

# Strategy for Addressing Homelessness Among Families with Children (FwC Strategy)

2023-2028



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- 1. INTRODUCTION.** This document reflects a coordinated county-wide effort to address the explosive rise in families with children (“FwC”) experiencing homelessness between 2020-2022. After achieving “functional zero” (less than 20 households) in 2018, the post-pandemic number of families with children in the Housing Interest Pool skyrocketed to over 200 households at the end of 2022 (*Source: Whatcom Homeless Service Center*). Many of these families are being temporarily sheltered in hotel or motel rooms, which don’t provide a functional or supportive environment for long-term living, especially for children. As a result of both rising rents and a lowered availability of permanent housing options, duration of these hotel & motel stays increased significantly over this same period: from an average of 30 days in 2020 to over 123 days by the end of 2022 (*Source: Whatcom Homeless Services Center*). In response, City of Bellingham and Whatcom County staff reached out to service providers throughout Whatcom County, led by the Opportunity Council and Lydia Place, to identify needs and strategies with the goal to **return the number of families experiencing homelessness to functional zero.**

This issue cannot be solved by one agency alone: the recommended actions will be undertaken by all partner agencies as identified in the **Action Matrix**. The Action Matrix includes a list of actions, timeline, and responsible organization(s). The FwC strategy is dynamic, and should evolve as circumstances warrant. Communication around these actions is also important for the community to understand and support prioritized expenditures of public resources on these needs.

The following **lenses** are primary for approaching all the actions in this document:

- Prioritize **racial equity** and awareness of disproportionate impacts.
- Maintain a **trauma informed** focus – providers and partners must have the training and approach services through this lens.
- Ensure all actions are **aligned with the work of parallel partners**, including Healthy Whatcom’s Community Health Improvement Plan (CHIP), Whatcom County’s Strategic Plan to End Homelessness, Racial Equity Commission, and other cross-over efforts to address community health and housing.

Additionally, all partners agree that continued advocacy is critical to drive policy changes and spur program funding from the State and Federal government. The lack of safe, stable, and truly affordable housing is widely due to systemic issues and larger economic trends beyond the community scope. Though this document outlines a strategy targeting initiatives that are within the control of local stakeholders (City and County government, local community service providers, regional philanthropists), it is important to continue identifying opportunities to advocate for critical Federal and State resources that would be pivotal in supporting families with children experiencing housing insecurity and entering into homelessness.

**2. STATEMENT OF NEED.** As mentioned in the introduction, the increase in families with children experiencing homelessness has been exponential. The Whatcom Homeless Service Center highlights the following factors that have contributed to this issue:

**Homelessness overall is on the rise** –The number of individuals experiencing homelessness in Whatcom County rose from 700 in 2019 to 832 in 2022. This correlates to a 41% increase in rent between 2018-2022 (*Source: City of Bellingham Annual Market Rent Study*).  
When rents go up, so does homelessness.

**Families have been hit hardest** – In addition to the drastic increases in rent, low-income families with children had a more difficult time bouncing back from the impacts of the COVID-19 pandemic the way more resourced families were able to due to loss of employment, childcare constraints, disproportionate health impacts from the pandemic, a technology divide, cost escalation of basic needs, and myriad of other challenges. Even with expanded services, there are not enough resources to keep up with the increasing needs.

**Hotels and motels are the main family shelter in Whatcom County** – In the past, service providers and funding partners made a commitment to keep homeless children from living in cars. This led to interventions to place families in hotel or motel rooms for the short-term. This was feasible when the number of families experiencing homelessness was at functional zero but is no longer tenable now that significantly more families are in need. Hotel and motel stays do not provide the types of services or amenities needed to address the significant trauma of becoming homeless or the necessary wraparound services to promote healing, recovery and relocation.

**When shelter is added, it is used** – Emergency shelter measures are ardently needed in the absence of adequate prevention measures and permanent housing options. Research shows that in recent years more families are entering into homelessness than are exiting homelessness; in 2022, 320 families applied for services, and only 159 families were referred to a program. When shelter options are added to the community that specifically serve families, they are quickly claimed by the backlog of families needing crisis response supports.

**Needs are increasing** – In addition to the immediate need for shelter, the need for mental and behavioral health supports and wraparound services have increased in recent years.

**3. STRATEGY DEVELOPMENT.** After two years of increasing resources in response to the growing demand for services, in 2022, staff from the City of Bellingham reconvened partners at Whatcom County and experts from Lydia Place and Opportunity Council to analyze data and address the new reality, acknowledging new strategies were needed for the scale of the issue. Through data collection and discussions with other service agency partners, this work group began defining the problem and developing solutions. This culminated in a draft strategy document, which was vetted with approximately 40 stakeholders at a workshop held on January 25, 2023. The purpose of the workshop was to confirm gaps in services and whether the draft strategies would address those gaps, as well as strengthen the network of service providers. Participants also prioritized the most important actions. This prior work is the foundation of this strategy document.

**4. IMPLEMENTATION OF STRATEGY.** This strategy document will serve two purposes. The first will be to outline priorities for community funders to support, and on which service providers can focus. The second portion of this document, as drafted in the Action Matrix, will serve to outline a list of actions, timeline, and responsible organization(s). The Action Matrix will hold funders and service providers accountable, and encourage community partners to follow the same suite of recommendations toward a shared goal.

## 5. FAMILIES WITH CHILDREN (FWC) STRATEGY

The strategies are organized into 3 categories: Prevention, Crisis Response and Stabilization.

Details regarding timing and organizational responsibilities for actions are listed in the Action Matrix, Section 6.

**Short-term = 1-2 years, Mid-term = 2-5 years, and Long-term = 5+ years**

CATEGORY: PREVENTION	GOAL: PREVENT FAMILIES FROM ENTERING INTO HOMELESSNESS	TIMING
<b>Strategy P1.</b> Examine broader data to better understand the needs and barriers of families and what is compelling their entry into homelessness. Inform programs and strategies to address these needs and barriers.		
Action P1.1	Survey families to learn what prevention strategies may have prevented their entry into homelessness.	Short-term
Action P1.2	Support the Whatcom Homeless Service Center (WHSC) in collecting, reviewing, and identifying turnaway data of families seeking services.	Short-term
Action P1.3	Bring in a third-party consultant to analyze community data and propose system solutions to match needs of community facing homelessness.	Short-term
<b>Strategy P2.</b> Engage in adaptive analysis identifying where gaps exist between needs and available services.		
Action P2.1	Establish coordination opportunities with school districts to ensure that liaisons are empowered to distribute resources.	Short-term
Action P2.2	Implement semi-annual meetings between funders (City, County, and independent nonprofit foundations) to coordinate on funding opportunities and needs.	Short-term
Action P2.3	Implement semi-annual community meeting to serve as an opportunity for funders, providers, and other stakeholders to share space and coordinate on strategies.	Short-term
Action P2.4	Utilize flex fund expenditures to gather data about needs and develop systemic solutions to address on a larger scale.	Mid-term

CATEGORY: PREVENTION	GOAL: PREVENT FAMILIES FROM ENTERING INTO HOMELESSNESS	TIMING
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**Strategy P3.** Expand prevention efforts and invest in alternative prevention and diversion services that can deliver low-cost supports to families facing homelessness.

<b>Action P3.1</b>	Implement and support alternative resources (such as Housing Navigator) for families who do not qualify for the Housing Interest Pool.	Short-term
<b>Action P3.2</b>	Expand educational opportunities on tenant's rights regarding evictions, rent increases, and other changes to lease agreements.	Short-term
<b>Action P3.3</b>	Expand program opportunities to support prevention and diversion services for families facing housing instability.	Short-term

**Strategy P4.** Engage in advocacy opportunities at the State- and Federal-level to help compel the development of affordable housing for families with children.

CATEGORY: CRISIS RESPONSE	GOAL: ENSURE A FAMILY'S EXPERIENCE WITH HOMELESSNESS IS RARE, BRIEF (less than 90 days), NON-RECURRING AND INFLECTS AS LITTLE TRAUMA AS POSSIBLE	TIMING
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**Strategy CR1.** Develop infrastructure, bolster coordination, and deliver immediate supports to improve crisis interventions for families experiencing homelessness amongst unprecedented need.

Action CR1.1	Adapt system for funding shifts from pandemic levels, including a shelter coverage plan.	Short-term
Action CR1.2	Apply for state funding for added interim facilities.	Short-term
Action CR1.3	Implement expectations supporting increased communications between service providers and community stakeholders.	Short-term
Action CR1.4	Invest in capacity building measures to support service delivery outcomes, increase wraparound supports, and bolster workforce supports.	Mid-term

**Strategy CR2.** Ensure maximum coordination between providers to increase referral speed and provide immediate access to services.

Action CR2.1	Improve real-time data between funders and agencies to support proactive planning.	Short-term
Action CR2.2	Support efficient referrals from crisis-based services by accelerating system flow-through, promoting progressive engagement, and including service providers in a team-based referral process.	Mid-term
Action CR2.3	Broaden crisis response program capacity (across entire system) to allow for family transfers to an intervention more appropriate to support family needs (i.e., programs that support low-needs families, vs. programs to support high-needs families).	Long-term

**Strategy CR3.** Improve relationships between providers and hotel/motel owners.



CATEGORY: CRISIS RESPONSE	GOAL: ENSURE A FAMILY'S EXPERIENCE WITH HOMELESSNESS IS RARE, BRIEF (less than 90 days), NON-RECURRING AND INFLECTS AS LITTLE TRAUMA AS POSSIBLE	TIMING
<b>Action CR3.1</b>	Continue supporting Hotel/Motel Coordinator position through WHSC.	Short-term
<b>Action CR3.2</b>	Provide training and education for hotel/motel staff.	Short-term
<b>Action CR3.3</b>	Utilize scattered hotel/motel sites to avoid overwhelming staff resources at a single facility.	Short-term
<b>Strategy CR4.</b> Improve nutrition for families currently staying in hotels and motels through partnerships with other agencies.		
<b>Action CR4.1</b>	Explore partnerships and areas where existing programming can be bolstered to support the nutritional needs of families in motel stays.	Short-term
<b>Strategy CR5.</b> Improve logjams and system constraints to ensure that the emergency sheltering system in place for families is working in the most efficient, supportive way possible.		
<b>Action CR5.1</b>	Improve intake and coordinated entry referrals to ensure that program matches made through coordinated entry are aligned with program requirements.	Short-term
<b>Action CR5.2</b>	Increase case management support capacity and ensure clients are referred to a program within 2 weeks of shelter placement to support them being sufficiently housing ready and able to exit emergency shelter efficiently.	Short-term
<b>Action CR5.3</b>	Increase community preparedness for launching severe weather short-term sheltering options.	Short-term
<b>Strategy CR6.</b> Build agency capacity and utilize partnerships to increase shelter spaces with appropriate staff and resources.		

CATEGORY: CRISIS RESPONSE	GOAL: ENSURE A FAMILY'S EXPERIENCE WITH HOMELESSNESS IS RARE, BRIEF (less than 90 days), NON-RECURRING AND INFLECTS AS LITTLE TRAUMA AS POSSIBLE	TIMING
Action CR6.1	Support LMM in building new Base Camp facility space to specifically serve families.	Short-term
Action CR6.2	Increase domestic violence shelter capacity.	Mid-term
<b>Strategy CR7.</b> Explore creative and alternative partnerships to deliver emergency supports.		
Action CR7.1	Support the renewal of HSSP program, which embeds case managers alongside school family liaisons and links households to housing resources.	Short-term
Action CR7.2	Establish Working Groups to identify partnership opportunities across other categories of supports (carceral supports, family supports, drug treatment supports) and to coordinate on resources.	Short-term
Action CR7.3	Investigate opportunities to bolster and expand weekend supports.	Short-term
<b>Strategy CR8.</b> Adequately staff case management to align with needs of families with children to ensure programs function efficiently.		
Action CR8.1	Add 1 FTE to Housing Pool family case management, to allow for additional supports for families as they prepare for housing referrals.	Short-term
Action CR8.2	Support case management staff through the funding of mental health and wraparound services and ensure that additional training opportunities are made available to empower staff.	Mid-term

CATEGORY: CRISIS RESPONSE	GOAL: ENSURE A FAMILY'S EXPERIENCE WITH HOMELESSNESS IS RARE, BRIEF (less than 90 days), NON-RECURRING AND INFLECTS AS LITTLE TRAUMA AS POSSIBLE	TIMING
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**Strategy CR9.** Provide more robust flexible funding to support basic needs for families.

Action CR9.1	Provide direct assistance funding to support needs for families living in motels (including family enrichments, daily expenses, laundry, transportation, etc.).	Short-term
Action CR9.2	Provide funding to cover move-in related costs beyond rental subsidy such as gas vouchers to view units, application fees, money to apply for birth certificates/IDs/acquire other necessary documentation, etc.	Short-term
Action CR9.3	Add Enrichment Coordinator position.	Short-term
Action CR9.4	Ensure that funders are coordinated and maintaining consistent expectations across organizations on the use of flex funds.	Short-term

**Strategy CR10.** Explore additional interim housing and emergency shelter options for families that are trauma-informed and shift away from a hotel/motel-focused model.

## CATEGORY: STABILIZATION

**GOAL: ENSURE FAMILIES EXITING HOMELESSNESS CAN ACCESS STABLE AFFORDABLE HOUSING AND APPROPRIATE PERMANENT HOUSING PROGRAMS**

**TIMING**

### Strategy S1. Help families prepare for eligibility requirements for permanent housing referrals.

<b>Action S1.1</b>	Ensure that case managers are equipped to work quickly and efficiently to prepare families be move-in ready (such as helping with move-in paperwork, assisting in filling out applications, securing ID's, etc.).	Short-term
<b>Action S1.2</b>	Support programs and initiatives that help to address barriers (past criminal history, settling past arrears) for families seeking permanent housing.	Mid-term

### Strategy S2. Increase affordable housing available to families' exiting homelessness.

<b>Action S2.1</b>	Increase family-specific homeless housing set-asides in multifamily projects receiving City/County funding.	Short-term
<b>Action S2.2</b>	Continue existing evidence-based programs with effective outcomes like Rapid Rehousing and permanently affordable housing options in the community.	Short-term
<b>Action S2.3</b>	Offer temporary rental assistance to severely cost-burdened families with young children.	Mid-term

## 6. ACTION MATRIX

### Key of Roles and Responsibilities

**L = Lead** party responsible for initiating and management of project.

**C = Convener** responsible for bringing parties together and initiating project; party will not be responsible for management of project through project lifespan.

**P = Participant** responsible for supporting and carrying out tasks for the project.

**F<sup>1</sup> = Funder** responsible for partial or full financial support of existing programs or new initiatives.

**R = Reviewer** responsible for evaluating project efficacy and providing feedback to leads, participants, and funders.

### Key of Action Items Timeline

**X = Timing** of when action item is expected to be initiated

Actions				1-2 Years	3-5 Years	5-10 Years	City	County	OC – WHSC	OC – Comm. Svcs	Lydia Place	DVSAS	Other	Bham SD	Philanthropy	Interfaith	LMM
Prevention																	
P1.1	Survey families to learn more about prevention strategies that may have prevented their entry into homelessness.	X					P	C	P	P	P	P		P			
P1.2	Support the Whatcom Homeless Service Center (WHSC) in collecting, reviewing, and identifying turnaway data of families seeking services.	X					F	F	L	P							P

<sup>1</sup> Funder commitments vary according to funding body. Please see a breakdown of funding commitment by organization/agency:

City of Bellingham: initiatives wherein the City of Bellingham has been identified as funder have been or will be incorporated into existing City Housing and Human Services contracts or have been or will be approved by City Council to function as a standalone contract.

Whatcom County: initiatives wherein Whatcom County has been identified as funder have been or will be incorporated into existing County Council-approved contracts or have been or will be earmarked as initiatives to prioritize funding toward through the newly approved Childrens Levy.

Actions					City	County	OC – WHSC	OC – Comm. Svcs	Lydia Place	DVSAS	Other	Bham SD	Philanthropy	Interfaith	LMM
P1.3	Bring in a third-party consultant to analyze community data and propose system solutions to match needs of community facing homelessness.	X			P/F	P	P								
P2.1	Establish coordination opportunities with school districts to ensure that liaisons are empowered to distribute resources.	X			P	P <sup>2</sup>		P	P			L		P	
P2.2	Implement semi-annual meeting between funders (City, County, and independent nonprofit foundations) to coordinate on funding opportunities.	X			P	C							P	P	
P2.3	Implement semi-annual community meeting to serve as an opportunity for funders, providers, and stakeholders to share space and coordinate on strategies.	X			C	P	P	P	P	P			P	P	
P2.4	Utilize flex fund expenditures to gather data about needs and develop systemic solutions to address on a larger scale.	X	X		C	R		P	P	P				P	
P3.1	Implement and support alternative resources (such as Housing Navigator) for families who do not qualify for the Housing Interest Pool.	X			F	F/P <sup>3</sup>	L	P	P		P				P
P3.2	Expand educational opportunities on tenant's rights regarding evictions, rent increases, and other changes to lease agreements.	X			P/C	P	L		P		P	P			
P3.3	Expand program opportunities to support prevention and diversion services for families facing housing instability	X			F <sup>4</sup>	F <sup>5</sup> /C	P	L	P	P				P	

<sup>2</sup> Whatcom County may be able to provide funding if incorporated into Healthy Children's Fund (HCF) strategies

<sup>3</sup> Whatcom County may be able to provide funding if incorporated into Healthy Children's Fund (HCF) strategies

<sup>4</sup> The City of Bellingham will allocate \$2mm in HOME-ARP funding to support prevention and diversion programs in the community.

<sup>5</sup> Whatcom County may be able to provide funding if incorporated into Healthy Children's Fund (HCF) strategies

Actions					1-2 Years	3-5 Years	5-10 Years	Crisis Response							
City	County	OC – WHSC	OC – Comm. Svcs	Lydia Place	DVSAS	Other	Bham SD	Philanthropy	Interfaith	LMM					
CR1.1	Adapt system for funding shifts from pandemic levels, including a shelter coverage plan.	X													
CR1.2	Apply for state funding for added interim facilities.	X													
CR1.3	Implement expectations supporting increased communications between service providers and community stakeholders.	X													
CR1.4	Invest in capacity building measures to support service delivery outcomes, increase wraparound supports, and bolster workforce supports.	X	X												
CR2.1	Improve real-time data between funders and agencies to support proactive planning.	X													
CR2.2	Support efficient referrals from crisis-based services by accelerating system flow-through, promoting progressive engagement, and including service providers in a team-based referral process.	X	X												
CR2.3	Broaden crisis response program capacity (across entire system) to allow for family transfers to an intervention more appropriate to support family needs (i.e., programs that support low-needs families, vs. programs to support high-needs families).	X	X	X											
CR3.1	Continue supporting Hotel/Motel Coordinator position through WHSC.	X													
CR3.2	Provide training and education for hotel/motel staff.	X													
CR3.3	Utilize scattered hotel/motel sites to avoid overwhelming staff resources at a single facility.	X													
CR4.1	Explore partnerships and areas where existing programming can be bolstered to support the nutritional needs of families in motel stays.	X													

Actions					1-2 Years	3-5 Years	5-10 Years	OC – Comm. Svcs									
								City	County	OC – WHSC	Lydia Place	DVSAS	Other	Bham SD	Philanthropy	Interfaith	LMM
CR5.1	Improve intake and coordinated entry referrals to ensure that program matches made through coordinated entry are aligned with program requirements.				X			P	L	P	P	P					
CR5.2	Increase case management support capacity and ensure clients are referred to a program within 2 weeks of shelter placement to support them being sufficiently housing ready and able to exit emergency shelter efficiently.				X			P	C/R	P	P						
CR5.3	Increase community preparedness for launching severe weather short-term sheltering options.				X			P	L	P	P						P
CR6.1	Support LMM in building new Base Camp facility space to specifically serve families.				X			P	P								L
CR6.2	Increase domestic violence shelter capacity.				X	X		F	C	P	P	P					
CR7.1	Support the renewal of HSSP program, which embeds case managers alongside school family liaisons and links households to housing resources.				X						L				P		
CR7.2	Establish Working Groups to identify partnership opportunities across other categories of supports (carceral supports, family supports, drug treatment supports) and to coordinate on resources.				X			P	C	P	P	P					P
CR7.3	Investigate opportunities to bolster and expand weekend supports.				X			P									
CR8.1	Add 1 FTE to Housing Pool family case management, to allow for additional supports for families as they prepare for housing referrals.				X			P	P	P	P						
CR8.2	Support case management staff through the funding of mental health and wraparound services, and ensure that additional training opportunities are made available to empower staff.				X	X		P	L	P	P						P



Actions		1-2 Years	3-5 Years	5-10 Years											
					City	County	OC – WHSC	OC – Comm. Svcs	Lydia Place	DVSAS	Other	Bham SD	Philanthropy	Interfaith	LMM
CR9.1	Provide direct assistance funding to support needs for families living in motels (including family enrichments, daily expenses, laundry, transportation, etc.).	X			P	P		P	P			P	P		
CR9.2	Provide funding to cover move-in related costs beyond rental subsidy such as gas vouchers to view units, application fees, money to apply for birth certificates/IDs/acquire other necessary documentation, etc.	X			P/F	P/F		P	P				P	P	
CR9.3	Add Enrichment Coordinator position.	X													
CR9.4	Ensure that funders are coordinated and maintaining consistent expectations across organizations on the use of flex funds.	X			C	L				P			P		
Stabilization															
S1.1	Ensure that case managers are equipped to work quickly and efficiently to prepare families with lower move-in needs (such as helping with move-in paperwork, assisting in filling out applications, securing ID's, etc.).	X				C			P						
S1.2	Support programs and initiatives that help to address barriers (past criminal history, settling past arrears) for families seeking permanent housing.	X	X		P/F	R	P		P						
S2.1	Increase family-specific homeless housing set-asides in multifamily projects receiving City/County funding.	X			L	P/F	P								
S2.2	Continue existing evidence-based programs with effective outcomes like Rapid Rehousing and permanently affordable housing options in the community.	X			F	F/R	P	P	P						

Actions		1-2 Years	3-5 Years	5-10 Years											
					City	County	OC – WHSC	OC – Comm. Svcs	Lydia Place	DVSAS	Other	Bham SD	Philanthropy	Interfaith	LMM
S2.3	Offer temporary rental assistance to severely cost-burdened families with young children.	X	X		P	F <sup>6</sup> /C	P	P						P	

<sup>6</sup> Whatcom County may be able to provide funding if incorporated into Healthy Children’s Fund (HCF) strategies

## **APPENDIX A**

### **ACKNOWLEDGEMENTS**

We wish to acknowledge the staff members and organizations that were integral to the creation of the Strategy for Addressing Homelessness Among Families with Children (FwC Strategy):

#### **Family Systems Solutions Workgroup**

Samya Lutz, City of Bellingham Department of Planning and Community Development  
Katy Sullivan, City of Bellingham Department of Planning and Community Development  
Barbara Johnson-Vinna, Whatcom County Health & Community Services Department  
Chris D'Onofrio, Whatcom County Health & Community Services Department  
Emily O'Connor, Lydia Place  
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Kate Robertson, Lydia Place  
Louis Walbrek, Lydia Place  
Kate Phillips, Lydia Place  
Debbie Paton, Opportunity Council  
Jessica Brown, Opportunity Council  
Lindsay Brewer, Opportunity Council  
Teri Bryant, Opportunity Council  
Melissa Nyberg, Opportunity Council  
Kristina Silverbears, Opportunity Council

#### **Community-wide FwC Strategy Workshop Attendees**

Samya Lutz, City of Bellingham Department of Planning and Community Development  
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Kate Bartholomew, City of Bellingham Department of Planning and Community Development  
Darby Galligan, City of Bellingham Department of Planning and Community Development  
Jennifer Gonzalez, City of Bellingham Department of Planning and Community Development  
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Ann Beck, Whatcom County Health & Community Services Department  
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Adrienne Solenberger, Whatcom County Health & Community Services Department  
Ashley Thomasson, Lydia Place  
Louis Walbrek, Lydia Place  
Greg Winter, Opportunity Council  
Debbie Paton, Opportunity Council  
Jessica Brown, Opportunity Council  
Lindsay Brewer, Opportunity Council  
Teri Bryant, Opportunity Council  
Melissa Nyberg, Opportunity Council  
Kristina Silverbears, Opportunity Council  
Adrienne Renz, Domestic Violence and Sexual Assault Services  
Miranda Morris, Domestic Violence and Sexual Assault Services  
Devin Conolly, Interfaith Coalition  
Hannah Kunde, Interfaith Coalition  
Maria Macpherson, Mount Baker Foundation

Rosie Santos, Bellingham School District  
Emily Humphrey-Krigbaum, Bellingham School District  
Brien Thane, Bellingham Housing Authority  
Riley Sweeney, City of Ferndale  
Heather Flaherty, Chuckanut Health Foundation  
Mauri Ingram, Whatcom Community Foundation  
Kellie-Ann Reichmann, Lighthouse Mission Ministries  
Margaret Vailencour, Lynden Public Schools  
Sierra Gonzales, Kendall Elementary School  
Jami Pittman, Birchwood Elementary School  
Kate Davies, ERC Preschool

## **APPENDIX B**

### **FAMILY SYSTEM GLOSSARY**

#### **General Housing Terms**

**Functional Zero:** the point when a community's homeless services system is able to prevent homelessness whenever possible and ensure that when homelessness does occur, it is rare, brief and one-time.

**The System:** includes Coordinated Entry System, diversion, prevention, individual program performance, and funder direction/guidance until the household can maintain housing independently without system supports.

**Affordable Housing:** housing is considered “affordable” when a household pays no more than 30% of their gross income towards housing, inclusive of utilities.

**Permanent Housing (PH):** a housing that is not time limited and can be subsidized or paid at market rate. PSH and RRH program participants are considered to be in permanent housing and no longer homeless.

**Chronically Homeless:** a subset of the homeless population that has been homeless either for the last 12+ months, or homeless several times over the past three years adding up to 12 months or longer and who have a disability. People who have experienced chronic homelessness are the primary participants in permanent supportive housing projects.

**Crisis Response System:** another term for a community’s homeless crisis response system.

**Victim Service Providers:** organizations whose primary mission is to provide direct services (which may include shelter and/or housing services) to survivors of domestic violence, sexual assault, stalking, trafficking and/or other crimes.

**By and For/Culturally Specific Organizations:** a culturally specific organization means an organization that serves a particular cultural community and is primarily staffed and led by members of that community. By and For organizations are organizations that serve and are substantially governed by marginalized populations.

#### **Whatcom County Housing System terms**

**Coordinated Entry (CE):** a system that allows households experiencing homelessness to have a single point of entry for all participating agencies. Participation is determined by the Department of Commerce according to funding type. The single point of entry eliminates the need to visit and register with several agencies across the county. The Housing Pool identifies households through a housing first approach for referral to agencies that provide services that they are interested in and eligible for.

**Coordinated Entry Access Point:** each community decides “access points” either virtual or physical to help individuals quickly access services and get into coordinated entry. In Whatcom County, there are several access points across participating agencies.

**CE Governing Entity/Body/Board (CEGB):** the structure of The Community CE Governing Entity may be different in each community. It could be a board, a CE Lead Agency, the CHG Lead Grantee, etc. The Community CE Governing Entity will advise on its structure, decision-making process, advisory processes, etc. In Whatcom this is the Whatcom County Health Department and Opportunity Council, with other participating organizations.

**Coordinated Entry Participating Agencies:** organizations that implement programs that serve populations experiencing and/or at risk of homelessness and populate their programs primarily through referrals from Coordinated Entry.

**Housing Pool (HP):** the “Housing Pool” is a Coordinated Entry database that identifies households experiencing homelessness for referrals to programs. Households in the housing pool are prioritized by program availability, eligibility, housing needs, barriers, and vulnerability.

**Referral:** when participating agencies identify a program opening, Coordinated Entry uses the Housing Pool to determine the most appropriate household based on program criteria and prioritization factors.

**Harm Reduction:** a set of practical strategies and ideas aimed at reducing harm associated with drug use.

**Trauma Informed:** an overarching structure and treatment attitude that emphasizes understanding, compassion, and responding to the effects of all types of trauma.

**Housing First:** an approach to quickly and successfully connect individuals and families experiencing homelessness to permanent housing without preconditions and barriers to entry, such as sobriety, treatment or service participation requirements. Asserts that everyone is “housing ready” and that programs and providers must be “consumer ready.”

**Housing Readiness:** the requirement that certain conditions must be met before an individual or household can be granted housing.

**Program Criteria Preparation:** preparing households for programs in this context means helping set them up for a successful application and tenancy process, including gathering documentation.

**Housing Stability:** a household is able to reside in a unit for the foreseeable future with either the current level of support they are receiving or a reduced level of support.

**High Needs:** households requiring a high level of services to secure and maintain housing stability.

**High Barriers:** the challenges that must be overcome for a household to exit homelessness. Typically these include historical factors like past rental debt, bad/no credit history, prior evictions, or a criminal history, and they could also include ongoing behavioral challenges that require a high level of ongoing services.

**Vulnerability:** refers to how at-risk or compromised a household has become within their life domains.

**Life Domains:**

- Mental health, wellness & cognitive functioning
- Physical health and wellness
- Medication management
- Substance use
- Experience of trauma/abuse
- Risk of harm to self or others
- Involvement in higher risk and/or exploitative situations
- Interaction with emergency services
- Legal involvement
- Managing tenancy
- Personal administration and money management
- Social relationships and networks
- Meaningful daily activities
- Self-care and daily living skills
- History of housing and homelessness
- Parental engagement
- Stability/resiliency of the family unit
- Needs of children
- Size of family
- Interaction with child protective services/family court
- Racial and cultural disparities

**Prioritization:** The Coordinated Entry system prioritizes households for program openings based on:

- Program eligibility and availability
- Length of time homeless
- Vulnerability
- Domestic violence
- Unmet health needs and/or significant challenges or functional impairments, including physical, mental, developmental, or behavioral health disabilities, regardless of time of disability, which require a significant level of support in order to maintain stability (does not need to be documented or have a formal diagnosis)
- Threats to safety, including vulnerability to victimization, physical assault, trafficking or sex work
- Language/limited English proficiency

**Language Access Plan (LAP):** a document that outlines the steps that the CE system will take to ensure effective communication with people who are non-English speaking or have limited English proficiency

**Telecommunications Devices for the Deaf (TDD):** technology including TTY (TeleTYpe) and TT (Text Telephone) for individuals who are deaf or hard of hearing.

## **Tools to Assess Vulnerability**

**Vulnerability Index-Service Prioritization Decision Assistance Tool (VI-SPDAT):** a tool used to help determine the level of vulnerability of households for housing services based on brief client report.

**Transition-Aged Youth Vulnerability Index-Service Prioritization Decision Assistance Tool (TAY-VI-SPDAT):** a version of the VI-SPDAT helps determine the level of vulnerability of young adults aged 18-24 for housing services based on brief client report.

**Service Prioritization Decision Assistance Tool (SPDAT 4.0):** a version of the SPDAT was developed as an in-depth assessment tool considering multiple sources of information to prioritize program referrals. The SPDAT tools are also designed to help guide case management and improve housing stability outcomes. This assessment may only be completed by those who have received proper, up-to-date training.

## **Housing Interventions**

**Diversion:** a brief service that helps households creatively resolve housing crises in lieu of engagement in the Coordinated Entry housing system with minimal/one-time financial assistance and/or support services.

**Prevention:** a program that may provide financial assistance or other support services for households in imminent risk of eviction or loss of their primary nighttime residence.

**Emergency Shelter (ES):** any type of site that shelters households on a temporary basis. Some shelters are reserved for specific populations, such as households fleeing domestic violence or for minors, while others are available for any household seeking shelter. People using emergency shelters, regardless of their length of stay, are still considered to be homeless.

**Transitional Housing (TH):** a subsidized housing arrangement that is time limited. Unlike RRH, transitional housing tenants are expected to move out of the transitional unit at the end of the program. While in TH, households are still considered to be homeless.

**Rapid Re-Housing (RRH):** a housing intervention that provides medium-term rental assistance and services. Households receiving rapid re-housing (RRH) are supported in developing housing stability and take over rent payments at the completion of the program. These tenants have leases with their landlords and may remain in the same housing unit after the subsidy ends.

**Permanent Supportive Housing (PSH):** a housing intervention combining housing assistance (e.g., long-term leasing or rental assistance) with ongoing case management support to assist households in achieving housing stability. PSH is not time limited, may provide on-site staff support, and is offered either in single-site facilities or in scattered-site locations that may be integrated into neighborhoods.

## **System Governance**

**Department of Housing and Urban Development (HUD):** a department of the federal government responsible for national policy and programs that address America's housing needs, that improve and develop the nation's communities, and enforce fair housing laws. HUD is a funder for many housing subsidy and service programs delivered locally.

**Continuum of Care (CoC):** a regional or local planning body that coordinates housing and services funding for homeless families and individuals. Continuum of Care (CoC) is a HUD designation for a jurisdiction that receives federal grants for housing programs. In Washington State, the five most populous counties (King, Snohomish, Pierce, Spokane, and Clark) constitute



their own CoCs, while the rest of the counties (including Whatcom County) form a sixth CoC called the Balance of State. The local CoC in Whatcom County is the Whatcom County Coalition to End Homelessness.

**Washington State Department of Commerce (Commerce):** the Washington State Department of Commerce is the primary state-level funder for housing assistance in Washington State. There are three offices in particular that support people experiencing homelessness, the Office of Family and Adult Homelessness, the Office of Supportive Housing, and the Office of Homeless Youth. Commerce also provides guidelines for and governs Coordinated Entry and is the HMIS administrator and data manager, including the Point in Time Count.

**Washington State Balance of State Continuum of Care Steering Committee (BoS CoC Steering):** Commerce oversees the Washington State Balance of State Continuum of Care (BoS CoC) has a steering committee and governance structure to oversee policies, procedures and compliance with HUD. Voting members in this group are based on county population. In Whatcom, this is the Whatcom County Health Department and Opportunity Council.

**Homeless Management Information System (HMIS):** a database that keeps data about housing services and clients. Information from Whatcom County is connected to other counties and used by Commerce and HUD to analyze performance of each county and CoC. Typically data entry is required of agencies that provide housing services funded by local, state or federal funds.

**Consolidated Homeless Grant (CHG):** funding source through the Department of Commerce, provides resources to fund homeless crisis response systems to support communities in ending and preventing homelessness. Grants are made to local governments and nonprofits and guidelines are issued by Commerce.

**Emergency Solutions Grant (ESG):** the purpose of the Emergency Solutions Grants (ESG) program is to assist individuals and families quickly regain stability in permanent housing after experiencing a housing crisis or homelessness. This funding comes from HUD to the Washington State BoS CoC.

**Housing and Essential Needs (HEN):** the Housing and Essential Needs program provides essential needs items and rental assistance for individuals who are determined eligible by Washington State Department of Social and Health Services (DSHS). This program operates under the CHG guidelines.

**CHG Lead Grantee:** the entity ultimately responsible for ensuring that CE is operational at the community level and ensures that funds are distributed and spent according to the Commerce guidelines. The CHG Lead Grantee has final approval for community based CE and Commerce funding decisions. In Whatcom County this is the Whatcom County Health Department.

**Whatcom Homeless Service Center (WHSC):** a department of Opportunity Council that is contracted by the Whatcom County Health Department to administer Coordinated Entry in Whatcom County, facilitates the Whatcom County Coalition on Ending Homelessness, operates the Homeless Outreach Team, and offers Housing Retention services.

**Strategic Plan to End Homelessness in Whatcom County:** plan created by Whatcom County and the Steering Committee for the local CoC, Whatcom County Coalition to End Homelessness. Also see: <https://cob.org/wp-content/uploads/2019-a-home-for-everyone.pdf>

**Community Development Advisory Board (CDAB):** voluntary board of appointees that advises the City of Bellingham on development/implementation of the Consolidated Plan and advises on use of HUD and local housing and services funding.

**HOME-ARP allocation:** HOME is a federal grant allocated to local governments to create housing and/or support services for low income individuals. ARP (American Rescue Plan) is federal funding allocated to local government to support response and recovery from COVID-19 public health emergency. Two local distributing agencies: City of Bellingham and Skagit HOME Consortium (for projects outside the City of Bellingham).

**HOME Tenant-Based Rental Assistance (TBRA):** program that utilizes Federal funds to support communities providing utility, deposit and ongoing rental assistance. Commerce TBRA funds are contracted to local providers.

**Limited English Proficiency (LEP):** limited English proficiency is a term that refers to a person who is not fluent in the English language, often because it is not their native language.