| Monthly Objectives | |
|---|--|
| Plan Objectives | Actual Outcomes |
| | |
| | |
| Transition MAC activities to Performance Evaluation Technical Sub-Committee of Washington | |
| County CoC Governance structure - Review Racial Equity data and 24-25 workplan | Complete |
| | Case Conferencing taking place bi-weekly. 166 HH with shelter stays over |
| Housing exit plan for shelter long stayers. | 100 days - 42% enrolled in housing program |
| | |
| Establish Annual work plan informed by system performance measures | Draft work plan in process and shared with Continuum of Care and MAC |
| | |
| Increase housing placements | 45 Housing Placements in May |

Challenges

People are staying longer in shelter waiting to access housing. This reduces access to shelter and increases the length of time that people experience unsheltered homelessness as they wait for shelter beds.

Providers are seeing icreased substance use and behavioral health challenges as weather warms. More harm reduction supplies and activities and better access to treatment and other behavioral health supports are needed. The process for accessing both substance use treatment and behavioral health services requires a significant amount of navigation, planning and organization that is challenging for individuals experiencing unsheltered homelessness.

Staff retention and professional development in provider organizations continues to create challenges and delay the full utilization of contracted capacity system-wide. A stable and skilled workforce is neccary to deliver quality services in all program areas.

Serving households living in vehicles is a challenge for our system because these households tend to move around and are less identifiable than other unsheltered populations. Broader availability of access centers, more focused outreach, and strategic communication with law enforcement may improve engagement of these households.

Highlights

Positive media coverage helps get stories of success into public awareness: KOIN Story about housing careers program https://www.koin.com/local/washington-county/washington-county-paid-internship-changed-life-completely/, KATU Story about access centers:https://katu.com/news/local/washington-county-says-theyve-reduced-over-a-third-of-unsheltered-homelessness, KGW story about Heartwood Commons: https://www.kgw.com/article/news/investigations/a-washington-county-hotel-turned-housing-facility-is-both-helping-and-falling-short-of-expectations/283-36259bfb-d126-4b78-a421-7db0065ccb15, KGW highlighted FPTVs Tigard shelter: https://www.kgw.com/article/news/local/solutions/shelter-helps-boost-up-homeless-students-washington-county/283-803019fc-6bd9-4cf8-8ce4-d064b8a24afd

Continued progress in case conferencing leading to higher quality matches in Coordinated Entry and increasing collaboration across shelter and housing programs resulting in a 5% decrease in shelter long stayers.

Needs from the State (policy, additional assistance...)

Health system alignment: Improved access to medical services. For example, a rapid response team or direct contact within ODHS would help our system manage urgent health needs especially for elderly and disabled participants in our homeless services system.

Health system alignment: More flexibility in Medicaid eligibility determinations. This would allow engagement services from Behavioral Health system for eligible members who are not yet qualified for Medicaid services.

Health system alignment: Higher needs elderly participants who can not live independently, even with enriched supportive services. Our system lacks adequate access or availability to long-term care facilities and of these kinds of health system 'beds'.