



MULTNOMAH COUNTY

FY 2023 Budget Work Session Follow Up – Joint Office of Homeless Services

Joint Office of Homeless Services – May 24, 2022

Question 1

Commissioner Jayapal (District 2): How do programs supporting landlord recruitment and retention, housing placement incentives, and master leases work together?

Response: The JOIN landlord recruitment and retention program was created several years ago and modeled on a similar program in Seattle. The project began with a focus on supporting the Veteran's system with housing placement. It has since expanded to support the Homeless Family System of Care and the JOIN collaborative in-reach team that provides housing placement support for people sleeping in some of our facility based and alternative shelters. This year's budget proposes an additional allocation to expand the landlord recruitment effort, either at JOIN or through a re-visioning of the current program. In addition, the budget allocates funds specifically to support the recruitment of landlords with certain risk-mitigating incentives. These incentives have been available on a provider-by-provider basis in their client assistance allocations. Additionally, providers are able to enter master lease agreements (where the provider holds the lease(s) for apartments with the landlord and then uses a sub-leases or program agreement that is between the provider and tenant) with landlords as they see fit. The master lease can be used alone or in conjunction with other landlord incentives for placement and/or with landlord recruitment and retention programs/activities. The Chair's proposed FY 2023 budget contemplates building on the experience of Move In Multnomah to systematize the incentives as well as adds funds to provide technical assistance to providers who are interested in doing master leasing for the first time or expanding their existing master lease work.

Question 2

Commissioner Vega Pederson (District 3): Please provide in writing the information you shared during the discussion of Publicly Supported Adult Shelter Capacity (slide 30) regarding the average length of stay and percentage of people moving into permanent housing by shelter type. Do you have that same data for the Family, Youth, and DV shelter beds?

Response: This is the first time we've run this data and we will be looking at it quarterly moving forward. The data I shared during the presentation includes family, youth, and adult shelter, combined and disaggregated by type of shelter. Please note the following: the median is used for average length of stay due to the large variance; the permanent housing placement total is not the total for all of our systems placements as people move into permanent housing directly from the street or car.



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FY 2022 housing outcomes by type of emergency shelter (to date):

- Transitional Housing Exit Destination:
 - Average length of stay = 134 days
 - Permanent Housing = 300 people (43%)
 - Other transitional housing = 134 people (19%)
- Congregate Shelter Exit Destination:
 - Average length of stay = 24 days
 - Permanent Housing = 449 people (21%)
 - Transitional Housing = 208 people (10%)
- Alternative Shelter Exit Destination:
 - Average length of stay = 149 days
 - Permanent Housing = 26 (46%)
 - Transitional Housing = 4 (7%)
- Motel Shelter Exit Destination:
 - Average length of stay = 114 days
 - Permanent Housing = 106 (27%)
 - Transitional Housing = 19 (5%)

Question 3

Commissioner Stegmann (District 4): Of the FY 2023 planned/in progress expansion of emergency shelter units for adult shelter capacity, how many are potential safe park sites? Do we have an estimate of how each site could accommodate?

Response: We are currently planning two safe park locations. One is part of the Safe Rest Village initiative and will focus on RVs. In the current stage of planning, we estimate that the site, which offers between 2 and 3 acres of paved surface, could accommodate approximately 40 RVs, but we need more design work to be completed before committing to this number. The second site is approximately 0.65 acres and will likely serve passenger vehicles; although we are just beginning the site design process, we would again expect the site to serve about 40 vehicles.



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Question 4

Commissioner Stegmann (District 4): Regarding the comment that the budget will add up to 1,700 new supportive housing apartments, representing at least 67% of our LIP goal, how many of those units are already online and when will the rest be coming online? How many of these units are project-based units vs. tenant-based vouchers?

Response: The Joint Office and its partners began building the capacity to serve 565 households in new Supportive Housing (SH) programs in FY22– some programs are fully implemented while others are actively working to hire and train staff. As of FY22 Quarter 3, over 200 households had been placed into Supportive Housing across these programs.

Our FY23 proposed budget includes funding to serve up to an additional 1,197 households, for a total of 1,762 households across the FY22 and FY23 investments. Approximately 66% of this combined capacity will be tenant-based and approximately 34% will be site-based. This breakdown could shift as we move forward in planning. The percent of site-based SH just includes site-based SH units that we have already committed to (e.g. SH units in Portland and Metro Housing Bond buildings that will come online in FY23). One strategy we plan to pursue in FY23 is working with affordable housing owners to set-aside units in existing buildings as SH as they turnover. This would increase the portion of total SH capacity that is site-based.

	SHS Planned Capacity	Households Placed
FY 2022	565	200*
FY 2023	<u>1,197</u>	TBD
Total Households	1,762	

**as of FY 2022 Quarter 3*

The Joint Office has also committed funding to an additional 254 apartments of site-based Supportive Housing that is expected to come online between FY24 and FY25, and we plan to develop capacity to serve at least 219 more households through tenant-based and/or site-based SH to reach the goal, as outlined in our Local Implementation Plan, to create at least 2,235 new units of Supportive Housing with Metro SHS dollars.

As we move forward, we will continue to think strategically about the balance between tenant-based and site-based SH. There are strengths and weaknesses to both models and we want to strike a balance that is responsive to the needs of people with disabling conditions who



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are experiencing or at imminent risk of experiencing long-term, literal homelessness in our community.

Question 5

Commissioner Meieran (District 1): Please provide an update on the progress toward SHS goals (number of placements, shelter beds, etc.).

Response: The Multnomah County Local Implementation Plan (LIP) sets aggressive goals over the lifespan of the Metro SHS ballot measure (ten years). We are about to close out the final quarter of the first year of funding where we have focussed on building capacity and infrastructure, internally and among our service providers. Additionally, FY23 will be the first year when our funding from the SHS measure will begin to track closer to the estimated projected revenues. For context, the revenue we received in FY22 - our ramp-up year - we received approximately 50 percent of annual projected amounts. The most recent report for SHS is the [Q3 report](#) and you can see the outcomes as of Q3 in the [budget presentation slides 47 - 49](#). For further context, we are including below three of the five numeric goals of the LIP:

Three Year Goals in Multnomah County Local Implementation Plan

Based on anticipated revenues and the gaps analysis, the Multnomah County Local Implementation Plan sets out specific goals for expanding housing opportunities for people experiencing or at imminent risk of homelessness. These goals are anticipated to be achieved over several years as full funding becomes available and new program capacity is built out. Specifically, the LIP sets as goals for Multnomah County, once the Measure is fully implemented, of:

- 2,235 additional permanent supportive housing opportunities
- 2500 new housing and retention placements annually (through PSH & RRH)
- 1000 new households prevented from homelessness annually



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Question 6 - 10

Commissioner Meieran (District 1): Please provide information on the trajectory of people moving through emergency shelter beds: what type of housing situation are they coming from and what type of housing are they moving to (transitional housing, permanent housing, etc.)? How many people moved from the streets into shelter of any kind? How many people remained in that housing for 6 months or more? How many people moved from shelter into housing of any kind? How many people remained in that housing for 6 months or more?

Response: see Question 2 above for the information on housing exits from emergency shelters.

The following data captures self-reported living situation prior to an emergency shelter entry during the first three quarters of FY22. [Note: There is no HMIS data collected on Prior Living Situation for children.]:

- Total number of people who self reported their prior living situation: 3,979. Of those:
 - 2,528 (64%) were experiencing homelessness immediately prior to entry into emergency shelter
 - 522 (13%) were in institutional settings (include a hospital/medical facility, a psychiatric facility, substance abuse treatment facility, jail, long term care facilities and halfway houses) immediately prior to entering emergency shelter
 - 482 (12%) people were in temporary housing (includes doubled up with family/friends or a self paid hotel/motel) immediately prior to entering shelter prior to entering emergency shelter
 - 101 (3%) people were in permanent housing (includes housing owned by clients, rentals with or without rent assistance) immediately prior to entering emergency shelter
 - 138 (3%) people declined to answer the question or shared they didn't know
 - and data was not collected for 208 (5%)

Our most recent [full year report is for FY21](#), which is a year that was heavily impacted by COVID 19. That year:

- 4,760 people newly entered shelter
- 4,010 people were newly enrolled in housing programs



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- Of those who had been housed 12 months previously, 92% of those contacted for follow-up reported still being in their housing

Question 11 - 18

Commissioner Meieran (District 1): What is the total amount of funding in the County budget for all departments that is dedicated to rent assistance, broken down by emergency, short-term, and long-term? Where is the rent assistance going? How many people are being served? What are the funding sources? **(This may require a future briefing but for now a highlight of the rent assistance by type (short/long term) for JOHS and DCHS will be useful.** It should include program offer, type of rent assistance, budget by funding source and if possible estimate of households served. If the funding is being passed through a CBO please identify (i.e. HomeFoward).

Commissioner Meieran: Rent Assistance: What is the total amount of County funds dedicated to rent assistance (emergency, short term and long term)? What departments provide rent assistance? What is the breakdown of each type of rent assistance by funding source (federal, state, SHS, ARPA, County GF, etc)? Why is some rent assistance included in JOHS budget, while other short term/emergency/long term rent assistance is in DCHS (and potentially other departments)? What determines where rent assistance dollars are housed at the County? How many individuals/households are currently being housed with long term rent assistance dollars, and what is the breakdown by source of funding? How is all rent assistance across County departments coordinated, and who is ultimately responsible for overseeing the pot of rent assistance dollars?

Response: Short and Long Term Rent Assistance questions will be covered in a separate document with contributions from multiple County departments.

Question 19

Commissioner Meieran (District 1): What is the FY 2023 plan for providing better information to individuals regarding shelter bed access?

Response: Access to information about the shelter systems can be found in numerous places including [211info](#), [Joint Office website](#), [Rose City Resource Guide](#), and people can also access information via calling 211Info and a hard copy of the Rose City Resource Guide. Not all of the shelters across our community are funded by the County and many of the resources listed above include non-JOHS funded shelters as well, to ensure that people have access to the full range of information on emergency shelters.



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Additionally, JOHS-funded family, youth, and domestic violence shelters are each operated using a centralized intake system. These systems maintain waiting lists when they are full. Information on how to get on the waiting list for shelter in these systems, or to access any beds that may be available, is through a call to 211 or to each of the system's access lines. The adult shelter system is accessed directly through the operators of the shelters. They each maintain phone lines that are available through 211. In addition, Transition Projects accepts walk-ins to their day center, and Navigation Teams have beds set aside for individuals they are working with who want shelter.

This year we will continue to fund 211 and the Rose City Resource Guide as well as a full-time shelter bed set-aside coordinator to track and allocate adult emergency shelter vacancies from referring partners in the Street Services Coordination Center. Finally, we have budgeted \$300,000 to design and implement an overall coordinated entry system for adult shelter, so that, as the number of adult shelter operators and sites continues to increase, there will be a single point of entry for those adult households seeking shelter.

Question 20

Commissioner Jayapal (District 2): The usefulness and ability to show return on investment from outcomes provided in program offers is somewhat inconsistent. Please provide examples of the outcome goals we set for our providers.

Response: Below are examples of outcomes in JOHS contracts, taken directly from current contracts.

- **Housing Placement** (taken directly from one of our provider contracts):
 - # clients provided housing case management services to address client barriers to housing and self-sufficiency = 690
 - # new and ongoing clients provided rent assistance = 575
 - new households receive rent assistance (145 chronically homeless, 150 women, 90 Veterans)
 - # individuals housed in FY 18-19 who are provided ongoing rent assistance = 60 households
 - # previously housed individuals provided eviction prevention rent assistance to prevent return to homelessness = 50 individuals
 - # individuals diverted from shelter through housing services or rent assistance = 150 individuals



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- % clients who remain housed 6 months after rent subsidy ends = 80%
- % clients who remain housed 12 months after rent subsidy ends = 70%
- # Veteran households placed or retained in permanent housing with Housing Choice Vouchers = 50
- # Veterans housed with other housing resources, with priority for VASH holders, and including those ineligible for VASH and other VA services = 65
- **Emergency Shelter (taken directly from a provider contract):**
 - Number of rooms per night = 17
 - number unduplicated clients per year served = 250 unduplicated guests
 - Occupancy Rate = 90%
 - Families assessed using Coordinated Access Tool = 95%
 - Average length of stay = 4-6 months
 - Exit to permanent housing = 90%
- **Outreach (taken directly from provider contract):**
 - # unduplicated HH placed from street or safety-off-the-streets locations into permanent housing = 295
 - # subset of above placed by InReach Team = 110
 - # subset of above placed by East County = 30
 - # subset of above women placed = 50
 - % of total unduplicated HH placed remaining in housing at 6 months = 80%
 - % of total unduplicated HH placed remaining in housing at 12 months = 70%
- **Permanent Supportive Housing (taken directly from provider contract):**
 - Occupancy rate = 90%
 - # unduplicated households provided PSH retention services = 35
 - % participants maintained or exited to permanent housing = 80%



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- % maintained or increased income from all sources = 15%
- % returns to homelessness = <5%
- Racial equity = Equitable housing outcomes across racial groups

Question 21

Commissioner Vega Pederson (District 3): Please provide more information regarding the \$25 million of Behavioral Health investments listed on slide 54, including details regarding the programs, investments, and outcomes.

Response: Behavioral Health Investments: \$25 million +:

- \$4.2 million Outreach:
 - The PATH program provides outreach-based navigation services to people with substance use disorders who are in need of treatment. The program is funded out of the Joint Office but is operated by the Health Department and outputs and outcomes are maintained by them, but they measure outcomes in terms of connections to substance use and mental health treatment services, as well as housing services, and they prioritize People of Color who are experiencing homelessness.
 - Intensive Street Engagement is a behavioral health-focused team of outreach workers at Cascadia Behavioral Healthcare that does direct engagement and also partners with the Portland Police Bureau's Neighborhood Response Team. Their outputs and outcomes are measured in terms of successful enrollments in care, housing placements, and housing retention.
 - Shelter Inreach is a team of behavioral health specialists employed by Cascadia Behavioral Healthcare who visit adult shelter programs to provide deescalation support and connections to more intensive behavioral health services. The program is funded by the Joint Office but contracted by the Health Department. The outputs and outcomes of this program are monitored by the Health Department, but they focus primarily on ensuring routine presence in multiple shelter settings, engaging and deescalating behavioral health-related situations, and connecting people to services.
 - Navigation Teams are made up of staff from multiple agencies, including staff with expertise in navigation to behavioral health treatment services, behavioral health peer support services, and shelter & housing services. With the expansion underway, we will add culturally specific behavioral health and additional



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recovery focused peer support expertise to the team. The outputs and outcomes for the Navigation Outreach teams are measured in terms of engagements and successful referrals to a range of service types. The outputs and outcomes will be evolving with the expansion, as the scope of the work of the teams changes somewhat in relation to the Street Services Coordination Center.

- Mental Health Outreach is a mental health-focused outreach team, operated by Cascadia Behavioral Healthcare, that partners with other outreach providers and a variety of public space management entities to meet the needs of unsheltered people who are struggling with behavioral health needs. There is not a crisis response; it is focused more on continued engagement and navigation to services and housing. The outputs for this team are measured in terms of enrollments in care, placements into housing, provision of retention services, and housing retention rates over time.
- \$4 million Transitional Housing
 - The Stabilization Treatment Program (STP) funded through the Joint Office is implemented by the Health Department in partnership with Central City Concern. Our funding supports an expansion of the existing STP program to include a culturally specific transitional living situation emphasizing the needs of Black adults who have been involved in the criminal justice system and have significant behavioral health needs. The outputs and outcomes for this program are determined by the Health Department.
 - Recuperative Care Program (RCP) offers transitional living for people experiencing homelessness who are ready to discharge from the hospital, but are not yet well enough to return to shelter or to living unsheltered. While in the program, case managers work to find permanent housing, or, at a minimum, a shelter placement for each person. With support from the Joint Office, RCP is able to offer on-site behavioral health supports to guests who need them. The outputs and outcomes for RCP include number of bed nights provided, and the percentage of people successfully transitioned from the program to permanent housing, as well as the number of people receiving behavioral health services.
 - Service Coordination Team is a partnership between the Portland Police Bureau and Central City Concern. It is a diversion program, focused primarily on people who have had frequent contact with police for drug related offenses. The Joint Office contracts with Central City Concern to provide a combination of low-barrier Single Room Occupancy temporary housing and recovery transitional housing, as well as treatment and permanent housing placement services to



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people who participate in the program. Outputs and outcomes for the program include measures of sustained engagement, participation in behavioral health treatment services, permanent housing placements and retention, as well as increases in income.

- The Joint Office funds a portion of the operating costs of Alcohol and Drug Free (ADFC) transitional housing operated by Central City Concern. This housing also receives federal funding. This transitional housing provides a supportive environment to people who are in active addictions recovery, as well the supports they need to move on into permanent housing, including employment supports and housing placement assistance. The outputs and outcomes for this housing are measured in terms of numbers of people served, percentages of people engaging in various services, numbers of people exiting to permanent housing, housing retention rates at 6 and 12 months, and the percentage of participants who remain active in recovery.
- \$5 million Shelter
 - The Choice motel shelter program is funded by the Joint Office but operated by the Health Department and its contractors. The focus of the program is on providing a supportive shelter environment for participants in Multnomah County's Choice program, which is designed to help people with severe mental illness remain in the community. The program uses several private market motels and the outputs and outcomes for this program are developed and maintained by the Health Department.
 - Wrap Around Motel is a new program, funded with Metro Supportive Housing Services funds, that flow from the Joint Office to the Health Department. The Health Department is contracting with New Narratives, one of our community based behavioral health providers, to offer approximately 40 rooms of supported motel shelter to people who are experiencing homelessness and have behavioral health needs that cannot be met in more conventional emergency shelter programs. The outputs and outcomes for this program are developed and maintained by the Health Department, but the outcomes will include providing safety off the streets to those who are experiencing chronic homelessness, and offering case management to assist people to access more appropriate long-term housing options.
 - Alternative Shelter encompasses several programs, including, the Kenton Women's Village, which prioritizes women experiencing homelessness who are also struggling with behavioral health challenges, and the Safe Rest Villages, that



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are in development. The Safe Rest Villages are designed to provide a low-barrier environment that can help people with behavioral health needs gain stability through access to an individual sleeping unit, and support from on-site peers, service navigators, and housing specialists. The outputs and outcomes for these programs are measured in terms of occupancy rates, people served with safety off the streets services, and people successfully transitioned to permanent housing options. The Safe Rest Villages will also be endeavoring to measure improvements in individual resiliency as stay in the shelter program.

- The Behavioral Health Resource Center (BHRC) will offer a peer led drop-in center for people who are unsheltered and struggling with behavioral health challenges. In addition, it will offer a specialized shelter program for people with severe and persistent mental illness, as well as bridge housing that supports a successful transition to permanent supportive housing. The Joint Office is contributing SHS funding to the operations of the shelter and bridge housing, but the program is operated through the Health Department and its contractors. The outputs and outcomes for this program are/will be determined and maintained by the Health Department and through its contracts with providers.
- \$11.6 million Permanent Supportive Housing
 - Assertive Community Treatment (ACT) Teams provides long-term rent assistance to people who are experiencing chronic homelessness and are enrolled in one of the County-funded ACT teams. Participants on these teams have long received intensive support services, but have lacked the long-term rent they would need to access permanent housing. The outputs and outcomes for this program are measured in terms of households placed in housing, households receiving housing retention services, and housing retention rates at 6 and 12 months.
 - New Narrative is a “placement out of shelter” program, focused on moving people who have serious behavioral health challenges out of shelter and into permanent supportive housing. The funding covers housing case management staffing, client assistance funding, and other supports needed to obtain and maintain permanent housing. The outputs and outcomes for this program are measured in terms of households placed in permanent supportive housing, number receiving retention services, and the percentages of households maintaining their housing over 6 and 12 months.
 - NARA Elders is a SHS funded housing placement program that provides culturally specific housing placement and retention services to Native elders who need a combination of permanent rent subsidy and appropriate wrap-around supports



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to retain their housing. The program is operated by the Native American Rehabilitation Association of the Northwest (NARA). The initial focus is on moving people experiencing chronic homelessness out of our motel shelters. The outputs and outcomes for this project focus on the number of households being placed into permanent housing and the rates at which those households retain their housing over time.

- Doug Fir is a small site-based permanent supportive housing program that will be operated by New Narratives and serve people with serious mental health conditions who are experiencing long-term homelessness. The SHS funding for this project will primarily be used to make the rents affordable to residents regardless of their incomes. The outputs and outcomes for this project are being developed, but will focus on utilization rates and housing retention rates for those living in the apartments.
- FUSE is a project in development that will prioritize permanent supportive housing to people who are coming into frequent contact with crisis medical care, the criminal justice system, and the homeless services system. Based on research conducted in partnership with the Health Department, Healthshare and Local Public Safety Coordinating Council, we know that in most cases the individuals who meet these criteria will have significant behavioral and physical health challenges. This program is in the development stage, but because it is a permanent supportive housing program, the outputs and outcomes will likely focus primarily on housing placement and housing retention.
- Starlight (Westwind) is a brand new, primarily single room occupancy, building that will open this coming fiscal year and be dedicated almost entirely to permanent supportive housing. It will offer culturally specific behavioral health services on-site and will have 70 apartments. The outputs and outcomes for this project are still being developed, but will focus on, among other things, occupancy rates, people served, and people retaining their housing.
- Joyce is a renovation of a historic single room occupancy building which will be completed in FY23 and be wholly dedicated to permanent supportive housing. Like the Starlight, the building will offer culturally specific behavioral health support services on site through a collaboration between NARA, Cascadia, and Cascade AIDS Project. The building will have 66 apartments. The outputs and outcomes for this project are still being developed, but will focus on, among other things, occupancy rates, people served, and people retaining their housing.



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- Cedar Commons is new construction with 60 apartments (mix of studio and single room occupancy units). The SROs are all permanent supportive housing focused on people exiting homelessness who have some of the most significant behavioral health challenges. Central City Concern operates the site, which is funded in part with SHS funds. The Health Department contracts with the provider for services at this building. The Health Department sets the contract output and outcome goals, but because this is a permanent supportive housing program, the outputs and outcomes will be related to maintaining occupancy, numbers of people served, numbers of people engaged in services, and number of people retaining housing.
- Palm 2 is a permanent supportive housing program operated by Cascadia Behavioral Healthcare. It is contracted through the Health Department. The Health Department sets the contract output and outcome goals, but because this is a permanent supportive housing program, the outputs and outcomes will be related to maintaining occupancy, numbers of people served, numbers of people engaged in services, and number of people retaining housing.
- Bud Clark Commons offers 130 studio apartments, all of which are dedicated to housing the most vulnerable individuals experiencing chronic homelessness in our community. The building is owned and managed by Home Forward, but on-site services are provided by Cascadia Behavioral Healthcare. The outputs for this program involve accessing resident support services, and the outcomes focus on housing retention rates for tenants.
- The Intensive Street Engagement Program (ISEP) includes scattered site permanent supportive housing operated by Cascadia Behavioral Healthcare. The permanent supportive housing prioritizes people with significant mental healthcare needs that Cascadia is able to help address through its clinical services. The outputs and outcomes for this program include housing placement, individuals receiving housing retention services, and housing retention rates.
- Hazel Heights is a large affordable housing complex operated by Central City Concern. The Joint Office funds rent subsidies and culturally specific behavioral health support services provided by NARA Northwest. The outputs for this project focus on households receiving retention services and the outcomes relate to housing retention over time.
- Prescott Terrace is a permanent supportive housing program operated by Cascadia Behavioral Healthcare. The Joint Office provides funding to support the operations of 41 SROs in the building that are prioritized to people with acute



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mental health conditions and who need intensive on-site support services. As with other permanent supportive housing programs, the outputs for this program emphasize the provision of support services to tenants of the building and the outcomes focus on housing retention - the ability of people to retain their housing over time.

Question 22

Commissioner Vega Pederson (District 3): Please provide more data on how the wage increase investments will be allocated. (Particularly concerned about organizations that may have long-term existing contracts with the County, which could be detrimental if wages are locked in vs. organizations with newer contracts.)

Response: JOHS is working with our contractors to go through a wage adjustment process that will best utilize available resources to address the wage pressures noted by providers. In their FY 2023 budget packet, contractors were provided a wage adjustment template. During FY2022, contractors had access to additional dollars for capacity building, wage increases and hiring and recruitment incentives. The information gathered from the wage adjustment template will help us understand how each provider would propose to best use those available funds in FY2023 and how the proposed wage adjustment(s) will impact the budget for each program funded in contracts and each of the funding sources within contract budgets as a whole. It will also help us assess whether the proposed adjustment(s) are consistent with the goals of addressing wage pressures to improve recruitment and retention, especially for entry level positions, and for helping JOHS achieve relative wage parity across organizations for positions doing similar work. The proposals developed should not exceed 8% of each contracted provider's FY 2023 operating budget.

Question 23

Commissioner Jayapal: Safety on the Streets - Navigation & Service Coordination (30210B): Please provide a breakdown of the amount allocated to expanded navigation capacity vs hygiene and storage solutions. Also, please provide an update on design and implementation of expanded hygiene and storage solutions, including implementation of recommendations from the PSU report commissioned last year.

Response: The program allocates \$1,000,000 in capital for hygiene and storage solutions, \$2,500,000 for expanded navigation outreach to unsanctioned encampments, and \$137,000 to FTE for shelter bed access coordination. The coordinated planning work with the City of Portland related to the PSU report, that was issued in February, has begun, but we expect it to move forward in earnest once the budget process is completed and it is clear what level of resources is available for expanded hygiene and storage options. In the interim, the Joint Office has invested in new mobile hygiene capacity through Cultivate Initiatives that is in operation, as



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well as in expanded ADA restroom access, and we are in discussions with the City about an opportunity to expand laundry services.

Question 24

Commissioner Jayapal: Please provide an update on implementation of BIT investments.

Response: The following is an update to the presentation provided to the Board on [March 3, 2022](#):

- Street Service Coordination Center - Expanded Outreach
 - The Street Services Coordination Center has launched, and the team - with two Joint Office representatives - meets four days a week.
 - The Joint Office has completed the process of identifying additional Navigation Outreach Worker providers and is initiating contract discussions with them.
 - A Shelter Coordinator has been hired and is actively coordinating shelter access; the Joint Office's Safety on the Streets Manager and Outreach Coordinator have both been hired and will begin work this month.
 - Safe Rest Village siting, programming, and contracting continues, with the Multnomah Village site slated to open this month.
- Hygiene/Storage - please see response to question 12 above
- Staff Retention - Hiring & Retention Bonuses & Pay Increases
 - Some community based organizations continue to implement hiring and retention bonuses.
 - Pay increase discussions are underway with each provider, as described above in question 11.



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Question 25

Commissioner Jayapal: Diversion Services (30500): How much of this program offer goes toward Benefit Assistance, and how many people are expected to be served? How does budgeted amount and people served compare to FY22 and FY21?

Response: \$933,000 is committed to the Central City Concern BEST program. This is the COLA adjusted amount from the current budget year. There is no significant increase proposed to this program. In the current contract year, CCC is expected to file 185 claims, per their contract, and the target is a 75% approval rate. Last fiscal year had the same outcome objectives and the filed just under that number of claims.

Question 26

Commissioner Jayapal: Service Coordination Team (30401B): Does this program connect with what used to be the LEAD program, and if so, how? How many people are served, and what is the racial and ethnic breakdown of the people served?

Response: The LEAD program was operated out of the Health Department, and is distinct from the Service Coordination Team. The Service Coordination Team is a diversion program for people who have had multiple drug-related criminal convictions that has operated out of the Portland Police Bureau Community Services Division in partnership with Central City Concern for many years. Rather than face additional prosecution, participants are given the opportunity to enter transitional housing and treatment. This is the first fiscal year where SCT is part of the JOHS' contract with Central City Concern. The program goals are set by the SCT program coordinator. Through Q1-2 of this fiscal year, 59 people entered the program, 8 had moved into permanent housing, and 8/10 households retained housing 12 months after placement. Of those served during the first two quarters of this fiscal year, SCT's report indicates 54% identified as White, 25% as African American, 8% as Native American, 2% as Hawaiian/Pacific Islander, and 10% as multiple races.



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Question 27

Commissioner Meieran: My main questions have to do with the big picture. I would like to understand how much the County is spending in the three Main pillars of work we do around homelessness: Prevention, Safety/Shelter On and Off the Streets, and Permanent Housing. What did we purchase in these categories last year, what were the outcomes, and what do we expect to purchase with allocations in the next year.

Response: The most recent full year data is for FY21 and is available in our [annual outcomes report](#). Among other data points, the report shows:

- 11,610 people received support accessing and retaining permanent housing from programs receiving funding from the Joint Office. This includes rapid rehousing and permanent supportive housing.
- Over 26,000 people were served in prevention programs, reflecting the leveraging of tens of millions of dollars in federal COVID relief funds allocated to eviction prevention by the City of Portland and Multnomah County.
- The shelters funded by the Joint Office served over 5,390 unique individuals in FY21.

Our recently published [FY22 Q3 three report](#), in addition to other data points, shows:

- 600 more individuals received permanent housing support than during the first three quarters of FY 2021.
- Households assisted with prevention services was nearly 10,000 higher than through quarter 3 last year.
- The number of people served in emergency shelter programs was up by 600 people.

The Joint Office's proposed FY23 budget further expands:

- permanent housing capacity to serve an additional 1400 people per year with rapid rehousing and permanent supportive housing.
- year-round shelter capacity (assuming the lifting of COVID capacity limitations) to support a total of over 2,700 beds/pods/rooms, and
- prevention investments (from ongoing, non-COVID relief funds) to support at least an additional 400 individuals per year who would otherwise lose their housing and become homeless.



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Question 28

Commissioner Meieran: Nicole Hayden’s article [May 14, 2021](#) did a great job of summarizing goals for investments. I would like to understand what the \$150 million total investment, with approximately 1/3 to “immediate shelter solutions”, 1/3 to LT housing opportunities, 1/3 to outreach, employment, services and admin costs, purchased. The goals are listed below:

- Expand supportive housing capacity by 1300 individuals (rental assistance plus services) - QUESTION: How many did we actually provide in total, and where were people placed from?
- Rental assistance for 1000 people to stay in their homes - QUESTION: How many people imminently at risk of eviction were kept in their homes because of LTRA?
- Emergency shelter - \$51 million - to increase by at least 400 beds - QUESTION: How many new beds are available compared with this time last year?

Response: The 1,300 represented a combination of expanded permanent supportive housing and rapid rehousing capacity attributable to year 1 SHS funding. While the creation of new program capacity takes time, and there are multiple factors beyond available funding that impact the number of people agencies are able to place in housing, through three quarters, 600 more people have been served in permanent housing programs than through three quarters last year. The Joint Office’s Q3 report is linked [here](#).

The allocation of SHS funds toward prevention is different from the long-term rental assistance program funding used to support our expansion of supportive housing. In FY22, the Joint Office budgeted SHS funds to support the effort to fully leverage and utilize the state and federal eviction prevention funds that were drastically increased to help mitigate the economic impacts of COVID-19. This SHS funding has primarily helped community based organizations hire staff to receive and process rental assistance applications. Through three quarters of this fiscal year, the SHS funds have supported 2,700 people with eviction prevention to keep them from falling into homelessness.

In the current fiscal year, the Joint Office has added multiple new shelter programs to its year-round shelter capacity, including: Arbor Lodge (80 beds), Roseway (137 rooms), 120 Market (45, expanding to 120), Beacon Village (10), Rockwood (30 rooms). In addition, we have transitioned three motel shelter sites from limited duration COVID response shelter to new, ongoing capacity in the system, including the Gresham Motel Shelter (43 rooms), the New Narratives Motel Wrap Around Shelter (40), and the Barbur Motel Shelter (43). Additional



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behavioral health and alternative shelter capacity budgeted in FY22 is still in development.

Question 29 - 32

Commissioner Meieran: How many people moved from the streets into shelter of any kind? How many people remained in that housing for 6 months or more? How many people moved from shelter into housing of any kind? How many people remained in that housing for 6 months or more?

Response: Our most recent [full year report is for FY21](#), which is a year that was heavily impacted by COVID 19. That year:

- 4,760 people newly entered shelter
- 4,010 people were newly enrolled in housing programs
- Of those who had been housed 12 months previously, 92% of those contacted for follow-up reported still being in their housing
- Information on where people experiencing homelessness were prior to entering shelter can be found in the response to question 6 above.

Question 33 -35

Commissioner Meieran: What is the total number of existing available adult shelter beds across all types (motel, congregate, emergency, villages such as Kenton Women’s Village, alternative such as self-governed sites including Dignity Village)? By existing available beds, I’d like to get at beds that can be used today. Please provide a table including the following basic information (Name of site, Type of shelter (self-governed, full service village, SRV, parking lot, etc.), # of beds available to be occupied and how many individuals are expected to be served per year, How much was spent on each site, both for operations/services and capital, The source of the funding by funding type (ARPA, SHS measure, state, other federal, etc.)). What is the anticipated net gain of available adult and youth shelter beds anticipated by the proposed budget in the upcoming fiscal year?

Response:

Current Shelter Capacity: You will find a table in Appendix 1 that shows all of the shelter programs that currently receive support from the Joint Office. The table includes both COVID restricted and non-COVID restricted capacity, as we remain in a transition phase with our congregate sites. The table indicates that our system includes transitional housing, shelters that do not receive JOHS funding, and allocations of flexible funding to allow providers to use motels on an ad hoc basis. Please note that in addition to the year-round shelter outlined in the chart, the JOHS budget includes funding for winter shelter, as well as severe weather shelter capacity.



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Total Cost of Development & Operations: The turn-around time on this request does not allow us to gather the costs of development for all of these sites, especially given that many were not developed by the County. We will supplement our responses with the amount of funding we provide to operations of these shelter programs and sources of operating support shortly.

Numbers Served: The number of people expected to be served in each shelter will depend on lengths of stay. Data on the length of stay can be found in the response to question 2 above [please note that this data is for the first three quarters of FY22 and will be a data point we are able to report on quarterly.]. Additionally, as you can see in slide 30 of the [Joint Office budget presentation FY21](#) which is the most recent full year worth of data, 5,390 unique people were newly sheltered.

New Capacity: We expect to add new shelter programs with approximately 450 beds/pods/parking spaces/rooms of capacity for adults. This will predominantly be alternative village style shelters (including the Safe Rest Villages) and additional motel shelter capacity. The proposed budget does not contemplate an expansion of youth shelter.

Question 36

Commissioner Meieran: What outreach services are currently being offered, how much total does this cost, broken down by outreach type and funding source. Please list all the program offers going to Outreach.

Response:The JOHS provided a briefing to the Board in February on the different types of outreach that we fund, along with the number of FTE allocated to outreach. Because outreach takes different forms, including housing-focused street outreach, navigation outreach, medical outreach, behavioral health outreach, the funding is in different program offers, including:

30100A/30100B/30201B	Navigation Outreach
30200	Behavioral health shelter inreach team
30210A	East County, Springwater Corridor, Street Medicine
30306A/B	Winter/Severe Weather outreach
30300A/30401A	Behavioral Health & Housing Focused Outreach
30301A/B	Family housing navigators
30307	Veterans outreach
30400A	Coordinated Housing Assessment Team, Housing



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	focused street outreach
30300B	Peer support expansion
30303B	DV navigators
30407B	PATH (recovery focused navigation)

Outreach Type	City/County GF	SHS	Total
Navigation	\$3.4 million	\$1.9 million	5.3 million*
Housing Focused	\$3.7 million	\$880,000	\$4.6 million
Medical	\$330,000		\$330,000
Behavioral Health	\$300,000	\$1.2 million	\$1.5 million

* This includes behavioral health outreach that is housing placement focused

Question 37 - 39

Commissioner Meieran: Why not separate out SHS measure funding into a separate fund like Preschool for All? What do we plan on purchasing specifically for this year’s SHS measure revenue? Yesenia mentioned that 500 people had been placed in supportive housing in the last fiscal year. How many remain in the supportive housing? Where did they come from (street, shelter, potential eviction, jail, hospital, etc.)? This question is trying to get at how we measure people’s trajectories from streets or shelter to supportive housing. Please provide a breakdown of the 10 largest orgs contracted with and how much total they got to achieve what outcomes.

Response: The Supportive Housing Services (SHS) has a dedicated fund 1521 (which includes a small amount of funding from the Visitor Development funds for supportive housing) like Preschool for All. Additionally, in an effort to highlight the SHS funding, all the program offers related to SHS have been scaled and identified as Metro Measure Expansion (see below for example). However, it is important to remember that - unlike Preschool for All - the JOHS outcomes are often the result of braided funding because we are always leveraging our limited resources into the same program, e.g. supportive housing, shelter, etc. Therefore, funding from Metro SHS allows us to rapidly expand existing programming, whereas Preschool for All programming will be new.



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In FY24, we anticipate integrating all funding sources into the program offers and emphasizing the service areas instead of focusing on the funding source to better demonstrate the relationship between total funding and outcomes.

System Support, Access, & Coordination					
30003A	Data, Research, & Evaluation	570,012	400,635	970,647	6.00
30003B	Data, Research, & Evaluation - Metro Measure Expansion	0	1,113,396	1,113,396	5.50
30003C	Data, Research, & Evaluation - Homeless Management Information System	225,000	0	225,000	1.00
30004A	Policy & Planning	102,015	520,536	622,551	3.00
30004B	Policy, Planning, & Regional Coordination - Metro Measure Expansion	0	501,950	501,950	3.50
30004C	Policy, Planning, & Regional Coordination - Regional Strategies Fund - Metro Measure Expansion	0	3,422,415	3,422,415	0.00
30005A	Equity-Focused System Development & Capacity Building	126,306	0	126,306	1.00
30005B	Equity-Focused System Development & Capacity Building - Metro Measure Expansion	0	3,913,539	3,913,539	4.00
30005C	Equity-Focused System Development & Capacity Building - Increase to Operating Budgets	1,000,000	1,000,000	2,000,000	0.00
30005D	Equity-Focused System Development & Capacity Building - Hiring & Retention	250,000	0	250,000	0.00
30005E	Equity-Focused System Development & Capacity Building - Shelter & Outreach Program Support	1,000,000	0	1,000,000	0.00
30005F	Equity-Focused Syst Dev & Cap Bldg - Shelter & Outreach Program Support - Metro Measure Expansion	0	1,000,000	1,000,000	0.00

The supportive housing data mentioned in the questions pertains to FY22 SHS placements and retention data is not yet available for these households. The response to question 2 above speaks to exit destinations from shelters for our system and question 6 speaks to prior living situations for our shelter system. Further data analysis would be needed to speak just to SHS funded supportive housing placements.

Regarding the contracts part of this questions, contracts for specific services or specific organizations can be made available. JOHS can create a list of all the JOHS contractors and the total amount of their FY22 contracts at a later date.



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Question 40

Commissioner Meieran: 30100A - system access, assessment and navigation - What is this purchasing?

Response: This offer includes funding for adult shelter bed coordinated entry (\$300,000), family coordinated entry (\$332,000), information and referral services (\$360,000), landlord recruitment (\$365,000), the original investment in navigation outreach workers (\$448,000), and updating of the adult coordinated access assessment tool (\$34,000) (all \$ rounded to the nearest thousand).

Question 41

Commissioner Meieran: 30100B - What is this purchasing?

Response: This offer is purchasing an expansion of the adult coordinated access system, barrier mitigation services, including legal assistance, and the expansion of the original navigation outreach teams that was part of the FY22 budget.

Question 42

Commissioner Meieran: 30209 - Could you please break this down so I understand what this \$16 million is purchasing?

Response: This offer is paying for the continued operations of four motel shelter programs where the motel is, or is planned to be, in public ownership (Barbur, Gresham, 82nd, and Roseway), as well as two new congregate shelter programs at Arbor Lodge and 120 Market. In addition, the offer budgets for one new “bridge housing” motel shelter program that we plan to launch this coming fiscal year.

Question 43

Commissioner Meieran: 30010 - Administration and Operations - Strategic Capital Investments (\$15M): Are these funds already reserved for existing projects? And/or, are there available funds for new projects including alternative shelter?

Response: As you will recall from slides 33 and 34 in the [Joint Office Budget Presentation](#), the strategic capital investments include both planned investments (Northeast Portland motel shelter (137 rooms); East County shelter acquisition (est. 100 beds); Arbor Lodge renovation (90 beds/pods); New alternative shelter sites (140 pods/rooms); and Capital improvement/asset preservation for existing shelters) as well as potential future investments (\$29.5 million) that do not yet have sites selected but many have been toured and due diligence is underway. We also expect to incur one-time renovation and improvement costs for some of our County-owned shelter sites, as well as potential sites we are anticipating acquiring.



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Question 44

Commissioner Meieran: 30202A: In terms of outcomes, it appears this is saying that so long as the percent of BIPOC individuals served is higher than the average in HUD homeless population, and 35% of the 350 individuals served “exit to transitional or permanent housing,” that this program is considered successful. Is this correct? Or, is there a different outcome measure?

Response: These are shelter programs, and their success is measured, via contracted provider outcome measures, both in terms of people provided safety off the streets (utilization), as well as how many people are able to exit the shelter program to transitional or permanent housing. The funds included in this PO are to support the operations of the alternative shelter sites and therefore, the outcome measures for operations are to serve 350 people annually in the two sites, support 35% of the people sleeping in these sites to move into transitional or permanent housing, and to serve Black, Indigenous, and other people of color at a rate greater than or equal to the rates of BIPOC people experiencing homelessness according to HUDs data. The racial equity goals are a part of how we operationalize racial equity and continue our commitment to eliminating the disproportionately high rates of homelessness among our BIPOC communities.

Question 45 - 51

Commissioner Meieran: 30202B - Please explain where exactly these funds will go? (E.g. operations for SRVs, Beacon). What parking lot(s) are being envisioned? What outcomes will these funds purchase? If they are that 35% of 100 people will exit the alternative shelter sites to permanent housing, this is 35 people getting into permanent housing (not necessarily sustaining it) for \$3.7 million. And there is no time period expressed. Please explain the rationale for the expenditure. Why was this switched from GF to SHS measure funding? If the goal of the measure is to get people who are chronically houseless permanently housed in 10 years, and 35 people will be moved into permanent housing per year, how does this investment (\$37 million over 10 years for 350 people to be housed) move us toward that goal in a clinically significant way? What did the \$1 million from last year purchase, and what were the measures of success that demonstrate that almost 3 million additional dollars should be allocated here?

Response: These funds are allocated to operations for alternative shelters. That includes Beacon PDX, but not the Safe Rest Villages, the C3PO sites (both to be funded by City ARP), or any of the other existing alternative shelters the Joint Office supports. The funding is committed to additional projects that are in the planning stages, including a safe park, an East County village, a culturally specific village, and two other projects. These shelter projects, like all shelter programs, will be measured in terms of how effectively they meet



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the outcome measures as discussed above in the response to question 40. The cost of shelter, therefore, cannot be judged solely against the projected number of people who will move out to housing; the benefit of shelter also lies in being able to provide someone who would otherwise be sleeping on the sidewalk a clean, safe, dignified and supportive place to escape the streets while working to access permanent housing.

The expansion of alternative shelter was contemplated in the Board-approved Local Implementation Plan (LIP), and it was always contemplated that SHS funds would be used to expand shelter options in the first three years of SHS implementation. This was a reflection of the priorities articulated during the community engagement phase of LIP development, as well as the recognition that we need to a balanced approach to addressing homelessness by creating safety off the streets options for people as we simultaneously expand our system's capacity to move people experiencing chronic homelessness from homelessness (ie: the streets,shelters, and other spaces not meant for human habitation) back into permanent housing.

It is our hope and expectation that as the region moves forward with implementation of the SHS measure, and significantly expands supportive housing options, the need to retain the current level of shelter capacity will decline. That is why we are being intentional about our decisions to lease or acquire sites, including motels and sites for alternative shelter. Where we acquire sites, we are looking for opportunities to repurpose those sites into affordable housing or uses that are beneficial to the community.

Question 52

Commissioner Meieran: How much is budgeted in FY23 for alternative shelter (ie. non-congregate), broken out by capital and operating costs? How many total (existing and new) beds of alternative shelter will this provide? Please specify the types of alternative shelter beds included (Safe Rest Villages, motel, other). How much has been spent so far in FY22 on alternative shelter.

Response: Please see the response to questions 33 - 35 above.



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Appendix 1

JOHS (City/County) Supported Year-Round/24-7 Emergency Shelter Capacity

Year-Round Adult Shelter Capacity

Shelter	Population	COVID Capacity	Pre-COVID Capacity	Open/Other	Type
Congregate					
Wy'east: 1415 SE 122nd St.	adult	70	110	0	congregate
Gresham Women's Shelter: 16141 E. Burnside St.	adult	30	94	0	congregate
The Clark Center: 1431 SE MLK BLVD	adult	50	90	0	congregate
Doreen's Place at the BCC: 610 NW Broadway	adult	45	90	0	congregate
Jean's Place: 18 NE 11th Ave	adult	35	60	0	congregate
Laurelwood Center: 6130 SE Foster Rd.	adult	60	120	0	congregate
River District Navigation Center: 1111 NW Naito	adult	45	100	0	congregate
Willamette Center: 5120 SE Milwaukie Ave	adult	60	120	O/closing for renovations 7/1	congregate
Walnut Park: 5411 NE MLK Jr Blvd. at NE Killingsworth	adult	40	80	O/overnight only during renovations	congregate
120 Market Street	adult	NA	120	O/in process of scaling to full	congregate
Arbor Lodge, N Lombard & Denver	adult	65	80	0	congregate/ village
Greyhound 550 NW 6th Ave.	adult	100	100	0	congregate



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Shelter	Population	COVID Capacity	Pre-COVID Capacity	Open/Other	Type
Village					
C3PO (2 sites)	adult	80	80	O/capacity reflects Old Town closure	village
St. John's Vill.	adult	19	19	0	village
Kenton W. Vill.	adult	15	15	0	village
BeaconPdx	adult	10	10	0	village
Dignity Village	adult	60	60	0	village
R2D2	adult	40	80	0	village
Motel					
Barbur Motel	adult	43	43	transition/re-open July 1	motel
82nd Ave Motel	adult	40	40	O/New program scaling now	motel
Stark - Gresham	adult	43	43	0	motel
Roseway	adult	137	137	0	motel
Chestnut	adult	58	58	0	motel
Banfield	adult	53	53	0	motel
Interstate	adult	47	47	0	motel
Choice Motel	adult	15	15	0	motel
PVI 82nd	adult	37	37	0	motel

- + Additional adult shelter capacity exists that does not receive local public funding including Nazarene Village, Union Gospel Mission (winter only), Portland Rescue Mission, City Team Ministries, and Bybee Lakes Hope Center. The above chart also does not include the several hundred units of transitional housing and other forms of temporary living programs operated by other Departments (e.g. residential treatment).



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JOHS (City/County) Supported Youth Shelter

Shelter	Population	COVID Capacity	Pre-COVID Capacity	Open/Other	Type
Porch Light Youth Shelter	youth	20	30	0	congregate
Street Light Youth Shelter	youth	20	30	0	congregate

- + This does not include the transitional housing that is operated by the youth system partners.

JOHS (City/County) Supported Domestic Violence Shelter

Shelter	Population	COVID Capacity	Pre-COVID Capacity	Open/Other	Type
Bradley Angle	DV	40	40	0	semi- congregate
Raphael House of Portland	DV	30	30	0	semi- congregate
The Salvation Army	DV	60	60	0	semi- congregate

- + This does not include a significant allocation of funding for crisis motel vouchers that offer alternatives when shelters are full.



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JOHS (City/County) Supported Family Shelter

Shelter	Population	COVID Capacity	Pre-COVID Capacity (rooms/beds)	Open/Other	Type
Lilac Meadows	family	40 (120)	40 (120)	0	motel
Family Village	family	26 (78)	26 (78)	0	semi- congregate
Community of Hope	family	8 (24)	8 (24)	0	semi- congregate
Gresham Motel	family	30 (90)	30 (90)	0	motel

- + This does not include family shelter capacity operated without City/County funding, including My Father's House, Portland Rescue Mission, and Bybee Lakes Hope Center Family Dorm, and approximately 40 rooms at the Gresham Motel supported with other funding sources. It also does not include transitional housing programs serving families, or the motel vouchering capacity of the system.



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Appendix 2

Rent Assistance

Rent assistance can be broadly defined as a subsidy that directly pays for the portion of rent that a tenant is unable to pay, and can be broken down into three broad categories reflecting need and time-frame of assistance:

- **Emergency (COVID-19)**
 - This form of rent assistance was introduced in response to the COVID-19 pandemic. Building on the work of the Short Term Rent Assistance (STRA) network of 19 community-based organizations, we recruited over twenty additional CBO's, and launched two new rent assistance teams within DCHS. This expanded network not only provided flexibility throughout the system, but created new points of entry for renters in need of assistance.
- **Short-term**
 - It is important to note that short-term rent assistance funding captures a range of services from a one-time only payment to prevent eviction due to rent debt, to providing ongoing assistance for up to 24 months to provide a path to stability for individuals and families. These funds can also include other housing-related costs (“flexible client assistance”) such as securing an ID, furniture, application fees and deposit assistance, and, of course, the payment of rent and utilities.
- **Long-term**
 - Long-term rental assistance is synonymous with a “rental voucher” and generally covers the ongoing cost of rent for someone whose income is consistently too low to afford the rent in a market rate or rent-restricted affordable apartment. Long term rental assistance may be provided to the individual who is seeking housing (tenant based), or be used to buy down the rent of an apartment (project based) that will be occupied by someone who is eligible for the housing.



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- Prior to the introduction of SHS this year, the significant majority of the rent assistance in the Joint Office budget was short-term rental assistance. Local funds have primarily been used to provide the services that leverage federal long-term rental assistance, including Housing Choice vouchers, Mainstream vouchers, Family Unification vouchers, Shelter Plus Care vouchers, and VASH (Veterans) vouchers. With SHS, we are significantly expanding both the tenant based and project based long-term rental assistance programs.

NOTE: There is no single pot of rent assistance funding. Rather, the County is the recipient of a number of sources that each include specific programmatic guidelines/requirements. These requirements restrict the flexibility with which we can spend these funds. Therefore, coordination of funding is focussed on being able to leverage each different source to best serve community members in need of assistance.

Intensity of case management also varies from type/source of rent assistance and from provider to provider, dictated by individual client needs.



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County Departments

The Joint Office of Homeless Services (JOHS) and the Department of County Human Services (DCHS) are responsible for distributing County rent assistance funding through other County departments and community-based organizations (this includes the full spectrum of rent assistance services: COVID-19 emergency, short and long term).

Through JOHS and DCHS, this vast body of work is coordinated by County leadership, and implemented at various stages of the continuum by a network of County and City of Portland staff, Home Forward, and a range of community-based organizations.

The areas of focus in the continuum of rent assistance for each department can be summarized as follows:

DCHS Rent Assistance

Focuses on housing stability and homelessness prevention, providing a range of rent assistance & support for those who are unstably housed or at risk of homelessness. This has included our COVID-19 emergency response, providing swift financial and legal assistance to prevent a surge of evictions.

JOHS Rent Assistance

Focuses on supporting placement and retention for those experiencing homelessness, including short term rent assistance and long term rent assistance via rapid re-housing and supportive housing programs.

DCHS Rent Assistance

Funding Source	Emergency (COVID) PO: 25490A&B, 25191	Short-Term PO: 25133, 25139, 25156	Long-Term PO: 25132
County GF		\$760,000	\$150,000
Federal/State	\$42,000,000	\$2,640,000	
SHS			
Estimated Totals	\$42,000,000	\$3,400,000	\$150,000



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JOHS Rent Assistance

Funding Source	Short-Term PO: 30300A, 30300B, 30301A, 30301B, 30302A, 30303A, 30306B (this leverages short term assistance to deploy federal vouchers), 30307, 30308, 30600A, 30700	Long-Term PO: 30400B, 30400E, 30401A, 30402, 30403A, 30403B, 30404, 30407C
City/County GF	\$12,000,000	\$5,500,000
Federal/State	\$2,000,000	\$400,000
SHS	\$13,000,000	\$23,000,000
Estimated Totals	\$27,000,000	\$29,000,000