

**Bloomberg  
Philanthropies**

**COVID-19  
LOCAL  
RESPONSE  
INITIATIVE**

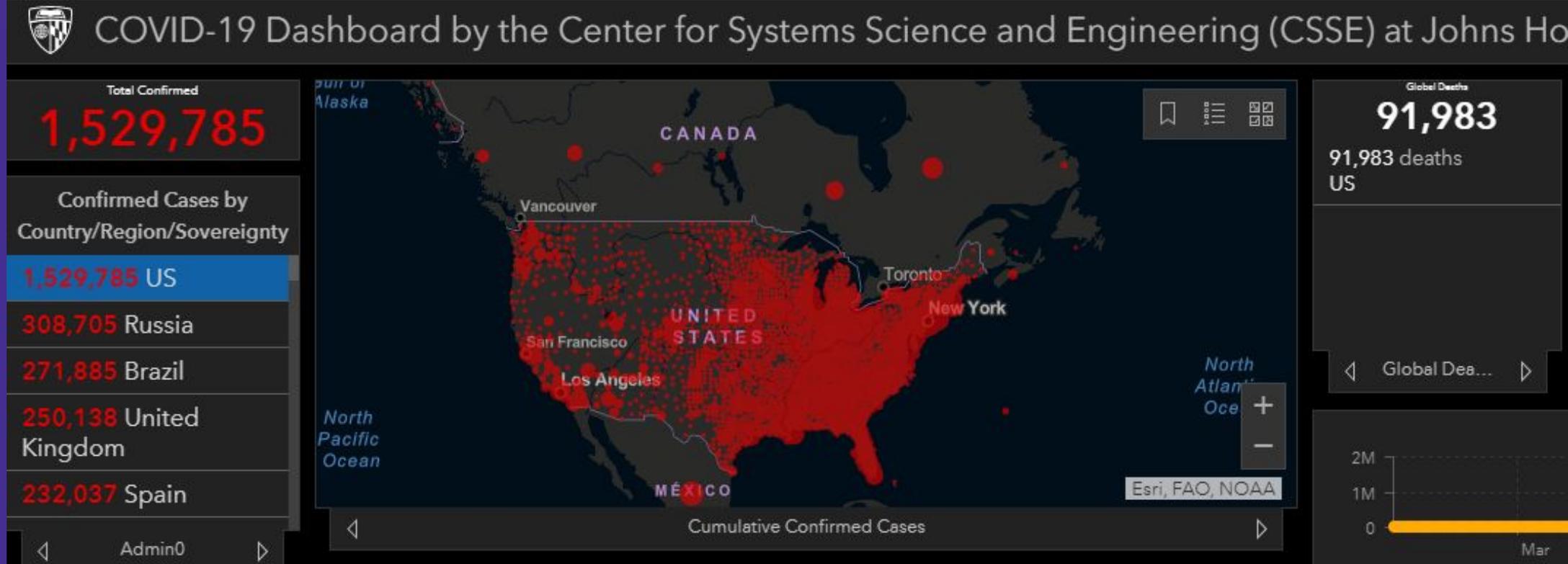
# **How Homeless Services Have Been Impacted in the Emergent COVID-19 Period**

**Wednesday, May 20, 2020  
1:00 PM EST**

# Today's Agenda

Topic	Presenter
Welcome and Introductions	<b>Linda Gibbs</b> , Principal Bloomberg Associates
Seattle/King County Sheltering Response	<b>Jason Johnson</b> , Director Human Services Department
San Francisco Response	<b>Jeff Kositsky</b> , Manager of the Healthy Streets Operations Center (HSOC), City and County of San Francisco
Q&A, Discussion, and Feedback	<b>Linda Gibbs</b> , Principal Bloomberg Associates

# Current U.S. Situation



Wednesday, May 20, 2020

# Web Series Overview

- 1 How Homeless Services have been Impacted in the Emergent COVID-19 Period
- 2 How to Proceed after the Emergent Period to Maintain Safety and Advance Services
- 3 Building a Long-term Vision: Opportunities from a Crisis

# Stages of Response

## Emergent

### Period

- Feb./March to now?

### Actions

- Change of practices (outreach, sheltering)
- Emergency sheltering (congregate, hotels)
- Staffing impact
- Client Needs

## Intermediate

### Period

- Decline or Flat Incidence
- Surge of needs during 2<sup>nd</sup>, 3<sup>rd</sup> wave
- Prolonged period of uncertainty

### Actions

- Prolong expanded shelter capacity
- Testing
- Prevention
- Engaging and Case Planning with Clients

## Longer

### Period

- Vaccine—at least 18m
- Treatment, partially effective for severe illness, <18m

### Actions

- Using the COVID-19 crisis as an opportunity for permanency
- Setting priorities
- Long term changes in service delivery
- Measure Impact

# Six Things To Think About

1. Adjusting time horizons
2. Have a plan for testing
3. Life on the streets
4. Start thinking about permanency
5. Prevent a new surge in homelessness
6. Protect victims of domestic abuse

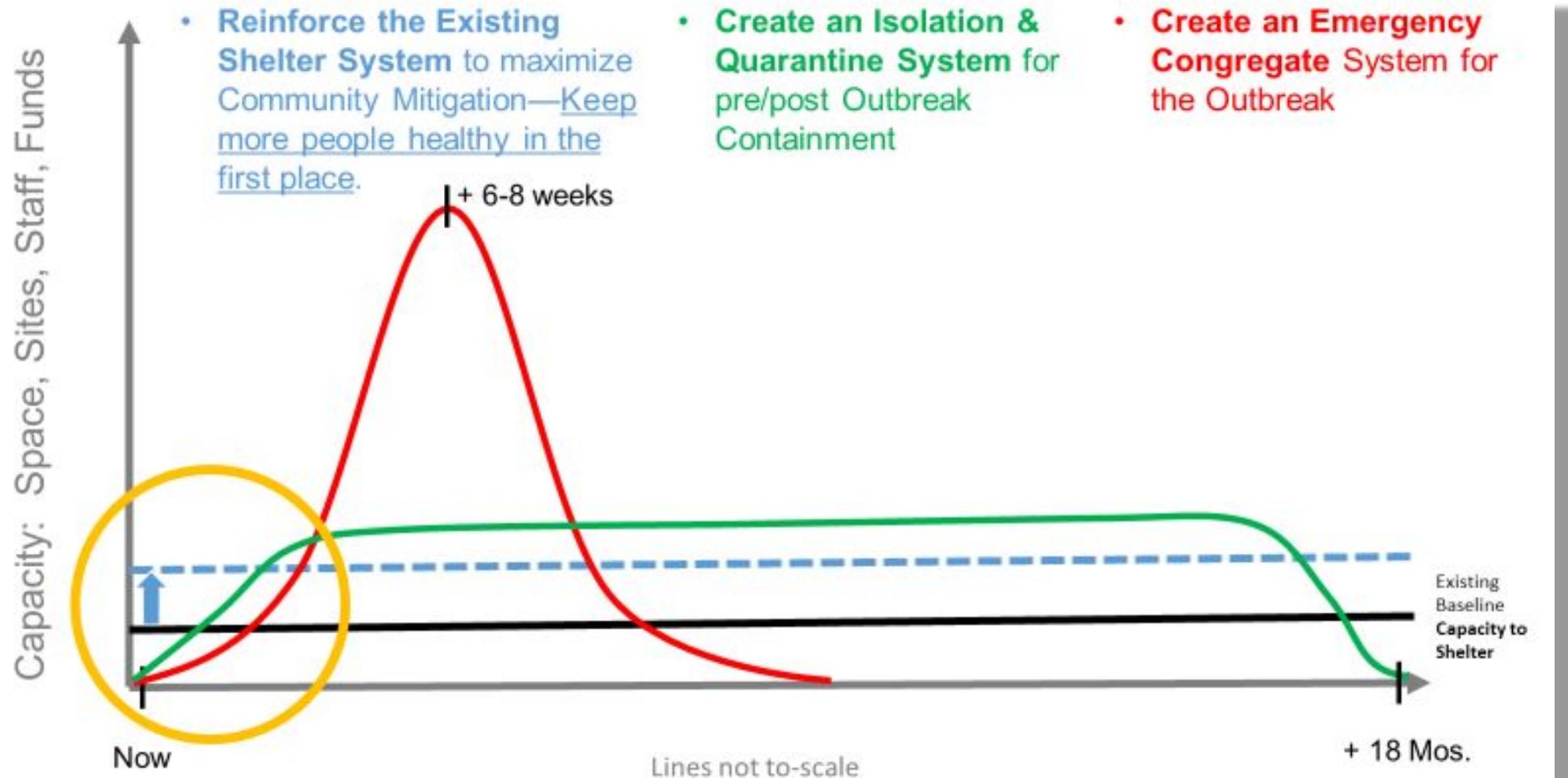
# Jason Johnson

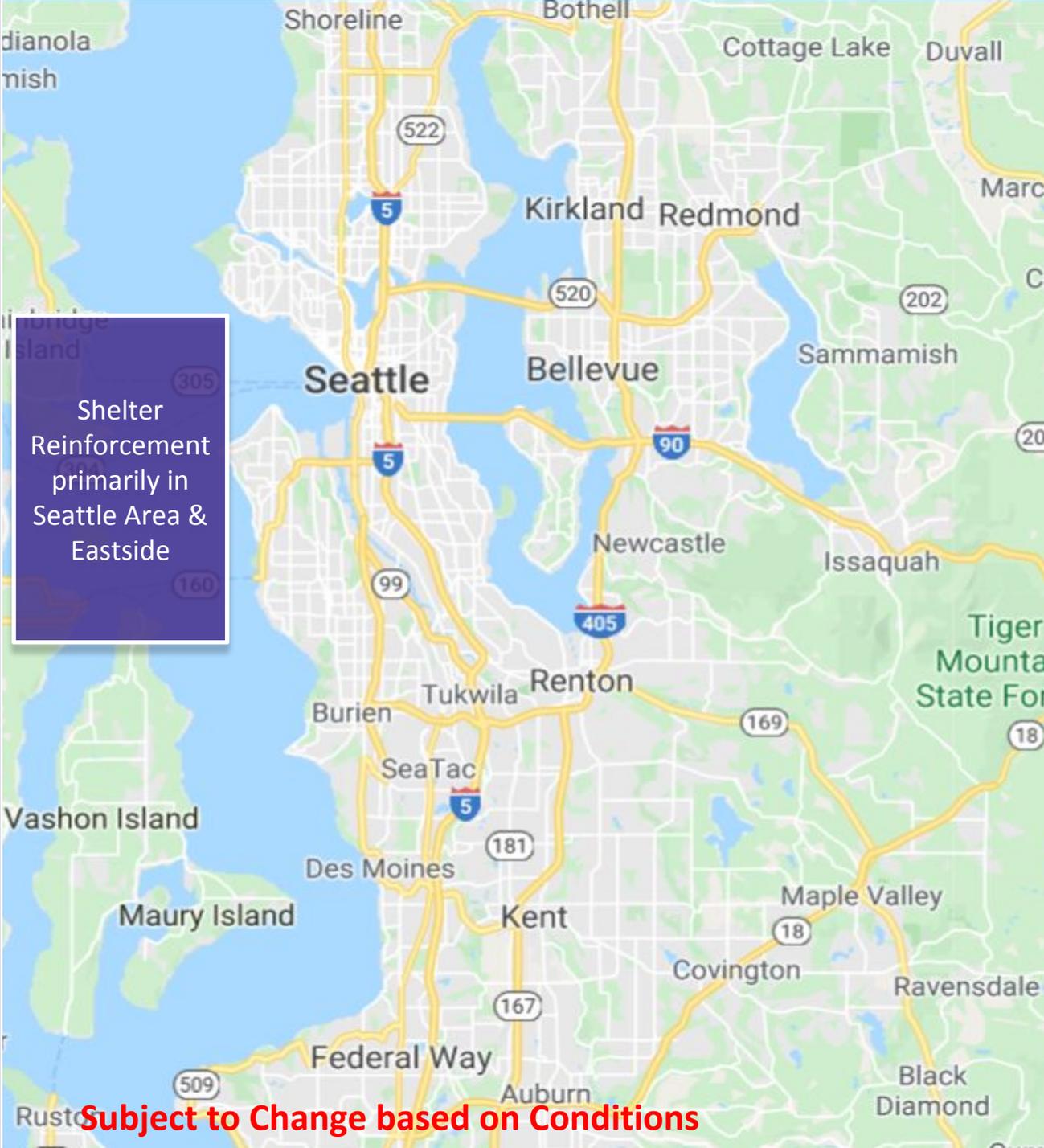
## Seattle/King County

Director, Human Services Department  
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# Three simultaneous strategies to slow the spread





Shelter Reinforcement primarily in Seattle Area & Eastside

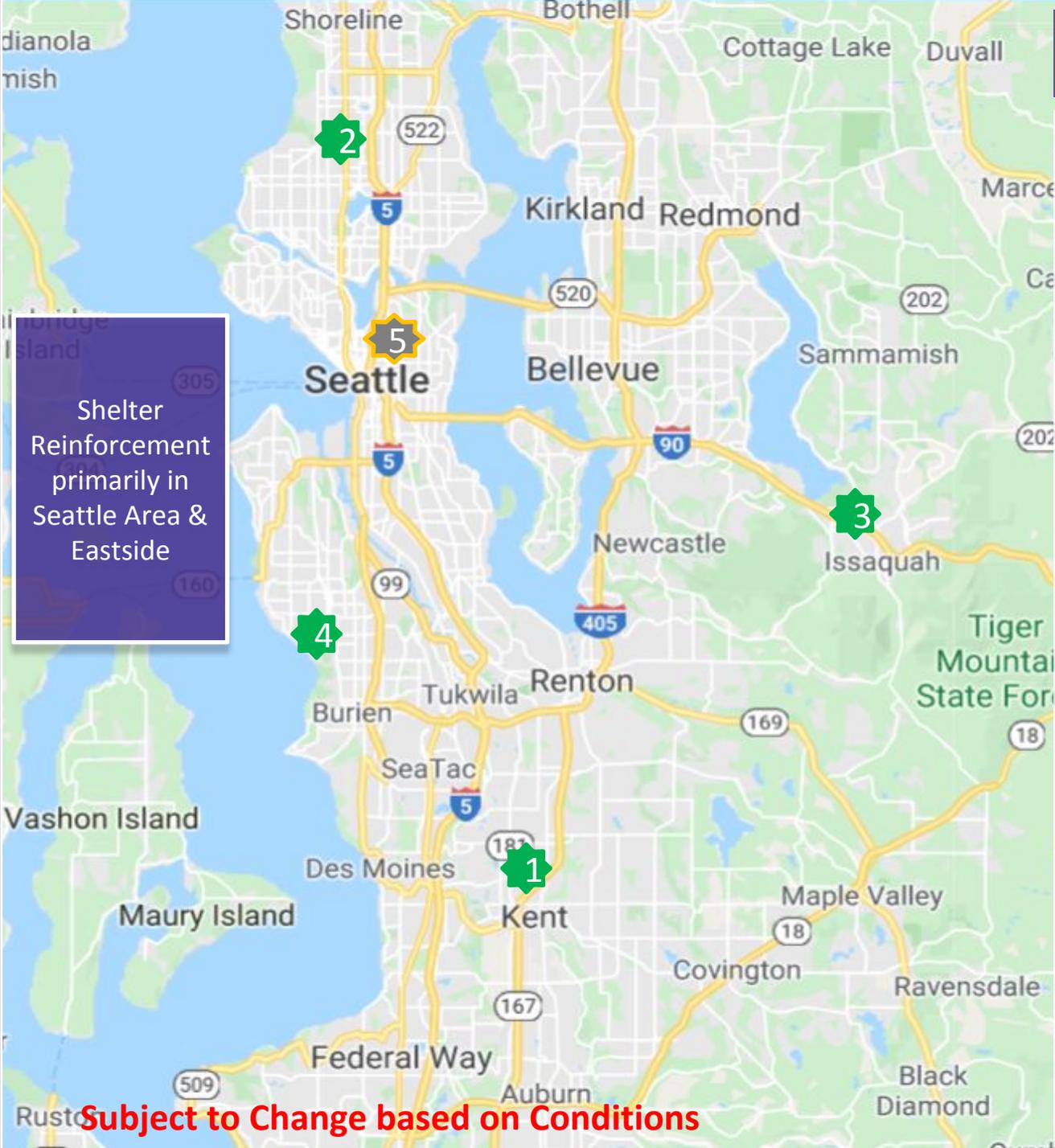
### 3 Ways to *Slow the Spread* & Keep Hospitals for People Who Need Emergent Care

#### 1. Reinforce & De-intensify Existing Shelters

We are taking steps to keep existing shelters able to keep people healthy and to remain operating

- Issuing Shelter, Day Center, PSH PH Guidance:  
<https://www.kingcounty.gov/depts/health/locations/homeless-health/healthcare-for-the-homeless.aspx>
- Centralized, Bulk Cleaning Supplies with online ordering
- Motel Voucher Program (De-intensification)
- Vulnerable Shelter De-intensification
  - DESC Main to Seattle Center
  - St. Martin de Porres to King County Airport and hotels
  - More shelter deintensification is ongoing
- Creating new homeless shelter beds and tiny house villages (Seattle)
- Day Center Cleaning Contract to centralize cleaning for high-traffic facilities and allow day center staff to focus on clients
- FAST Teams to provide onsite technical assistance for shelters and day centers

Subject to Change based on Conditions



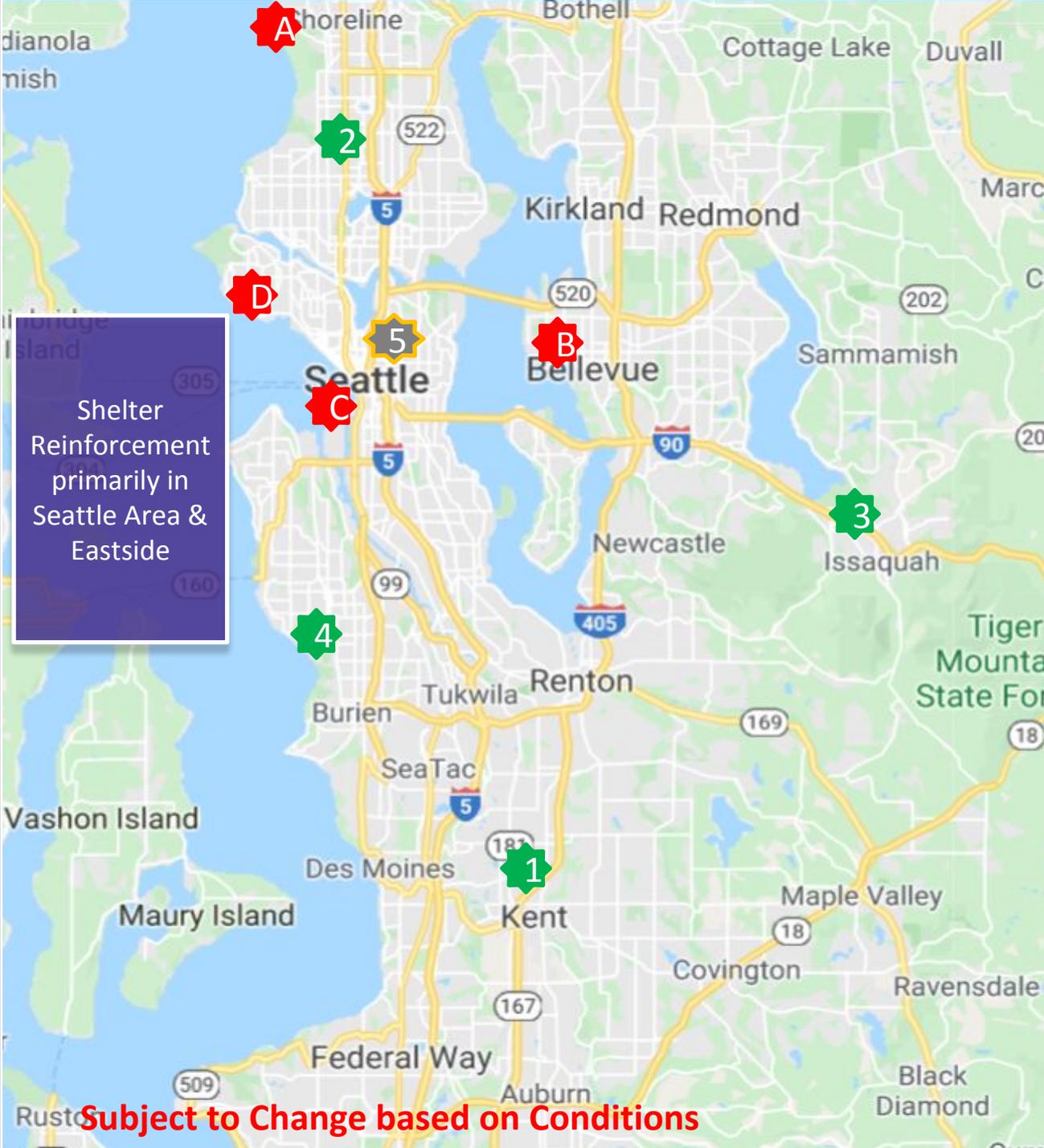
Shelter Reinforcement primarily in Seattle Area & Eastside

3 Ways to **Slow the Spread** & Keep Hospitals for People Who Need Emergent Care

1. Reinforce & De-intensify Existing Shelters
2. Create Isolation & Quarantine System for people who cannot be at home or people w/o a home

- 1 Central Motel (Kent)**
  - I/Q for up to 79 people
  - Prioritizing guests who are likely to succeed in I/Q given level of services available onsite
- 2 Aurora (Seattle)**
  - I/Q for up to 23 people
- 3 Issaquah Motel (Issaquah)**
  - I/Q for up to 99 people
  - Possible use as medical step-down or cohort isolation, seeking private medical operator
- 4 Top Hat (White Center)**
  - I/Q for up to 31 people
  - Prioritizing guests who are likely to succeed in I/Q given level of services available onsite
- Still Seeking a secure BH-focused I/Q**
  - No confirmed site
- 5 Harborview Hall (Seattle)**
  - I/Q for up to 45 people w/ Medical Nexus
  - Would be operated by Harborview Hospital

Subject to Change based on Conditions



Shelter Reinforcement primarily in Seattle Area & Eastside

3 Ways to **Slow the Spread** & Keep Hospitals for People Who Need Emergent Care

1. Reinforce & De-intensify Existing Shelters
2. Create Isolation & Quarantine System for people who cannot be at home or people w/o a home
3. Create Congregate Assessment & Recovery Centers (AC/RC) for shorter-term, emergency mass care to reduce hospital overcrowding

- B** **Eastgate AC/RC (Bellevue)**
  - Congregate Assessment & Recovery for up to 140 people (initial), possible future expansion to 200 people
- D** **Interbay (Seattle)**
  - Recovery only for up to 72 people
  - Currently being used as redistribution shelter for 50 people
- C** **SoDo (Seattle)**
  - Congregate Assessment & Recovery for up to 400
- A** **Shoreline (Shoreline)**
  - Congregate Assessment & Recovery for up to 140
- S** **South County AC/RC (TBD) NET TBD**
  - Working to confirm feasibility on a south-County AC/RC site for up to 400 people

Subject to Change based on Conditions

# Outreach - Navigation Team

Since the COVID-19 Outbreak, The Navigation Team has



- Public health info
- Hygiene kits
- 7-day/week service on outreach and litter removal routes

Suspended encampment removal operations with *exceptions*:

*Living structures completely blocking entire sidewalk*

*Living structures prohibiting safe entry and exit from building or use of facility*

*A public health or safety danger to occupants and/or greater area*

# Hygiene



- Leadership by SPU, and in partnership with Seattle Center, FAS, HSD and Parks
- Accelerate opening of winterized parks comfort stations
- Open temporary hygiene locations with porta-potties and handwashing stations
- Increase access to public libraries
- Open staffed mobile shower and bathroom trailers

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# Brief Q&A

**Jeff Kositsky**

**San Francisco**

Director, Department of Emergency Management



# Context

- In July 2016, San Francisco had over **1,000** tents/structures and over 30 large encampments.
- Since July of 2016, San Francisco sheltered over 35,000 people, ended homelessness for nearly 7,000 households and prevented homelessness for approximately 5,000 households.
- The City expanded proven programs during this period, adding over 2,500 housing exits and 900 shelter beds.
- HSOC was formed in 2018 to address street homelessness.
- As a result of this work, in April 2019 there were **381** tents/structures with less than 10 large encampments.
- While homelessness in San Francisco increased 18% from 2015-2019, it increased by 31% in California – reversing ten years of underperformance by the City.
- Since the beginning of the pandemic, San Francisco has seen a significant loss in service capacity, **including the loss of over 1,400 shelter beds**, and an increase in newly homeless unsheltered individuals. Further, the City stopped enforcing no lodging laws.
- As a result, there were **1,108** tents/structures in April 2020 and over 40 large encampments – essentially reversing 3.5 years of work in six weeks.
- **However, the rate of infection and death remains relatively low in the housed and unhoused populations.**

# Coordination

- Initial response was chaotic and too slow.
- After about 2 weeks, the City stood up the EOC at the convention center.
- All homelessness operations are now run by three groups are working at the EOC
- **Main issues** have been chain of command and getting clear policy guidelines from DPH; it would have been beneficial to appoint a ‘czar’ to work on homelessness.
- **Main successes** have been fast (two week) implementation of programs such as the SSV.
- While resources are not yet an issues, they are being paid for with ‘monopoly money.’

# Outreach

- 80 homeless outreach workers.
- 25 police officers that work with HSOC.
- 20 sanitation workers that work with HSOC.
- 5 nonprofit organizations that do limited outreach.
- **Focus has shifted to education, health assessments, maintaining encampments.**
- Outreach workers also identifying and arranging transport for SIP clients.
- No additional staff added or planned; after an initial drop-off the situation is stable.
- No known spread among these employees.
- City to begin contracting with BID's for specific neighborhood projects.

# Shelters

- **Number of shelter beds lost due to decompression:**
  - The shelter system capacity has lost 40% of it's capacity because of social distancing requirements (over 1,400 beds).
  - Shelter intake is paused to better support sheltering in place at the shelters and navigation center.
- **Number of shelter beds repurposed:**
  - 540 adult shelter beds have been or will be converted to post-COVID shelter beds in the next few weeks.
  - 186 shelter beds will be converted to a COVID+ shelter.
- **Number of congregate shelter beds added or planned:**
  - The City is exploring protocols to expand congregate shelter – this has been the primary challenge with expansion.
  - To date we have added 2 new congregate shelter post-COVID shelter sites.

# Hotels

- The City opened five hotels with I&Q units with over 1,00 units.
- The City then opened over 1,000/RV parks to decompress the shelters.
- For asymptomatic persons experiencing homelessness, the City is actively developing SIP sites to ensure the most vulnerable have safe spaces to shelter in place for the duration of the emergency.
- Front-line workers may access SIP hotel sites for a two-week respite period, thus ensuring a regular flow into and out of the sites designated for this purpose.
- **The goal is to open a total of 7,000 hotels units.**
- **Challenges have been primarily with identifying and training staff.**

# Safe Sleeping Villages

- During COVID-19, social distancing practices and protocols for protecting vulnerable individuals has led to a reduction in the availability of shelter spaces in San Francisco.
- People experiencing homelessness began setting up unofficial tent encampments in several neighborhoods, overwhelming the capacity for city agencies to respond.
- **The Safe Sleeping Village model** is an ‘outdoor shelter’ that provides services while maintaining neighborhood quality of life. We plan to open 10-20 of these sites.
  - Capacity for 50-60 tents
  - Designated spaces (144 square feet each)
  - 12-foot rows between spaces
  - Bathrooms, handwashing, showers (on or off site)
  - Access to food and water
  - Storage and areas for socially-distanced conversations
  - 24/7 site monitors

# Housing

Changes to Department of Homelessness and Supportive Housing operations:

1. Coordinated Entry: HSH is still conducting housing assessments and is working to ensure that people placed in hotels and safe sleeping site are assessed for housing. There has been no **major slow down** or expansion.
2. PSH Placements: HSH is using the COVID crisis to expedite the housing placement process. **Vacancy rates are down** but there has been no expansion.
3. Problem Solving: HSH has made **additional** Problem-Solving resources available to help meet the growing demand on the system of care.
4. Rapid Rehousing: HSH and its partners continue to place people into rapid rehousing with **no major slowdowns**.
5. Homeward Bound: This program, which made up nearly half of all housing placements, has effectively been **closed**.

# Next Steps

- The City is continuing to open hotels (2-4k more) this summer.
- Currently making hyper-local neighborhood plans to address homelessness.
- Working on a testing plan for unsheltered population in June.
- Opening 2 new Safe Sleeping Village this month and possibly an I&Q site.
- Developing longer term plans for:
  - Shelter expansion
  - Hotel acquisition
  - PSH expansion
  - Re-tooling coordinated entry.

# Q&A Discussion

# Closing & Feedback

**Thank you for attending.**

**Please take a moment and  
complete a brief feedback poll.**