

LHCB STRATEGIC PLAN FRAMEWORK 2014-2019

OVERVIEW

FIVE HIGH-LEVEL GOALS¹

- Increase access to stable and affordable **housing**
- Increase **economic security**
- Improve **health** and stability
- Retool the homeless **emergency response** system
- Improve **leadership**, collaboration, and civic engagement

FIVE KEYSTONE ACTION STEPS

These action steps are foundational to making progress on ending homelessness in San Francisco.

- **CITY-WIDE POLICY ALIGNMENT** *(See Leadership, Strategy #1)*
- **CITY-WIDE COORDINATED ASSESSMENT AND INTAKE** *(See Housing, Strategy #2 and #3)*
 - **PLACE LONGEST TERM HOMELESS IN HOUSING FIRST**
 - **SUPPORT ON GOING HOUSING CHOICE**
- **1000 MORE PERMANENT SUPPORTIVE HOUSING UNITS** *(See Housing, Strategy #1)*
- **DEVELOPMENT OF INNOVATIVE PERMANENT HOUSING MODELS, ESPECIALLY CONGREGATE HOUSING**
- **DATA-DRIVEN PERFORMANCE MEASUREMENT TO ENSURE THAT ACTIVITIES AND POLICIES ARE HAVING IMPACT**

¹ These goals align with *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*.

ONE KEY INDICATOR OF SUCCESS

Annually, reduce the number of people who are **homeless** by 10%, including reducing:

- The number of **chronically homeless** persons by 30%
- The number of **veterans** who are homeless by 30%
- The number of **homeless families** by 20%
- The number of **homeless youth** by 20%
- The number of **homeless LGBTQ** persons by 10%.

Translated to real numbers, using the 2013 Point in Time Count, each year reduce:

- Number of homeless people by 735
- Number of chronically homeless people by 593
- Number of homeless veterans by 215
- Number of individuals in homeless families by 136
- Number of homeless youth by 183
- Number of homeless LGBTQ people by 213

These numbers may include people in more than one category, for example, an LGBTQ youth is reflected in both the youth count and the LGBTQ people count.

Notes:

- Definitions of terms and acronyms found in this plan can be found in the Definitions section.
- For additional information about the foundations of this plan, please see the Background section.
- The priorities and strategies in this plan framework focus on the key changes required in the San Francisco homeless system of care. For information about current programs that will contribute to these goals, please see the Appendix.

GOAL: INCREASE ACCESS TO STABLE AND AFFORDABLE HOUSING

The City of San Francisco strives to increase the supply of subsidized permanent housing so that it is affordable to people who are experiencing homelessness, accessible, and offers services to achieve housing stability. At the conclusion of five years this strategic plan will result in **more homeless people accessing housing that ends their homelessness.**

INDICATORS OF SUCCESS	<ul style="list-style-type: none"> • Create 200 new permanent supportive housing units to house chronically homeless individuals and families each year, while maintaining current permanent supportive housing units.
	<ul style="list-style-type: none"> • Create access to 100 additional housing units affordable for people who are homeless each year, or who are exiting permanent supportive housing, while maintaining current affordable units.
	<ul style="list-style-type: none"> • Improve the percentage of households successfully matched with correct housing type and level of service, from year to year, as indicated by length of stay and housing provider survey.
	<p>Exit 75% of households from permanent supportive housing that are stabilized, interested in moving to other housing, and able to maintain housing without services, as indicated by housing provider survey.</p>
	<ul style="list-style-type: none"> • Reduce the number of homeless households that are barred from housing to 0.
	<ul style="list-style-type: none"> • Ensure the number of evictions in Permanent Supportive Housing units is less than 10%. • Reduce evictions from subsidized housing that lead to homelessness by 10%.

STRATEGY #1: INCREASE SUPPLY OF HOUSING AVAILABLE TO HOMELESS HOUSEHOLDS

KEY ACTION STEPS

- Expand the supply of permanent supportive housing, especially for chronically homeless people and other vulnerable populations. New housing should provide a range of choice, including different levels of service, geographic diversity, co-housing, and other options. Increase supply of affordable housing through new construction, expansion of master-leasing, and prioritization of housing subsidies.
- Develop innovative housing models, including especially congregate housing, to meet the needs of various homeless populations (e.g. long-term shelter stayers)
- Prioritize awards of Proposition C Funds for projects targeting homeless and those exiting from permanent supportive housing into affordable housing.
- Develop a sustainable regional network to improve new housing development and availability for homeless persons and those exiting PSH with 0-30% AMI, including participation of housing authorities from neighboring counties.
- Identify more coordinated, sustainable, dependable sources of supportive housing service funding. Improve leverage of existing funding.

STRATEGY #2: IMPROVE ACCESS TO HOUSING AND HOUSING SERVICES FOR HOMELESS HOUSEHOLDS

KEY ACTION STEPS

- Implement a coordinated assessment system for all homeless housing to ensure most appropriate placement for each household and to streamline access to housing. Require that City-supported housing projects participate. Use coordinated assessment to understand systemic gaps. Ensure that the system has access to housing that adopts the least restrictive tenant eligibility criteria based upon eviction, credit, and/or criminal histories.
- Expand access to affordable housing for homeless households by including additional units in the coordinated assessment system and increasing set-asides of mainstream housing resources, such as Housing Choice Vouchers, for homeless persons.
- Increase service-enriched housing by identifying funding and resources to support co-location of services with affordable housing.
- Build relationships with landlords and establish strategies to increase access to housing in San Francisco for homeless and at-risk households. Create renters' academies, personal finance courses, and other resources to maximize the success of new renters.
- Acknowledge and develop strategies to address the unique needs specific sub-population groups, including veterans, youth, and LGBTQ populations.

STRATEGY #3: PRIORITIZE HOUSING RESOURCES

KEY ACTION STEPS

- Use the coordinated assessment system to prioritize and target supportive housing for the households that require the associated level of support to end their homelessness.
- Evaluate all residents of city-funded supportive housing projects annually to determine housing stability and identify candidates for transition into more independent housing. Create incentives, including stipends, internships, and employment supports, to help people who have achieved stability in supportive housing to move into more independent housing in order to open units for others.
- Improve the link between eviction prevention services and placement in more intensive service environments, including guardianships and acute-level care to stabilize the most vulnerable households in permanent housing.
- Prevent homelessness by intervening to avoid evictions from permanent housing that lead to homelessness. Increase outreach and education about eviction-prevention resources, including financial assistance and tenant rights laws. Provide short-term rental support and wraparound services to address underlying issues threatening housing stability and to prevent eviction. Increase the provision of legal services for individuals and families at risk of eviction. Provide rehousing support.

GOAL: INCREASE ECONOMIC SECURITY

The City of San Francisco strives to increase the income of people who are experiencing homelessness by improving access to public benefits and employment opportunities. At the conclusion of five years this strategic plan will result in **more homeless and formerly homeless people having income sufficient to maintain housing.**

INDICATORS OF SUCCESS	<ul style="list-style-type: none"> • Reduce the number of adults who become homeless again after being permanently housed by our CoC to less than 10%.
	<ul style="list-style-type: none"> • Improve the percentage of homeless adults and formerly homeless adults in permanent supportive housing who are employed (including part-time, seasonal, and supported employment) to at least 20%.
	<ul style="list-style-type: none"> • Reduce the percentage of homeless households with no income to less than 5%.
	<ul style="list-style-type: none"> • Increase the percentage of disabled homeless adults who access SSI/SSDI, veteran benefits, or SDI to 80%.

STRATEGY #1: INCREASE EMPLOYMENT OPPORTUNITIES

KEY ACTION STEPS

- Develop easily-accessed employer incentives (like JobsNOW!) to encourage employment of homeless individuals.
- Collaborate with workforce development agencies to develop additional job support services, including skills training, stipends, affordable childcare, school attendance support for older children, and aftercare to encourage job retention, including though building linkages with the Department of Rehabilitation and the Department of Aging. Also work together to assist homeless persons with barriers to employment, such as criminal backgrounds.
- Connect veterans with veteran-specific employment training and access opportunities.
- Provide disabled clients with SSI and SSDI benefits in place with systematic and clear information about employment options while receiving disability benefits.
- Provide Care Not Cash recipients with employment incentives and assist with transition from CAAP to employment.

STRATEGY #2: INCREASE EMPLOYMENT-READINESS IN HOMELESS POPULATIONS

KEY ACTION STEPS

- Prioritize workforce development resources for those homeless individuals assessed as most likely to obtain and retain employment.
- Provide youth-specific education, training and job-placement resources, including compliance with the city's Homeless Education Plan.
- Expand funding and support for programs that target homeless and formerly homeless people, including programs that target the most in need, and may have lower job placement numbers than programs that take all unemployed applicants.

STRATEGY #3: EXPAND ACCESS TO MAINSTREAM INCOME BENEFITS

KEY ACTION STEPS

- Screen all homeless persons who access coordinated assessment or are clients of city-funded homeless programs for mainstream income benefits and provide support throughout the application process for each eligible benefit. Reevaluate benefits on an annual basis to determine if additional benefits are available.
- Invest in improving access for homeless veterans to veterans benefits.
- Increase connections to SSI and SSDI for homeless and formerly homeless housed San Franciscans.
- Improve linkages between homeless housing and CalWORKS and CAAP.
- Consider ways to streamline benefits applications or group multiple benefits in one application.

GOAL: IMPROVE HEALTH AND STABILITY

The City of San Francisco aims to improve the health and housing stability of people experiencing homelessness in the city by ensuring that all individuals have access to an appropriate and effective level of care. At the conclusion of five years, this strategic plan will **expand access to healthcare services for homeless people, improve health and stability outcomes, and reduce the burden on mainstream emergency medical services.**

INDICATORS OF SUCCESS	<ul style="list-style-type: none"> • Enroll 100% of eligible homeless individuals in MediCal, Covered CA, or Healthy SF.
	<ul style="list-style-type: none"> • Ensure that 100% of residents in homeless housing programs have a “medical home” that provides integrated care for medical and behavioral health.
	<ul style="list-style-type: none"> • Using housing as a health care intervention, improve the health outcomes of homeless individuals suffering from chronic health conditions by reducing hospitalizations of chronically homeless individuals by 10% every two years.
	<ul style="list-style-type: none"> • Using housing as a health care intervention, reduce the number of emergency room and community paramedic encounters by homeless individuals by 10% every two years.
	<ul style="list-style-type: none"> • Expand non-acute medical resources by increasing the number of medical respite beds by 10%.
	<ul style="list-style-type: none"> • Reduce the number of homeless households and the number of households in permanent supportive housing experiencing food insecurity by 50%.

In addition to the strategies and action steps set forth below, the implementation of *San Francisco Community Health Improvement Plan*² will support the goals of this plan and improve our success.

STRATEGY #1: FULLY INTEGRATE THE AFFORDABLE CARE ACT

KEY ACTION STEPS

- Ensure that all homeless residents have access to healthcare services by facilitating the enrollment of all eligible homeless individuals in California’s MediCal insurance program, and ensuring that non-MediCal eligible individuals are enrolled in Covered CA or Healthy San Francisco.
- Pursue new opportunities for alternative models of care under the Affordable Care Act, including pursuing waivers, Behavioral Health Homes, Targeted Case Management Services, Medicaid Rehabilitative Services, and Home and Community Based Services.
- Increase awareness among homeless housing and service providers about changes and opportunities under the Affordable Care Act. Provide adequate support and training throughout the transition and implementation.
- Ensure every resident in homeless housing has a designated medical home to coordinate medical, mental health care, behavioral health care services, and other needed health care, like dental care, with supportive services.
- Increase availability of medical services, including mental health care, to ensure accessibility of medical care. The implementation of the *Health Care Services Master Plan Update*³ will support this plan and increase our success.

² <http://www.sfdph.org/dph/comupg/knowlcol/chip/default.asp>

³ <http://www.sfdph.org/dph/comupg/knowlcol/HCSMP/>

STRATEGY #2: EXPAND ACCESS TO CARE AT HOMELESS PROGRAMS

KEY ACTION STEPS

- Develop strategies for providing enhanced care to aging and other vulnerable homeless populations, including dementia and Alzheimer’s patients, including creating resources like mobile medical teams able to provide care at housing sites without permanent medical facilities.
- Develop procedures for residents of homeless housing or shelter who are vulnerable (e.g. elders, people who are seriously mentally ill, etc.) and unable to maintain that housing or shelter to “step up” to a higher level of care, including through the coordinated assessment system.
- Foster and expand partnerships between housing providers and health and behavioral health care providers in order to co-locate and/or coordinate health, behavioral health, safety and wellness services with housing.

STRATEGY #3: IMPROVE ACCESS TO HEALTHY, NUTRITIOUS FOOD

KEY ACTION STEPS

- Increase use of CalFresh benefits by increasing enrollment and increasing the number of retailers that accept EBT and Restaurant Meal Vendors.
- Increase meals to school-aged children through school meal programs (including breakfast, after the bell, lunch, after school, and summer).
- Fund nonprofit meal/grocery programs to scale (including congregate meals for seniors/adults with disabilities, dining room, pantry, home-delivered meal and home-delivered grocery programs).
- Increase the number of housing units with kitchens.
- Create "Eat-SF" a local subsidy to supplement CalFresh, beginning with SSI recipients who are ineligible for CalFresh.

The implementation of the detailed recommendations in the *San Francisco Food Security Task Force, Assessment of Food Security in San Francisco*⁴ will support the goals of this plan and improve our success.

STRATEGY #4: IMPROVE/EXPAND ACCESS TO DOMESTIC VIOLENCE RESOURCES

KEY ACTION STEPS

- Improve access to housing options and support for people fleeing domestic violence, including especially mental health services.
- Expand outreach and education about available resources, especially at schools, benefits offices, and other mainstream locations.
- Foster and expand partnerships among the homeless system of care, the Department on the Status of Women, District Attorney, Public Defender, Law Enforcement agencies, and behavioral health care providers in order to improve consciousness of barriers to housing and services for

⁴ <http://www.sfdph.org/dph/files/mtgsGrps/FoodSecTaskFrc/docs/FSTF-AssessmentOfFoodSecurityInSF-2013.pdf>

domestic violence survivors and to co-locate and/or coordinate health, behavioral health, safety and wellness services with housing.

GOAL: RETOOL THE HOMELESS EMERGENCY RESPONSE SYSTEM

The City of San Francisco strives to retool the city’s homeless emergency response in order to **reduce the number of households that experience homelessness, especially unsheltered homelessness.**

INDICATORS OF SUCCESS	<ul style="list-style-type: none"> • Reduce the unsheltered homeless population of San Francisco by 30% by January 2019.
	<ul style="list-style-type: none"> • Divert 5% of shelter seekers to stable housing.
	<ul style="list-style-type: none"> • Transition 50% of long-term shelter residents (defined as over three 90-day stays) to permanent housing units annually
	<ul style="list-style-type: none"> • Serve an additional 500 adults through rapid rehousing.
	<ul style="list-style-type: none"> • Increase percentage of people served by the coordinated assessment system that are successfully connected with prevention, rapid rehousing, or diversion resources, versus other resources, year to year.
	<ul style="list-style-type: none"> • Reduce the number of people accessing shelter or homeless housing that come directly from the criminal justice system, foster care, and health care institutions by 75%.

PRIORITY #1: PREVENT HOUSEHOLDS FROM EXPERIENCING HOMELESSNESS

KEY ACTION STEPS

- Create and expand rapid rehousing and diversion programs for single adults and families, and make them available where people access the homeless system, including in shelters, coordinated assessment points, and Resource Centers. Improve program performance by implementing *San Francisco Homelessness Prevention and Rental Assistance Programs Workgroup Summary Report*⁵ recommendations.

PRIORITY #2: IMPROVE DISCHARGE PLANNING PROCESSES

KEY ACTION STEPS

- Prevent homelessness by supporting the transition from incarceration, foster care, and hospitals into permanent housing that is not provided by the homeless system of care.
- Build partnerships across systems to support discharge planning.
- Build additional policies to support creating housing plans and discharge planning to promote housing. Ensure medically-vulnerable individuals are never discharged to the streets or to the homeless system of care.
- Increase the options for appropriate housing units for recently discharged people.

⁵ <http://www.sfgov3.org/modules/showdocument.aspx?documentid=3501>

PRIORITY #3: PROVIDE AND IMPROVE INTERIM HOUSING AND SHELTER

Implementing the recommendations of the Shelter Access Workgroup⁶ will support the goals of this plan and its success.

KEY ACTION STEPS

- Provide additional services in shelters that lead to accessing and maintaining permanent housing, including increasing housing placement and case management staff.

PRIORITY #4: EXPAND ACCESS AND COORDINATION OF EMERGENCY RESPONSE SYSTEM

KEY ACTION STEPS

- Increase coordination and streamline efforts of city agencies and committees working to end homelessness.
- Increase street outreach.
- Provide broader outreach and access to services in the Southeast and other underserved neighborhoods. Increase housing and services in those neighborhoods.
- Build regional collaboration to better serve homeless people moving among Bay Area counties.
- Use the coordinated assessment system (referred to in the goal about increasing access to stable and affordable housing) to understand community need. Work to build linkages between coordinated assessment and other systems of care to improve assessment and access to resources.

⁶ <http://www.sfmayor.org/modules/showdocument.aspx?documentid=380>

GOAL: IMPROVE LEADERSHIP, COLLABORATION, AND CIVIC ENGAGEMENT

- The key to ending homelessness in San Francisco is harnessing the will and the resources of all stakeholders towards one goal. Ending homelessness requires collaborative leadership at all levels of government and across all sectors.
- The City of San Francisco is committed to improving collaboration and increasing knowledge and implementation of successful interventions to prevent and end homelessness.
- At the conclusion of five years, this strategic plan will **reduce homelessness in this community** by:
 - Expanding and deepening collaboration between government agencies and private partners
 - Broadening capacity of these organizations to prevent and end homelessness; and
 - Increasing awareness of homelessness, related issues, and best practices.

INDICATORS OF SUCCESS	<ul style="list-style-type: none"> • Reduce the number of people who are homeless by 10%, including reducing the number of chronically homeless persons by 30%, the number of veterans who are homeless by 30%, the number of homeless families by 20%, the number of homeless youth by 20%, and the number of homeless LGBTQ persons by 10%, annually.⁷
	<ul style="list-style-type: none"> • Reduce the average length of time people are homeless in San Francisco by 10%, year to year.
	<ul style="list-style-type: none"> • Improve the data quality in San Francisco’s HMIS by reducing the number of required missing or null values to less than 6%.
	<ul style="list-style-type: none"> • Improve the data quality in San Francisco’s HMIS by increasing the bed coverage rate of all shelters, transitional housing, and permanent supportive housing programs in San Francisco to 95%.

⁷ Translated to real numbers, using the 2013 Point in Time Count, each year reduce:

- Number of homeless people by 735
- Number of chronically homeless people by 593
- Number of veterans by 215
- Number of individuals in homeless families by 136
- Number of homeless youth by 183
- Number of homeless LGBTQ by 213

These numbers may include people in more than one category, for example, an LGBTQ youth is reflected in both the youth count and the LGBTQ count.

STRATEGY #1: UNIFY RESPONSE TO HOMELESSNESS

KEY ACTION STEPS

- By acceptance of this plan at the Board of Supervisors, the various City Departments, and the local non-profits addressing homelessness, have one unified city policy on how San Francisco will end homelessness.
- Improve coordination between LHCB, the Mayor's Office, the Board of Supervisors, the San Francisco Housing Authority, and City departments. Hold regular, director-level meetings of all city agencies that work with homeless persons or people at imminent risk of homelessness.
- Build partnerships with other systems of care that serve homeless people, especially school districts.
- Expand the decision-making authority of the LHCB and consider expanding LHCB membership or structure to include more participation from city agencies with a central role in San Francisco's response to homelessness.

STRATEGY #2: INCREASE COLLABORATION AND COOPERATION WITH PRIVATE SECTOR

KEY ACTION STEPS

- Increase private investment in solutions to homelessness and build public/private partnerships.
- Increase engagement of neighborhood and community groups in responding to homelessness, and in improving factors that increase homelessness.
- Ensure that information on best practices, financing strategies, and other resources are readily available to homeless service providers, by supporting communication and technical assistance.

STRATEGY #3: SUPPORT COMMUNITY PLANNING BY IMPROVING DATA COLLECTION ABOUT HOMELESSNESS

KEY ACTION STEPS

- Publish a quarterly report regarding the performance of the homeless system of care at LHCB meetings, online, and with the Board of Supervisors. The report will use HMIS data to demonstrate improvement in the measures identified in this Plan over time.
- Align City-wide data collection efforts by coordinating at Department level.
- Provide additional training and monitoring to improve HMIS data quality and reduce the number of null or missing values.
- Improve HMIS system performance and utilization, and facilitate the exchange of data between other data systems.

BACKGROUND

This strategic planning framework builds from the success, lessons learned, and guidance of *Toward Ending Homelessness In San Francisco*⁸, the Five-Year Strategic Plan of the San Francisco Local Homeless Coordinating Board, 2008-2013 and *The San Francisco Plan To Abolish Chronic Homelessness, 2004-2014*⁹.

In 2008, the San Francisco Local Homeless Coordinating Board (LHCB) began implementing a five-year strategic plan, *Toward Ending Homelessness in San Francisco*. The purpose of the 2008 strategic plan was to provide one unified citywide plan to prevent and eradicate homelessness. That plan, adapted from a number of preexisting strategic plans, including *The San Francisco Plan To Abolish Chronic Homelessness, 2004-2014*, provided San Francisco with a roadmap to assist people who are homeless and those at risk for homelessness in our community, with the goal of ending homelessness.

The Local Homeless Coordinating Board (LHCB) is the lead entity for the San Francisco Continuum of Care (CoC). The LHCB works to ensure a unified homeless strategy that is supported by the Mayor, the Board of Supervisors, City departments, nonprofit agencies, people who are homeless or formerly homeless and the community at large. All efforts are aimed at permanent solutions, and the range of services is designed to meet the unique and complex needs of individuals who are threatened with or currently experiencing homelessness.

A CoC is a group organized locally to carry out homeless planning and evaluation activities that is composed of a wide range of community stakeholders (e.g. homeless-service providers, faith-based organizations, school representatives, etc.) The U.S. Department of Housing and Urban Development, and other Federal agencies, use the CoC structure to distribute funds.

In 2013, the Strategic Planning Committee of the LHCB convened to update and review its strategic plan to incorporate best practices, lessons learned, and new research into the community's plan to end homelessness. A focus of the Committee has been identifying measurable performance outcomes that will demonstrate that San Francisco is successfully responding to homelessness locally. With the assistance of key stakeholders and community members, the LHCB will use this plan to guide, monitor, and follow efforts towards ending homelessness in San Francisco.

The Federal Strategic Plan to Prevent and End Homelessness, *Opening Doors*¹⁰, began implementation in 2010. The Federal Strategic Plan resulted from extensive research and review of national best practices, and will guide the allocation of Federal resources. Seeing many benefits to aligning local and Federal policy, the LHCB determined that this plan should use the structure of *Opening Doors*. In addition, the Strategic Planning Committee incorporated relevant *Opening Doors* strategies and action steps into this document, including a focus on chronically homeless persons, veterans, and families and youth.

⁸ <http://www.sfgov3.org/ftp/uploadedfiles/lhcb/documents/SFCoCFinalPlan030308FULLPLAN.pdf>

⁹ <http://www.sfgov3.org/modules/showdocument.aspx?documentid=2450>

¹⁰ http://usich.gov/PDF/OpeningDoors_2010_FSPPpreventEndHomeless.pdf

RESULTS OF PRIOR PLANNING

- As a result of The San Francisco Plan To Abolish Chronic Homelessness, 2004-2014, the Mayor's Office of Housing's housing pipeline has overseen the creation of **3,000 units of permanent supportive housing** to house formerly homeless people.¹¹
- Over **9,000 homeless people have left the streets or shelter system** for permanent housing between January 2004 and February 2014.
- In 2013, San Francisco housed **250 chronically homeless veterans**.
- As of January 2014, **over 200 families were rapidly rehoused with federal resources**, including 90 families housed by the Housing Access Program, and 115 families, youth and survivors of domestic violence housed through the Homeless Prevention and Rapid Rehousing Program (HPRP).
- Since 2008, **locally funded rental assistance has assisted over 600 families**.
- The City has documented **reductions in vulnerable homeless subpopulations**. The proportion of chronically homeless people counted in the homeless census decreased **from 62% in 2009 to 31% in 2013**. Homelessness among veterans **declined 30 percent** between 2011 and 2013.¹²
- The creation of the LHCB itself resulted from the first Continuum of Care Five Year Strategic Homelessness Plan in 1996, which had two goals: 1) to develop one citywide direction to prevent and reduce homelessness, and 2) to establish a LHCB to oversee the implementation and evaluation of the Continuum of Care comprehensive homeless assistance system
- Since the implementation of the 2008 Strategic Plan, the overall strong performance of San Francisco's homeless system of care has resulted in high scores in the national competition for Federal McKinney-Vento Continuum of Care Homeless Assistance funding, resulting in **over \$100 million in awards, including over \$7.5 million for new projects**.

¹¹ Mayor's Office of Housing & Community Development, Housing Pipeline

¹² 2013 San Francisco Homeless Point in Time Count & Survey Comprehensive Report, available at: <http://www.sfgov3.org/index.aspx?page=2988>

DEFINITIONS

CAAP: Provides short-term financial assistance and social services to very low-income adults in San Francisco.

CalWORKS: a state program that provides financial support and a variety of services, including employment services, to low-income families with children.

Care Not Cash: a San Francisco ballot measure (Proposition N) approved by voters in November 2002. The primary goal of Care Not Cash is to reduce homelessness and improve the health and welfare of homeless indigent adults receiving cash assistance through permanent housing opportunities and enhanced services.

Chronically Homeless: an individual or family that has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least one year or on at least four separate occasions in the last 3 years, where the cumulative total of the four occasions is at least one year.

Continuum of Care (CoC): the geographically-based group organized to coordinate housing and services funding for homeless families and individuals.

Coordinated Assessment: a centralized or coordinated process designed to coordinate program participant intake assessment and provision of referrals.

Homeless Management Information System (HMIS): the information system designated by the Continuum of Care to comply with the HMIS requirements prescribed by HUD.

Housing Choice Vouchers: a federal assistance program that provides tenant-based rental assistance to low-income households. It is also commonly known as "Section 8" housing vouchers.

Local Homeless Coordinating Board (LHCB): the lead entity for the San Francisco Continuum of Care.

Permanent Supportive Housing: permanent housing in which supportive services are provided to assist homeless persons with a disability to live independently.

Proposition C: a San Francisco ballot measure (Proposition C), passed by voters in November 2012. Proposition C created the San Francisco Housing Trust Fund, which provides a permanent source of revenue to fund the creation of affordable housing for low- and middle-income households for over thirty years.

Rapid Rehousing: short-term (up to 3 months) or medium-term (for 3 to 24 months) tenant-based rental assistance and supportive services provided to help a homeless individual or family move as quickly as possible into permanent housing and achieve stability in that housing.

Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI): disability income benefit programs administered by the Social Security Administration (SSA) that also provide Medicaid and/or Medicare health insurance to individuals who are eligible.