



STAFF REPORT FROM THE CONTRA COSTA COUNCIL ON HOMELESSNESS

Contra Costa County Homeless System of Care Quarterly Report for Quarter 4 of 2021 (October - December)

LETTER FROM THE CHAIR

Dear Contra Costa County Board of Supervisors,

The fourth quarter of 2021 saw the Continuum of Care (CoC) and Council on Homelessness (COH) responding to our system's largest funding opportunity (Housing and Urban Development CoC Notice of Funding Opportunity), implement equity principles in new Council member selection process, with great results and reopen more County shelter facilities as we responded to the Omicron COVID-19 variant.

Highlights include

- Continued distribution of Emergency Housing Vouchers
- Application process for HUD CoC NOFO
- Selected new Council Members that better reflect the diversity of the community served
- Data on our system of care
- Reopening of County shelter
- Responding to Omicron variant

I have decided to step down from my seat as the Community Member representative to make space for more diversity on the Council but intend to stay involved and engaged in addressing homelessness in our community. It's been a pleasure working with H3 staff and the entire Council on Homelessness. I am constantly inspired by their commitment to service and improving the quality of life for all members of our community!

Sincerely,

Lindy Johnson, Outgoing Chair of the Council on Homelessness



INTRODUCTION

The Contra Costa Council on Homelessness (CoH) is the governing and oversight body for the County homeless Continuum of Care (CoC) and is appointed by the Board of Supervisors. The Council provides advice and input to the Board of Supervisors on the operations of homeless services, program operations, and program development efforts in Contra Costa County. The Contra Costa Council on Homelessness is the governing body for the Contra Costa County Continuum of Care (CoC).

The Contra Costa CoC is comprised of multiple partners, including service providers, members of the faith community, local business, private and public funders, community members, education system and law enforcement, and others who are working collaboratively to end homelessness. The COH and COC are supported by Contra Costa Health Services Health, Housing & Homeless Services (H3) Division. H3 functions as the CoC administrative entity and collaborative applicant, CoC Lead Agency and Homeless Management Information System (HMIS database) Lead Agency.

The purpose of this report is to share information about the CoC and COH activities with the Contra Costa County Board of Supervisors and to provide recommendations from the COH to the County Board of Supervisors on long range planning and policy formulation that would support the county homeless CoC. This report includes information on system data, funding and policy activities, and CoC initiatives. All information will reflect activities and data for the prior quarter.

This report was produced on behalf of the CoH by H3 in collaboration with the CoH and CoC partners.

SYSTEM DATA

Appendix A includes a data analysis depicting the inflow and outflow of clients in the system, current utilizers of the system, and recidivism (rates of individuals returning to homelessness). The graphics and content in that analysis depict data for the fourth quarter of 2021 (October, November and December).

SYSTEM FUNDING

This quarter the CoC continued to evaluate the system of care and pursued funding opportunities to address the gaps in Contra Costa's homeless system, including our largest source of funding, the HUD CoC NOFO

HUD CoC NOFO- In Quarter 4 of 2021, the CoC completed its Housing and Urban Development Continuum of Care Notice of Funding Opportunity (HUD CoC NOFO) application process. This work including having a sub-committee of the Council on Homelessness review and rank all



submitted applications from providers seeking HUD CoC funds and having the Council on Homelessness vote on the final ranking of projects to be submitted to HUD. The full application was submitted to HUD 11/15/21.

Emergency Housing Vouchers (EHV)- The American Rescue Plan (ARP) of 2021 appropriated \$5 billion for New Emergency Housing Vouchers (Tenant Based Rental Assistance). Contra Costa received 201 vouchers. Fifty seven (57) long term shelter stayers were approved through Contra Costa's Coordinated Entry System (CES) and referred to the Housing Authority of Contra Costa County (HACCC) for processing and approval. Contra Costa CES, along with HomeBase, conducted multiple trainings on aftercare and individualized service plans with providers making referrals for EHV and client facing materials were developed and translated into Spanish.

POLICY

The CoC works closely with H3 and local stakeholders and system partners to track homeless and affordable housing policy that may impact the CoC, its clients, funding or current and future operations. The CoH and CoC, with support from H3, tracked the state budget and United States Department of Housing and Urban Development (HUD) for upcoming funding and funding policy strategies related to homelessness.

The Council tracked progress of the state budget closely and is preparing for community input opportunities to help determine local priorities for future funding.

SYSTEM INITIATIVES

The CoC regularly engages in multiple activities, partnerships, evaluations, and improvement that are designed to improve services to clients and achieve various system goals.

Equity - C4 Innovations, a technical assistance provider, conducted Listening Sessions with clients and staff as part of an equity assessment that will be presented in Q1 2022. Using revised the supplemental application and rubric, the Council selected new Council members that increased the racial and ethnic diversity and number of people with lived experience to serve on the Council.

Homelessness Awareness Month – To mark Homelessness Awareness Month (November), the CoC developed a 100+ page toolkit (<https://cchealth.org/h3/coc/pdf/Homeless-Awareness-Toolkit.pdf>) , a 5-minute video amplifying the voices of people with lived experience of homelessness (<https://spark.adobe.com/video/g8uFATP1cNCal>), recognized over 50 outstanding individuals and agencies impacting homelessness (<https://cchealth.org/h3/coc/awards.php>), presented to the Board of Supervisors on 11/9 and



hosted a the CoC Learning Hub: "Hearing Other People's Experiences (H.O.P.E.) Beyond Homelessness", a panel discussion featuring people with lived experience in our community. A recording of the Learning Hub can be viewed here: <https://youtu.be/1-V9Su8fnUc> and recommendations from the attendees of that panel discussion can be found in the "Recommendations" section below.

Regional Action Plan Progress- The Council on Homelessness Continuous Quality Improvement Committee was renamed the "Plan for Accelerating Transformative Housing (PATH) Innovations Committee". This committee of diverse stakeholders is looking at the Regional Action Plan 1:2:4 cost/gaps analysis model and will utilize improvement science techniques to test the effectiveness of selected interventions.

Meetings, Trainings, and Events – The CoC hosted three (3) COH meetings for Councilmembers to meet to conduct the business of the CoC Board; multiple Committee and Work Group meetings including three (3) HUD CoC NOFO Review and Rank Sessions, one (1) Oversight Committee meeting with three (3) EHV Work Group meetings and one (1) public EHV Feedback session to support the work of that committee, one (1) HMIS Policy Committee meeting, one (1) Continuous Quality Improvement (CQI) Committee meeting, one (1) Homelessness Awareness Month (HAM) Committee meeting and two (2) video Work Group meetings to support the work of that committee, three (3) Nominating Committee meetings, one (1) Point in Time Count Committee meeting; and additional CoC meetings including: one (1) Executive Director meeting; three (3) CoC provider meetings; two (2) trainings including "Workforce Development" and "Working with Clients with Criminal Histories", a CoC Learning Hub : "Hearing Other People's Experiences (H.O.P.E.) Beyond Homelessness" and the launch of the Homeless-Workforce Integration Network (H-WIN) meetings (a partnership between Workforce Development and Homeless Services). The recordings, minutes and materials for trainings and meetings can be found on the H3 website¹ and on the County agenda center², and a calendar of upcoming meetings and events can be found on the H3 website.

COVID-19 UPDATE

The CoC has continued to support providers, staff, and consumers during the COVID-19 pandemic providing guidance, COVID-19 testing, vaccines, and implementing a strategy to transition individuals in Project Roomkey into permanent housing. The system of care is

¹ <https://cchealth.org/h3/coc/partners.php#Training>

² <https://www.contracosta.ca.gov/agendacenter>



continuing to reopen programs and sites in accordance with health orders and guidance provided by Contra Costa Health Services.

Brookside Shelter – The County’s Brookside Shelter in Richmond reopened on December 1st, 2022 with capacity for 34 individuals and 2 couples.

Delta Landing- In Q4, the project formerly known as the East County Interim Housing Project (ECHIP) was renamed to Delta Landing. H3 hosted a Grand Opening on December 6th that included attendance by a representative from Governor Newsome’s office as well representatives from other as local, state and federal elected officials. Construction is expected to finish in early 2022, and when reopened, the facility will have 172 resident rooms.

Project Room Key- In Q4, operations at the Marriott, SureStay, and Premier Inn continued, pending the reopening of Delta Landing. The SureStay in Richmond was host to 32 PUI rooms, but because of the recent surge across the county, an additional 20 rooms were brought online for PUI placements. H3 and Public Health continue closely monitoring occupancy at the site.

TESTING AND VACCINATION

In the fourth quarter of 2021, among people who meet the HUD definition of homelessness:

- # of COVID-19 tests: 5,128
- # of individuals with positive test for COVID-19: 95
- # of vaccines administered: 1,738

Additional data related to COVID-19 and those experiencing homelessness can be found on the data dashboard.³

RECOMMENDATIONS

Participants of the 11/8/21 CoC Learning Hub: "Hearing Other People's Experiences (H.O.P.E.) Beyond Homelessness" were asked to provide their recommendations to decision makers about how to best respond to homelessness. Three key themes emerged from their responses:

1. Invest more in direct services
2. Invest in amplifying the voice of people with lived experience
3. Invest in housing

³ <https://www.coronavirus.cchealth.org/homeless>



APPENDIX A

**Contra Costa County Health, Housing, and Homelessness Data Summary
Q4, 2022**

Contra Costa County Health, Housing, and Homelessness Data Summary

Description of the data:

- **What:** Program Utilization, Outcomes, and Consumer Demographics Summary
- **Who:** Contra Costa Continuum of Care (CoC) consumers
- **When:** October 1, 2021 – December 31, 2021 (Quarter Four)
- **Why:** Presentation to the Board of Supervisors

This summary includes high-level analyses of CoC consumers and households during the fourth quarter (Q4) of 2021 (October 1, 2021 to December 31, 2021), focusing on the following four indicators, including race and ethnicity demographics for each measure:

System Utilizers

Consumers active in a project during the reporting period.



New-to-System

Consumers entering the system of care for the first time during the reporting period.



System Outflow

Consumers leaving the system of care during the reporting period.



Recidivism

Consumers who had a return to homelessness in the system during the reporting period.





Main Findings

- System Utilizers
 - 4,061 households (5,163 consumers) utilized the homelessness system of care during Q4 (Prevention and Diversion, Literally Homeless, and Permanent Housing programs¹).
 - The majority of households were White (45%), followed closely by Black/African American/African (38%); 17% were Hispanic/Latin(a)(o)(x).
 - 73% of all households accessed a Literally Homeless program.
- New-to-System
 - 15% of all households served were new to the system (629 households).
 - Black/African American/African households made up 42% of households that were new-to-system; White households made up 35%. 22% were Hispanic/Latin(a)(o)(x).
 - The majority of new-to-system households (90%) accessed a Literally Homeless program during Q4.
- System Outflow
 - 19% of all households served were categorized as “outflow” or exited the system of care (776 households).
 - The majority of exiting households were White (44%), followed closely by Black/African American/African (35%); 22% were Hispanic/Latin(a)(o)(x).
 - 20% of households exited to a Permanent destination.
 - There were 147 more households exiting the system of care (776 households) than newly entering the system of care (629 households) in Q4.
- Returns
 - Small number of returning households (N=24) make the data vary widely from quarter to quarter.
 - White households made up 71% of returning households and Native Hawaiian/Pacific Islanders made up 25%.
- Racial/Ethnic Comparisons
 - The proportion of White households new-to-system and proportion of outflow were lower than White proportion of system utilizers, suggesting that White households have less movement in and out of the system of care than other populations.
 - The proportion of Hispanic/Latin(a)(o)(x) new-to-system and proportion of outflow were higher than their proportion of system utilizers, suggesting that Hispanic/Latin(a)(o)(x) move out in and out of the system of care faster than other populations.

¹ The Coordinated Entry project type is not included in this quarter’s summary. Please see the Methods section for more details.



System Utilizers

4,061 households (5,163 consumers) had an active enrollment in a Continuum of Care (CoC) program during Quarter Four of 2021. This included all programs in the three intervention levels of service within Contra Costa County’s Homelessness CoC (Prevention and Diversion, Literally Homeless, and Permanent Housing programs²). The number of consumers and households accessing programs at each intervention level is presented in Table 1. Of the total 4,061 household enrollments last quarter, 2,981 households (73%) accessed Literally Homeless programs, 896 households (22%) were enrolled in Permanent Housing programs, and 183 households (5%) utilized Prevention and Diversion programs.

Intervention Level	Number of Consumers	Number of Households	% of Consumers	% of Households
Prevention/Diversion	284	183	5%	5%
Literally Homeless	3,755	2,981	72%	73%
Permanent Housing	1,185	896	23%	22%
Total Deduplicated	5,163	4,061	100%	100%

Table 1. Household System Utilization by Intervention Level

White households were the largest racial group accessing the system of care (making up 45% of households in the CoC); followed by Black/African American/African (38%). All other racial groups made up 8% or less of the CoC (Table 2).

Race of All Consumers	Number of Consumers	Number of Households	% of Consumers	% of Households
White	2,154	1,791	42%	45%
Black, African American, or African American Indian, Alaska Native, or Indigenous	2,008	1,524	39%	38%
Multi-Racial	363	288	7%	7%
Asian or Asian American	295	179	6%	4%
Native Hawaiian or Pacific Islander	98	65	2%	2%
Missing	88	76	2%	2%
Total Deduplicated	5,163	4,061	100%	100%

Table 2. Race Breakdown by Unique Consumers and Households

² A detailed description of each program type category is provided in the Methods section of this summary.



Non-Hispanic/Latin(a)(o)(x) made up 81% of the CoC; 17% were Hispanic/Latin(a)(o)(x), (Table 3).

Ethnicity of All Consumers	Number of Consumers	Number of Households	% of Consumers	% of Households
Non-Hispanic/Latin(a)(o)(x)	4,049	3,252	78%	81%
Hispanic/Latin(a)(o)(x)	995	698	19%	17%
Missing	119	111	2%	2%
Total Deduplicated	5,163	4,061	100%	100%

Table 3. Ethnicity Breakdown by Unique Consumers and Households

New-to-System

629 households (with 905 unique consumers), or 15% of all households served during Q4, enrolled into the system of care for the first time ever during the report period. This includes new enrollments into a program within the Prevention and Diversion, Literally Homeless, or Permanent Housing intervention levels. The breakdown of program utilization by intervention level is shown in Table 4. Of the 629 new households entering the system in Q4, 64 (10%) entered Prevention and Diversion programs, 563 (90%) entered Literally Homeless programs, and 2 households (less than 1%) entered Permanent Housing programs.

Intervention Level	Number of Consumers	Number of Households	% of Consumers	% of Households
Prevention and Diversion	111	64	12%	10%
Literally Homeless	792	563	88%	90%
Permanent Housing	2	2	<1%	<1%
Total (unduplicated)	905	629	100%	100%

Table 4: Household Inflow by Program Type

Black/African American/African households made up 42% of the households that were new-to-system followed by White households (35%) and American Indian/Alaska Native/Indigenous (10%, Table 5).



Race of All Consumers	Number of Consumers	Number of Households	% of Consumers	% of Households
White	289	222	32%	35%
Black, African American, or African American Indian, Alaska Native, or Indigenous	394	251	44%	42%
Multi-Racial	39	21	4%	3%
Asian or Asian American	11	13	2%	2%
Native Hawaiian or Pacific Islander	23	14	3%	2%
Missing	47	36	5%	6%
Total Deduplicated	905	629	100%	100%

Table 5: Race Breakdown of Consumers New to System of Care

Non-Hispanic/Latin(a)(o)(x) made up 74% of the CoC; 22% were Hispanic/Latin(a)(o)(x), (Table 3). The proportion of Hispanic/Latin(a)(o)(x) that made up new-to-system (22%) was higher than the proportion of Hispanic/Latin(a)(o)(x) of system utilizers (17%).

Ethnicity of All Consumers	Number of Consumers	Number of Households	% of Consumers	% of Households
Non-Hispanic/Latin(a)(o)(x)	668	463	74%	74%
Hispanic/Latin(a)(o)(x)	202	137	22%	22%
Missing	30	24	4%	4%
Total Deduplicated	905	629	100%	100%

Table 6: Ethnicity Breakdown of Consumers New to System of Care

System Outflow

776 households (1,072 consumers), or 19% of active households during Q4, exited the system of care and did not reenroll into another program by the end of the reporting period. The exit destinations of consumers leaving the system of care, according to their final exit, are shown in Table 7. Exit destination categories include Temporary settings (emergency shelters not in the HMIS, hospital, jail, staying with friends or family temporarily), Permanent settings (subsidized housing with a move-in date, moving into own unit/house, staying with friends or family



permanently, nursing home), Unsheltered Destination (last destination recorded was a place not meant for habitation), and Other (consumer deceased or destination unknown).

Most system leavers (59% of households with exits) exited to a missing or unknown destination (550 people, 457 households). 158 households (294 consumers), or 20% of all household system leavers, exited to a Permanent exit destination in Quarter Four. Another 16% of households exited to a Temporary destination, and 4% to an Unsheltered exit destination.

Exit Destination Category	Number of Consumers	Number of Households	% of Consumers	% of Households
Temporary	179	127	17%	16%
Permanent	294	158	27%	20%
Unsheltered	49	34	5%	4%
Other/Unknown	550	457	51%	59%
Total Deduplicated	1,072	776	100%	100%

Table 7: Exit Destinations of Consumers Leaving the System of Care

White households were the largest racial group making up system outflow (44% of households exiting the system of care); followed by Black/African American/African (35%). All other racial groups made up 10% or less of system outflow (Table 8).

Race of All Consumers	Number of Consumers	Number of Households	% of Consumers	% of Households
White	429	340	40%	44%
Black, African American, or African American Indian, Alaska Native, or Indigenous	415	274	39%	35%
Multi-Racial	47	33	4%	4%
Asian or Asian American	14	12	1%	2%
Native Hawaiian or Pacific Islander	25	14	2%	2%
Missing	31	24	3%	3%
Total Deduplicated	1,072	776	100%	100%

Table 8: Race Breakdown of Consumers Exiting the System of Care



Non-Hispanic/Latin(a)(o)(x) households made up 76% of the system outflow; 22% were Hispanic/Latin(a)(o)(x), (Table 9). Hispanic/Latin(a)(o)(x) made up a greater proportion of exits from the CoC (22%) than system utilizers (17%).

Ethnicity of All Consumers	Number of Consumers	Number of Households	% of Consumers	% of Households
Non-Hispanic/Latin(a)(o)(x)	798	594	74%	76%
Hispanic/Latin(a)(o)(x)	257	1167	24%	22%
Missing	17	15	2%	2%
Total Deduplicated	1,072	776	100%	100%

Table 9: Ethnicity Breakdown of Consumers Exiting the System of Care

Returns to Homelessness

24 households (32 consumers) returned as literally homeless to the CoC in Q4 of 2021. A return as literally homeless included anyone who enrolled in a Literally Homeless program within two years from their last exit to a Permanent destination.

Because the number of people/households returning each quarter is small, proportions of returns by race and ethnicity will be more pronounced and will fluctuate significantly each quarter. Please keep this in mind as conclusions are drawn potentially indicating disparities.

White households made up a greater proportion of people returning to the system (71%) and Native Hawaiian/Pacific Islander made up 25%. No head of household from other racial groups returned to the crisis response from a previous permanent housing exit (Table 10). Again, these numbers are too low to draw comparisons to other data in this report.



Race of All Consumers	Number of Consumers	Number of Households*	% of Consumers	% of Households*
White	17	17	53%	71%
Black, African American, or African American Indian, Alaska Native, or Indigenous	3	0	9%	0%
Multi-Racial	1	0	3%	0%
Asian or Asian American	3	0	9%	0%
Native Hawaiian or Pacific Islander	0	0	0%	0%
Missing	7	6	22%	25%
Missing	1	1	3%	4%
Total Deduplicated	32	24	100%	100%

*Household data is based on the HoH.

Table 10: Race Breakdown of Consumers Returning to System of Care

Hispanic/Latin(a)(o)(x) made up 54% of the system returners (13 households, Table 11).

Ethnicity of All Consumers	Number of Consumers	Number of Households	% of Consumers	% of Households
Non-Hispanic/Latin(a)(o)(x)	16	11	50%	46%
Hispanic/Latin(a)(o)(x)	6	13	50%	54%
Missing	0	0	0%	0%
Total Deduplicated	32	24	100%	100%

Table 11: Ethnicity Breakdown of Consumers Returning to System of Care

Overview of System Utilization

Summarizing the Quarter Four findings presented above, the system of care was comprised of 4,061 households and 5,163 consumers. There were 629 households (905 consumers) entering the system of care and 776 households (1,072 consumers) which exited the system of care. 24 households (32 consumers) returned within 24 months (Figure 1).



Overview of System Utilizers (Households)

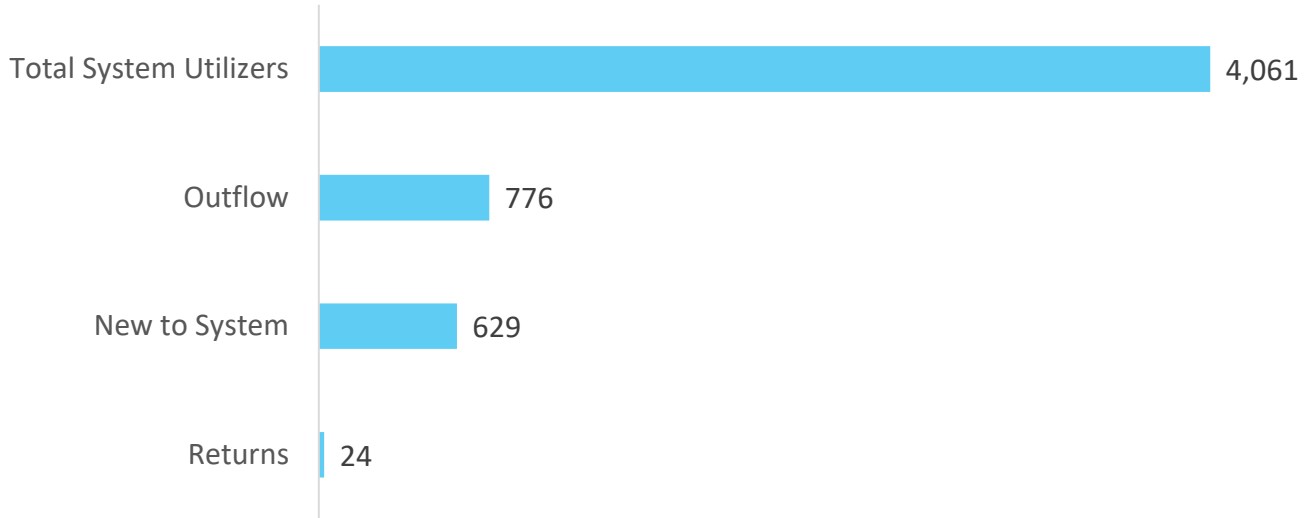


Figure 1: Overview of System Utilization Unique Households)

There are differences by race and ethnicity for system utilizers, new-to-system, outflow, and returns to the homelessness system of care (Figure 2):

- White households made up 45% of system utilizers, 35% of new-to-system, 44% of outflow, and 71% of returns. The lower percent of new-to-system than system utilizers suggests that White households had more people who remained in the system for longer periods of time than other racial/ethnic groups. The very few number of households that return to the system within the reporting period make inferences about the data inconclusive.
- Black/African American/African households made up 38% of system utilizers, 42% of new-to-system, 35% of outflow, and 0% of returns. There were no differences across the system categories.
- American Indian/Alaska Native/Indigenous made up 7% of system utilizers, 10% of new-to-system, 10% of outflow, and 0% of returns. They had higher rates of new-to-system than system utilization and exits/outflow.



- People with Multiple Races made up 4% of system utilizers, 3% of new-to-system, 4% of outflow, and 0% of returns. There were no differences across the system categories.
- Asian/Asian American households made up 2% of system utilizers, 2% of new-to-system, 3% of outflow, and 0% of returns. There were no differences across the system categories.
- Native Hawaiian/Pacific Islander households made up 1% of system utilizers, 2% of new-to-system, 2% of outflow, and 25% of returns. The very few number of households that return to the system within the reporting period make inferences about the data inconclusive.
- Hispanic/Latin(a)(o)(x) households made up 17% of system utilizers, 22% of new-to-system, 22% of outflow, and 46% of returns. The higher proportion of new-to-system and outflow than system utilizers suggest that this population moves in and out of the system faster than other racial/ethnic groups. The very few number of households that return to the system within the reporting period make inferences about the data inconclusive.

Race and Ethnicity Across User Type

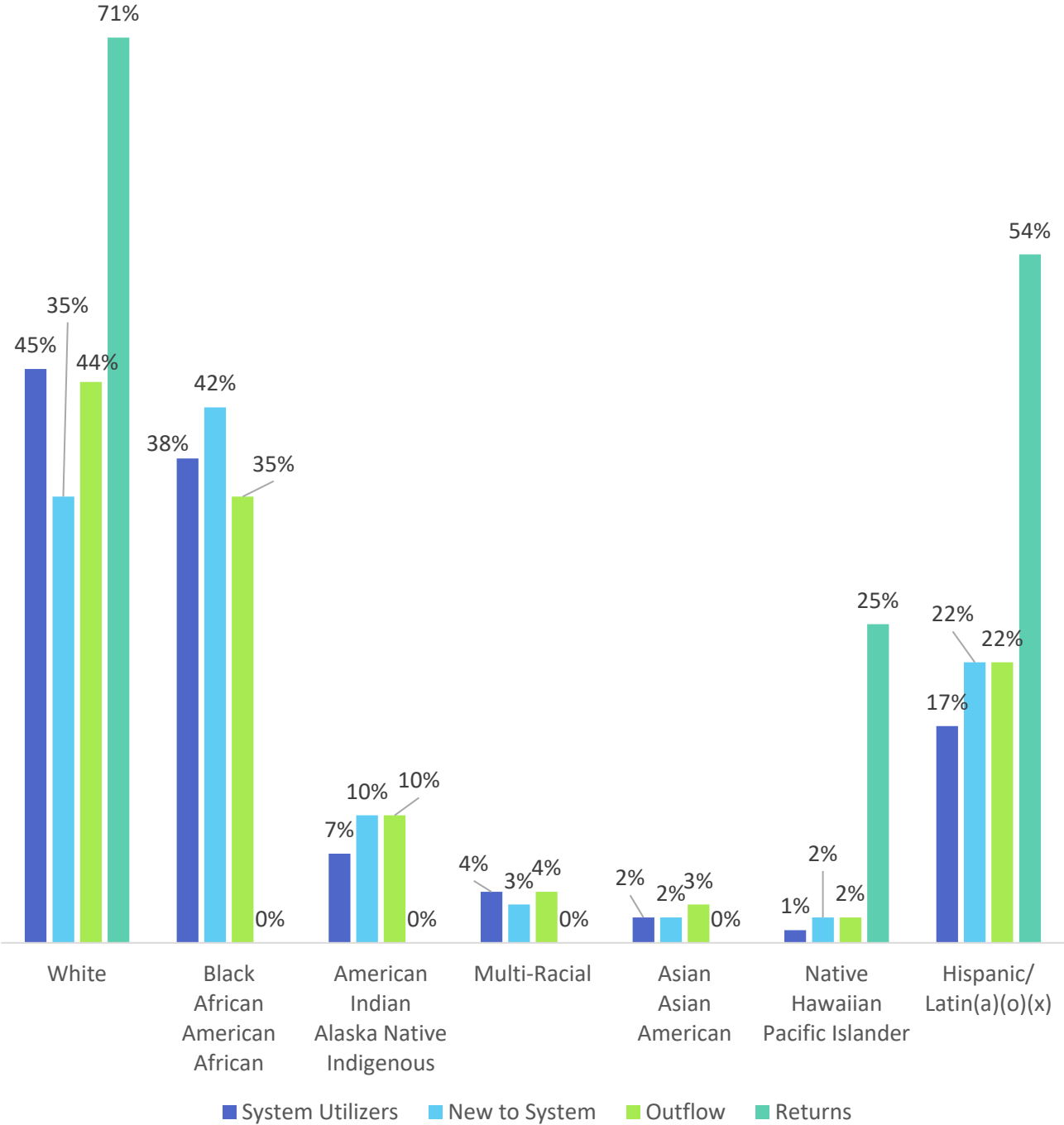


Figure 2: System Utilization by Race & Ethnicity



Review of 2021 Quarterly Trends

A comprehensive analysis of 2021 system utilizers, inflow, outflow, returns, and race/ethnicity differences will be provided in the 2021 annual report. As a preliminary review, the four quarterly reports were compared to identify trends or noteworthy shifts. The take-aways are provided below.

- Data quality and completeness for each quarterly report is impacted by how many days the report is run after the quarter ended. This real-time data changes after each quarter due to auto-exits and data cleaning. The number of system utilizers and people in outflow is greater when the report is run soon after the quarter ended. For this reason, program and policy decisions should rely on annual data instead of quarterly data.
- Race and ethnicity make-up did not vary from quarter to quarter across system utilizers, inflow, or outflow. Variations in race/ethnicity among returners varied, likely due to the small number of people/households each quarter returning to the system from permanent housing. For this reason, program and policy decisions that focus on households returning to the system should rely on annual data instead of quarterly data.
- The number of system utilizers was similar from quarter to quarter and did not appear to have seasonal differences.
- Inflow varied from 538 households during Q2 to 629 in Quarters 1 and 4.
- Outflow varied from 421 households in Q1 to 1,003 in Q2 (again, the lower outflow may have been a result of running the report soon after the quarter ended).
- The different between inflow and outflow was greatest in Q2 with 495 households added to the system of care.



Methods & Definitions

How to Use This Report

- The report analyzes “real-time” data that changes as people enter and exit new programs. The quality and completeness of the data is impacted by the amount of time between the end of the quarter and the data-run date. For Quarter 4, the report was prepared 47 days after the end of the quarter.
- As the methodology to pull and analyze the BOS quarterly data continues to be refined and improved, we recommend not drawing conclusions based on previous BOS quarter data. An annual report summarizing all quarters will be published in early 2022 that will provide insight on these four primary indicators over an annual basis. Further, the HMIS is a live and shared database; numbers are potentially subject to minor fluctuations at any given time, should the report be rerun for the same time period. This could be due to retroactive data entry or data clean-up work.

Head of Household (HoH)

- The Head of Household (HoH) is one member of a household to whom all other household members can be associated. A household can be a single individual or a group of persons who apply together to a continuum project for assistance and who live together in one dwelling unit, or, for persons who are not housed, who would live together in one dwelling unit if they were housed. For the purpose of this report, the demographic data of the HoH represents the entire household.
- Sometimes consumers enroll in a program with a household and enroll in another program as a single adult. They are reflected in both the household count and the consumer count.
- Household data is determined by the HoH, including demographics such as race and ethnicity.

Race Definitions (as defined by the Department of Housing and Urban Development)

- American Indian, Alaska Native, or Indigenous: A person having origins to any of the indigenous peoples of North and South America, including Central America.
- Asian or Asian American: A person having origins of Asian descent, including but not limited to Chinese, Indian, Japanese, Korean, Pakistani, Vietnamese, or another representative nation/region.
- Black, African American, or African: A person having origins to any of the Black racial groups of Africa, including Afro-Caribbean.
- Native Hawaiian or Pacific Islander: A person having origins in any of the indigenous peoples of Hawaii, Guam, Samoa, or another Pacific Island.
- Multi-Racial: A person who identifies as more than one race.
- White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.



Ethnicity

- Hispanic/Latin(a)(o)(x): A person of Central American, Latin American, or South American origin, separate from race.

Deduplication Strategies—intervention levels, outflow, new-to-system, returners

- Consumers and households may enter multiple programs within the same intervention level, or even across intervention levels, resulting in multiple enrollments over the course of a report period. This requires manually removing duplicate enrollments. When removing duplicate enrollments across intervention levels, we chose enrollments in Literally Homeless over Prevention and Diversion or Permanent Supportive Housing. For the outflow, new-to-system, and return analyses, the order of deduplication did not impact the results as we simply needed to know the number of consumers/households.

Intervention Levels

- Intervention Levels included in this report are 1) Prevention and Diversion, 2) Literally Homeless, and 3) Permanent Housing. Coordinated Entry has been excluded from this analysis due to pending system wide decisions around inclusion/exclusion criteria, as well as data completion concerns. The system utilization numbers in this report will be noticeably lower compared to Quarter 1, which did include Coordinated Entry program data.
 - Prevention and Diversion:
 - An enrollment into a Homeless Prevention or Diversion program
 - Literally Homeless:
 - An enrollment in Emergency Shelter, Transitional Housing, or Street Outreach
 - An enrollment in a Services Only project with no move-in date recorded, and with a housing status not equal to “stably housed”
 - Rapid Rehousing or Permanent Supportive Housing if the household does not have a move-in date
 - Permanent Housing:
 - An enrollment in Rapid Rehousing or Permanent Supportive Housing with a move-in date
 - An enrollment in Street Outreach or Services Only project while stably housed, according to the housing status question

Exit Destination Categories

- The specific exit destinations that fall under each category are listed below:
 - Temporary:
 - Emergency shelter not in HMIS, including hotel or motel paid for with emergency shelter voucher, or RHY-funded Host Home shelter, Hospital or other residential non-psychiatric medical facility, Host Home (non-crisis), Hotel or motel paid for without



emergency shelter voucher, Moved from one HOPWA funded project to HOPWA TH, Jail, prison or juvenile detention facility, Psychiatric hospital or other psychiatric facility, Staying or living with family, temporary tenure (e.g. room, apartment or house), Staying or living with friends, temporary tenure (e.g. room, apartment or house), Transitional housing for homeless persons (including homeless youth) not in HMIS, Safe Haven, Residential project or halfway house with no homeless criteria, Substance abuse treatment facility or detox center.

- Permanent:
 - Long-term care facility or nursing home, Rental by client in a public housing unit, Rental by client, no ongoing housing subsidy, Rental by client, with GPD TIP housing subsidy, Owned by client, no ongoing housing subsidy, Owned by client, with ongoing housing subsidy, Moved from one HOPWA funded project to HOPWA PH, Rental by client, with HCV voucher (tenant or project based), Rental by client, with other ongoing housing subsidy, Rental by client, with RRH or equivalent subsidy, Rental by client, with VASH housing subsidy, Permanent housing (other than RRH) for formerly homeless persons, Staying or living with friends, permanent tenure, Foster care home or foster care group home, Staying or living with family, permanent tenure. All of these exits must have a move-in date.
- Unsheltered:
 - Place not meant for habitation (e.g., a vehicle, an abandoned building, bus/train/subway station/airport or anywhere outside).
- Other/Unknown:
 - Client doesn't know, Client refused, Data not collected, Deceased, Other, or No exit interview completed.



APPENDIX B

Commonly Used Acronyms and Terms

Acronym	Definition
APR	Annual Performance Report (for HUD homeless programs)
BOS	Board of Supervisors (Contra Costa County)
BCSH	California Business Consumer, Services and Housing Agency
CARE	Coordinated Assessment and Resource
CCACS/CCYCS	Contra Costa Adult Continuum of Service/ Contra Costa Youth Continuum of Services (H3 programs)
CDBG, CDBG-CV	Community Development Block Grant (federal and state programs) and the federal Community Development Block Grant CARES Act coronavirus allocation.
CESH	California Emergency Solutions and Housing program (state funding)
COH	Council on Homelessness
Continuum of Care (CoC)	Continuum of Care approach to assistance to the homeless. Federal grant program promoting and funding permanent solutions to homelessness.
Con Plan	Consolidated Plan, a locally developed plan for housing assistance and urban development under CDBG.
CES/CE	Coordinated Entry
CNWS	Concord Naval Weapons Station
CORE	Coordinated Outreach Referral, Engagement program
COVID-19	Coronavirus
DCD	Contra Costa Department of Conservation and Development
DOC	Department Operations Center
CDSS	California Department of Social Services
EHSD	(Contra Costa County) Employment and Human Services Division
EOC	Emergency Operations Center
ESG and ESG-CV	Emergency Solutions Grant (federal and state program) and the federal Emergency Solutions Grant CARES Act coronavirus allocation.
FMR	Fair Market Rent (maximum rent for Section 8 rental assistance/CoC grants)
HCD	Housing and Community Development (State office)
HCFC	Housing Coordinating and Financing Council (state governing board under BCSH)
HEAP	Homeless Emergency Aid Program (state funding)
HEARTH	Homeless Emergency and Rapid Transition to Housing (HEARTH) Act of 2009
HHAP	Homeless Housing and Assistance Program (state funding);



HMIS	Homeless Management Information System
HOME	Home Investment Partnerships (CPD program)
Homekey	California funding to support development of interim and permanent housing
HUD	U.S. Department of Housing and Urban Development (federal)
MHSA	Mental Health Services Act
NOFA	Notice of Funding Availability
PHA	Public Housing Authority
Project Roomkey	COVID-related State funding program to support decongregating homeless shelters using hotels/motels.
PSH	Permanent Supportive Housing
PUI	Persons Under Investigation
RFP/RFQ/LOI	Request for Proposal/Request for Qualifications/Letter of Intent related to funding opportunities
RRH	Rapid Rehousing
SAMHSA	Substance Abuse & Mental Health Services Administration
SRO	Single-Room Occupancy housing units
SSDI	Social Security Disability Income
SSI	Supplemental Security Income
TA	Technical Assistance
TAY	Transition Age Youth (usually ages 16-24)
VA	Veterans Affairs (U.S. Department of)
VASH	Veterans Affairs Supportive Housing
VI-SPDAT	Vulnerability Index – Service Prioritization Decision Assistance Tool

Contra Costa County COVID-19 Resources:

Please see below for additional resources on COVID-19.

Health Services COVID Data Dashboard- <https://www.coronavirus.cchealth.org/dashboard>

Health Services Homeless Specific Data Dashboard- <https://www.coronavirus.cchealth.org/homeless-dashboa>

Health Services COVID Updates- <https://www.coronavirus.cchealth.org/health-services-updates>

Health Services Homeless-Specific COVID Resources <https://www.coronavirus.cchealth.org/for-the-homeless>