Gaps Analysis & Recommendations for Emergency Sheltering Options Jefferson County

Executive Summary

A housing crisis resolution system responds to the needs of **all** persons who are experiencing a housing crisis. Successful systems pull all the housing programs and resources together to work on a common set of goals. Effective housing resolution systems function similarly to an effective emergency department of a hospital by:

- Serving all persons who present with urgent needs,
- Assessing and prioritizing the most urgent needs,
- Providing immediate crisis relief where needed,
- Triaging to appropriate long-term services, and
- Coordinating with multiple departments and programs towards common goal of stabilization

All points of contact for persons experiencing homelessness stand ready to stabilize the housing crisis and facilitate pathways to housing. While temporary sheltering options are a necessary component of an effective crisis resolution system, temporary shelter alone will not reduce homelessness. The ultimate solution to homelessness is permanent housing. Sheltering options must be connected with permanent housing options in order to successfully serve its purpose as part of a response system that seeks to ensure homelessness is rare, brief, and non-recurring.

This document serves to assess current temporary sheltering options in Jefferson County, review available data to determine specific needs for such options, and identify unmet need. It provides information on best practice and evidence-based approaches to meeting this need. Lastly, we offer a clear set of recommendations to address the unique needs within Jefferson County and concrete recommendations for how leadership can assist in supporting this effort.

These recommendations were developed by the Crisis Resolution Workgroup of the Heading Home Committee and driven by the Jefferson County Homelessness 2021 Action Plan. Thank you to this group of thoughtful non-profit, government, and faith-based leaders for their time and commitment.

Document Outline:

- Gaps analysis
    - Summary of existing temporary sheltering inventory in Jefferson County
    - Summary of need for temporary sheltering options in Jefferson County
    - Description of unmet need
- Homeless Crisis Resolution System: Key Components & Best Practices
- Priorities for Effective Crisis Resolution System in Jefferson County
- Leadership Recommendations
    - Possible Funding Sources
    - Budget Estimate

Gaps Analysis: Identifying Unmet Need for Emergency Sheltering Options in Jefferson County

Summary of Existing Sheltering Inventory

The table below includes a list of existing temporary shelter options for persons experiencing homelessness in Jefferson County as of February 2021. In addition to space capacity, we have provided information on the populations served by these programs and the relative barriers to entry for each program. We believe these combined data points present a more complete representation of the capacity of our existing sheltering programs in Jefferson County that serve the homeless population.

Organization (Program)	Subpopulation Served	Eligibility Criteria	Capacity (# rooms/ units/ spots)
Transitional Housing (up to 2 year stay)			
Beyond Home	Families w/ children	High	206
Catholic Charities (Marisol 10th)	Families w/ children	Med-High	
Family Homestead	Families w/ children	Med-High	
Emergency Shelter- Severe Weather only			
Evergreen Christian Outreach (Evergreen Shelter Program)	All households	Low	98
Severe Weather Shelter Network	Adult only households	Low	
Jefferson County Human Services	Families with children	Low	
Emergency Shelter – Domestic Violence only			
Roots of Courage (Family Tree)	All households	Med-High	38
Safe Parking lots			
CO Safe Parking Initiative (Golden & Arvada lots)	All households	Low	17
			359

Inventory Summary:

- The majority (57%) of sheltering beds/units are dedicated for **families with children**, 96% of those units/beds are for families who have few barriers to obtaining housing relative to the general homeless population.
- Jeffco's overnight sheltering options for adult-only households is limited to **severe weather** nights only, which comprised only 15% of the nights in 2019-20 season. The severe weather response is activated when the low temperature at night is lower than 20 degrees Fahrenheit with no precipitation, or lower than 32 degrees with precipitation. Severe Weather Shelter Network does not provide housing-focused, wrap-around services to its guests, so these individuals typically return to unsheltered homelessness as soon as the temperature rises above freezing.
- **Safe parking lots** allows persons to safely and legally reside in their vehicles overnight. It does not include indoor shelter options with some exceptions during extreme weather events. The

first two safe parking lots in Jefferson County launched in 2020 reside in church parking lots. Data does not yet exist on how many persons residing in their cars, if given a shelter option that meets their needs, would prefer to move indoors at night. The two safe parking lots in Jefferson County accept cars and trucks, but do not allow recreational vehicles.

- Jefferson County relies heavily on a **motel based sheltering model**. Aside from severe weather vouchering, several local homeless service providers have small budgets to provide motel vouchers to persons in immediate need of shelter. Often the vouchers are used for overflow demand during severe weather nights, for persons recovering from acute medical conditions often referred by hospitals, or those who cannot access traditional shelters due not household composition (pets, couples, multiple adult households). Due to lack of system-wide data tracking on motel voucher utilization, motel voucher numbers were not included in the above table. For all vouchering across the County, it's estimated about 100 households are vouchered during an average severe weather night at a total cost of $7,500 per night (based on average $75 per room cost).

<u>Terminology:</u>

High Barrier vs. Low Barrier Programs:
Sheltering programs have a lot of discretion in the eligibility criteria they choose to implement. High levels of eligibility criteria present barriers to accessing programs by most households experiencing homelessness. The result often is that these high barrier programs serve the households with the fewest challenges to obtaining stable housing. Households with minimal challenges are most efficiently and effectively served with minimal financial assistance and services to regain housing stability.[i]

The households with the most barriers to obtaining stable housing would benefit the most from a more service-intense program, yet these are the very households that are often excluded from shelter programs with high barriers to entry and eligibility criteria. Some examples of these eligibility criteria include excluding persons with eviction histories, felonies on record, no/low income, no/underemployed, families with boys over 12, single father families, active drug and alcohol use, and those with pets.

A low barrier program meets the needs of all members of a household and self-defined family and kinship groups. They do not turn people away or make access contingent upon sobriety, minimum income requirements or lack of criminal history. They do not require family members and partners to separate from one another in order to access shelter. Eligibility requirements are minimal and shelter rules are focused on maintaining a safe environment for residents.

Indoor Sheltering Models:
- **Transitional Housing** refers to a longer-term temporary, supportive shelter program that allows households to stay for up to two years. Programs typically have guests sign occupancy agreements instead of leases as the stay is temporary. While federal funding has dramatically decreased for transitional housing over the last ten years, HUD recognizes that transitional housing can be most beneficial for specific subpopulations such as persons in recovery from substance use disorders, persons experiencing domestic violence and unaccompanied youth. The setting is typically non-congregate.
- **Emergency Shelter** refers to any facility in which the primary purpose is to provide a temporary shelter for households experiencing homelessness. Shelter stay limits can vary from night-by-night, week-by-week or up to several months.
  - **Congregate model**: The most common type of shelter setting, these provide a common facility and shared spaces such as dining areas, restrooms, living space and sometimes sleeping areas.
  - **Non-congregate model:** Households live in separate living spaces, most often in motel rooms. This model has gained popularity during COVID because of it's effectiveness in reducing the spread of the virus.
- **Day Shelters** are where persons experiencing homelessness can stay indoors during daytime hours but cannot stay overnight. These sites typically provide meals, showers, laundry, internet access and a range of co-located services. The primary day sheltering options in Jefferson County for persons experiencing homelessness are Mission Arvada (The Rising) and Mean Street Ministries in Lakewood.

Permanent Supportive Housing (PSH) refers to a housing model that pairs housing/rent assistance with individualized, flexible and voluntary supportive services for people with high needs related to physical or mental health, most often those who experience chronic homelessness. A cost-effective solution, PSH has been shown to lower public costs associated with the use of crisis services such as shelters, hospitals, jails and prisons. PSH model can be located in one building (site-based) or be dispersed among multiple buildings or properties using portable vouchers/subsidies (scattered site).

Housing First:
Housing First[ii] is an approach based in the idea that homelessness is foremost a housing problem. In other words, people need basic necessities like food and a place to live before attending to anything less vital, such as employment, budgeting or attending to substance use issues. Nothing in any person's history or present precludes them from being able to be housed. Housing First does not equate to Housing Only. As persons are returned to or stabilized in permanent housing, many will need services to sustain that housing. Housing first is a philosophy that values flexibility, individualized supports, client choice and autonomy. It is not a "one-size-fits-all" approach.

Summary of Need – Literally Homeless Population

The tables below present an overview of the numbers and characteristics of persons experiencing literal homelessness in Jefferson County based on the Comprehensive Homeless Count conducted in August 2019. Literally homelessness is defined as persons who lack a fixed, regular, and adequate nighttime residence, including sleeping overnight in a public or private place not meant for human habitation, in an emergency shelter, transitional housing or motel/hotel paid for by an organization or government. The data below does not include those at risk of homelessness, couch surfing or doubled up.

Data Limitations: A point-in-time based methodology of conducting a census of the homeless population has significant limitations in scope and reliability. This holds especially true for a population that is largely living outdoors and difficult to locate. To date, Jefferson County is reliant upon data from the annual Point-in-Time Count (January 2020) and the Comprehensive Homeless Count (August 2019). Although the one-day PIT Count was conducted more recently, the month-long Comprehensive Count is the most comprehensive County-wide data available. The data is still very likely an undercount of those experiencing homelessness and is of this writing over 1.5 years out of date, and does not provide information on post-COVID-19 homelessness. To improve our understanding of homelessness within Jefferson County at any given point in time, we need more homeless service providers to use the Homeless Management Information System (HMIS).
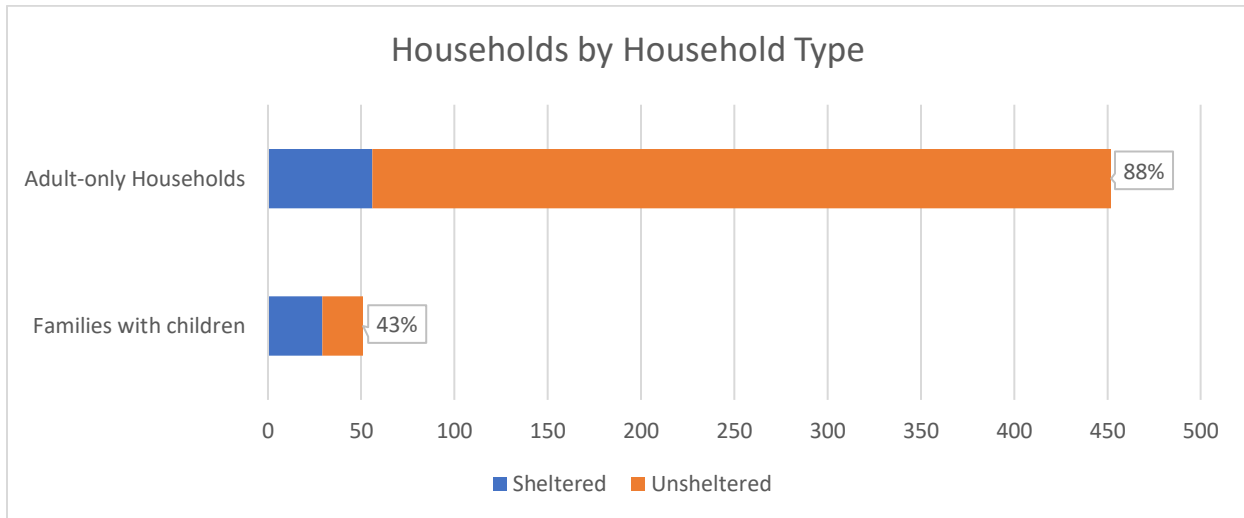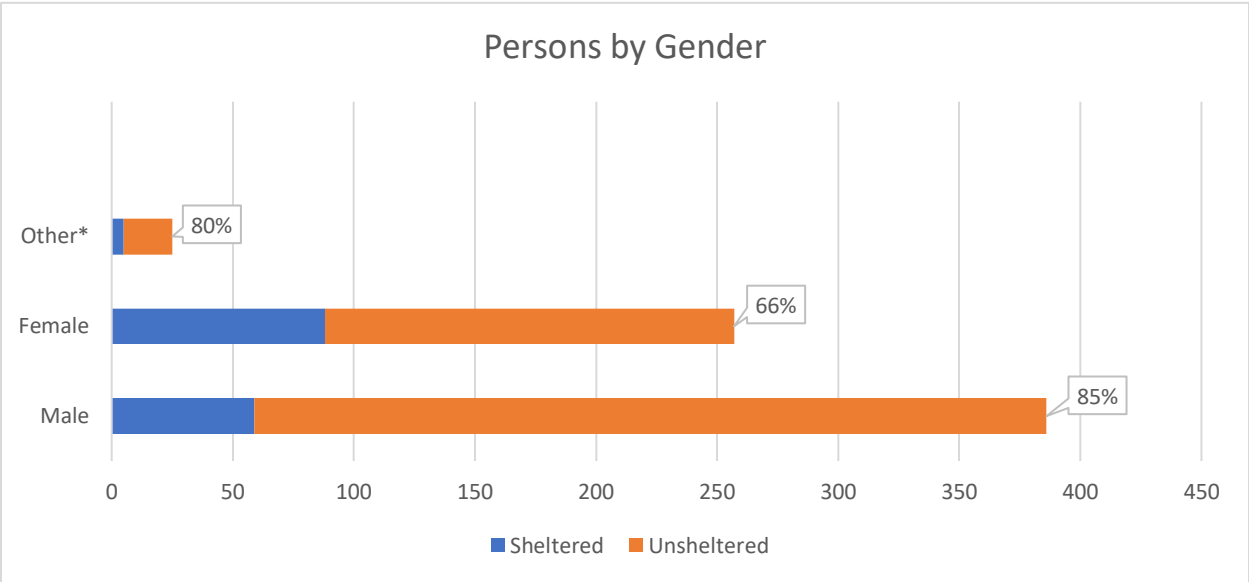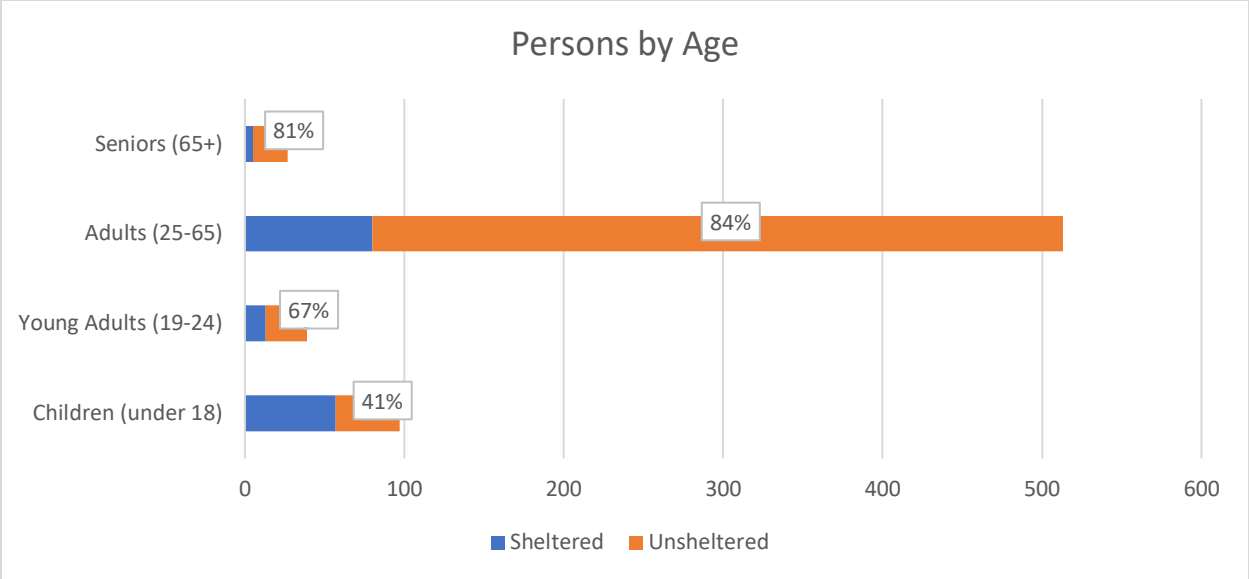
Homeless Management Information System (HMIS)
HMIS is a web-based database used by hundreds of homeless service providers across the state and 65 in metro Denver counties. It collects client-level data on households experiencing or at risk of homelessness. The US Department of Housing and Urban Development (HUD) provides minimum data standards for all HMIS databases throughout the country. The software for Metro Denver HMIS is Clarity Human Services and the database is administered locally by Metro Denver Homeless Initiative (MDHI). When HMIS is used consistently by all programs in a community that serve persons experiencing homelessness, it provides a reliable understanding of who is experiencing homelessness, what caused their loss of housing and their basic condition. It also tells us changes over time as well as what interventions are most effective. In Metro Denver's HMIS, HMIS is also used to enter persons

into the region's coordinated entry system and queue for permanent supportive housing, also known as One Home.
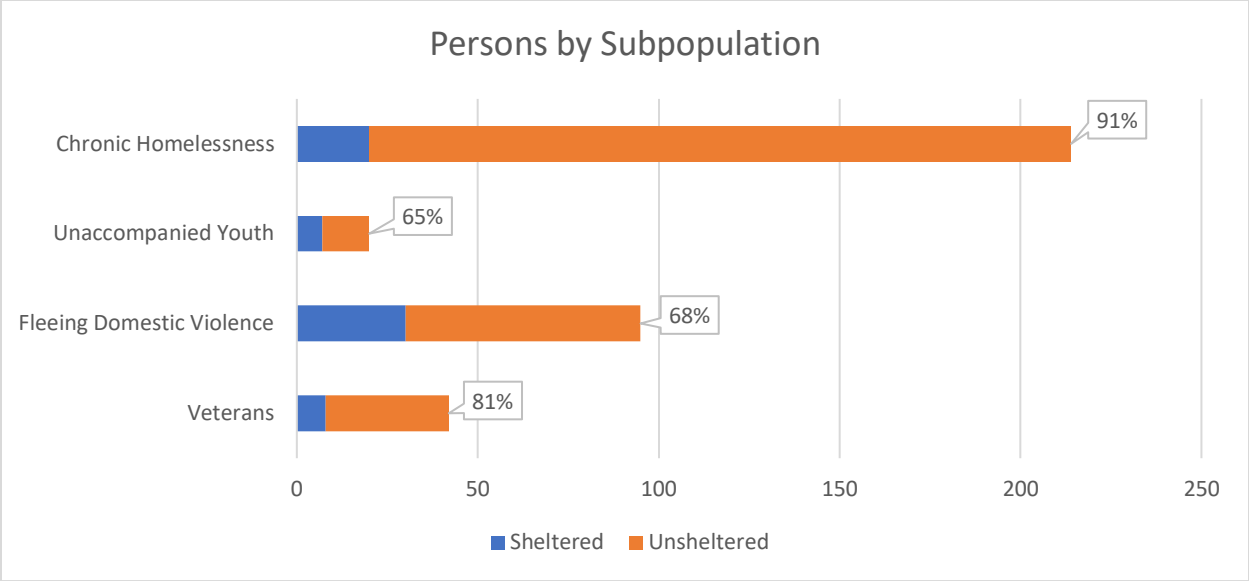Heading Home is working diligently on increasing the number of programs that use the HMIS in Jefferson County so that we will be able to better understand the causes, conditions and needs of our unhoused residents at any point in time.

The below data is pulled from the Comprehensive Homeless Count completed in August 2019. It summarizes key demographics, subpopulations and conditions of residents experiencing homelessness. The percentages in the call out boxes represent the percentage of persons/households unsheltered in that subpopulation (e.g., 88% of adult-only homeless households are unsheltered, 43% of homeless families with children are unsheltered). Persons living in unsheltered settings are more vulnerable to illness, injury, violence and unsanitary conditions.

Households by Household Type

Household Type	Sheltered	Unsheltered	% Unsheltered
Adult-only Households			88%
Families with children			43%

Legend: ■ Sheltered ■ Unsheltered

Persons by Age

Age	Percentage
Seniors (65+)	81%
Adults (25-65)	84%
Young Adults (19-24)	67%
Children (under 18)	41%

Legend: Sheltered, Unsheltered

Persons by Gender

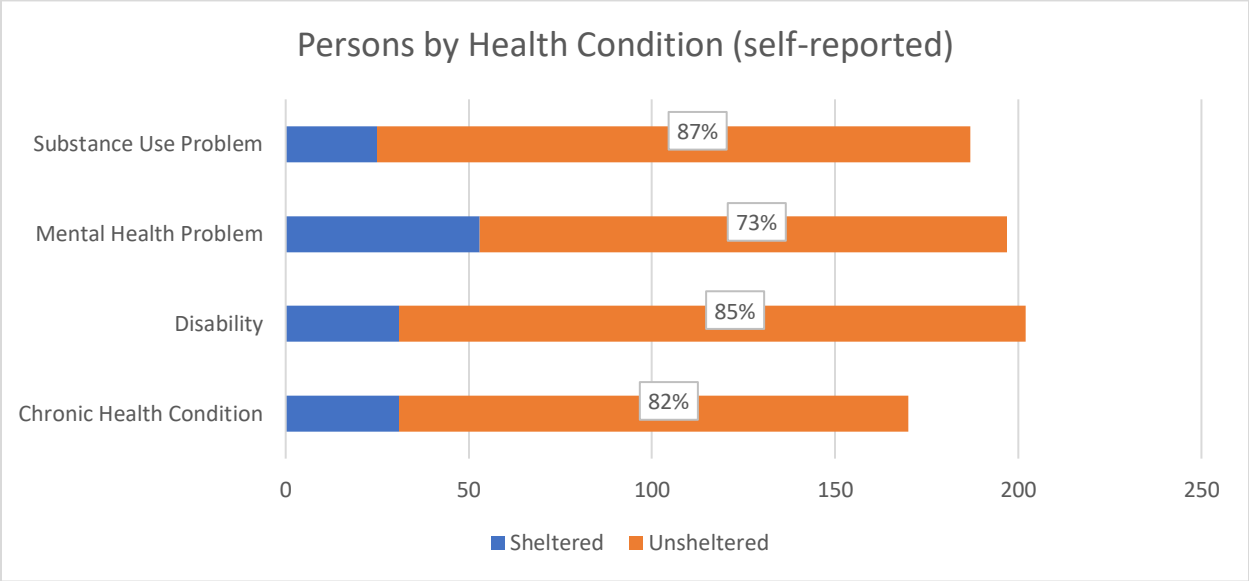| Gender	Percentage
Other*	80%
Female	66%
Male	85%

Legend: Sheltered, Unsheltered

*Other category refers to persons to identified as gender non-conforming (1), transgender (3), don't identify (1) or did not respond (18).

Persons by Subpopulation

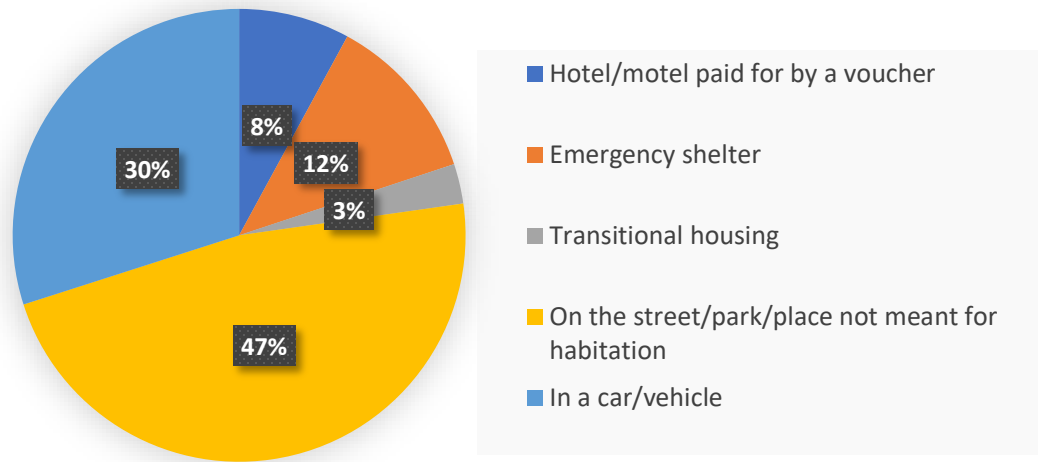| Subpopulation	
Chronic Homelessness	91%
Unaccompanied Youth	65%
Fleeing Domestic Violence	68%
Veterans	81%

■ Sheltered ■ Unsheltered

Chronic homelessness is defined as people who have experienced homelessness for at least a year – or repeatedly over the course of several years – while struggling with a disabling condition such as a serious mental illness, substance use disorder, or physical disability.

Persons by Health Condition (self-reported)

Health Condition	
Substance Use Problem	87%
Mental Health Problem	73%
Disability	85%
Chronic Health Condition	82%

■ Sheltered ■ Unsheltered

Disability was defined by having a physical or mental impairment that substantially limits one or more major life activities. A chronic health condition is a condition that lasts one year or more and requires ongoing medical attention or limits activities of daily living or both. Approximately two out of every three persons over 18 surveyed (62%) reported having at least one disabling condition.

Persons by Sleeping Location

Legend:
- Hotel/motel paid for by a voucher — 8%
- Emergency shelter — 12%
- Transitional housing — 3%
- On the street/park/place not meant for habitation — 47%
- In a car/vehicle — 30%

A total of 77% (516) of literally homeless Jefferson County residents were unsheltered and 23% (152) were sheltered.

Summary: Unmet Needs

The list below highlights the most pressing unmet sheltering needs in Jefferson County. In all cases, the need for low barrier sheltering options is highest. It is important that the persons with the highest barriers to (re)housing are not screened out from shelter programs and forced to live outside where their condition will likely worsen, barriers to exiting homelessness multiply and negative impacts to the community increase.

1. **Low Barrier Sheltering Options for Adult only households**: In Jefferson County, existing indoor shelter beds/units serve only 29% of the homeless population during severe weather nights. During non-severe weather nights, no shelter beds exist for adult-only households. Adult only households have greater health concerns, including mental health and substance use disorders, and rely on emergency health systems as their conditions worsen on the street.

2. **Low Barrier Sheltering Options for Persons with Severe Health Needs**: A disproportionately high percentage (average 82%) of homeless residents with one or more serious health conditions are living in a vehicle or in a place not meant for human habitation. Existing sheltering programs in Jefferson County are either not equipped or unable to accept persons with severe health conditions, therefore has a significant unmet need for medical respite temporary shelter programs.[iii] Such programs provide acute and post-acute medical care for individuals experiencing homelessness who are too ill or fail to recover from physical illness or injury on the street, but no longer need to be in a hospital. Without this resource, the cycle of crisis care and over-utilization of emergency departments continues, and hospital social workers are forced to discharge persons to the streets.

3. **Low Barrier Sheltering Options for Families with Children**: Inadequate low-barrier shelter beds exist for families with children. Existing transitional housing programs serving families maintain high eligibility criteria that would exclude many families experiencing homelessness from

entering. Because of this exclusion criteria, the data mask the need for increased low barrier emergency shelter options for families with children.

4. **Low Barrier Safe Parking Spots**: Only 9% of persons living in their vehicles in Jefferson County have safe parking spots available to them. People who are newly homeless retain their vehicle as their last asset, which provides shelter, personal privacy and autonomy, transportation for work and medical appointments, and connections to their community. But because sheltering in vehicles is illegal in many places and makes them a target for crime, people residing in vehicles often strive to "hide in plain sight" and do not connect with services, leaving them unserved or underserved. Additionally, no safe parking spots or affordable parking lots exist for people residing in recreational vehicles (RV's), therefore a significant need exists for such parking lots.

Medical Conditions of Unsheltered Persons in Jefferson County

Living outside and unsheltered often exacerbates pre-existing health conditions and creates new ones. Alcohol and drug use is a common approach to numbing the daily experiences, stress, and trauma of life on the streets. Many individuals start using once on the street as a way to survive, which can ultimately inhibit their ability to get help. The stress resulting from sleeping outdoors may be eased by using drugs and alcohol to keep warm, suppress hunger and/or stay awake for extended periods, as well as a means of escape from physical and emotional pain associated with surviving on the street[iv]. A low barrier shelter program would acknowledge these facts and would not conduct unnecessary drug tests during shelter stays.

The municipal and County navigators, Metro Denver Homeless Initiative, and severe weather sheltering partners have reported increases in recent months in the number of unsheltered persons presenting with extremely medically fragile conditions. These individuals are often prioritized for available vouchers, but often need more time to recover than funding allows and often require more intensive medical support than available. Unsheltered persons have been found to have mortality rate 10 times larger than that of housed adult population[v]. The below list briefly describes the medical condition of several Jeffco residents who were recently referred to homeless navigators:

- Mr. A suffered a series of strokes and had limited mobility due to an accident in which he was hit by a car, crushing his pelvis. He was not able to maintain his activities of daily living and became septic, requiring a lengthy hospital stay.
- Mr. N has cerebral palsy and was evicted from the motel due to inability to pay. He has no medical insurance and minimal benefits and was referred to navigators from hotel staff.
- Mr. B has severe pulmonary issues and congestive heart failure. He could not maintain his employment in the gig economy after a medical setback.
- Mr. P is visually impaired and has been living in and around businesses on West Colfax and Wadsworth and cannot navigate the bus system to retrieve vouchers from Severe Weather Shelter Network.
- Mrs. C has terminal cancer and has less than a year to live. When undergoing treatment for the cancer, her ability to engage in case management was minimized.
- Mr. M has been living on the streets of Lakewood for over 11 years. A Marine Veteran, he suffered a horrible on-the-job injury that left the bones in his legs and spine shattered. Unable to work, his disability income was not enough to keep up with cost of rent in the area.
- Mr. K approached a service provider during the February sub-zero weather event seeking shelter because his tracheotomy was freezing.

> - Ms. S presented with a hand infection that after seeking medical treatment required hourly soaking, of which she was unable to do while living outside in unsanitary conditions.

Homeless Crisis Resolution System – Key Components & Best Practices

What is a Crisis Response System?

Emergency shelters, street outreach, and safe places to access crisis services are the critical front line of a community's response to homelessness. These services meet basic survival needs like shelter, food, clothing, and personal hygiene, while also helping to resolve housing and other crises. To optimize the effectiveness of this system and to reduce the opportunity for residents to slip through the cracks, these components must work together in a coordinated system. This could mean they use standardized forms, assessment criteria, eligibility criteria, and a shared database. They also would commit to best practices by using a low barrier, housing first and client centered crisis response implemented with a trauma-informed approach.

Key components include[vi]:

- **Street Outreach**: Street outreach is critical to ensure the community actively seeks to identify and build relationships with all persons experiencing homelessness across the community. Developing relationships and trust with individuals averse to coming indoors takes time and a specialized skill set.
  - o Jefferson County does not have an active street outreach team focused on housing. Currently, Jefferson County Public Health's Points West team conducts street outreach to provide harm reduction services for those actively using drugs. Mean Street Ministries provides weekly outreach in Lakewood to various motels on West Colfax to provide food, toiletries, warm weather gear with a faith-based approach. Some of the municipal navigators conduct limited street outreach primarily in conjunction with law enforcement.
- **Diversion & Prevention**: Centrally important to reducing inflow into the shelter system, prevention and diversion assistance helps residents to either preserve their current housing situation or find an immediate alternative housing arrangement and connection with services that will allow them to avoid homelessness. Diversion is also the most cost-effective intervention available toward the goal of ending homelessness[vii]. Both prevention and diversion often require funding to use for short-term financial assistance (rent, move-in, storage, back-pay, motel vouchers, etc.). Many people, especially families, can exit or avoid homelessness with a light touch of services and assistance that these programs offer.
  - o Some Jefferson County non-profits have diversion problem-solving conversations with clients during intake, however widespread or implementation of this tactic has not occurred. The Action Center has an active and small homelessness prevention Emergency Solutions Grant (ESG) from the State Division of Housing. Additionally, the

rental assistance provided for eviction prevention through recent federal funding sources (e.g., CARES Act) will likely prevent homelessness for many households.

- **Coordinated Entry**: A process designed to quickly identify, assess, refer, and connect people in crisis to permanent supportive housing and services. It ensures that all people experiencing a housing crisis have fair and equal access and it prioritizes those with the most severe service needs. It incorporates a system-wide Housing First approach and uses standardized tools and practices.
  - Approximately four organizations in Jefferson County participate in metro-Denver's Continuum of Care's (CoC) coordinated entry system, One Home, which is currently used to allocate permanent supportive housing resources. Beyond this limited scope participation of One Home, Jefferson County agencies do not maintain an active coordinated entry system.
- **Crisis Resolution/Housing-Focused Services**: At the point of entry, interventions must be laser focused on the resolution of the current housing crisis. Services should be tailored to the unique strengths and needs of the household that will enable them to achieve and maintain permanent housing.
  - Some programs in Jefferson County provide housing-focused services, but many homeless service providers do not provide housing services. Many services exist to provide basic services, such as food, water, and clothing, but do not provide housing assistance.
- **Emergency Shelter & Other Basic Needs:** In some circumstances, homelessness cannot be averted, and people need a safe, temporary place to stabilize and get connected with services and longer-term housing. Sheltering programs are most effective when open 24/7 as they allow safety and time for guests to take the steps needed toward obtaining more stable housing. Residents also need to meet basic hygiene and safety needs with access to publicly available showers and laundry.
  - As outlined in the inventory analysis in the gaps analysis, no year-round low-barrier shelter options exist in Jefferson County. Currently, The Rising offers publicly available, free showers in Arvada and the Wheat Ridge Rec Center offers showers for the public through vouchers provided by the Homeless Navigator. No known options exist for no charge laundry services.
- **Permanent Housing:** An effective crisis response must be able to connect persons to permanent housing resources – whether it be through vouchers or temporary financial assistance. Without this requisite outflow, the crisis response system gets flooded and people stagnate at emergency shelters.
  - A supportive housing workgroup within Heading Home is actively working to increase access to and supply of supportive housing locally.

Best Practices for Emergency Sheltering & Interim Housing

Effective emergency shelters divert people from entering shelter when possible, provide access to crisis beds when not, and enable flow through the system to permanent housing. **Shelter should be part of a**

process of getting someone housed, not a destination. People must be able to get in and to get out (to housing).

The response system should be actively working to engage people where they are and get more people indoors. Shelter models can be single site locations, rotating locations, partial motel leasing or scattered site motel vouchers. Some models can be used as short-term crisis housing, while others can be more of a bridge housing model, or one that is used as a short-term stay after permanent housing has been offered and accepted, but access to the housing is still being arranged.

To summarize, the five key components to an effective emergency shelter include:

1. Housing First Approach
2. Safe and Appropriate Diversion
3. Immediate & Low Barrier Access
4. Housing-Focused, Rapid Exit Services
5. Data to Measure Performance

Barriers to Accessing Shelter:
Why do some people prefer to be on the street than in an emergency shelter?
Many people who live outside do not access shelter due to the lack of available beds or they avoid shelters all together. A national survey[viii] conducted of those who refuse to enter shelters, stated the following reasons:

- Too crowded (37%)
- Bugs (30%)
- Too many rules (28%)
- Full/not available (27%)
- Would have to stay separate from partner/family (23%)
- Germs (22%)
- Do not accept my pet (22%)
- Nowhere to store belongings (19%)
- Too far away (18%)
- Cannot stay with friends (13%)

While a similar survey in Jefferson County has not been conducted, these same responses have been frequently reported anecdotally. Some other reasons provided locally for not accessing shelters include conflicts with work schedules, mental health and substance use struggles, fear of COVID-19, safety concerns, distrust of the system and lack of personal autonomy.

As a shelter model is developed in Jefferson County, it is imperative that the process includes the voice and perspective of residents experiencing homelessness, and that their needs, including many of those listed above, are incorporated throughout the planning process. Additionally, the space must be safe, clean, trauma-informed and welcoming to all persons. The model must create an environment that makes persons feel welcome, especially those who are typically averse to accessing shelters and services.

Priorities for Effective Housing Crisis Resolution System in Jeffco

The most effective interventions, programs and strategies in a housing crisis resolution system are ones where service models are standardized using all available best practice approaches such as motivational interviewing, progressive engagement, harm reduction and developed with a trauma-informed, client-centered, and strengths-based lens. Services are customized, remain flexible and seek to engage persons where they are in their crisis. Ultimately, interventions facilitate pathways to safe, stable housing. The following components and strategies are listed in order of priority, based on current need.

PRIORITY 1: CREATE TWO HOUSING NAVIGATION CENTERS

Develop two Housing Navigation Centers- one in North Jeffco and Central Jeffco - that use an integrated co-located service model. Navigation Centers contain the following core components:

1) Drop-in Resource Center – Hold dedicated space for the following core services:
   a. *Co-located housing and health service providers*: behavioral health, primary care, public health vaccinations, harm reduction services, supportive employment program, benefits acquisition (VA, Human Services, etc.).
   b. *Navigation services*: Municipal & County homeless navigators, other community-based housing and health navigators.
   c. *Basic needs*: Access to showers, bathrooms, laundry, mail collection, temporary storage spaces, and phones.
   d. *Open community space:* Open safe space for rest and engagement with staff and guests. This space would also serve as overflow sleeping area for severe weather nights.
   e. *Private office spaces/meeting rooms*: Used for initial intake & diversion services. Also used for one-on-one meetings with community service providers, and temporary isolation rooms for persons symptomatic with infectious disease.
2) Housing-focused 24/7 shelter beds & spaces: Designate beds and activity rooms for each gender, multi-adult households, and/or persons needing to quarantine. Several units would be dedicated for persons with medical respite needs and those individuals would have access to medical personnel. Central to navigating a path towards housing, employment and health stability is the ability to have a reliable, safe place to sleep and recover.
3) Safe parking spaces for cars and RV's: Select location for navigation center that has an adjacent parking lot to use for persons living in their vehicles who need a safe and legal place to park and sleep in their vehicles. These persons would be engaged by service providers and could access all services provided at the center. Families with children residing in their vehicles would be diverted to Human Services to receive services and voucher for a motel room.
4) Diversion: Diversion services must be consistently provided upon first entry to the navigation center using staff trained and skilled in this technique. Through a creative problem-solving and conflict resolution approach, this component stabilizes a housing situation and can prevent or reduce the length of time homeless.
5) Transportation Services: Depending on the location of the navigation centers, the center may need to operate a vehicle or have a budget for public transportation to assist guests in getting to the center and to needed appointments.
6) Data Collection & Coordinated Entry: The navigation centers would function as centralized access points for persons experiencing a housing crisis in the County. Primary to serving in this

role is using the Homeless Management Information System (HMIS). The HMIS allows service providers to communicate with one another across the metro area, puts guests in the queue for permanent supportive housing when appropriate, and reduces the trauma of asking redundant questions of guests. Lastly, it produces aggregate reports that help us understand the program's performance and monitor the changing landscape of homelessness in Jefferson County.

What is a Housing Navigation Center?

The housing navigation center model meets people at all points on the spectrum of a housing crisis. It provides low barrier access to on-site housing navigation, supportive services, shelter beds, basic hygiene resources and a permanent housing pathway through coordinated entry. It functions as an efficient one-stop service center for residents of Jefferson County experiencing a housing crisis. The model especially engages long-term unsheltered residents who are often fearful of accessing traditional shelter and services.

The core objectives of a navigation center include:

- Diverting people from homelessness when possible,
- Providing emergency shelter for most vulnerable individuals,
- Rapidly assisting people in accessing permanent housing,
- Maintaining or establishing connections with supportive services and employment, and
- Providing essential services to help people survive homelessness.

Successful navigation centers have access to sufficient permanent housing resources so that shelter beds are turned around as rapidly as possible to make room for others needing shelter. The low barrier model provides an opportunity for staff to engage shelter-averse populations during the day, build relationships and take the steps to build the trust necessary to engage them in services. Navigation Centers benefit the greater community by saving taxpayer dollars and reducing over-utilization of emergency departments, law enforcement contacts, and jail time as persons can get their basic needs met at the navigation center before those needs grow into crises.

Locally, two local housing navigation centers exist including Weld County Navigation Center and Adams County[ix]. The tri-city areas (Littleton, Englewood and Sheridan) are in discussions around the development of a navigation center. Two non-local examples include Hayward Housing[x] and San Diego.[xi]

PRIORITY 2: CREATE COLLABORATIVE STREET OUTREACH TEAM

Create collaborative street outreach team that includes housing and health focused expertise, data collection, encampment mapping and service connection to persons living outdoors. Use County and city staff as well as non-profit provider participation. Street outreach teams develop relationships with residents living outdoors and is central pillar in a functioning navigation center to ensure these individuals are connected with housing and health services. It is critical that we continue to understand the needs, names, and numbers of these underserved individuals.

PRIORITY 3: CREATE MOTEL-BASED EMERGENCY SHELTER FOR FAMILIES WITH CHILDREN

Families experiencing homelessness are served best when they can maintain their family unit in a safe, non-congregate setting with customized services to support them on their pathway to stable housing. The current sheltering model for families is to provide temporary motel vouchers in a few designated hotels throughout Jeffco while providing navigation services to those individuals. We propose to move towards a single site family sheltering model of multiple rooms (up to 20) in one hotel in Jefferson County. The benefit of this model, as opposed to scattered site motel vouchers, is that families would build a support system with one another and services could be delivered more efficiently. We recommend starting in year one with one location by leasing 15-20 rooms continuously. After year one, we would assess the need for additional locations and consider scaling up to other areas of Jeffco so households would have choice and be closer to their home communities and support systems.

In this model County and municipal navigators would serve as one referral source and work in partnership with on-site staff highly trained in best practice service models and approaches. Central to the success of this model is to provide intensive, individualized and high-level case management and navigation services. If funded in part or whole by County or municipal funds, we recommend operation of the shelter be put out to a Request for Proposal (RFP) process with clear requirements on staffing levels and service model.

PRIORITY 4: WORK WITH EXISTING SHELTERING PROGRAMS TO LOWER BARRIERS TO ENTRY

Leverage existing relationships with transitional housing programs to convert some or all units/beds to low-barrier, housing-focused models with space for emergency shelter beds. Use financial incentives and modify contracts. This leverage can also be used to require programs to participate in the Homeless Management Information System (HMIS) as a condition of funding in order to increase and improve our County-wide data and knowledge of homelessness.

Leadership Recommendations

Given the above priorities, Heading Home recommends that leadership best support these by taking the following steps:

1) Identify and secure physical site/building for one housing navigation center in Central Jefferson County and one in North Jefferson County using the building specifications listed below. This includes evaluating and supporting needed zoning waivers.
2) Assist in identifying and securing capital and operations funding to acquire/lease, rehab, operate site.
3) Provide leadership and support with community conversations / public hearings regarding navigation centers

Navigation Center Site Specifications:

	Option A (smaller scale)	Option B (larger scale)
Potential building types	Buildings purposed for similar use. Minor rehab may be needed.	Churches, group residential, commercial space. Possible motel/hotel if congregate space
Approx. Total Indoor Space	3,600 ft^2	10,250 ft^2
Sleeping Areas	Sleeping space for 15 people (1200 ft^2) - 10 beds/units for medical recuperation (hospital transition) - 5 beds/units for bridge housing (secured housing, waiting for move-in) Community space overflow sleeping area capacity of 10 people.	Sleeping space for 45 people (3176 ft^2) - Non-congregate units: (for medical recuperation /hospital transition) 4 non-congregate shared units, capacity 8 people. (800 ft^2) - Men's congregate space: 20 beds (1320 ft^2) - Women's congregate space: 16 beds (1056 ft^2) Community space serves as overflow sleeping area during severe weather, space for 20 cots.
Shelter Guest Living Spaces	n/a	1 women (350 ft^2) 1 men (350 ft^2)
Community Space (public day resource center; severe weather overflow)	Fits up to 25 people (1200 ft^2)	Capacity 70 people (3600 ft^2)
Kitchen	Communal kitchenette (100 ft^2)	Commercial kitchen (300 ft^2)
Laundry	2 stackable washer/dryer (50 ft^2)	4 stackable washer/dryer (100 ft^2)
Bathrooms (toilets & showers)	- Shelter guests – 2 men, 2 women. 1 ADA accessible restroom (150 ft^2)	- Men's dorm area- 3 showers & 3 toilets, 1 ADA accessible (225 ft^2) - Women's dorm area- 3 showers & 3 toilets (225 ft^2)

	- Community room- 2 public toilets & showers, 1 ADA accessible (100 ft^2)	- Non-congregate units – 2 restrooms (100 ft^2) Community room – 3 restrooms & 3 showers (225 ft^2)
Private Meeting Rooms (co-located service providers, case management meetings)	3 private offices (300 ft^2) 2 small group meeting room (300 ft^2)	6 private offices (600 ft^2) 2 larger group meeting rooms (600 ft^2)
Storage space (for employment, medical appointments, shelter guests)	10 – 6X3X4 ft storage units outdoors (72 cubic ft) Secured access	20- 6X3X4 ft. storage units (72 cubic ft) 10- 3X2X3 ft. storage units (18 cubic ft) Secured access
Staff offices	2 staff offices (200 ft^2)	4 staff offices (400 ft^2)
Outdoor recreation space (smoking, etc)	Secured/fenced courtyard (min. 350 ft^2)	Secured/fenced courtyard (min. 750 ft^2)

Other general requirements of sites:
- Sites should be within one half mile of food and bus services so that persons can easily pursue employment opportunities, medical and other necessary appointments.
- Utility connection points available
- Reliable internet connection
- ADA accessibility in bathrooms, laundry, kitchen, dormitories
- 24-hour resident access and onsite management staff
- Fire considerations:
    - Within 400 ft. of fire hydrant (verify with fire code)
    - Dorms must have 2 exits (verify with fire code)

Examples of possible buildings that may be converted into navigation center
Buildings already purposed/zoned for group living, church-related properties[xii], motels/hotels[xiii], former schools[xiv], modular units on vacant lots, unused government buildings, former medical offices/facilities, office buildings, warehouses, empty parking lots, and vacant big box or other commercial stores.[xv]

Funding Sources
Several private and public funding sources exist to support capital and operations expenses for the navigation center or family sheltering model. Funds would be needed for site acquisition/lease, possible renovations and operating expenses.

Source	Use	Local administration
American Rescue Plan Act	Site acquisition, lease, rehab, TBD	Jefferson County Lakewood Arvada

Community Development Block Grant (CDBG) and CDBG-Coronavirus (CDBG-CV)	Site acquisition, lease, rehab	Jefferson County Lakewood Arvada
Community Services Block Grant (CSBG)	Operations, services	Jefferson County
City and County General Funds	Flexible	All cities, County
Emergency Solutions Grant (ESG)	Shelter operations and services, street outreach Rapid re-housing, homelessness prevention – temp. rental assistance & services	State Division of Housing (DOLA- DOH) Metro Denver Homeless Initiative (MDHI)
Section 811 Non-Elderly and Disabled Vouchers	Permanent housing vouchers*	Foothills Regional Housing
Continuum of Care (CoC) Program	Permanent supportive housing vouchers*	Various metro providers, accessed through One Home
State Housing Vouchers	Permanent supportive housing vouchers*	State Division of Housing
Foundations: - Community First Foundation - Colorado Health Foundation - Daniels Fund	Flexible	Foundations
Hospitals	Flexible, per diem hospital transition beds (operations)	TBD

*funding source to assist in transitioning from navigation center to permanent housing

Budget Estimate for Navigation Center

Annual Budget	Option A: Small Navigation Center (capacity overnight 25, day 35) – 3600 ft²	Option B: Large Navigation Center (capacity overnight 65, day 75)- 10,000 ft²
Personnel		
Operations Staff (Option A: 7 FTE, Option B: 8 FTE, 4 PTE)	$340,000.00	$450,000.00
Staff Training & Development	$3,500.00	$5,000.00
Total Salary:	$343,500.00	$455,000.00
Fringes @ 33%	$113,355.00	$150,150.00
Total Personnel	**$456,855.00**	**$605,150.00**
Operations		
Lease	$15,180.00	$46,000.00
Food (one meal/day)	$34,000.00	$100,000.00
Supplies (office)	$3,500.00	$5,500.00
Insurance	$5,000.00	$14,000.00
Utilities (water, gas, electricity, trash removal, internet, phone)	$5,000.00	$15,000.00
Janitorial	$0.00	$10,800.00
Property Maintenance	$15,000.00	$30,000.00
Postage	$1,000.00	$2,000.00
Pest Control	$2,000.00	$4,000.00
Client Transportation	$10,000.00	$20,000.00
Computers	$4,800.00	$7,200.00
Mileage	$3,600.00	$5,500.00
Client & Staff Clearances	$2,500.00	$5,000.00
Diversion & Housing-related costs (security deposits, rental assistance, moving)	$40,000.00	$60,000.00
Indirect Costs (10% of personnel)	$45,685.50	$60,515.00
Contingency 10%	$62,894.05	$94,466.50
Total Operations	**$172,085.50**	**$339,515.00**
Total Personnel & Operations	**$628,940.50**	**$944,665.00**

Acquisition & Rehab		

Acquisition Motel (perm. housing)	$2,000,000.00	Purchase of 2 vintage motels off Colfax. One has 23 rooms, asking $3million. The other has 18 rooms, asking $2million*
Acquisition Church (navigation center)	$1,000,000.00	Church in Lakewood with big open space, remodeled in 2007, 7,000 SF, sprinkler and kitchen. *
Lease Warehouse	Lease flex warehouse space under 10,000 sf. Upper range of lease costs is $20.00 per rentable sf (rent plus common area charges - triple net lease).*	
Renovation	Ranges from $100-200 per sf, depending on building and type/extent of remodel*	

*Basis for Estimate: high level survey, no inspection of properties done. Also, zoning requirements vary and would affect process and timing going forward.

Budget estimates based on following budgets: Denver protective action shelters, Jefferson County's non-congregate shelter, The Rufuge (Broomfield), and The Rising (Arvada).

[i] Dennis Culhane, "Testing a Typology of Family Homelessness Based on Patterns of Public Shelter Utilization in Four U.S. Jurisdictions: Implications for Policy and Program Planning," 2007
[ii] Housing First https://endhomelessness.org/what-housing-first-really-means/
[iii] Colorado Coalition for the Homeless Non-COVID-19 Respite Care https://www.coloradocoalition.org/respite
[iv] Factors associated with substance use among homeless young adults https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2856116/
[v] Mortality Among Unsheltered Homeless Adults, 2018
[vi] What is a Crisis Response System? https://endhomelessness.org/ending-homelessness/solutions/crisis-response/
[vii] Shelter Diversion: A best practice to prevent homelessness. https://www.strategiestoendhomelessness.org/shelter-diversion-a-best-practice-to-prevent-homelessness/
[viii] https://endhomelessness.org/wp-content/uploads/2017/04/Emergency-Shelter-Role-of-Shelter_Webpage.pdf
[ix] Colorado: Weld County Housing Navigation Center, Adams County Housing Navigation Center
[x] Hayward Housing Navigation Center
[xi] San Diego Navigation Center
[xii] Proposal to convert St. Paul convent into homeless shelter: https://kstp.com/news/proposal-to-convert-former-st-paul-convent-into-shelter-for-families-experiencing-homelessness-under-consideration/6022892/

[xiii] Fusion Studios: CCH converts hotel into housing for homeless individuals. https://denverite.com/2020/01/22/practically-instant-housing-this-was-a-hotel-now-its-a-place-for-people-whove-been-trying-to-find-a-place-to-live-in-denver/

[xiv] Shuttered Newark school building now becoming a homeless shelter. https://www.nj.com/essex/2021/02/this-newark-school-building-was-shuttered-in-2012-now-its-becoming-a-homeless-shelter.html

[xv] Plan for converting vacant big-box stores into housing for homeless individuals. https://www.designboom.com/architecture/ktgy-vacant-big-box-stores-housing-for-homeless-10-25-2018/