

2017-2018 Annual Report

# Network for Homeless Solutions



The Network for Homeless Solutions is a collaborative effort among city staff, volunteers, community churches, and nonprofit and private organizations to address homelessness in Costa Mesa. Using a humanistic approach, homeless individuals are identified and directed to resources that will best assist them towards a life away from living on the streets of Costa Mesa.

Since 2011, the City of Costa Mesa has proactively focused on developing a multi-faceted program for Costa Mesa's homeless, including assisting with housing options, creating a social service registry, hiring outreach workers to work closely with the homeless, establishing a network of nonprofit and faith-based organizations, and redirecting new homeless individuals in our community to services in their city or state of origin.

### Mission Statement

To better coordinate city and regional resources to reduce factors that contribute to chronic homelessness, zoning violations and criminal activity-thereby bettering the quality of life in our city.

OUTREACH ACTIVITIES SUMMARIZED

# 02.

## CASE MANAGEMENT HOURS SUMMARY

STATUS	TOTAL HOURS	% OF HOURS	NUMBER OF PEOPLE
Housed	1,415	46%	135
Homeless	1,316	43%	345
Temporarily housed	232	8%	23
General public	85	3%	22
Total	3048	100%	525

BY THE NUMBERS:

**3,048**

total case management hours

**44.4%**

of total outreach case management hours are spent on top 20 clients.

**65%**

of the top 20 clients are housed.

**43.15%**

total percentage of hours homeless clients utilize.

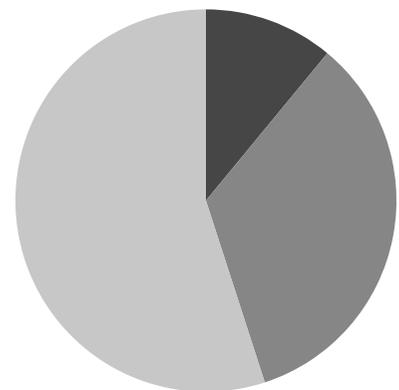
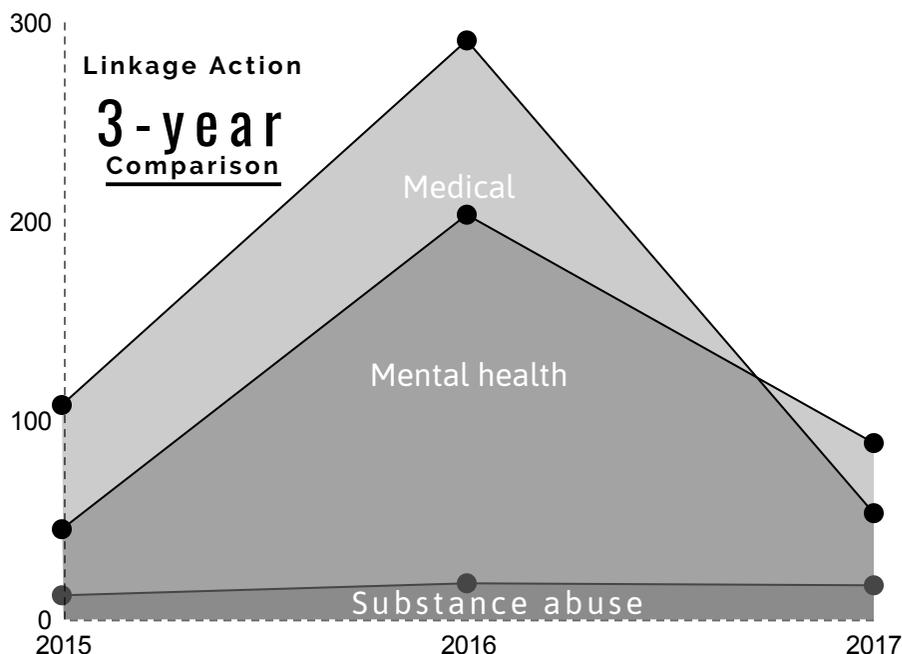
**46.40%**

total case management hours delegated to housed clients.

# 03.

LINKAGES

The term linkages refers to linking clients to various supportive services including: substance abuse, mental health, medical, social services, employment, transportation, collaborative case management or securing documents.



2017  
**Linkage Actions**

■ Substance abuse (11%) ■ Medical (34%)  
■ Mental health (55%)

Client disclosure of substance abuse and mental illness

**CO-OCCURRING DISORDER**

Clients often suffer from substance abuse and/or mental health disabilities. A combination of both disabilities is called “co-occurring disorders.”

These disabilities have been self-disclosed verbally by clients to the outreach workers. In some cases, clients have provided documentation detailing the severity of their disability.

**SELF DISCLOSURE**

As of 2017, there were 251 total clients who self-disclosed their disorder to outreach staff. About 27% of clients reported mental illness, 46% reported substance abuse, and 27% of clients reported co-occurring disorder.

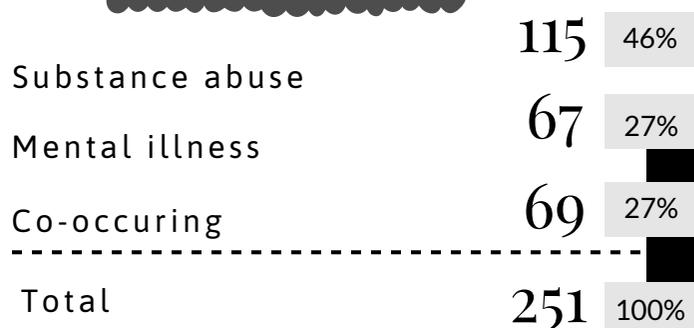
There were more self-disclosing issues related to mental illness and substance abuse, but there were fewer linkages made to substance abuse and mental health.

**POSSIBLE REASONS**

Possible reasons for the increase in self-disclosed disorders related to mental illness and substance abuse includes the passage of recent laws. This includes AB 109 and Proposition 47 which reduced felony charges and mainstreamed previously convicted criminals into society with little support and resources.

In addition, with the proliferation of case workers in the field, prolonged mental illness which may have gone undiagnosed and untreated in the past, is now being reported to outreach workers.

CLIENTS SELF DISCLOSE DISABILITIES



# 04.

HOUSING

## BY THE NUMBERS:

380

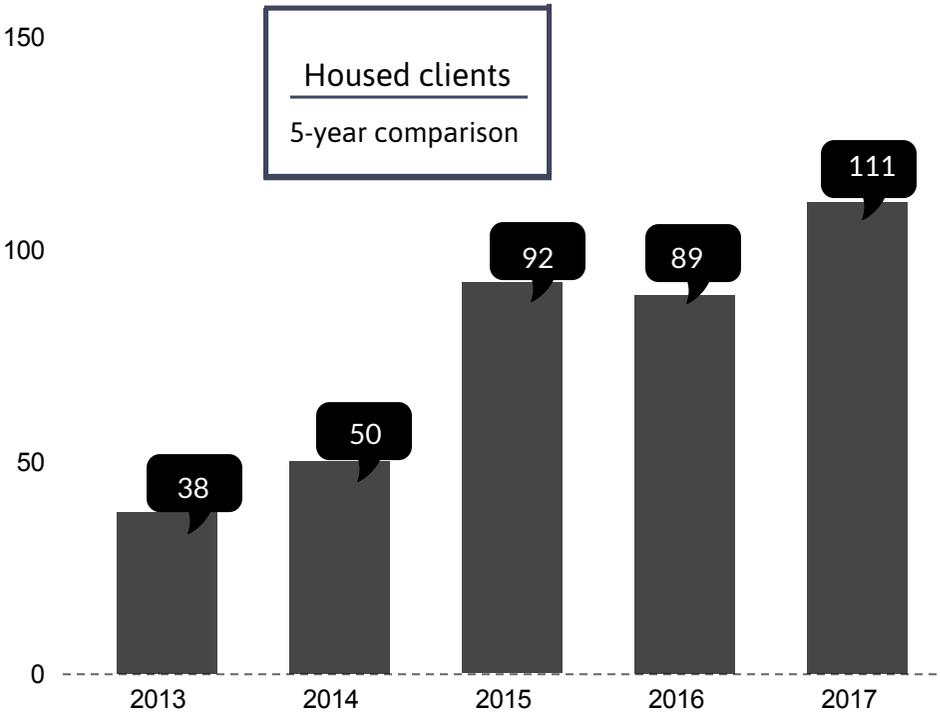
individuals housed since 2013.

277

individuals remaining in housing since 2013.

73%

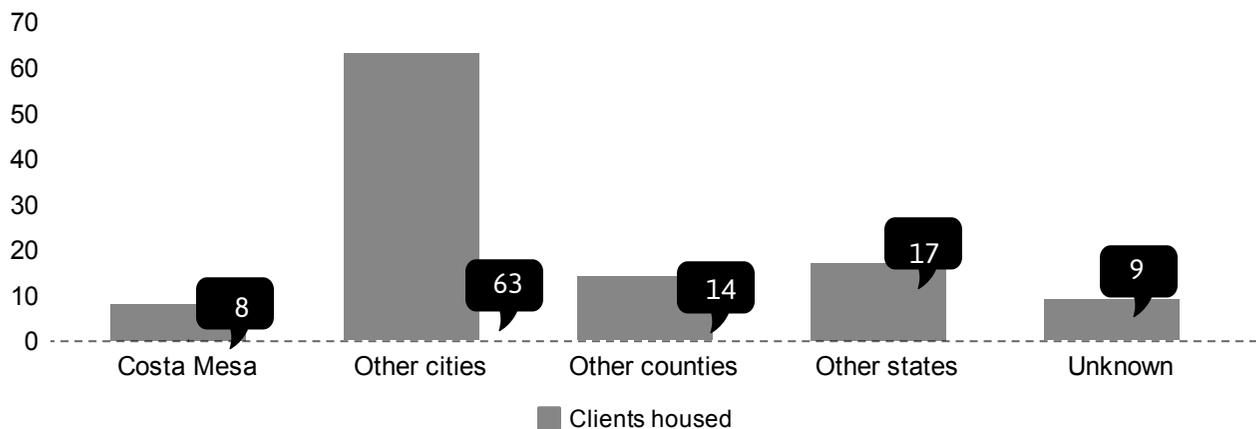
retention rate.



## DID YOU KNOW?

Many homeless clients have been living on the streets for several years and the transition to housing can be difficult for them. Outreach staff ensures that the individual is given all the resources they need to succeed in the transition to living inside. Some issues that staff experiences when attempting to house homeless individuals include: lack of identification, criminal records, mental and physical health issues, substance abuse, and lack of a housing plan. Forming trusting relationships with the client is critical to securing their cooperation.

Collaborating with governmental agencies, nonprofit organizations and community volunteers and networking with reliable private landlords has assisted outreach staff with securing much needed affordable housing for homeless residents. Additionally, a housing initiative called 211 Orange County Coordinated Entry has allowed individuals to be housed on a “housing first” model which involves the placement of the vulnerable individuals in housing regardless of their mental health, medical problems, and substance abuse.



## FACTS

93%

of clients are housed outside of Costa Mesa.

7%

of homeless are housed in Costa Mesa.

Clients need continued support once housed. Outreach staff offers follow up support to ensure clients have resources to remain housed.

## FINDINGS

High rents and strict underwriting criteria influence the lack of housing options in Costa Mesa. Some clients come from other cities and are reconnected back to their community of origin. The location of permanent supportive housing for the 211 Orange County Coordinated Entry program is chosen by federally funded housing providers that have received funding from both the County of Orange and the Department of Housing and Urban Development. The Network for Homeless Solutions has no control over the location of the housing for homeless individuals who are selected to participate in this program; it is based on availability as well as willingness of private landlords to participate in this program.

## CLIENT FOLLOW UP

2017	58	▲ 41% increase from 2016
2016	41	▲ 156% increase from 2015
2015	16	

### TYPE OF HOUSING

Clients that have been housed through the efforts of outreach staff are placed in three types of housing: temporary, permanent and emergency. In 2017 there were a total of 111 clients housed in permanent.

### TEMPORARY

Temporary housing is defined as housing that can be up to 90 days in tenure or longer with a defined end date in mind. Temporary housing is used when a client is at risk and needs a short term living option. In 2017 there were a total of 46 clients placed in temporary housing.

### PERMANENT

Permanent housing is housing that a client can remain in indefinitely, some of which contains wraparound case management services. A total of 111 clients were placed in permanent housing.

### EMERGENCY

Emergency housing is defined as housing which meets immediate needs.

# 05.

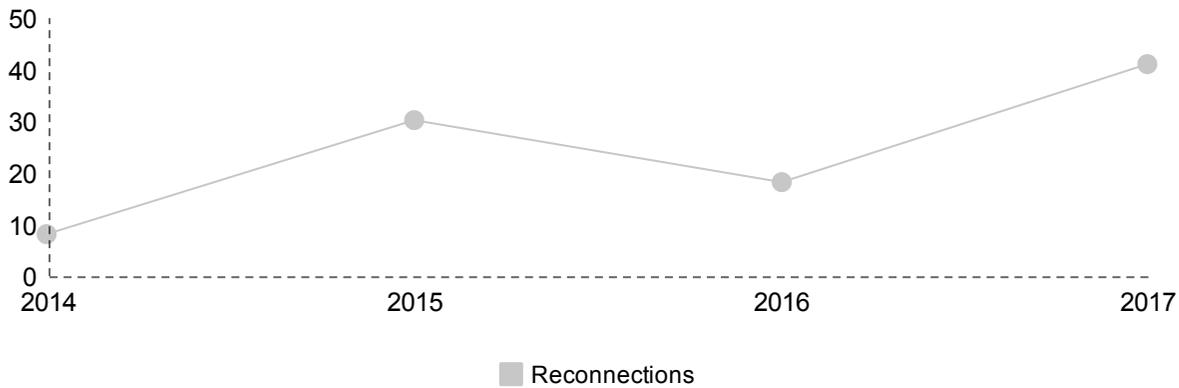
RECONNECTIONS

## PARTNERING WITH COMMUNITY

Through partnerships with local nonprofits, churches and organizations outreach is able to link nonresidents suffering from homelessness back to their community of origin. Once reconnected, they are able to establish connection with family and enroll in a shelter placement program.

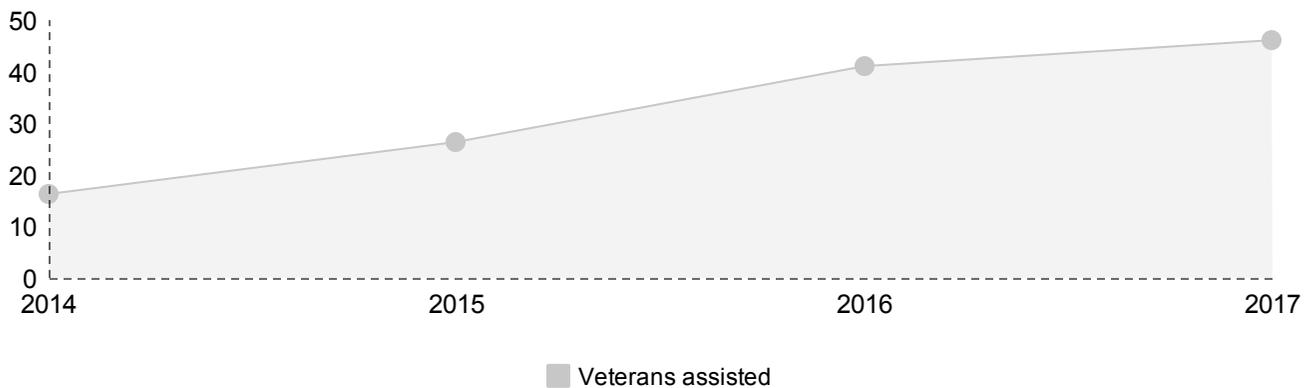
Many of these individuals are subjected to an extensive criminal background check before they are reconnected back to their hometown.

Partnerships that assist in the reconnection process include the Costa Mesa Police Department, Fresh Beginnings Ministries, The Crossing Church, Broken Hearts Ministry, Trellis, and Lighthouse Church.



## VETERANS

- Outreach has assisted a total of 129 veteran clients.
- NHS outreach staff continue to forge partnerships with Veterans programs such as: The Department of Veteran Affairs, Veterans Administration, Veterans First, Veteran Affairs Homeless Outreach Services and Volunteers of America.



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## GOALS FOR 2018

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Over the next year, city outreach staff will attempt to achieve the following:

- Implementation of a housing navigation system designed to provide a broader array of housing options for those Costa Mesa homeless residents seeking housing.
- Encouraging independence on the part of formerly homeless clients who are now housed.
- Continued collaboration with governmental community partners.
- Development of a more robust mentoring program for follow-up clients with the assistance of both Trellis and Fresh Beginnings Ministries.
- Remaining an active partner with Orange County 211 Coordinated Entry to ensure maximum placement of Costa Mesa's homeless into housing.
- Continuation of monthly coordination meetings with community volunteers and nonprofit organizations.
- Identification of additional employment resources that are willing to train homeless individuals and assist them in their job search.

# 06.

ADDITIONAL INFORMATION

## COORDINATED ENTRY

**Coordinated Entry**(CE) is a new requirement for all HUD Continuums of Care (Cocas) as established by the HEARTH Act. It paves the way for more efficient homeless assistance systems by:

- Helping people move through the system faster (by reducing the amount of time people spend moving from program to program before finding the right match.)
- Reducing new entries into homelessness (by consistently offering prevention and diversion resources upfront and reducing the number of people entering the system unnecessarily)
- Improving quality of data collection and providing accurate information on what kind of assistance consumers need.

Research has shown that prior to CE, there were several barriers to program entry. Many programs impose entry criteria used by the provider to screen out people who are not “housing ready” or capable of becoming “self-sufficient”– particularly through sobriety requirements, minimum income or employment requirements and service participation requirements. The effect of these barriers is to screen out those families and individuals who have been homeless the longest, have the greatest barriers to housing (including disabilities) and the greatest service needs.

Coordinated Entry eases the process of housing homeless individuals. The process involves assessing the individual and determining if they are in need of immediate, temporary or permanent housing. Through the assessment, individuals are given a score; the higher the score, the more at risk the individual is. The clients with the highest scores are given priority for permanent housing while, the lower scores are reviewed for rental assistance until an alternative is found.

### BY THE NUMBERS:

120

assessments completed between Jan. - Dec. 2017.

69

were document ready and submitted to the County Coordinated Entry System.

67

of those document ready were eligible for Coordinated Entry Permanent Supportive Housing.

38

clients were housed through a coordinated entry provider. Remaining clients were diverted and housed through independent sources.

**ORANGE COUNTY MENTAL  
HEALTH STATISTICS**

**Psychiatric Emergency Response Team(PERT) highlights:**

The Psychiatric Emergency Response Team provides a licensed clinical social worker two days per week to assist officers in addressing the mental health needs of the community. The social worker provides emergency psychiatric evaluations, coordinates hospitalizations as needed and follows up with patients to encourage linkage to community services. Additionally, the social worker provides mental health intervention training to officers.

		CMPD PERT Report 2017						
Month	Hours	Contact	Referral & Linkages			Housing		
			Legal Hold M.H.Eval	Hospitalized	Linkage Others	Private	Homeless	Other
Januray	36	26	10	5	5	15	10	0
February	23	30	7	4	0	10	6	2
March	19	22	6	1	0	12	2	2
April	18	33	2	0	0	24	1	8
May	25	29	6	2	0	22	2	5
June	15	9	0	0	15	18	1	2
July	22	13	4	0	3	7	6	0
August	22.5	18	5	3	0	9	3	3
September	44	15	6	2	0	12	3	0
October	32	26	6	3	0	13	13	0
November	13.3	13	2	1	1	9	4	0
December	9.5	12	6	3	3	7	3	2
<b>TOTAL</b>	<b>279.3</b>	<b>246</b>	<b>60</b>	<b>24</b>	<b>27</b>	<b>158</b>	<b>54</b>	<b>24</b>