

# TRACY POLICE DEPARTMENT COMMUNITY SERVICES DIVISION

INTEGRATED RESPONSE TO PERSONS EXPERIENCING HOMELESSNESS

# UNSHELTERED HOMELESS RESPONSE



**Outreach:** Unsheltered Homeless Identification, triage, and transport

**Pre-Shelter Services:** Engagement, intake, referrals to programs

**Emergency Shelter Operations:** Homeless shelter and case management, and housing navigation services

**Housing:** Rapid Rehousing, transitional housing and permanent housing with as needed wraparound case management and housing stabilization services

Intensive
Services /
Care
Coordination



# **Populations of Focus**

Who is responsible for different types of clients?

# City of Tracy Homeless Engagement Teams

TCCC: Unsheltered homeless individuals who are generally able to successfully self-manage and meet their own basic needs.

Diversion: Shortterm problem resolution and linkage to services for those at imminent risk of homelessness. ne st or





**Top 20 / By name list:** Unsheltered individuals

who are most reluctant to engage, with high levels of nuisance behaviors.

WPC/BHS: homeless individuals with complex health or behavioral health needs who are not successfully self-managing or meeting basic needs.

### **Situation Response:**

One-time deescalation or abatement response. (Encountered via walking patrol or as dispatched by TPD)

# **Shelter / Transitional Housing**



### **Tracy Shelter by City Net**

- Single adults
- Adult couples
- People with Pets
- People with Disabilities / Mobility issues



### **Other Programs**

- McHenry House (Families)
- Chest of Hope (DV)
- Women's Center (Youth)
- Ready to Work (Re-entry)
- BHS (Recovery)



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# **Prevention Approach**

**Diversion:** Early interventions to prevent displacement and avert homelessness

### **Early Interventions:**

e.g. Emergency re-housing and stabilization assistance for individuals or families displaced by eviction, flood, fire or other type of crisis.

### Prevention/ De-escalation:

e.g. Dispute resolution between shared household members that could result in loss of housing.

### **Relocations:**

e.g. Assist individuals that need to immediately leave a living situation find a new place to stay while looking for a permanent home.

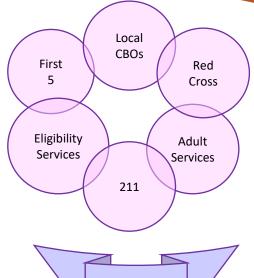
### Youth Response:

e.g. All youth under age 21 and unaccompanied minors will receive early and enhanced interventions upon identification.

Familiar Faces: Receives referrals for early intervention services to address the needs of individuals/families at-risk of homelessness or who are very recently displaced or evicted.

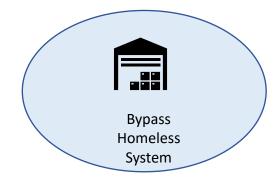
The goal is to immediately stabilize the living situation and prevent an entry into the formal homelessness system.

Coordination will occur with the Human Services Agency and other community-based services and supports.













# **Street Outreach and Engagement**

**Targeted Engagement:** 

Connect people into the system of care and support returns to housing.



Living Unsheltered **TCCC:** Builds relationships and helps transition those experiencing unsheltered homelessness off the streets, and into services or back home.

Familiar Faces: Works with those who are most reluctant to engage with the homeless system and carries a case load of about 20 chronically homeless individuals with ongoing nuisance behaviors.

WPC / BHS: Provides intensive care coordination for those diagnosed with highly complex health or behavioral health needs who are unable to selfmanage.

"The System"





Permanent Home

Situation Response: prevent, deter, or enforce the cessation of code violations or nuisance behaviors.

Muni Code Enforcement

Familiar Faces: conducts routine walking patrols of targeted public areas to avert code violations, deescalate encounters between homeless and other members of the public, and supports scheduled cleanup efforts by city staff or partners.

**Situation Response:** Response for persons experiencing or recovering from a mental health crisis.

Mobile Crisis Response

Mobile Evaluation Team



Clean- up activities

4/17/2023

## **Coordinated Care Teams**

# 80 / 20 Approach

**80%** of clients are managed through citycoordinated homeless response services.

**20%** of clients are managed through countycoordinated specialty services, including Whole Person Care and Behavioral Health Services.

- Homeless & eligible for SMI & SUD services
- Homeless & with complex health care needs and inability to successfully self-manage
- Homeless & complex need and transitioning from incarceration or institution

	Enroll to Services	Case Management	Housing Navigation	Care Coordination
тссс	TCCC conducts most initial outreach, enrolls in system, OR refers to: FF or WPC	If Feasible	Rarely	TCCC, FF, & City Net: Refer clients with complex needs to WPC for further coordination
FF		Top-20 Clients	Top-20 Clients	
City Net		If incomplete for all Shelter Guests	All Other Shelter Clients	
WPC / BHS		Eligible Clients	Eligible Clients	Eligible Clients

### **Enrollment to Services:**

- Basic client assessment
- **Enrolled in HMIS**
- Communications
  - Phone / e-mail
  - Mailing address
- Triage & Case Plan
- Referrals to services
- Routine check-ins

20%

intensive care coordination due to an inability to selfmanage complex health or behavioral health issues.

Of clients will require very

### **Intensive Care Coordination:**

- Develop comprehensive care team and meet regularly to review client progress.
- · Schedule all appointments, transport and accompany client to meetings for benefit, health, or other program enrollments.
- Engage into primary and behavioral health care services, develop care plan, manage appointments to prevent no-shows, and assure daily care and wellness.
- Work with homeless court or collaborative court programs to resolve outstanding criminal justice concerns.
- Identify and transition to permanent supportive housing, as eligible with long-term wrap-around support services.

### **Case Management:**

- Documents obtained
  - Legal ID
  - SS card
  - Birth certificate
- **Eligibility Program Applications**

80%

assistance.

Of clients will need

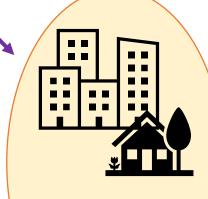
some case management

and housing navigation

- Food stamps
- Cash aid
- Medi-Cal
- Wellness Supports
  - Social skills groups
  - Recovery services

### **Housing Navigation:**

- VI-SPDAT complete
- **Enrolled in CES**
- Application for housing vouchers (HA-CSJ)
- Landlord Readiness
- Bank Account
- Employment search / income stabilization
- Prop 47 Record Clearance
- Rental Search and application assistance
  - Landlord negotiations
  - Landlord incentives (security deposits, etc.)
- Moving Assistance
  - Basic household set up



Permanent Home



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