development of permanent year-round shelters for all segments of the homeless community, 2) opportunities for improving currently provided services, and 3) the rights and responsibilities of homeless persons.

On April 11, 2000 the HITF was able to present a final report to the City Council. Several areas of concern were identified by the HITF and grouped into subcommittees: shelter and housing; legal and law enforcement; employment, treatment and other services; and outreach, advocacy and process. The Task Force acknowledged the challenge of working with a broad charge within a short time frame and insufficient resources to provide more detailed recommendations to the Santa Cruz City Council. The group recommended that work groups be formed inclusive of community members and consumer of services to address further areas of focus. The Task

Force acknowledged that some areas of concern were too large to be addressed in the context of the group, such as the low income housing need without some government involvement. The Task Force was charged with making recommendations on the responsibilities of the homeless. The group reported that one way to achieve a high level of responsibility in the homeless community is to provide resources and opportunities to improve the quality of homeless people's lives, whereas meeting ordinary social responsibilities such as sleeping in unsafe sleeping zones and violating city's camping ordinance would be less challenging. The Task Force acknowledged the many efforts of various organizations and individuals but noted that, due to the reactive nature of this work, the efficiency and impact can become mitigated. The Task Force acknowledged the challenge of implementing an overall plan based on laws and policies without having a systematic understanding of who is homeless and what the needs of the homeless population are. The HITF was hopeful that, with the pending efforts of the homeless survey, these results would create a basis for the city, county and other stakeholders to collaborate in an effort to create a long-term county-wide plan to coordinate and prioritize their efforts.

Recommendations and Implications for PHC in Santa Cruz County

The Santa Cruz County Homeless Census and Survey data and the Task Force recommendations are in line with the National Alliance to End Homelessness' Ten Year Plan. This plan requires a pro-active approach and a renewed commitment to end homelessness. The results of the Santa Cruz Census Survey and the recommendations of the Task Force are key building blocks in assisting service providers, policy-makers, funding sources and local, state, and federal governments to better understand and plan for the needs of the homeless population. In addition, the census survey data will help provide an understanding of the causes and factors that contribute to homelessness and can assist in developing possible strategies to address these issues and concerns.

However, of equal importance in reference to this project, the Task Force reported that there is a "weak" system in place for county-wide coordination of services and there is lack of coordination of the city's various commitments to homeless services. The consequence is a failure to provide comprehensive services. Therefore, a cooperative strategy to coordinate existing services is a realistic starting point for Santa Cruz County in the launching of a Santa Cruz Project Homeless Connect.

Key components of implementing should include the following steps:

Create A Plan—The collaboration of services that are available at a single location with multiple opportunities to access services is a best practice model to address the multifaceted issues of homelessness and accessibility of services.

Involve Key Players—This strategy should have the support and input from a broad range of partners from the public, private, and nonprofit sectors. Santa Cruz PHC should have the endorsement of top city officials and commitment from a cross-section of agencies, such as human services, housing, law enforcement, employment, community development, health, mental health, welfare and other relevant agencies.

Establish A Shared Vision—The committee should establish obtainable objectives and create a vision for better outcomes by identifying the parameters, making recommendations, identifying who and how many will be served; addressing facility needs, identifying key participants, acknowledging key obstacles, identifying major costs and potential funding sources and highlighting benefits and next steps for the City of Santa Cruz.

Create Opportunities for Collaboration—This initiative is designed to improve access, availability, and quality of services provided. It is important to create policies and practices that can help build a community-wide network of comprehensive service delivery by creating opportunities for collaboration, shared partnership, and community ownership.

Implement the Plan—It is important to implement a schedule for the event including tasks, dates

of completion, and entities of accountability. A lead entity is needed to mobilize the community resources and to ensure the successful implementation of Santa Cruz PHC.

Publicize Success—All opportunities to demonstrate the ability to improve outcomes for the targeted population and express the successes in future dollars saved and taxpayer costs avoided should be publicized. Well publicized results that meet reasonable objectives will attract funding and resources to expand these innovative efforts.

This strategy is definitely a possibility for the Santa Cruz community in its attempt to address the issues and concerns of the homeless population. Santa Cruz Project Homeless Connect is one strategy within the broader scheme—a local effort with a national impact. Santa Cruz continues to address housing concerns through shelter services and affordable and low-income housing options. However, the option of establishing permanent supportive housing should be considered further. This approach, with the goal of establishing permanent supportive housing, will save money as it reduces the impact on other public systems. In identifying the need for the coordination of services, the HITF identified potential funding sources through the city budget, local governments and grant funding. Therefore, implementation of PHC may be a realistic goal in that the services would be provided by a range of organizations and programs providing a system of shared resources, thereby shifting the overall cost of services. Additionally, this approach would lead to better coordination, access, and continuity of services. Providing strategies to address these issues on the front end is cost effective because investment in prevention reduces the expensive cost of remedial care. Overall, the impact of better access to resources, services, and supports, as well as the stability of housing, can be immeasurable.

Acknowledgements

I would like to thank the County of Santa Cruz Human Services Department for allowing me this rewarding opportunity. Special thanks to City and County of San Francisco's John Murray, Senior Analyst, Nancy Bliss, Support Services Director, Judith Klain, PHC Director, and David Carrington Miree, Deputy Communications Director in the Mayor's office of Communications.

References

- U.S Department of Housing and Urban Development. *SuperNOFA for Continuum of Care Programs: Fiscal Year 2006*. Washington, D.C.
- National Alliance to End Homeless. *Chronic Homeless*. March 2007
- A Plan: Not A Dream. How to End Homelessness in Ten Years*, National Alliance to End homelessness, 2000. <http://www.endhomelessness.org>
- <http://www.sfconnect.org>
- City of Santa Cruz Homeless Issues Task Force Final Report*, 2000. <http://www.cabc.org/Research/HTFFinalReport>
- Santa Cruz County Homeless Census and Survey*, 2005. www.appliedsurveyresearch.org