

# Underserved Homeless Populations Report

High Barrier Populations of Individuals  
Re-entering from Institutions, Chronically  
Homeless, and Elderly Homeless

A Current Assessment of Population  
Demographics, Housing Facilities and  
Services, and Best Practices

*Revised October 2013*

Prepared for the Kitsap Regional Coordinating Council (KRCC)  
by Marta Holt, MPA Candidate, Seattle University, August 2013

Dedicated to the Memory of  
Sally Santana  
1955 – 2013



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*Abstract*

This is a report of existing conditions for underserved homeless populations in Kitsap County, Washington, with the purpose of identifying specific gaps in housing facilities and services. For the purposes of this study, underserved homeless populations include elderly individuals over the age of 55, chronically homeless individuals, and individuals re-entering from institutions (i.e.: jails, prisons, hospital, psychiatric facilities, substance abuse treatment facilities, and the foster care system). It includes a description of the general characteristics and barriers to housing faced by each population, an analysis of available HMIS data for each population, an inventory of existing housing facilities and services, identification of specific housing gaps, and discussion of emerging best practices. The study finds specific gaps in housing facilities and services including lack of overnight shelter, the absence of permanent supportive housing for chronically homeless individuals, the absence of coordinated discharge programs for individuals re-entering from area jails and hospitals, and also discloses other housing and program gaps for households who have not traditionally been considered underserved, including shelter for women with teenage sons, couples, and households with pets.

**Introduction**

The Kitsap Homeless Housing Plan 2012 stated in the progress report that “chronically homeless individuals and individuals re-entering the community from correctional facilities, jails, mental institutions, foster care, and hospitals are still extremely underserved, as there are no programs that address these populations’ unique needs”. The plan also indicates that there are gaps in homeless housing and services for elderly and aging individuals and households. In recognition of this, the 5-Year Action Plan includes an area to: “Focus on homeless populations currently underserved in our community and gaps in existing housing and homeless services.”

This report examines the unique barriers and issues specific to these “underserved” homeless populations in Kitsap County as a subset of the larger homeless population: What are the general characteristics and major barriers to housing faced by each population; what are their demographics in Kitsap County; what programs and services are available now in Kitsap County; what are the major gaps in housing and services; and what are best practices and successful programs being used elsewhere that might be used in Kitsap County.

## **Method**

Demographics of underserved homeless populations in Kitsap County were collected from the Housing Solutions Center (HSC) Homeless Management Information System (HMIS) database for the date range of February, 2012 through June, 2013 (See Appendix A for a description of the HMIS program, strengths, limitations, and some key definitions and parameters used by HSC). Additional data was collected from the Washington State Department of Corrections and the Kitsap County Jail with date ranges varying according to most recent available. In some cases, especially as regards those aging out of foster care, very little Kitsap County data could be assembled within the scope and timing of this project, and information is presented to the fullest extent possible.

Personal interviews were conducted with subject matter experts in the homeless housing profession in Kitsap County in order to assess the extent of housing and services that are available as well as identifying the major gaps in housing and services. A comprehensive housing inventory by housing and program type was compiled and presented Table 8.1. Numerous publications, reports, and website content from several national organizations advocating for homeless populations were researched and reviewed regarding underserved homeless populations and best practices. Appendix B provides a list of relevant and related articles for reference and includes some key articles referenced in this report.

## **Key Findings**

The primary objective of this study was to disclose the major barriers to housing for individuals, and the major gaps in housing and programs in Kitsap County that serve the housing needs of re-entry populations, chronically homeless, and elderly homeless individuals. The

findings support the observation that the major individual barriers are closely correlated with the major housing and program gaps.

The key findings of personal barriers include:

1. Criminal records, especially serious felony crimes. Among the most difficult to house populations in Kitsap County are ex-offenders with little or no income.
2. It is difficult to house homeless individuals who are unable or unwilling to comply with case management requirements, including abstinence from substance abuse and/or mental health treatment, and who have little or no income.
3. Homeless individuals who require respite, wound care, or medication management after being released from hospitals, and who have little or no income.
4. There are additional populations who are going underserved due to previously unidentified barriers. This includes couples who wish to remain together, single mothers with boys 13 and older, and households with pets.

The key findings of housing and program gaps include:

1. There is no Unconditional Overnight Shelter in Kitsap County open to all who need it.
2. There is no Permanent Supportive Housing that does not require abstinence and/or participation with case management for chronically homeless individuals with multiple high barriers.
3. There are no coordinated discharge policies or programs in Kitsap County for re-entry populations; especially needed for those re-entering from jails, prisons, and hospitals.
4. There are not enough permanently subsidized housing units or housing vouchers for households with little income, including elderly homeless.
5. Existing program funds for financial assistance are under-funded, and do not meet the demand for assistance.

## **Analysis and Discussion**

### **General Characteristics and Barriers of Underserved Homeless Populations**

Underserved homeless populations include chronically homeless individuals, and individuals re-entering society from institutions such as jails, prisons, hospitals, psychiatric facilities, substance abuse treatment, and the foster care system. This report also examines homelessness among elderly and aging individuals and the barriers to housing and services they face. Individually, each sub-population has multiple complex and interdependent barriers and



different housing needs. There are personal, social, regulatory and legal barriers to housing that each face. Though it isn't necessary to design a unique system for each population, anything that is done must take this diversity into account.

According to the National Alliance to End Homelessness (NAEH), the main reason people experience homelessness is because they cannot find housing they can afford. It is the *scarcity of affordable housing* in the United States that is behind their inability to acquire or maintain housing (Data Point: Chronic Homelessness in the United States, 2013).

The absence of sufficient *income* is the primary personal barrier to obtaining and maintaining housing. Other personal barriers to housing include lack of *education* and *vocational skills*; access to *transportation* and *communication*; and difficulty accessing affordable *child care*.

There are also regulatory and legal barriers to obtaining housing including *criminal background*, *bad credit* or *no credit*, *eviction*, and *unpaid rent/damages*. Finally, there are social and political barriers to establishing housing facilities for underserved homeless populations including *stigma*, *fear*, and *ignorance*.

### **Overview of Housing Solutions Center (HSC) Homeless Management Information System (HMIS) Records.**

The Homeless Management Information System (HMIS) records show that there were 3,846 households comprising 7,801 people who sought housing services from the Housing Solutions Center (HSC) from February 1, 2012 to May 31, 2013. Regarding household characteristics, 23% were single men, and 22% were single women, a fairly equal division among childless single men and women. However, an additional 22% were single women with children as compared to 3% being men with children, revealing that there are significantly more

women and women with children seeking housing services from HSC than men. Further, 17% of the total population is comprised of two parent households with children, as compared to 13% being couples with no children. Thus 42% of those seeking housing services from HSC have children in the household.

Regarding income, 27% of the total households who have sought housing services from HSC have no income, and another 30% earn less than \$700 per month. Thus, of all the households seeking housing services from HSC, more than half, 57%, earn less than \$700 per month.

With regards to housing status, 56% are literally homeless or imminently losing their housing (see Appendix A for a description of HSC terms). Regarding the underserved populations, of the total households who sought housing services from HSC:

- 6% have re-entered from institutions
- 13% are chronically homeless
- 8% are between the ages of 55-61 (eligibility criteria for some senior housing)
- 3% are 62 and older (eligibility criteria for other senior housing)

It is important to recognize that these numbers represent only those who are seeking assistance for housing. This does not capture those homeless households who are not seeking housing assistance. There is also some overlap in these populations as people frequently have multiple barriers and fall into two or more of these categories. These numbers are presented to provide an image of some of the overarching characteristics of the total households seeking housing services from HSC. What follows is an in depth discussion of each of the underserved populations of this report.

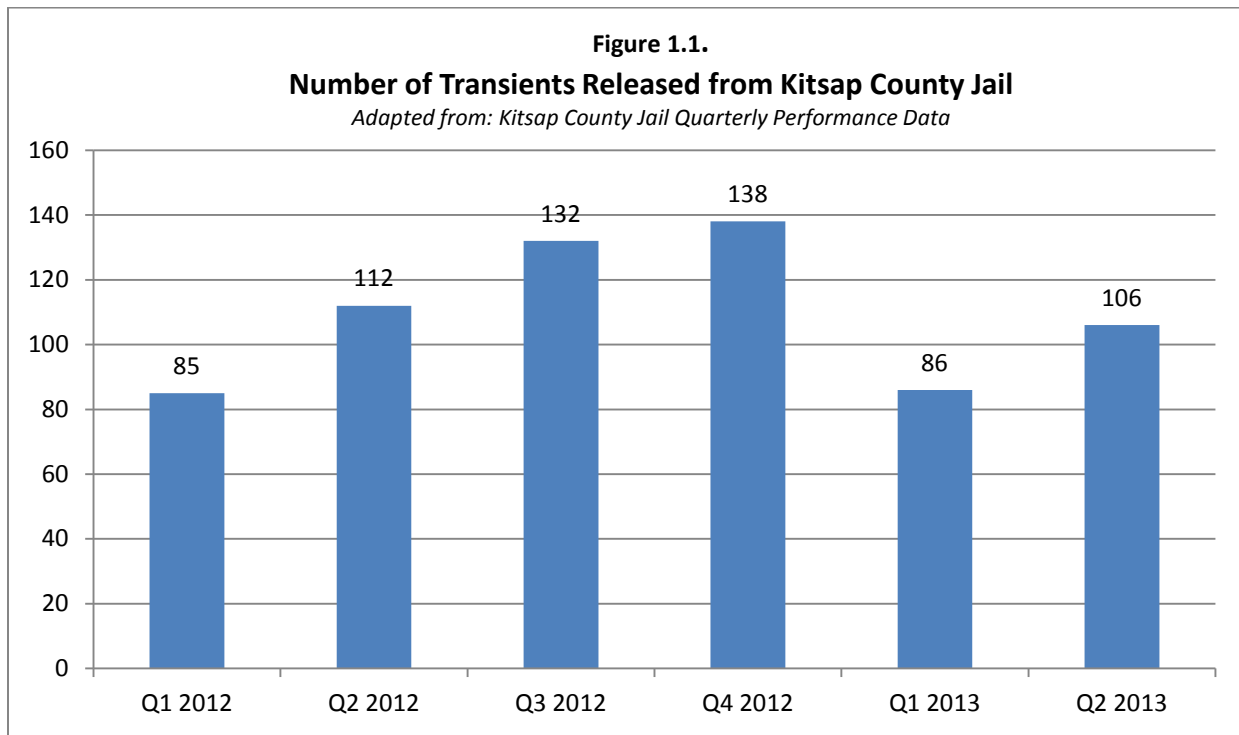
### **Re-Entry from Institutions**

Many people who fall into homelessness do so after release from private and state-run institutions, including jails and prison, hospitals, psychiatric facilities, drug and alcohol treatment

facilities, and the foster care system (NAEH, Ten Essentials, 2013).

**Incarceration - jails and prisons.** Housing problems, including homelessness, are common among individuals leaving jails and prisons. They often have little or no income, and due to their criminal history, are banned from housing options that are open to other low-income people. Compared with the average American, ex-offenders are less educated, less likely to be gainfully employed, and are more likely to have a history of mental illness or substance abuse. As a result, one in five people who leave prison becomes homeless (Congressional Research Service, 2011).

**Jails.** The Kitsap County jail tracks how many people self-report as transient. Figure 1.1 shows the number of homeless individuals released from Kitsap County Jail per quarter from January 2012 through June 2013.

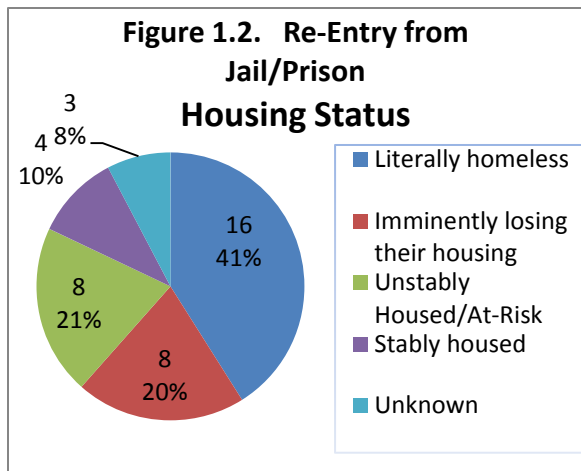


*Note:* Transient individuals who have been jailed more than once are counted each time they are released.

**Prisons.** Felony convictions, especially serious felonies such as sex-offenses, arson, and other violent crimes, are barriers to housing. Felons are banned from most emergency shelters, and all federally funded housing.

Kitsap and Pierce Counties comprise Section 4 of the Washington State Department of Corrections. The Fiscal Year 2012 Corrections Data Sheet provides demographic statistics for individuals released in Section 4 (see Appendix B).

Though I was not able to access the precise number of individuals being released from jails and prisons into Kitsap County each year, upon review of available data, it appears that this number is in the vicinity of 1,000 individuals.



**HMIS summary.** A total of 39 households comprising 50 individuals sought housing services from HSC between February 1, 2012 and May 31, 2013 and identified Jail/Prison as their prior living situation. Of these, 41% were literally homeless, and another 20% imminently losing their housing (see figure 1.2).

Household statistics show that those re-entering from jail or prison and seeking housing services are mostly single men with no income (see table 1.1).

**Table 1.1. Re-Entry from Jail or Prison**

Household Statistics					
Family Composition		Monthly HH Income			
	# of Households	% of Total			
Single Woman	5	13%	\$ 0	27	69%
Woman with Child	5	13%	\$ 1 - 349	2	5%
Single Man	27	69%	\$ 350 - 699	4	10%
Adults without Children	1	3%	\$ 700 - 999	1	3%
Two Parent Family	1	3%	\$ 1,000 - 1,499	2	5%
Grand Total	39	100%	\$ 1,500 - 2,499	2	5%
			\$ 2,500+	1	3%
			Grand Total	39	100%

Other head of household demographics show that 62% of those re-entering from jail or prison are under the age of 40, 32% report drug and/or alcohol abuse, 13% have a post-secondary education, 26% have a disability, and 10% report a mental illness (see table 1.2).

**Table 1.2. Re-Entry from Jail or Prison**

Head of Household Demographics			
<b>Age</b>			
	<b># of Households</b>	<b>% of Total</b>	
18 - 29	14	36%	
30 - 39	10	26%	
40 - 54	9	23%	
55 - 61	5	13%	
62+	1	3%	
Grand Total	39	100%	
<b>Education Level</b>			
	<b># of Households</b>	<b>% of Total</b>	
5th - 11th Grade	7	18%	
GED	8	21%	
High School Diploma	16	41%	
Post Secondary School	5	13%	
Unknown	3	8%	
Grand Total	39	100%	
<b>Substance Abuse</b>			
	<b># of Households</b>	<b>% of Total</b>	
Alcohol	3	8%	
Drug	8	21%	
Drug and alcohol	1	3%	
None	27	69%	
Grand Total	39	100%	
<b>Mental Illness</b>			
	<b># of Households</b>	<b>% of Total</b>	
Yes	4	10%	
No	35	90%	
Grand Total	39	100%	
<b>Disability</b>			
	<b># of Households</b>	<b>% of Total</b>	
Yes	10	26%	
No	27	69%	
Unknown	2	5%	
Grand Total	39	100%	

*Existing programs that serve those re-entering from jail or prison.* There is no program in Kitsap County to address housing needs for the population exiting jail. No release plan is required, and most jails have no resources for transition planning for any group whether homeless, needing treatment for substance abuse or mental illness. For those who self-report as homeless, printed literature about housing resources is provided to them. The Kitsap County Jail also offers Kitsap Transit bus tokens to individuals being released so that they may get from jail to where ever they want to go in the county.

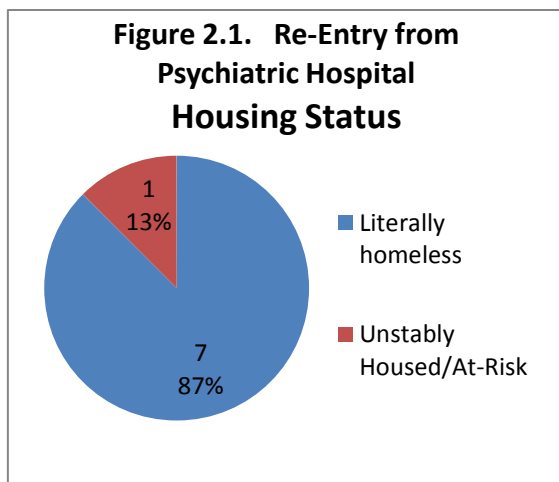
Kitsap Mental Health Services dedicates a half-time staff position to the jail to assess individuals for mental health under the Hargrove Act. For those individuals who meet the

threshold for access to care at Kitsap Mental Health Services, discharge planning is conducted that includes addressing housing needs and referrals for housing.

The Department of Corrections' Earned Release Date (ERD) Housing Voucher Program started in 2009 provides transitional housing for three months to prison inmates who qualify for early release. This is a successful program to reduce the cost of housing inmates, and is not necessarily a homeless reduction program. Because criminal offenders are banned from all government housing, the DOC works directly with private landlords who provide rooms in their boarding houses and in return receive a \$500 rent voucher for three months. During the three month period, offenders are able to get their DSHS and Medicaid benefits reinstated, and look for work. The DOC reports that 70-80% of program participants are able to fund their own housing afterward.

For those who don't qualify for the ERD program and must serve out their entire sentence, there is no discharge planning. About half of the 7,500 prisoners released each year in Washington State do not have a housing plan (Theo Lewis, Program Administrator for Housing, Washington State Department of Corrections).

**Psychiatric hospitals/mental health treatment facilities.** Homeless persons constitute



a high proportion of mental health treatment populations (Ditton, 1999; McGuire & Rosenheck, 2004; Tsemberis, Gulcur, & Nakae, 2004).

**HMIS Summary.** Of those seeking housing services from HSC between February 1, 2012 and May 31, 2012, there were eight households

comprising eight individuals who report a psychiatric hospital as their prior living situation. Of these, all but one was literally homeless (see figure 2.1).

Household statistics show that of those re-entering from Psychiatric Hospitals, 75% were single men, and 75% had no income (see table 2.1).

**Table 2.1. Re-Entry from Psychiatric Hospital**

<b>Household Statistics</b>			
<b>Family Composition</b>		<b>Monthly HH Income</b>	
	<b># of Households</b>	<b>% of Total</b>	
Single Woman	1	13%	\$ 0
Single Man	6	75%	\$ 350 - 699
Adults without Children	1	13%	Grand Total
Grand Total	8	100%	8
			100%

Other head of household demographics show that all but one household, or 88% were under the age of 40, and that 88% report drug and/or alcohol abuse. 75% of those re-entering from psychiatric hospitals report a mental illness (see table 2.2).

**Table 2.2. Re-Entry from Psychiatric Hospital**

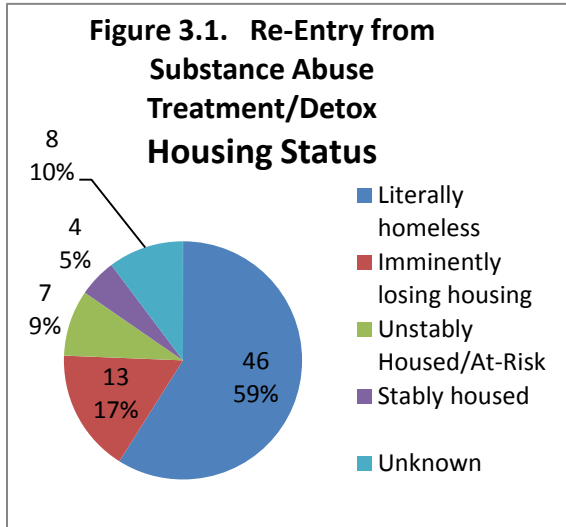
<b>Head of Household Demographics</b>			
<b>Age</b>		<b>Substance Abuse</b>	
	<b># of Households</b>	<b>% of Total</b>	
18 - 29	3	38%	Alcohol
30 - 39	4	50%	Drug and alcohol
40 - 54	1	13%	None
Grand Total	8	100%	Grand Total
			8
			100%
<b>Education Level</b>		<b>Mental Illness</b>	
	<b># of Households</b>	<b>% of Total</b>	
9th - 11th Grade	2	26%	Yes
GED	3	38%	No
Unknown	3	38%	Grand Total
Grand Total	8	100%	8
			100%
		<b>Disability</b>	
		<b># of Households</b>	<b>% of Total</b>
		1	13%
		7	88%
		8	100%

Though this is a small population, this is a high barrier population who has difficulty obtaining and maintaining permanent housing. It would be interesting to learn how these individuals were referred, as it is possible that they were discharged from Kitsap Mental Health Services (KMHS) before coming to HSC. Also, that so few people have reported a psychiatric hospital as their last place of residence may reflect KMHS success in providing emergency, transitional, and permanent housing to many people with severe and persistent mental illness in Kitsap County.

*Existing programs that serve those re-entering from psychiatric hospitals in Kitsap County.* KMHS provides a mix of staff supported and supported housing as an element of mental health treatment in Kitsap County. In 2010, KMHS opened the Keller House on its campus for KMHS clients, with 24/7 stabilization beds that provide eleven 30-day beds and five permanent beds for patients requiring a high level of mental health support to live in the community. KMHS owns twelve scattered site off-campus housing units that provide permanent supportive housing for clients who require mental health case management services. KMHS also works closely with Bremerton Housing Authority, Housing Kitsap, and private landlords to provide additional housing units in the community for adults with severe, persistent mental illnesses. Together these comprise over 100 predominately single residency occupancy units (for details, see table 8.1, Housing Inventory, on page 33). Even so, these units are not adequate in number to meet the need of adults with chronic severe mental illnesses, and KMHS estimates an additional 40 permanent, supported SRO's are needed in our community for this population, most of whom do not meet the criteria for chronically homeless but who are at high risk of homelessness.



**Substance abuse treatment/detox facilities.** A review of 29 studies conducted worldwide estimated that more than 39% of the chronically homeless individuals have alcohol dependence (Journal of Public Health, 2012).



**HMIS summary.** From February 1, 2012 to May 31, 2013, 78 households comprising 93 individuals reported to HSC a substance abuse/detox facility as their prior living situation. Of these, 46 households, or 59%, were literally homeless. (see figure 3.1).

Though household statistics show that single men comprise the largest segment of this population (45%), there are also many single women (31%), as well as a significant number of households with children (11%). Of the total population, 69% had no income (see table 3.1).

**Table 3.1. Re-Entry from Substance Abuse Treatment/Detox**

Household Statistics					
<b>Family Composition</b>		<b>Monthly HH Income</b>			
	<b># of Households</b>	<b>% of Total</b>			
Single Woman	24	31%	\$ 0	54	69%
Woman with Child	4	5%	\$ 1 - 349	8	10%
Single Man	35	45%	\$ 350 - 699	14	18%
Adults without Children	8	10%	\$ 1,000 - 1,499	1	1%
Two Parent Family	5	6%	\$ 1,500 - 2,499	1	1%
Unknown	2	3%	Grand Total	78	100%
Grand Total	78	100%			

Head of Household demographics show that 73% were under the age of 40. 28% indicated a mental illness, and 24% indicated a disability. It is interesting to note that 26% reported that the head of household had no substance abuse issues (see table 3.2).

**Table 3.2. Re-Entry from Substance Abuse Treatment/Detox**

**Head of Household Demographics**

Age	# of Households	% of Total
18 - 29	34	44%
30 - 39	23	29%
40 - 54	16	21%
55 - 61	3	4%
62+	2	3%
Grand Total	78	100%

Education Level	# of Households	% of Total
5th to 12th Grade	16	21%
GED	14	18%
High School Diploma	22	28%
Post Secondary School	9	12%
Unknown	17	22%
Grand Total	78	100%

Substance Abuse	# of Households	% of Total
Alcohol	9	12%
Drug	21	27%
Drug and alcohol	25	32%
None	20	26%
Unknown	3	4%
Grand Total	78	100%

Mental Illness	# of Households	% of Total
Yes	22	28%
No	55	71%
Unknown	1	1%
Grand Total	78	100%

Disability	# of Households	% of Total
Yes	19	24%
No	56	72%
Unknown	3	4%
Grand Total	78	100%

*Existing programs that serve those re-entering from substance abuse treatment/detox.*

Kitsap Recovery Center (KRC) has six beds for homeless people who do not require hospitalization with a stay limit of 24 hours to two days.

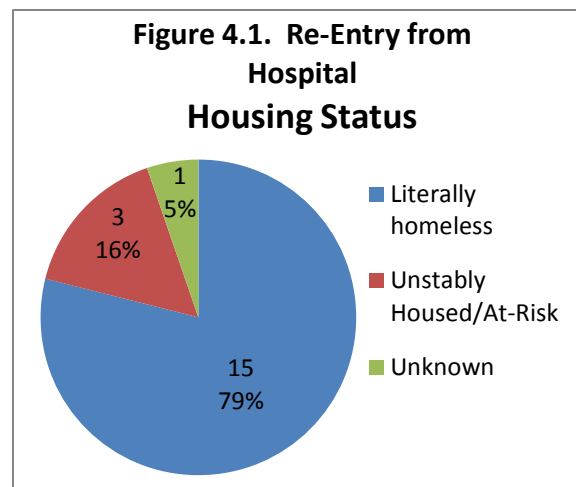
The West Sound Treatment Center offers permanent housing for homeless, chemically dependent women and their children in a Harm Reduction model that offers but does not require participation with treatment or other case management services. They also offer transitional housing for chemically dependent men, and chemically dependent women, where they can remain as long as they participate with required case management for treatment, education, and support services. Additionally, West Sound has one emergency bed available for homeless men with no income and in crisis.

AGAPE Unlimited has transitional and permanent supportive housing for homeless households enrolled in substance abuse treatment programs. Additionally, there are nineteen clean and sober boarding houses operated as Oxford House throughout Kitsap County that offer permanent housing for single men, single women, and one home that houses women with children. Oxford house requires income to pay rent. For all of these programs, housing is contingent upon abstinence and/or compliance with treatment programs.

**Hospitals.** Poor health outcomes among homeless individuals are well documented. Persons who are homeless have more emergency department visits and inpatient hospital stays compared to people who are stably housed. Negative health consequences for homeless individuals are increased due to prevalence of mental health issues, substance abuse disorders, and a greater level of disconnection from preventative medical care (Parker, 2010). Upon release from the hospital, homeless individuals may still be ill enough to need respite and nursing. This can be a significant barrier to housing as few emergency housing programs can accommodate those needs.

**HMIS Summary.** Of those seeking housing services from HSC between February 1, 2012 and May 31, 2013, there were 19 households comprising 20 people who reported a hospital as their prior living situation. Figure 4.1 shows that 79% of these households were literally homeless.

Household statistics show that 58% of those



re-entering from hospitals are single men. In contrast to the other populations, those reentering from hospitals are less likely to have no income with 37% of the households reporting no income (see table 4.1).

**Table 4.1. Re-Entry from Hospital**

Household Statistics			
<b>Family Composition</b>		<b>Monthly HH Income</b>	
	<b># of Households</b>	<b>% of Total</b>	
Single Woman	5	26%	\$ 0
Single Man	11	58%	\$ 350 - 699
Adults without Children	3	16%	\$ 700 - 999
Grand Total	19	100%	\$ 1,000 - 1,499
			Grand Total
			7
			4
			4
			4
			19
			37%
			21%
			21%
			21%
			100%

Additional head of household demographics show that there is a fairly equal distribution among all age groups re-entering from hospitalization, and that alcohol and/or drug abuse is reported by 32% of this population, 32% report a mental illness, and that 32% report a disability. These are high values among the underserved homeless populations (see table 4.2).

**Table 4.2. Re-Entry from Hospital**

Head of Household Demographics			
<b>Age</b>		<b>Substance Abuse</b>	
	<b># of Households</b>	<b>% of Total</b>	
18 - 29	2	11%	Alcohol
30 - 39	5	26%	Drug
40 - 54	5	26%	Drug and alcohol
55 - 61	5	26%	None
62+	2	11%	Unknown
Grand Total	19	100%	Grand Total
			3
			2
			1
			12
			1
			19
			16%
			11%
			5%
			63%
			5%
			100%
<b>Education Level</b>		<b>Mental Illness</b>	
	<b># of Households</b>	<b>% of Total</b>	
9th -11th Grade	5	27%	Yes
High School Diploma	10	53%	No
Post Secondary School	2	11%	Grand Total
Unknown	2	11%	6
Grand Total	19	100%	13
			19
			32%
			68%
			100%
<b>Disability</b>		<b># of Households % of Total</b>	
			6
			12
			1
			19
			32%
			63%
			5%
			100%

***Existing programs that serve those re-entering from hospitals in Kitsap County.*** There are no programs in Kitsap County for people being released from area hospitals into homelessness, and there is no shelter for homeless individuals who need to convalesce. The Housing Solutions Center has a hotel/motel voucher program that provides money for one or two nights stay, but these resources are extremely limited.

**Aging out of foster care.** Aging out of foster care is the process of a youth transitioning from the formal control of the foster care system towards independent living. The population includes individuals re-entering due to aging out of foster care are between the ages of 18 and 21 when most services end.

The most significant barrier to establishing and maintaining housing for young adults who have aged out of foster care is the general lack of essential life skills and family support. Unfortunately, young people transitioning out of the foster care system are significantly affected by the instability that accompanies long periods of out-of-home placement during childhood and adolescence. The experiences of foster youth places them at a higher risk for unemployment, poor educational outcomes, health issues, early parenthood, long-term dependency on public assistance, increased rates of incarceration, and homelessness. As a result, youth aging out of the foster care system become homeless at rates higher than the background population.

The Child Welfare League of America reports that approximately 20,000-25,000 young people age out of the foster care system each year, many without family or economic support. Here are some statistics they report of former foster youth within four years of aging out: Anywhere from 12% to 36% become homeless; 46% have not completed high school, 56% have not maintained steady employment for a year, 60% of females have children of their own, 27%

of males become jailed. In all 3 out of 10 of the nation's homeless adults report foster care history.

Though in Washington State, the number of youth aging out of foster care has been steadily declining from 454 in 2009, to 444 in 2010, and 407 in 2011, it remains that 70% experience homelessness within the first three years of aging out of the foster care system.

***HMIS summary.*** The level of detail that was available from HMIS records for aging out of foster care was restricted during this study period, however the countywide HMIS database records that were available from February 1, 2012 to May 31, 2013 show fifteen individuals, ages 18 through 20, who reported that their prior living situation was foster care. Of these:

- one was literally homeless
- four refused to disclose their current housing situation and all other personal information
- four are unstably housed and at risk of losing their housing
- eight dropped out of high school
- three had a high school diploma or GED
- eleven reported NO income
- four reported income under \$710 per month

These records are consistent with the national statistics on former foster youth, indicating a 53% high school drop-out rate, and 73% having no income. It is worth noting that 26% of those aging out of foster care refused to disclose any personal information. This possibly could be an indication of distrust and fear of systems and programs among the aging out youth, a characteristic that was brought up by several subject matter experts during interviews for this report.

***Housing programs for aging out of foster care in Kitsap County.*** Youth aging out of foster care are being served in Kitsap County by Hope In Christ Ministry (who operates Coffee Oasis), and West Sound Youth for Christ, both faith based organizations who work with youth who are aging out of the foster care system and are partners in the HMIS system. Coffee Oasis

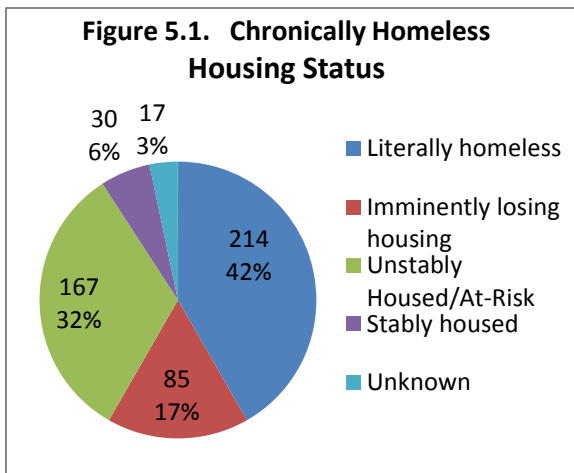
provides homeless outreach, job and skills training, and recently began operating an overnight youth shelter for ages 16-20. West Sound Youth for Christ offers programs that support independent living skills, including housing, for young men and women who are aging out of foster care.

### **Chronically Homeless**

Under the Department of Housing and Urban Development's (HUD) definition, a chronically homeless individual is "...someone who has experienced homelessness for a year or longer, or who has experienced at least four episodes of homelessness in the last three years and has a disability" (National Alliance to End Homelessness, Chronic Homelessness, 2013).

Chronically homeless people are among the most vulnerable people in the homeless population. They typically face multiple high barriers including severe mental illness and substance abuse disorders, conditions that may be exacerbated by physical illness, injury or trauma. Consequently, they are frequent users of emergency services, crisis response, and public safety systems.

According to the 2012 Annual Homeless Assessment Report, the chronically homeless population accounted for a little under 16 percent of all experiencing homelessness on a given night in 2012.



**HMIS summary.** A total of 513 households comprising 929 individuals are reported as being Chronically Homeless between February 1, 2013 and May 31, 2013 [see footnote]. That number amounts to 13% of the total number of homeless households in Kitsap County, below the national rate of 16%. Figure

5.1 shows that 59% of this population was literally homeless or imminently losing their housing, and that another 32% were unstably housed.

Household statistics from HSC show that 44% of chronically homeless households in Kitsap County are single women or single women with children while single men comprise 28% of the population (see table 5.1). This is an interesting value, as national statistics show that 13% of chronically homeless households are single women and 44% are single men. This might be explained by the notion that women, especially women with children, are more likely than men to seek housing services from HSC. This also supports the assertion by subject area experts, that many chronically homeless people stop seeking housing services when they believe that there are no housing options available to them.

Of the chronically homeless population, 28% have no income, a significantly lower value than any of those underserved populations re-entering from institutions. This suggests that there are barriers other than income to housing for chronically homeless individuals in Kitsap County.

**Table 5.1. Chronically Homeless**

<b>Household Statistics</b>					
<b>Family Composition</b>			<b>Monthly HH Income</b>		
	<b># of Households</b>	<b>% of Total</b>		<b># of Households</b>	<b>% of Total</b>
Single Woman	109	21%	\$ 0	144	28%
Woman with Child	111	22%	\$ 1 - 349	52	10%
Single Man	142	28%	\$ 350 - 699	136	27%
Man with Child	11	2%	\$ 700 - 999	64	12%
Adults without Children	78	15%	\$ 1,000 - 1,499	68	13%
Two Parent Family	59	12%	\$ 1,500 - 2,499	44	9%
Unknown	3	1%	\$ 2,500+	5	1%
Grand Total	513	100%	Grand Total	513	100%

*Note:* HSC criteria used to define Chronic Homelessness include Prior Living Situation as Emergency Shelter, Place not meant for Habitation, or Staying with Friends or Family, and Length of Stay as 3 months or longer. These criteria are slightly different than the HUD criteria for Chronic Homelessness adopted in July 2013.



**Table 5.2. Chronically Homeless**

**Head of Household Demographics**

<b>Age</b>	<b># of Households</b>	<b>% of Total</b>
< 18	2	0%
18 - 29	184	36%
30 - 39	124	24%
40 - 54	143	28%
55 - 61	46	9%
62+	14	3%
<b>Grand Total</b>	<b>513</b>	<b>100%</b>

<b>Education Level</b>	<b># of Households</b>	<b>% of Total</b>
No Schooling Completed	3	1%
Nursery School to 8th Grade	9	1%
9th - 12th Grade (no diplom.	106	21%
High School Diploma or GED	225	44%
Post Secondary School	105	20%
Unknown	65	13%
<b>Grand Total</b>	<b>513</b>	<b>100%</b>

<b>Substance Abuse</b>	<b># of Households</b>	<b>% of Total</b>
Alcohol	17	3%
Drug	18	4%
Drug and alcohol	22	4%
None	451	88%
Unknown	5	1%
<b>Grand Total</b>	<b>513</b>	<b>100%</b>

<b>Mental Illness</b>	<b># of Households</b>	<b>% of Total</b>
Yes	120	23%
No	389	76%
Unknown	4	1%
<b>Grand Total</b>	<b>513</b>	<b>100%</b>

<b>Disability</b>	<b># of Households</b>	<b>% of Total</b>
Yes	181	35%
No	314	61%
Unknown	18	4%
<b>Grand Total</b>	<b>513</b>	<b>100%</b>

***Housing programs for Chronically Homeless households in Kitsap County.***

There is emergency shelter available to chronically homeless individuals who have no income or very little income. Please refer to the Housing Inventory chart, Table 8.1 on page 33 for details. All of these options require consent for abstinence and case management services. Similarly, transitional housing is also available to chronically homeless individuals with Medicaid or some other source of income, so long as the individual is willing to comply with program treatment and case management requirements.

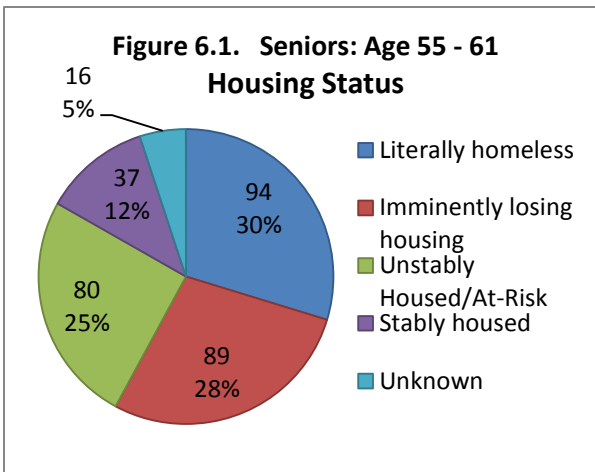
**Elderly Homelessness**

In 2005 a study by the National Alliance to End Homelessness estimates homeless elders as representing 10% to 15% of the total homeless population (Gibeau, 2001). Additionally, it is predicted that the number of homeless elders will continue to rise as the baby boomer generation

is experiencing the highest wage inequality of any recent generation (Gonyea, Dick, & Bachman, 2010).

Elderly homeless are likely to have an income just above the poverty threshold, most of who rely primarily on limited benefits from Social Security or Supplemental Security Income (SSI) (Gonyea, Dick, & Bachman, 2010). In combination with what is widely viewed as a lack of affordable housing, these are major barriers contributing to elderly homelessness.

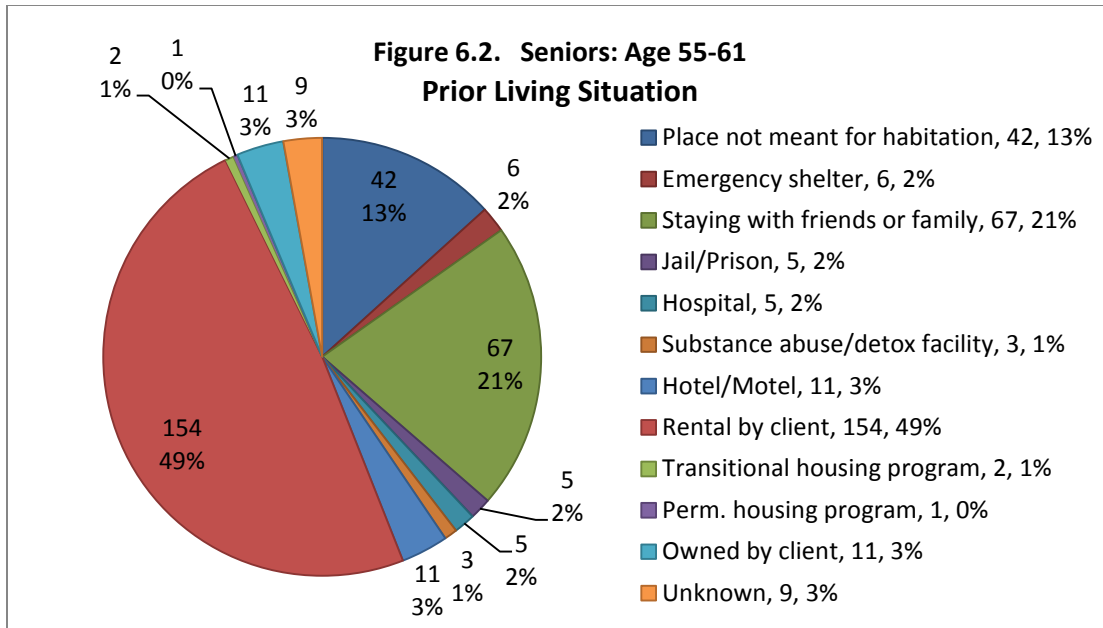
**HMIS summary.** HMIS data is summarized into two categories: ages 55-61, and 62+ in order to compare data with subsidized senior housing availability and requirements.



**Ages 55-61.** A total of 316 household comprising 422 individuals sought housing services in Kitsap County during the time frame of February 1, 2012 to May 31, 2013. Figure 6.1 shows the housing status of these households.

Table 6.1. Seniors: Ages 55-61

Household Statistics			
<b>Family Composition</b>			
	# of Households	% of Total	
Single Woman	121	38%	
Woman with Child	12	4%	
Single Man	111	35%	
Man with Child	5	2%	
Adults without Children	52	16%	
Two Parent Family	13	4%	
Unknown	2	1%	
Grand Total	316	100%	
<b>Monthly HH Income</b>			
	# of Households	% of Total	
\$0	70	22%	
\$1 - 349	13	4%	
\$350 - 699	62	20%	
\$700 - 999	74	23%	
\$1,000 - 1,499	62	20%	
\$1,500 - 2,499	29	9%	
\$2,500+	6	2%	
Grand Total	316	100%	



**Table 6.2. Seniors: Ages 55-61**

**Head of Household Demographics**

**Disability**

	# of Households	% of Total
Yes	181	57%
No	117	37%
Unknown	18	6%
Grand Total	316	100%

**Education Level**

	# of Households	% of Total
5th-8th Grade	5	2%
9th - 12th Grade (no diploma)	28	9%
High School Diploma or GED	133	42%
Post Secondary School	99	31%
Unknown	51	16%
Grand Total	316	100%

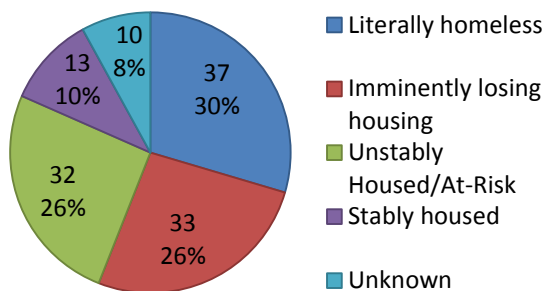
**Substance Abuse**

	# of Households	% of Total
Alcohol	13	4%
Drug	2	1%
Drug and alcohol	5	2%
None	284	90%
Unknown	12	4%
Grand Total	316	100%

**Mental Illness**

	# of Households	% of Total
Yes	78	25%
No	227	72%
Unknown	11	3%
Grand Total	316	100%

**Figure 6.3. Seniors: Age 62 and older  
Housing Status**



**Ages 62 and older.** There were 125 households age 62 and older, comprising a total 159 individuals, who sought housing services from HSC between February 1, 2012 and May 31, 2013. Of these, 30% were literally homeless, and another 26% were imminently losing their housing (see table 6.3).

**Table 6.3. Seniors: Ages 62+**

**Household Statistics**

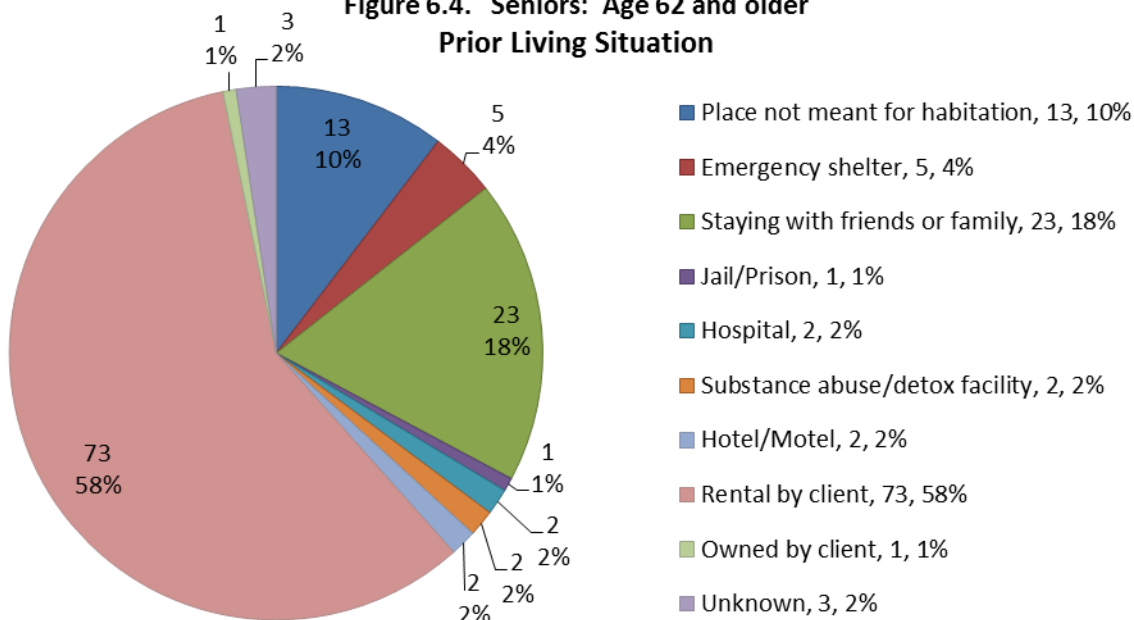
**Family Composition**

	# of Households	% of Total
Single Woman	51	41%
Woman with Child	3	2%
Single Man	36	29%
Man with Child	1	1%
Adults without Children	31	25%
Two Parent Family	3	2%
Grand Total	125	100%

**Monthly HH Income**

	# of Households	% of Total
\$ 0	10	8%
\$ 1 - 349	2	2%
\$ 350 - 699	22	18%
\$ 700 - 999	40	32%
\$ 1,000 - 1,499	33	26%
\$ 1,500 - 2,499	11	9%
\$ 2,500+	7	6%
Grand Total	125	100%

**Figure 6.4. Seniors: Age 62 and older  
Prior Living Situation**



Though it appears that there is relatively little chronic homelessness among seniors over 62, and most have some form of income, the indication is that there is not enough affordable senior housing units to meet the growing demand in Kitsap County.

**Table 6.4. Seniors: Ages 62+**

Head of Household Demographics			
<b>Disability</b>		<b># of Households</b>	<b>% of Total</b>
Yes		67	54%
No		51	41%
Unknown		7	6%
Grand Total		125	100%
<b>Education Level</b>		<b># of Households</b>	<b>% of Total</b>
Nursery School to 4th Grade		2	2%
5th -8th Grade		5	4%
9th - 11th Grade		14	11%
High School Diploma or GED		43	35%
Post Secondary School		40	32%
Unknown		21	17%
Grand Total		125	100%
<b>Substance Abuse</b>		<b># of Households</b>	<b>% of Total</b>
Alcohol		3	2%
Drug and alcohol		1	1%
None		118	94%
Unknown		3	2%
Grand Total		125	100%
<b>Mental Illness</b>		<b># of Households</b>	<b>% of Total</b>
Yes		16	13%
No		107	86%
Unknown		2	2%
Grand Total		125	100%

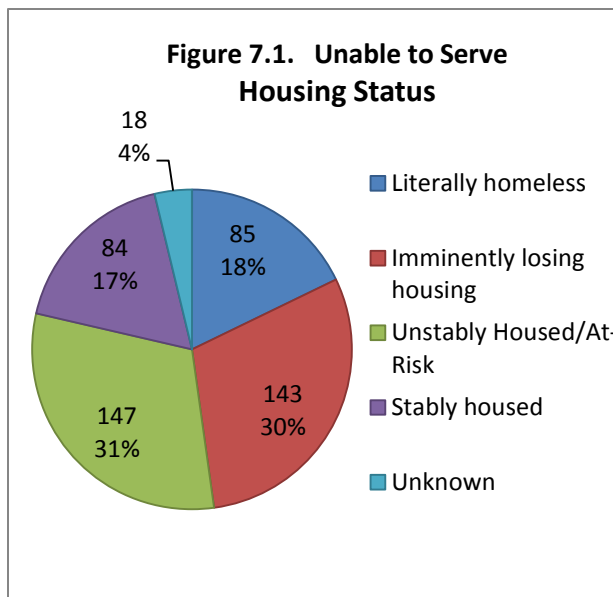
**Existing Programs to Serve Elderly Homeless in Kitsap County.** For seniors whose primary barrier is income, there are several programs and services available to assist with obtaining affordable housing, though there is almost always a long wait list for an opening. The Bremerton Housing Authority (BHA) reports that the waitlist for Tenant Based Housing Vouchers has been closed for five years. Additionally, BHA has announced that the waitlist for their public housing closed on July 31, 2013. Housing Kitsap estimates that there have been as many as 2,000 households on their waitlist for project based subsidized housing. As an example, the Hostmark Apartments in Poulsbo estimates their current wait time to be two years.

**HSC Summary of Those Who Could Not Be Served**

In August of 2012 HSC launched a program to track those who could not be served by HSC, indicated household characteristics and why they could not be served. Though this data is not concerned specifically with the underserved populations, it does provide useful perspective about underserved populations.

**HMIS summary.** There were 477 households with 1,028 individuals who were unable to be served by HSC from August of 2012 through May of 2013. Figure 7.1 shows that:

- 18% are Literally Homeless
- 30% are Imminently Losing Housing
- 31% are Unstably Housed/At Risk
- 17% are Stably Housed
- 4% are Unknown



**Table 7.1. Unable to Serve Program (August 2012 - May 2013)**

Household Statistics			
<b>Family Composition</b>			
	<b># of Households</b>	<b>% of Total</b>	
Single Woman	103	22%	
Woman with Child	118	25%	
Single Man	88	18%	
Man with Child	10	2%	
Adults without Children	54	11%	
Two Parent Family	101	21%	
Unknown	3	1%	
Grand Total	477	100%	
<b>Monthly HH Income</b>			
	<b># of Households</b>	<b>% of Total</b>	
\$ 0	119	25%	
\$ 1 - 349	46	10%	
\$ 350 - 699	93	19%	
\$ 700 - 999	65	14%	
\$ 1,000 - 1,499	75	16%	
\$ 1,500 - 2,499	56	12%	
\$ 2,500+	23	5%	
Grand Total	477	100%	

The majority of households who could not be served are single women and single women with children, comprising 47% of the population. Though the single largest income category is of those who have no income (25%), income is fairly evenly distributed throughout all income brackets.

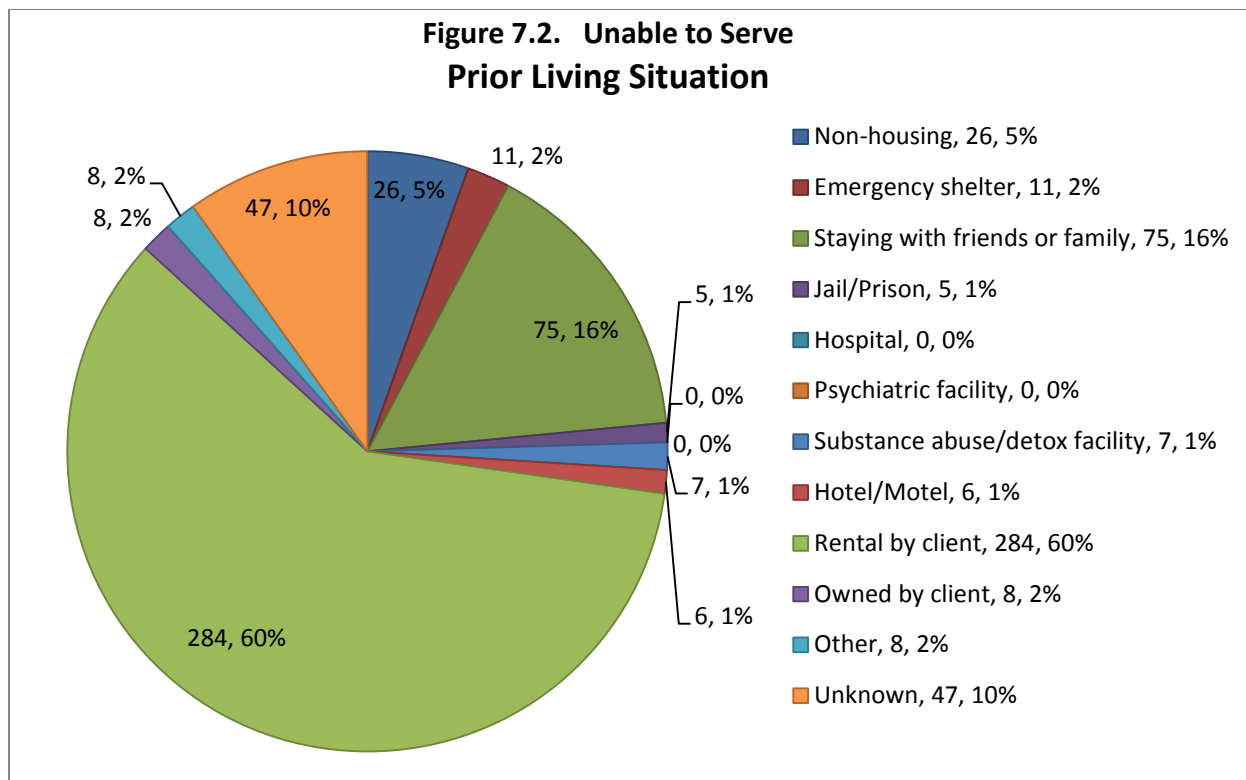


Figure 7.2 shows Prior Living Situation for households that were unable to be served. While the majority of households who could not be served have most recently been living in their own rental unit, a large portion of households who could not be served are also comprised of people who have been staying with friends or family, and those who have no housing.

**Table 7.2. Unable to Serve Program**

Reason Unable to Serve		
Reason	# of Households	% of Total
Client on Section 8	62	13%
Client Owes Too Much Back Rent	1	0%
No funding for Oxford House	21	4%
No Resource for Couple	12	3%
No Resource for Medical/Mental	2	0%
No Resource for Mobile Home	5	1%
No Resource for Pet	5	1%
Client Over Income	76	16%
Client Under Income	142	30%
Other Reason	11	2%
Previously Served by KCR Funds	43	9%
Rent/Deposit Funds Unavailable	75	16%
Criminal Background	22	5%
<b>Grand Total</b>	<b>477</b>	<b>100%</b>

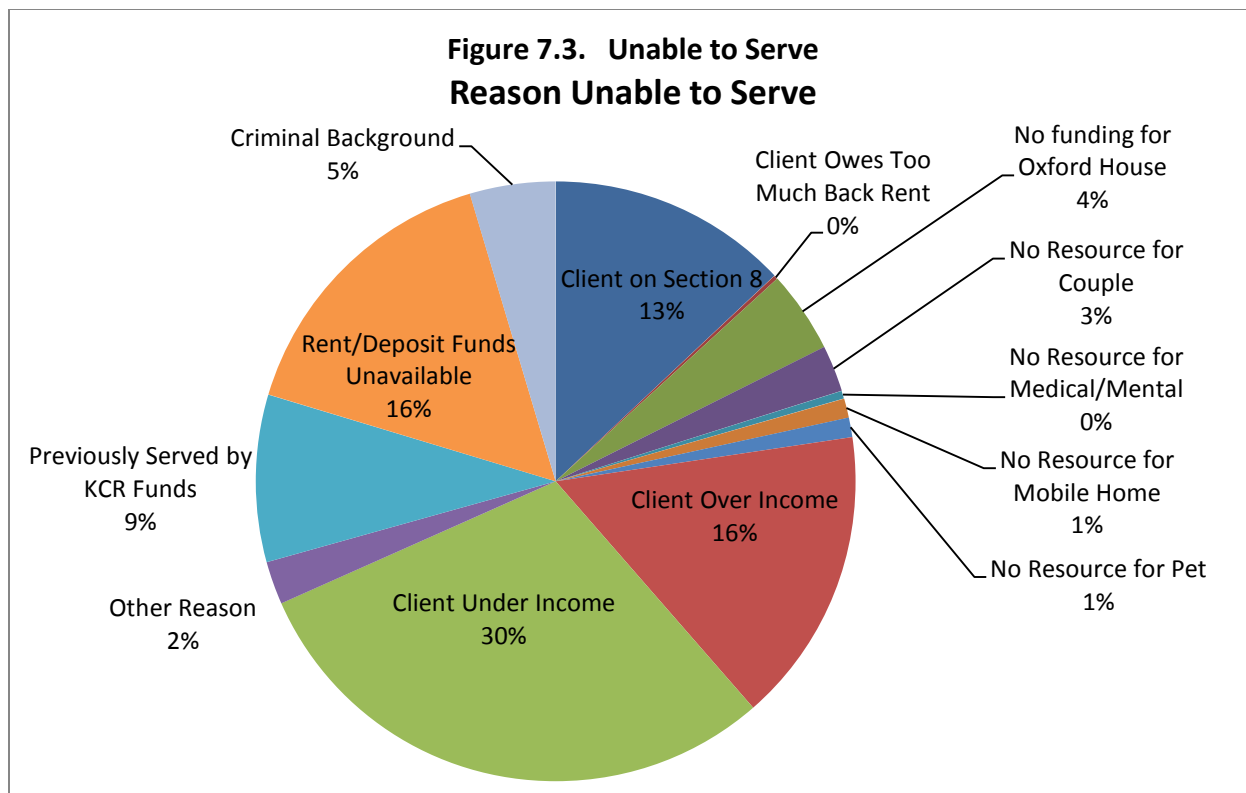


Figure 7.3 shows the reason why the households were not able to be served. Money is the primary reason why people could not be served, either because they were under income and did not have enough financial resources to maintain rent (30%), or because they were over income and did not qualify for HSC services (16%). Note: HSC employs HUD “Extremely Low Income Limits” which is 30% of the Area Median Income (AMI) to define “over-income”. In Kitsap County, the 2013 AMI is \$73,100, and the 30% income limit for a 2-person household (the average household size of those seeking housing services from HSC) is \$17,600 per year. Washington’s minimum wage rate is \$9.19 per hour. A full time minimum wage worker in Washington will earn \$19,115.20 per year. Therefore, one full time minimum wage worker in a 2-person household will be “over- income” for many housing services, including HSC.



Lack of funding is also a major reason why HSC was unable to provide services to those who qualify. 20% of households who could not be served was due to lack of funding for rent or deposit assistance, and for Oxford House.

Specific to the Underserved populations, those with Criminal Backgrounds are most difficult to serve. 5% of the Unable to Serve population were those with criminal backgrounds. Those seeking clean and sober housing to support abstinence from substance abuse account for 4% of those who could not be served. There were two households with medical/mental needs who could not be served. No data is available for elderly individuals or those re-entering from foster care.

### **Types of Housing**

Kitsap County has numerous organizations that offer emergency shelter and housing services to a variety of homeless households. Table 8.1., beginning on page 34, provides a detailed inventory of emergency, transitional, permanent supportive, and subsidized housing in Kitsap County as well as rental assistance programs. Below is a brief summary of homeless housing available in Kitsap County.

**Severe weather shelter.** There is one Severe Weather Shelter in Kitsap County, located in Bremerton. Severe Weather Shelter is an overnight emergency shelter that operates only as needed under severe weather conditions. No income is required to stay at a Severe Weather Shelter, and there are no restrictions other than that people mind their manners. There are no beds provided at Severe Weather Shelter, though there may be cots or mats available.

**Overnight shelter.** There is no Unconditional Overnight Shelter in Kitsap County. Hope in Christ Ministries/Coffee Oasis operates one Youth Overnight Shelter that serves ages 16-20 Overnight Shelters open in the evening and close in the morning, and requires people to

check their belongings when they enter and to take them when the shelter closes in the morning. Overnight Shelters do not require income, and may or may not screen for criminal background.

**Emergency shelter.** There are numerous private and faith based Emergency Shelter providers in Kitsap County. Emergency Shelter provides up to three months of housing and usually does not require income. People may have their own room and keep some personal belongings with them. All emergency shelters in Kitsap County require enrollment and participation in programs for self-improvement and stabilization of a variety of kinds including substance abuse or mental health treatment.

There are nine emergency shelters in Kitsap County that serve homeless single men, homeless single women, homeless single women with children (boys under 13), homeless families with children, women fleeing domestic violence, and single men or women with chemical dependencies. They all screen background and may or may not consider criminals on a case by case basis.

**Transitional housing.** Housing up to 1 or 2 years depending on the program. Requires some form of income and rent is typically 30% of gross adjusted income. All transitional housing programs in Kitsap County require intensive case management and most screen for criminal background.

There are 11 transitional housing programs allowing stays up to one or two years, sometimes longer, that serve homeless individuals with severe and persistent mental illness, households with children, single men, male and female veterans, chemically dependent chronically homeless single men, and single women and families with children.

**Conditional permanent supportive housing.** Provides subsidized housing for as long as it is needed and as long as the household participates with program requirements and case

management. All programs require income and that rent be paid, typical at 30% of income, and require screening for criminal backgrounds.

There are several permanent supportive housing programs in Kitsap County offered by Housing Kitsap, Bremerton Housing Authority, Kitsap Community Resources, Kitsap Mental Health Services, West Sound Treatment Center, Agape Unlimited, Catholic Community Resources, and the YWCA of Kitsap County that provide clients with housing in congregate homes, individual apartments, and single family residences.

**Private rooming houses and single room occupancy (SRO).** SRO's provide housing on a month to month (sometimes a week to week) basis without a lease and requires market rate rent to be paid. Private Rooming Houses and SRO's typically do not offer any supportive services. This is the most accessible housing for offenders with critical felonies including sex offenders. There are many private landlords who offer this kind of housing, and the Department of Corrections and Kitsap Community Resources each keep separate lists of private landlords with rooms to rent.

*Oxford House* is a highly successful clean and sober rooming house model in which all applicants agree to a code of conduct and residents vote to accept applicants. Oxford houses rent rooms at market rate and offers no case management, but ensures a supportive environment for clean and sober living.

**Project based subsidized housing for seniors.** There are two categories for unassisted subsidized senior housing; those ages 55 and older, and those ages 62 and older. In either case, applicants must have income and are screened for criminal background, credit, and uncollected rent or damages from previous landlords. There are several senior housing complexes in Kitsap County under the ownership of Housing Kitsap and the Bremerton Housing Authority (BHA), as well as several privately owned and managed complexes. Several of the complexes for ages 62

and over are fully subsidized, with 100% of the units charging rent at 30% of gross adjusted income. Other senior housing complexes, including all of those for ages 55 and over, have some subsidized units but not all.

An important barrier to the partially subsidized complexes is that it is extremely improbable (though not impossible) for an applicant to move into a subsidized unit. When a subsidized unit becomes available, it is assigned to a qualified existing tenant who has been rent burdened and paying the unsubsidized basic rent before being offered to an applicant on the waitlist.

**Project based subsidized housing for individuals and families.** Housing for households who have income and pass screening and background checks for criminal record, credit, and uncollected rent or damages. Like senior housing, some are fully subsidized complexes and others are partially subsidized. Housing with full subsidy typically have waitlists that are years long, while the others require moving in and paying unsubsidized rent until a subsidized unit comes available.

**Tenant based housing vouchers.** A subsidy program in which a voucher is given to an individual household for a fixed dollar amount. The tenant can use the voucher for any rental they prefer where the landlord accepts rent vouchers and the terms for Fair Housing Standards.

### **Housing Programs and Services in Kitsap County**

The community of homeless housing and service providers within Kitsap County, called the Continuum of Care Coalition (COCC) is a closely connected network of public and private organizations with feet on the ground, working effectively together in a cooperative, collaborative, and supportive manner, often times reaching out to each other to craft creative solutions to a particularly difficult immediate housing needs that don't fit snugly into a

predefined category. In response to observing this, one provider commented “there is a lot of respect for one another in the community”.

The network of housing service providers is a dynamic community where communication and coordination between housing and service providers is an important aspect to addressing critical housing needs. The Continuum of Care Coalition (CoCC) provides a forum for discussion and planning, and the Housing Solutions Center was established in 2012 to coordinate housing referrals. Treatment providers in substance abuse and mental illness work with each other in a supportive network to find a bed for the most critical needs. Many homeless housing providers will consider critical housing needs, including those for criminals, on a case by case basis.

Table 8.1 is a comprehensive inventory of shelter and housing in Kitsap County for households with no or limited income and other barriers to housing.

Table 8.1. Kitsap County Homeless Housing: Shelters, Transitional, Permanent Supportive, Federally Subsidized, and Rental Assistance Programs

SHELTERS							
<b>Tent City</b>							Total Tent Sites
Provider Organization	Facility	Address of Facility	Eligible Populations	Restrictions	Bed Source	Level of Service	
NONE							
<b>Safe Car Park</b>							Total Parking Spaces
Provider Organization	Facility	Address of Facility	Eligible Populations	Restrictions	Bed Source	Level of Service	
KCR	Family Safe Car Park	Undisclosed Location	Households with children	Background Check	Cars - 3 mo.	min/none	8
Salvation Army	Single Men & Couples Car Park	Undisclosed Location	Single Men & Couples (pets ok)	Case by Case Consideration	Cars - 30 days	min/none	5
North Kitsap Fishline	Women w/kids Safe Car Park	Undisclosed Location	Single Women with Children	Background Check	Cars - 3 mo.	min/none	5
<b>Severe Weather Shelter</b>							Total Homeless Beds
Provider Organization	Facility	Address of Facility	Eligible Populations	Restrictions	Bed Source	Level of Service	
Kitsap County - CEN COM	Severe Weather Shelter	Various Locations	All	none	congregate/mats & cots	min/none	na
<b>Overnight Shelter (up to 1 month - closed during the day)</b>							Total Homeless Beds
Provider Organization	Facility	Address of Facility	Eligible Populations	Restrictions	Bed Source	Level of Service	
NONE	<b>Unconditional Overnight Shelter</b>						0
Hope in Christ Ministries	Oasis Hope House	832 Burwell	Youth - Men/Women ages 16-20	Screen & Background check	congregate facility	Case Mgmt. - Outreach	8
<b>Emergency Shelter ( 1 to 3 months - No Income Required)</b>							Total Homeless Beds
Provider Organization	Facility	Address of Facility	Eligible Populations	Restrictions	Bed Source	Level of Service	
Kitsap Mental Health Services	Keller House	5455 Almira	Single Men and Women w/ severe mental illness	limit 30 days - individually assessed for appropriateness	congregate facility	comprehensive case mgmt.	11
West Sound Treatment Ctr.	The Lighthouse	Port Orchard	Homeless men in crisis	case by case consideration	congregate facility	Required case mgmt.	1
Catholic Community Svcs.	Benedict House Emergency Beds	250 S. Cambrian Ave., Brem.	Homeless Single Men	Screen & Background - No Felonv. No Substance Abuse	congregate facility	Accommodates shift workers	14
Kitsap Community Resources	The Family Place	Silverdale	Homeless Women w/children	Background Check - No drugs/Alcohol or in Treatment	congregate facility	req case mgmt. - self improvement	18
Weaver Foundation	Georgia's House	4846 Auto Center Way, Brem.	DV - Women, Women w/Children (boys<13)	Screen & background. No men. No boys 13+	congregate facility	Required case mgmt.	24
Kitsap Community Resources	Bremerton	Emergency Housing	Homeless Households w/children	Background Check - No drugs/Alcohol or in Treatment	2 Units. 3 bedrooms each	Some - Self Improvement	12
St. Olaf's Church/ Kitsap Community Resources	Simon's Place	Poulsbo	Households w/children	Background Check - No drugs/Alcohol or in Treatment	Single Family Home	Case management self-improvement	6
Kitsap Recovery Center	The Guest House	1975 NE Fuson Rd	Single Men/Women - substance abuse	No children/families	congregate facility	Intensive substance abuse treatment	6
St. Vincent de Paul	Birkenfeld Stella Maris House	1134 N Wycoff.	Women with Children (boys<13)	Screen and background.	congregate facility	Clients Advocates	17
YWCA Kitsap County	ALIVE Shelter	905 Pacific Ave	DV - Single women & women w/children	Screen and background	multi-family home	Clients Advocates	17
Church/KCR	Manette Fran's House	Bremerton		Background Check - No drugs/Alcohol or in Treatment	Single Family Home - 3 bdrm.	some: self-improvement	6
Church/KCR	Silverdale Cottage	Silverdale	single woman w/young child only	Screen - No drugs/Alcohol or in Treatment	Single Family Home - Studio cottage	some: self-improvement	2

Compiled by Marta Holt, MPA Candidate, Seattle University, August 2013

Table 8.1. Kitsap Homeless Housing: Shelters, Transitional, Permanent Supportive, Federally Subsidized, and Rental Assistance Programs

Transitional Housing							
<b>Transitional Housing (up to 1 year)</b>							
Provider Organization	Facility	Address of Facility	Population Served	Restrictions	Bed Source	Level of Service	Total Beds
Catholic Community Svcs.	Benedict House Transitional	250 S. Cambrian Ave., Brem	Single Men	Up to 1 year. No Offenders. requires income rent 30%	congregate facility	Monthly case mgmt & bettering activities	10
<b>Transitional Housing (up to 2 years)</b>							
Provider Organization	Facility	Address of Facility	Population Served	Restrictions	Type of Housing	Level of Service	Total Beds/ households (hh)
Agape Unlimited	Sisyphus II Housing Project - Project Base	1323/1329 Crawford, Bremerton	Single men & women - No Children	Clean & Sober: enrolled in substance abuse treatment, homeless, disabled	2 - 5 bedroom homes	Highly structured case management	18
Agape Unlimited	Sisyphus II Housing Project - Sponsor Base	Scattered Sites	Single Male/Female and Households with Children	Clean & Sober: enrolled in substance abuse treatment, homeless, disabled	individual units	Unit is leased by Agape & sublet to participants	14+
AGAPE Unlimited	Koinonia Inn	806 Bay St., Port Orchard	Women w/Children <11. Must be enrolled in Substance Abuse Trtmt Prgrm	Clean & Sober: enrolled in substance abuse treatment, homeless, disabled	congregate facility	Staffed 7 days/week - Clean & Sober: Substance Abuse treatment	4
Catholic Community Svcs.	Benedict House Transitional	250 S. Cambrian Ave., Brem	Single Men with Children	Income req'd rent 30%. Background Check. No Chemical Dependency	1 furnished family unit	Weekly site monitor & bettering activities	1 hh
Kitsap Community Resources	SHP Transitional Housing	634-636 N. Montgomery - Opal Court	Households with children	Income req'd rent 30%. Background check. No drugs/alcohol or in treatment	8 - 2 bedroom Apartments	Some: Self-Improvement - Focus on Employment	8 hh
Kitsap Community Resources	SHP Transitional Housing	711 Hewitt, Bremerton	Households with children	Income req'd rent 30%. Background check. No drugs/alcohol or in treatment	4 - 2 bedroom apts	Some: Self-Improvement - Focus on Employment	4 hh
Kitsap Community Resources	SHP Transitional Housing	Kendall, Bremerton	Households with children	Income req'd rent 30%. Background check. No drugs/alcohol or in treatment	2 - 3 bdrm units	Some: Self-Improvement - Focus on Employment	2 hh
Housing Kitsap w/ KMHS	Liberty Bay - Port Orchard	Harris Rd., Port Orchard	Individuals with Persistent and severe mental health illness.		4 plex	comprehensive mental health case management	4
Kitsap Rescue Mission	Fresh Start	1003 - 5th St., Bremerton	Single Men	No felony, No substance abuse/treatment	congregate facility	Self Improvement	8 beds
WA Dept of Veterans Affairs	Building 9 for Veterans	1141 Beach Dr. E., Retsil (P.O.)	Veterans - single men and women	Veterans Only	congregate facility	some	60
West Sound Treatment Center	The Lighthouse	1415 Lumsden Rd., Port Orchard	Chemically Dependent, Homeless, Single Men	Income req'd. Rent = 30% income. SSI is okay. No pets, no children, no women	multi-family home	Rqd case mgmt: mental health, chem depend., vocational.	8
West Sound Treatment Center	O'Hana House	1415 Lumsden Rd., Port Orchard	Chem Dependent, Homeless Women with children	No men. No pets. No Couples. Must have SSI	multi-family home	Rqd case mgmt; mental health, chem depend., vocational	13
YWCA Kitsap County	Eli's House	Poulsbo			duplex	required case management	2 units
YWCA Kitsap County	Tersha's House	Silverdale			duplex	required case management	2 units
<b>Boarding Houses, Half-way Houses, Rooming Houses, Single Room Occupancy</b>							
Provider Organization	Facility	Address of Facility	Population Served	Restrictions	Type of Housing	Level of Service	Total Beds
Oxford House	Scattered Sites	Bainbridge Island, Kingston, Bremerton, Port	Single Men. Clean & Sober	Drugs/Alcohol - immediate eviction	14 multiple rooming houses	reqs personal compliance with mandatory treatments	116
Oxford House	Scattered Sites	Bremerton & Port Orchard	Single Women. Clean & Sober	Drugs/Alcohol - immediate eviction	4 multiple rooming houses	reqs personal compliance with mandatory treatments	32
Oxford House	Cascade View	3302 Bootleg Hill Pl. NE, Brem.	Women w/children. Clean and Sober	Drugs/Alcohol - immediate eviction	1 Rooming house	reqs personal compliance with mandatory treatments	8
Fresh Start Transitioning	Naval Fresh Start House	1551 Naval Ave., Bremerton	Single Men. Felony Offenders	Clean & Sober, no women, no children	Congregate facility - Rooming House	DOC & Case Mgmt support, job search, resume, interview prep	9

Table 8.1. Kitsap Homeless Housing: Shelters, Transitional, Permanent Supportive, Federally Subsidized, and Rental Assistance Programs

**Permanent Supportive Housing**

<b>Housing First, Harm Reduction Model (case management is encouraged but optional - abstinence is not required)</b>							Total Beds
Provider Organization	Facility	Address of Facility	Eligibility	Restrictions	Bed Source	Level of Service	Total Beds
West Sound Treatment Center/BHA	Forward Bound Program	Scattered Sites	High level needs households of women with children	No single men/women, felony, sex offender, couples, pets	14 single-family homes	Rqd intensive case mgmt: WRAPS, Harm Reduction	43

<b>Permanent Supportive Housing (case management and treatment is required)</b>							Total Beds
Provider Organization	Facility	Address of Facility	Eligibility	Restrictions	Bed Source	Level of Service	Total Beds
Agape Unlimited	Sisyphus II Housing Project - Tenant Base	Scattered Sites	Single Male/Female and Households with Children	Clean & Sober: enrolled in substance abuse treatment, homeless, disabled	individual units	Lease in Participants name to est rental & pymt history	8+
Kitsap Mental Health Svcs	Keller House	5455 Almira, Bremerton	single men and women - mental illness	Severe and Persistent Mental Illness	congregate facility	comprehensive case management	5
Catholic Community Svcs	Max Hale	285 - 5th St., #1, Bremerton	Single men and women	33 units reserved for formerly homeless men and women	multi-family complex	Optional - case management	33
Housing Kitsap	Chico Passage	7011 Chico Way, Bremerton	Single men and women		multi-family home	optional case management , comprehensive for disabled	
Housing Kitsap w/KMHS	Liberty Bay - Bremerton	4010 & 4012 Petersville Rd., Brem	Single Men/Women. families w/kids. Mental Illness		2- 4 plexes	comprehensive mental health case management	8
KMHS/BHA	Scattered Sites (4 PBV units)	Bremerton	Single men and women with mental health illness		4 congregate home sites	comprehensive mental health case management	
KMHS/BHA	Burwell Place	1724 Burwell, Bremerton	single male/female	felony, sex offender, couples, children, pets	multi-units	req, comprehensive for disabled	8 units
Kitsap Mental Health Svcs	Staffed Housing	4900 Auto Center Way, Bremerton	single male/female	felony, sex offender, couples, children, pets	multi-units	req, comprehensive for disabled	22 units
Kitsap Mental Health Svcs	Supported Living Program	Scattered sites	Single Male/Female and Households with Children	felony, sex offender, couples, pets	12 houses	req, comprehensive for disabled	35
KCR/BHA	PBV - Project Based Voucher	2819/2821 21st St., Bremerton	households with children - BHA approval	background check - no drugs/alcohol - No Social Security Income	2 - 2 bdrm units	Focus on Employment - self sufficiency	2 hh
KCR/BHA	PBV - Project Based Voucher	711 Hewitt, Bremerton	households with children - BHA approval	background check - no drugs/alcohol - No Social Security Income	2 - 2 bdrm units	Focus on Employment - self sufficiency	2 hh
KCR/BHA	PBV - Project Based Voucher	9th & 12th St. Duplexes, Brem	households with children - BHA approval	background check - no drugs/alcohol - No Social Security Income	2 - 3 bdrm units	Focus on Employment - self sufficiency	2 hh
KCR/BHA	PBV - Project Based Voucher	634 Montgomery - Opal Court, Bremerton	households with children - BHA approval	background check - no drugs/alcohol - No Social Security Income	3 - 2 bdrm units	Focus on Employment - self sufficiency	3 hh

Compiled by Marta Holt, MPA Candidate, Seattle University, August 2013



Table 8.1. Kitsap Homeless Housing: Shelters, Transitional, Permanent Supportive, Federally Subsidized, and Rental Assistance Programs

**Permanent Housing with Subsidies through HUD, USDA-RD, or Tax Credit. Qualifications & Restrictions Apply**

Permanent Project Based Subsidized Apartments - Senior					Total Units	Subsidy Units	Studio	1 bdrm	2 bdrm	3+ bdrm
Owner	Facility	Address of Facility	Target Population	Level of subsidy						
Housing Kitsap	Golden Tides I	9265 Bayshore Dr, Silverdale	62+ AND Disabled	100%	15	15				
private ownership	Pinewood Manor	280 Silvan Way, Bremerton	62+ or Disabled	100%	38	38	10	28		
private ownership	Hostmark Apartments I, II, III	703 NE Hostmark, Poulsbo	62+ or Disabled	100%	120	120				
private ownership	Winslow Arms	220 Parfitt Way SW, B.I.	62+	100%	60	60	1	53	6	0
private ownership	Charter House Apartments	1307 Wheaton Way, Bremerton	62+	100%	30	30	0	30	0	0
Housing Kitsap	Golden Tides III	9225 Bayshore Dr., Silverdale	55+	Part	18	3	0	21	0	0
Housing Kitsap	Madrona Manor	3900 Madrona Lane, Port Orchard	55+	Part	40	10	0	38	2	0
Housing Kitsap	Golden Tides II	9239 Bayshore Dr., Silverdale	55+ or Disabled	Part	44	10	0	41	3	0
private ownership	Virginia Villa Apartments	200 High School Rd, B.I.	55+ or Disabled	part	40	20	0	36	4	0
Bremerton Housing	Bay Vista Assist Lvg & Mem Care	Bremerton	62+	part	72	47				
Housing Kitsap	Port Orchard Vista	900 Mitchell Ave., Port Orchard	62+	part	42	21				
private ownership	Tamarack Apartments	3511 Almira, Bremerton	62+	part	82	74	0	82	0	0
Housing Kitsap	Fjord Manor	19581 - 1st Ave NE, Poulsbo	62+ or Disabled	part	38	20		34	4	
Housing Kitsap	Finch Place	215 SW Finch Pl., B.I.	62+ or Disabled	part	29	20	0	29	0	0
BHA partner w/LIHI	Frank Chopp Place	704 Chester Ave., Bremerton	62+ or Disabled	part	55	14	9	46	0	0
private ownership	Connifer Ridge Apartments	1721 Fircrest Dr SE, Port Orchard	62+ or Disabled	part	40	13	0	40	0	0
private ownership	Silvercrest Apartments	9725 Danwood Ln NW, Silverdale	62+ or Disabled	part	42	19	0	42	0	0

Permanent Project Based Subsidized Multifamily - Individuals/Family					Total Units	Subsidy Units	Studio	1 bdrm	2 bdrm	3+ bdrm
Owner	Facility	Address of Facility	Housing Type	level of subsidy						
Housing Kitsap	Heritage Apts	145 Lippert, Port Orchard	multi-family	100%	56	56	0	8	40	8
Housing Kitsap	Fjord Vista II	19495 - 1st Ave NE, Poulsbo	multi-family	100%	16	16	0	0	14	2
Housing Kitsap	Viewmont East (multi-family)	1904 Pioneer Lane SE, P.O.	multi-family	100%	76	76	0	15	46	15
Housing Kitsap	Nollwood Apartments	385 Nollwood Lane, West Brem.	multi-family	100%	48	48	0			
Housing Kitsap	Coventry Apartments		multi-family	100%	15	15	0			
Housing Kitsap	Austurbruin Apartments		multi-family	100%	10	10	0			

Compiled by Marta Holt, MPA Candidate, Seattle University, August 2013

Table 8.1 Kitsap Homeless Housing: Shelters, Transitional, Permanent Supportive, Federally Subsidized, and Rental Assistance Programs

**Permanent Housing with Subsidies through HUD, USDA-RD, or Tax Credit. Qualifications Apply, continued**

Permanent Project Based Subsidized Multifamily - Individuals/Family - CONT.					Total Units	Subsidy Units	Studio	1 bdrm	2 bdrm	3+ bdrm
Owner	Facility	Address of Facility	Housing Type	level of subsidy						
LIHI	Cedar Heights	333 Lippert Dr NW., Port Orchard	multi-family	100%	51	51	0	10	30	10
privately owned	Marion Court Apartments	3503 Marion Court, Bremerton	multi-family	100%	35	35	0	0	31	4
	Peninsula Glen Apartments	2068 NE Hostmark, Poulsbo	multi-family	100%	29	29	0	0	yes	yes
Housing Kitsap	Rhododendron Apts.	225 High School Rd., B.I.	multi-family	part	50	48	0	38	12	0
Housing Kitsap	Windsong Apartments	19880 3rd Ave NW, Poulsbo	multi-family	part	36	33	0	28	8	0
Housing Kitsap	Park Place Apartments	110 NE Brookdale Lane, Brem.	multi-family	part	86	17	0	0	38	48
Bremerton Housing	The Summit at Bay Vista	Bremerton	multi-family	part	83	7	0			
Bremerton Housing	Bay Vista South	Bremerton	Town-houses	part	68	8	0			
Bremerton Housing	Bay Vista West	Bremerton	Town-houses	part	69	15	0			
Bremerton Housing	Shadow Creek Apartments	3284 Rickey Road NE, Bremerton	multi-family	part		17				
Bremerton Housing	Tara Heights	455 Tara Court, Bremerton	multi-family	part						
privately owned	Danwood Apts	9711 Danwood Lane, Silverdale	multi-family	part	40	8				
privately owned	Island Terrace Apartments	821 High School Rd NE, BI	multi-family	part	48	19	0	12	36	0
privately owned	Winton Woods I	20043 Winton Lane NW, Poulsbo	multi-family	part	39	36	0	10	27	2
privately owned	Wood Creek Apartments	2188 Hostmark St., Poulsbo	multi-family	part	40	15	0	8	28	4

Permanent Project Based Subsidized Single Family Homes - Family					Total Units	Subsidy Units	Studio	1 bdrm	2 bdrm	3+ bdrm
Owner	Facility	Address of Facility	target population	Level of subsidy						
Housing Kitsap	Munson Site		Families	100%	5	5	0	0	0	5
Housing Kitsap	Roy Site		Families	100%	4	4	0	0	0	4
Housing Kitsap	Boundary Lane Site		Families	100%	4	4	0	0	0	4
Housing Kitsap	Olson Site		Families	100%	1	1	0	0	0	1
Housing Kitsap	Fairview Site		Families	100%	33	33	0			

Compiled by Marta Holt, MPA Candidate, Seattle University, August 2013

Table 8.1. Kitsap Homeless Housing: Shelters, Transitional, Permanent Supportive, Federally Subsidized, and Rental Assistance

**Rehousing and Homelessness Prevention Programs - Short Term and Emergency Rental Assistance**

<b>Rapid Re-Housing (Rental Assistance up to 3 months)</b>				Households Served in 2012
Provider Organization	Program	Target Population	Level of Service	
Kitsap Community Resources	Homeless Prevention & Rapid Rehousing Program (HPRP)	Single men and women & households w/children	Short term assist. w/damage deposit, first/last month rent, current rent	41

<b>Rent Assistance - Short Term Voucher Programs and One-Time Emergency Rental Assistance Sources</b>				Max Length of Asst.
Provider Organization	Program	Target Population	Level of Service	
Bremerton Housing Auth.	Supportive Housing Rent Asst.	Households w/children	provider based - some case mgmt.	
Kitsap Community Resources	Rent Assistance			
Kitsap Community Resources	RALF	Households w/children		
Kitsap Community Resources	ESG	Single men and women & households w/children	some case management	up to 2 yrs.
Housing Kitsap	Housing Stabilization Program			
YWCA Kitsap County	Homeless Prevention & Shelter	na	Emergency rental assistance	3 months
WA State Dept. of Corrections	Earned Release Date Housing Voucher	Ex-Offenders including	18 Privately owned boarding houses -	3 months
Catholic Community Svcs	HEN	Single men and women	case mgmt. & homeless outreach	> 2 yrs.
Gateway Fellowship	Rental Assistance	housed individuals/fam	1 time emergency rental assistance	1x/yr.
St. Vincent de Paul	Rental Assistance	housed individuals/fam	1 time emergency rental assistance	1x/yr.
NK Fishline/NK Salvation Army	Rental Assistance	housed individuals/fam	1 time emergency rental assistance	1x/yr.
Housing Resources Board /Helpline	Rental Assistance	housed individuals/fam	1 time emergency rental assistance	1x/yr.

<b>Hotel/Motel Vouchers</b>				Max Length of Stay
Provider Organization	Facility	Address of Facility	Target Population	
Kitsap Community Resources	Veteran's Shelter Voucher	scattered sites	Homeless Veterans with Children	3 nights
Kitsap Community Resources	Hotel Voucher	scattered sites	Homeless with Medical Needs - Need assessed individually	3 nights

Compiled by Marta Holt, MPA Candidate, Seattle University, August 2013

## **Gaps in Housing and Services in Kitsap County**

Though Kitsap County housing providers are able to serve many people who comprise these underserved populations, not all household compositions and housing needs are served within the existing network. This section addresses gaps in housing, services, and programs.

**Emergent themes from subject matter expert’s interviews.** The most immediate gap that emerged in nearly every conversation with subject matter experts was the absence of an unconditional overnight shelter in Kitsap County. There is nowhere in the county for people to go who need shelter immediately, with no conditions other than that they be non-disruptive. Another housing gap that was repeatedly identified is permanent subsidized housing for chronically homeless people who have multiple high barriers. This type of housing is referred to as “Housing First” and is considered a cost-reduction model for harm reduction (see best practices section of report).

In discussing individual populations, felons with no income emerged as the most difficult to serve. Unless offenders with serious felonies have income or support from family, they are more likely to become homeless and unsheltered. There are no shelters that will allow felons for at least three to five years of a conviction, and some organizations maintain a permanent ban on felons. Sex offenders especially are permanently banned from homeless shelters in Kitsap County. Studies have shown that homelessness among this population increases the risk to reoffend.

Conversations with subject matter experts further revealed three household compositions that are mostly unable to be served in Kitsap County, but are not traditionally considered members of the Underserved homeless populations. These are homeless couples, individuals with pets, and mothers with boys over 13.

There is no shelter for couples in Kitsap County. There are emergency shelters for single women, single men, and for households with children, but there is no place for a childless couple to stay together, and so they often decline the separate shelter services that are available to them because they are unwilling to leave their partner who is their primary source of security and comfort.

Similarly, there are no emergency shelters in Kitsap County that will allow pets. A dog or other pet may be the most important relationship, perhaps the only relationship, in a homeless person's life, and they are unwilling to part with that relationship in exchange for shelter or treatment. Though Fair Housing laws requires accommodation for companion animals ( a criteria that is met with a medical doctor's note that the individual requires the companionship of their pet for emotional, mental, physical, spiritual well-being), executing the steps to acquire the doctor's note, and keeping track of the prescription can be difficult for a homeless individual.

There are also few opportunities for a mother to have her teenage son with her. Boys over 13 years old typically must be housed separately from their mothers where other women and children reside.

One of the strongest needs to emerge is that for policies and programs for coordinated discharge from jails, prisons, and hospitals. In researching services and programs for this report we discovered what could be an opportunity for Kitsap County to collaborate with DOC's ERD program for the coordinated discharge of offenders into the community. There is also a need to develop policies and a coordinated discharge program for housing those homeless individuals being released from the Kitsap County Jail and Harrison Hospital.

Table 9.1 is an at-a-glance matrix of the housing facilities and underserved homeless populations, and shows who can and cannot be served currently in Kitsap County. Green indicates that housing options are available to the specific population; red indicates that there is

no housing option for that population; yellow indicates that there is consideration on a case by case basis, and blue indicates outreach and referral services are available.

To summarize, the matrix shows that there is:

- No Overnight Shelter available to any group apart from youth ages 16-20.
- No Housing First, Harm Reduction model of permanent supportive housing for chronically homeless individuals (other than women with children).
- Felons and sex offenders with no income are the most difficult to shelter/house.
- No respite shelter for people released from hospitals who need to convalesce.
- No shelter or emergency housing where couples can stay together.
- No shelter for mothers with boys over the age of 13.
- Just one Severe Weather Shelter in all of Kitsap County.
- No Sanctioned Tent City in Kitsap County
- Not enough project based subsidized housing units for senior citizens 55 and over.
- No coordinated discharge program from hospitals and jails.

Table 9.1 Housing Matrix

Housing Matrix		Population Served											
		No Income	Men Only	Women Only	Women w/children	Men w/children	Couples	Families w/children	Pets	Felony	Sex-Offender	Substance Abuse Treatment	Mental Illness Treatment
Type of Shelter/Housing	Tent City	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red
	Safe Car Park	Green	Green	Green	Green	Green	Green	Green	Green	Red	Red	Blue	Blue
	Severe Weather Shelter	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Blue	Blue
	Overnight Shelter (up to 30 days) - Unconditional	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red
	Overnight Shelter (up to 30 days) - Youth ages 16-21	Green	Green	Green	Red	Red	Red	Red	Red	Red	Red	Blue	Blue
	Emergency Shelter (3 month)	Green	Green	Green	Green	Green	Red	Green	Red	Red	Red	Green	Green
	Transitional Housing (up to 1 year)	Red	Green	Green	Green	Green	Red	Red	Red	Green	Red	Green	Green
	Transitional Housing (up to 2 years)	Red	Green	Green	Green	Green	Green	Green	Red	Yellow	Yellow	Green	Green
	Permanent Supportive Housing - Required Treatment & Case Mgmt	Red	Green	Green	Green	Green	Green	Green	Red	Yellow	Yellow	Green	Green
	Permanent Supportive Housing - Housing First: Harm Reduction with optional treatment and case mgmt	Red	Red	Red	Green	Red	Red	Red	Red	Red	Red	Red	Red

<b>KEY</b>	Housing Options are Available	Cannot Be Housed	Case by Case Consideration	Outreach Services & Case Mgmt
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Created by Maria Holt, MPA Candidate, Seattle University, August 2013

**Missed Opportunities.** The Kitsap Rescue Mission had been working toward opening an unconditional overnight shelter in Bremerton, but has stopped work on the project due to community opposition. Similarly, the West Sound Treatment Center was working on opening a project based Housing First model facility for chronically homeless men at Calvinwood, but this project too is no longer being pursued due to lack of time and resources to continue negotiating jurisdictional and political roadblocks. Both of these projects would directly address two of the biggest housing gaps that have been identified for underserved populations in Kitsap County. But without political and community support, they will not be able to be realized. This fact brings to point the need for:

- Developing strategies to effectively engage and educate the community about homelessness and housing.

### **Best Practices and Innovative Ideas**

Based on findings of housing gaps in Kitsap County, housing programs that address those gaps are discussed, including nationally recognized evidence based best practices, effective local programs, and other innovative ideas and promising programs.

#### **Housing Models**

**Overnight Shelters.** Overnight shelters do not offer a solution to end homelessness, and therefore are no longer considered a best practice in addressing homelessness. There are also many serious problems encountered at overnight shelters including lice and flea infestations, contagious and infectious diseases, and violence. Regardless, most communities see a need to offer overnight shelter as a place where homeless people to go.

*Best Practice - Written shelter policies or standards. Philadelphia Overnight Shelter System:* Staff to Consumer Ratios: Philadelphia sets a ratio of one direct service person per 20 individual consumers during day hours, and a ratio of one staff person per 40 individual consumers overnight.



**Staff Training:** Emergency housing personnel in Philadelphia are expected to receive a minimum of 10 to 20 hours of training, budget permitting. Some of the mandatory topics include domestic violence, transgender and sexual minorities, and CPR.

**Intake and Assessment Guidelines for Sexual Minorities:** In this appendix, staff and service providers are instructed to accept and support a client's self-identification of his/her gender irrespective of physical appearance, surgical status, or documentation of identity.

**Supportive Housing.** Supportive Housing provides case management services in conjunction with subsidized housing. There are essentially two forms of supportive housing; Temporary supportive housing and Permanent supportive housing.

***Temporary Supportive Housing.*** *Rapid Re-Housing* is the current best practice model for temporary supportive housing. Rapid Re-Housing focuses on moving individuals and families that are homeless into appropriate housing as quickly as possible, usually with short-term, shallow subsidies and case management to support regaining self-sufficiency. It is considered appropriate for households with low barriers to self-sufficiency.

A case study published in April 2013 by the Institute for Children, Poverty, and Homelessness (ICPH) titled "Rapidly Re-Housing Homeless Families" reports negative outcomes for Rapid Rehousing in New York City (See Appendix C). The study showed that when rapid rehousing programs are applied as a blanket solution for all homeless households, the rate of recidivism back into homeless increases dramatically when the short-term, shallow subsidies end.

***Permanent Supportive Housing.*** According to the National Alliance to End Homelessness, people experiencing long-term homelessness often incur significant public costs through emergency room visits, run-ins with law enforcement, incarceration, etc. Chronically homeless individuals living in permanent supportive housing are far less likely to draw on these expensive public services. They are also less likely to end up in homeless shelters which are an

ineffective intervention for chronic homelessness. Permanent supportive housing has been shown to be not only successful at ending chronic homelessness, but a number of cost and case studies have demonstrated that permanent supportive housing largely or totally offsets these costs while ending homelessness (Collins 2012, Hickert 2011, Martinez 2006, McGraw 2010).

*Project-Based Housing First.* Project Based Housing First is a model that provides immediate, low-barrier, no abstinence required, permanent supportive housing to chronically homeless individuals within a single housing project. Specific to this model, individuals can elect to receive on-site case management and other supportive services (see Appendix B).

The argument against this model has been that by not requiring program participation and case management, the model enables continued, harmful drinking and other harmful behaviors. Despite this widespread belief, there is little empirical data to support it (American Journal of Public Health, March, 2012).

One study of the 1811 Eastlake program in Seattle, WA, which provides permanent (no abstinence required) housing to homeless people with the most extensive health problems, found that the program saved nearly \$30,000 per tenant per year in publicly-funded services, all while achieving better housing and health outcomes for the tenants (See Appendix C – Health Care and Public Service Use and Costs Before and After Provision of Housing for Chronically Homeless Persons with Severe Alcohol Problems).

Another study performed by homelessness scholar Dennis Culhane showed that in New York City, each unit of permanent supportive housing saved \$16,282 per year in public costs for shelter, health care, mental health, and criminal justice. The savings alone offset nearly all of the \$17,277 costs of supportive housing.

**Single Room Occupancy Units (SRO's).** SRO's have a long history of providing accommodation to single adults and families unable to afford full apartments. Historically,

SROs represented a crucial component of an overall homeless housing strategy in American cities.

**Systems Homelessness Prevention – Coordinated Discharge Programs.** Targeted policies can connect people who are being discharged from jails, prisons, hospitals, with housing that meets their needs and prevents them from becoming homeless. Thorough discharge plans include homeless prevention strategies that focus on people who are leaving hospitals, psychiatric facilities, substance abuse treatment programs, prisons, and jails. Best practices include establishing rules regarding discharge planning to ensure a well-executed discharge plan that links institutions that discharge an individual with the community.

***City of Tacoma/DOC ERD program agreement.*** The Department of Corrections entered into an agreement with the City of Tacoma in July of 2013. This agreement enables the city to participate with the ERD program, connecting released offenders with the city's housing agency and coordinating housing (see Appendix B).

***Whatcom County Re-entry Coalition (WCREC).*** Provides a network of assistance for former offenders, homeless and others at risk in Bellingham to ensure successful re-entry into the community. Using a Housing First model that emphasizes getting people into housing first and then building the support systems to move them to permanent housing, WCREC seeks to improve public safety, reduce recidivism and criminal justice costs, reduce emergency and other medical costs, improve community education about successful re-entry into mainstream society, and to promote community prevention and early intervention activities (<http://www.computertutor.mx/WhatcomREC.org/pages/about.htm>).

**Outreach.** An important role in ending homelessness is outreach to people experiencing homelessness. Outreach can connect the homeless population to housing and services. When considering outreach efforts, it's important to understand that many people living on the streets

exhibit mental illness, substance addiction, and other negative behavior patterns. As such, it's important to consider low-demand housing that does not mandate sobriety or treatment.

(National Alliance to End Homelessness, 10 Essentials, 2013)

**Community Education and Advocacy.** It is important to develop strategies to overcome myths, misconceptions, ignorance, and inertia about the pressing social problem of housing for underserved homeless populations. There is also need to lobby governments to fund housing for these populations.

**Innovative Ideas. *Opportunity Village Eugene (OVE):*** This non-profit envisions a village of simple micro-houses. The Eugene City Council has recently approved a pilot project for such a village, which will allow residents to obtain the benefits of living in community rather than being isolated to small groups across the city.

The project will include ***Conestoga Huts***, 6 by 10 foot shelters that can be built for \$250 to \$500, and provides a highly insulated and lockable space. OVE hopes that placing huts on these sites will provide more un-housed citizens a safe and secure place to be in Eugene (See Appendix C, Opportunity Village Eugene, the Conestoga Hut).

### **Limitations of the Present Study and Topics for Further Consideration**

This study looked at data from HSC's HMIS records only, and did not consider other sources for statistics on the underserved homeless populations in Kitsap County. Therefore, the population characteristics and demographics are restricted to those who sought housing services from HSC in Kitsap County. It may be useful to compare and contrast the HSC data with the overall Kitsap county HMIS data in the statewide system to see how many, if any, households were not captured by HSC in the HMIS. It may also be useful to compare HMIS data with other homeless data sources such as DSHS records and Point-in-time counts in order to reconcile any discrepancies in measurements.

A major limitation of the data in this report is that we know that there are people who are homeless and not seeking housing services, but we do not know the size of this population nor the reasons why they are not seeking housing services. Some possible reasons they are not seeking housing services are that they do not want to have contact with organized institutions, or they simply do not want to be housed. There are also those who would like to find housing, but because of past experience of being told that they cannot be served, or inability or unwillingness to comply with housing and case management requirements, they have stopped seeking housing solutions through housing providers.

Another limitation of this study is that I was unable to access data for the number of youth who age out of the foster system in Kitsap County each year. It would be useful to know these numbers in order to have an understanding of the size of this population in Kitsap County.

It might be desirable to bracket ages 18, 19, and 20, generally considered the age group measured for those aging out of the foster care system, in the HSC HMIS database. It might also be helpful to bracket ages 55-61, and ages 62 and older in the HSC HMIS database in order to easily assess the number of households who might qualify for senior housing programs.

.This report does not assess the effectiveness or efficiency of any existing homeless housing programs, nor consider funding sources or financial feasibility of any of the potential housing and program solutions that have been identified. Any recommendations for specific action should include a comprehensive feasibility analysis.

This report does not include an analysis and discussion of support services such as education and vocational training, personal life skills development, transportation, child care, or substance abuse and mental health treatment. It might be considered to undertake a comprehensive study of all supportive and wrap around services available in Kitsap County and to identify specific gaps in those services.

It might be useful to develop a comprehensive “Dictionary of Terms” for the Continuum of Care Coalition and others in Kitsap County in order to operate with the same understanding of a term when it is used and further understanding and communication. A uniform set of definitions will assist communication and reduce confusion and misunderstanding.

## **Conclusion**

Underserved homeless populations include those being released from institutions, chronically homeless individuals, and elderly homeless. These populations are considered “underserved” because they have complex and difficult to serve barriers to housing that are legal and regulatory, economic and personal life skills, and social and political in nature. Though each sub-population has unique barriers to housing, the different sub-populations also share many of the same barriers, and many individuals are members of two or more sub-populations. Though each population may require individualized case management services, it is not necessary to develop different housing solutions for each group.

Of these populations, those who are most difficult to serve in Kitsap County are chronically homeless individuals, and those being discharged from jails, prisons, and hospitals. Through interviews with subject matter experts and review of HMIS data it was further shown that there are other homeless household compositions that are being underserved for emergency housing in Kitsap County. This includes couples who wish to remain together, single mothers with teenage sons, and anyone with a pet.

There is a robust and closely connected network housing providers in Kitsap County, however there are gaps in housing facilities and programs. Most immediate is that there is no “unconditional” overnight shelter that provides shelter for anyone who needs it. Nor is there any permanent supportive housing for chronically homeless individuals that offers, but does not require abstinence or participation in available wrap around case management services. Finally,

there is simply not enough subsidized housing for low income elderly households, nor enough money to fund demand for rental assistance and down payment programs.

There are also program gaps in Kitsap County. Most significantly, there is no discharge planning or inter-agency/jurisdiction coordination for individuals facing homelessness upon leaving jail, prison, hospitals, or other institutions.

There have been missed opportunities in Kitsap County in recent months. The Kitsap Rescue Mission made an effort to establish an Unconditional Overnight Shelter in Bremerton, and the West Sound Treatment Center was working toward opening Calvinwood in Port Orchard, a Housing First model of permanent supportive housing for chronically homeless men. These projects would have provided homeless shelter and housing that would address two significant housing gaps for underserved homeless populations in Kitsap County. Both of these efforts were stopped due to community and/or political opposition.

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**Subject Matter Expert Interviews**

<b>Name &amp; Title</b>	<b>Organization/Agency</b>
Janice Foucher, Business Director	Agape Unlimited
Kurt Wiest, Executive Director	Bremerton Housing Authority
Sara Van Cleve, Housing Director	Bremerton Housing Authority
Chris Brunnell, Kitsap Homeless Svcs. Coord.	Catholic Community Svcs/Catholic Housing Svcs.
David Frederick, Executive Director	Coffee Oasis/Oasis Hope Home
Jessica Reed, Program Mgr.	Fresh Start Transitioning House
Julie Graves, Asset Management Director	Housing Kitsap
Sally Santana, Activist	Inter-Faith Network, CoCC Outside Homeless Chair
Linda Kerkes, ADATSA Case Mgr.	Kitsap Recovery Center – Triage Beds for Homeless
Monica Bernhard, HSC Manager	KCR, Housing Solutions Center
Geoff Olsen, HMIS Coordinator	KCR, Housing Solutions Center
Darlene Cook, Housing Director	KCR, Homeless Family Services
Terry Schroeder, Coordinator	KCR, Kitsap Continuum of Care Coalition
Manny Cruz, Housing Manager	Kitsap Mental Health Services
Rochelle Doan, Dvlpmt & Community Relations	Kitsap Mental Health Services
Kirsten Jewell, Housing Grant Program Mgr.	Kitsap Regional Coordinating Council
Walt LeCouteur, Executive Director	Kitsap Rescue Mission
Gary Simpson, Patrol Chief	Kitsap County Sherriff's Office
Ned Newlin, Chief, Corrections Division	Kitsap County Sherriff's Office
Sheryl Piercy, Social Services Director	Salvation Army, Bremerton
Mary Brown, Board Member	Simon's Place – St. Olaf/St. Peter Parish
Jeff Bailey, ERD Housing Voucher Program	Washington State Department of Corrections
Mac Pevey, Field Administrator	Washington State Department of Corrections
Theo Lewis, Community Corrections Supervisor	Washington State Department of Corrections
Robin Lund, Executive Director	West Sound Treatment Center

## **Appendix A - HMIS Description**

### HMIS System Description, Strengths, and Limitations (by: Kirsten Jewell, KRCC)

The Homeless Management Information System (HMIS) is a federally and state mandated database of demographic information about people seeking homeless housing and services through social service organizations that participate in HMIS. All programs that receive federal or state homeless grant funding are required to enter client data into HMIS. Information about each client enrolled in a homeless housing or services program is able to be shared among the HMIS-participating agencies in Kitsap. Records are linked for all individuals in a household.

In Kitsap, HMIS is used as a key tool in the Coordinated Entry Program, called the Housing Solutions Center (HSC). HSC provides a central service point for all individuals/households seeking housing or services. HSC partners with all of the homeless providers that maintain emergency shelter, transitional housing, and rapid re-housing programs and receive federal or state homeless grant funding. HSC performs client intake, data collection, basic assessment, and makes referrals for immediate housing to partner agencies appropriate to the clients' needs and barriers to self-sufficiency.

Referral agencies then add the client to their program in HMIS and continue to collect information about the client's participation in the program until the client leaves the program. Outcomes for clients are tracked and reported.

Limitations of HMIS data:

- HMIS does not include information about homeless individuals or households who are not seeking housing or services. Therefore, it has limited utility to determine un-met need or gaps in service.
- Some private and faith-based housing providers are not HMIS participating agencies, so homeless clients served by these organizations may not be included in HMIS data.
- Department of Corrections, Kitsap Jails, DSHS/Foster Care, State Mental Health institutions, and state and federal Veterans Services do not participate in HMIS. Only if homeless clients exiting these state systems are referred to an organization that participates in HMIS, the client data is entered.
- There are some clients whom HSC enters into HMIS, but is unable to refer to a partner agency because there are no programs that fit that client's specific needs and/or barriers. Client data about these "unable to serve" individuals is collected and analyzed. This is a good source of information about un-met needs and service gaps.

HMIS is one valuable tool which is used to collect and report on demographic and program data about homeless individuals and households seeking assistance, but it has limitations. There are also other data collection tools, such as the annual Homeless Point-In-Time Count and the Department of Corrections Report on Early Release of Felons into Homelessness, each providing a different perspective on homelessness in Kitsap County.

HSC Definitions for some common terms in HMIS monthly metrics reports  
(by Geoff Olsen, HSC)

- **Enrollment** – Represents a household’s first HSC visit in the current year. Includes households visiting for the first time ever, as well as households seen in 2012 but are returning for their first 2013 visit. Enrollments are therefore unique (non-duplicated) households within the current year.
- **Households Served** – The number of households included in any given report. “Served” doesn’t imply any particular transaction or outcome. It is simply a total count.
- **Unable to Serve** – Households whose specific housing need could not be met by HSC at the time of visit. Does not exclude offering guidance or referrals to other resources. This report counts unique transactions, so household duplication may occur (e.g. multiple visits by a single household).

Report parameters:

- **Enrollment Profile** – Non-duplicated count of households new in the current year. All intakes are captured here, regardless of services provided or outcome of visit.
  - **Literally Homeless Profile** – Subset of Enrollment Profile. Isolates households who, at time of enrollment, meet HUD’s definition of literally homeless; unsheltered, in emergency shelter or institution, etc. Does not factor in number of instances of homelessness or length of time homeless, therefore doesn’t imply chronic homelessness.
- **Unable to Serve** – Non-duplicated count of visits where the client’s housing need couldn’t be met. Duplication can occur on the household level, in the case of multiple visits by a single household.

## **Appendix B - Resources and Supplemental Readings**

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# Corrections Data Sheet

## Section 4 - Kitsap and Pierce county

### Section 4 at a Glance

Regional Administrator:	Dianne Ashlock <a href="mailto:dianne.ashlock@doc.wa.gov">dianne.ashlock@doc.wa.gov</a>
Field Administrator:	Mac Pevey <a href="mailto:mac.pevey@doc.wa.gov">mac.pevey@doc.wa.gov</a>
Counties in Section 4:	Kitsap and Pierce county
Number of Field Offices:	13
Number of Work Releases:	4
Number of Prisons in Section:	1
Community Justice Center:	Tacoma Community Justice Center 1016 South 28 <sup>th</sup> Street Tacoma, WA 98409
Local Partnerships:	Tacoma, Lakewood and University Place Police Departments and Pierce County Sheriff's Office
Federal Partnerships in Section 4:	Taskforces with Drug Enforcement Administration (DEA), Bureau of Alcohol, Tobacco and Firearms (ATF), and United States Marshal; Homeland Security and Joint Base Lewis-McChord (JBLM)

### Cognitive Behavioral Interventions and Offender Change Programs:

- Thinking for a Change
- Moral Reconciliation Therapy
- EPICS (Effective Practices in Community Supervision)
- Chemical Dependency
- Stress and Anger Management
- Partners in Parenting
- Nurturing Fathers

### Transitional Services:

- Family Offender Sentencing Alternative
- Housing Voucher
- Offender Reentry Community Support Program (ORCS)

### Community Partnerships:

- Department of Veteran Affairs
- Pierce County Veterans Bureau
- Western State Hospital
- Optum Health
- Kitsap Mental Health
- Bates Technical College
- Pierce County Law & Justice Council
- Community Work Crews

### Mission Statement

The mission of DOC is to improve public safety.

### Vision Statement

Working together for safe communities.

### Bernard Warner

Secretary  
Department of Corrections

### Anmarie Aylward

Assistant Secretary, Community Corrections Division

### Dan Pacholke

Assistant Secretary, Prisons Division

### For more information

#### Sandy Mullins

Office of Executive Policy Director  
[sandy.mullins@doc.wa.gov](mailto:sandy.mullins@doc.wa.gov)

#### Adam Aaseby

Executive Strategy, Analysis and Accountability Director  
[adam.aaseby@doc.wa.gov](mailto:adam.aaseby@doc.wa.gov)

#### Clela Steelhammer

Legislative and Policy Coordination Manager  
[clela.steelhammer@doc.wa.gov](mailto:clela.steelhammer@doc.wa.gov)

For more information about the Department visit us at:

[www.doc.wa.gov](http://www.doc.wa.gov) 

## Statewide Community Supervision Demographics

**Number of Offenders on Active Supervision** ..... 15,653

**Risk Level Classification (Offender Risk to Reoffend)**

- High Violent ..... 36.7% ..... 5,751
- High Non-Violent..... 29.8% ..... 4,660
- Moderate Risk..... 18.1% ..... 2,829
- Low Risk ..... 14.2% ..... 2,228
- Unclassified ..... 1.2% ..... 185

**Offense Types**

- Murder 1 and 2 ..... 1.1%
- Manslaughter ..... 0.6%
- Sex Crimes ..... 19.3%
- Robbery ..... 4.1%
- Assault ..... 22.2%
- Property Crimes..... 16.5%
- Drug Crimes ..... 27.9%
- Other/Unknown ..... 8.3%

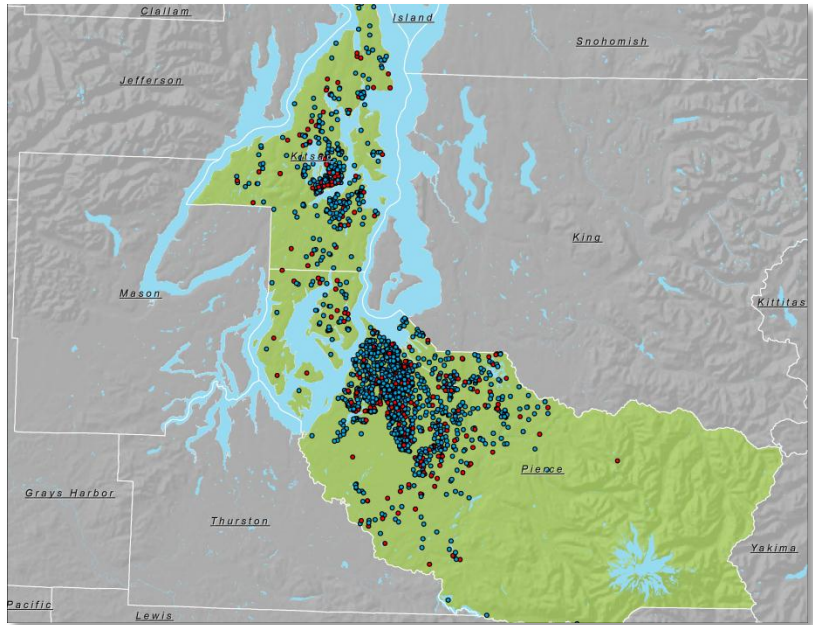
**Offender location prior to supervision**

- Offenders who served time in prison prior to supervision ..... 42.2%
- Offenders who came directly from jail or the courts ..... 57.8%

All figures contained in this report reflect data as of June 30, 2012 unless specified.



### Active offenders supervised in Section 4



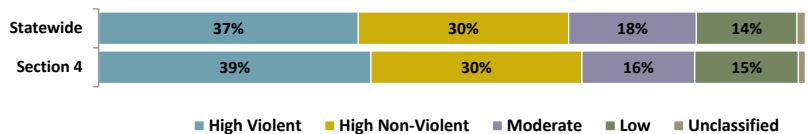
● Offenders on active supervision for sex crimes

### Offenders on Active Supervision by Risk to Reoffend and Offense Type

	HV	HNV	MOD	LOW	UNC	Total
<b>Section 4</b>	<b>1,129</b>	<b>837</b>	<b>457</b>	<b>424</b>	<b>29</b>	<b>2,876</b>
Murder 1 and 2	5	2	6	17		30
Manslaughter	2	1	2	6	1	12
Sex Crimes	130	78	159	237	1	605
Robbery	65	41	9			115
Assault	439	79	87	63		668
Property	85	186	94	42	1	408
Drug	314	406	62	27	4	813
Other Felonies	21	14	12	12		59
Misdemeanor	55	24	25	12	1	117
Not available	13	6	1	8	21	49

HV = High Violent; HNV = High Non-Violent; MOD = Moderate; LOW = Low Risk; UNC = Unclassified

### Statewide comparison of offender risk to reoffend



## Offenders sentenced under sentencing alternatives

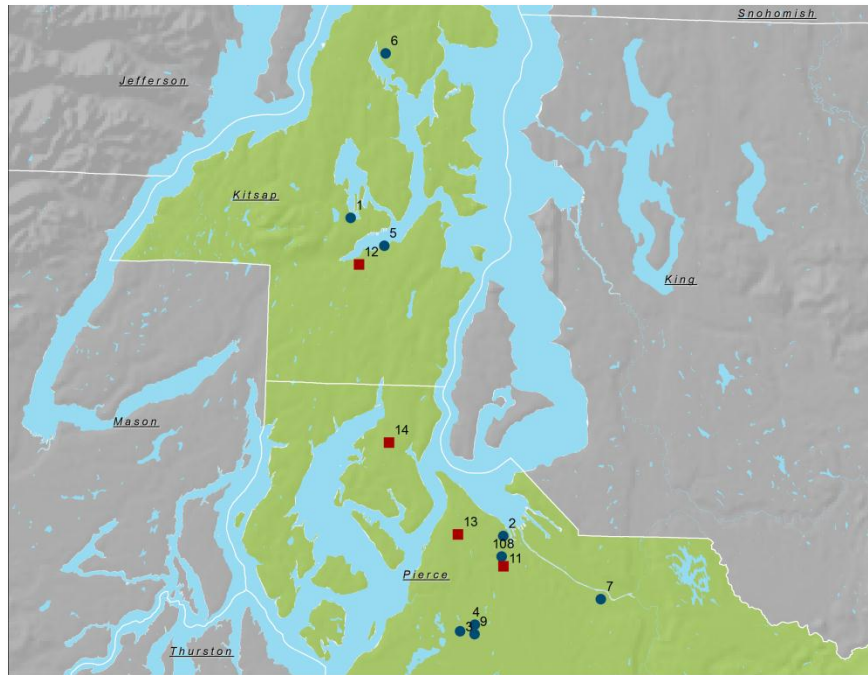
### Statewide

■ Drug Offender Sentencing Alternative	1,833
■ Special Sex Offender Sentencing Alternative	712
■ First Time Offender Waiver	1,232
■ Family Offender Sentencing Alternative	38
■ From-Out-Of-State	1,906

### Section 4

■ Drug Offender Sentencing Alternative	237
■ Special Sex Offender Sentencing Alternative	159
■ First Time Offender Waiver	189
■ Family Offender Sentencing Alternative	5
■ From-Out-Of-State	255

### Facility locations in Section 4



- Offices, Units and Community Justice Center
- Work Release Facilities
- Prison Facility

## Facilities in Section 4

### Field Offices

1. Bremerton Office
2. Pierce County Court Unit, Pierce County Special Needs Unit, Tacoma Unit 2
3. Lakewood Office
4. Parkland South Office
5. Port Orchard Office
6. Poulsbo Office
7. Puyallup Office
8. Sex Offender Unit-North
9. Sex Offender Unit- South
10. Tacoma Resource and Opportunity Center (T-ROC), Tacoma Unit 1

### Community Justice Center

10. Tacoma Community Justice Center

### Work Release Facilities

11. Lincoln Park Work Release, Rap House Work Release
12. Peninsula Work Release
13. Progress House Work Release

### Prison Facility

14. Washington Corrections Center for Women

## Statewide Prison Demographics

<b>Number of Prison Facilities</b> .....	12
<b>Number of Work Release Facilities</b> .....	16
<b>Total Offenders in Confinement</b> .....	17,697
Offenders in prison.....	16,395
Offenders in work release .....	685
Offenders in out-of-state rented beds .....	0
Offenders in in-state rented beds .....	617
<b>Average Daily Cost of Incarceration</b> (FY2011) .....	\$91.57
<b>Average Age</b> .....	37.8
<b>Gender</b>	
Male .....	92.5%
Female.....	7.5%
<b>Citizenship</b>	
United States.....	94.8%
Mexico.....	2.7%
Other .....	2.5%
<b>Offense Types</b>	
Murder 1 and 2.....	13.3%
Manslaughter .....	1.9%
Sex Crimes .....	21.2%
Robbery .....	10.7%
Assault .....	23.4%
Property Crimes.....	17.5%
Drug Crimes.....	8.7%
Other/Unknown .....	3.3%
<b>Length of Sentence</b>	
Less than two years .....	15.5%
Two to five years .....	23.9%
Five to ten years .....	20.4%
Over ten years .....	24.8%
Life with possible of Parole or Release .....	11.8%
Life without release .....	3.6%
<b>Average length of stay for offenders released in the past year</b> .....	24.2 months
<b>Commitment Types</b>	
New admission .....	49.8%
Readmission .....	44.3%
Other (from out-of-state or violators) .....	5.9%

All figures contained in this report reflect data as of June 30, 2012 unless specified.

## Assessed needs of the offenders on community supervision

Statewide	High	Moderate	Low
■ Aggression	18%	49%	33%
■ Alcohol and Drug Use	18%	47%	35%
■ Attitudes and Behavior	4%	30%	66%
■ Community Employment	13%	51%	36%
■ Coping Skills	12%	17%	70%
■ Education	9%	29%	70%
■ Family	0%	3%	97%
■ Friends	9%	32%	58%
■ Mental Health	12%	7%	81%
■ Residential (Housing)	29%	6%	65%

### Section 4

■ Aggression	17%	52%	31%
■ Alcohol and Drug Use	16%	47%	37%
■ Attitudes and Behavior	3%	31%	66%
■ Community Employment	12%	51%	37%
■ Coping Skills	11%	15%	74%
■ Education	1%	29%	71%
■ Family	0%	3%	97%
■ Friends	7%	35%	58%
■ Mental Health	15%	6%	79%
■ Residential (Housing)	30%	5%	65%

## Prison admissions and releases

Statewide	FY 2010	FY 2011	FY 2012
■ Admissions	7,757	7,671	7,669
■ Releases	7,909	7,701	7,691

### Section 4

■ Admissions	1,547	1,548	1,541
■ Releases	1,619	1,621	1,573

## Prison Releases

■ Offenders with community supervision after release	87%
■ Offenders released without community supervision	13%



## Frequently Asked Questions:

### *Who can use this program?*

Offenders may be eligible for benefits from this program on their ERD if they meet all of the following:

- Are at or beyond their ERD.
- Lack sufficient funds or resources to secure an approved release address.
- Are at risk of remaining incarcerated past the ERD without assistance.
- Agree to participate in additional transitional support programming and sign DOC 02-336 ERD Housing Voucher Program Criteria Worksheet.
- Are scheduled to be under community supervision during the period of assistance.
- Are in compliance with all facility rules and their Custody Facility Plan while incarcerated and with all conditions of supervision once released to the community.

### *Why can't offenders be eligible to receive housing voucher funding before their ERD?*

- If the department provided funding before the ERD there would be no reason for the offender to contribute to his or her own transition.

### *Are any offenders NOT eligible for the ERD Housing Voucher Program funds?*

Ineligible offenders include those who:

- Have resources and would be releasing on their ERD anyway.
- Will not be under supervision by DOC after release.
- Will release on their ERD regardless of whether any term of supervision is pending (tolling, warrants, etc).
- Are in violation of their Custody Facility Plan or any Facility Rules.
- Refuse to sign the Housing Voucher Participant Agreement.
- Will release at or near their maximum prison release date. DOC cannot provide funding beyond the maximum prison release date.

## CONTACT A REGIONAL HOUSING SPECIALIST FOR ASSISTANCE

*Yakima CJC (509) 454-3620*

Counties served: Adams, Benton, Chelan, Columbia, Douglas, Franklin, Grant, Kittitas, Klickitat, Walla Walla, and Yakima

*Spokane CJC (509) 363-2791*

Counties served: Asotin, Ferry, Garfield, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens, and Whitman

*Vancouver CJC (360) 571-4343*

Counties served: Clark, Cowlitz, Grays Harbor, Lewis, Pacific, Skamania, and Wahkiakum

*Tacoma CJC (253) 680-2741*

Counties served: Kitsap, Mason, Pierce, and Thurston

*Seattle CJC (206) 516-7622*

Counties served: King

*Everett CJC (425) 513-5239*

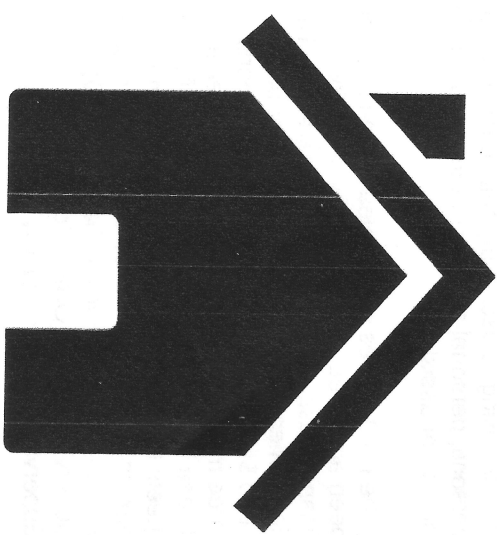
Counties served: Snohomish, Clallam, Jefferson, Skagit, Whatcom, Island, and San Juan

Classification Counselors and facility Community Corrections Officers are required to contact Regional Housing Specialists on behalf of incarcerated offenders.



## ERD Housing Voucher Program

P. O. Box 41127  
Tumwater, WA 98501



## Earned Release Date Housing Voucher Program

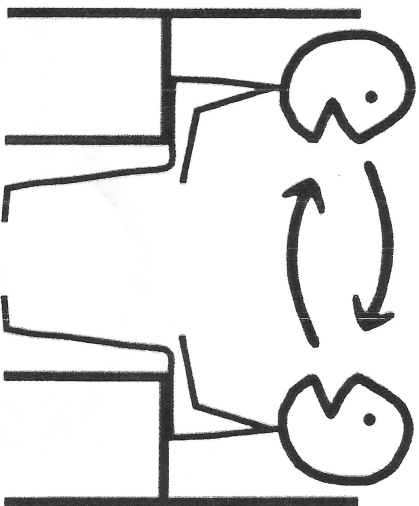


## Offender Transition

The department's transition policy requires Classification Counselors or Facility Community Corrections Officers (CCO) to work with offenders during the 12-month period leading up to the Earned Release Date (ERD) to plan for the eventual return to the community.

Staff and offenders are expected to work together using the offender's personal resources to develop approvable release plans. Personal resources are typically family or friends willing to assist, organizations, support persons, personal savings or other sources of income or assistance.

If the ERD arrives and a release plan has not been approved, offenders may apply for financial assistance from the department. The department may provide a maximum benefit of up to \$500 per month for a maximum period of three months after the initial prison release. These benefits will be provided if the offender meets the program's defined criteria and remains in compliance before and after release with the Custody Facility Plan (CFP), Offender Supervision Plan (OSP), Conditions of Supervision and any facility rules.



## What to Expect from DOC

### *12 months prior to the ERD*

- Or upon arrival at Reception, Classification Counselors or facility CCOs will meet with all offenders to initiate release planning and to obtain information for any potential release address.
- If offenders require assistance locating an approvable release address the Classification Counselor or facility CCO will contact the Regional Housing Specialist responsible for the offender's required release area to obtain appropriate and current housing referrals.

- The Classification Counselor or facility CCO will contact prospective housing providers by telephone or e-mail as appropriate.

- The Classification Counselor or facility CCO will assist offenders with any necessary application process by facilitating telephone interviews with prospective sponsoring organizations or providers or mailing application material for offenders.

### *6 months prior to the ERD*

- The Classification Counselor or facility CCO will begin submitting appropriate release addresses, funded by the offender's personal resources, for investigation by the department.
- The Classification Counselor or facility CCO will continue to work with offenders until a plan is approved.
- Release plans submitted for investigation which require payment and do not identify an available funding source will be denied.

## ERD Housing Voucher Program

Offenders become eligible to apply for benefits from this program upon reaching their Earned Release Date. The program's eligibility criteria are defined in a document called a Criteria Worksheet which is intended as a screening document and contract to be signed between the offender and department, usually the assigned Classification Counselor or facility CCO.

These expectations are intended to be followed before and after release from prison. Programming includes all facility rules and all components of the offender's Custody Facility Plan (CFP). Upon release offenders are expected to comply with all conditions of supervision and any special requirements specified in the agreement.

The department has made an accommodation for offenders who are disabled, ill or experiencing a hardship to allow benefit access 30 days prior to the ERD. If an offender is ill, disabled or experiencing a hardship his or her Classification Counselor or facility CCO may request an exception and apply for benefits 30 days prior to the ERD. The offender and staff member must document the reason for requesting early benefits in the application and confirm that the exception has been granted before submitting an Offender Release Plan.

Offenders who are not disabled, ill or experiencing a hardship should expect to be held past their ERD if they are planning on using this program as their sole mode of release. If an offender has some resources and would like to request partial benefits as assistance he or she should discuss this with their assigned counselors or facility CCOs. The counselor or facility CCO will discuss potential arrangements for partial assistance with their local Housing Specialist.