

## Homelessness Response Action Plan Comment Summary

On May 31, 2024, Multnomah County Chair Jessica Vega Pederson and Portland Mayor Ted Wheeler released their final version of the City and County's Homelessness Response Action Plan — updated and strengthened after a more than two-month engagement process and the incorporation of feedback from hundreds of community members. The Homelessness Response Action Plan is a path to provide more people with safer options off our streets that meet their needs, and it provides a critical link between governments and systems that address homelessness, behavioral health, substance use and community health.

This document summarizes the comments we received along with brief responses to each.

The revised plan builds on the initial draft shared this spring with added goals and action items based on community feedback collected from nearly 200 emails and from nearly 300 people engaged during public forums and presentations:

- Better meeting the housing needs of refugees and asylum seekers through coordination with other governments and community partners.
- Supporting and expanding the behavioral health workforce.
- Increasing outreach services at library locations.
- Funding additional day services for people experiencing homelessness.
- Better meeting the accessible housing and shelter needs of people with physical disabilities.
- Increasing access to behavioral healthcare for people who have been involved in the criminal justice system by committing ongoing funding to the Department of Community Justice's Stabilization and Readiness Program.
- Developing an integrated healthcare management platform to coordinate care across housing and healthcare providers.
- Further acknowledging the geographic diversity and different service environments of East County cities.
- Adding a general member of the public to the Community Advisory Subcommittee — an oversight committee for the plan and for the Joint Office — to better align with the County's requirements for Community Budget Advisory Committees.

Comment Received	Response
Provide the homeless with birth certificates, ID, SS replacement card, SNAP form, TriMet low income fare card, OPUC (cellphone) form for low income individuals, mailing address, etc so that they can obtain benefits and have the ID necessary to sign a lease, obtain a job, etc.	This is additional detail that can inform specific actions under Goal 1, particularly the focus of the Outreach and Engagement Strategy workgroup planned to convene in July 2024.
Support for a 24-7 sobering center	Yes, this is a part of goal 3
Better coordination of services and more timely information about shelter bed availability	Yes, this is incorporated in goals 1 and 7
Require implementers to be sober.	Sobriety requirements (for program staff or participants) are appropriate in some settings specific to recovery from substance use disorders, but are not used in most homeless services settings, as they often present unnecessary barriers to entry.
Elevate the need for BIPOC and LGBTQ2SIA+ focus	A topline outcome of the plan is to reduce disparities in unsheltered homelessness for the BIPOC and LGBTQIA2S+ populations at a rate equal to or greater than that population's proportion of the overall population. Goal 1 includes designing "systems that center and expand culturally specific services for people who are Black, African American or African; Native Hawaiian or Other Pacific Islander; American Indian, Alaska Native, or Indigenous; Latina/Latino/Latinx/Latinae; Asian or Asian American; and LGBTQIA2S+." The shelter strategy in Goal 2 includes adding 250 beds using best design and trauma-informed practices, prioritizing creation of culturally specific shelter for LGBTQIA2S+ adults, as well as establishing community practices to collect and respond to LGBTQIA2S+ data. Among the foundational strategies to accomplish all plan goals is creation of a culture of practice for using Multnomah County's Equity and Empowerment Lens, which intentionally elevates focus on the needs and experiences of BIPOC and LGBTQIA2S+ people experiencing homelessness
Support for ending discharges from hospital/BH settings and foster care into homelessness	This work is prioritized in Goal 4.

Build more public housing	Goal 6 focuses specifically on increasing the housing production, especially affordable housing, in partnership with the City of Portland, Metro, and Oregon Housing and Community Services.
Address those who are "service resistant"	People who are labeled by some as "service resistant" are often people who have not received the services or supports they need through our existing systems. Some have lost trust and may have even experienced trauma while attempting to access those systems. Expanding services and the data to know of timely access to services and resources are key to building relationships to get people the help they need. Service expansion and improved access to service availability are components of Goals 1, 2, 3, 5, 6, and 7 of the plan.
Recipients of aid should also be required to agree to participate in actions that will ensure their future success in becoming responsible citizens and not people who will continually rely on help from the rest of us.	A diverse range of resources and services help each of us maintain stability and health. This plan focuses on expanding and improving access to a diverse range of services and supports to help people experiencing or at risk of homelessness return to health and stability.
Prioritize single women with children; families with children; elderly; able-bodied individuals willing to do something to help themselves.	The county has expanded shelters for women and couples over the years, and Goal 2 of the plan includes doubling the number of shelter units for families.
Build more "Safe-Rest" Villages!!	Alternative shelter options are part of the shelter strategy identified in Goal 2.
We need more TASS sites	Alternative shelter options are part of the shelter strategy identified in Goal 2.
Get better data on inflow	Building out the by-name list is helping inform better data on inflow and outflow. This is a part of the Joint Office's ongoing work, and action items within Goal 7 were expanded to explicitly include evaluation of system-level inflow and outflow impacts to overall levels of homelessness.
Address BH and homelessness workforce shortages	We have added the following to Goal 3: Address shortages in the behavioral health workforce through the removal of barriers, increased funding, and expanding and speeding up the pipeline of future workers.
Set up more alternative shelters	Alternative shelter options are part of the shelter strategy identified in Goal 2.
Create a public dashboard to track goals	Goals 7 and 9 focus on improved data collection and development of a public dashboard

Addiction should have consequences	Many people experiencing substance use disorders experience a broad range of consequences, including diminished health and disconnection from family and friends. The plan includes increased coordination between substance use disorder treatment and criminal justice systems, including diversion to account for changing Measure 110 landscape (see Goal 3)
Include a focus on family reunification	Existing service providers working with families and youth focus on family reunification using trauma-informed practices. While this is not called out as a specific goal, we anticipate that partners will continue to focus on this work while expanding youth and family focused services.
Provide funding for housing providers to have adequate security	Goal 2 includes focus on increasing stabilization and supports for supportive housing providers. Associated increases in per-household payments can be used by supportive housing providers for a range of operating and services costs focused on improved housing retention.
Collect photos and fingerprints of everyone served to track how well services work	Requiring photos and fingerprints to access services is not trauma-informed and may create barriers to services. Goals Goals 1, 7 and 9 focus on improved data collection, care coordination and public dashboards to track service utilization and effectiveness.
Fund shelter beds and services for asylum seekers	The following was added to the plan under Goal 1: Coordinate with other government funders and providers serving immigrants, refugees, and asylum seekers to develop a response plan to meet emerging sheltering and service needs for refugees and asylum seekers.
Culturally specific organizations who take on sheltering and/or rehousing for the first time must be mentored and supported with onboarding, including access to and training on HMIS so all organizations know who is receiving what services and their communities are included in by-name lists of unhoused and unstably house community members.	The Joint Office works with small and emerging providers on these topics and will continue to do so to continue to serve this population. JOHS is also working to develop pathways to connect providers to one another for technical assistance and training. Goal 7 focuses specifically on improving system wide data collection and analytics.
Homeless services need to recognize that people without work authorization can and do make income, and need to implement training and support to get out of this community's way by denying services based on work authorization.	While this is not called out as a specific goal, this is helpful to inform strategies to better meet needs of people without work authorization. This will inform plan implementation.

Fund bi/multilingual staff, access to timely on-call interpretation, and translation of key documents in the housing system such as shelter and housing program rules.	While this is not called out as a specific goal, this is helpful to inform strategies to better meet needs of people with proficiency in other languages than English. This will inform plan implementation.
We would like to see undocumented folks leaving incarceration written into the policy as being eligible for the same rehousing support as other formerly incarcerated communities.	The county does not deny rental assistance and other services to those lacking documentation now.
Add a member of the public to the community advisory position	We have added a membership slot for at least one member of the general public who doesn't meet the other criteria.
Share and get feedback on the plan from those currently living unsheltered	The draft plan was shared with several advisory bodies whose members include those with lived experience. It was also shared with providers who have those with lived experience in their care and under their employ. We did receive feedback from those with lived experience, and will continue to do so throughout plan implementation.
Connect funding needs to the plan to make sure it's sustainable	Many of the costs associated with early action items within the plan are reflected in Chair Vega Pederson's Executive Budget for FY 2024-25, which includes a 24% increase in homeless services spending and a \$29M investment in expanded substance use and recovery services. Additional costs associated with the plan will be identified in partnership with other funding jurisdictions, including the City of Portland, Metro, and State of Oregon.
Plan needs to account for workforce shortages and challenges in BH field	We have added the following to Goal 3: Address shortages in the behavioral health workforce through the removal of barriers, increased funding, and expanding and speeding up the pipeline of future workers.
Recognize alternative and blended family needs in outreach and efforts	While this is not called out as a specific goal, this is helpful to inform strategies to better meet needs of people in alternative and blended family structures. This will inform plan implementation.
General support for goals 1, 4 and 5	Thank you!
Support for the development of affordable housing and lowering of barriers/challenges to building.	This is a key component of Goal 6, with significant progress already underway.
Include providers when scoping the action items (be aware of their work, don't duplicate it, resource them)	Action items will be scoped and workshopped with key partners and providers.

Expand on how HRS is going to engage in continuous quality improvement around data (goal 7, strategy 3)	Goal 7, Strategy 3 includes development and implementation of plans for continuous quality improvement that is collaborative, data driven, responsive, and rigorous. Additional details will come through plan development - work that is slated for completion by 2025.
Address graffiti, camping, and provide workforce opportunities	Expanding workforce opportunities for those currently or formerly homeless are a part of Goal 5 and have been funded and are currently supported by the County and City. Goals 1 and 2 focus on improved outreach, services navigation, and shelter expansion, specifically to reduce unsheltered homelessness. Addressing graffiti is an important goal, though not addressed through this plan.
Support for rapid rehousing efforts, as shelter is still homelessness (and expensive)	Rapid rehousing efforts are and will continue to be a key tactic in the plans overall objectives to make homelessness rare and brief.
Collect better data on the homeless population and what interventions work and don't	This is a driving force behind Goal 7.
Identify the delta between what we have and what's needed across the continuum (shelter beds, affordable housing units, etc)	The plan identifies and incorporates new information and data on the unsheltered homeless population, the need for various types of behavioral health beds, and the gaps in affordable housing units (see Goals 2, 3 and 6)
Offer property tax deductions for nearby homeowners impacted by shelter/service siting	Property tax exemptions and deductions are regulated by the state legislature.
Assign an independent auditor to review the progress of the HRAP	Both Multnomah County and the City of Portland have independently elected auditors.
Account for the challenges of housing and providing services for those with physical disabilities	We have also added the following action item under Goal 1 to address this and related comments: Align housing referral and placement systems to Fair Housing goals and practices supported by the Portland Housing Bureau to increase placement to accessible units for people with physical disabilities and access to reasonable accommodations.
Consider including libraries as sources of assistance and places for outreach/engagement	Multnomah County Chair Jessica Vega Pederson's Executive Budget includes funding for outreach workers at libraries. This is an important tactic in helping people build trust and access services.
Focus on affordable housing for those making between 0-60% AFI	This objective is included in Goal 6.

Focus on providing permanent supportive housing - that's what solves homelessness	Expanding access to and support for PSH is included in Goals 2, 3, and 6, including a primary goal of funding 1,900 supportive housing units for people experiencing chronic homelessness across population systems through Project Sponsor and tenant-based rental subsidies.
Incentivize the construction of more tiny homes and the needed economy for small scale construction crews	Goal 6 focuses on a range of strategies for increasing affordable housing production, led predominantly by the Portland Housing Bureau. This recommendation can inform those strategies.
Reduce plan length, focus on continuous improvement, make sure all goals are SMART (Specific, Measurable, Achievable, Relevant, Timely)	The plan is intended to be comprehensive, but future planned communications and tracking tools are intended to help simplify access to plan content. The recommendation to pursue SMART goals is helpful as we develop continuous quality improvement plans - an action item under Goal 7.
Focus on a Housing First strategy	The County remains committed to Housing First as an evidence based practice. The plan includes expansion of Permanent Supportive Housing, block leasing, and an entire goal (Goal 6) devoted to the creation of affordable housing units. The plan's focus on increased care coordination and crisis intervention capabilities under Goal 1 are intended to strengthen system-wide capacity to support Housing First strategies.
Make goals realistic and achievable	Some of the timelines have been adjusted in the plan so that they are ambitious but achievable.
Focus on families	The plan includes doubling the number of shelter units for families, as well as improving the placement of families from shelter into permanent housing. Providers serving families experiencing homelessness will be engaged in ongoing implementation work.
Increase rental support for families along with wrap around supports	JOHS is expanding rapid rehousing assistance, with the intent to increase the number of people served as well as the duration of the support JOHS is providing. The plan also adds 90 family units of shelter in the next year.

<p>Revise the selection criteria for the JOHS HFS waitlist. Current F-SPDAT scoring precludes many families from receiving services and distorts the true numbers of people in need.</p>	<p>The JOHS is in the process of updating the Coordinated Access tools and policies for both the family and adult systems of care, in collaboration with a consultant group, providers, and a group of people with lived experience of homelessness. The new tools and processes are in a pilot phase currently. The goal of the new tools and processes - which will be evaluated - is to ensure that the coordinated access tools and processes prioritize people in a way that is more aligned with community priorities.</p>
<p>Fully fund existing programs before creating new programs</p>	<p>The plan addresses needs to fully resource existing programs, including funding for existing and expanded shelter, housing placement, permanent supportive, and housing retention.</p>
<p>Engage providers in the plan's development</p>	<p>Providers were engaged in the development of the draft proposal. After release of the draft plan, a town hall was held for providers and specific outreach was conducted to solicit feedback and input on the plan. That feedback and input will be shared with city and county elected leaders, as well as JOHS and other county leaders. Providers will be important partners in ongoing plan implementation, as well.</p>
<p>Specifically say that shelters need to use trauma-informed care in the operation of their shelters. Specifically state that shelters need to offer transparency, choice, autonomy, safety, privacy, security to those who are in need of shelter. Additionally, require shelters to focus on moving people through shelter and into housing.</p>	<p>JOHS, with recommendations from its Equity Advisory Committee, is working to improve requirements, support, and monitoring for provider equity work plans. All JOHS contracted providers are required to be trained in assertive engagement, which is a training initiative that draws from various theories, approaches, and lenses such as Strength-Based Approaches, Trauma-Informed Care, Motivational Interviewing, Empathy, Ambivalence, Unconditional Positive Regard, etc. AE supports and complements frameworks centered on racial equity, anti-oppression, and trauma-informed care.</p>
<p>Increase the shelter to housing placement rate to 75% for all shelter providers by December 2025.</p>	<p>Existing plan goals are intended to be ambitious and achievable. The existing plan goal of increasing shelter-to-housing placement by 15% is an ambitious development that will help to shape future goals.</p>



Train providers in evidence-based practice of housing first	The County remains committed to Housing First as an evidence based practice. The plan includes expansion of Permanent Supportive Housing, block leasing, and an entire goal (Goal 6) devoted to the creation of affordable housing units. The plan's focus on increased care coordination and crisis intervention capabilities under Goal 1 are intended to strengthen system-wide capacity to support Housing First strategies.
Increase rent assistance and provide extra case management to help people move into housing and keep their homes for good	Rental assistance with effective case management services has been and will remain a key strategy to addressing homelessness. Several of the plan's action items focus on increased or improved access to these resources.
Increase pay for direct service workers and contracts for providers	This remains a priority for Multnomah County, as it has invested in raising provider pay over the last 3 fiscal years, providing capacity grants, and is working to address legacy contract inequities. This is also identified for further attention through an action item in the plan's "Additional Considerations" section.
Appoint providers to the Steering and Oversight Committee	A community based organization is included as a non-voting member of the Steering and Oversight Committee, and provider representatives are included on the Implementation Subcommittee as well as the Community Advisory subcommittee. Housing and homeless service providers are critical partners in the work of developing, implementing, and monitoring this plan. The proposed governance structures attempt to strike a balance between being sufficiently representative of the broad range of other key partners, while also remaining nimble enough to allow for effective, efficient governance. As work plans are developed to support each action item within the plan, we anticipate that service providers will be directly engaged in workgroups where their service- and population-specific expertise can most effectively be engaged in shaping implementation.
Have the community advisory subcommittee members select the providers (or others outside the control/approval of the Chair/Mayor)	The process to identify and select provider representation within the Homelessness Response System governance structures has not yet been determined. Thank you for this recommendation.

Help address the issues of clients with criminal or behavioral health history after they receive care.	That is a part of Goal 4, and we added the following to the goal: Expand and provide ongoing funding for the Stabilization and Readiness Program, which assists with treatment, stabilization, skill development and case management services for individuals with severe and persistent mental illness who have been involved in the justice system.
Provide a range of services/providers to account for patients who are physically and mentally capable of making their own choices sometimes don't see themselves fitting into existing programs and therefore choose to return to the street.	The Joint Office has worked diligently to expand the diversity of service providers and offerings for those struggling with homelessness and will continue to do so.
Include more about how the action items will be implemented	Most action items will have detailed scopes of work outlined as part of a work plan outside of the Homelessness Response Action Plan.
Explain what "coordinated access" means	A brief explanation of coordinated access was added to the document.
Within each action item there should be multi-system disciplinary team involvement	Many of the action items specifically address multi-system or multi-disciplinary team involvement, and implementation of the plan will require ongoing multi-sector engagement.
Expand workforce development opportunities to include a wider range of services	Goal 5, Strategy 3 specifically focuses on expanded integration with regional workforce programs to increase access to employment for people experiencing homelessness. Additional plan goals focus on workforce development for people providing services to people experiencing homelessness.
Include a focus on youth currently experiencing homelessness, and differentiate between 12-20 and 20-25 populations who have different needs; map those services	While this is not called out as a specific goal, this is helpful to inform strategies to better meet needs of youth experiencing homelessness. This will inform plan implementation.
Expand focus to include the youth aging out of care that are in temporary lodging and those that have the greatest behavioral health challenges	This is helpful detail to inform implementation of Goal 4 focus on preventing homelessness among youth aging out of foster care.
Recognize that many youth aging out of foster care need significant support beyond just rental assistance	This is helpful detail to inform implementation of Goal 4 focus on preventing homelessness among youth aging out of foster care.

<p>Improving Housing Retention Evaluations: We recommend two evaluators. First, identify if a supportive housing tenant is happy and feels supported. While that may seem simplistic, it's a person-centered outcome and it's important to center those most impacted. Second, surveying the supportive housing workforce and property management on their experiences will inform gaps in the system.</p>	<p>This is helpful strategic detail to inform implementation of Goal 7 focus on development and implementation of an evaluation plan for homeless services and programs.</p>
<p>Focus on progressive funding strategies for the provision of affordable housing including new construction and both site and building acquisition that can better meet the actual need in our community. Additional strategies to de-commodify housing should be deployed as well. This effort should be led by the housing system as the homelessness system is not responsible for making housing affordable.</p>	<p>Goal 6 focuses on increased production of affordable housing, leaning heavily on the leadership of the Portland Housing Bureau and partnerships with affordable housing providers. This strategic guidance can help to inform that work.</p>
<p>Increased per household cap amount for supportive housing services, perhaps as high as \$20,000</p>	<p>The plan proposes to increase the per household cap amount for permanent supportive housing to \$15,000-\$17,500 per household at this time.</p>
<p>Develop a roving supportive tenancy program with behavioral health and other supports that will benefit both housing providers and individuals facing tenancy challenges. Not only should the program deliver care and support but should also prioritize advocacy for individuals to stay housed.</p>	<p>The Joint Office would like to hear more about this idea and consider how this would be sustainably funded, perhaps via Medicaid, making it a potential item to consider in Goal 5.</p>
<p>Create a flexible funding pool and move towards other supportive housing dollars being made flexible to better meet the needs of supportive housing and affordable housing buildings. No individual tenant in supportive housing or building is alike or static, and funding should be made adaptive where the actual needs can be met.</p>	<p>While this is not called out as a specific goal, this is helpful to inform strategies to better meet needs of people living in affordable and supportive housing buildings. This will inform plan implementation. Specifically, JOHS recognizes the ongoing service needs of those in housing and will continue to talk to providers about how to address this issue.</p>
<p>Resource existing affordable housing units with supportive services.</p>	<p>We have added the following action item under Goal 5 to address this comment: "Explore potential to expand permanent supportive housing capacity by bringing supportive services to existing affordable housing units."</p>

<p>Expand Housing Connector. This would better centralize real-estate focused services related to recruiting and incentivizing landlords and streamline the management of available rental unit inventory.</p>	<p>Multnomah County is open to expanding its work with services and providers that add value and are shown to succeed, and we will keep this in mind as we roll out our work with Housing Connector.</p>
<p>Encourage innovating behavioral health. Behavioral health treatment strategies need to innovate beyond status-quo treatment and include permanent housing.</p>	<p>Goal 3 focuses on expanding behavioral health capacity with long-term outcomes focused on a behavioral health system that has capacity to provide the right, timely treatment for individuals. Similarly, Goal 2 includes strategic focus on increasing stabilization and supports for supportive housing providers, recognizing that many people in supportive housing are presenting with higher levels of acuity.</p>
<p>Commit to ongoing collaboration and resource identification around the use of Special Purpose Vouchers to ensure aligned services and supports are adequate to ensure housing success and wellbeing among the different populations served. Identifying gaps and adding local resources is crucial to help ensure we are maximizing federal resources available to our community.</p>	<p>This is helpful additional strategic focus to inform Goal 2 work to increase stabilization and supports for supportive housing providers, recognizing that many people in supportive housing are presenting with higher levels of acuity. It also speaks to Goal 5 focus on using the right dollars for the right service, including increased utilization of Medicaid-funded health system resources to support housing stability.</p>
<p>Include building acquisition as a part of the affordable housing objectives</p>	<p>This is helpful additional strategic focus to inform Goal 6 strategies to streamline, incentivize and finance housing development. The existing plan strategy specifically calls out potential acquisition of commercial buildings for housing conversion, but other components of the Portland Housing Bureau's Housing Production Strategy should address this.</p>
<p>Include funding for tenancy programs and supportive services as part of affordable housing funding design.</p>	<p>Goal 2 includes strategic focus on increasing stabilization and supports for supportive housing providers.</p>
<p>Update the city of Portland's rental registry as outlined in the ordinance, which exists to "to maintain an updated and reliable inventory of residential rental housing unit locations within the City." The updated registration could be updated to provide a deeper understanding of the existing housing stock.</p>	<p>This is helpful additional strategic focus to inform one of the short-to-medium term outcome identified in Goal 2: "increased support for and communication with landlords to develop improved capture of community housing inventory." It may also assist with related Goal 2 action items to increase access to primary leased units.</p>

<p>Engage the private sector where real estate platforms have been developed to manage some inventory of units.</p>	<p>This is helpful additional strategic focus to inform one of the short-to-medium term outcome identified in Goal 2: "increased support for and communication with landlords to develop improved capture of community housing inventory." It may also assist with related Goal 2 action items to increase access to primary leased units.</p>
<p>Evaluate the utility of Rapid Rehousing (RRH) as a tool for housing placement because of the disparity between increasing rental costs and inaccessible incomes. Current evaluations for RRH are not sufficient and outcomes should be analyzed for longer periods of time.</p>	<p>This is helpful additional strategic focus to inform mid-term outcomes identified in Goal 7 to produce an evaluation plan to understand short- and long-term impacts of homeless services and programs.</p>
<p>Increase the baseline length of support for RRH and increase flexibility to extend beyond the baseline when necessary for housing stability and retention.</p>	<p>One of the intents of the HRAP is to better match people to the services they truly need. Right now, RRH timelines and amounts differ by population system. The Community Sheltering Strategy, within the HRAP, recommends higher RRH amounts and timelines, but the ability to do this will depend on funding availability and alignment within the full suite of resources.</p>
<p>Expand opportunities for supportive housing placements (project-based or tenant-based) in Home Forward and other Community Development Corporations with appropriate supports aligned with that access.</p>	<p>Goal 2 includes medium-term outcomes to increase numbers of supportive housing units, and Goal 5 focuses on using the right dollars for the right service, including increased utilization of Medicaid-funded health system resources to support housing stability. Both may support opportunity for this strategy.</p>
<p>Add four to six service providers to the Implementation Committee who collectively represent a combination of populations served and specific types of service delivery.</p>	<p>Housing and homeless service providers are critical partners in the work of developing, implementing, and monitoring this plan. The proposed governance structures attempt to strike a balance between being sufficiently representative of the broad range of other key partners, while also remaining nimble enough to allow for effective, efficient governance. As work plans are developed to support each action item within the plan, we anticipate that service providers will be directly engaged in workgroups where their service- and population-specific expertise can most effectively be engaged in shaping implementation.</p>

<p>Develop a community-based health care management platform that all service providers can use to engage clients with health care information and services including: identifying clients' CCO and health plan payer; make, confirm, change medical appointments; access HRS benefits; health navigation from the medical provider/payer.</p>	<p>Among the plan's foundational strategies is to establish system-wide housing navigation, care coordination and crisis intervention capability to ensure we can match clients with the services that best meet their needs. This recommendation is now incorporated to strengthen related action items in Goal 7.</p>
<p>Add two additional non-voting Steering Committee seats for housing/homeless-focused service provider representation or reserve 2 existing non-voting Steering Committee seats for housing-focused service providers</p>	<p>Housing and homeless service providers are critical partners in the work of developing, implementing, and monitoring this plan. The proposed governance structures attempt to strike a balance between being sufficiently representative of the broad range of other key partners, while also remaining nimble enough to allow for effective, efficient governance. As work plans are developed to support each action item within the plan, we anticipate that service providers will be directly engaged in workgroups where their service- and population-specific expertise can most effectively be engaged in shaping implementation.</p>
<p>Identifying the true cost of delivering high value expert services:  a. Clarify county's practice to not pay for 100% of cost of contracted services while setting outcome-oriented goals that account for true cost of services.  b. Agree on a baseline compensation model using one of the following to ensure a thriving wage.  i. Living wage  ii. County wage  iii. County negotiated union wage  iv. Housing wage (NLIHC)  c. Create standardized definitions of service delivery types, i.e. housing placement, retention, etc.  d. Create standardized definitions of core jobs and their functions. Include differentiation of each level - manager, direct service; case manager, outreach worker, etc.  e. Include and define "lived experience" as a qualification that is paid equitably compared to formal education or work experience (lived experience would be relative to the service being provided).</p>	<p>Goal 7 of the plan includes a near-term action item in coordination with JOHS, Metro, and Washington and Clackamas Counties to define and communicate consistent language to describe services. Initial work under the plan and led by JOHS to rebase services reimbursement based on shared definitions will begin with Permanent Supportive Housing and in support of the Community Sheltering Strategy. Other recommendations here provide helpful additional strategic focus to inform potential expansion of mid-term action items.</p>

<p>Improve county contracting and procurement processes for housing-focused service providers:</p> <ul style="list-style-type: none"> <li>a. Expand revision of contracting process beyond shelters to all housing services funded by Multnomah County to ensure barriers are identified and removed.</li> <li>b. Standardize contract administrative approach, training, tracking and reporting to bolster the ability to meet mutually-defined goals.</li> <li>c. Replace cost-reimbursement contracts with contracts based on providers' operating budget (including overhead/admin costs) invoiced at 1/12th monthly.</li> <li>d. As identified by Multnomah County's Contracting and Procurement office: <ul style="list-style-type: none"> <li>i. Enhance contract administration</li> <li>ii. Improve supplier and contractor engagement</li> <li>iii. Differential between Requests for Proposals (RFP) and Requests for Programmatic Qualifications (RFPQ)</li> <li>iv. Facilitate contract modifications, adjustments, and amendments.</li> </ul> </li> </ul>	<p>The plan identifies and supports this work in two areas: Most immediately, an action item within Goal 2 tasks JOHS to "Review and streamline shelter services contracting process for faster and more efficient contracting that allows providers to meet workforce needs." More broadly, the plan's Additional Considerations include several action items focused on homeless services workforce recruitment and retention, including an action item to "Evaluate funding contracts specifically to increase wages and training." These comments offer helpful strategic guidance to support that work.</p>
<p>Identify all housing and homeless services that could be covered by Medicaid, not just those limited to supportive housing services, outreach, or crisis response.</p> <ul style="list-style-type: none"> <li>a. Identify all housing and homeless services that could be covered by Medicaid, not just those limited to supportive housing services, outreach, or crisis response. Note that DSV providers are precluded by law from using Medicaid dollars to pay for their services.</li> <li>b. Engage with housing-focused service providers to understand challenges, limitations, and needed resources to directly bill Medicaid.</li> <li>c. Explore options to engage a third-party administrator or similar model, or organizations in the Metro area with existing infrastructure and experience, to carry the ongoing administrative functions and financial cost to partner with nonprofit organizations directly billing Medicaid in order to potentially exceed the amount of new revenue organizations would be able to secure.</li> </ul>	<p>A foundational strategy of the plan is to use the right dollars for the right service, including Medicaid dollars. Goal 5 focuses on short term actions regarding Medicaid funding for supportive housing services, outreach, and crisis response, but it also includes completion of provider- and population-specific system mapping and steps to orient, align, and fund current and future service contracts toward Homelessness Response System goals. This recommendation can provide strategic focus to that work, as well as to work underway in collaboration between DCHS, MCHD, JOHS, and Health Share, to begin coordinated implementation of Medicaid-funded Health Related Social Needs services.</p>

<p>Prioritize long-term rent assistance + case management</p>	<p>Goal 2 includes action items to expand or strengthen rental assistance and case management services, both to improve housing placement from shelter and to expand and improve retention in permanent supportive housing.</p>
<p>Modernize Multco contracting processes</p>	<p>The plan identifies and supports this work in two areas: Most immediately, an action item within Goal 2 tasks JOHS to "Review and streamline shelter services contracting process for faster and more efficient contracting that allows providers to meet workforce needs." More broadly, the plan's Additional Considerations include several action items focused on homeless services workforce recruitment and retention, including an action item to "Evaluate funding contracts specifically to increase wages and training." These comments offer helpful strategic guidance to support that work.</p>
<p>Look to organizations (like Project Access NOW) who have developed networks of navigation, care coordination, and Medicaid billing and bring them to the table when developing new infrastructure or coordinating bodies.</p>	<p>A foundational strategy of the plan is to use the right dollars for the right service, including Medicaid dollars. Goal 5 focuses on short term actions regarding Medicaid funding for supportive housing services, outreach, and crisis response, but it also includes completion of provider- and population-specific system mapping and steps to orient, align, and fund current and future service contracts toward Homelessness Response System goals. This recommendation can provide strategic focus to that work, as well as to work underway in collaboration between DCHS, MCHD, JOHS, and Health Share, to begin coordinated implementation of Medicaid-funded Health Related Social Needs services. Project Access NOW is an active partner in that work.</p>
<p>Work with affordable housing providers to move people from shelter to housing. Requires additional rental assistance and case management services.</p>	<p>Goal 2 includes action items to expand or strengthen rental assistance and case management services, both to improve housing placement from shelter and to expand and improve retention in permanent supportive housing. As work plans are developed to support each action item within the plan, we anticipate that service providers will be directly engaged in workgroups where their service- and population-specific expertise can most effectively be engaged in shaping implementation.</p>



<p>Include providers of affordable housing in efforts around eviction prevention strategies</p>	<p>Additional considerations for the HRS outlined in the plan include assembling a workgroup to explore eviction prevention strategies. As work plans are developed to support each action item within the plan, we anticipate that service providers will be directly engaged in workgroups where their service- and population-specific expertise can most effectively be engaged in shaping implementation.</p>
<p>Support for increase permanent supportive housing subsidy.</p>	<p>Goal 2 proposes increasing the per household cap amount for permanent supportive housing to \$15,000-\$17,500 per household at this time, and includes consistent rebasing of per household costs for PSH as a medium-term action.</p>
<p>Do not fold the Community Budget Advisory Committee into the Community Advisory Subcommittee</p>	<p>The proposed governance structures attempt to reduce duplicative advisory and oversight roles to allow for effective, efficient governance. Directly aligning the work of the HRS Community Advisory Committee with the JOHS budget advisory functions helps to achieve this goal.</p>
<p>Remove the five Ps under foundational strategies</p>	<p>Understanding intersectionality is essential to addressing the upstream causes impacting those suffering from homelessness, and is key to successfully working with the individuals and communities who face homelessness, often disproportionately.</p>
<p>Guiding principles are murky and should be removed</p>	<p>The work of addressing homelessness is complex. Guiding principles help to shape the response, especially when approaches are newly evolving or unclear.</p>
<p>Expand the Community Advisory Subcommittee to 15 members and add the Downtown Neighborhood Association as a member</p>	<p>A member of the public has been added to this Community Advisory Subcommittee membership. This person can be but is not required to be affiliated with a neighborhood association.</p>
<p>Having shelters or other forms of housing dedicated to ADA accessibility would be logistically helpful and potentially empowering and appealing to the individual patient/client.</p>	<p>JOHS is aware of these challenges and recognizes that accounting for the needs of those with physical disabilities is imperative for successful sheltering, housing, etc. We have also added the following action item under Goal 1 to address this comment: Align housing referral and placement systems to Fair Housing goals and practices supported by the Portland Housing Bureau to increase placement to accessible units for people with physical disabilities and access to reasonable accommodations.</p>

<p>Include case worker and ongoing support for those with brain injuries</p>	<p>The plan supports a range of action items to increase access services and support for people experiencing homelessness with a range of disabling conditions. This includes those with brain injuries.</p>
<p>Create a legal “stick” or incentive “carrot” to encourage landlords to help patient’s make needed relocations to ADA or ground floor level units</p>	<p>We have added the following action item under Goal 1 to address this comment: "Align housing referral and placement systems to Fair Housing goals and practices supported by the Portland Housing Bureau to increase placement to accessible units for people with physical disabilities and access to reasonable accommodations."</p>
<p>End unregulated camping</p>	<p>Oregon's municipalities regulate and enforce the time, place, and manner in which people can engage in camping, following applicable state and federal law. This plan cannot and does not direct municipalities in doing so. Rather, the plan focuses on expanding access to shelter, housing, and supporting services that help people return from homelessness to housing stability.</p>
<p>End the use and sale of drugs in public</p>	<p>Oregon's municipalities regulate and enforce the use and sale of drugs in public, following applicable state and federal law. This plan cannot and does not direct municipalities in doing so. Rather, the plan focuses on expanding access to behavioral health care and other supportive services that help people address substance use disorders.</p>
<p>Require independent oversight and accountability for homeless spending</p>	<p>Independent oversight and accountability for homelessness spending occurs through a range of budget and spending oversight practices, including those of the independently elected auditors of the City of Portland, Multnomah County, and Metro regional government.</p>
<p>Enforce existing laws and penalties on graffiti and defacing property.</p>	<p>Oregon's municipalities regulate and enforce graffiti and defacing property, following applicable state and federal law. This plan cannot and does not direct municipalities in doing so.</p>
<p>Include the costs of the investments in the plan</p>	<p>Many of the costs associated with early action items within the plan are reflected in Chair Vega Pederson's Executive Budget for FY 2024-25, which includes a 24% increase in homeless services spending and a \$29M investment in expanded substance use and recovery services. Additional costs associated with the plan will be identified in partnership with other funding jurisdictions, including the City of Portland, Metro, and State of Oregon.</p>

Provide more time for feedback, particularly for those with lived experience	The draft plan was shared with several advisory bodies whose members include those with lived experience, and we did receive feedback from several people with lived experience. It was also shared with providers who work daily with people experiencing or at risk of homelessness. The plan's governance, oversight, and advisory structure, described in Goal 8, includes multiple individuals with lived experience of homelessness, and plan implementation will continue to be informed by the JOHS Lived Experience Advisory Committee.
Implement a continuous improvement framework to improve system outcomes	This is a primary focus of Goal 7, which includes the following action item: "Develop and implement plans for continuous quality improvement that is collaborative, data driven, responsive and rigorous."
Use Built for Zero as the continuous improvement system framework	This is helpful additional strategic focus to inform implementation of continuous quality improvement action items under Goal 7.
Set a deadline for functional zero	This is not currently a stated plan goal, but implementation of action items within Goal 7 may lead to future plan goal development.
Include the social and economic impact of homelessness in the problem statement	The introduction to the plan describes the social and economic impacts of homelessness.
Build a system that creates real time data	Goal 7 focuses on improving data and analytics across the system to measure progress and enhance use of physical and financial resources, including use of real-time data for better service coordination.
Include/integrate drug courts	Diversion programming related to Measure 110 is included in Goal 3.
Designate a HRS program manager	The HRS team includes a director and two advisors.
Integrate the existing Oregon law of drug courts into the homelessness system and provide a simple referral system to deal with those who are not capable of managing their substance abuse or behavioral health or refuse to do so.	Diversion programming related to Measure 110 is included in Goal 3.

<p>Double the goal of increasing shelter beds from 1,000 to 2,000</p>	<p>Goals established throughout the plan, including shelter expansion goals under Goal 2 are meant to be both aggressive and attainable. Shelter expansion goals are closely linked with action items to improve successful movement of people from shelter back to permanent housing to improve the efficiency existing shelters to serve more people.</p>
<p>Obtain from each of the more than 100 providers as part of the pre-qualification process an express written commitment to implement all services in compliance with this HRS plan by June 2024</p>	<p>The Implementation Subcommittee of the Homelessness Response System will direct most aspects of plan implementation. They may consider this recommendation in doing so.</p>
<p>Establish a single unified care intake and tracking system</p>	<p>Goal 1 focuses on establishing system-wide housing navigation, care coordination and crisis intervention capability. Goal 7 focuses on improving data and analytics across the system to measure progress and enhance use of physical and financial resources, including use of real-time data for better service coordination.</p>
<p>Phased-in countywide ban on self-sited homeless camps</p>	<p>Oregon's municipalities regulate and enforce the time, place, and manner in which people can engage in camping, following applicable state and federal law. This plan cannot and does not direct municipalities in doing so. Rather, the plan focuses on expanding access to shelter, housing, and supporting services that help people return from homelessness to housing stability.</p>
<p>Integrate into policy and program development the mission and work provided by first responders to those experiencing homelessness and related issues like drug addiction and mental illness</p>	<p>Goal 1 focuses on establishing system-wide housing navigation, care coordination and crisis intervention capability. Goal 3 of the plan focuses on increased access to appropriate levels of behavioral health supports and reduced barriers to access. The plan's Community Advisory Committee includes first responders to inform implementation.</p>
<p>Help catalyze the construction of 20,000 new affordable rental housing units, using extra Multnomah County tax funds from Metro and not raising our taxes</p>	<p>Goal 6 includes the following: Identify a new local funding source (to replace Portland and Metro Housing Bonds) for funding for the construction of affordable housing, including supportive housing. Regional partners, including the City of Portland, Multnomah, Clackamas, and Washington Counties, Metro, and the State of Oregon are in active discussions regarding how to both adequately fund affordable housing and the supportive services needed to help people move successfully from homelessness into stable housing - each at the scale needed to meet demonstrated needs.</p>

<p>Focus on prevention and early intervention,</p>	<p>Several existing programs funded at the state and local level address prevention and early intervention, and this work will continue. Goal 4 of this plan extends that focus to include establishing interventions aimed at preventing homelessness among specific populations: youth aging out of the foster care system; individuals exiting the criminal justice system; and people discharged from healthcare or behavioral health settings who are at-risk of becoming homeless.</p>
<p>Incorporate culturally responsive practices, addressing systemic barriers, and ensuring access to services for marginalized and underserved populations</p>	<p>Goal 1 recognizes that "we must better align strategies to meet the needs of people experiencing homelessness and reduce repeated cycles of system interactions, and design systems that center and expand culturally specific services for people who are Black, African American or African; Native Hawaiian or Other Pacific Islander; American Indian, Alaska Native, or Indigenous; Latina/Latino/Latinx/Latinae; Asian or Asian American; and LGBTQIA2S+," and Goal 2 establishes specific action items associated with culturally-specific shelter expansion.</p>
<p>Given that the JOHS CBAC will work through June, differentiate the timeline for the creation of the Community Advisory Subcommittee to be completed in fall of 2024; include an unaffiliated community member; make sure Community Advisory Subcommittee has a member on the Central CBAC</p>	<p>This strategic guidance will support implementation of Goal 8. Membership considerations described here for the Community Advisory Committee have been included in the final plan.</p>
<p>Implementation Subcommittee is too big - cut it down to no more than 12 members, keep JOHS director and add Care Oregon; eliminate HS and Trillium, given HS role on Steering and Oversight Committee</p>	<p>The proposed governance structures attempt to strike a balance between being sufficiently representative of the broad range of other key partners, while also remaining nimble enough to allow for effective, efficient governance.</p>
<p>The shelter strategy problematically indicates that LGBTQ+ shelters should be focused on single people. This is negative stereotyping and comes from controlling images of queer people as not able to have or not valuing romantic relationships or having families. Queer people often struggle to find safe, affirming shelter for couples.</p>	<p>The population listed (single adults) has been changed to simply "adults", as has the population for the action item opening 555 shelter beds. This action item wasn't intended to limit one shelter to single adults and another to couples, so the language has been changed to align with the intended populations, which include those in relationships.</p>

<p>Require any new affordable housing to include a certain number of family units with additional bedrooms to accommodate families, including non-traditional or chosen families.</p>	<p>This is helpful strategic guidance to support implementation of Goal 6. Portland Housing Bureau's funding sources for new affordable rental development often have specific goals related to the number of family-sized units that need to be created. For example, the Metro Housing Bond sets a goal that half of the total units created (737 of 1,475) should be family-sized. In addition, many of the city's homeownership programs help create more affordable and middle-income family-sized homes. For example, the HOLTE program is only available for houses with 2+ bedrooms.</p>
<p>Fund day centers as part of the HRAP</p>	<p>This has been added to the plan under Additional and Future Considerations</p>
<p>Ongoing funding for workforce</p>	<p>The plan identifies and supports this work in two areas: Most immediately, an action item within Goal 2 tasks JOHS to "Review and streamline shelter services contracting process for faster and more efficient contracting that allows providers to meet workforce needs." More broadly, the plan's Additional Considerations include several action items focused on homeless services workforce recruitment and retention, including an action item to "Evaluate funding contracts specifically to increase wages and training." These comments offer helpful strategic guidance to support that work.</p>
<p>Address needs of people with pets, so that people do not have to be separated from their pets, especially during severe weather emergencies.</p>	<p>This is helpful strategic guidance to support implementation of Goal 2 and the related shelter expansion under the JOHS Community Sheltering Strategy. Currently, most emergency shelters are low-barrier, meaning they welcome partners, pets and possessions, and are designed to be trauma-informed and able to meet participant needs for privacy and community.</p>
<p>The plan makes no mention of the other cities and unincorporated areas of the County.</p>	<p>The Steering and Oversight Committee and the Implementation Subcommittee each include a representative from east county, and ongoing plan implementation will require ongoing engagement of officials from Troutdale, Gresham, Fairview and Wood Village, as well as providers serving people experiencing homelessness in these jurisdictions.</p>

<p>There seems to be an internal conflict on what the plan calls for in terms of affordable housing, and the Chair's response to Metro's suggestion of utilizing unanticipated increased revenues to fund more affordable housing projects. Without relative dollar values for each strategy, it's hard to know what costs what. There may need to be trade-offs and priorities if additional funding is not available. There should be prioritization of the goals.</p>	<p>Goal 6 includes the following: Identify a new local funding source (to replace Portland and Metro Housing Bonds) for funding for the construction of affordable housing, including supportive housing. Regional partners, including the City of Portland, Multnomah, Clackamas, and Washington Counties, Metro, and the State of Oregon are in active discussions regarding how to both adequately fund affordable housing <i>and</i> the supportive services needed to help people move successfully from homelessness into stable housing - each at the scale needed to meet demonstrated needs.</p>
<p>The plan seems to require a lot of administrative overhead.</p>	<p>The Homelessness Response System consists of 3 employees.</p>
<p>In general, this plan is disappointing as it seems to be Portland centric</p>	<p>The vast majority of the goals in this plan - around systems to communicate the availability of resources, expanding behavioral health services, taking advantage of Medicaid funding for housing assistance and street response, expanding workforce opportunities, transparency in outcomes, getting upstream of the causes of homelessness, etc - would improve outcomes for all of Multnomah County, including the east county cities and unincorporated areas. The Steering and Oversight Committee and the Implementation Subcommittee each include a representative from east county, and ongoing plan implementation will require ongoing engagement of the City Managers of Troutdale, Gresham, Fairview and Wood Village, as well as providers serving people experiencing homelessness in these jurisdictions.</p>
<p>Implementation should include an annual summit.</p>	<p>Goal 9 addresses communications strategies, and this is helpful strategic guidance as we look to develop communications plans.</p>
<p>Compensate those who are serving on the committees and not being paid</p>	<p>Committee members who are not otherwise compensated for their participation will receive compensation following Multnomah County policy and practices.</p>
<p>Have 2 other lived experience committee members and an SHS oversight individual with lived experience</p>	<p>Goal 8 has been updated to include 2 additional people with lived experience of homelessness as part of the Community Advisory Committee. Through plan implementation, we will seek additional linkage among various JOHS advisory committees, including the SHS and Lived Experience advisory committees.</p>