# SUPPORTIVE HOUSING SERVICES QUARTERLY REPORT

SUBMITTED BY (COUNTY): MULTNOMAH

FISCAL YEAR: 2024

QUARTER 2

**SUPPORTIVE HOUSING SERVICES** 

**QUARTERLY REPORT** 

The following information should be submitted **45 calendar days after the end of each quarter**, per IGA requirements. When that day falls on a weekend, reports are due the following Monday.

	Q1	Q2	Q3	Q4
Report Due	Nov 15	Feb 15	May 15	Aug 15
Reporting Period	Jul 1 – Sep 30	Oct 1 – Dec 31	Jan 1 – Mar 31	Apr 1 – Jun 30

Please do not change the formatting of margins, fonts, alignment, or section titles.

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#### **Section 1. Progress Narrative**

In no more than 3-5 pages, please tell us about your investments and programming during the reporting period, focusing on at least one of the following topics per quarter: racial equity, capacity building, regional coordination and behavioral health, new investments, leverage, service systems coordination or any other topic connected to your local implementation plan.

Please also provide updates and information (including numbers or data) to demonstrate progress towards your work plan goals. Note that each topic/work plan goal must be covered in at least one quarterly report during the year. [Example, if you set an annual goal to increase culturally specific provider organizations by 15%, please tell us by quarter 2 how much progress you've made towards that goal (e.g. 5%)]

Please also address these areas in each quarter's narrative.

- Overall challenges and barriers to implementation
- Opportunities in this quarter (e.g. promising findings in a pilot)
- Success in this quarter (e.g. one story that can represent overall success in this quarter)
- Emerging challenges and opportunities with service providers

#### **Executive Summary**

In the second quarter of FY 2024 the Joint Office of Homeless Services made significant progress toward our Supportive Housing Services (SHS) goals related to capacity building, community engagement and data quality, and spent \$43 million in Supportive Housing Services (SHS) funds, keeping pace with our spending plan for this fiscal year. The Joint Office also increased our Long-Term Rent Assistance portfolio capacity to 1,020 vouchers, and maintained compliance with our Corrective Action Plan. This report will cover those achievements in further detail and provide new information on key data and evaluation goals set in our FY 2024 Annual Work Plan. The key takeaways this quarter are:

- A total of 2,338 people actively received SHS-funded services/rent assistance in Q2
- JOHS finalized a contract with United Way to award \$10 million in capacity-building grants<sup>1</sup>
- Over 150 community providers attended our inaugural provider conference
- 20 out of 29 steps were completed to implement the Built for Zero initiative
- New geolocation capabilities were tested to improve data collection
- 215 Population B RLRA vouchers were added to our portfolio, bringing the total to 1,020 vouchers (79% for Population A, 21% for Population B)
- Corrective Action Plan reports were submitted in October, November and December

Building upon the progress made in Q1, Multnomah County saw an increase in placements in supportive housing and rapid rehousing, and in people served with homeless prevention in Q2. **Taken together, we have housed more people so far this fiscal year than at the same point last year — a mid-year record — which is an encouraging sign as we enter the second half of the fiscal year.** Historically, across all housing programs and across all funding streams, the second half of a fiscal year tends to see more placements than the first half, and we expect that trend to hold with our SHS programming this year.

FY 2024 Annual Housing and Program Quantitative Goals						
Category 1: Regional Metrics	Year to Date Q1+Q2	FY24 Work Plan Goal	% achieved of goal based on people			
Supportive Housing	266 people 222 households	655 people 490 households	40%			
Rapid Rehousing	242 people 174 households	690 people 515 households	35%			
Other Permanent Housing	29 people 18 households	N/A	N/A			
Homeless Prevention (Eviction Prevention)	140 people 115 households	800 people 600 households	17%²			

<sup>&</sup>lt;sup>1</sup> Approved by the Board of County Commissioners in September 2023

<sup>&</sup>lt;sup>2</sup> Homeless prevention outcomes with SHS funding will be significantly lower this year because the County will use remaining American Rescue Plan Act (ARPA) funds, which will expire at the end of this year.

#### **CORRECTIVE ACTION PLAN**

The Joint Office submits monthly CAP reports to the Metro Oversight Committee, tracking progress on 15 spending goals.<sup>3</sup> As of Q2, the Joint Office has completed six of the CAP goals and is on track with eight others. One goal — Housing Multnomah Now — is identified as being at-risk due to lower than projected monthly spending. But, as indicated in the December CAP report and discussed during the Jan. 8, 2024, Metro Oversight Committee meeting, the Joint Office is working to improve the rate of progress with Housing Multnomah Now by adding additional referral pathways that will allow more people to access the program's housing services. Additionally, the program will be starting outreach at its third location in the Old Town neighborhood in February 2024.

# **Assessing System Capacity**

This quarter we are excited to provide updated information on the number of individuals benefiting from Supportive Housing Services (SHS). While our quarterly reports to the Metro Oversight Committee focus on the number of new individuals served each quarter, we also recognize the importance of conveying a more comprehensive picture of ongoing SHS utilization. Starting this quarter, we are also including information on the number of individuals who began receiving services in previous fiscal years who are still actively being served.

FY2021 - Present: 2,338 People Actively Served in Quarter 2					
Project type	FY 2024 Q2  Newly Served	FY 2024 Q1+Q2  Newly Served in FY 2024	FY 2021-FY2023  Still receiving services from previous years	FY 2021-Present  Total receiving services in Q2	
Supportive Housing	106 people	266 people	598 people	864 people	
	92 households	222 households	472 households	694 households	
Rapid Rehousing	113 people	242 people	293 people	535 people	
	78 households	174 households	189 households	363 households	
Other Permanent	12 people	29 people	438 people	467 people	
Housing	5 households	18 households	187 households	205 households	
Homeless Prevention (Eviction Prevention)	65 people 55 households	140 people 115 households	332 people 153 households	472 people 268 households	
Total	296 people	677 people	1,661 people	2,338 people	
	230 households	529 households	1,001 households	1,530 households	

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<sup>&</sup>lt;sup>3</sup> Corrective Action Plan reports are included in the Metro Oversight Committee "Meeting Packets," which are preserved on the Metro website. January 2024 meeting materials can be found here: <a href="https://www.oregonmetro.gov/events/supportive-housing-services-regional-oversight-committee-meeting/2024-01-08">https://www.oregonmetro.gov/events/supportive-housing-services-regional-oversight-committee-meeting/2024-01-08</a>

Upon closer examination of these categories, we note that 598 individuals who began receiving supportive housing services before FY 2024 are still receiving services. This aligns with expectations, as these individuals are either enrolled in permanent supportive housing programs or in recovery-oriented transitional housing programs, with SHS covering long-term rent assistance and/or wrap-around support services. When we add the 266 individuals who entered supportive housing programs since the start of FY 2024, this brings us to a total of 864 individuals currently benefiting from supportive housing programs. This figure is anticipated to rise annually as we expand system capacity to accommodate a total of 2,336 supportive housing units/vouchers, one of the key goals Multnomah County set in our 10-year Local Implementation Plan, and that Metro set for regional implementation

In terms of rapid rehousing and other permanent housing, we also anticipate the number of people actively served to rise annually. With homeless prevention, this number will fluctuate based on need and funding availability; however, we are building a year-over-year foundation to annually serve 1,000 households.

SHS investments not only allow us to serve individuals now — they allow us to continually expand our system capacity. This ensures that even as turnover might occur in housing programs, those slots remain available and are able to continue serving people for years to come. This sustained effort underscores our commitment to meeting the charge of the SHS Measure to reduce and address chronic homelessness effectively in our region.

#### **Investments & Programming**

Central to the SHS Measure is our ability to meaningfully engage priority populations and communities, increase provider and system capacity, and explore components of the work that can be implemented at a regional level to create a collective response to houselessness in our region.

#### **SUCCESSES**

#### **Financial Spend-Down**

In the fall of 2023, JOHS made a commitment to Metro to spend at least 75% of the annual program budget for the SHS program. The other two counties are also aiming to spend less than 100% of their SHS revenue. This year, Clackamas County's goal is to spend 65% and Washington County's is 80-85%. We are happy to report that based on Q2 spending, we are on track to accomplish our goal. In the first two quarters of FY 2024 Multnomah County spent \$43 million in SHS funds, which exceeds our total SHS spending during the first three quarters of FY 2023. The increase in our spending rate is a combination of urgent implementation and increased expenditures as programs have matured. This spending can also be attributed to the Joint Office sustaining current SHS programs, launching new ones, and infusing housing resources into areas of highest need in our community.

#### **Regional Long-Term Rent Assistance Projects**

Another success this quarter is a number of Regional Long-Term Rent Assistance (RLRA) projects coming online, many of which represent collaborations between the Joint Office and other County departments that are also serving people experiencing homelessness and housing instability. The RLRA program provides a rent subsidy to qualified low-income tenants and allows private landlords to rent apartments

and homes to these tenants at fair market rates. In Multnomah County, the RLRA program is administered by Home Forward (the federal Housing Authority of Portland), which delivers rent assistance directly to property owners in a timely and predictable manner and works with community-based organizations to enroll recipients in the RLRA program (as well as other long-term and time-limited subsidies, and eviction prevention financial assistance).

#### **Department of County Human Services**

In Q2 DCHS launched new RLRA housing programs in both its Intellectual and Developmental Disabilities (IDD) and Aging, Disability, and Veterans Services (ADVSD) divisions. IDD received 15 long-term PSH RLRA vouchers, which will increase their inventory of PSH vouchers from 25 Housing Choice vouchers (funded by HUD) to a combined total of 40 PSH vouchers in Multnomah County. The addition of the PSH RLRA vouchers increased IDD's housing capacity by 35%. The teams are fully staffed and onboarded, and have started placing people into housing. In November IDD successfully hired and onboarded its first SHS Case Manager to provide specialized support and resources for IDD clients participating in the RLRA program. ADVSD also received 15 vouchers, and onboarded its RLRA case manager at the same time as IDD. Both programs started housing participants in December. The DCHS RLRA team anticipates expanding to full caseloads in Q3 and placing all 30 vouchers by the end of this fiscal year.

#### Health Department Behavioral Health Division (BHD)

The BHD received and began allocating an additional 25 Intensive Case Management (ICM) and Assertive Community Treatment (ACT) RLRA vouchers for people with dual diagnoses — people with both a substance use disorder and mental health challenge — bringing the total number of vouchers to 150. One example of how these vouchers are changing lives was Central City Concern's ability to utilize an ACT/ICM voucher to house a young transgender person that had experienced housing instability for many years and was struggling with substance use and severe and persistent mental illness. After an adjustment period with wrap-around support services from their ACT team, they are loving their new apartment and have had great success. The RLRA voucher was instrumental in moving them forward in their recovery journey. By prioritizing PSH RLRA vouchers for Population A individuals we are strategically using year-over-year funding to support individuals who face multiple challenges to enter housing, with the goal of stabilizing our chronically homeless population.

#### **JOHS Family System**

In partnership with El Programa Hispano Católico (EPHC), two families were housed with tenant-based RLRA during the reporting period, and the team was actively working with five more. These are some of the first families who have been housed using our new Population B RLRA vouchers. Families become eligible by demonstrating a history of housing instability and engaging with a stability program. For some families, the only barrier for them to fully support their families is an ongoing rent subsidy. This may be because the head of household is on a fixed income or because their wages cannot meet the high housing costs in our region. EPHC also reported success establishing key partnerships with landlords and property owners, as well as implementing staff trainings in their RLRA program such as Domestic Violence 101 for Housing, Virtual Harassment Prevention, Assertive Engagement and Trauma-Informed Care, which has helped ensure staff have the tools to effectively support families.

#### **JOHS Youth System**

Finally, additional funding that was infused into the youth system as a result of Multnomah County's Corrective Action Plan (CAP) has successfully opened doors for youth who previously faced high barriers in accessing housing assistance. In particular, Joint Office provider New Avenues for Youth (NAFY) reported they have been able to expand support for youth who encounter difficulties obtaining Section 8 vouchers due to their immigration status. The flexibility and inclusivity of the SHS funding made the housing process nearly barrier-free for eligible youth, allowing NAFY to swiftly transition youth from shelters, transitional programming, and those living unsheltered.

#### **OPPORTUNITIES**

#### **New Supportive Housing Projects**

The third year of SHS funding brings with it the completion of a number of housing projects that have been in the planning and development stages, getting us closer to our FY 2024 goal of bringing on 550 units/vouchers. These projects will focus on providing permanent, affordable housing and services to those who need them most, with an emphasis on supporting people experiencing chronic homelessness. Thanks to the efforts of Joint Office staff and providers, including work that took place during Q2, several new housing developments are scheduled to open in the spring and summer of 2024.

- The Fairfield will provide 75 units of permanent supportive housing (PSH) in downtown Portland, targeted to serve people experiencing or at risk of homelessness who request culturally specific services for BIPOC residents, with Urban League providing on-site services focused on peer support, mental health, housing retention and life skills. The Joint Office is providing \$1,312,500 in SHS funds to the Urban League to provide supportive services as well as 24/7 staffing.
- The Hazel Ying Lee Apartments will create 206 affordable rental units in the Creston-Kenilworth neighborhood of Portland, including 30 PSH units, in partnership with Home Forward. The Joint Office is providing \$300,000 in SHS funding for the support services attached to the PSH units (\$10,000 per PSH unit) at the property.
- Powellhurst Place from Northwest Housing Alternatives will create 65 affordable rental units in
  the Powellhurst-Gilbert neighborhood of outer Southeast Portland. Forty-six of the units will be
  two-bedroom apartments for families, and 12 units will be PSH, set aside for population A
  individuals who are experiencing or at-risk of homelessness and who request Native American
  culturally specific services. The Joint Office is providing \$120,000 in SHS funding for the
  supportive services attached to the 12 units of PSH, which will be offered by NARA.

These new housing opportunities will provide an additional layer of safety and stability for people living on the streets in Multnomah County, and we look forward to sharing the impact of these investments in future reports.

#### Community Engagement with Service Providers and the SHS Advisory Committee

As described in Multnomah County's 2020 Local Implementation Plan, a cornerstone of the SHS Measure is ensuring continued engagement with community-based organizations and community members. In particular, SHS calls for deliberate and meaningful inclusion of BIPOC communities and individuals with lived experience of houselessness to inform investments and the design of SHS programming. The SHS Advisory Committee — the body charged with providing guidance and recommendations to the Joint Office on SHS investments — and its associated capacity-building and equity-focused workgroups, met on a monthly basis with the Joint Office's SHS team in Q2 to learn about and weigh in on SHS implementation.

Addressing provider and system capacity is critical for the success of the SHS Measure, and, more importantly, to ensure that people living unhoused receive adequate services and housing opportunities that meet their individual needs. In Q2, the SHS Advisory Committee's workgroup focused on capacity building, which resulted in a set of recommendations focused on capacity-building strategies to improve service delivery and accountability. These recommendations will be refined and finalized by the larger committee in Q3 and then shared with Joint Office leadership.

Through SHS funding, the Joint Office has expanded staff capacity to focus on the development of provider engagement, including holding its first Provider Conference in late October 2023. The one-day conference was created in partnership with community providers, with the 10 conference sessions designed to be collaborative, elicit authentic feedback and offer an opportunity to problem-solve around various topics. The Joint Office also used time at the conference to engage with providers about the 2023 Classification, Compensation, and Benefits Study (wage study). During that session, providers shared their initial reactions to the study's findings and provided input on how they plan to use the information to improve workforce recruitment, retention, and equity at their organizations. Additional follow-up outreach is planned for Q3.

To further the conversation around system coordination, two sessions addressed the community-wide shelter strategy and strategies for making better connections for support across other systems. The Joint Office is aiming to make these conferences recurring, and has plans to host another conference in Q3 that will build upon these initial conversations and increase our ability to engage with folks across the different sectors of homeless services work.

#### Capacity Building through Organizational Health

In Q2, the Joint Office distributed \$10 million in organizational health funds to United Way of the Columbia-Willamette (UWCW). This sizable investment will be used to bolster provider retention and workforce recruitment in alignment with the retention analysis and recommendations from the Joint Office's SHS-funded 2023 Classification, Compensation, and Benefits Study,<sup>4</sup> as well as the systemwide investment priorities outlined in Multnomah County's 2020 Local Implementation Plan. Contracting with United Way creates a pathway for the 68 providers who have an established contract with the Joint Office to be awarded organizational health grants in an expedited process. Working with United Way removed the challenge of using the County's reimbursement model. While allocation of the grants are scheduled to take place in Q3, the work in Q2 was pivotal for getting these funds into the hands of providers.

#### Creating Regional Definitions with Guidance from the Tri-County Planning Body

The Joint Office believes that in order to deliver on the commitments of the SHS measure, the three counties and Metro must collectively identify new ways of working together as a region, and make sure we're aligned on how we define key aspects of SHS work. In a 2024 audit of SHS implementation, the Metro Auditor suggested that variations in data and program definitions make it difficult for the public to track the progress of SHS. Their critique considered multiple areas where definitional alignment would be beneficial to increasing transparency in the reporting process. The Joint Office agrees that further work is needed in this area, and also want to highlight the strong coordination that is already occurring

<sup>&</sup>lt;sup>4</sup> Joint Office of Homeless Services, 2023, *Classification, Compensation, and Benefits Study*. PDF is housed on the Joint Office's website and can be accessed through this hyperlink: <a href="https://live-johs.pantheonsite.io/wp-content/uploads/2023/08/REVISED-JOHS-CCB-Study-August2023.pdf">https://live-johs.pantheonsite.io/wp-content/uploads/2023/08/REVISED-JOHS-CCB-Study-August2023.pdf</a>

at the regional level to create shared definitions for our work. In the past quarter, the counties worked with each other, Metro and the Tri-County Planning Body (TCPB) to further define what regionalism means in terms of system improvement. The table below, created by the counties, was presented at the 2023 December TCPB meeting.

Type of Regionalism	Definitions & Examples
Policy	Shared definitions, allowances, and approaches that are universal across the region, but implemented separately in each county (according to local context).
	<b>Examples:</b> Regional Risk Mitigation Program Policies, Point-In-Time Count alignment to allow for each county to do their own count and then compile all three counts into the first-ever regional analysis.
Programmatic	Centralizing a program that will serve the region within one county.
	<b>Example:</b> Multnomah County taking on the responsibility, from the City of Portland, to become the regional HMIS administrator. The program will be held by one county but will be informed through alignment of programmatic principles.
Administrative	Consolidating administrative functions across the region to one county or Metro, with the shared goal to reduce overall administrative expenses of the SHS program.
	<b>Example:</b> In 2022 and 2023, Washington County was the procurement lead to administer the Tri-County Request for Programmatic Qualifications (RFPQ).

Additional details have been added by the Joint Office since this table was shared with the TCPB

These shared definitions will operate as a guiding framework to continue establishing our regional approach, and help us move quickly to implement the TCPB's goals of improving and modernizing our regional approach to reducing homelessness.<sup>5</sup>

In Q2, the Joint Office, in collaboration with the other two counties, achieved a major milestone in reporting on financial information about programmatic spending. While we were unable to include a spending comparison of population A/B programming costs in the FY 2023 Annual Report, we are committed to including it in the FY 2024 report. Together the counties aligned on a common methodology to assess annual programmatic spending, taking into account all of the support services delivered throughout the fiscal year (many of which are not recorded in HMIS). The methodology was

<sup>5</sup> Metro Tri-County Planning Body, 2023, Tri-County Planning Body Goal and Recommendation Language. Government Document. The PDF is housed on Metro's website and can be accessed by this hyperlink: <a href="https://www.oregonmetro.gov/sites/default/files/2023/10/26/2023-tcpb-goals-and-recommendations-20230510.pdf">https://www.oregonmetro.gov/sites/default/files/2023/10/26/2023-tcpb-goals-and-recommendations-20230510.pdf</a> explained in a memorandum submitted to the Metro Housing Department and shared with the Metro Oversight Committee in January 2024.

### **Annual Work Plan Progress**

This quarter the Joint Office made progress on multiple research projects that will directly impact the priorities outlined in our Local Implementation Plan and FY 2024 Annual Work Plan.<sup>6</sup> The Joint Office's Planning and Evaluation team is focused on several studies to inform future investments and services. The 6-person team is fully hired and is conducting strategic planning, leading projects that help us use our data more effectively. The following projects are managed by this team and we are excited to provide a comprehensive update.

#### **BUILT FOR ZERO**

Since late 2021, Portland, Gresham, and Multnomah County have aligned themselves with this initiative, joining forces with over 90 cities and counties across the United States committed to bolstering data-driven systems aimed at continuously reducing homelessness within their communities. This is in line with the recent Metro audit's call for enhanced data transparency and accuracy regarding homelessness. The Joint Office included implementation of the Built for Zero initiative as an SHS annual goal in FY 2022 and FY 2023, and we are excited to share our cumulative progress so far.

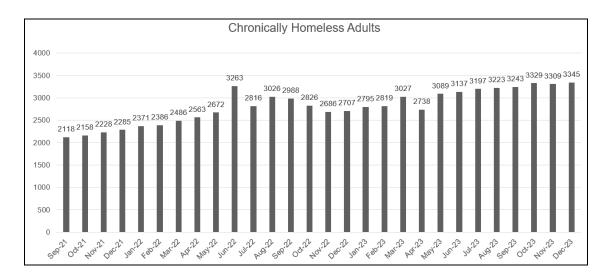
Because of our investment of Supportive Housing Services funds, the Joint Office has been actively working on improving data collection and analysis regarding chronic homelessness through our work on the Built for Zero initiative in partnership with national nonprofit Community Solutions. Before our Built for Zero work, the baseline data for measuring chronic homelessness was the Point In Time Count's street survey, conducted once every two years. The Joint Office has been working on implementing real-time data collection on the number of people meeting the Population A definition of chronic homelessness, creating a "by-name list" of everyone experiencing chronic homelessness.

While work is still underway with Community Solutions to continue validating the data entry and programming processes, the Joint Office is in the last phase of that work. Implementation is tracked by Community Solutions and is dependent on completing a total of 29 data and planning tasks. These tasks are called the "All Singles Scorecard Score" (see Appendix A). The Joint Office has currently completed 20 of the 29 tasks. The current work is focused on clearly mapping out the geographic coverage of the outreach service areas and creating a process to regularly assess data from those interactions to determine if outreach services are reaching all of the unsheltered individuals in Multnomah County.

Based on the data improvement work with Community Solutions, the Joint Office's Planning and Evaluation Team is now able to share monthly snapshots of our real-time data. Compared to the data produced by the Point In Time Count, our by-name list data significantly enhances our understanding of those in need. Over time, this will allow us to track the effectiveness of different interventions in resolving chronic homelessness.

Number of People Experiencing Chronic Homelessness, September 2021-December 2023

<sup>&</sup>lt;sup>6</sup> See Category 3: Capacity Building and Category 4: Other Annual Goals based on LIP



As reflected in the graphic, as we have been able to better count people experiencing chronic homelessness through our work with Built for Zero, the data show a related increase month over month — ultimately leveling off into what may be more of a true baseline as we reach people who were formerly uncounted. Because we have worked to improve our data completeness, these numbers tell a story about data comprehensiveness as well as levels of chronic homelessness. Community Solutions has guided us in additional data quality analysis for data reliability. Implementing monthly snapshots of the number of people experiencing chronic homelessness has already broadened our understanding of the potential gaps in services for people experiencing homelessness, especially those currently unsheltered (people not in a shelter program and likely sleeping outside or in a vehicle).

By comparing the chronic homelessness count from the 2022 Point In Time Count with the number of adults recorded in the HMIS data system in January 2022, it was found that at least 25% of chronically homeless individuals were not captured in the HMIS system. Additionally, there were 915 individuals counted in the 2022 Point In Time Count whose chronic homelessness status wasn't confirmed.

This approach provides a departure from solely relying on a semi-annual street and annual shelter count. Instead, with real-time, client-level data, we will have more nuanced insights into the dynamics of chronic homelessness over time, facilitating more targeted and timely interventions. The efforts undertaken by the Joint Office aim to enhance data accuracy and frequency in tracking chronic homelessness, and will ultimately lead to improved insights and potentially more effective interventions and support for individuals experiencing homelessness.

#### **Piloting New Geolocation Capabilities**

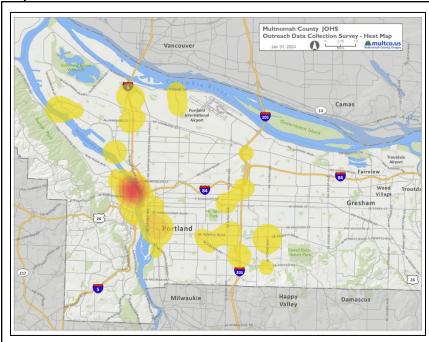
The Joint Office's Outreach Data Collection Pilot, launched in August 2023, has nearly completed its six months of outreach-based data collection with Central City Concern and Transition Projects. This pilot aims to enhance data quality and the Joint Office's effectiveness in reaching and connecting people to services. It incorporates new approaches in key areas such as data collection, Coordinated Access assessment, and outreach coordination.

The pilot involves outreach workers using Survey123, an ArcGIS tool, to help map outreach work. So far, 332 surveys have been completed as part of the pilot. These interactions were seamlessly integrated into outreach staff's usual service delivery, representing a portion of their overall interactions. A

comprehensive analysis of outreach data and its correlation to the inflow to the Built for Zero By-Name List is slated for completion this fiscal year.

Throughout the pilot, the ArcGIS tool has been instrumental in capturing the geolocation of outreach services, thereby delineating the outreach efforts across the geographic community. The objective is to demonstrate consistent, coordinated and reliable outreach to ensure that at least 90% of the unsheltered population is captured on the By-Name List. Initial reporting suggests that the four outreach programs, implemented by the two providers participating in the pilot, performed outreach in several key areas of Multnomah County.

**Snapshot of Geolocation Outreach Data Collection Pilot** 



Note: Only four outreach programs (across two providers) are participating in the data collection pilot, and this geolocation map shows data collected from only a portion of their overall work. It does not reflect all of the outreach services in Multnomah County.

Additionally, "hot zones" only appear on this map if there was more than one outreach service performed in the area.

Some participating outreach programs operate by referral and are directed to specific locations based on specific criteria. From the snapshot we can see that the participating organizations in this pilot did not conduct outreach in Gresham, Fairview, Wood Village or Troutdale. There are other outreach services in those areas, including services through the City of Gresham and the Multnomah County Sheriff's HOPE Team, which is based in Troutdale; however, the snapshot gives us line of sight into important questions about service distribution and geographic equity. If geolocation tracking becomes part of our overall data collection strategy, we will have real-time data on service distribution of outreach and mobile services.

The integration of advanced geolocation strategies, particularly Survey123 paired with geolocation software, enables efficient data collection during engagements. This empowers our outreach workers to record service types provided, individual preferences and vital information for a comprehensive understanding of the unsheltered population's needs.

Additionally, the updated data-driven approach supports the implementation of a real-time list of everyone entering and exiting homeless services in Multnomah County. This dynamic list allows for comparisons to the Point in Time Count, facilitating effective triaging of individual cases, with a specific

focus on those experiencing unsheltered homelessness. Overall, these initiatives demonstrate a commitment to addressing homelessness comprehensively and sustainably, leveraging technology, data, and targeted interventions to make tangible improvements in individuals' lives and move closer to the goal of achieving "functional zero" (a term used by Community Solutions for the goal of supporting individuals to exit homelessness at the same rate that individuals are entering homelessness in a community).

#### **SHELTER STUDIES**

The Joint Office also made headway on its capacity-building Work Plan goal to analyze effective shelter models. This work is taking place through three studies conducted by the JOHS Planning and Evaluation team: an analysis of best practices in providing emergency shelter services (Effective Shelter Models Evaluation), a mixed methods analysis of effective alternative shelter programs (Alternative Shelter Evaluation), and a two-part, quantitative and qualitative analysis of the determinants of successful exits from unsheltered homelessness into permanent housing (Pathways to Housing Study).

#### **Effective Shelter Models Evaluation**

In Q2, the Planning and Evaluation team collaborated with the Multnomah County Chair's Office to collect data through a survey of all Multnomah County shelters that report outcomes in HMIS. A total of 35 shelters responded to the survey, which asked questions related to capacity, staffing and service provision. The evaluation will pair this information with outcome data from HMIS to determine what variables have the strongest connection to successful outcomes. This research will improve the quality and effectiveness of emergency shelters as a pathway to permanent housing, thereby shortening shelter stays and making more bed space available for those who need them most. This evaluation is currently in the analysis stage, and a final draft of the report will be released in coming months.

#### **Alternative Shelter Evaluation**

During Q2 the Joint Office also collaborated with Portland State University's Homelessness Research and Action Collaborative to evaluate alternative shelters, with a report scheduled to be released in Q3. The study considers the cost efficiency of different types of alternative shelter (including motel shelters, congregate shelters, safe rest villages and other village-style shelters) by comparing the total cost to launch and maintain each type of shelter. It will also provide insight into the effectiveness of each type of adult shelter model using HMIS outcomes data to understand how many participants are moving into permanent housing from each model, and what types of participants are being served by each.

Better understanding the experiences of community members who use alternative shelter services was a priority for the study. To accomplish this the team conducted almost a dozen interviews to identify shelter characteristics most likely to help participants succeed in securing housing and meeting their goals. The study will provide key insights to decision makers in Multnomah County regarding the most effective use of SHS shelter dollars by offering cost breakdowns and ways to understand the tradeoffs of various shelter models. Significantly, it will also offer recommendations informed by lived experience to ensure the process of moving from shelter to permanent housing becomes more responsive to the needs of our community.

#### Pathways to Housing Study

The Pathways to Housing Study was still in the budgeting process at the end of Q2, with the goal of launching in Q3. The first phase of this two-year study will rely on HMIS data and interviews with 400 people to gain a better understanding of the barriers and challenges that keep people from moving to

housing from shelter, and the services and supports most effective at helping people exit shelter to permanent housing. In keeping with the SHS Measure's strong commitment to equity, the Joint Office will contract with Portland State University's Homelessness Research and Action Collaborative to compensate people with lived experience for participating in different aspects of the project, and a paid Lived Experience Committee will oversee the project's implementation. The second phase of the project will enable interviewees to create a visual rendering of their experiences moving through the shelter system. We look forward to sharing the results of this study, which will take place across parts of three fiscal years, in future reports.

#### ASSERTIVE ENGAGEMENT TRAINING

Multnomah County also moved forward with its racial equity goal to expand Assertive Engagement trainings for SHS providers. During the reporting period, our SHS partners at the Department of County Human Services registered 201 participants for two training sessions and certified 135 new Assertive Engagement practitioners. The team's post-training evaluation showed that 98% of participants felt the training was relevant to their professional and personal growth, and 91% felt that the training objectives were clearly met and that trainers exceeded expectations in presenting the material.

The Assertive Engagement Initiative at Multnomah County is a social service approach to working with people that honors them as the experts in their own lives. Its focus on equity, anti-oppression and trauma-informed care furthers our goal of building a provider network imbued with anti-racist, gender-affirming practices. Assertive Engagement trainings are highly sought after and typically fill up within an hour of opening to providers.

Although the trainings are popular and effective, we also know that even those who are able to access the trainings experience barriers to engagement due to urgent demands of their programs and lack of staffing to cover their work during the training. To address this barrier, the Assertive Engagement team produced a series of videos in Q2 that will allow providers to complete the training course online and become certified after completing self-paced modules in Workday and a virtual or in-person skills practice session. This will increase our capacity to certify more providers and meet the demand for the training, which in turn will support healthier, more effective service delivery for clients and service providers alike. Experts are working on a timeline for creating a training package in Workday, the cloud-based platform Multnomah County uses for payroll, time entry, and staff training.<sup>7</sup>

#### **Key Challenges**

#### **OVERALL CHALLENGES AND BARRIERS TO IMPLEMENTATION**

This report marks the midway point of the third year of SHS implementation and the final year of the ramp-up period described in Multnomah County's Local Implementation Plan. The ramp-up period has provided essential time for SHS projects to get off the ground and has also revealed opportunities for improvement that the Joint Office has actively worked to address. Our strong financial progress and placement outcomes this quarter reflect the monumental efforts of our staff and providers over the last 2.5 years in launching well over 100 housing projects with historic SHS funding. We celebrate these successes while also acknowledging the ongoing challenges presented by this work.

<sup>&</sup>lt;sup>7</sup> Information about Multnomah County's Assertive Engagement Initiative can be found online at <a href="https://www.multco.us/assertive-engagement">https://www.multco.us/assertive-engagement</a>.

In particular, the continued high cost of market rate housing and lack of deeply affordable housing in Multnomah County makes it difficult for low and no-income families to secure and maintain permanent housing without the ongoing support of rent and client assistance. When people do get into subsidized housing, they often face imminent eviction because wages are not sufficient to pay rent. Combined with housing scarcity, this means that housing applications are often denied to individuals with a history of homelessness, or who may have previous involvement with the justice system, evictions on their records and/or insufficient credit. This quarter, the Joint Office's network of providers also highlighted the increasing presence of food insecurity for those we serve and the impact this has had on their ability to afford and maintain housing.

In addition, across our systems this quarter, the ebb and flow of staff recruitment and retention proved to be both a struggle and an opportunity, as we have seen in previous quarters. Illustrative of this is the Joint Office's Domestic Violence system, whose providers reported both staffing delays for some roles and the successful hiring of six new FTE during the reporting period. Domestic Violence services paired with housing support services are a deep need in the community. The 2022 Multnomah County Point in Time Count noted that 33% of respondents said they had experienced domestic violence, with 25% of those respondents saying it was the reason for their homelessness.<sup>8</sup>

While longstanding systemic issues shape the environment in which we do this work, the Joint Office will continue to leverage the unprecedented flexibility of SHS funds to infuse support where it is needed most, strengthen provider capacity and provide a pathway out of homelessness for our neighbors in Multnomah County.

#### **EMERGING CHALLENGES & OPPORTUNITIES**

A common concern this quarter across nearly all of the Joint Office's systems of care was the rising number of program participants presenting with acute and complex behavioral, physical and mental health needs, resulting in more hospitalizations and a higher demand for intensive care coordination, among other challenges.

The Multnomah County Health Department's Bridging Connections Motel Emergency Shelter reported participants often face a barrier in the low availability of treatment at the appropriate level of care. Participants might be referred to Intensive Case Management (ICM) or Assertive Community Treatment (ACT), but due to lengthy waitlists, they are often connected to outpatient services while they wait for a higher level of support. However, the availability of outpatient providers is limited for some of the needs and situations participants are facing. Higher acuity has also had an impact on staff retention for some providers and has led to higher expenditures related to safety and security. To help address this emerging need, the Joint Office gathered feedback from community partners during a listening session at our Provider Conference and will use this information to inform our strategy going forward.

As mentioned above, multiple providers this quarter described having to pivot programming to offset the growing impact of food insecurity. It is difficult for tenants to meet program expectations if they are food insecure, so housing and retention case managers often must take time during the housing process

<sup>&</sup>lt;sup>8</sup> Multnomah County, 2022 Point in Time Count Report: https://multco-web7-psh-files-usw2.s3-us-west-2.amazonaws.com/s3fs-public/2022%20Point%20In%20Time%20Report%20-%20Full.pdf

to ensure participants have access to food. The Joint Office has been able to help cover costs for pantries and other similar efforts using one-time-only funding, and will continue to evaluate the need for additional support to address this developing issue.

The shared challenge of food insecurity has also presented an opportunity for housing providers to strengthen community partnerships. In Q2, SHS-funded organizations worked with each other and other local nonprofits to offer not only food resources, such as fresh produce and holiday meals, but also legal services, HIV testing, survivor advocacy, optometry clinics, behavioral health care, harm reduction supplies, and more. For example, in Q2 SHS-funded provider New Avenues for Youth reported partnering with Multnomah Public Defenders (funded by SHS) to revive their legal clinic; Cascade AIDS Project (funded by SHS) to provide confidential, rapid HIV testing for their youth; Kindness Farm to make meals using fresh ingredients for drop-in center guests; and the YWCA of Portland to offer confidential, survivor-centered domestic violence and advocacy. Many of our SHS providers shared similar stories of working together in Q2.

Our SHS partners in the Department of County Human Services' Intellectual and Developmental Disabilities Division summarized the spirit of collaboration well: "It has been especially essential to get to know our community partners in this line of work who have made it more comfortable to do outreach in areas that are unfamiliar. Working with different service providers helps tremendously when there are so many who need help but don't feel safe themselves or uncomfortable discussing their circumstances to agency workers they don't know. This quarter has been very informative, more collaborative, and life saving for several."

Providers observed that these deeper partnerships have led to more robust service offerings and an increased sense of community that they are eager to continue developing in future quarters.

Throughout the third year of SHS implementation, this sense of community has also been growing within SHS programs as they have become more established, and has anecdotally led to improved outcomes. One example is from the Douglas Fir, a permanent supportive housing project with 15 PSH apartments managed by New Narrative. Residents who previously did not want to interact with employees have been increasingly seeking out immediate crisis support, which has been available thanks to increased staffing. Residents have also been developing relationships with one another and have been eating meals and taking walks together without prompting from staff. Most significantly, the team reports that people who have not previously been able to maintain housing are remaining housed. While these stories currently remain anecdotal, we look forward to the opportunities that this increased sense of trust, connection and community represents for the overall success of the SHS measure going forward and the many people it supports.

#### Section 2. Data & Data Disaggregation

Please use the following table to provide and disaggregate data on Population A, population B housing placement outcomes, and homelessness prevention outcomes. Please use your local methodologies for tracking and reporting on Populations A and B. You can provide context for the data you provided in the context narrative below.

#### **Data Disclaimer**

HUD Universal Data Element data categories will be used in this template for gender identity and race/ethnicity, until county data teams develop regionally approved data categories that more accurately reflect individual identities.

#### **NEW Information as of FY 2024 Q2**

The Joint Office is implementing a new approach to the reporting categories in the data tables. The changes are as follows:

- 1. In the Supportive Housing table, we have removed permanent housing outcomes because the majority of these programs are primarily providing rent assistance BUT not wrap around support services. Those programs are now being reported in the Other Permanent Housing Programs table.
- 2. In the Supportive Housing table, we are now including outcomes from our recovery-oriented transitional housing programs. Previously, it was unclear where to include housing outcomes but we determined that because recovery-oriented transitional housing provides housing AND wrap around support services this is categorized within the Supportive Housing outcomes.
- 3. In the RLRA table, Home Forward is now collecting gender identity on everyone in the household, NOT just the head of household. The outcomes in gender identity are now reflective of everyone benefiting from the RLRA program.

# **Section 2.A Housing Stability Outcomes: Placements & Preventions**

Housing Placements By Intervention Type: Supportive Housing

	This Q	uarter	Year to Date	
# Housing Placements – Supportive Housing*	#	%	#	%
Total people	106	40%	266	
Total households	92		222	
Race & Ethr	nicity			
Asian or Asian American	2	1%	9	3%
Black, African American or African	31	21%	82	24%
Hispanic or Latin(a)(o)(x)	38	26%	59	17%
American Indian, Alaska Native or Indigenous	19	13%	55	16%
Native Hawaiian or Pacific Islander	8	5%	11	3%
White	43	29%	118	34%
Non-Hispanic White (subset of White category)	19	13%	<i>75</i>	22%
Client Doesn't Know	0	0%	0	0%
Client Refused	0	0%	0	0%
Data Not Collected	5	3%	9	3%
Disability st	atus			
	#	%	#	%
Persons with disabilities	85	80%	210	79%
Persons without disabilities	15	14%	42	16%
Disability unreported	6	6%	14	5%
Gender ide	ntity		-	
	#	%	#	%
Male	61	58%	163	61%
Female	36	34%	84	32%
A gender that is not singularly 'Male' or 'Female'	3	3%	4	2%
Transgender	1	1%	5	2%
Questioning	0	0%	0	0%
Client doesn't know	0	0%	0	0%
Client refused	0	0%	1	.5%
Data not collected	5	5%	9	3%

<sup>\*</sup>Supportive housing = permanent supportive housing and other service-enriched housing for Population A such as transitional recovery housing

# Housing Placements By Intervention Type: Rapid Re-Housing & Short-term Rent Assistance

	This Q	uarter	Year t	Year to Date	
# Housing Placements – Rapid Re-Housing (RRH)**	#	%	#	%	
Total people	113	40%	242	100%	
Total households	78	45%	174	100%	
Race & Ethnici	ty				
Asian or Asian American	4	3%	5	2%	
Black, African American or African	36	27%	79	26%	
Hispanic or Latin(a)(o)(x)	31	23%	60	20%	
American Indian, Alaska Native or Indigenous	13	10%	27	9%	
Native Hawaiian or Pacific Islander	1	1%	4	1%	
White	36	27%	111	37%	
Non-Hispanic White (subset of White category)	25	19%	79	26%	
Client Doesn't Know	0	0%	0	0%	
Client Refused	0	0%	0	0%	
Data Not Collected	13	10%	17	6%	
Disability state	us	_			
	#	%	#	%	
Persons with disabilities	44	39%	98	40%	
Persons without disabilities	52	46%	104	43%	
Disability unreported	17	15%	40	17%	
Gender identi	ty				
	#	%	#	%	
Male	44	39%	105	43%	
Female	68	60%	130	54%	
A gender that is not singularly 'Male' or 'Female'	1	1%	3	1%	
Transgender	0	0%	3	1%	
Questioning	0	0%	0	0%	
Client doesn't know	0	0%	0	0%	
Client refused	0	0%	0	0%	
Data not collected	0	0%	1	.5%	

<sup>\*\*</sup> RRH = rapid re-housing or short-term rent assistance programs

# Housing Placements By Intervention Type: Other Permanent Housing Programs (if applicable)

If your county does not have Other Permanent Housing, please write N/A: N/A

	This Q	uarter	Year to Date	
# Housing Placements – Other Permanent Housing Programs (OPH)***	#	%	#	%
Total people	12	41%	29	100%
Total households	5	28%	18	100%
Race & Ethnic	ity			
Asian or Asian American	0	0%	0	0%
Black, African American or African	7	47%	13	38%
Hispanic or Latin(a)(o)(x)	1	7%	2	6%
American Indian, Alaska Native or Indigenous	0	0%	1	3%
Native Hawaiian or Pacific Islander	0%	0%	0	0%
White	6	40%	17	50%
Non-Hispanic White (subset of White category)	3	30%	13	38%
Client Doesn't Know	0	0%	0	0%
Client Refused	0	0%	0	0%
Data Not Collected	1	7%	1	3%
Disability stat	us			
	#	%	#	%
Persons with disabilities	8	67%	14	48%
Persons without disabilities	3	25%	10	34%
Disability unreported	1	8%	5	17%
Gender identi	ty			
	#	%	#	%
Male	6	50%	13	45%
Female	6	50%	15	52%
A gender that is not singularly 'Male' or 'Female'	0	0%	0	0%
Transgender	0	0%	1	3%
Questioning	0	0%	0	0%
Client doesn't know	0	0%	0	0%
Client refused	0	0%	0	0%
Data not collected	0	0%	0	0%

<sup>\*\*\*</sup> OPH = other permanent housing programs (homeless preference units, rent assistance programs without services) that your system operates and SHS funds.

# **Eviction and Homelessness Prevention**

	This O	uarter	Year t	o Date
# Houseless Prevention – Newly Served	#	%	#	%
Final				
rinai				
Total people	65	46%	140	100%
Total households	55	48%	115	100%
Race & Ethnicit	ty	_	_	
Asian or Asian American	1	1%	5	3%
Black, African American or African	24	33%	49	30%
Hispanic or Latin(a)(o)(x)	4	6%	11	7%
American Indian, Alaska Native or Indigenous	4	6%	11	7%
Native Hawaiian or Pacific Islander	0	0%	0	0%
White	38	53%	81	50%
Non-Hispanic White (subset of White category)	34	47%	68	42%
Client Doesn't Know	0	0%	0	0%
Client Refused	0	0%	0	0%
Data Not Collected	1	1%	4	2%
Disability statu	ıs			
	#	%	#	%
Persons with disabilities	50	77%	107	76%
Persons without disabilities	14	22%	30	21%
Disability unreported	1	2%	3	2%
Gender identit	:y			
	#	%	#	%
Male	27	42%	56	40%
Female	35	54%	77	55%
A gender that is not singularly 'Male' or 'Female'	1	2%	2	1%
Transgender	0	0%	0	0%
Questioning	0	0%	0	0%
Client doesn't know	0	0%	0	0%
Client refused	1	2%	2	1%
Data not collected	1	2%	3	2%

# **Section 2. B Regional Long-Term Rent Assistance Program**

The following data represents a **subset** of the above Housing Placements data. The Regional Long-term Rent Assistance Program (RLRA) primarily provides permanent supportive housing to SHS priority Population A clients (though RLRA is not strictly limited to PSH or Population A).

RLRA data is not additive to the data above. The housing placements shown below are duplicates of the placements shown in the data above.

Please disaggregate data for the **total number of people in housing using an RLRA voucher** during the quarter and year to date.

	This Q	uarter	Year t	o Date
Regional Long-term Rent Assistance	#	%	#	%
Quarterly Program Data				
# of RLRA vouchers issued during reporting period	82	39%	208	100%
# of people newly leased up during reporting period	193	65%	295	100%
# of households newly leased up during reporting period	112	56%	199	100%
# of people in housing using RLRA voucher during reporting period	794	99%	803	100%
# of households in housing using RLRA voucher during reporting period	584	98%	593	100%
Race & Ethnici	ty	•		•
Asian or Asian American	9	1.5%	9	1.5%
Black, African American or African	202	34.6%	205	34.6%
Hispanic or Latin(a)(o)(x)	74	12.7%	75	12.6%
American Indian, Alaska Native or Indigenous	89	15.2%	89	15%
Native Hawaiian or Pacific Islander	21	3.6%	21	3.5%
White	319	54.6%	325	54.8%
Non-Hispanic White (subset of White category)	230	39.4%	236	39.8%
Client Doesn't Know	0	0%	0	0%
Client Refused	0	0%	0	0%
Data Not Collected	0	0%	0	0%
Disability state	us	_	_	_
	#	%	#	%
Persons with disabilities	524	89.7%	533	89.9%
Persons without disabilities	60	10.3%	60	10.1%
Disability unreported	0	0%	0	0%
Gender identi	ty			
	#	%	#	%
Male	320	54.8%	329	55.5%
Female	249	42.6%	249	42%
A gender that is not singularly 'Male' or 'Female'	11	1.9%	11	1.9%
Transgender	5	.9%	5	.8%

Questioning	0	0%	0	0%
Client doesn't know	0	0%	0	0%
Client refused	1	.2%	1	.2%
Data not collected	1	.2%	1	.2%

#### **Gender Identity Categories in RLRA Data**

**Update** - As of FY 2024 Q2, Home Forward is collecting gender identity for everyone in the household and the information presented in the table is now reflective of everyone newly enrolled in an RLRA program.

#### **Definitions**

The number of RLRA vouchers issued during the reporting period: Number of households who were issued an RLRA voucher during the reporting period. (Includes households still looking for a unit and not yet leased up.)

The number of households/people newly leased up during the reporting period: Number of households/people who completed the lease-up process and moved into their housing during the reporting period.

The number of households/people in housing using an RLRA voucher during the reporting period: Number of households/people who were in housing using an RLRA voucher at any point during the reporting period. Includes (a) everyone who has been housed to date with RLRA and is still housed, and (b) households who became newly housed during the reporting period.

Context narrative (optional): In no more than 500 words, please share any additional context about the data you provided above on the RLRA program.

# Section 2. C Subset of Housing Placements and Preventions: Priority Population Disaggregation

The following is a **subset** of the above Housing Placements and Preventions data (all intervention types combined), which represents housing placements/preventions for SHS priority population A.

	This Q	This Quarter		Year to Date	
Population A Report	#	%	#	%	
Population A: Total <b>people</b> placed into permanent housing/prevention	117	38%	310	100%	
Population A: Total <b>households</b> placed into permanent housing/prevention	109	39%	280	100%	
Race & Ethnici	 itv				
Asian or Asian American	1	1%	4	1%	
Black, African American or African	41	27%	99	25%	
Hispanic or Latin(a)(o)(x)	27	18%	61	15%	
American Indian, Alaska Native or Indigenous	20	13%	53	13%	
Native Hawaiian or Pacific Islander	4	3%	7	2%	
White	60	39%	173	43%	
(Subset of White): Non-Hispanic White	37	24%	118	29%	
Client Doesn't Know	0	0%	0	0%	
Client Refused	0	0%	0	0%	
Data Not Collected	0	0%	4	1%	
Disability stat	us				
	#	%	#	%	
Persons with disabilities	112	96%	265	85%	
Persons without disabilities	5	4%	30	10%	
Disability unreported	0	0%	15	5%	
Gender identi	ty				
	#	%	#	%	
Male	60	51%	177	57%	
Female	<i>52</i>	44%	119	38%	
A gender that is not singularly 'Male' or 'Female'	3	3%	5	2%	
Transgender	1	1%	4	1%	
Questioning	0	0%	0	0%	
Client doesn't know	0	0%	0	0%	
Client refused	0	0%	3	1%	
		1%	2	1%	

The table above asks for the total people and households placed into permanent housing and/or

*prevention*. Population A, by definition, excludes people in housing. We do not include homeless prevention and/or eviction prevention outcomes in the Population A Report.

The following is a **subset** of the above Housing Placements and Preventions data (all intervention types combined), which represents housing placements and preventions for SHS priority population B.

	This Q	uarter	Year to Date		
Population B Report	#	%	#	%	
Population B: Total <b>people</b> placed into permanent housing/prevention	182	44%	418	100%	
Population B: Total <b>households</b> placed into permanent housing/prevention	121	44%	275	100%	
Race & Ethn	icity				
Asian or Asian American	6	3%	19	4%	
Black, African American or African	57	26%	138	28%	
Hispanic or Latin(a)(o)(x)	48	22	78	16%	
American Indian, Alaska Native or Indigenous	16	7%	40	8%	
Native Hawaiian or Pacific Islander	6	3%	18	4%	
White	66	30%	173	35%	
(Subset of White): Non-Hispanic White	46	21%	130	26%	
Client Doesn't Know	0	0%	0	0%	
Client Refused	0	0%	2	.5%	
Data Not Collected	19	9%	27	5%	
Disability st	atus	_			
	#	%	#	%	
Persons with disabilities	78	43%	195	47%	
Persons without disabilities	79	43%	174	42%	
Disability unreported	25	14%	49	12%	
Gender ider	ntity	-	-		
	#	%	#	%	
Male	78	43%	182	44%	
Female	96	53%	214	51%	
A gender that is not singularly 'Male' or 'Female'	2	1%	5	1%	
Transgender	0	0%	5	1%	
Questioning	0	0%	0	0%	
Client doesn't know	0	0%	0	0%	
Client refused	1	1%	2	.5%	
Data not collected	5	3%	10	2%	

Context narrative (optional): In no more than 500 words, please share any additional context about the data you provided above on Population A/B.

#### **Section 2.D Other Data: Non-Housing Numeric Goals**

This section shows progress toward quantitative goals set in county annual work plans. Housing placement and prevention progress are already included in the above tables. This section includes goals such as shelter beds and outreach contacts and other quantitative goals that should be reported quarterly. This data in this section may differ from county to county and will differ year to year, as it aligns with goals set in county annual work plans.

Instructions: Please complete the tables below, as applicable to your annual work plans:

#### All counties please complete the table below:

Goal Type	Your FY 23-24 Goal	Progress this Quarter	Progress YTD
Shelter Beds	245 beds	330 Active Beds in Q2	

If applicable for quarterly reporting, other goals from your work plan, if applicable (e.g. people served in outreach, other quantitative goals)

Goal Type	l Type Your FY 23-24 Goal		Progress YTD
N/A			

Context narrative (optional): In no more than 500 words, please share any additional context about the data you provided in the above tables.

#### **Methodology to Track Shelter Bed Goal**

The JOHS measures the programmatic capacity in HMIS of the active SHS-funded shelter beds. The programmatic capacity is the number of beds the provider reports as active in HMIS.

Emergency shelter beds include non-congregate, alternative and congregate programs that will serve adults, youth, families with children and people fleeing domestic violence.

# **Section 3. Financial Reporting**

Please complete the quarterly financial report and include the completed financial report to this quarterly report, as an attachment.

Multnomah County has included the financial report in this document. FINANCIAL REPORT ON THE FOLLOWING PAGE.

	Annual Budget	Q1 Actuals	Q2 Actuals	Q3 Actuals	Q4 Actuals	Total YTD Actuals	Variance Under / (Over)	% of Budget	Comments
Metro SHS Resources									
Beginning Fund Balance	108,677,054	126,381,795				126,381,795	(17,704,741)	116%	Counties will provide details and context on any unbudgeted amounts in Beginning Fund Balance in the narrative of their report, including the current plan and timeline for budgeting and spending it.
FY23 Revenues exceeding Forecast		46,943,361				46,943,361			
Diff FY23 Actual vs Budgeted Exp		58,146,092				58,146,092			43.4M is the underspend and \$14.7M is contingency and reserves
July-August 23 (FY24) collections recorded in FY23		17,704,741				17,704,741			Multnomah County accounting procedure is to accrue 60 days of tax receipts for the quarter ended June 30th.
Interest Earnings and Other Misc Revenues		(46,943,361)				(46,943,361)			
Metro SHS Program Funds	96,190,265		33,648,238			33,648,238	62,542,027	35%	September's program funds reflected in October
Interest Earnings		1,911,716	3,183,676			5,095,392	(5,095,392)	N/A	
insert addt'l lines as necessary						-	-	N/A	
Total Metro SHS Resources	204,867,319	128,293,511	36,831,914	-		165,125,425	39,741,894	81%	
Metro SHS Requirements									
metro sas kequirements									
Program Costs									
Activity Costs									
Shelter, Outreach and Safety on/off the Street (emergency shelter, outreach services and supplies, hygiene programs)	45,945,076	1,661,456	2,582,452			4,243,908	41,701,168	9%	
Short-term Housing Assistance (rent assistance and services, e.g. rapid rehousing, short-term rent assistance, housing retention)	45,743,787	2,297,893	7,125,511			9,423,404	36,320,383	21%	
Permanent supportive housing services (wrap-around services for PSH)	35,391,252	3,256,109	8,968,063			12,224,172	23,167,080	35%	
Long-term Rent Assistance (RLRA, the rent assistance portion of PSH)	13,593,179	802,246	1,646,854			2,449,100	11,144,079	18%	
Systems Infrastructure (service provider capacity building and organizational health, system development, etc)	13,907,295	156,204	10,172,663			10,328,866	3,578,429	74%	
<b>Built Infrastructure</b> (property purchases, capital improvement projects, etc)	20,473,881						20,473,881	0%	
Other supportive services (employment, benefits)	6,505,399	574,505	1,477,716			2,052,222	4,453,177	32%	
insert addt'l lines for other activity categories					:	-	-	N/A	
Subtotal Activity Costs	181,559,869	8,748,412	31,973,260			40,721,672	140.838.197	22%	

Administrative Control (4)									Source Devictor Administrative South and constraint and Developer South about 1911
Administrative Costs [1]							,		Service Provider Administrative Costs are reported as part of Program Costs above. Counties will provide details and context for Service Provider Administrative Costs within the narrative of their Annual Program
County Admin: Long-term Rent Assistance	1,133,265	131,742	224,967			356,709	776,556	31%	Administrative Costs for long-term rent assistance equals 13% of Partner's YTD expenses on long-term rent assistance.
County Admin: Other	2,632,694	411,835	343,700			755,535	1,877,159	29%	Administrative Costs for Other Program Costs equals 2% of total YTD Other Program Costs.
Subtotal Administrative Costs	3,765,959	543,577	568,667		-	1,112,244	2,653,715	30%	
Other Costs									
Regional Strategy Implementation Fund [2]	4,809,513	586,870	568,076			1,154,946	3,654,567	24%	
insert addt'l lines as necessary						-	- 1	N/A	
Subtotal Other Costs	4,809,513	586,870	568,076		-	1,154,946	3,654,567	24%	
Subtotal Program Costs	190,135,341	9,878,859	33,110,002			42,988,862	147,146,479	23%	
Contingency [3]	4,809,513	4,809,513				4,809,513		100%	
Stabilization Reserve[4]	9,619,026					9,619,026	-	100%	
Regional Strategy Impl Fund Reserve [2]						-	-	N/A	
RLRA Reserves						-	- ]	N/A	
Other Programmatic Reserves	303,439	303,439				303,439	- ]	100%	
insert addt'l lines as necessary						-	-	N/A	
Subtotal Contingency and Reserves	14,731,978	14,731,978	-	-	-	14,731,978	-	100%	
Total Metro SHS Requirements	204,867,319	24,610,837	33,110,002			57,720,840	147,146,479	28%	
		103.682.674	3.721.912						

# Current All Singles Scorecard Score for Multnomah County By-Name List Score - 20

<b>1</b> A	Is the geographic coverage of your outreach clearly mapped out, informed by your data and regularly assessed, to ensure you are able to reach all unsheltered individuals within your community.	No
1B	Have you coordinated your outreach, ensuring that your outreach teams are deployed at the locations and the times that they are mostly likely to effectively engage with unsheltered homeless individuals, while minimizing duplication between providers?	No
<b>1</b> C	Do you have a documented outreach policy that clearly states how your outreach teams will be deployed and how they work with each other to swiftly connect individuals to their self-determined needs?	No
<b>1</b> D	Do you have consistent, coordinated and reliable outreach and in-reach efforts across your geographic coverage area that gives you confidence that at least 90% of the unsheltered population is captured on your BNL?	No
2A	Are 90% of CoC-funded and non-CoC-funded providers reporting data into your by-name list?	No
2B	Are approximately 90-100% of currently homeless single adult individuals served by the providers reporting into your by-name list?	No
3A	Is your by-name list able to collect data on all currently homeless single adults in your community, including <b>unsheltered individuals living in a place not meant for human habitation (e.g. street, cars, campsites, beaches, deserts or riverbeds)?</b>	Yes
3B	Is your by-name list able to collect data on all currently homeless single adults in your community, including individuals in shelters, safe havens, season overflow beds, hotels paid for by homeless providers or Health Care for Homeless Veterans (HCHV) beds?	Yes
3C	Is your by-name list able to collect data on all currently homeless single adults in your community, including individuals in transitional housing, including VA-funded Transitional Housing?	Yes
3D	Is your by-name list able to collect data on all currently homeless single adults in your community, including <b>individuals fleeing domestic violence?</b>	Yes

<b>4</b> A	Has your community established a written policy that specifies the number of days of inactivity (i.e. the person cannot be located) after which a person's status will be changed to "inactive," and which includes protocols to attempt to locate an individual before they are moved to inactive status?	Yes
4B	Does that written policy account for changing an individual's status to 'inactive' based on a client's verified absence from the community before the specified number of days has elapsed? (e.g. reunited with family in a different community, death etc.)	Yes
4C	Does that written policy account for individuals on your list who are entering an institution (e.g. jail or hospital) where they are expected to remain for 90 days or fewer?	Yes
5	Does your community have a way to track actively homeless individuals who have not consented to services and/or assessment at this time?	No
6	Does your community have policies and protocols in place for keeping your by-name list up to date and accurate, including timelines for provider data submission and ongoing quality assurance protocol?	No
7	Does your community's by-name list track the 'homeless / housed status' of all individuals, including the date each status was last changed and the previous status? Homeless status fields should include at minimum: homeless, inactive and permanently housed.	No
8	Does your community's by-name list include a unique identifier (e.g. an HMIS ID) for each individual to prevent duplication of client records and facilitate coordination between providers?	Yes
9	Does your by-name list track the total number of newly identified (not necessarily assessed) individuals experiencing homelessness every month? This figure represents a portion of your monthly inflow.	Yes
10	Does your community's by-name list track individuals returning to active homelessness within the past month?	Yes
<b>11</b> A	Does your community's by-name list track individuals as they move out of active homeless status, including <b>those who move in to permanent housing?</b>	Yes
11B	Does your community's by-name list track individuals as they move out of active homeless status, including <b>those who become inactive, per your inactive policy?</b>	Yes
11C	Does your community's by-name list track individuals as they move out of active homeless status, including <b>those who no longer meet the</b>	Yes

	population criteria of single adult?	
12A	Does your by-name list track population-based statuses including: veteran, chronic, youth, family with minor children?	Yes
12B	Can your by-name list track people with multiple population-based statuses (e.g. chronic homeless status AND veteran status)?	Yes
12C	Can your by-name list track historical changes in activity status (e.g. Active to Inactive, Active to Housed, etc.)?	Yes
12D	Can your by-name list track individuals who become chronically homeless after they are added to your all singles list?	Yes
12E	Can your by-name list track individuals who are initially assigned chronic or veteran status when they enter your system but later do not meet the criteria for these population statuses?	Yes
13A	Does your community have a way to report race and ethnicity data on the individuals on the by-name list for the purpose of analyzing system outcomes?	Yes
13B	Does your data collection policy and process around race and ethnicity respect the self-identification of clients?	Yes